

**WELCOME!**

# Managing and Preventing Oral Health Emergencies during the Pandemic

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January 28, 2021



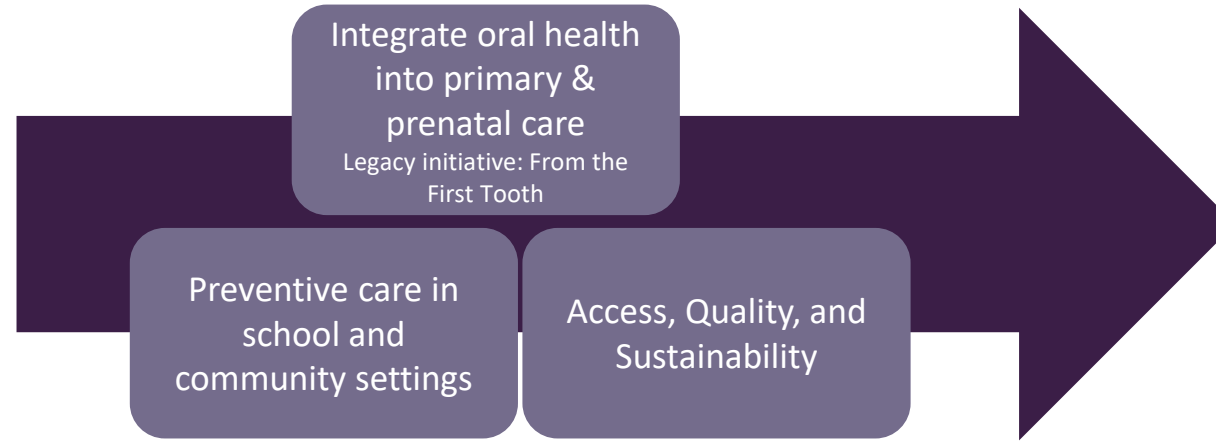
## Partnership for Children's Oral Health

*A network to ensure all Maine children can  
grow up free from preventable dental disease*

### PCOH Network Initiatives

Collaborative work on  
three strategic priorities

- Action teams
- Projects



### Shared Mission

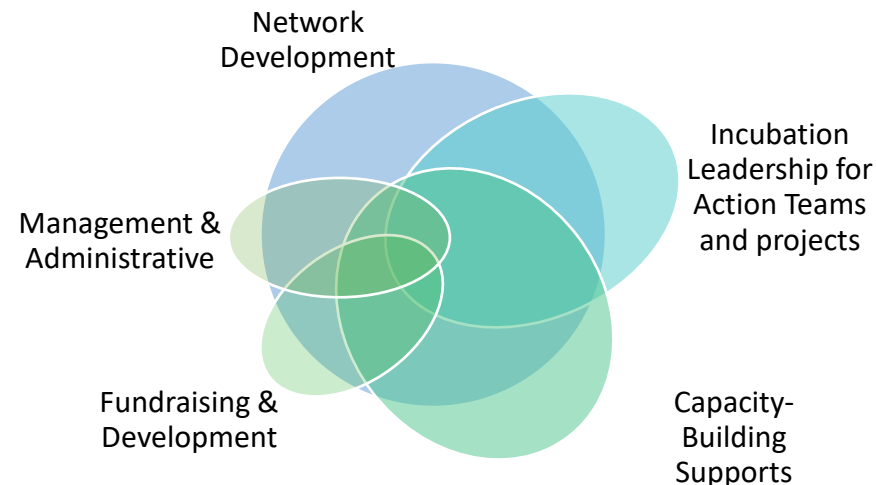
Transform Maine into a  
state where we

1. meet the oral health  
needs of all children  
and families,
2. prioritize prevention,  
and
3. address oral health  
as a key element of  
overall health and  
economic well-being.



### PCOH Backbone Support Functions

- 2 Staff members
- Board
- Council
- Consultants and  
contractors



### Collective Vision

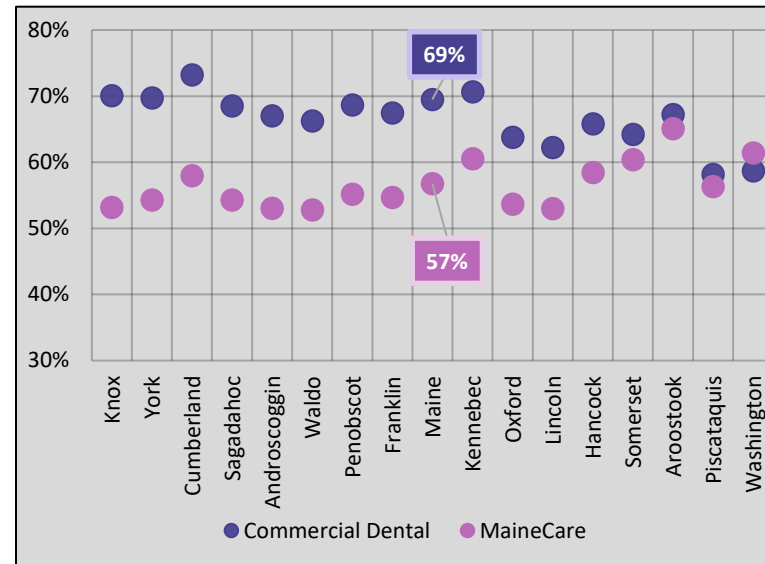
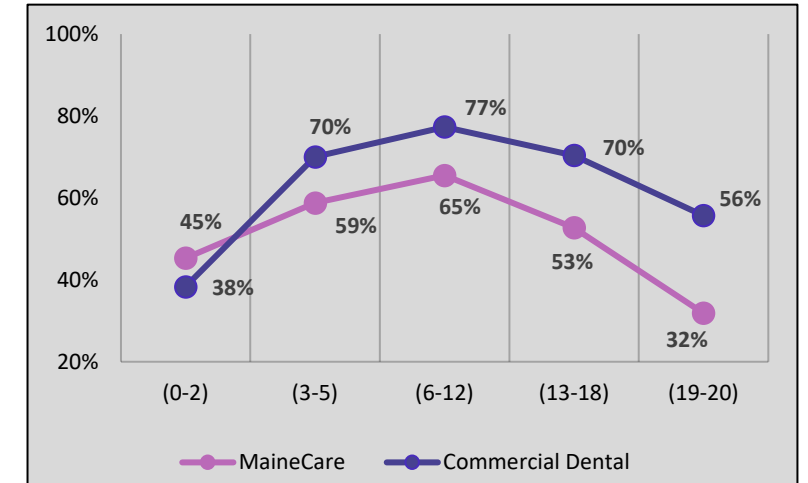
All children in Maine  
can grow up free from  
preventable dental  
disease

# The Current Reality of Oral Health in Maine

## Challenges:

- Almost half of kids in Maine are not getting regular preventive dental care
- PCOH estimates that we have about 100,000 kids in Maine (< age 21) who need a dental home, but few dental offices have room to take on more patients
- Oral surgeons and pediatric dentists are especially in short supply
- MaineCare rates are very low - even non-profit dental centers who focus primarily on serving MaineCare patients must fill revenue shortfalls with grants in order to keep their doors open
- COVID has exacerbated pre-existing access challenges by decreasing provider capacity, increasing provider costs, changing home-care routines, and delaying preventive care

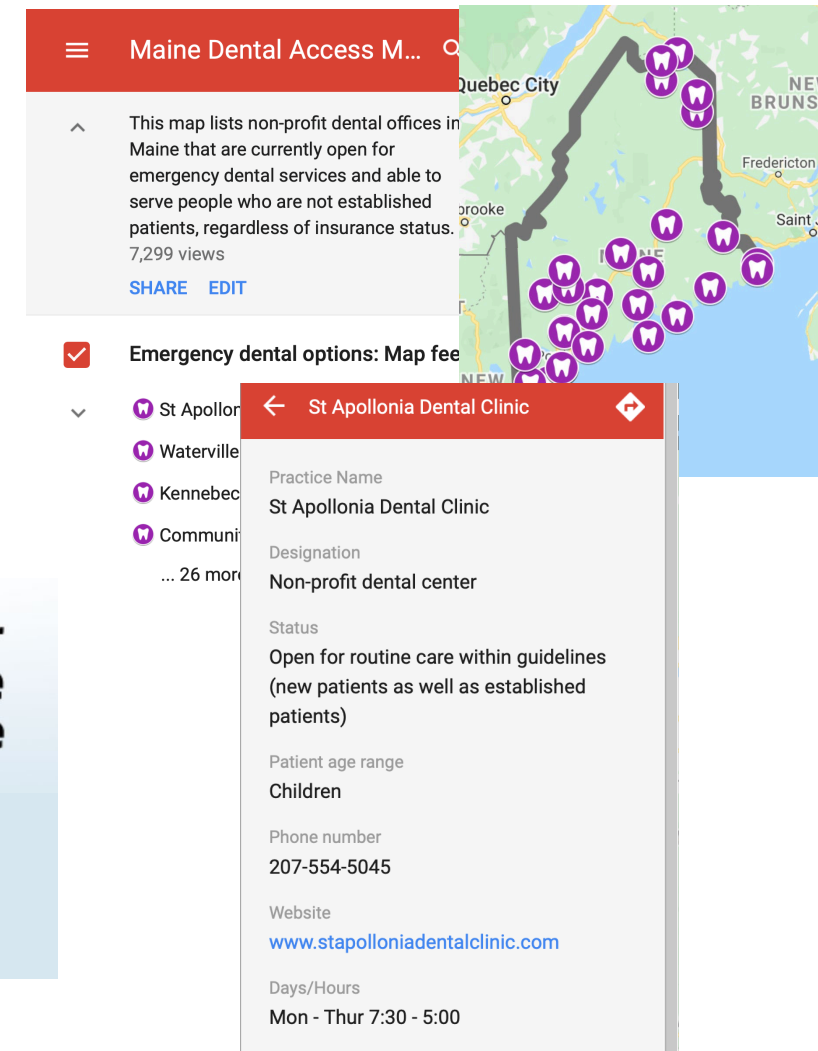
*Preventive dental care among Maine children under age 21, 2019*



# Solutions are both short-term and long-term

## Mitigating urgent needs:

- PCOH Access Map:  
<https://www.mainepecoh.org/covid19/map>
- Consumers for Affordable HealthCare (CAHC) Helpline: **1-800-965-7476**
- Tips for calling dentists
- Develop referral relationships
- Try to help families get dental homes established before an urgent problem



# Solutions are both short-term and long-term

## Long-term strategies:

- From the First Tooth
- School-based prevention services
- Virtual Dental Home model
- Other policy and systems changes
- Relationships and collaboration



### WHO

Infants and children of Maine with teeth seen at a medical home

### WHAT

From the First Tooth is a statewide pediatric oral health initiative that focuses on improving the oral health of Maine's children by increasing access to preventive dental services within their medical home

### WHERE

Primary care medical practices that see Maine children

### HOW

FTFT provides training to the health care team on how to integrate and conduct an oral health and caries risk assessment, application of fluoride varnish, and discusses key messages to provide the caregiver during well child visits. If a child does not see a dentist, a referral should be provided by the health care team to ensure a dental home is identified.

From the First Tooth integrates 4 components into primary care:

1. Oral Evaluation
2. Fluoride Varnish Application
3. Health Education for Parents
4. Referral to a Dentist



## 2019 STUDY OF SCHOOL-BASED ORAL HEALTH SERVICES IN MAINE

## 129th MAINE LEGISLATURE

### FIRST REGULAR SESSION-2019

Legislative Document

No. 1399\*

H.P. 1014

House of Representatives, March 26, 2019

### An Act To Improve Oral Health and Access to Dental Care for Maine Children

Reference to the Committee on Health and Human Services suggested and ordered printed.

*Robert B. Hunt*  
ROBERT B. HUNT  
Clerk

Presented by Representative GRAMLICH of Old Orchard Beach.  
Cosponsored by Senator MOORE of Washington and  
Representatives: BRENNAN of Portland, HANINGTON of Lincoln, HEPLER of Woolwich,  
MASTRACCIO of Sanford, PERRY of Calais, Senators: DAVIS of Piscataquis, DILL of  
Penobscot, SANBORN, L. of Cumberland.

## Maine Chapter

INCORPORATED IN MAINE

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



### POLICY BRIEF

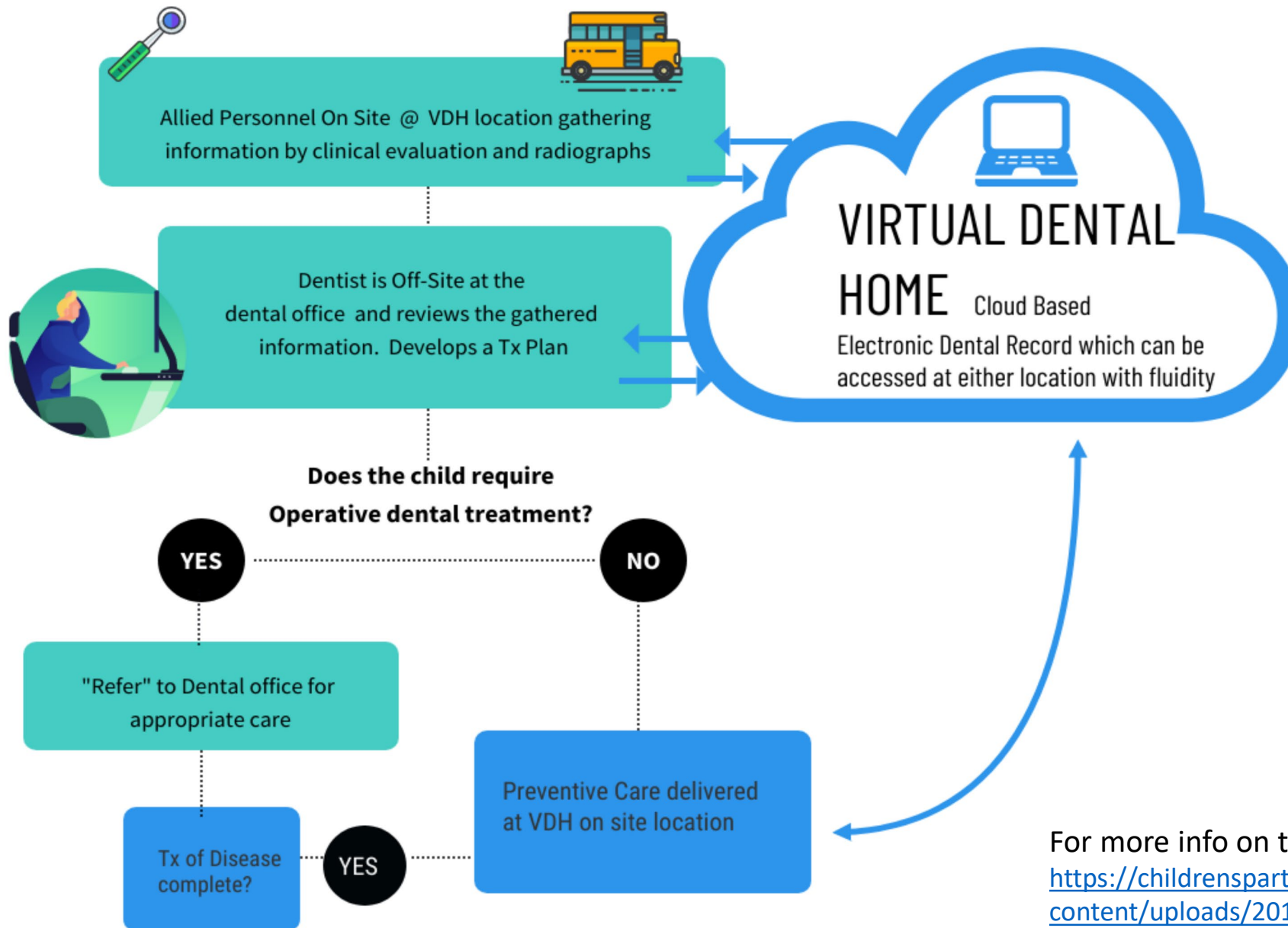
## THE VIRTUAL DENTAL HOME

IMPROVING THE ORAL HEALTH OF VULNERABLE AND UNDERSERVED POPULATIONS USING GEOGRAPHICALLY DISTRIBUTED TELEHEALTH-ENABLED TEAMS

UPDATED AUGUST, 2014

Pacific Center for Special Care





For more info on the VDH model:  
[https://childrenspartnership.org/wp-content/uploads/2019/02/TCP-From-Pilot-to-Systems-Change\\_v2.pdf](https://childrenspartnership.org/wp-content/uploads/2019/02/TCP-From-Pilot-to-Systems-Change_v2.pdf)

# WE ARE CHANGING THE WAY WE TREAT KIDS:

- **Priorities change**
- **“Emergencies change”**
- **Treatment options change**
- **Availability has Changed**

# **NEW WORLD AND POSSIBLY NEW PARADIGMS FOR TREATMENT OF DECAY**

- **We don't have as much open time**
- **Parental attitudes towards behavior management have changed**
- **We have new tools**
- **We have new knowledge about the ability to control decay**



# SOME NEW REVOLUTIONIZING IDEAS

- You can limit the growth of decay
- You don't have to remove all decay
- You can delay treatment
- Some treatment does not have to be surgical

# WHAT OPTIONS?

- Temporary fillings
- Using auxiliaries (hygienists)
- Stop progress with SDF
- Restore without removing decay
- Combining entities

# WHY AM I SEEING MORE KIDS WITH BLACK CAVITIES NOW?



# IT *COULD BE* SILVER DIAMINE FLUORIDE

What's that?

SDF is made of:

- silver: helps kill bacteria
- water: provides a liquid base for the mixture
- fluoride: helps your teeth rebuild the materials they're made of (known as remineralization)
- ammonia: helps the solution remain concentrated so that it's maximally effective against cavity resonance



# WHY ARE WE USING IT?

- It **ARRESTS** carious lesions from getting progressively larger
- It allows me to not force care on emotional individuals (very young, intellectual delayed, of just very anxious)
- It allows me to delay care until appropriate or until it is no longer needed (baby teeth fall out, the patient can tolerate care, or the appointment date is reached)
- It is way cheaper than fillings



# SO, WHAT'S WRONG WITH IT?

- It turns teeth black (the cavity)
- It tastes really yucky
- It is not definitive care and should be replaced
- It doesn't always work
- It will tattoo the skin or gums or cheek (about 1-2 weeks)
- Evidence base is getting stronger (AAPD issued clinical practice guideline in 2017, ADA systematic review and clinical guidelines in 2018)

But if we really want all Maine children to be able to grow up free from preventable dental disease, the key is to stop decay before it starts...



# Coming soon!

## An Act To Protect Oral Health for Children in Maine

Highlights from draft bill: (not printed yet)

- **Goal.** It is the goal of the Legislature that children enrolled in the Medicaid program in all regions of the State ~~have the same access to dental care as children enrolled in private dental insurance programs~~ **receive at least one preventive dental visit annually.**
- Require an **annual report** containing information related to the progress of the department in meeting the goal and an action plan to increase access to dental care.
- Provides funding for an **Oral Health Coordinator** within the Maine Center for Disease Control and Prevention
- **Expand Maine CDC's School Oral Health Program** to all schools in the State.
- Develop a **pilot project for an oral health value-based payment model** within MaineCare for prevention, early intervention, disease management, and care coordination services for oral health services delivered in schools and early childcare settings.



***The voice of pediatricians  
and school nurses is very  
powerful in advocating for  
Maine children!***



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Other bills/policy efforts with potential to positively impact children's oral health:

- MaineCare adult dental benefit
- Teledentistry scope/rules
- Extend MaineCare coverage for children currently excluded
- MaineCare Child Health & Dental Incentive Payments
- MaineCare Rate Setting process

# Resources and Opportunities to get involved

- PCOH Access Map  
<https://www.mainepecoh.org/covid19/map>
- CAHC Helpline [1-800-965-7476](tel:1-800-965-7476)
- MaineCare Member Services:  
[1-800-977-6740](tel:1-800-977-6740) or [mainecaremember@dx.com](mailto:mainecaremember@dx.com)
- From the First Tooth: Toolkit, virtual training, educational materials, other support  
<https://www.fromthefirsttooth.org>  
Lyvia Gaewsky - [Lgaewsky@mainehealth.org](mailto:Lgaewsky@mainehealth.org)
- Adolescent Transition Toolkit now has oral health component:  
[https://www.maineaap.org/assets/about/Youth Transitions to Adult Care Change Package-Final w Oral Health1.pdf](https://www.maineaap.org/assets/about/Youth%20Transitions%20to%20Adult%20Care%20Change%20Package-Final%20w%20Oral%20Health1.pdf)
- AAP webpage on oral health:  
<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Oral-Health/Pages/Education-and-Training.aspx>
- Advocacy opportunities
- Suggestions for PCOH involvement: Health Integration Action Team, Data & Policy workgroup, annual network-wide meeting, subscribe to newsletter
  - For more info about the work of the Partnership for Children's Oral Health, visit: [www.mainepecoh.org](http://www.mainepecoh.org) or email [becca@mainepecoh.org](mailto:becca@mainepecoh.org).
- More in-depth webinars on specific sub-topics?
- Other interests/ideas?