

Future of Public Oral Health in Virginia - Taskforce Recommendations

January 2021

Good oral health is vital to achieving good overall health. The public oral health care* field has long been committed to innovating and revolutionizing the way oral health services are delivered to promote better individual and community-level health outcomes. The COVID-19 pandemic has magnified the challenges of a fragmented and siloed health system and the ramifications of racism and inequity on health outcomes. This amplifies the immediacy of the need to make changes to ensure all individuals have equitable access to affordable and innovative care. Virginia Health Catalyst, with support from the Virginia Department of Health's Maternal and Child Health Program, convened the Future of Public Oral Health Taskforce, a group of representatives from oral health stakeholder groups across the Commonwealth, to build a roadmap that addresses these needs and opportunities. These recommendations were developed to meet this moment and improve public oral health systems and care in the wake of COVID-19 and the inequities it amplified.

The Future of Public Oral Health Taskforce, initiated in August 2020, developed these recommendations through group consensus to support, amplify, and maximize technology, integration, workforce, and data opportunities to ensure all Virginians have the opportunity to access healthcare that includes oral health. The strategies are grounded in a continuous focus on the factors that influence and affect the current climate: equitable access to health care, workforce support, provider and clinic resilience, patient literacy, state and federal policies, funding, and partnerships. The representatives of this taskforce are committed to addressing racial inequities and creating a future where all Virginians have equitable access to comprehensive health care that includes oral health.

This pandemic has had a profound effect on oral health providers, patients, and the oral health workforce. It has also shed new light on the long-standing systemic health and social inequities that have put many people from racial and ethnic minority groups at increased risk of getting sick and dying from COVID-19. Sometimes, it takes a crisis to lean into change. Partners across Virginia are embracing this opportunity to make overdue changes in the oral health sector and to develop innovative solutions to address these challenges that will have a lasting positive impact on how oral health care is delivered in the Commonwealth of Virginia moving forward.

**public oral health care: for this document, this is defined as oral health care offered in a variety of community settings that serve Medicaid recipients and low wealth individuals*



Virginia
Health Catalyst
The Intersection of Overall
Health and Oral Health

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Future of Public Oral Health in Virginia

Executive Summary

In the wake of the COVID-19 pandemic, Virginia Health Catalyst convened the Future of Public Oral Health Taskforce, a group of representatives from oral health stakeholder groups across the Commonwealth, to build a roadmap that addresses a fragmented and siloed health system and the ramifications of racism and inequity on health outcomes.

Taskforce Recommendations

The following recommendations are intended to meet this moment and improve public oral health systems- to support, amplify and maximize technology, integration, workforce, and data to ensure all Virginians have the opportunity to access healthcare that includes oral health.

I. Strengthen the Virginia Oral Health Workforce

- Support the workforce to promote resilience and reduce burnout
- Maximize the existing workforce
- Support pipeline development

II. Value the Importance of Good Oral Health to Reach Total Health

- Increase utilization of dental and chronic disease prevention and management strategies that are patient-centered, holistic, and equity-based
- Increase integration of oral health services, education, and referral across the health care system
- Enable providers and support workers to address barriers to health and wellness related to social determinants of health and environmental issues

III. Employ Data to Improve Outcomes and Patient Experience

- Increase use of consistent assessment tools and data sharing across sectors
- Incorporate data equity across assessment, eligibility, and survey tools

IV. Adopt Technologies to Meet People, Patients, and Providers Where They Are

- Increase utilization of teledentistry for emergent care, consultations, and care coordination in clinical and community settings
- Utilize technology to streamline eligibility, patient-onboarding, and referrals

The strategies are grounded in a continuous focus on the factors that influence and affect the current climate: equitable access to health care, workforce support, provider and clinic resilience, patient literacy, state and federal policies, funding, and partnerships. The representatives of this taskforce are committed to addressing racial inequities and creating a future where all Virginians have equitable access to comprehensive health care that includes oral health.

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Taskforce Recommendations

The following goals and strategies are intended to support, amplify and/or maximize technology, integration, workforce, and data to ensure all Virginians have the opportunity to access healthcare that includes oral health.

All recommendations listed in this document were developed considering the following guiding tenets:



Strengthen the Virginia Oral Health Workforce	
Objective	Strategies
Support the workforce to promote resilience and reduce burnout	Current and future providers, social support workers, and their team members have the tools and support to practice mindfulness-based techniques.
	Health systems actively support employee resilience through workplace values and policies including paid access to and normalization of mental health and support services, flexible schedules, and proactive and emergent supports for a wide variety of coping mechanisms.
	Current and future providers, social support workers, and their team members understand the effects of trauma and adverse childhood experiences (ACES) may have on themselves and those they serve and are equipped with tools to support their own and their patients' needs.
	Providers participate in organized peer groups that provide bi-directional support during and outside of times of crisis.
Objective	Strategies
Maximize the existing workforce	DAll's have a developed and supportive pipeline of education-to-certification-to-employment that increases the number of DAll's in Virginia to support dentists and expand their patient capacity.
	Remote supervision dental hygienists can provide care in remote settings to the top of their license and are supported by state regulations.
	Community health workers and Community Dental Health Coordinators are supported and integrated into community and clinical settings; and offer closed-loop referrals for clinical care, social support, and oral health education.
Objective	Strategies
Support pipeline development	All areas of Virginia have an adequate oral health workforce that meets the needs of and reflects the communities they serve.

Value the Importance of Good Oral Health to Reach Total Health

Objective	Strategies
Increase utilization of dental and chronic disease prevention and management strategies that are patient-centered, holistic, and equity-based	<p>Oral health providers use minimally invasive care (preventive and restorative) to prevent disease and slow early disease with minimal aerosol production.</p> <ul style="list-style-type: none"> Oral health providers use fluoride varnish, dental sealants, and Silver Diamine Fluoride as effective preventive and restorative measures, decreasing future restorative needs. Oral health providers have access to education and digital training that promote utilization of caries risk assessments to provide a foundation for managing care that coaches patients to better oral health.
Objective	Strategies
Increase integration of oral health services, education, and referral across the health care system	<p>Community-based care is accessible.</p> <ul style="list-style-type: none"> State policies enable remote supervision hygienists to provide education, care, and appropriate referrals. Community health workers, home visitors, and other social support workers have the training and resources necessary to ensure oral health is valued and services accessed.
	<p>Providers and social support workers provide a holistic care experience through coordinated care, integration, and closed-loop referrals.</p>
	<p>Health systems actively support oral health integration and care coordination with policies and resource allocation.</p> <ul style="list-style-type: none"> Clinic workflows enable the integration of services and interdisciplinary care. Clinics have expanded IT functions and software that supports and encourages data sharing (that includes all contributing factors to health, including race and zip code) to track and improve patient outcomes.
	<p>Contract language and reimbursement incentives reflect the importance of integration and promote integrated care among providers and bi-directional communication among payers.</p>
	<p>Education and case management are reimbursable services, and oral health extenders (such as community health workers) assist in these services.</p>
Objective	Strategies
Enable providers and support workers to address barriers to health and wellness related to social determinants of health and environmental issues	<p>Providers and social support workers (such as community health workers) understand the association of health outcomes to racism, social determinants of health, and other environmental factors; and policies and care reflect the knowledge.</p>
	<p>Providers and social support workers screen patients using standard social determinants of health screening tools and Z codes for tracking.</p>
	<p>Providers and social support workers utilize closed-loop referral systems to ensure patients and families receive the services they need that address all aspects of overall health.</p>
	<p>Providers share and use data to identify necessary workflow and system changes and to track and improve patient outcomes.</p>
	<p>Education and case management are reimbursable services.</p>

Employ Data to Improve Outcomes and Patient Experience	
Objective	Strategies
Increase use of consistent assessment tools and data sharing across sectors	Oral health providers use caries risk assessment data to track patient's oral health progress and manage their care plan.
	Community and clinical providers use standard social determinants of health screening tool and track data with Z codes*.
	Policies, contract language, and reimbursements incentivize data collection and sharing.
Objective	Strategies
Incorporate data equity across assessment, eligibility, and survey tools	<p>Health systems and community-based organizations employ streamlined and non-burdensome tools for eligibility, check-in, and follow up.</p> <ul style="list-style-type: none"> • Community members and participants provide feedback and recommendations on the development of screening and assessment tools. • Patients understand how to access and complete online forms and televisits. • Data findings are shared with the community.

**Z codes can be used in addition to a primary diagnosis code to improve claims accuracy and specificity, further explain reasons for presenting for healthcare services, and track public health issues.*

Adopt Technologies to Meet People, Patients, and Providers Where They Are	
Objective	Strategies
Increase utilization of teledentistry for emergent care, consultations, and care coordination in clinical and community settings	<p>Providers and patients understand how and have the tools and resources to utilize teledentistry services equitably.</p> <ul style="list-style-type: none"> • All staff (clinical staff and non-clinical staff) are trained to promote and discuss teledentistry and can navigate patient questions and concerns regarding policies and best practices of telehealth practices. • Teledentistry is used in community settings to reach patients with limited technology and connectivity to offer flexibility.
	Remote supervision dental hygienists can provide care in remote settings to the top of their license and are supported by state regulations.
	Teledentistry is reimbursable beyond COVID-19 emergency.
	Additional services, such as periodic and comprehensive dental exams, are reimbursable through teledentistry.
Objective	Strategies
Utilize technology to streamline eligibility, patient-onboarding, and referrals	Health systems use electronic forms to gather patient eligibility, health history, and increase/promote care-coordination to facilitate information transfer between providers and patients.
	Patients understand how to participate in information collection and telehealth visits electronically.
	Forms and assessments are streamlined to maximize efficiency for patients and staff.
	Software supports social determinant screenings and closed-loop referral system tracking.
	Broadband access is sufficient to support community needs.

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Taskforce Members

Participating partners represent the following agencies and organizations

Capital Area Health Network
CrossOver Healthcare Ministry
Delta Dental of Virginia
DentaQuest
Eastern Shore Rural Health System
Germanna Community College
Hampton Roads Community Health Center
Kids Central, Inc.
Lucy Corr Dental Clinic
Mountain Empire Community College
Neighborhood Health
New Horizons Healthcare
Richmond Memorial Health Foundation
Thomas Nelson Community College
VCU L. Douglas Wilder School of Government & Public Affairs
VCU School of Dentistry
Virginia Association of Free and Charitable Clinics
Virginia Community Healthcare Association
Virginia Dental Association
Virginia Dental Hygienists' Association
Virginia Department of Health
Virginia Department of Health
Virginia Department of Medical Assistance Services
Virginia Department of Social Services
Virginia Head Start Association
Virginia Health Care Foundation
West End Orthodontics
Williams Mullen

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