

THE HEALTHY VIRGINIA BLUEPRINT



JULY 2025



Virginia
Health Catalyst

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INTRODUCING THE BLUEPRINT

At Virginia Health Catalyst, we believe that all Virginians should have equitable access to comprehensive health care that includes oral health. Since our founding in 2010, our team has worked to transform systems and advance policy in pursuit of that mission.

Over the past fifteen years, we have made remarkable strides. Together with our partners, we've expanded access to oral health care by successfully advocating for a comprehensive adult dental benefit in Virginia's Medicaid program. We've seen exciting growth in the dental workforce, including expanded roles for dental hygienists and the introduction of Dental Assistant IIs, thanks in part to collaborations like the Future of Public Oral Health (FPOH) Taskforce.

We've also championed innovative care models, such as teledentistry and school-based health services. Our ICD-10 pilot and School-Based Oral Health programs are helping to reach more Virginians—particularly children—with the care they need, where they are. And we've elevated the conversations about drinking water access and equity through our Water Equity Taskforce (WET), our H2Outlook report, and rapid response efforts to maintain community water fluoridation.

Virginia faces a pivotal moment. This year, Virginians will elect a new Governor and House of Delegates. The Healthy Virginia Blueprint lays out policy recommendations to build on our past progress and ensure that equitable access to comprehensive health care that includes oral health is a shared, nonpartisan priority. As federal threats to access and funding continue, it's more important than ever that state policymakers safeguard what we've achieved and remain ambitious in addressing what still needs to be done.

We invite you to stay engaged with this crucial work through our Annual Summit, the FPOH and WET Taskforces, and other collaborative efforts. Together, we can ensure Virginia leads the way in building healthy communities for all.

Warmly,



A handwritten signature in black ink that reads "Victor McKenzie, Jr." in a cursive style.

Victor McKenzie, Jr.
Chief Executive Officer



A handwritten signature in black ink that reads "Ben Barber" in a cursive style.

Ben Barber
Vice President of Policy

EXECUTIVE SUMMARY

The *Healthy Virginia Blueprint* is organized around four core pillars essential to achieving equitable access to oral health care across the Commonwealth: affordability, workforce, innovation and integration, and safe, fluoridated drinking water. Each section outlines the challenge, summarizes recent progress, and offers a clear set of policy recommendations.

Each section also includes a “Partners in Action” narrative—real-world examples from community health providers, program managers, and public health leaders across Virginia. These stories illustrate how policy change impacts lives and reinforce the Blueprint’s call for continued investment and attention to oral health.

To achieve equitable access to comprehensive health care that includes oral health, all Virginians should have access to:

Comprehensive oral health care regardless of cost.

- Protect and strengthen Virginia’s Medicaid dental benefit.
- Support and expand access to oral health care safety net providers.
- Expand access to private dental insurance.

Oral health professionals regardless of where they live.

- Incentivize oral health providers to practice in underserved areas.
- Expand residency programs in underserved areas.
- Grow and strengthen dental hygiene and dental assisting training programs.

Innovative and integrated oral health care.

- Expand school-based oral health programs.
- Accelerate medical-dental integration for preventive and primary care.
- Maintain access to key oral health data resources.

Safe, fluoridated drinking water that they can trust.

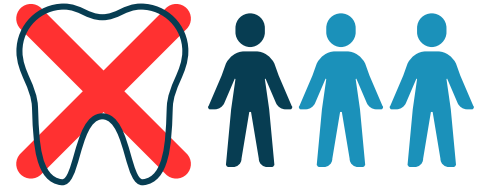
- Strengthen Virginia’s drinking water infrastructure and operations.
- Maintain access to community water fluoridation.

THE CHALLENGE

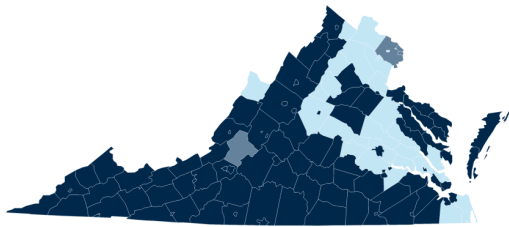
Oral health care access in Virginia is hindered by deep disparities, systemic barriers, and under-resourced infrastructure—factors that prevent many individuals, particularly those in low-income, rural, and marginalized communities, from receiving the essential care they need to live healthy, fulfilling lives.

AFFORDABILITY

One in three Virginians do not have dental coverage, placing necessary care out of reach for many.¹ Despite progress—like the expansion of Medicaid dental benefits for pregnant individuals (since 2015) and all adults (since 2021)—challenges persist. Only 27% of dentists in the state treat Medicaid or FAMIS patients.² This gap limits access for the very residents the system aims to serve.



1 OF 3 VIRGINIANS DO NOT HAVE DENTAL COVERAGE



73%
OF VIRGINIA LOCALITIES ARE DENTAL HEALTH PROFESSIONAL SHORTAGE AREA (HPSA)

WORKFORCE

Geography deepens inequity. Nearly three-quarters of Virginia localities are designated Dental Health Professional Shortage Areas (HPSAs).³ Just 7% of Virginia dentists practice in rural communities, leaving vast regions underserved.⁴ A shrinking workforce, with one-third of dentists over the age of 55 and an acute shortage of dental hygienists, threatens to worsen delays in care.⁵

INNOVATION & INTEGRATION

Barriers aren't limited to dental clinics. Medical settings can play a key role in preventive oral health, but only 5% of Medicaid pediatric providers apply fluoride varnish—a critical early intervention—despite coverage for the service.⁶ Fragmented billing systems and limited provider training make integration challenging.

5%
OF VIRGINIA MEDICAID PEDIATRIC MEDICAL PROVIDERS APPLY FLUORIDE VARNISH, DESPITE COVERAGE



NEARLY 3 IN 10 VIRGINIANS DON'T TRUST THEIR TAP WATER

DRINKING WATER

Even water, one of our most basic health resources, is undermined by misinformation and aging infrastructure. While 96% of Virginia's public water systems are fluoridated⁷, helping prevent cavities and saving \$32 per person annually in dental costs⁸, nearly 3 in 10 Virginians distrust their tap water⁹—a barrier to reaping this proven public health benefit.

The following sections provide more details on these challenges, as well as recommendations to address them.

AFFORDABILITY

All Virginians should have access to oral health care regardless of cost.

Oral health care is essential to overall health. Yet, too many Virginians cannot afford it. Over one million Virginians do not have dental insurance, and hundreds of thousands report skipping dental care due to the cost.¹⁰

Deferring dental care leads to pain, illness, and even death.^{11,12} It raises the risk of other diseases, including heart disease and cancer.^{13,14} It leads to fewer days in school and more days out of work. It leads to more stress in social settings and fewer job opportunities.

Many simply can't tolerate the pain and seek care, even if they cannot afford it. This leads to crushing medical debt, affecting over 500,000 Virginians.¹⁵ It also leads to providers not being paid, putting their clinics and communities they serve at risk.

Virginia policymakers have made tremendous strides to make dental care more affordable, expanding the state's Medicaid program over twenty years to cover children, pregnant women, and, in 2020, all adults. Today, nearly two million Virginians have affordable, comprehensive dental coverage through Medicaid.¹⁶

We urge state policymakers to protect and build on this important progress.

How do we do it?



Protect and strengthen Virginia's Medicaid dental benefit.

Reject cuts to Virginia's Medicaid program and instead strengthen coverage by ensuring adequate reimbursement rates, reducing administrative burden for providers and patients, and ensuring enrollees have the information they need to understand and use their coverage.

Support and expand access to oral health care safety net providers.

Invest in Virginia's federally qualified health centers and free and charitable clinics to ensure they can provide comprehensive health care that includes oral health to the uninsured, underinsured, and others at risk of falling through the cracks.

Expand access to private dental insurance.

Accept the federal option to designate routine adult dental services as an essential health benefit. Doing so would reduce the amount Virginians pay for routine dental care and prohibit insurers from imposing annual or lifetime dollar limits on these services.

Partners in Action

Kerri Reed

Senior Program Manager, Dental Services
CrossOver Healthcare Ministry



When Medicaid expanded, CrossOver strengthened its care by credentialing primary care staff and hiring its first full-time dentist. This made comprehensive care possible, especially for patients with chronic conditions like diabetes. Many struggled with nutrition due to oral health issues. Medicaid helped them eat well again, improving health and restoring dignity. It didn't just expand access, it gave people the tools to reclaim their health.

WORKFORCE

All Virginians should have access to oral health professionals regardless of where they live.

Geography should not determine Virginians' ability to access oral health care. Yet, in many rural and underserved parts of the Commonwealth, there are not nearly enough oral health professionals to meet the communities' needs. In 2024, 97 of 133 Virginia localities were a federally designated geographic or population dental health professional shortage area.¹⁷ As a Commonwealth, we need at least 1,000 more dental hygienists just to meet the expected need.¹⁸ These shortages contribute to avoidable disease, costly emergency department visits, and widening health disparities, especially for families with low incomes, seniors, and people with disabilities or chronic conditions.

Policymakers have acted in recent years to address these shortages. Last year, the General Assembly invested \$3.2 million in state funds to support the Virginia Health Workforce Development Authority's initiatives, including the Area Health Education Center program. They also approved Virginia's participation in the Dentist and Dental Hygienist Compact, allowing dental professionals trained in a participating state to more easily practice in another participating state.

These are important steps forward, but there is much more work to do. Virginia policymakers should continue prioritizing the oral health workforce and invest in long-term strategies that grow, support, and equitably distribute oral health care providers across the Commonwealth.

How do we do it?



Incentivize oral health providers to practice in underserved areas.

Offer loan repayment and scholarships to oral health providers who commit to serving underserved individuals and communities.

Expand residency programs in underserved areas.

Help offset the cost of launching and expanding dental residency programs in underserved areas in partnership with safety net providers.

Grow and strengthen dental hygiene and dental assisting training programs.

Increase salaries for community college dental hygiene clinical instructors, and consider altering the Virginia Community College System's funding formula to better support health science programs.

With 26 years in dental education, I've witnessed the essential role dental hygienists and assistants play in advancing total health. At Germanna Community College, I lead initiatives that not only prepare students for meaningful careers but also address critical workforce shortages across Virginia. My vision is a future where every Virginian has access to compassionate, skilled oral health professionals who are empowered to lead in education, advocacy, and care.

Partners in Action

Misty Mesimer, PhD, RDH, CDA

Dental Assisting and Dental Hygiene Program Director
Germanna Community College



INNOVATION & INTEGRATION

All Virginians should have access to innovative and integrated oral health care.

Having comprehensive, affordable health insurance and a robust health workforce are necessary to improve oral health, but that is just the start. Most medical and dental care is still siloed, using separate facilities, electronic health records, and billing systems. Too many Virginians still cannot access care through teledentistry or other innovations, whether it be due to slow internet or lack of awareness about new technologies. The end result is that too many Virginians, especially those living in underserved areas, cannot access oral health care.

State policymakers have laid the groundwork to accelerate access to innovative, integrated care. In recent years, the General Assembly and Governor have invested state funds to expand access to health care via school-based and mobile health clinics. They have also improved Virginia's Medicaid program by allowing coverage for non-dental medical providers to apply fluoride varnish to children up to age five.

However, policymakers can do more. Virginia's school-based health programs are a patchwork. It is unclear how many programs exist, what services they provide, how they deliver those services, and if they are effective. Meanwhile, very few non-dental providers apply fluoride varnish despite the need. Finally, policymakers and public health officials are increasingly flying blind, as it is unclear if and how the federal government will continue supporting key public health data collection systems. These data are necessary to inform and improve health care innovation.

Virginia can be a national model for oral health care. We urge decision-makers to seize this important opportunity.

How do we do it?



Expand school-based oral health programs.

Partner with health and education stakeholders to develop a statewide school-based health strategy to ensure all Virginia's children can benefit from comprehensive, place-based care that includes oral health.

Accelerate medical dental integration for preventive and primary care.

Support interprofessional training opportunities and reform Medicaid payment to incentivize medical-dental integration, including the application of fluoride varnish by non-dental medical providers.

Maintain access to key oral health data resources.

Invest and participate in key public health data collection systems, including the Behavioral Risk Factor Surveillance System (BRFSS) and the Pregnancy Risk Assessment Monitoring System (PRAMS).

Partners in Action

Neeley Russell, RDH

School-Based Dental Program Coordinator
Community Health Center of the New River Valley



At the Community Health Center of the New River Valley, our school-based health program brings essential medical and dental care directly to students where they need it most: at school. By removing barriers like transportation and cost, we ensure every child has access to high-quality care while our coordinated team of providers works together to support students' health, well-being, and success.

DRINKING WATER

All Virginians should have access to safe, fluoridated drinking water that they can trust.

Safe, fluoridated drinking water is the healthiest beverage on Earth.¹⁹ Water is calorie-free, helping prevent obesity and related diseases like heart disease and diabetes. It keeps us hydrated, allowing us to focus better, work harder, and play longer. When optimally fluoridated, it reduces tooth decay in adults and children by 25 percent.²⁰

Despite these benefits, nearly 30 percent of Virginians do not drink their tap water.²¹ Why? Many Virginians, often understandably so, distrust their drinking water. This distrust has led some communities to end community water fluoridation, despite decades of evidence proving its safety and effectiveness. When fluoridation programs are discontinued, cavities increase—especially among children, seniors, and those with limited access to dental care.²² These cavities, if untreated, can lead to pain, severe illness, and even death.

The best way to build trust in fluoridated drinking water is by investing in Virginia’s drinking water infrastructure and training, which, in turn, prevents errors and system failures. The Governor and General Assembly have taken steps in the right direction, investing \$25 million to support infrastructure improvements this past legislative session. State policymakers should build on this progress so all Virginians can benefit from safe, fluoridated drinking water that they can trust.

How do we do it?



Strengthen Virginia’s drinking water infrastructure and operations.

Invest additional state funds in the Office of Drinking Water to upgrade systems, improve training, and enforce safety regulations.

Maintain access to community water fluoridation.

Reject a statewide prohibition on community water fluoridation and continue leaving the decision to local leaders.

Community health workers (CHWs) are vital in building trust in essential resources like drinking water, especially during crises like the one in Richmond in early 2025. In communities fearful of contaminated water, CHWs serve as neighbors and reliable information sources, helping families understand their water supply and its health implications. They collaborate with local organizations and public systems to ensure accurate information reaches all corners of the community.

Partners in Action

Shanteny Jackson, MA

Executive Director

Virginia Community Health Worker Association



CONCLUSION

Oral health is essential to overall health.

The recommendations in this Blueprint are not just about dental care—they are about building a healthier Virginia where all residents, regardless of income, race, or geography, can thrive. From expanding access to preventive services and strengthening the oral health workforce to safeguarding safe drinking water and accelerating integration and innovation, these priorities offer a clear path toward a more effective and equitable health care system.

Virginia has made tremendous progress in recent years—progress that must be protected and expanded. The stakes are high: without continued leadership, we risk backsliding on gains that have improved health outcomes and quality of life for countless Virginians.

We call on state policymakers to act boldly on the recommendations in this Blueprint. Together, we can build a future where oral health is recognized as essential to whole-person care and where every Virginian can drink clean water, access trusted care, and live with dignity and opportunity. The time to advance this vision is now.

GET ENGAGED

Stay informed — Sign up for the monthly newsletter

Scan the QR code and sign up to receive monthly updates from Virginia Health Catalyst on policy insights, new resources, upcoming events, and stories of impact across the Commonwealth.



bit.ly/vhcnewsletter

Shape the future — Join the Future of Public Oral Health (FPOH) Taskforce

Interested in influencing the direction of oral health in Virginia? Scan the QR code to learn more about the FPOH Taskforce and how to get involved.

This group convenes public health experts and community leaders to identify challenges and develop actionable solutions to issues like workforce shortages, equity gaps, system integration, and prevention-focused care.



bit.ly/joinfpohtaskforce

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