

1 Meeting Logistics

Item	Oral Health Plan Advisory Group Meeting
Date	Tuesday, April 2, 2024
Time	10 a.m. - 12 p.m. ET
Location	Online via Zoom: New Link Here
Purpose/Focus	The purpose of the meeting is to convene the members of the Oral Health Plan Advisory Group (OHPAG) to discuss the group's mission and strategies to implement the Pennsylvania Oral Health Plan 2020-2030 (Plan).
Notetaker	Lia BenYishay, PA Coalition for Oral Health (PCOH)

Desired Meeting Outcomes challenges

By the end of the meeting, attendees will have:

- an increased knowledge of the current population-based dental oral health issues impacting the Commonwealth;
- a shared understanding of the vision of the Plan;
- a deeper connection to one another as members of OHPAG; and
- an opportunity to expand and strengthen the work of implementing the Plan.

Agenda

ID	Description	Owner	Time
1	Welcome and Logistics	Oral Health Program, Pennsylvania Department of Health (DOH): Dr. Jonise McDaniel, Public Health Dental Director Jan Miller and Sarah Welch, Oral Health Program Administrators	10:00-10:05
2	Current Priorities and Progress Update Member Polls	Helen Hawkey, PA Coalition for Oral Health (PCOH) and Dr. Jonise McDaniel, DOH	10:05-10:20
3	OHPAG Member Sharing	Sarah Welch, DOH	10:20-10:50
4	Breakout Rooms	Helen Hawkey, PCOH Sarah Welch, DOH Lia BenYishay, PCOH	10:50-11:10
5	Member Discussion and Q&A	Dr. Jonise McDaniel, DOH	11:15-11:45
6	Meeting Summary and Next Steps	Dr. Jonise McDaniel, DOH	11:45-12:00

Notes

- Welcome and Logistics
 - Dr. McDaniel welcomed the group to the April meeting on behalf of the Pennsylvania Department of Health. She went over meeting logistics and introduced Oral Health Program staff. She reviewed the agenda for the meeting.
- Review of Identified Priorities and Update on Progress and Member Polls

- Helen Hawkey reviewed the identified priorities and action steps chosen by the OHPAG members. Helen shared slides with progress updates on each of the selected action steps.
 - Reduce total health care costs through policies and advocacy that enhance access to oral disease prevention and treatment services.
 - House Bill 1417 (restoring adult benefits in Medicaid) is still sitting in the Senate; PCOH is meeting with Senate committee members.
 - PA Department of Human Services (PA DHS) submitted an application for funding to support schools billing for Medicaid 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.
 - House Bill 1585 (teledentistry) still remains in the Senate.
 - PCOH hosted a webinar on dental license portability to increase support of the dental licensure compact legislation, which is sitting in both chambers of the legislature.
 - Act 55 of 2023 is now in effect as of February 14, 2024. This allows public health dental hygiene practitioners to complete mandated school screenings and sign screening forms.
 - Reduce oral health disparities according to race, income, ethnicity, age, geographic residence, disability status, and education levels.
 - PCOH is sending information on oral health resources to the 52 Area Agencies on Aging across Pennsylvania in May.
 - Partners are working with the Governor's office to officially recognize those with disabilities as a medically underserved population (MUP).
 - Continued promotion of community water fluoridation as a population health measure that benefits all in a community.
 - Initiate a policy on Medicaid reimbursement for community health workers (and similar groups) for home visiting, education services, and appropriate referral to dental homes.
 - Doulas are now recognized by Medicaid and community health workers will be recognized starting in January 2025.
 - PCOH submitted four additional continuing education courses to the PA Certification Board for credits for certified community health workers.
 - Advocate for mandated and increased level funding for the Medicaid fee schedule
 - Pennsylvania is one of six states starting in an American Dental Association project to increase Medicaid provider participation. The project established a goal of a 3-6% increase in providers by December 2025.
 - House Bill 1300 allocates \$24 million in additional state funds to increase the dental fee schedule for 31 codes and would provide one-time payments to dental providers that already participate.
 - PA DHS is considering adding payments for public health dental hygiene practitioner screenings to the fee schedule.
 - Identify and support pipeline program development to ensure a competent and diverse future oral health workforce.
 - The State Board of Dentistry approved a new EFDA program at Central Penn College.
 - Ongoing: PCOH and DOH maintain a HRSA Workforce Community of

Practice that lists this action step as a focus area.

- Ongoing: PCOH works with state and regional Area Health Education Centers (AHEC) to support two high school programs for career development.
- PCOH attended a PA School Counselors Association meeting to share career information.
- There is a need to focus on vocational/technical programs; there are currently 22 across PA.
- Secure state and federal funding to implement, administer, and operate statewide dental public health programs designed to enhance oral health equity.
 - DOH and PCOH attended and presented at the CDC grantee closeout meeting in March.
 - DOH Oral Health Program is funded through August 31, 2024, from the CDC state oral health grant, which covers fluoridation, surveillance, and school sealant programs.
 - DOH Oral Health Program is funded through August 31, 2026, from the HRSA state oral health grant focused on workforce.
 - DOH Oral Health Program will apply for the next CDC grant that runs from September 1, 2024-August 31, 2027.
 - State oral health stakeholders (PACHC, PCOH, PORH, and more) applied for a four-year grant to start in July focused on medical/dental integration.
- Member Polls
 - How familiar are you with the available Oral Health Plan outcome tracking data?
 - Not at all familiar: 7%
 - Slightly familiar: 29%
 - Familiar: 43%
 - Extremely familiar: 21%
 - Rate how confident you feel in understanding and communicating about the purpose of the OHPAG.
 - Not at all confident: 7%
 - Slightly confident: 14%
 - Confident: 57%
 - Extremely confident: 21%
 - Rate how confident you feel in understanding and communication about the Oral Health Plan (2020-2030).
 - Slightly confident: 33%
 - Confident: 50%
 - Extremely confident: 17%
 - Rate how confident you feel in understanding and communicating about your role in the OHPAG.
 - Slightly confident: 8%
 - Confident: 58%
 - Extremely confident: 33%
 - Do you feel your work/advocacy has contributed to the success of Oral Health Plan outcomes?
 - No, not at all: 8%
 - Yes, somewhat: 58%
 - Yes, always: 33%

- Member Sharing
 - The Facilitation Team asked members to come to the meeting prepared to share.
 - Dr. Sean Shamloo
 - In relation to reducing total healthcare cost through policy, DHS is looking at value-based purchasing strategic initiatives and are doing internal planning to have dental services included in communication to MCOs or otherwise.
 - DHS is working on a collaborative with MSDA titled 'Systems Change for Inclusive Health', which is a subgrant with the Special Olympics and CDC. This work is looking at implementing tools to capture disparities in a way that can help make meaningful policy change.
 - Katie Noss
 - PACHC applied for the grant focused medical/dental integration that had been mentioned in the action step progress, as well as sharing PCOH resources, most recently sharing the Act 55 of 2023 guideline document with community health centers.
 - PACHC is hosting an integration summit for members next week focused on bringing clinical teams together to implement changes in their health centers.
 - The call for proposals for the PACHC Annual conference in October will be opened in the next few weeks.
 - Jess Rhodes
 - UPMC has been focused on health equity and this year there's a more pointed dive into dental with three main areas of focus: the IDD (individuals with intellectual or developmental disabilities) population, health literacy and oral health IQ and how to evaluate materials and address comprehension, and race and ethnicity data for more targeted outreach and engagement.
 - Also looking into education and social determinants of health assessments as a conduit for keep rates and how to tie in engagement in oral health education to increase keep rates for dental appointments and working with community navigators.
 - Recently did work that connected the Allegheny County Office of Developmental Programs and Community Care and Behavioral Health UPMC together to work towards member goals and are looking at oral health and how it impacts members and how it affects their access to care. The group is also developing a continuing education course together on behavioral management with tips for dental providers and thinking differently about behavioral management in the chair which focuses on therapeutic support staff engagement in the dental visit.
 - Looking into HIV/AIDS services organizations and how they're connected to dental providers and are making connections with the University of Pittsburgh Dental School and the Pittsburgh Area Center for Treatment of HIV (PACT) Clinic.
 - Dr. Fredrick
 - AHEC is revamping the clinical rotations approach, moving away from four-week rotations to longer ones and will be more selective with students placed with limited preceptors in rural areas. If there are groups interested in exploring rural rotations, please reach out to AHEC.

- AHEC community health worker program is approved by the PA Certification Board and is one of the only programs that includes oral health in its curriculum.
- AHEC is applying for a grant around pre-apprenticeship work and are looking for opportunities to expand into health care workforce apprenticeships.
- Kristin Haegele Hill
 - PA AAP Healthy Teeth Healthy Children has an ongoing project, Oral Health for Telehealth Framework (OHFT), a multi-year approach with the goal of developing virtual solutions to equitably spread validated oral health prevention messages. The project is in the phase of validating resources to provide different ways for people to access oral health information and are piloting a virtual “scavenger hunt” with The Wright Center.
 - Also provide Oral Health in Your Office training, which works with medical providers to increase oral health integration, screenings, referrals, and topical fluoride varnish application. Currently working on adapting resources for an adolescent audience since reimbursement has been expanded up to age 20.
- Dr. Wolff
 - University of Pennsylvania School of Dental Medicine hosted the National Academies of Sciences, Engineering, and Medicine meeting on integrating oral health into health, which has resulted in a great deal of interactions on the national level that are likely to yield research and solicitation to codify programs together with the medical field. There were over 1000 in attendance both online and in-person and the organizers are working on a report from the meeting to share widely.
 - Penn Dental has contracted with the state of Florida to provide hands on dental education to providers in Florida, three times a year focused on persons with disabilities to increase the ability of dental professionals to deliver care. Florida does not currently have adult dental Medicaid benefits in Florida. The training incorporates meeting complex medical needs, including the aging population and services such as SDF, TFV, and non-sedation management techniques. Florida is considering mandating the training for all licensed individuals and would be glad to implement in PA.
 - The three PA dental schools are in the process of attempting to get a change in the dental licensure for academics which allow foreign-trained dentists with specialty certificates to be licensed to practice and teach clinically within the dental schools. Neighboring states can bring these experts in, which gives them a competitive edge and not being granted licensure is a major disadvantage for PA dental schools. The group has asked the dental association and legislature to grant dental schools the ability to obtain licensure by a panel of the three schools.
 - The dental school has started a series of global scoping reviews of access to care and abilities to take evidence and translate to policy. Started with international locations and are looking to come back to the commonwealth and looking into where policies don't fit with best evidence. This information will be used to focus policies in Philadelphia and nationally.

- Breakout Room Discussions
 - OHPAG members were split into three breakout rooms to discuss the following questions.
 - Do we have a gap in knowledge of the outcome tracking and oral health plan data? How could we make sure more people know?
 - What types of resources would be useful to utilize Oral Health Plan outcome tracking data in your work/advocacy? How could we make sure more people know?
 - Group 1 Notes
 - Infographics and one-pagers are helpful
 - Some may not know about the community water fluoridation map. A campaign sharing the “whys” and “whats” of what to do if your water isn’t fluoridated could be helpful and people may be surprised to learn that their water isn’t fluoridated.
 - Is community water fluoridation even worth pursuing when fluoride in other forms is available and it's so expensive?
 - Links to medical/dental integration - kidney disease issues, talking with large dialysis groups and transplant centers could be a way of reaching specific populations
 - Penn Dental School has been working on pre-surgical referral work to get patients evaluated before surgical procedures
 - Group 2 Notes
 - The 2024 Progress Update on Measurable Outcomes for the Pennsylvania Oral Health Plan 2020-2030 document is a good visual to see where we’re at, but A13 (oral/oropharyngeal cancer) outcome is confusing with the baseline being the same as the goal.
 - Including a “call to action” for each of the outcomes could help contextualize the data for providers and give a way to tie in their work.
 - This document is helpful for providers but is overly complicated for those who aren’t dental providers.
 - The PDHA public health CE event would be a great opportunity to introduce the Oral Health Plan to a large group of PHDHPs. Could we send a physical copy of this document to PA PHDHPs with an opportunity for them to share their work and to see what we’re missing in the ways that we collect data?
 - Group 3 Notes
 - Do we have a gap in knowledge and people know about that data? Looking at how we may leverage the contracts across the state for the products our state runs. Medicaid CHIP etc. How can the SOHP (state oral health plan) be integrated into the insurance services. Making sure administrators know there is a state oral health plan? Community health centers and other orgs that have these overarching goal discussions where there can be purposeful integration of the SOHP into their everyday work. Ultimately helps administer the SOHP across the state. Everything ties back to business operations.
 - Just general knowledge of the SOHP is important. I can’t tell you how many people I speak to that don’t know the SOHP exists. It would be great to communicate with them about tracking and information, it will help facilitate some integration (MCO and DBM) so that they are better able to equip themselves and have policies that are more in-line with the SOHP. How can we get that info out more? I love the PCOH website – but I almost want certain things right there on the homepage where you don’t have to dig for it. This tracker is a wonderful tool, outcomes shown nicely, easy to digest... if this was a

link on the homepage, can we have a link to “track data” or something catchy that people can click on that can take people to the info itself, it would be very useful.

- Orgs are having issues with legal language with getting to use materials. Maybe standard language stating you are granted to use this material. So that people can use them in presentations. More infographics readily available with appropriate permissions. I have had no problem getting that from PCOH, but if it was right there it might be easier for other organizations to do the same.
 - Would it be helpful to have qualitative data- success stories?
 - My favorite kind of data tells a story. Having the success story along with a quantitative piece – “this member’s work took 6 hours of staff time to figure out” – this has been very effective. Esp. helpful recently with LBGTQI space. If you capture that story with the time/effort quantitative data, then it may resonate more. In the dental space that is very relevant, it may take our members a long time to get situated around certain dental needs.
 - I think, who is our audience? Diff approaches depending on audience – Stakeholder/community members vs. statewide, need to be meaningful for different audiences. I love this graphic, but it is a mass of information. Can we pull out information and pull people in depending on the audience.
 - Someone at first glance may not understand what we are tracking and what they are looking for. For the community that is not us, creating something else. When we do incorporate stories into what made those numbers go up, when we hear those qualitative stories behind it, it opens doors for different levels of thinking.
 - I know PCOH collects all that qualitative data, I feel like that it is just attaching it to that quantitative data. From a health center perspective, it’s nice to see the data, but it would be nice to have examples of actionable steps to make the change. Getting those workflow steps and granular info out there so that they can advance these overall goals.
 - Like having an action plan that goes along with each of the goals/objectives. A recommended action plans. But if we give them that, based on PCOH experience, then at least there is a blueprint there. Maybe they don’t know what to do, and that would help them.
 - How can you help us move the needle? If you are at an FQHC/DR/community member, then this is what you can do to move the needle in this area. Love the newsletter that starts with a stat - like “did you know?” and then you can click for info and dig deeper. And the next step is “this is how you can help”.
 - In Maryland, it was constant messaging, and our communications person, his mantra is just continuing to communicate constantly. And it did resonate. Of course, we did have a precipitating event.
- Member Discussion and Q&A
 - Community Water Fluoridation
 - Helen shared more of the discussion from the breakout room on water fluoridation, about whether it’s an initiative worth continuing to pursue given all the other resources available and water fluoridation is expensive. In response, community water fluoridation is for those who don’t have access to the other resources and tools and is the only catchall we have. The main arguments against water fluoridation are personal choice or based on pseudoscience.
 - Dr. Wolff shared the need to advocate for the benefits of community water fluoridation on the aging population and that there are several studies showing the benefits.
 - Jess Rhodes asked if community water organizations feel defeated with the

- popularity of bottled drinking water. She shared that there's a great deal of media boasting bottled and filtered water which may have water systems wondering if community water fluoridation is worth the investment.
- Helen explained that this is a top issue for water operators, as most of the water they produce is not used for drinking water and emphasized the importance of having relationships with water systems and operators.
 - Jess Rhodes
 - Jess shared that at UPMC Health Plan, there was never a mention of oral health in the contract and through hard work, over the last 7 years, plans were instructed to have a chief dental officer/manager for the plan and doing so elevated oral health in the organization and then PHDHPs were included in the contract both on Medicaid and CHIP sides. As the programs continue building, determining the guiding documents are in contracts is very important. Being able to point back to the OHP gives more attention and visibility to the plan and makes MCOs question how they support the plan meaningfully. The state viewing this as important made it important to decision makers, as well.
 - CDC Grant
 - Dr. McDaniel asked members if there are topics or items addressed in the PA DOH OHP CDC grant application.
 - Jan Miller shared that the new CDC Notice of Funding Opportunity still includes community water fluoridation, school sealant programs, and new priorities include infection prevention control, increasing preventive evidence-based dental services, and the examining the link between oral health and diabetes. The CDC is also looking for a focus on a specific disparate population. The grant is extremely competitive, with only 15 awardees.
 - Darcie Schaffer
 - The next MOM-n-PA event is taking place on June 21-22, 2024, in Reading. Information can be found at www.mom-n-pa.com
 - Jess Rhodes
 - Continuing Education (CE) webinar: Maternal and Infant Oral Health
 - Join UPMC Health Plan for a live, CE-accredited webinar on Wednesday, May 15, from noon to 1 p.m. that will provide an overview of early childhood oral health. Information and registration can be found at: [Maternal and Infant Oral Health registration - Webex](#)
 - Helen Hawkey
 - Information on the Philadelphia CWF event taking place on 5/1/24 and the Maternal and Child Health Title V survey can be found on the most recent PCOH newsletter, also found at this link <https://mailchi.mp/paoralhealth/pcoh-news-you-can-use-march-26-10296751?e=7804cb6d8b>
 - Meeting Summary and Next Steps
 - Dr. McDaniel thanked everyone for attending the meeting and gave a summary overview of the meeting.
 - **The next meeting will be in-person on Friday, August 2nd from 10am-3pm in Harrisburg.**