

***More Than a Toothache:
Addressing Oral Health Needs
Through Efforts to Improve
Coverage, Access and Quality***

Patrick Finnerty (DentaQuest Foundation)

Suzanne Heckenlaible (Delta Dental Foundation of Iowa)

Karen Lewis (Washington Dental Service Foundation)



Agenda

- Patrick
 - Oral Health 2020 Initiative
 - Donated Dental Services
 - Give Kids a Smile[®]
- Suzanne
 - ACL/OWH Older Adult Program Database & Community Guide
- Karen
 - Oral Health of the Future

Oral Health 2020 Network

Includes Organizations Such As....



**ORAL
HEALTH
FOR ALL
2020**



- 33 statewide networks
- 37 State Primary Care Associations
- 20 "Grassroots" organizations in 6 states
- Grantees at national, state and community level
- 1,000 registered users of OH2020 web-based collaboration tool

TARGET

The 10 largest school districts have incorporated oral health into their systems

TARGET

At least 30 states have an extensive Medicaid adult dental benefit

ORAL HEALTH ACROSS THE LIFESPAN

GOAL
Eradicate dental disease in children

GOAL
Incorporate oral health into the primary education system

GOAL
Include an adult dental benefit in publicly funded health coverage

Oral health is essential to lifelong health and wellbeing.
Improved health equity results in greater social justice

GOAL
Integrate oral health into person-centered healthcare

GOAL
Improve the public perception of the value of oral health to overall health.

GOAL
Build a comprehensive national oral health measurement system

ORAL HEALTH AS PART OF OVERALL HEALTH

TARGET

Oral health is increasingly included in health dialogue and public policy.

TARGET

Medicare includes an extensive dental benefit

TARGET

With the closing of disparity gaps, 85% of children reach age 5 without a cavity

TARGET

Oral health is integrated into at least 50% of emerging person-centered care models

TARGET

A national and state-based oral health measurement system is in place

OH 2020 Vision

**ORAL
HEALTH
FOR ALL
2020**



OH2020 Impact Potential – By the Numbers

GOAL

Eradicate dental disease in children

GOAL

Incorporate oral health into the primary education system

GOAL

Include an adult dental benefit in publicly funded health coverage

GOAL

Build a comprehensive national oral health measurement system

GOAL

Integrate oral health into person-centered healthcare

GOAL

Improve the public perception of the value of oral health to overall health

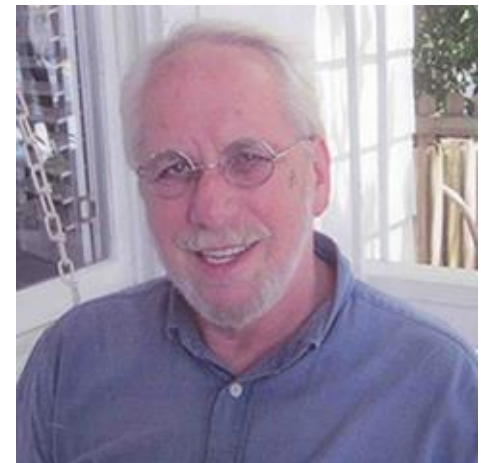
- Low-income (Medicaid-enrolled) adults without comprehensive dental coverage: **11.2 million**
- Medicare beneficiaries: **49.4 million growing to 81.5 million by 2030**
- Children enrolled in the 10 largest school districts: **3.8 million**
- Children under the age of 5: **21 million**
- Children to be born between now and 2020: **26 million**

Donated Dental Service (DDS)



Dental Lifeline
Network®

More than Dentistry. Life.®



- DDS Program is coordinated nationally by Lifeline Network, and administered locally in each state
 - State Program Coordinators connect patients with volunteer dentists and labs
- **Provides free, comprehensive dental treatment** to persons who cannot afford dental care and have a permanent disability, are 65 or older, or are medically fragile
- DDS operates through a volunteer network of more than 15,000 dentists and 3,700 dental labs across the United States

Donated Dental Services (DDS)

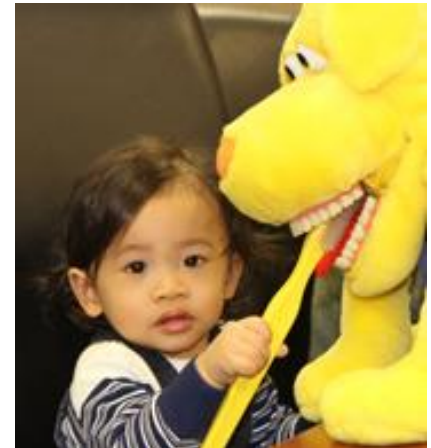
- Since its inception in 1985, DDS has provided more than \$330 million in donated dental therapies, and served 117,000 people
 - FY 2015-2016: 7,103 patients received \$26.7 M in treatment and lab services
- Most, but not all, states offer DDS program services
- Due to long waiting lists/high demand for services, some states periodically close applications in some or all counties
 - More than 17,000 people on waiting list
 - <https://dentallifeline.org/our-state-programs/> (website for information on DDS in your state)



Give Kids a Smile®

- GKAS is sponsored by the ADA Foundation
- Launched nationally by the American Dental Association in 2003, more than 5.5 million underserved children have received free oral health services.
- Free services are provided by volunteers including approximately 10,000 dentists annually, along with 30,000 other dental team members.
- Centerpiece to National Children's Dental Health Month (February)

ADA Foundation®
Charitable Assistance | Access to Care | Research | Education



Give Kids a Smile®

- GKAS programs are offered by local volunteers (dentists, dental teams, community partners)
- GKAS events generally are focused on:
 - Education,
 - Screening, and/or
 - Treatment
- ADA Foundation provides a comprehensive Planning Guide to help plan and conducts GKAS events
- Find a GKAS event near you
<http://ebusiness.ada.org/adaf/find-dental-care-for-your-kids.aspx>

Help Your Community Smile: Start or Enhance a Community Oral Health Program for Older Adults

Suzanne Heckenlaible,
Delta Dental of Iowa Foundation

- **Purpose:** Identify and promote vetted, low-cost, community-based oral health programs for older adults
 - Oral Health Program Database
 - Community Guide to Adult Oral Health Program Implementation (Oral Health Guide)



Website Demo

Visit the website at <https://oralhealth.acl.gov>

Key Project Components

1. Oral Health Programs Database

Searchable database of community-based oral health programs

2. Community Guide to Adult Oral Health Program Implementation (Oral Health Guide)

How-to guide that provides key steps for communities interested in starting or enhancing an oral health program for older adults

Enter a keyword or keywords to search for a program:

▼ **Age**

- 0-17 (Children and Youth)
- 18-60 (Adult)
- 60+ (Older Adult)

▼ **Specific Populations**

- Homeless individuals
- Individuals with intellectual and/or developmental disabilities
- Individuals with physical disabilities
- Individuals with specific or complex medical conditions
- Individuals with low income
- Individuals with no dental insurance
- Individuals with Medicaid
- Veterans
- Refugees/immigrants

▶ **Geography**

▶ **Service Delivery Setting**

▶ **Service Delivery Model**

▶ **Staffing**

▼ **Payment for Care**

- Medicaid
- No charge to client
- Sliding fee scale
- Out of pocket
- Commercial dental insurance

▶ **Program Funding**

▶ **Dental and Oral Health Services**

▼ **Other Program Services**

- Referrals to dental and oral health services
- Care coordination/care management
- Patient education
- Caregiver education
- Provider education
- Advocacy/coalition

▶ **Integration with Services**

Submit

Clear

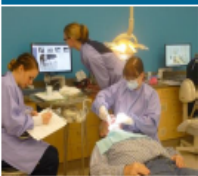


Senior Dental Days Grand Rapids, Michigan

Program Overview

Senior Dental Days, organized by the Area Agency on Aging of Western Michigan (AAAWM), is an annual event that serves low-income older adults in Grand Rapids, Michigan and the surrounding areas. AAAWM works with nonprofit agencies to identify and invite older adults based on financial need. Participants receive free dental cleanings, x-rays, screenings, and referrals to a permanent dental home. The events are staffed by volunteer dental students, dental school faculty, dentists, hygienists, and dental assistants.

Program History and Development



Senior Dental Days 2014 at Grand Rapids Community College

Senior Dental Days began in 2011 as a partnership between AAAWM, the Coalition for Oral Health for the Aging (COHA), and Dr. Elisa Ghezzi. AAAWM recruits and schedules participants, completes forms, and arranges meals and transportation for volunteers. Grand Rapids Community College (GRCC) staff recruits hygienists and obtains use of a facility and equipment. In addition, GRCC Dental Clinic provides space for the event and needed supplies. Hygienists and dental assistants can earn continuing education units by participating in the event; this was approved by the state of Michigan after Dr. Ghezzi initiated conversations with legislators.

Program Sustainability

- Senior Dental Days is funded by grants from the Delta Dental Foundation, the Michigan Dental Association Foundation, the West Michigan Dental Society, Grand Rapids Community College, Area Agency on Aging of Western Michigan, and Health Intervention Services – Grand Rapids.
- The entirety of the program's funding comes from foundation grants.
- One hundred dental students, dental school faculty, dentists, hygienists, dental assistants, and AAAWM staff volunteered their time in 2014.
- The annual budget of the program is \$2,000.

Program Impact

- In 2014, the program served 42 older adults during the one-day event.
- Senior Dental Days surveys both volunteers and participants regarding program effectiveness and satisfaction.
- Awareness was raised in Kent County, Michigan about the continuing need for accessible, low-cost dental care for older adults.

*"You all made me feel so welcomed and cared for, this day truly was a blessing."
– Individual who received dental care at
Senior Dental Days 2013*

Program Contact Information

Program Website: http://www.aaawm.org/organizational_news/tag/Dental

Visit the website at <https://oralhealth.acl.gov>

- All program profiles include:
 - Program overview
 - Website link
 - Information on program model, target population, services delivered, etc.
- *Featured* program profiles include additional information on:
 - Program history and development
 - Program sustainability
 - Program impact

Program Profiles (Continued)

Sample second page of all program profiles

Program Features		
<i>Note: A checked box below indicates an existing program feature.</i>		
<p>Age</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> 0-17 (Children and Youth) <input checked="" type="checkbox"/> 18-60 (Adult) <input checked="" type="checkbox"/> 60+ (Older Adult) <p>Specific Populations</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Homeless individuals <input checked="" type="checkbox"/> Individuals with intellectual and/or developmental disabilities <input checked="" type="checkbox"/> Individuals with physical disabilities <input checked="" type="checkbox"/> Individuals with specific or complex medical conditions <input checked="" type="checkbox"/> Individuals with low income <input checked="" type="checkbox"/> Individuals with no dental insurance <input checked="" type="checkbox"/> Individuals with Medicaid <input checked="" type="checkbox"/> Veterans <input checked="" type="checkbox"/> Refugees/immigrants <p>Geography</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Rural <input checked="" type="checkbox"/> Urban <p>Service Delivery Setting</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Dental school <input checked="" type="checkbox"/> Community/safety net clinic <input checked="" type="checkbox"/> Private dental office <input checked="" type="checkbox"/> Long-term care facility <input checked="" type="checkbox"/> Senior center/community center <input type="checkbox"/> Private residence <input type="checkbox"/> Fairgrounds/stadium/parking lot <input type="checkbox"/> Church <input checked="" type="checkbox"/> School <input type="checkbox"/> Homeless shelter <input type="checkbox"/> Public housing 	<p>Service Delivery Model</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Dental clinic model (e.g. permanent setting) <input checked="" type="checkbox"/> Mobile-portable model <input checked="" type="checkbox"/> Eligibility and enrollment model (e.g. referrals, care coordination) <input checked="" type="checkbox"/> Virtual model (e.g. telehealth) <input type="checkbox"/> Event-based model <input type="checkbox"/> Outreach and education model <p>Staffing</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Dentist <input checked="" type="checkbox"/> Dental hygienist <input checked="" type="checkbox"/> Dental therapist <input checked="" type="checkbox"/> Dental assistant <input checked="" type="checkbox"/> Dental/dental hygiene students <input checked="" type="checkbox"/> Nursing staff <input type="checkbox"/> Community health workers <input checked="" type="checkbox"/> Non-dental clinical staff <input checked="" type="checkbox"/> Non-clinical staff <p>Payment for Care</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medicaid <input checked="" type="checkbox"/> No charge to client <input checked="" type="checkbox"/> Sliding fee scale <input checked="" type="checkbox"/> Out of pocket <input checked="" type="checkbox"/> Commercial dental insurance <p>Program Funding</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Foundation/organization grant <input checked="" type="checkbox"/> Public funding (e.g. local, state, federal) <input checked="" type="checkbox"/> Private donations (e.g. individuals, businesses) 	<p>Dental and Oral Health Services</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Emergency services <input checked="" type="checkbox"/> Basic services <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Screenings <input checked="" type="checkbox"/> Cleanings <input checked="" type="checkbox"/> Fluoride varnish <input checked="" type="checkbox"/> Sealants <input checked="" type="checkbox"/> X-rays <input checked="" type="checkbox"/> Comprehensive services <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Fillings <input checked="" type="checkbox"/> Scaling/root planing <input checked="" type="checkbox"/> Extractions <input checked="" type="checkbox"/> Oral surgery <input checked="" type="checkbox"/> Root canals <input checked="" type="checkbox"/> Dentures, partials, relines, repairs <input checked="" type="checkbox"/> Crowns <input checked="" type="checkbox"/> Bridges <input type="checkbox"/> Orthodontics <p>Other Program Services</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Referrals to dental and oral health services <input checked="" type="checkbox"/> Care coordination/care management <input checked="" type="checkbox"/> Patient education <input checked="" type="checkbox"/> Caregiver education <input checked="" type="checkbox"/> Provider education <input checked="" type="checkbox"/> Advocacy/coalition <p>Integration with Services</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Medical services <input checked="" type="checkbox"/> Behavioral health services <input type="checkbox"/> Vision services <input checked="" type="checkbox"/> Pharmacy services <input checked="" type="checkbox"/> Transportation services <input checked="" type="checkbox"/> Translation services <input checked="" type="checkbox"/> Nutrition services

Key Project Components

- 1. Oral Health Programs Database**
- 2. Community Guide to Adult Oral Health Program Implementation (Oral Health Guide)**

How-to guide that provides key steps for communities interested in starting or enhancing an oral health program for older adults

Community Guide to Adult Oral Health Program Implementation (Oral Health Guide)

- Includes detailed steps for program design and implementation, interviews with featured programs, and interactive resources
- Content focused to help communities:
 - ❑ Conduct a needs assessment
 - ❑ Develop a vision, a mission, and goals
 - ❑ Establish partnerships
 - ❑ Design the program
 - ❑ Finance the program
 - ❑ Implement the program
 - ❑ Evaluate the program
 - ❑ Ensure sustainability of the program

Oral Health Guide Website Content

- Secure funding through an endowment, a planned giving arrangement, or a deferred gift. An endowment is a monetary gift invested on the program's behalf and the interest of which may be used as operating income. A planned giving arrangement is a donation acquired through wills, trusts, and other forms of wealth, whereas a deferred gift is an arrangement that becomes available to the program at a future date (e.g., at the donor's death).

"There is a category of funders that are not necessarily thinking of oral health as a health issue. Tell them it is related to health. If they're concerned about overall wellness, they should be concerned about oral health too."
Dr. Vyan Nguyen, Gary and Mary West Foundation

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Establish Strategic Partnerships

- Gather input from key stakeholders (e.g., current funders, staff, volunteers, clients) on potential strategies and how they align with your vision, mission, and goals. For examples of **potential strategies**, see Chapter 46 in the University of Kansas's Community Tool Box.
- Adopt a multipronged approach, and attract funding from a variety of different sources, reducing the program's ending if one funding source dries up.
- Leverage existing resources and skills, either within your organization or among partners. For example, hire people with grant writing skills to prepare grant applications, or use people with experience working with legislators to attract state funding.
- Consider sharing resources, such as facility space, dental equipment, or staff (e.g., paid employees, volunteers, students), with another organization, or become a line item in the existing budget of the organization or entity. See the University of Kansas's Community Tool Box for more information on **a line item in an existing budget**.

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Develop Key Messages

- Identify all potential audiences that might care about your program's results, including communities that aren't directly concerned with oral health (e.g., media outlets, local hospitals). Find out what each audience or audiences and how they'll use your key message or success story.

combination of these prominent channels.

- Consider writing a press release to share your program findings. See the University of Kansas's Community Tool Box, **Chapter 6.3**, for guidance on developing a press release and for a press release template [here](#).

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Program Spotlight: West Virginia Health Right

West Virginia Health Right's dental clinic opened in 2001, when a group of community leaders approached the West Virginia Health Right medical center, citing the need for oral health care in the community. This case study provides additional information on how to sustain a program based on the experiences of this clinic.

Through careful planning and consistent applications submitted every year, the dental clinic achieved sustainability with funding from more than 50 grants. The clinic tracks many client health and use metrics to demonstrate to funders the program's effects and cost savings. The program also emphasizes that gaining buy-in from local businesses, such as hospitals, which have an economic or social stake in older adults' oral health is critical to securing consistent funding.

In addition, volunteerism, the program insists, accounts largely for its sustainability. Without these volunteers, the clinic wouldn't be able to operate because most of the program funding is used to pay for equipment and supplies. To keep volunteers engaged, the clinic mails a quarterly newsletter with client success stories, hosts volunteer appreciation events with awards ceremonies, and sends personally written birthday cards from the CEO. The clinic also maintains an informal policy of placing volunteer dental staff's needs and interests above everything else in its day-to-day operations. This policy includes transcribing electronic health records into paper-based records for dentists who prefer the latter and coaching clients to voice concerns directly to the program staff rather than to the dentists.

Through planned and routine applications to public and private payers, as well as deliberate relationship-building with volunteers, West Virginia Health Right's dental clinic has built a sustainable oral health program in the community.

Key Resources

Example of key resource included in the Oral Health Guide

The Dentists' Partnership

Guidelines for launching in your own community.

Step	Activity	Description/Notes
Step 1	Identify the unmet need or "problem" in your community.	<p>Emergency Room visits for dental diagnoses, waiting lists that exist in your community, turnaway information from dental providers, etc.)</p> <p>The key is to identify that there IS a problem in your community with dental access. You need something measurable against which to mark your progress.</p>
Step 2	Identify who else cares about the issue.	<p>Hospitals, community funders, United Way, dental & hygiene schools, FQHCs, health/dental coalitions, free clinics, private practice dentists, retired dentists, hygienists, community nonprofits working in this area, etc.</p> <p>This work cannot be done without a broad base of support. Don't limit your thinking...invite anyone who might be interested in the work and get them excited and on board.</p>
Step 3	Bring everyone identified in Step 2 together to talk about the issue.	<p>This group can't just talk about the issue...at least some members must be committed to taking action,</p>

Submit a Program

2. Program Information

Program Name *

City

State

Contact Name

Contact Phone Number

Contact Email Address *

Website

Program Description *

3. Program Features

Age

- 0-17 (Children and Youth)
- 18-60 (Adult)
- 60+ (Older Adult)

Specific Populations

- Homeless individuals
- Individuals with intellectual and/or developmental disabilities
- Individuals with physical disabilities
- Individuals with specific or complex medical conditions
- Individuals with low income
- Individuals with no dental insurance
- Individuals with Medicaid
- Veterans
- Refugees/immigrants

Geography

- Rural
- Urban

Service Delivery Setting

- Hospital
- Dental school
- Community/safety net clinic
- Private dental office
- Long-term care facility
- Senior center/community center
- Private residence
- Fairgrounds/stadium/parking lot
- Church
- School
- Homeless shelter
- Public housing

Service Delivery Model

- Dental clinic model (e.g. permanent setting)
- Mobile-portable model
- Eligibility and enrollment model (e.g. referrals, care coordination)

Payment for Care

- Medicaid
- No charge to client
- Sliding fee scale
- Out of pocket
- Commercial dental insurance

Program Funding

- Foundation/organization grant
- Public funding (e.g. local, state, federal)
- Private donations (e.g. individuals, businesses)

Dental and Oral Health Services

- Emergency services
- Basic services
 - Screenings
 - Cleanings
 - Fluoride varnish
 - Sealants
 - X-rays
- Comprehensive services
 - Fillings
 - Scaling/root planing
 - Extractions
 - Oral surgery
 - Root canals
 - Dentures, partials, relines, repairs
 - Crowns
 - Bridges
 - Orthodontics

Other Program Services

- Referrals to dental and oral health services
- Care coordination/care management
- Patient education
- Caregiver education
- Provider education
- Advocacy/coalition



End of Website Demo

Visit the website at <https://oralhealth.acl.gov>

The Future of Oral Health

Karen Lewis, Washington Dental
Service Foundation

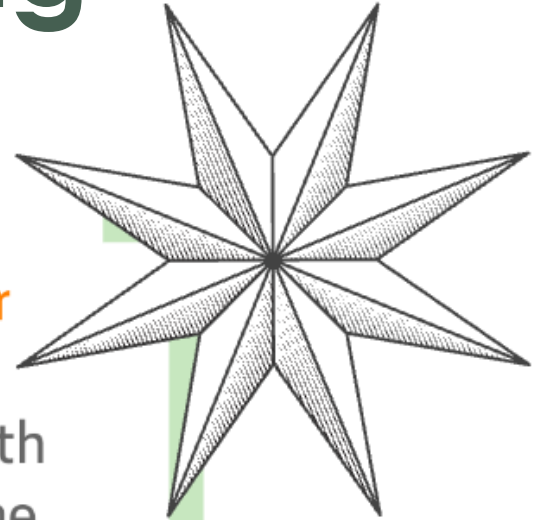
**Washington Dental Service
Foundation**

Community Advocates for Oral Health

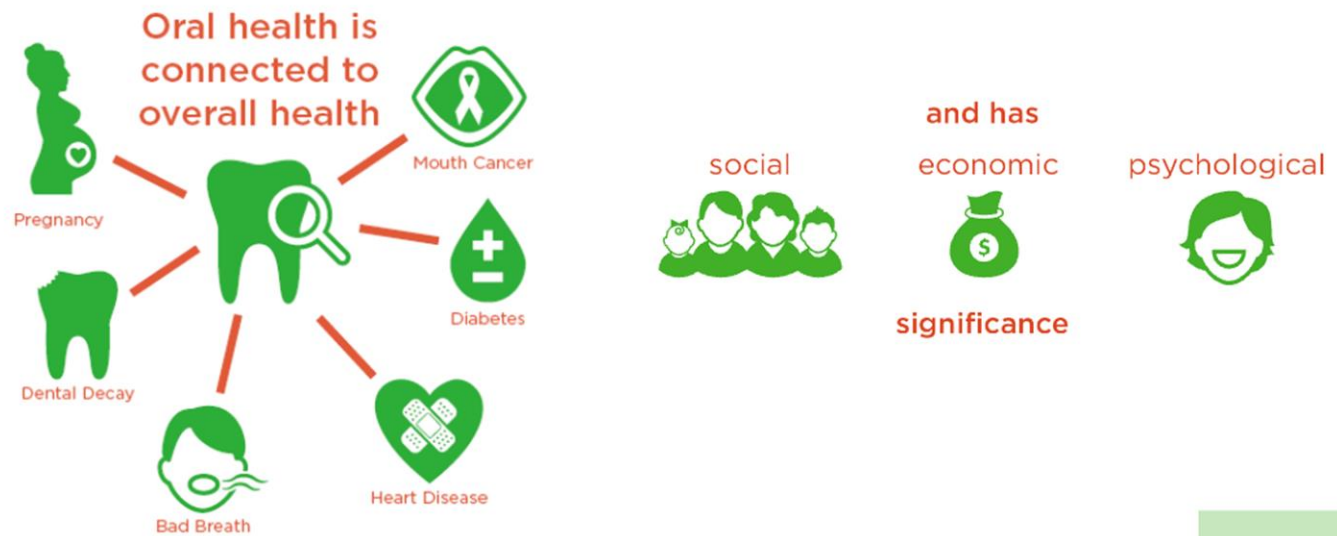
Where we are going

North Star

Better health
for everyone
at less cost



Where are we now



Putting oral health back into well-being

How do we get there

Works well for patients: whole person

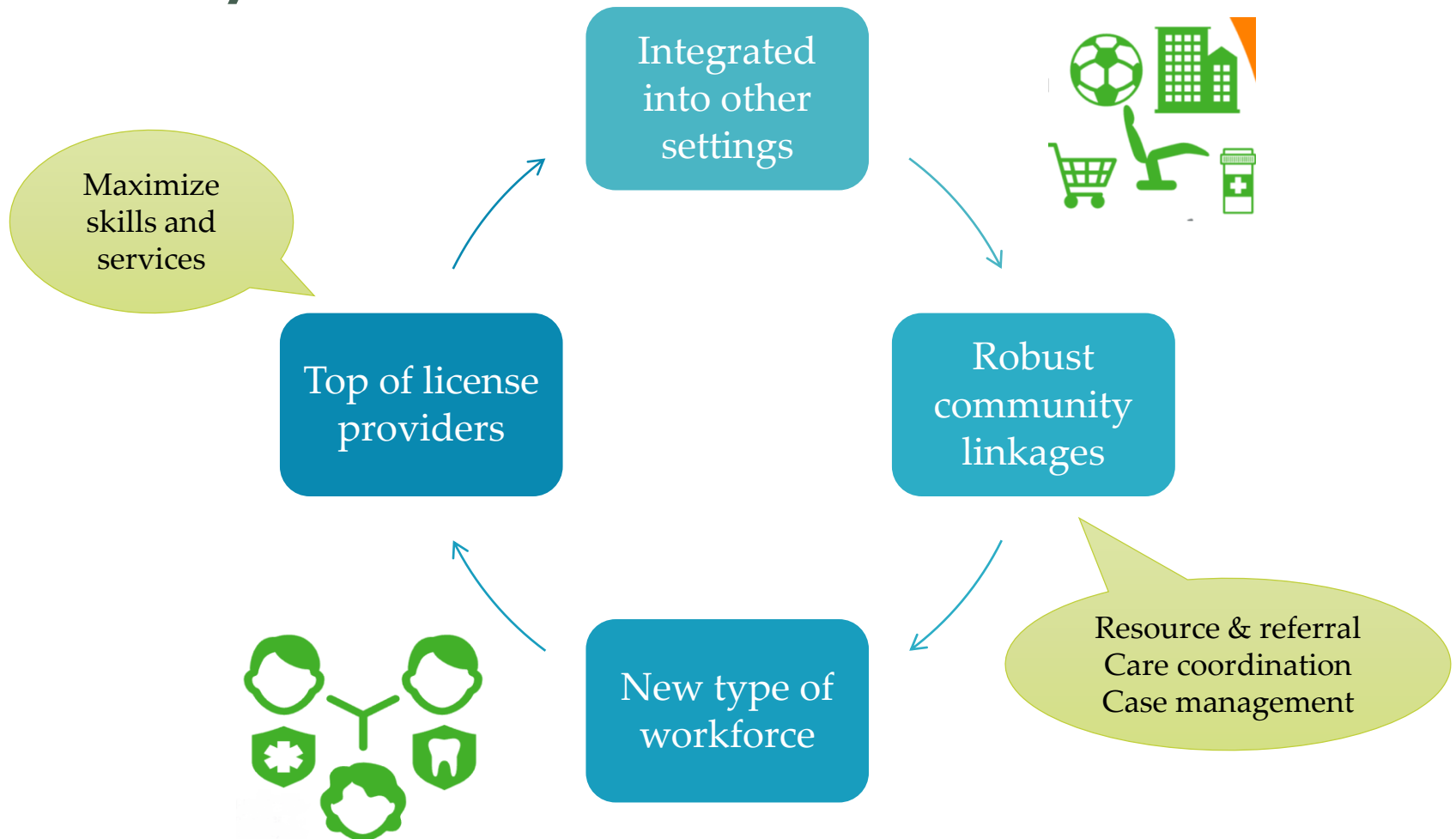


Works well for care providers

Supports the profession of dentistry

- Mentorship and affinity
- Amplified policy voice
- Reduced school debt
- Back-office and practice transformation supports
- Ongoing training
- Peer relationships with primary care providers and share patient care plans
- Insurance administrative burdens reduced
- Financially viable for 1/3 of practice to be Medicaid

Create a system-based model of oral health delivery



Promote healthy habits

Promote



Accelerate

Use data to target, evaluate and build evidence



Dentists advocate for prevention and treating underlying cause of disease

Primary care, behavioral health and long-term care providers use prevention tools



Equip trusted sources to spread tested messages

Change norms

Hey, did you know Medicare includes dental care? Finally!

People in my dental office speak my language!

Now there are free dental screenings for people with diabetes at the pharmacy.

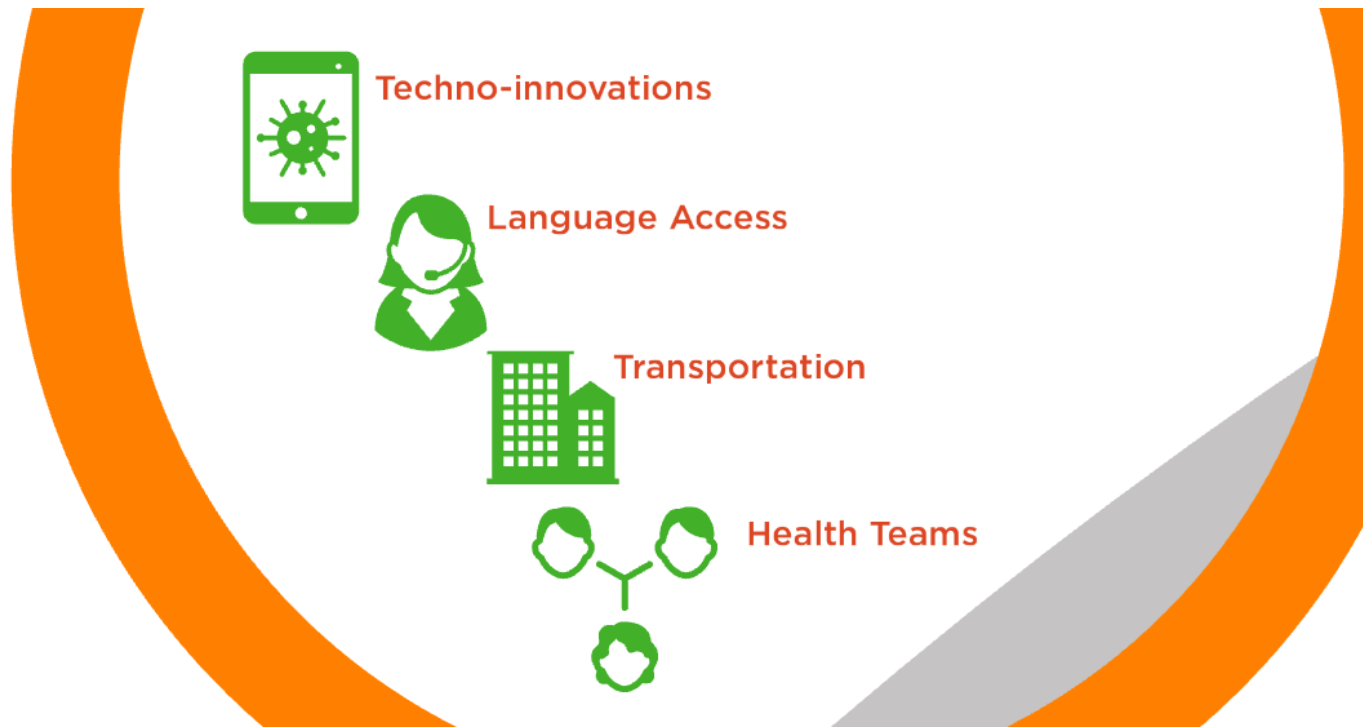
I'll be right back, heading to do errands and get my fluoride treatment before 8.

I can't wait for my next cleaning; it feels so good.

Everyone's doing it!

Eliminate health inequities

Improve access in under-served areas



And spend more on prevention – and oral disease is almost 100% preventable!

- Community Water Fluoride
- Healthy habits campaigns
- Head start and school-readiness policies regarding sealants and wellness visits
- Behavioral health
- Standards of care for chronic disease
- Tele-health infrastructure
- Policy and advocacy
- Taxes on unhealthy habits
- Track oral health outcomes

Making it real in Washington

Increasing access through enhanced reimbursement and community coordination



Access to
Baby & Child
Dentistry™

Children birth
through age 5

Dental champions
in every county

52% Medicaid-
insured receiving
care – up from 21%
since the program
started

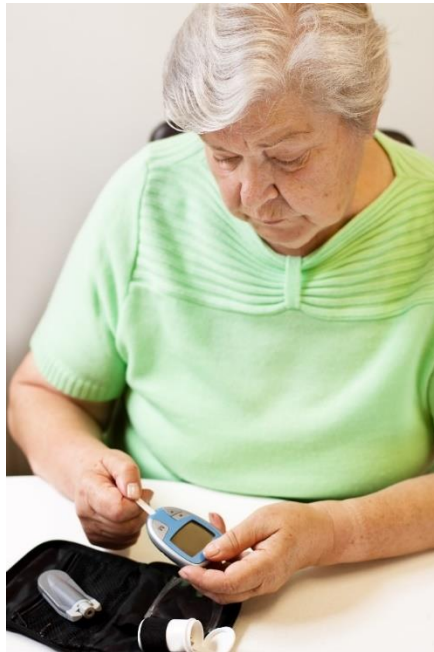


**Washington Dental Service
Foundation**

Community Advocates for Oral Health

Making it real in Washington

*Pending legislation
to increase access for
pregnant women and
people with diabetes*



Making it real in Washington

Dental Therapy in Tribal Settings was the first bill signed by the Governor in 2017



**Washington Dental Service
Foundation**

Community Advocates for Oral Health

Making it real in Washington

Integrating oral health into primary medical care settings

Approximately 50 percent of primary care providers who see children in Washington are certified to address oral health in well-child visits



Making it real in Washington

Creating community supports for education and access

Community Health Workers



Home Care Aides



Making it real in Washington


The Mighty Mouth (TheMightyMouth.org)

Diabetes and Oral Health

Water for Thirst



North Star



Better health
for everyone
at less cost



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