

## Maryland's Dental Action Committee: The Quintessential Partnership

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## MARYLAND'S EXPERIENCE – BACKGROUND

- **Proud history:**
  - Early implementation of water fluoridation
  - Initial use of the DMF index in 1930's dental caries studies conducted in Hagerstown, Maryland
  - Robust Medicaid program until the 1970's
- **Not so proud history:**
  - Since the 1970's, nominal emphasis on oral health
  - 1997–Medicaid managed care arrived with policy to withdraw State funding from county dental clinics
  - Late 1990's, Maryland had lowest access to Medicaid oral health services



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## MARYLAND'S EXPERIENCE – BACKGROUND

- **Revisiting history (1998 – 2007):**
  - Funding for a state dental director/Office of Oral Health
  - Partnership development, advocacy efforts, legislative achievements
- **Tragic historical event (2007):**
  - 12-year-old Deamonte Driver dies from untreated dental infection
- **Rewriting history (2007 to present):**
  - Dental Action Committee (DAC) convened June 2007 by Health Secretary John Colmers



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## DENTAL ACTION COMMITTEE MEMBERSHIP

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>▪ Advocates for Children and Youth</li> <li>▪ Carroll County Health Department</li> <li>▪ Doral Dental, USA</li> <li>▪ Head Start</li> <li>▪ Maryland Academy of Pediatrics</li> <li>▪ Maryland Academy of Pediatric Dentistry</li> <li>▪ Maryland Assembly on School Based Health Care</li> <li>▪ Maryland Association of County Health Officers</li> <li>▪ Maryland Community Health Resources Commission</li> <li>▪ Maryland Dental Hygienists' Association</li> <li>▪ Maryland Dental Society</li> <li>▪ Maryland Medicaid Advisory Committee</li> </ul> | <ul style="list-style-type: none"> <li>▪ Maryland Oral Health Association</li> <li>▪ Maryland State Dental Association</li> <li>▪ Maryland State Department of Education</li> <li>▪ Medicaid Matters! Maryland</li> <li>▪ Mid-Atlantic Association of Community Health Centers</li> <li>▪ Morgan State University</li> <li>▪ National Dental Association</li> <li>▪ Parent's Place of Maryland</li> <li>▪ Priority Partners MCO</li> <li>▪ Public Justice Center</li> <li>▪ United Healthcare MCO</li> <li>▪ University of Maryland Dental School</li> </ul> |
|---|--|



Supported by: Maryland Office of Oral Health  
Maryland Medical Care Programs (Medicaid)

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## MARYLAND'S EXPERIENCE – DENTAL ACTION COMMITTEE

- **DAC Vision – establishment of a dental home for all Maryland children**
- **September 2007 – DAC report issued**
  - 7 primary recommendations (60+ recommendations in all)
- **October 2007 – All DAC recommendations supported by Secretary Colmers and Governor Martin O'Malley**



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## MARYLAND'S EXPERIENCE – DENTAL ACTION COMMITTEE

- **January 2008 – all funding recommendations included in Governor O'Malley's FY 09 budget**
  - Medicaid dental rates increase - \$14M
  - Enhancement of dental public health infrastructure (Office of Oral Health) - \$2.05M
- **January – April 2008 – support from Congressional delegation & state legislators**
- **April 2008 – Governor's DAC budget initiatives and other DAC-related legislation passed and signed into law**



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### MARYLAND'S EXPERIENCE – DENTAL ACTION COMMITTEE

- **Seven DAC recommendations and progress**
  1. Statewide ASO dental vendor– takes effect July 1, 2009
  2. Over three years, increase dental rates to ADA 50<sup>th</sup> percentile
    - 1<sup>st</sup> year of increase started July 1, 2008
    - 2<sup>nd</sup> year of increase delayed due to state budget deficit
  3. Begin to restore dental public health infrastructure – funded 6 new dental public health programs in Maryland including new facilities

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### MARYLAND'S EXPERIENCE – DENTAL ACTION COMMITTEE

- **Seven DAC recommendations and progress**
  4. Create public health dental hygienist role – 2008 legislation
  5. Trained general dentists in pediatric care – started 2008
    - Begin fluoride varnish reimbursement for pediatricians July 1, 2009
  6. Institute school-based oral health screenings – projected to begin 2010
  7. Unified oral health educational program targeted to parents, providers, policy makers – unfunded

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### A NATIONAL CALL TO ACTION TO PROMOTE ORAL HEALTH

#### ACTION 5 – INCREASING COLLABORATIONS



- Patient advocates in the lead
- Build broad-based coalitions
- Strengthen networking capacity
- Strengthen interdisciplinary collaborations
- Develop community-based partnerships
- Evaluate and report on progress and outcomes
- Promote successful examples as models



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### PATIENT ADVOCACY GROUPS IN THE LEAD

- Public Justice Center's work with Deamonte Driver was catalyst for reform.
- Advocacy groups on DAC took early leadership roles.
  - Viewed as credible partners
  - Took neutral role among provider groups
- Advocacy groups were active lobbyists in state capitol.
- Public Justice Center is beginning to participate at the national level on oral health reform.





•Medicaid  
 •Medicaid Matters! Maryland  
 •Matters

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### BUILD AND NURTURE BROAD-BASED COALITIONS

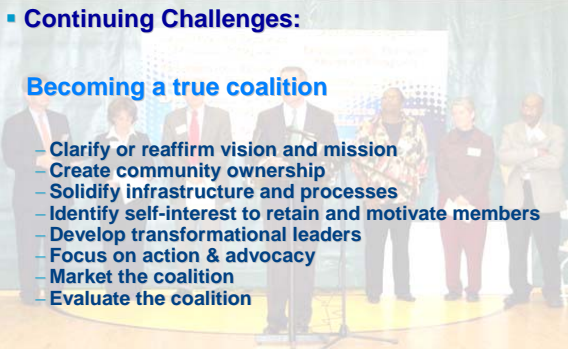
- **Results of face-to-face contact at DAC meetings**
  - Provided opportunity to develop trust and common understanding across diverse stakeholders
  - Promoted information exchange
  - Helped create a community with a commitment to a common goal
  - Began to break down historic animosities
  - Pooled political capital to achieve our common goal
  - Developed an alliance focused on one major issue: access to oral health care for low-income children



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### BUILD AND NURTURE BROAD-BASED COALITIONS


- **Continuing Challenges:**
  - **Becoming a true coalition**
    - Clarify or reaffirm vision and mission
    - Create community ownership
    - Solidify infrastructure and processes
    - Identify self-interest to retain and motivate members
    - Develop transformational leaders
    - Focus on action & advocacy
    - Market the coalition
    - Evaluate the coalition



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### STRENGTHEN NETWORKING CAPACITY

- DAC catalyzed efforts in many networks throughout the state
  - School health providers
    - Closer collaboration with local health depts
  - Regional oral health coalitions
    - Chesapeake Regional Oral Health Coalition
  - All dental specialty areas
    - MD State Dental Association launched Leadership Roundtable
  - Dental hygienists
    - Public health dental hygienist
  - Public health officials
    - MD Oral Health Association found its sea legs
  - Pediatricians
    - AAP CATCH grant – fluoride varnish



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### STRENGTHEN INTERDISCIPLINARY COLLABORATION


- Strengthen collaborations among dental, medical, and public health communities
- Accomplished:
  - Partnership on legislation and regulatory changes
    - Public Health Dental Hygienist
    - Local anesthesia for dental hygienists
    - Fluoride Varnish Initiative
  - Renewed commitment to work together
- Continuing Challenges:
  - Continue the spirit of partnership
  - Partnership “enabled” by threat of significant scope of practice change



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### BUILD COMMUNITY-BASED, CULTURALLY SENSITIVE PARTNERSHIPS

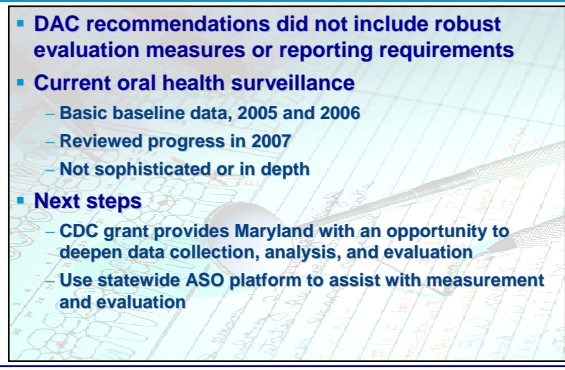
- Deamonte Driver Dental Project
  - Robert T. Freeman Dental Society (a local chapter of the National Dental Association) provided leadership
  - Is a community-based, culturally sensitive program funded partially by state dollars
  - Provides school-based mobile screening, prevention, and restorative services
  - Serves children at selected Prince George’s County schools
  - Dentists in Action will provide local dental homes for ongoing care



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### EVALUATE AND REPORT ON PROGRESS AND OUTCOMES

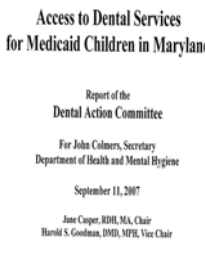
- DAC recommendations did not include robust evaluation measures or reporting requirements
- Current oral health surveillance
  - Basic baseline data, 2005 and 2006
  - Reviewed progress in 2007
  - Not sophisticated or in depth
- Next steps
  - CDC grant provides Maryland with an opportunity to deepen data collection, analysis, and evaluation
  - Use statewide ASO platform to assist with measurement and evaluation



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### PROMOTE SUCCESSFUL EXAMPLES AS MODELS

- We received
  - DAC benefitted from consideration of successful reforms implemented in other states
  - National organizations such as ASTDD helped frame the issues
- We are giving back
  - Speaking at national conferences
  - Sharing our experiences with other states



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### LEADERSHIP – ORAL HEALTH CHAMPIONS



*Congressman  
Elijah Cummings*



*Health  
Secretary  
John  
Colmers*



*Maryland  
Governor  
Martin  
O'Malley*

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## CONCLUSION

### ▪ More thanks and acknowledgements

- Senator Ben Cardin
- State Senator Thomas “Mac” Middleton
- State Representative Peter Hammen
- Former State Senator Gloria Lawiah
- Ms. Alyce Driver
- Members of the Dental Action Committee



### ▪ Reference

- Dental Action Committee Report – DHMH Office of Oral Health website:  
[http://www.fha.state.md.us/pdf/oralhealth/DAC\\_Final\\_Report.pdf](http://www.fha.state.md.us/pdf/oralhealth/DAC_Final_Report.pdf)

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