

*Leading Change for
Oral Health in
Pennsylvania*

**STRATEGIC PLAN
2026 – 2028**

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ADVANCING ORAL HEALTH IN PENNSYLVANIA

PA Coalition for Oral Health (PCOH) is a diverse group of leaders from across the state from schools of public health, philanthropic organizations, businesses, dental organizations, health insurance firms, managed care organizations, dental and hygiene programs, advocacy organizations, state agencies, and more. PCOH programs, leadership, and staff are recognized as one of the preeminent public health organizations in the state.

The 2026-2028 Strategic Plan (Plan) provides PCOH with direction for sustaining and expanding current programs and developing new initiatives to meet the oral health priorities. The Plan serves as a tool for sharing the organization's principles and objectives with constituents. The Plan allows for agility so that PCOH staff and board of directors can adjust strategies to respond to emerging challenges and opportunities.

Our Vision

Essential to overall health and wellness, optimal oral health benefits ALL Pennsylvanians. By bringing together oral health advocates and professionals to share the best and most innovative approaches, PCOH serves as the dynamic leading voice to improve oral health across Pennsylvania.

Our Mission

To improve oral health for all Pennsylvanians by uniting constituents to advance advocacy, policy, education, and innovative approaches.

Guiding Principles

The activities of PCOH are based on excellence, integrity, and public interest with an emphasis on social responsibility, equity, and inclusion. PCOH serves as a neutral convener for initiatives that support access to high-quality oral health care for all Pennsylvanians. Our actions are collaborative, respectful, transparent, objective, and person-centered. PCOH integrates diversity, equity, and inclusion in its framework, partnerships, and activities.

PCOH serves as the subject matter expert on the state of oral health in Pennsylvania. The coalition contributes to oral health advancement by informing, advocating, and leading oral health efforts through partnerships and collaborations across all sectors that impact oral health care delivery, policy, and payment.

PCOH seeks to advance oral health in the state by addressing the structural, relational, and transformative change as described below¹:

Structural Change that Impacts Oral Health

- Policies: Government, institutional, and organizational rules, regulations, and priorities that guide PCOH's and partners' actions.

¹ Adapted from The Water of Systems Change, FSG - Reimagining Social Change, by J. Kania, M. Kramer, and P. Senge, June 2018

- Practices: Espoused activities of institutions, coalitions, networks, and other organizations targeted at improving social and environmental progress. Within PCOH, the procedures, guidelines, or informal shared habits that comprise our work.
- Resource Flows: How funding, people, knowledge, information, and other assets such as infrastructure are allocated and distributed.

Relational Change that Impacts Oral Health

- Relationships and Connections: Quality of connections and communication occurring between agencies, organizations, and others in the system, especially among those with differing histories and viewpoints.
- Power Dynamics: The distribution of decision-making power, authority, and formal and informal influence between individuals and organizations.

Transformative Change that Impacts Oral Health

- Mental Models: Habits of thought and deeply held beliefs and assumptions and taken-for-granted ways of operating that influence how we think, what we do, and how we talk.

Our Constituency

PCOH constituents include all Pennsylvanians, including professionals, organizations, advocates, and consumers whose actions and interests affect the provision of oral health care services in Pennsylvania, and the health of Pennsylvania residents. This includes, but is not limited to, state, county, and community-based oral health advocates; health care providers; educators; elected officials and policy makers; state agency staff; dental health specialists; researchers; consumers; and others. PCOH collaborates with all parties that have a sincere interest in the oral health of all Pennsylvanians.

SETTING THE STAGE

Oral health is an essential part of everyday life and is a critical component of overall physical, mental, and social health and well-being, regardless of age, race, ethnicity, and other factors. Oral health, while inextricably linked to overall physical and emotional well-being, is often overlooked in association with larger public health initiatives, despite oral diseases being among the most common chronic conditions facing children and adults in Pennsylvania.

Dental, oral, and craniofacial conditions are the result of a complex matrix of biological, behavioral, environmental, and systems-level factors. A healthy mouth (defined as the teeth, gums, hard and soft palates, linings of the mouth and throat, tongue, lips, salivary glands, chewing muscles, and upper and lower jaws) reduces the risk of developing and/or exacerbating diseases such as diabetes, cardiovascular disease, and respiratory issues that can lead to chronic illness and undesirable outcomes. Research shows that inflammation caused by periodontal disease in pregnant individuals may result in

preterm birth and/or low-birthweight infants. Oral health disparities stem from persistent and pervasive health inequities such as reduced access to prevention and treatment strategies, leading to higher rates of new and unmet oral health needs.²

Dental caries (cavities) and periodontal (gum) disease are the two major oral diseases that impact all segments of society. Without oral health intervention, the ramifications compound, resulting in ongoing pain, absence from school and/or work, costly emergency room visits, the worsening of comorbidities like diabetes and heart disease, and even death.

Oral disease, infection, and pain hinder daily functions such as speaking, chewing, swallowing, smiling, and making other facial expressions to show feelings and emotions at home, in the workplace, and at school. Dental caries, the disease that causes cavities, is the most common chronic childhood disease, five times more prevalent than asthma. It leads to missed school days and negatively impacts school performance and nutritional intake. For some individuals, dental caries results in emergency department visits and even hospitalizations. It is noteworthy that non-dental providers are significantly more likely to write an opioid prescription for dental pain versus any other type of pain, perhaps due to a general lack of integrated training and/or interprofessional relationships with dental professionals. For many adults, the bad breath from gum disease and the inevitable tooth loss lowers their self-esteem and causes avoidance of eye contact and smiling, which can hinder social interactions. Poor dentition can impact an employer's perception of an individual's capabilities based on outward appearance, which can impact individual socioeconomic status.

A complex set of factors contributes to oral health inequities that result in fewer dental visits and a lower provision of clinical and preventive oral health services for many families and individuals. These factors include:

- Lack of integration between the medical and oral health delivery systems that includes financing of care, record keeping and electronic record systems, interprofessional education, and service delivery;
- High cost of oral health care;
- Lack of adequate private and public dental insurance and plan benefits;
- Low oral health literacy;
- Inability to access or navigate available and convenient oral health services due to a lack of transportation, inability to take time off work, and related issues;
- Maldistribution and shortage of the private and public health dental workforce, including specialists, especially in remote and rural areas;
- Chronic medical conditions that limit mobility and cause physical and cognitive impairment; and
- Lack of awareness of the social implications of poor oral health and the impact of poor oral health on overall health.

While there has been significant progress in the oral health of Americans thanks to effective prevention and treatment efforts, these gains have not been shared by all. Oral

² 2020-2030 Pennsylvania Oral Health Plan

diseases, which can include dental caries (cavities), periodontal (gum) disease, abscesses, oral and pharyngeal cancer, and other maladies, cause acute and chronic pain, disability, and disfigurement for millions of Americans each year.ⁱ

There are effective treatments and preventive strategies that minimize the impact of dental disease, yet access to these benefits is not shared across the commonwealth. By targeting key areas and utilizing evidence-based solutions, Pennsylvania's oral health inequities can be addressed.

Issues and Trends Affecting Oral Health and the PA Coalition for Oral Health

There are critical oral health topics and trends where PCOH needs to be knowledgeable, collaborative, engaged, and sensitive to assure adequate consideration of Pennsylvania residents and providers. These issues continue to shape health delivery services and the oral health of residents. When considering growth and expansion, PCOH will focus its efforts on activities that contribute to the knowledge and skills of oral health care providers and advocates.

Issues and trends in which PCOH will continue to be engaged and/or seek to expand current activities include:

- A continuous assessment of the gaps in the oral health safety net and the specific barriers to high quality, affordable health care services;
- Oral health workforce development;
- Access to quality dental providers with an emphasis on under-resourced populations;
- The spread of water systems which optimally fluoridate public water;
- Quality improvement and performance management;
- Dental emergency services;
- The increasing use of data to drive and advance change;
- Population health data collection, analysis, and community health improvement;
- Oral health transformation and redesign, and associated strategy implementation;
- The consolidation of health care services and providers;
- Federal and state payment and delivery systems reform initiatives;
- Teledentistry, health information exchanges, electronic health records, broadband access, and high-speed data transmissions systems; and
- The economic considerations of oral health and oral health services.

GOALS FOR 2026-2028

In the next three years, PCOH will continuously assess current and emerging initiatives to meet the evolving needs of oral health care delivery systems and residents as health care transforms to provide high quality care, achieve population health priorities, and reduce health care expenditures. Our efforts will focus on the following five key goals and strategies.

I. Advance and Advocate for Oral Health Policy and Infrastructure Across All Systems

- Expand visibility with elected officials through oral health champions in the Pennsylvania General Assembly.
- Promote primary care and oral health interprofessional development.
- In collaboration with partners, lead and support oral health planning at the state department and administration levels.
- Expand existing and identify new opportunities for public policy engagement on oral health workforce, planning, payment, provider to population ratios, and other issues as identified.

II. Improve the Oral Health Status of Pennsylvania's Under-resourced Populations

- Advocate for public and commercial insurance coverage of comprehensive oral health insurance benefits for under-resourced populations.
- Assure that network adequacy and appointment standards are met by managed care organizations and the state Medicaid office.
- Increase the complement of oral health providers serving under-resourced populations, including the provision of trauma-informed care.
- Collaborate with partners at the state and local levels on advocacy, education, and outreach efforts and develop new collaboratives to meet identified needs.
- Identify and/or expand existing opportunities to provide oral health care education with an emphasis on under-resourced individuals and families.
- Assess the needs of populations to include the medically under-resourced, the un- and under-insured, individuals with intellectual and developmental disabilities, geographically-isolated individuals, children and youth, older adults, and others.

III. Support Pennsylvania's Oral Health Workforce

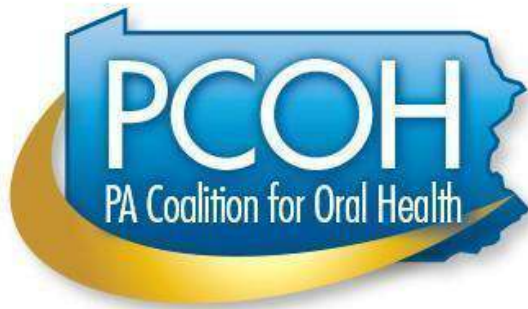
- Support the exploration and development of new models of oral health care delivery, including trauma-informed care.
- Assure that all oral health providers can practice to the full extent of their licensure.
- Advocate for the expansion of oral health training programs that focus on the full complement of providers.
- Partner with dental and dental hygiene programs and state and national provider associations to address oral health workforce challenges.
- Collaborate with organizations to recruit and retain oral health providers.
- Expand existing new partnerships and develop new partnerships that focus on the integration of oral health and primary care and address quality of care metrics.
- Participate in oral health education, outreach, planning, development, and implementation at the local, state, and federal levels.

IV. Advocate for Access to Optimally Fluoridated Water for All Pennsylvanians

- Broaden existing and develop new data sets on fluoridated water across the state and create maps and other resources to highlight needs.
- Identify communities at risk for loss of fluoridated water.
- Expand education, outreach, and advocacy efforts on the importance and cost-effectiveness of optimally fluoridated water.
- Seek opportunities to address improved public notice requirements in regard to ceasing water fluoridation.

V. Expand Organizational Infrastructure and Operations to Support Activities

- Secure funding and diversify programs and funding sources to address emerging issues.
- Further develop PCOH multi-media communications strategies.
- Increase partnerships with relevant agencies and organizations at the state, local, and national levels to advance policy and program development.
- Engage representatives of broad areas of focus to expand the reach of PCOH.
- Support staff professional and skill development.



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PROGRAMS AND ACTIVITIES 2026-2028

1. Supporting Pennsylvania oral workforce development
 - a. Participate in and assist in developing a dental career pipeline
 - b. Update a directory of dental programs
 - c. Promote dental public health careers
 - d. Educate current dental professionals on current and emerging dental public health topics
 - e. Promote and educate new dental workforce (i.e., certified community health workers)

2. Improving oral health for Pennsylvania's under-resourced populations
 - a. Increase and ensure dental access for persons with disabilities
 - b. Increase and ensure dental access for residents in dental health professional shortage areas
 - c. Increase and ensure dental access for pregnant people and children 0-5
 - d. Increase and ensure dental access for Medicaid families
 - e. Increase the number of dental providers accepting Medicaid and billing in a meaningful way
 - f. Support systems that serve as a health care safety net

3. Advancing and advocating for oral health policy and infrastructure across all systems
 - a. Restore and enhance adult dental benefits in Medicaid
 - b. Ensure proper network adequacy for the Medicaid provider network
 - c. Ensure access to oral health services in schools by increasing number of programs
 - d. Evaluate school dental health programs and mandates
 - e. Secure dedicated spending in state budget for oral health initiatives
 - f. Monitor dental law and Department of State
 - g. Use data to guide all policy work and evaluate program effectiveness

4. Advocating for community water fluoridation
 - a. Develop relationships with water systems
 - b. Promote fluoridation to decision makers, including state departments
 - c. Promote water fluoridation training for operators

- d. Protect communities facing fluoridation rollbacks
 - e. Build trust relationships in communities with tap water
 - f. Empower stakeholders to be fluoride advocates in their communities
5. Expand Organizational Infrastructure and Operations to Support Activities
- a. Increase the number of individual and organizational stakeholders to expand reach
 - b. Provide stakeholders with accountability of belonging and expectation for active participation
 - c. Add staff, including a dental access coordinator and admin

Partnerships

PCOH collaborates with organizations, governmental agencies, and educational institutions in the state including these important partners:

- Center for Rural Pennsylvania
- Hospital and Healthsystem Association of Pennsylvania
- Pennsylvania Academy of General Dentistry
- Pennsylvania American Water Works Association
- Pennsylvania Area Health Education Centers
- Pennsylvania Association of Community Health Centers
- Pennsylvania Association of Community Health Workers
- Pennsylvania Association of Managed Care Organizations
- Pennsylvania Cancer Coalition
- Pennsylvania Charitable Healthcare Coalition
- Pennsylvania College of Emergency Physicians
- Pennsylvania Chapter of the American Academy of Pediatrics
- Pennsylvania Dental Assistants Association
- Pennsylvania Dental Association
- Pennsylvania Dental Hygienists' Association
- Pennsylvania Department of Education
- Pennsylvania Department of Environmental Protection
- Pennsylvania Department of Health
- Pennsylvania Department of Human Services
- Pennsylvania Department of State
- Pennsylvania Head Start Association
- Pennsylvania Health Occupations Students of America
- Pennsylvania Municipal Authorities Association
- Pennsylvania Office of Rural Health
- Pennsylvania Public Health Association
- Pennsylvania Rural Health Association
- Pennsylvania School-Based Health Alliance
- Pennsylvania Society of Oral and Maxillofacial Surgeons
- Water Works Association of Pennsylvania

Academic institutions, include the following colleges and universities in Pennsylvania:

- Community College of Philadelphia
- Drexel University
- Fortis Institute
- Harcum College
- Harrisburg Area Community College
- Lancaster County Career and Technology Center
- Luzerne County Community College
- Manor College
- Mercyhurst University
- Montgomery County Community College
- Northampton Community College
- Pennsylvania College of Technology
- Temple University
- University of Pittsburgh School of Dental Medicine
- University of Pennsylvania
- Westmoreland County Community College

National partners include:

- American Academy of Pediatrics
- American Dental Association
- American Fluoridation Society
- American Network of Oral Health Coalitions
- CareQuest Institute for Oral Health
- Community Catalyst
- Families USA

