

ORAL HEALTH RESOURCE BULLETIN



VOLUME 35

April 2016

Prepared by
National Maternal and Child Oral Health Resource Center



Cite as

National Maternal and Child Oral Health Resource Center. 2016. *Oral Health Resource Bulletin: Volume 35*. Washington, DC: National Maternal and Child Oral Health Resource Center.

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This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (DHHS) under grant #H47MC00048 in the amount of \$3,000,000 over 5 years. This information or content and conclusions are those of the authors and should not be construed as the official position or policy of HRSA, DHHS, or the U.S. government, nor should any endorsements be inferred.

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Contents

Introduction	ii
Materials	1
Data and Surveillance	1
Policy	3
Professional Education and Practice	6
Professional-Client Tools	9
Program Development	10
Public Awareness and Education	12
Quality Improvement	13

Introduction

The *Oral Health Resource Bulletin* is a periodic publication designed to stimulate thinking and creativity within the maternal and child health community by providing information about selected materials of interest. Each successive volume is intended to supplement rather than replace previous volumes. The materials listed in the bulletin have been incorporated into the National Maternal and Child Oral Health Resource Center (OHRC) library.

OHRC is committed to continuing to provide effective mechanisms for sharing information about materials that enhance oral health programs and services. If you have materials that you feel would be useful for

program development, implementation, or evaluation, please become part of this process. Materials such as conference proceedings, curricula, guidelines, standards, policies, and reports are especially welcome. If you have any materials that you think might be of interest, please send a copy to

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Materials

DATA AND SURVEILLANCE

2013–14 DIGITAL CENSUS REPORT

This report presents findings from a national survey of centers and programs connected with schools to document the role of school-based health centers (SBHCs) in meeting the health care needs of children and adolescents. The report describes the funding sources that support the SBHCs, SBHC policies, and characteristics of schools where SBHCs are located. The analysis and data presented in the report includes SBHCs that provide primary care. Topics include growth; access; comprehensive care, including behavioral health and oral health care; adolescent care; health system partnerships; sustainability; and accountability. [Funded by the Maternal and Child Health Bureau]

Love HL, Schelar E, Taylor K, Schlitt J, Even M, Burns A, Mackey S, Couillard M, Danaux J, Mizzi A, Surti D, Windham D. 2015. *2013–14 Digital Census Report*. Washington, DC: School-Based Health Alliance. 1 v. <http://censusreport.sbh4all.org>.

DENTAL AND ORAL HEALTH SERVICES IN MEDICAID AND CHIP

This report provides state-specific findings on children's use of dental services in Medicaid and the Children's Health Insurance Program. It includes state-specific performance data for two measures: preventive dental services and dental treatment services. The report also summarizes information on managed care quality-monitoring and quality-improvement efforts related to oral health care that were reported in states' external-quality-review technical reports.

U.S. Department of Health and Human Services. 2016. *Dental and Oral Health Services in Medicaid and CHIP*. Washington, DC: U.S. Department of Health and Human Services. 5 pp. <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/quality-of-care/downloads/2015-sr-domain-specific-reports.zip>.

HEALTH INSURANCE MARKETPLACES 2016 OPEN ENROLLMENT PERIOD: FINAL ENROLLMENT REPORT

This issue brief highlights national- and state-level enrollment-related information for the Health Insurance Marketplace open enrollment period for all 50 states and the District of Columbia. An addendum contains detailed state-level tables highlighting cumulative enrollment-related information, including enrollment in stand-alone dental plans. These data are available for states using the HealthCare.gov enrollment and eligibility platform as well as for states using their own platforms.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. 2016. *Health Insurance Marketplaces 2016 Open Enrollment Period: Final Enrollment Report*. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. 3 items. <https://aspe.hhs.gov/sites/default/files/pdf/187866/Finalenrollment2016.pdf>.

METHODS IN ASSESSING NON-TRAUMATIC DENTAL CARE IN EMERGENCY DEPARTMENTS

This report presents findings from a review of studies on the use of emergency departments for nontraumatic oral health conditions and oral health care. The report discusses variations in target populations, outcomes of interest, predictive factors, data sources, and research methods. Recommendations for future research are included.

Manz MC. 2016. *Methods in Assessing Non-Traumatic Dental Care in Emergency Departments*. Reno, NV: Association of State and Territorial Dental Directors. 42 pp. <http://www.astdd.org/docs/ed-dental-care-report-jan-2016.docx>.

THE ORAL HEALTH CARE SYSTEM: A STATE-BY-STATE ANALYSIS

This report provides oral health indicators for each state and the District of Columbia. Topics include oral health care use, oral health status, attitudes and oral health knowledge, fluoridation rates, reimbursement rates, dentist-to-population ratios, and percentages of dentists who participate in Medicaid. Commentary, key findings, data and methods, and data tables are also included.

American Dental Association Health Policy Institute. 2015. *The Oral Health Care System: A State-by-State Analysis*. Chicago, IL: American Dental Association. 166 pp. <http://www.ada.org/~media/ADA/Science%20and%20Research/HPI/OralHealthCare-StateFacts/Oral-Health-Care-System-Full-Report.pdf>.

ORAL HEALTH IN KENTUCKY

This report summarizes literature and data describing the oral health of Kentucky’s population, including the oral health status of particular population groups, oral health service delivery in safety net settings, and the supply and distribution of the oral health work force in the state. Other topics include the geographic and demographic characteristics of Kentucky’s population, the history of oral health in Kentucky, the impact of dental insurance on access to and use of oral health services in the state, and oral health professional shortage areas and safety net providers.

Surdu S, Langelier M, Baker B, Wang S, Harun N, Krohl D. 2016. *Oral Health in Kentucky*. Rensselaer, NY: Center for Health Workforce Studies. 235 pp. http://chws.albany.edu/archive/uploads/2016/02/Oral_Health_Kentucky_Technical_Report_2016.pdf.

ORAL HEALTH IN MICHIGAN

This report describes findings from a literature review and an analysis of data sources describing the oral health status of various population groups in Michigan. Topics include the history of advocacy to improve oral health in Michigan, financing for oral health services, oral health professional shortage areas and safety net providers in the state, and Michigan’s oral health work force.

Langelier M, Surdu S. 2015. *Oral Health in Michigan*. Rensselaer, NY: Center for Health Workforce Studies. 207 pp. http://chws.albany.edu/archive/uploads/2015/07/Oral_Health_MI_Report.pdf.

SUPPLY OF DENTISTS IN THE U.S.: 2001–2015

This report contains data on dentists in the United States. Contents include the number of dentists by state; the number of dentists per 100,000 population; and the supply of dentists by practice, research, or administration area, as well as by age and gender.

American Dental Association. 2016. *Supply of Dentists in the U.S.: 2001–2015*. Chicago, IL: American Dental Association. 1 v. http://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIData_SOD_2015.xlsx?la=en.

UTILIZATION OF ORAL HEALTH SERVICES BY MEDICAID-INSURED ADULTS IN OKLAHOMA, 2012–2013

This report summarizes patterns of oral health care use among adult Medicaid beneficiaries, including pregnant women, in Oklahoma during 2012 and 2013 based on health professional availability and Medicaid coverage. Topics include oral health professionals who serve Medicaid beneficiaries in Oklahoma, Medicaid payment for services provided in dental offices and clinics, distances that Medicaid beneficiaries must travel to obtain oral health services, and a county-by-county analysis of oral health care for Medicaid beneficiaries in the state.

Surdu S, Langelier M, Moore J. 2015. *Utilization of Oral Health Services by Medicaid-Insured Adults in Oklahoma, 2012–2013*. Rensselaer, NY: Oral Health Workforce Research Center. 50 pp. http://www.oralhealthworkforce.org/wp-content/uploads/2015/12/OK_Medicaid_2015.pdf.

POLICY

ADEA UNITED STATES INTERACTIVE LEGISLATIVE TRACKING MAP

This map provides information on state legislation of interest to academic dentistry for all 50 states and the District of Columbia. Users can view the status of bills, upcoming hearing dates, and bill text and author and sponsor information. Users can also view state legislation on topics such as health coverage and financing, fluoride, oral health programs, teledentistry, regulations, and work force.

American Dental Education Association. 2016. *ADEA United States Interactive Legislative Tracking Map*. Washington, DC: American Dental Education Association. 1 v. <http://www.adea.org/legislativemap>.

COMMUNITY HEALTH WORKERS: ROLES AND RESPONSIBILITIES IN HEALTH CARE DELIVERY SYSTEM REFORM

This report reviews health services research findings on community health workers (CHWs) and considers key challenges for CHWs to improve health care delivery, including oral health care delivery. Topics include major roles for CHWs in the health care system, a national profile of CHWs, evidence on the clinical impact of CHWs, the policy impact potential for CHW interventions, opportunities for reimbursement through Medicaid, and state and health-care-innovation models.

Snyder JE. 2016. *Community Health Workers: Roles and Responsibilities in Health Care Delivery System Reform*. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. 23 pp. <https://aspe.hhs.gov/sites/default/files/pdf/168956/CHWPolicy.pdf>.

DENTAL BENEFITS IN HEALTH INSURANCE MARKETPLACES: AN UPDATE ON POLICY CONSIDERATIONS

This brief examines the way the Affordable Care Act structures dental coverage and related implementation challenges. Topics include the impact of decisions to offer pediatric dental coverage through medical plans or stand-alone dental products on affordability and implementation of marketplace systems; state interest in offering optional adult dental coverage; enhancing

data and reporting on access to and purchase of dental coverage; improving outreach, enrollment, and dental plan quality; and the impact of future state and federal decisions about coverage programs on dental coverage through marketplaces, including decisions about federal funding for the Children’s Health Insurance Program.

Cousart C, Snyder A, Mention N. 2015. *Dental Benefits in Health Insurance Marketplaces: An Update on Policy Considerations*. Portland, ME: National Academy for State Health Policy. 7 pp. <http://www.nashp.org/wp-content/uploads/2015/11/Dental-Benefits-11.151.pdf>.

DENTAL INSURANCE COVERAGE FOR RHODE ISLAND ADULTS: AFTER THE IMPLEMENTATION OF THE AFFORDABLE CARE ACT (ACA)

This brief explains why dental insurance coverage matters and describes opportunities for adults, including pregnant women, to obtain dental insurance under the Affordable Care Act. Contents include data on recent dental visits and on dental insurance status among adults in Rhode Island, information about changes in dental insurance coverage for the period 2012–2014 and about who does not have coverage, and recommendations to make dental insurance benefits more affordable and accessible.

Rhode Island Department of Health, Oral Health Program. 2016. *Dental Insurance Coverage for Rhode Island Adults: After the Implementation of the Affordable Care Act (ACA)*. Providence, RI: Rhode Island Department of Health, Oral Health Program. 4 pp. <http://health.ri.gov/publications/databriefs/2014DentalInsuranceCoverageAfterACA.pdf>.

DENTAL PUBLIC HEALTH WHITE PAPERS AND POLICY STATEMENTS

These statements reflect the Association of State and Territorial Dental Directors’ stance on public oral health issues. Topics include community water fluoridation, dental sealants, early childhood caries, first dental visit by age 1, fluoride supplements, fluoride toothpaste, fluoride varnish, health care reform, *Healthy People 2020* and the oral health leading health indicator, integrating oral health education into health-education curricula in schools, integrating oral health into the school health model, nutrition education and healthy eating in school settings, school-based or school-linked mobile or portable services, school-based

dental sealant programs, and state oral health program infrastructure and capacity.

Association of State and Territorial Dental Directors. 2010-. *Dental Public Health White Papers and Policy Statements*. Reno, NV: Association of State and Territorial Dental Directors. Multiple items. <http://www.astdd.org/dental-public-health-resources-committee>.

DIRECT ACCESS

This document provides an overview of states with direct-access programs whereby a dental hygienist can initiate treatment based on his or her assessment of a client's needs without the authorization of a dentist, provide treatment services without the presence of a dentist, and maintain a provider-client relationship. Each state entry includes an authorizing code section, a brief description of methods and services, and special requirements and notes. Maps depicting states that permit direct access to dental hygienists and the progression of direct access are also available.

American Dental Hygienists' Association. 2015. *Direct Access*. Chicago, IL: American Dental Hygienists' Association. 15 pp. http://www.adha.org/resources-docs/7513_Direct_Access_to_Care_from_DH.pdf.

FACT SHEET: THE ORAL HEALTH OF PREGNANT WOMEN

This fact sheet explains why oral health is essential for women during pregnancy and throughout their children's early years. The fact sheet discusses why dental caries is a particular problem for pregnant women, risks linked to poor oral health in pregnant women, the safety of receiving oral health care during pregnancy, the roles that oral health professionals and non-oral-health professionals can play in pregnant women's oral health, Medicaid savings that states could generate by providing dental coverage for pregnant women, and opportunities for preventing oral disease in infants and young children.

Children's Dental Health Project. 2015. *Fact Sheet: The Oral Health of Pregnant Women*. Washington, DC: Children's Dental Health Project. 1 p. https://s3.amazonaws.com/cdhp/End+Cavities/Perinatal+Fact+Sheet_12-3-15.pdf.

HEALTH INVESTMENTS THAT PAY OFF: STRATEGIES TO IMPROVE ORAL HEALTH

This brief outlines oral health interventions to improve population health and the quality of health care and to reduce health care costs. Contents include an overview of the problem, strategies to implement and finance evidence-based interventions, and strategies to support implementation of data collection on interventions. Topics include expanding dental sealant programs; paying primary care health professionals to provide applications of fluoride varnish; updating and investing in community water fluoridation systems; improving data-analysis capabilities; expanding scope-of-practice laws and changing Medicaid reimbursement policies; and considering emerging models for new types of providers, including dental therapists and advanced dental hygienist practitioners.

Wilkniss S, Tripoli S. 2015. *Health Investments That Pay Off: Strategies to Improve Oral Health*. Washington, DC: National Governors Association. 9 pp. <http://www.nga.org/files/live/sites/NGA/files/pdf/2015/1510HealthInvestmentsImproveOralHealth.pdf>.

MEDICAID: KEY ISSUES FACING THE PROGRAM

This report summarizes the U.S. Government Accountability Office's body of work on challenges facing Medicaid and gaps in federal oversight. Contents include recommendations, some of which have been implemented, and key recommendations that have not been implemented. The report describes challenges in maintaining and improving access to high-quality care, including obtaining specialty care or oral health care; transparency and oversight; program integrity; and the federal financing approach.

U.S. Government Accountability Office. 2015. *Medicaid: Key Issues Facing the Program*. Washington, DC: U.S. Government Accountability Office. 60 pp. <http://www.gao.gov/assets/680/671761.pdf>.

MEDICAID'S EARLY AND PERIODIC, SCREENING, DIAGNOSIS AND TREATMENT IN SCHOOLS AND THE FREE CARE RULE

This newsletter describes the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program and opportunities for school districts to significantly expand the range of health care services, including oral

health services, available to students from families with low incomes. Topics include the importance of having sufficient numbers and types of health professionals participating in Medicaid programs, how providing Medicaid services in schools can help to address children's and adolescents' unmet health care needs, and federal guidance on reimbursement for services provided to Medicaid beneficiaries in schools.

Somers S. 2016. Medicaid's Early and Periodic, Screening, Diagnosis and Treatment in Schools and the Free Care Rule. *Health Advocate* 46:1–3. February 2016. <http://www.healthlaw.org/publications/search-publications/2016-2-health-advocate>.

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THE NEED FOR DEFINING A PATIENT-CENTERED DENTAL HOME MODEL IN THE ERA OF THE AFFORDABLE CARE ACT

This report describes medical home and dental home models of care, Affordable Care Act–related health care system changes, and options for integrating oral health services and other health care services. Topics include medical-dental integration approaches, features of highly integrated systems, oral health integration into medical and health home models, integration in training programs, advantages and barriers to integration, and future directions for the patient-centered dental home.

Damiano PC, Reynolds JC, McKernan SC, Mani S, Kuthy RA. 2015. *The Need for Defining a Patient-Centered Dental Home Model in the Era of the Affordable Care Act*. Iowa City, IA: University of Iowa, Public Policy Center. 32 pp. <http://ppc.uiowa.edu/sites/default/files/pchdjul2015.pdf>.

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PUBLIC HEALTH SUPERVISION OF DENTAL ASSISTANTS

This template can be used to document a collaborative agreement between a dentist and a dental assistant to allow the assistant to provide services to individuals in public health settings before being examined by a dentist.

Iowa Department of Public Health, Oral Health Bureau. 2015–. *Public Health Supervision of Dental Assistants*. Des Moines, IA: Iowa Department of Public Health, Oral Health Bureau. <http://idph.iowa.gov/ohds/oral-health-center/resources>.

STATE OF THE SCIENCE: COMMUNITY WATER FLUORIDATION

This report assesses the practice of community water fluoridation (CWF). It describes the history and science of CWF and examines positions for and against CWF. The report also includes case studies of fluoridation practices and policies in six cities (Dallas, Texas; Phoenix, Arizona; Portland, Oregon; Albuquerque, New Mexico; Milwaukee, Wisconsin; Fort Collins, Colorado).

Cornwell DA, McTigue NE, Hayes S. 2015. *State of the Science: Community Water Fluoridation*. Denver, CO: Water Research Foundation. 48 pp. <http://www.waterrf.org/PublicReportLibrary/4641.pdf>.

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TAKING A BITE OUT OF ORAL HEALTH INEQUITIES: PROMOTING EQUITABLE ORAL HEALTH POLICIES FOR COMMUNITIES OF COLOR

This brief highlights oral health disparities within communities of color in California, identifies some causes of disparities, and provides policy recommendations to advance oral health equity in communities of color. Topics include oral health and children, employment, chronic conditions, access to affordable care, work force, and social and environmental inequities.

California Pan-Ethnic Health Network. 2016. *Taking a Bite Out of Oral Health Inequities: Promoting Equitable Oral Health Policies for Communities of Color*. Oakland, CA: California Pan-Ethnic Health Network. 11 pp. https://cpehn.org/sites/default/files/resource_files/cpehn_oral_health_brief_01_16.pdf.

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TALKING POINTS ON ENDING CAVITIES FOR ORAL HEALTH ADVOCATES

This document provides talking points on ways to eliminate dental caries in children. Topics include the consequences of poor oral health on children and their families; costs for families and states; the role of primary care health professionals and other health professionals in providing oral health care; and the need for affordable, comprehensive dental coverage.

Children's Dental Health Project. 2016. *Talking Points on Ending Cavities for Oral Health Advocates*. Washington, DC: Children's Dental Health Project. 2 pp. https://s3.amazonaws.com/cdhp/End+Cavities/ECC+Talking+Points+for+Advocates_final.pdf.

PROFESSIONAL EDUCATION AND PRACTICE

THE BELLWETHER: LEADING LOCAL EFFORTS TO IMPROVE THE NATION'S ORAL HEALTH

This newsletter provides information on national and local oral health activities and on upcoming events and educational materials. The December 2015 issue discusses community water fluoridation, the 2016 American Association for Community Dental Programs (AACDP's) annual symposium, the awarding of AACDP's Myron Allukian Jr. Lifetime Achievement Award for Outstanding Contributing in Community Dental Programs to Harry Goodman and AACDP's John P. Rossetti Community Oral Health Impact Award to Reginald Louie, and new and noteworthy resources. [Funded by the Maternal and Child Health Bureau]

American Association for Community Dental Programs. 2015. *The Bellwether: Leading Local Efforts to Improve the Nation's Oral Health*. Washington, DC: National Maternal and Child Oral Health Resource Center. Semi-annual. <http://www.aacdp.com/publications.html>.

CASE STUDIES OF 8 FEDERALLY QUALIFIED HEALTH CENTERS: STRATEGIES TO INTEGRATE ORAL HEALTH WITH PRIMARY CARE

This report presents case studies of eight federally qualified health centers (FQHCs) across the United States. It describes findings from a project conducted to understand the barriers and facilitators to integration of oral health services into primary care in FQHCs as well as to understand FQHCs' use of different types of oral health professionals to provide access to oral health services within their delivery systems. The report also identifies useful technologies that enable service integration in FQHCs.

Langelier M, Moore J, Baker BK, Mertz E. 2015. *Case Studies of 8 Federally Qualified Health Centers: Strategies to Integrate Oral Health with Primary Care*. Rensselaer, NY: Oral Health Workforce Research Center. 84 pp. <http://www.oralhealthworkforce.org/wp-content/uploads/2015/11/FQHC-Case-Studies-2015.pdf>.

DEFINITIONS, ORAL HEALTH POLICIES, AND CLINICAL GUIDELINES

This resource comprises definitions, policies, and clinical guidelines of the American Academy of Pediatric Dentistry. New, revised, and reaffirmed policies and guidelines address topics such as medically necessary care; work force issues and delivery of oral health services in a dental home; use of fluoride; use of dental bleaching; third-party payer audits, abuse, and fraud; infection control; caries-risk assessment and management; infant oral health care; restorative dentistry; oral surgery; use of antibiotic therapy; and informed consent.

American Academy of Pediatric Dentistry. 2015. *Definitions, Oral Health Policies, and Clinical Guidelines*. Chicago, IL: American Academy of Pediatric Dentistry. Multiple items. <http://www.aapd.org/policies>.

THE DENTAL ASSISTANT WORKFORCE IN THE UNITED STATES, 2015

This report provides a profile of the dental assistant work force. It examines scope of practice statutes and regulations in each state that recognizes the work force. Topics include a profile of the supply and distribution of dental assistants, the scope of practice for dental assistants, a state-level scope of practice assessment, scope of practice findings, and clinical contributions of the dental assistant work force.

Baker B, Langelier M, Moore J, Daman S. 2015. *The Dental Assistant Workforce in the United States, 2015*. Rensselaer, NY: Oral Health Workforce Research Center. 72 pp. http://www.oralhealthworkforce.org/wp-content/uploads/2015/11/Dental_Assistant_Workforce_2015.pdf.

DENTAL HYGIENE PROFESSIONAL PRACTICE INDEX BY STATE, 2014

This report provides information about a study conducted to examine statutes and regulations governing the practice of dental hygiene effective in 2014 by state. The report discusses interest in the scope of practice for dental hygienists and the impact of this scope of practice on the delivery of oral health services.

Langelier M, Baker B, Continelli T, Moore J. 2016. *Dental Hygiene Professional Practice Index by State, 2014*. Rensselaer, NY: Oral Health Workforce Research

Center. 164 pp. http://www.oralhealthworkforce.org/wp-content/uploads/2016/03/DH_Professional_Practice_Index_By_State_2014.pdf.

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GUIDANCE FOR CALCULATING THE DENTAL SEALANT MEASURE IN THE CHILD CORE SET

This brief provides guidance to state Medicaid and Children’s Health Insurance Programs (CHIPs) on calculating the percentage of children ages 6–9 at elevated risk for dental caries who received a sealant on a permanent first molar tooth within the measurement year. Contents include an overview of the dental sealant measure in the Core Set of Children’s Health Care Quality Measures for Medicaid and CHIP (Child Core Set) and data requirements and steps for calculating the measure.

Centers for Medicare & Medicaid Services. 2015. *Guidance for Calculating the Dental Sealant Measure in the Child Core Set*. Baltimore, MD: Centers for Medicare & Medicaid Services. 3 pp. <https://www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/downloads/sealant-measure-brief.pdf>.

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HRSA ORAL HEALTH: ACROSS THE AGENCY

This document provides information about federal programs that provide funding to health centers, states, academic institutions, and other entities to recruit, train, and retain health professionals, including dentists and dental hygienists, in efforts to increase access to oral health care. The document also highlights program efforts to establish benchmarks on the nation’s oral health status and oral health care and to ensure that oral health care is available to people living with HIV/AIDS; mothers, children, and adolescents, including those with special health care needs; and those who receive care at health centers.

Health Resources and Services Administration. 2015. *HRSA Oral Health: Across the Agency*. Rockville, MD: Health Resources and Services Administration. 4 pp. <http://www.hrsa.gov/publichealth/clinical/oralhealth/oralhealthfactsheet.pdf>.

INTERVIEWS OF ORAL HEALTH STAKEHOLDERS IN KENTUCKY: AN EXECUTIVE SUMMARY

This executive summary summarizes common themes derived from telephone interviews with 28 oral health stakeholders in Kentucky between September and November 2015. Common themes discussed include oral health literacy, oral health status, service integration, oral health access, geographic disparities, dental insurance status changes resulting from implementation of the Affordable Care Act, the oral health safety net, school-based and portable oral health programs, the oral health work force, and scope of practice regulations.

Langelier M. 2016. *Interviews of Oral Health Stakeholders in Kentucky: An Executive Summary*. Rensselaer, NY: Center for Health Workforce Studies. 26 pp. http://chws.albany.edu/archive/uploads/2016/02/Kentucky_Interviews_Executive_Summary.pdf.

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ORAL HEALTH LITERACY TOOLKIT

This toolkit provides information and resources for implementing interventions to promote and improve oral health literacy as part of the New York State Department of Health prevention agenda. Contents include information about the magnitude of the problem, the importance of oral health literacy, the potential reach and relative impact of interventions to improve oral health literacy, and suggested interventions for specific sectors.

New York State Oral Health Center of Excellence. 2015. *Oral Health Literacy Toolkit*. Rochester, NY: New York State Oral Health Center of Excellence. 55 pp. <https://nysoralhealth.squarespace.com/s/Oral-Health-Literacy-Toolkit.pdf>.

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A PROFILE OF ORAL HEALTH PROVIDERS IN NEW YORK STATE

This research brief provides information about the dentist and dental hygienist workforce in New York. In addition to presenting highlights, the brief offers background information, including information about factors that contribute to oral health disparities, as well as information about the data and methods. The brief also presents findings, including findings related to the concentration of dentists vs. dental hygienists in the state and the concentration of dentists in urban vs. rural areas, the diversity of the oral health work force

compared with the diversity of the state's population, the ages of dentists and dental hygienists in the state, and the educational attainment of dental hygienists.

Continelli T, Bruce C, Roberts E, Martiniano R. 2015. *A Profile of Oral Health Providers in New York State*. Rensselaer, NY: Center for Health Workforce Studies. 4 pp. http://chws.albany.edu/archive/uploads/2015/11/Oral_Health_NY_2015.pdf.

PROMOTING ORAL HEALTH CARE DURING PREGNANCY: AN UPDATE ON ACTIVITIES—FEBRUARY 2016

This issue offers information about key strategies that states and jurisdictions have proposed for addressing the Title V Maternal and Child Health Block grant national performance measure 13A—the percentage of women who had a dental visit during pregnancy. Strategies are divided into the following categories: partnership and collaboration, education and training, and access to care. The issue also features new resources related to oral health care during pregnancy for health professionals and consumers. [Funded by the Maternal and Child Health Bureau]

National Maternal and Child Oral Health Resource Center. 2016. *Promoting Oral Health Care During Pregnancy: An Update on Activities—February 2016*. Washington, DC: National Maternal and Child Oral Health Resource Center. 4 pp. http://mchoralhealth.org/PDFs/OralHealthPregnancyUpdate_2_2016.pdf.

PROMOTING ORAL HEALTH CARE DURING PREGNANCY: AN UPDATE ON ACTIVITIES—OCTOBER 2015

This issue offers information about the Maternal and Child Health Bureau's Perinatal and Infant Oral Health Quality Improvement national initiative, the goal of which is to reduce the prevalence of oral disease in pregnant women and infants through improved access to high-quality oral health care and increased use of oral health services. State projects that are part of this initiative are discussed. The issue also features new resources related to oral health care during pregnancy for health professionals and consumers. [Funded by the Maternal and Child Health Bureau]

National Maternal and Child Oral Health Resource Center. 2016. *Promoting Oral Health Care During Pregnancy: An Update on Activities—October 2015*. Washington, DC: National Maternal and Child Oral Health Resource Center. 4 pp. http://mchoralhealth.org/PDFs/OralHealthPregnancyUpdate_10_2015.pdf.

SYMPOSIUM ON CARIES IN AMERICAN INDIAN AND ALASKA NATIVE CHILDREN

This document summarizes a symposium held on August 21–22, 2015, in Hood River, Oregon, to highlight practical and achievable actions to improve the oral health status of American Indian and Alaska Native (AI/AN) children and other children at high risk for severe dental caries. The purpose of the symposium was to define, understand, and attempt to ameliorate severe caries in the primary dentition, which many young AI/AN children experience. Topics include implications of new information on caries in children, agency and organizational collaboration, and policy recommendations for the Indian Health Service Division of Oral Health.

QUEST in AI/AN Children. 2015. *Symposium on Caries in American Indian and Alaska Native Children*. Chicago, IL: American Dental Association. 23 pp. <http://www.ada.org/~media/ADA/Education%20and%20Careers/Files/QUEST%202015%20Symposium%20FINAL%20REPORT20151202t154929.ashx>.

TIPS FROM FORMER SMOKERS: DENTAL PROFESSIONALS—HELP YOUR PATIENTS QUIT

These resources provide guidance for oral health professionals on helping their clients quit smoking. Contents include a fact sheet on how to support clients, a hand-out on reasons to quit, a continuing education training, answers to frequently asked questions such as how quit-lines work and how effective they are, an intervention card that lists steps for conducting brief interventions with clients, and supplemental materials.

Centers for Disease Control and Prevention, Division of Oral Health. 2015. *Tips from Former Smokers: Dental Professionals—Help Your Patients Quit*. Atlanta, GA: Centers for Disease Control and Prevention. Multiple items. <http://www.cdc.gov/tobacco/campaign/tips/partners/health/dental>.

WEB-BASED TRAINING ON FORM CMS-416 DENTAL DATA REPORTING

These modules for state Medicaid and Children’s Health Insurance Program (CHIP) staff and their contractors focus on collecting and reporting data related to preventive dental service use by infants, children, and adolescents up to age 21 enrolled in Medicaid or CHIP. Contents include an overview of the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefit; an overview of Form CMS-416; and how to use Form CMS-416 data.

Centers for Medicare & Medicaid Services. 2015. *Web-Based Training on Form CMS-416 Dental Data Reporting*. Baltimore, MD: Centers for Medicare & Medicaid Services. Multiple items. <http://medicaid.gov/medicaid-chip-program-information/by-topics/benefits/416-dental-reporting-training.html>.

PROFESSIONAL-CLIENT TOOLS

BRUSH, BOOK, BED: A PROGRAM OF THE AMERICAN ACADEMY OF PEDIATRICS—IMPLEMENTATION GUIDE

This guide is designed to help pediatricians and other health professionals improve the implementation of oral health services in the medical home through the Brush, Book, Bed program by linking oral health information to messages about reading to children and setting a regular bedtime. The program is aimed at parents of infants and children ages 6 months to 6 years. Topics include workflow, training and resources, talking points, supplies and tips, dental referral, and coding for oral health services.

American Academy of Pediatrics, Children’s Oral Health Initiative. 2015. *Brush, Book, Bed: A Program of the American Academy of Pediatrics—Implementation Guide*. Elk Grove Village, IL: American Academy of Pediatrics. 23 pp. <http://www2.aap.org/commpeds/doch/oralhealth/docs/BBBGuide.pdf>.

BRUSH UP ON ORAL HEALTH

This newsletter series provides Head Start staff with information on current practice, practical tips for promoting oral health to share with parents, and recipes for healthy snacks that children can make with Head Start staff or at home with their parents. Health and

social service professionals interested in improving the oral health of pregnant women, infants, and children enrolled in Head Start and their families may also find the newsletter helpful. Topics include children with special health care needs, health literacy, injury, nutrition, pregnancy, school readiness, and tobacco.

National Center on Early Childhood Health and Wellness. 2016. *Brush Up on Oral Health*. Elk Grove Village, IL: National Center on Early Childhood Health and Wellness. Monthly. <http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/oral-health/policies-procedures/buoh.html>.

DOCTORS AND DENTISTS ARE PARENTS TOO AND THEY SUPPORT COMMUNITY WATER FLUORIDATION

These images are designed to assist pediatricians and other supporters of community water fluoridation (CWF) in sharing information with parents. The images focus on the safety and effectiveness of CWF and can be downloaded and posted to a website or social media.

American Academy of Pediatrics, Campaign for Dental Health. 2015. *Doctors and Dentists Are Parents Too and They Support Community Water Fluoridation*. Elk Grove Village, IL: American Academy of Pediatrics, Campaign for Dental Health. Multiple items. <http://ilikemyteeth.org/doctors-and-dentists-are-parents-too-and-they-support-community-water-fluoridation>.

KEEPING YOUR BABY’S MOUTH HEALTHY! CAVITIES CAN BE PREVENTED!

This brochure for mothers and mothers-to-be provides information about preventing dental caries in infants and young children. Topics include nutrition, tooth-brushing, dental visits, and fluoride varnish. The brochure also includes information about finding and using oral health services in southwestern Minnesota.

Minnesota Oral Health Project. 2015. *Keeping Your Baby’s Mouth Healthy! Cavities Can Be Prevented!* Minneapolis, MN: University of Minnesota Medical School, Department of Pediatrics. 2 pp. <http://www.minnesotaoralhealthproject.com/cavities-and-oral-health-info.html>.

NATIONAL DENTAL HYGIENE MONTH

This toolkit is intended to help dental hygienists and others promote awareness of oral health as part of the annual observance of National Dental Hygiene Month (October). Contents include information on topics such as toothbrushing, flossing, rinsing, chewing gum, and community service. Public relations materials; posters; and a series of fact sheets on oral health in children, adolescents, adults, and older adults are also available. Some materials are available in both English and Spanish.

American Dental Hygienists' Association. 2015. *National Dental Hygiene Month*. Chicago, IL: American Dental Hygienists' Association. Annual. <http://www.adha.org/ndhm/index.html>.

coordinated school health programs; prevention and control of early childhood caries; perinatal oral health; school fluoride and dental sealant programs; children with special health care needs; state coalitions, plans, and mandates; surveillance systems; water fluoridation; and work force development. The resource also provides access to state and community practice examples that illustrate successful implementation of best practice approaches. [Funded in part by the Maternal and Child Health Bureau]

Association of State and Territorial Dental Directors, Best Practices Committee. 2003-. *Best Practice Approaches: Proven and Promising Best Practices for State and Community Oral Health Programs*. Reno, NV: Association of State and Territorial Dental Directors. Multiple items. <http://www.astdd.org/best-practices>.

TIPS FOR GOOD ORAL HEALTH DURING PREGNANCY

This tip sheet provides information and resources to help women take care of their oral health during pregnancy. Topics include getting oral health care, practicing good oral hygiene, eating healthy foods, and practicing other healthy behaviors. The tip sheet also encourages women to take care of their infant's gums and teeth and ask their pediatric health professional to check their infant's mouth starting at age 6 months and provide a referral to a dentist for urgent care. A list of resources is included. The tip sheet is available in Arabic, Chinese, English, Korean, Portuguese, Russian, Spanish, and Vietnamese. [Funded by the Maternal and Child Health Bureau]

Oral Health During Pregnancy Expert Workgroup. 2012. *Tips for Good Oral Health During Pregnancy*. Washington, DC: National Maternal and Child Oral Health Resource Center. 2 pp. <http://mchoralhealth.org/PDFs/OralHealthPregnancyHandout.pdf>.

DURING PREGNANCY, THE MOUTH MATTERS: A GUIDE TO MICHIGAN PERINATAL ORAL HEALTH

This guide provides information about reducing infant mortality and promoting perinatal oral health in Michigan. It discusses a statewide perinatal oral health initiative, an infant-mortality-reduction plan, the national and local landscapes, and transmission of cariogenic bacteria. It also includes guidance for perinatal care professionals and oral health professionals, a visual guide for common oral health conditions, and referral resources to assist in facilitating oral health care for pregnant women.

Michigan Department of Health and Human Services, Perinatal Oral Health Program. 2015. *During Pregnancy, the Mouth Matters: A Guide to Michigan Perinatal Oral Health*. Lansing, MI: Michigan Department of Health and Human Services. 22 pp. http://www.michigan.gov/documents/mdhhs/Oral_Health_Guidelines_2015_508090_7.pdf.

PROGRAM DEVELOPMENT

BEST PRACTICE APPROACHES: PROVEN AND PROMISING BEST PRACTICES FOR STATE AND COMMUNITY ORAL HEALTH PROGRAMS

This resource provides information to help state, territorial, and community oral health programs develop public health best practices. Contents include reports on public health strategies that are supported by evidence for their impact and effectiveness. Topics include

EARLY CHILDHOOD CARIES (ECC) COLLABORATIVE: PHASE III AT A GLANCE

This resource summarizes the accomplishments of 32 teams of oral health professionals working to successfully adopt and spread the practices and protocols of disease management for early childhood caries during the period 2013–2015. Snapshots and charts highlight each team's efforts to reduce the percentage of infants and children under age 5 with new cavitation, complaining of pain, and referred for operating room

treatment and sedation. Topics include risk assessment, self-management goals, on-time visits, caries risk, and faculty assessment.

DentaQuest Institute. 2016. *Early Childhood Caries (ECC) Collaborative: Phase III at a Glance*. Westborough, MA: DentaQuest Institute. 1 v. <https://www.dentaquestinstitute.org/ecc-phase-3-lookbook>.

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GIVE KIDS A SMILE® PROGRAM PLANNING TOOLBOX

These resources are designed to assist dentists in planning, implementing, and promoting an access-to-care event. Contents include guidance on managing legal, insurance, and risk-management considerations; a notice of privacy practices in English and Spanish; sample acknowledgment, caries-risk-assessment, waiver and permission, and data-collection forms; sample resolutions, letters, and certificates; posters and flyers in English and Spanish; and advertisements.

American Dental Association. 2015. *Give Kids a Smile® Program Planning Toolbox*. Chicago, IL: American Dental Association. Annual. <http://www.adafoundation.org/en/give-kids-a-smile/gkas-program-planning-toolbox>.

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GUIDELINES FOR STATE AND TERRITORIAL ORAL HEALTH PROGRAMS (REV. ED.)

These guidelines help health agency officials and public health administrators develop and operate oral health programs and promote integration of oral health activities into public health systems. Part I provides an overview of oral health disparities and strategies for prevention. It describes the diversity and uniqueness of oral health programs and efforts to increase infrastructure and capacity. Part II is a matrix of state oral health program roles for each of the 10 essential public health services. It includes examples of specific activities for each role and links to selected resources to help states accomplish the activities. An assessment tool is also available.

Association of State and Territorial Dental Directors. 2015. *Guidelines for State and Territorial Oral Health Programs* (rev. ed.). Sparks, NV: Association of State and Territorial Dental Directors. 3 items. <http://www.astdd.org/state-guidelines>.

HEAD START ORAL HEALTH CURRICULA: CHOOSE AND USE (UPD. ED.)

This guide provides information about oral-health-related curricula appropriate for use in Early Head Start and Head Start programs. Users can search by audience, topic, and availability to find the curriculum that best fits their needs. A matrix to view all the curricula at a glance is also available from the website. [Funded by the Maternal and Child Health Bureau]

National Maternal and Child Oral Health Resource Center. 2016. *Head Start Oral Health Curricula: Choose and Use* (upd. ed.). Washington, DC: National Maternal and Child Oral Health Resource Center. Multiple items. <http://mchoralhealth.org/headstart/curricula/index.php>.

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HEALTHY SMILES FOR MOM AND BABY: INSIGHTS INTO EXPECTING AND NEW MOTHERS' ORAL HEALTH HABITS

This report summarizes findings from a survey to explore the oral health attitudes and behaviors of expectant and new mothers. Topics include women's self-rating of oral health before and during pregnancy and oral health problems reported during pregnancy; dental checkup participation and coverage, frequency, and cost concerns; routines impacting oral health; participation in healthy pregnancy programs; and the impact of pediatricians' and other health professionals' discussions of oral health on dental hygiene habits.

Cigna. 2015. *Healthy Smiles for Mom and Baby: Insights into Expecting and New Mothers' Oral Health Habits*. Bloomfield, CT: Cigna. 6 pp. http://www.cigna.com/assets/docs/newsroom/cigna-study-healthy-smiles-for-mom-and-baby-2015.pdf?WT.z_nav=newsroom%2Fdental-study%3BBody%3BDownload%20Executive%20Summary.

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INTEGRATION OF ORAL HEALTH WITH PRIMARY CARE IN HEALTH CENTERS: PROFILES OF FIVE INNOVATIVE MODELS

This monograph presents information on five health centers that have successfully integrated oral health into primary care. Contents include background on oral health disparities and health center leadership in providing access to oral health care; a framework for exploring integration; an overview of the participants,

methods, and results; and profiles of the health centers in Colorado, Kansas, Kentucky, Massachusetts, and Washington.

Maxey H. 2015. *Integration of Oral Health with Primary Care in Health Centers: Profiles of Five Innovative Models*. Bethesda, MD: National Association of Community Health Centers. 27 pp. <http://www.nachc.com/client/Integration%20of%20Oral%20Health%20with%20Primary%20Care%20in%20Health%20Centers.pdf>.

PARENTS MAKING WAVES: A TOOLKIT FOR PROMOTING DRINKING WATER IN SCHOOLS

This toolkit is designed to assist parents in improving drinking water access at school. Contents include a tip sheet, a sample school wellness policy and letter to a school administrator, tools for conducting a drinking water inventory and observing students drinking water, and an action plan checklist. Topics include funding a school water program and ensuring that school water is safe, understanding tap water sources, and promoting water intake in schools.

Gutierrez H, Hampton K, Hecht A, Patel A. 2016. *Parents Making Waves: A Toolkit for Promoting Drinking Water in Schools*. San Francisco, CA: University of California, San Francisco and California Food Policy Advocates. 40 pp. <http://waterinschools.org/parents-making-waves>.

PREVENTING EARLY CHILDHOOD TOOTH DECAY: WHAT STATES CAN DO

This brief explains the implications of a simulation model for preventing dental caries in early childhood in New York and discusses opportunities to implement policies to align the oral-health-care-delivery system with established science. The brief describes a risk-based approach to oral health care and a number of other approaches for crafting dental benefits in a cost-effective manner. Contents include program-specific recommendations, systems-change opportunities, and Medicaid reform options.

Reusch C. 2016. *Preventing Early Childhood Tooth Decay: What States Can Do*. Washington, DC: Children’s Dental Health Project. Multiple items. <https://s3.amazonaws.com/cdhp/End+Cavities/Preventing+ECC+-+What+States+Can+Do+-+Brief+-+Feb+2016.pdf>.

PUBLIC AWARENESS AND EDUCATION

CHILD DENTAL HEALTH

These resources for parents and other caregivers address oral health during infancy, childhood, and adolescence. Topics include news, prevention, screening, diagnosis and symptoms, treatment, nutrition, and specific conditions and related issues. Multimedia tools (tutorials, videos, games) and other resources are presented. The content is available in English, Japanese, Somali, and Spanish.

MedlinePlus. 2016. *Child Dental Health*. Bethesda, MD: U.S. National Library of Medicine. Multiple items. <http://www.nlm.nih.gov/medlineplus/childdentalhealth.html>.

DENTAL HEALTH

These resources for the public provide information on oral health throughout the life course. Topics include X-rays, prevention and risk factors, treatments and therapies, and related issues. Contents include videos and tutorials, statistics and research, reference sources, and consumer-education materials. The resources are available in Chinese, English, and Spanish.

MedlinePlus. 2016. *Dental Health*. Bethesda, MD: U.S. National Library of Medicine. Multiple items. <http://www.nlm.nih.gov/medlineplus/dentalhealth.html>.

FIRST SMILES

This video for parents and other caregivers provides information about the importance of oral health in infants and young children. Topics include preventing dental caries in primary teeth; early examination, detection, and treatment; and education. The video shows an oral health professional performing a lap-to-lap examination, applying a fluoride varnish treatment, and encouraging a mother to give her child milk and water rather than juice.

Kids Smiles. 2016. *First Smiles*. Philadelphia, PA: Kids Smiles. 1 video (3 min., 20 sec.). https://www.youtube.com/watch?v=myFGpBw36_c.

SHARE THE LOVE, SHARE THE WATER

This video is designed to encourage families to drink water. Topics include avoiding beverages containing sugar to prevent diseases such as diabetes and dental caries. The video is available in English and Spanish.

University of California, San Francisco, Center for Vulnerable Populations at San Francisco General Hospital. 2015. *Share the Love, Share the Water*. San Francisco, CA: University of California, San Francisco, Center for Vulnerable Populations at San Francisco General Hospital. 1 video (3 min.). <https://www.youtube.com/watch?v=aJjDoKIN7Lw> (English), <https://www.youtube.com/watch?v=KpOQ2sHD5u8> (Spanish).

QUALITY IMPROVEMENT

2015 ANNUAL REPORT ON THE QUALITY OF CARE FOR CHILDREN IN MEDICAID AND CHIP

This report shows the progress made by the U.S. Department of Health and Human Services and states to systematically measure and report on the quality of care that children enrolled in Medicaid and the Children’s Health Insurance Program (CHIP) receive. Contents include information about state-specific findings on quality and access in Medicaid and CHIP and monitoring and improving care for children enrolled in managed care. Topics include primary care access and preventive care, management of acute and chronic conditions, childhood obesity, oral health care, prenatal and postpartum care, and adolescent well care.

U.S. Department of Health and Human Services. 2016. *2015 Annual Report on the Quality of Care for Children in Medicaid and CHIP*. Washington, DC: U.S. Department of Health and Human Services. 42 pp. <https://www.medicare.gov/medicaid-chip-program-information/by-topics/quality-of-care/downloads/2015-child-sec-rept.pdf>.

THE 2015 NEW HAMPSHIRE ORAL HEALTH PLAN

This document provides a framework for achieving optimal oral health and is intended to be a roadmap for everyone who has a stake in New Hampshire’s oral health. Contents include information about the plan’s purpose, the plan’s relationship to other guiding documents, evaluation of the 2003 plan, oral health challenges in New Hampshire, the development process,

priority areas, implementation, and a sustainability plan. Topics include access to oral health care, oral disease, injury prevention, intervention, and integration of oral health care into primary care.

New Hampshire Oral Health Coalition. 2015. *The 2015 New Hampshire Oral Health Plan*. Concord, NH: New Hampshire Oral Health Coalition. 34 pp. http://nhoralhealth.org/blog/wp-content/uploads/2015/11/2015_New_Hampshire_Oral_Health_Plan.pdf.

THE DENTAL EXAMINATION COMPLIANCE STATUS OF KINDERGARTEN, SECOND, AND SIXTH GRADE CHILDREN IN ILLINOIS FOR SCHOOL YEAR 2013–2014

This report summarizes statewide dental examination compliance and oral health status of children in kindergarten and second and third grades in Illinois. Contents include findings on the level of compliance and noncompliance for all students, public school students, and non-public-school students. Compliance and health status data are reported for the state as a whole, by counties, and by grade level. The report also discusses implications of the data across the state.

Illinois State Board of Education, Data Analysis Division. 2015. *The Dental Examination Compliance Status of Kindergarten, Second, and Sixth Grade Children in Illinois for School Year 2013–2014*. Springfield, IL: Illinois State Board of Education. 18 pp. http://www.isbe.state.il.us/research/pdfs/dental_report1314.pdf.

ENGAGING STAKEHOLDERS TO IMPROVE DENTAL COVERAGE AND ACCESS FOR MEDICAID-ENROLLED ADULTS

This brief describes the role of stakeholder engagement in adult oral health improvement and key steps that states and others can take to engage stakeholders in advancing oral-health-improvement goals. Topics include assessing engagement history, capacity, and potential; defining engagement objectives, scope, and outputs; identifying stakeholders; analyzing identified stakeholders; identifying engagement strategies; engaging with stakeholders and communicating activities; and evaluating and reporting on the engagement.

Chazin S. 2015. *Engaging Stakeholders to Improve Dental Coverage and Access for Medicaid-Enrolled Adults*. Hamilton, NJ: Center for Health Care Strategies. 11 pp. http://www.chcs.org/media/OH-Stakeholders-TA-Brief_1022151.pdf.

GUIDING INNOVATIONS TO IMPROVE THE ORAL HEALTH OF ADULT MEDICAID BENEFICIARIES

This brief presents findings from a survey and small group consultation with Medicaid oral health stakeholders and thought leaders to identify areas of need and promising practices for improving oral health access and outcomes. The brief describes the following five areas of opportunity for innovation in adult oral health coverage and care: the Medicaid oral health business model, return on investment models for oral health coverage and care, consumer outreach and engagement, work force and training, and oral-health-care access and delivery. Several innovations delivered via mobile devices are described.

Chazin S. 2016. *Guiding Innovations to Improve the Oral Health of Adult Medicaid Beneficiaries*. Hamilton, NJ: Center for Health Care Strategies. 11 pp. http://www.chcs.org/media/Adult-Dental-Innovations_final2.pdf.

MOST CHILDREN WITH MEDICAID IN FOUR STATES ARE NOT RECEIVING REQUIRED DENTAL SERVICES

This report describes the extent to which children enrolled in Medicaid in four states (California, Indiana, Louisiana, and Maryland) received pediatric oral health services in 2011 and 2012. The report also describes barriers and strategies to increase access in these states. Contents include background, methodology, findings, recommendations, and conclusions. Topics include the percentage of children who did not receive required oral health services and percentage of those who did not receive all required oral health services, policies that may limit children’s ability to receive required services, shortages of dentists who participate in Medicaid, and challenges in educating families about the importance of oral health care.

U.S. Department of Health and Human Services, Office of Inspector General. 2016. *Most Children with Medicaid in Four States Are Not Receiving Required Dental Services*. Washington, DC: U.S. Department of Health and Human Services, Office of Inspector General. 29 pp. <http://oig.hhs.gov/oei/reports/oei-02-14-00490.pdf>.

SB1375 REPORT

This report summarizes recommendations of a state agency collaborative to determine the most efficient and effective way to provide comprehensive medical, oral health, and behavioral health services for children in foster care in Arizona. Topics include the health care needs of children in foster care, the current health-care-delivery system for children in foster care, record review results for foster and adoptive disruptions, and health-care-delivery system design options.

Arizona Department of Health Services and Arizona Health Care Cost Containment System, Comprehensive Medical and Dental Program. 2015. *SB1375 Report*. Phoenix, AZ: Arizona Health Care Cost Containment System. 19 pp. <http://www.azahcccs.gov/shared/Downloads/News/SB1375Report10-1-15.pdf>.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES ORAL HEALTH STRATEGIC FRAMEWORK 2014–2017

This framework provides the context for leveraging oral health priorities and actions across the U.S. Department of Health and Human Services and partner agencies. The framework aligns key activities with major goals and associated strategies in response to recommendations from the Institute of Medicine and discussions with external stakeholders. Topics include integrating oral health care and primary health care, preventing oral disease and promoting oral health, increasing access to oral health care and eliminating disparities, increasing the dissemination of information and improving health literacy, and advancing oral health in public policy and research.

U.S. Department of Health and Human Services, Oral Health Coordinating Committee. 2016. *U.S. Department of Health and Human Services Oral Health Strategic Framework 2014–2017*. Washington, DC: U.S. Department of Health and Human Services. 45 pp. <http://www.publichealthreports.org/issueopen.cfm?articleID=3498>.