Oral Health Plan Advisory Group Meeting

Pennsylvania Department of Health Oral Health Program

January 19, 2024 10am-12pm



Welcome and Logistics

- Welcome
- Oral Health Program Staff Introductions
- New Members
- Agenda Review
 - Meeting Purpose
 - Desired Meeting Outcomes





01. Identified Priority Action Steps

02. Update on Progress

03. Baseline Indicators

04. Progress Towards Measurable Outcomes





IDENTIFIED PRIORITY ACTION STEPS

2020-2030 State Oral Health Plan

Within each priority area, potential work efforts are listed under each domain as bullet points. (see pages 17-22 of the Plan)

In year 4 of the Plan, the OHPAG has chosen <u>7</u> action steps to focus on through June 30, 2024.



01.





IDENTIFIED PRIORITY ACTION STEPS 2023-2024

 \cdot Reduce total health care costs through policies and advocacy that enhance access to oral disease prevention and treatment services

 Initiate policy(ies) to expand the oral health workforce in venues serving underserved populations to provide more opportunities for access to treatment, prevention and education services

• Reduce oral health disparities according to race, income, ethnicity age, geographic residence, disability status and education levels

• Initiate a policy on Medicaid reimbursement for community health workers (and similar groups) for home visiting, education services, and appropriate referral to dental homes

 \cdot Advocate for mandated and increased level funding for the Medicaid fee schedule

• Identify and support pipeline program development to ensure a competent and diverse future oral health workforce

 Secure state and federal funding to implement, administer, and operate statewide dental public health programs designed to enhance oral health equity.



Progress: Reduce total health care costs through policies and advocacy that enhance access to oral disease prevention and treatment services

- HB 1417 (Restoring adult benefits in Medicaid) was passed by the House with bipartisan support in December 2023. It's currently in Senate committee, with interest to pick up issue in Spring 2024.
- Continuous coverage for children for one year in Medicaid, waiver being submitted to extend to age 6.
- "Dream Care" initiative is re-launching to ensure there are no uninsured children.



Progress: Initiate policy(ies) to expand the oral health workforce in venues serving underserved populations to provide more opportunities for access to treatment, prevention and education services

- HB 1585 Teledentistry bill was passed by the House with bipartisan support in December 2023; now sits in the Senate. PCOH has planned meetings to discuss importance of bill.
- Dental license portability webinar to increase support of dental licensure compact legislation sitting in both chambers of the legislature.
- HB 1478 passed into law, allowing PHDHPs to perform mandated school screenings in districts without a school hygienist. (Effective 2/14/24)
- Silver Diamine Fluoride (SDF) is now an allowable code for physicians.



Progress: Reduce oral health disparities according to race, income, ethnicity age, geographic residence, disability status and education levels

- Establishing new partnership with Area Agencies on Aging to address senior oral health care gaps.
- Partners are working with the Governor's office to officially recognize those with disabilities as a medically underserved population (MUP).
- Continue to promote fluoridation as a population health measure that benefits all in a community
- Hosted a poverty simulation at the 2023 PA Oral Health Summit to increase the knowledge of providers around the social determinants of health



Progress:

Initiate a policy on Medicaid reimbursement for community health workers (and similar groups) for home visiting, education services, and appropriate referral to dental homes

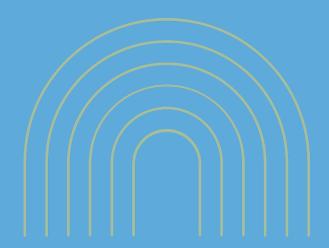
- DHS is working on federal plan amendment that would allow Medicaid reimbursement for CHWs - goal is 2025.
- PCOH Summit (November 2023) featured CHWs and shared information on this process.
- Medicaid now covers for nicotine cessation counseling, oral hygiene instruction, and the program is actively working on increasing dental referrals from medical homes.



Progress: Advocate for mandated and increased level funding for the Medicaid fee schedule

- Pennsylvania is one of six states starting in an American Dental Association's project to increase Medicaid provider participation
- HB 1300 Fiscal code passed in December with \$24 million in additional state funds to increase the dental fee schedule and send one-time payments to dental providers who already participate.





Progress: Identify and support pipeline program development to ensure a competent and diverse future oral health workforce

- August Statewide Dental Workforce Strategy Session
- Maintain HRSA Community of Practice group that lists this as a focus area
- Work with state and regional Area Health Education Centers (AHEC) to support 2 high school programs for career development
- Attend PA School Counselors Association meeting to share career information
- Pitt/Allegheny County continue new dental assisting program



Progress: Secure state and federal funding to implement, administer, and operate statewide dental public health programs designed to enhance oral health equity.

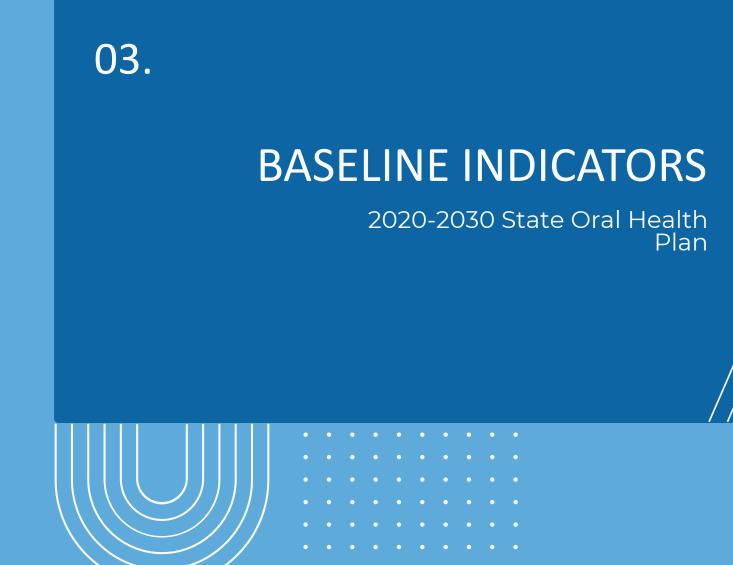
- DOH Oral Health Program has funding through August 31, 2024 for CDC state oral health grant (fluoridation, surveillance, and sealant programs).
- DOH Oral Health Program has funding through August 31, 2026 for HRSA state oral health grant (workforce).
- DOH Oral Health Program will apply for next CDC grant that runs from September 1, 2024-August 31, 2027.
- State oral health stakeholders (PACHC, PCOH, PORH, and more) applied for a 4-year grant to start in July focused on medical/dental integration.



OHPAG Member Sharing

 Stories from your agencies and organizations related to the 2023 – 2024 Action Steps









Access: 2030 Goals

- Increase % of people served by water systems receiving optimally fluoridated water
 - o 64.24% > 66.00%
- Increase preventive oral health care (dental visit) for children
 - 45.50% > 55.00%
- Increase preventive oral health care (dental visit) for children with special healthcare needs
 - o 32.37% > 38.00%
- Increase preventive oral health care (dental visit) for pregnant women
 - o 50.40% > 55.00%
- Increase preventive oral health care (dental visit) for adults
 - 70.00% > 75.00%
- Reduce percentage of untreated decay in children
 - 25.80% > 22.80%
- Reduce incidence of tooth loss in adults 18-64
 - **34.00% > 29.00%**



- Reduce incidence of tooth loss in seniors 65+
 - 27.00% > 32.00% (measure based on seniors with no tooth loss)



- Access: C 2030 Goals • I
- Increase the percentage of third grade children with dental sealants
 36.70% >41.70%
- Increase the number of programs providing children ages 6-14 with dental sealants

• 61 programs > 122 programs

• Increase the number of underserved children with an age one dental visit

o 18.43% > 23.00%

- Reduce the incidence of children receiving dental services under general anesthesia
 - **1.66% > 1.50%**
- Reduce the incidence of oral cancer and oropharyngeal cancer
 - o 12.7:100,000 > 12.7:100,000*





Workforce: 2030 Goals

- Increase the percentage of hygienists, general dentists, and specialists participating in the Medicaid program
 - **23.00% > 26.00%** (general dentists)
- Increase the number of general dentists who bill \$10,000+ per year in the Medicaid program
 - **1,074 > 1,181**
- Decrease the number of DHPSA county-level designations

• **41 > 38**

 Increase the number of primary care medical providers who bill Medicaid for oral health services

• **918 > 1500**

Increase the number of community health workers (or similar) providing oral health education to their clients
 64.00% > 74.00%

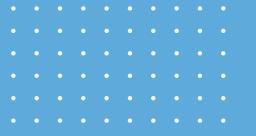




UPDATE ON MEASURABLE OUTCOMES

2020-2030 State Oral Health Plan









Access, Prevention, & Education

A1. Increase percentage of people served by community water systems receiving optimally fluoridated water					u	
	66.00%		64.24 %	60.54%	63.29%	TBD
A2. Increase preventive oral health care (dental visit) for children	53.00%		45.86 %	40.31%	45.18%	45.93%
A3. Increase preventive oral health care (dental visit) for children with special health care needs	38.00%			32.37%	35.89%	
44. Increase preventive oral health care (dental visit) for pregnant women	55.00%		50.40%	43.86%	45.25%	
A5. Increase preventive oral health care (dental visit) for adults	75.00%	70.00%		70.00%		69.00%
A6. Reduce percentage of untreated decay in children	22.80%					25.8%





Access, Prevention, & Education

MEASURABLE OUTCOME	2030 Goal	2018	2019	2020	2021	2022
A7. Reduce incidence of tooth loss in adults 18-64	29.00 %	34.00%		31.00%		34.00%
A8. Reduce incidence of tooth loss in seniors 65+	65.00%	73.00%		70.00%		70.00%
A9. Increase the percentage of third grade children with dental sealants	41.70%					36.70%
A10. Increase the number of programs providing children ages 6-14 with dental sealants	122		61	31	81	91
A11. Increase the number of underserved children with an age one dental visit	23.00%		18.43%	15.90%	19.21%	19.51%
A12. Reduce the incidence of children receiving dental services under general anesthesia	1.50%			1.66%	2.01%	TBD
A13. Reduce the incidence of oral/oropharyngeal cancer (per 100,000)	12.70	12.70	12.50	11.50	TBD	TBD





Workforce

MEASURABLE OUTCOME	2030 Goal	2018	2019	2020	2021	2022	
B1. Increase the percentage of hygienists, general dentists, and specialists participating in the Medicaid program	26.00%		23.00%		23.50%		
B2. Increase the number of general dentists who bill \$10,000+ per year in the Medicaid program	1,181			1,074	1,117	1,073	C
B3. Decrease the number of DHPSA county-level designations	38		41			41	C
B4. Increase the number of primary care medical providers who bill Medicaid for oral health services	1,500	918	636			TBD	
B5. Increase the number of community health workers (or similar) providing oral health education to their clients either in community health centers or place of residence	73.00%				63.80%	53.30%	



Why Evaluation is Important

- Purpose of Evaluation: To make better decisions about programs & activities
- How Implemented: Systematic approach for collecting & analyzing data to help determine the relevance, progress, efficiency, effectiveness & impact of program activities
- An evaluation may focus on just 1 or more aspects of evaluation
- Results: Are intended to help with program decision-making, this is particularly useful in a world with limited resources

Multiple Methods Used to Assess Progress on Priority Areas in the PA Oral Health Plan 2020-2030

- Documentation of accomplishments relevant to the Plan and
- Progress assessed in Plan priority areas through preestablished measurable outcomes
 - Progress has been assessed by analyzing trends in the measurable outcomes
 - Data will continue to be collected on pre-established measurable outcomes, and potentially others that may become relevant over the life of the Plan

Summit Evaluation Outcomes

Top Reasons for Attending the Summit

- Networking opportunities
- To gain new knowledge/skills

Top 4 Summit Topics

- Health equity
- Addressing workforce challenges
- PA Safety Net clinics
- Community Health Workers and Oral Health

Future Summit Topics/Issues

- Oral health and specific population groups (older adults, veterans, LGBTQIA)
- Teledentistry as a tool to bridge equity gaps
- Workforce





Summit Evaluation Outcomes

Q1. What data do the members care about? Q2. What workforce priorities should we be exploring?





Member Discussion

Discussion



Meeting Summary/Next Steps

- Summary
- Next Steps
 - Review notes
 - Visit paoralhealth.org/OHPAG to review materials
 - Ongoing: Submit success stories
 - Send comments/additional materials to <u>info@paoralhealth.org</u>

