



OrOHC K-12

6-4-2021 Quarterly meeting

K-12 Committee

Date: Friday, June 4, 2021

Time: 10:00 am - 12:00 noon

Location:

<https://us02web.zoom.us/j/83941670402?pwd=Y29jeEtwN1ZXMHh1eCtpbDZLTjN2UT09>



Agenda

10:00-10:10	Welcome, introductions	Laurie Johnson
10:10-10:20	Continuing business <ul style="list-style-type: none">- Review of minutes- Dashboard- Brief look at the new Facebook Page	Laurie
10:20-10:35	Updates on COVID-19 status/research (National and State); Future of health care: What the experts are saying	Laurie
10:35-10:45	OHA update	Karen Phillips
10:45-10:55	School status update	Kimberly Bartholomew
10:55-11:05	Legislative update for Oregon (2969, 2977, 2528)	Laurie
11:05-11:15	HB 2627: Interim Therapeutic Restorations - the process from research to policy; Update on teledentistry	Linda Mann
11:15-11:45	Review of the new survey and discussion	Laurie
11:45-12:00	Value of today's meeting Date of next meeting: Friday, Sept. 11 Adjourn	Laurie

Agenda

Laurie Johnson introduced the K-12 website and asked for recommendations: <https://healthyteeth.us/>

A thank you to **Melissa Garza-Schmidt** for sharing information about the Healthy Kids Outreach Program. She also suggested that the K-12 Committee create a Facebook page. Laurie will work on that and invite members to "like" and/or "follow" the page.

Thank you to **Amy Umphlett** for giving us the following information on the OHA:

Spotlight Segments

- **Karen Phillips** has been hosting regular, brief Spotlight Segments on topics pertaining to certified school dental sealant programs. The presentations are intended to be a helpful review and include updates to relevant topics.
- The webinar recordings and PowerPoint presentations of the Spotlight Segments are posted online under the 'Webinars & Training Resources' subheading at www.healthoregon.org/sealantcert.

OHA COVID Guidance Document Updates:

- The OHA Guidance was last updated on September 24, 2020. Since then, the CDC, OSAP and OSHA has come out with more guidance that is specific to school oral health programs.
- We have revised the guidance documents and submitted them for review by Senior Health Advisors as part of the emergency response. Once approved, they will be posted online under the 'Dental Providers' subheading of OHA's COVID-19 Healthcare Partner Resources [webpage](#).
- **Karen** mentioned some of the changes in the February 26th Spotlight Segment. There was some reordering in the guidance and additions include:
 - Creating a process for responding to a COVID-19 outbreak at a school or amongst dental health care providers
 - Eyewear guidance
 - Universal use of four-handed technique and high evacuation suction when performing aerosol generating procedures (AGPs)

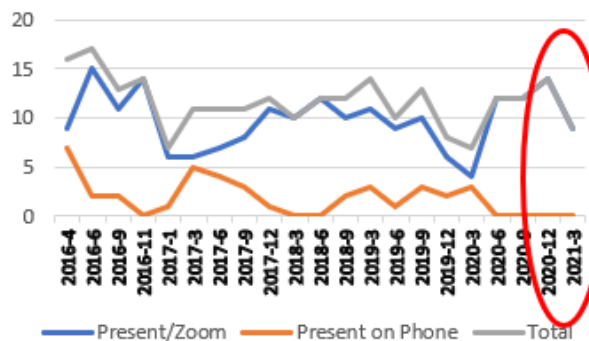
Temporary Certification Rules for School Dental Sealant Programs

- The certification rules for school dental sealant programs (OAR 333-028) need to match the OHA COVID-19 guidelines.
- Temporary rules will be in place during the COVID-19 pandemic, but can only be effective for 180 days. Temporary rule language is now under review by the Department of Justice and should be effective soon. The temporary rules will get us to the end of the school year.
- We know that some of the rule changes should be made permanent, which will require OHA to go thru the normal rulemaking process to amend the OARs. OHA plans to hold a Rules Advisory Committee (RAC) post-legislative session to look at permanent changes.

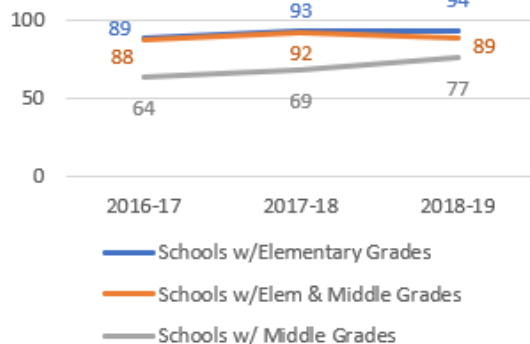
Dental Director Recruitment

- The Dental Director position, which has been vacant since mid-March 2020, was on hold due to the COVID-19 pandemic and financial uncertainty for the state budget. Agencies, including OHA, placed a temporary hold on hiring, which initially affected the Dental Director position. However, OHA made the decision to prioritize the position during the hiring freeze and included the Dental Director in the Executive Budget. As a result, OHA received permission to begin the Dental Director hiring process.
- It was initially posted [online](#) on January 21, 2021.
- OHA started the first round of interviews with four candidates last week and this week.
- OHA's hiring process will include engaging with stakeholders who will provide input into the candidate selection. OHA is still working out this process and will be shared within the next few weeks.
- The position is open until filled.

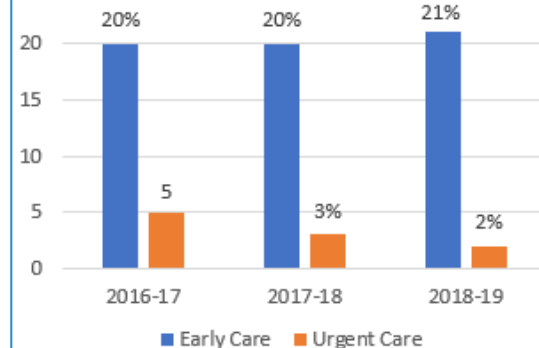
Attendance OrOHC K-12 Committee Meetings
(3 - 4 meetings/year, Year-Month)



Percentage of Eligible Schools w/ School Dental Sealant Programs



Percentage of Children at Eligible Schools in Oregon Referred for Early/Urgent Care



Certified School Dental Sealant Program Results

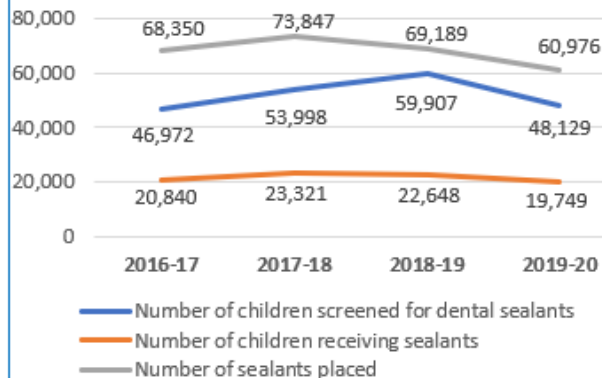


Table 5: Oral Health of Oregon Children in First, Second, and Third Grades

Smile Survey Year	2002	2007	2012	2017	Healthy People (HP)			
					2020 Objectives for 6 to 9 year olds		2030 Objectives for 3 to 19 year olds	
					Baseline	Objective	Baseline	Objective
Caries Experience (primary or permanent)	57%	64%	52%	49%	54.4%	49.0%	48.4%	42.9%
Caries Experience (permanent)	12%	17%	10%	5%				
Untreated caries	24%	36%	20%	19%	28.8%	25.9%	13.4%	10.2%
Rampant Decay	16%	20%	14%	5%				
Children with sealants	32%	30%	38%	42%	25.5%	28.1%	37.0%	42.5%
Number of children screened	3,956	3,865	5,258	8,008				

Definitions:
 Caries experience: cavities that are untreated or have received treatment
 Untreated caries: cavities that have not received appropriate treatment
 Rampant decay: Seven or more teeth with treated or untreated decay
 Children with sealants: one or more permanent molars with a sealant

School Based Health Centers	2015-16	2016-17	2017-18	2018-19	2019-20
Number of SBHCs in Oregon	76	78	76	79	79
Number with a dental provider	14	14	16	16	11
Number of visits for dental	1,718	2,332	2,476	1,941	2,100
% of visits for dental	1%	1%	2%	2%	2%
Clients receiving sealants	*	*	107	319	353
Fluoride varnish provided	*	*	**	**	*
Restorative provided	*	*	**	**	*

Oregon Health Authority. Oregon School-based Health Centers. Retrieved from

<http://www.healthoregon.org/sbhc>

* No data available

**Need data

2,076 visits pre-COVID; 24 visits during COVID

Committee Projects

Current:


- Sharing COVID mitigation strategies – including ongoing communication with school staff and parents
- Website (healthyteeth.us) – gathering input/comments
- Facebook page “Healthy Teeth for a Lifetime” – gathering Followers
- Survey of sealant programs’ summer plans, and fall plans

Completed:

- Oral Health Toolkit for School Based Health Centers
- Gap Analysis Survey for School Dental Sealant Programs

Facebook page

- ▶ Oregon Oral Health Coalition already has a Facebook page.
(<https://www.facebook.com/oregonoralhealthcoalition>)
- ▶ <https://www.facebook.com/Healthy-Teeth-for-a-Lifetime-103720055147942>
- ▶ Would you like something posted on the new Facebook page? Just contact me.
- ▶ I plan to “boost” something once a week for one month to see what happens. If you want to see those posts, please “follow” us.
 - Go to Facebook, type in “Healthy Teeth for a Lifetime” and click on it, then click on “Follow”... not just “Like.”



CareQuest - this was boosted on our Facebook page:

- ▶ Continuing Education from CareQuest:
 - FREE
 - Interactive
 - Interesting
 - High-level
 - Public-health-minded
 - ADA CERP accredited

Go to:

<https://www.carequest.org/education/online-courses>

Report on the Oregon Community Foundation (OCF)

- ▶ Coalition changed its name from the “Pediatric Oral Health Coalition” to “Healthy Teeth, Bright Futures.”
- ▶ In-house survey found highest priorities for OCF members were policy, education, and supporting school-based dental programs.
- ▶ HB 2969 states that: For...health education standards, the [State Board of Education] shall consult with:
 - Dental health professionals who have experience working in public health and with children
 - OHA dental director or designee
- ▶ One OCF member is embarking on a landscape scan of policies around the country that are designed to improve oral health for kids.

OCF K-12 Workgroup

- ▶ Consensus from the group that education should focus on the grades when first and second molars erupt (1, 2, 6, and 7) which mirrors what most sealant programs serve.
- ▶ But “kids need repetition” – perhaps a succession of limited modules for all grades.
- ▶ Several members expressed support for the Mercy Foundation Healthy Kids Outreach Program’s Learning Lab (“No need to reinvent the wheel”)
- ▶ Mercy Foundation will work with OCF and possibly a consultant to determine next steps.

**A sincere thank-you to OCF and Tom Holt
for their good work and for shepherding
HB 2969 through the legislative process.**

Update of COVID-19: Adolescents

- ▶ Pfizer-BioNTech vaccine is already going into the arms of adolescents 12 and up.
- ▶ Moderna said this week that its Covid-19 vaccine was powerfully effective in 12- to 17-year-olds in a clinical trial and that it planned to apply for F.D.A. authorization in June.
- ▶ Both the Pfizer and Moderna vaccines for 12- to 17-year-olds use the adult dose.

By fall, middle and high school students will have had plenty of time to receive both doses of a vaccine.

Update of COVID-19: Children

Pfizer:

- Ages 2 to 11
- 450 participants (300 in the active vaccine group and 150 in the placebo group)
- Testing 3 different dose levels
- Will seek clearance in September for the children's vaccine

If Pfizer's vaccine is authorized for use in younger children on schedule, those students will have had the opportunity to be fully vaccinated by Thanksgiving.

Update of COVID-19: Children

Moderna:

- ▶ Moderna is testing its vaccine in children as young as 6 months.
- ▶ The Moderna trial is studying different dosing strategies in 6,750 healthy children in the United States and Canada. In adults, the standard dose is 100 micrograms given four weeks apart.
- ▶ In Moderna's study of children aged 2 to 11, the company is testing doses of either 50 or 100 micrograms. In children younger than 2 years, Moderna is studying shots of 25, 50 or 100 micrograms.
- ▶ **Moderna hasn't indicated a release date.**

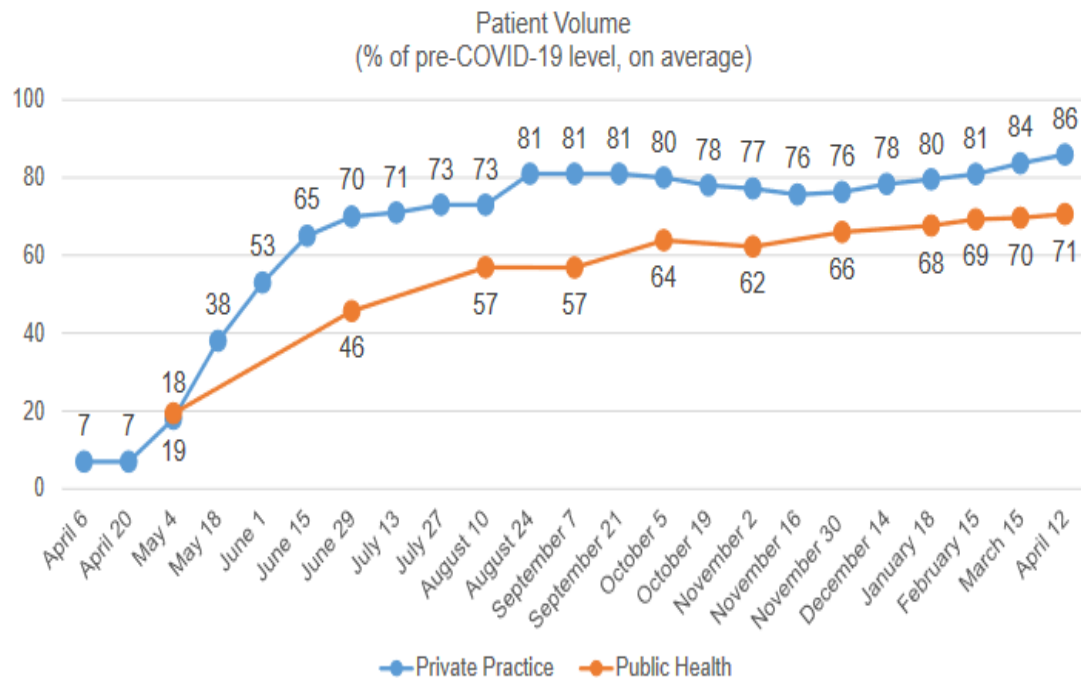
Data Centers & Global Warming

- ▶ The digital sector is responsible for **2.3%** of global greenhouse gas emissions. These facilities are responsible for everything from power grids, telecommunications, and transportation networks to banks, security systems, entertainment, and public health.
- ▶ Big move to **green data centers** which utilize energy-efficient technologies.
- ▶ Such data centers can reclaim unused power to use it for different applications. In a way, these data centers consume energy very efficiently thereby reducing the capital expenditure.

Dental practices are recovering from the effects of COVID

Patient Volume

How does this week compare to what is typical in your practice, in terms of... *

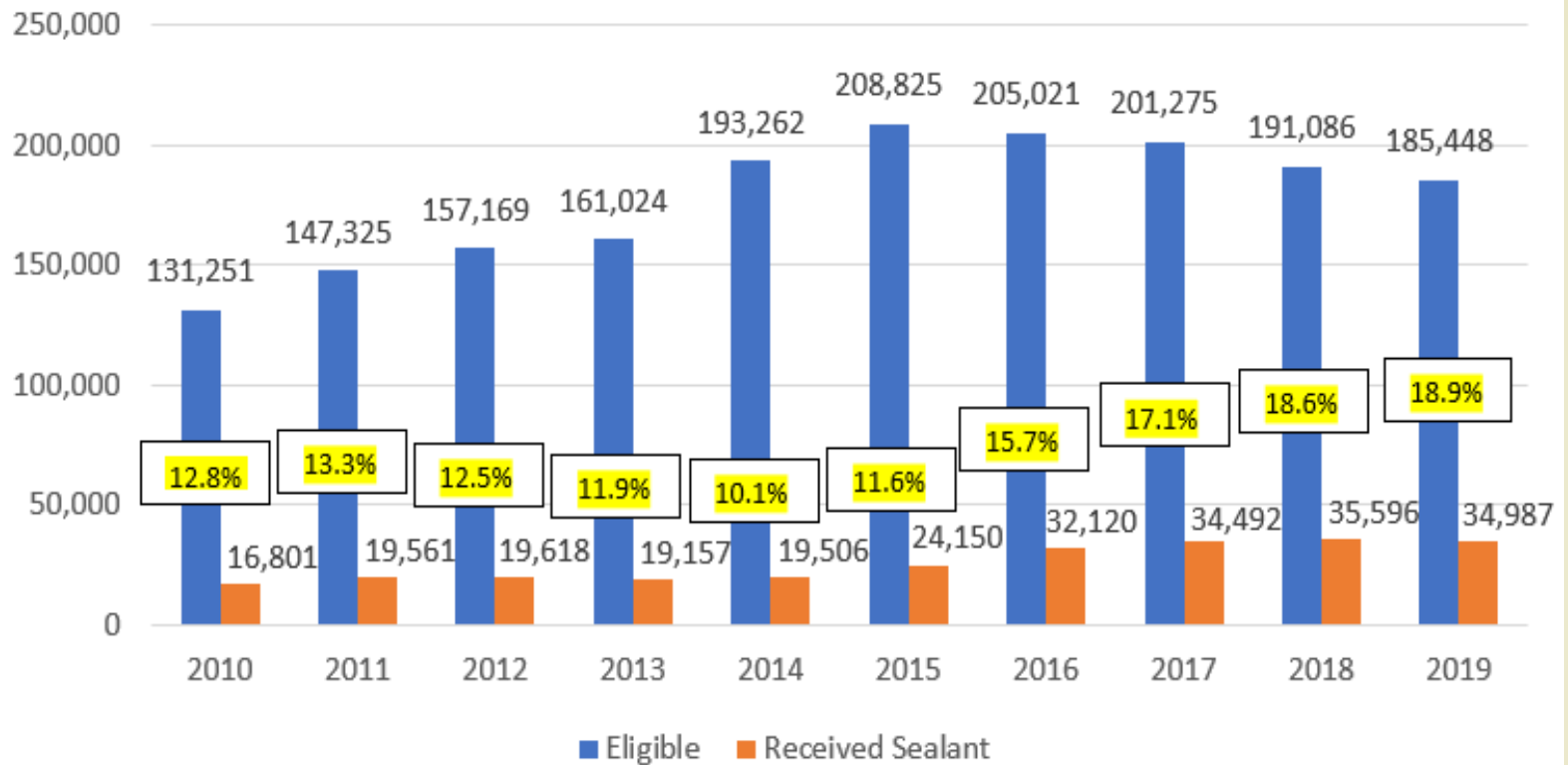


Insight: Patient volume in private practices was at 86% of pre-COVID-19 levels, nationally, in April.

Patient volume is increasing and is at its highest level since the onset of the pandemic.

Oregon: Medicaid-Eligible Receiving Sealant, Ages 6-14

Note: Medicaid Expansion in 2014



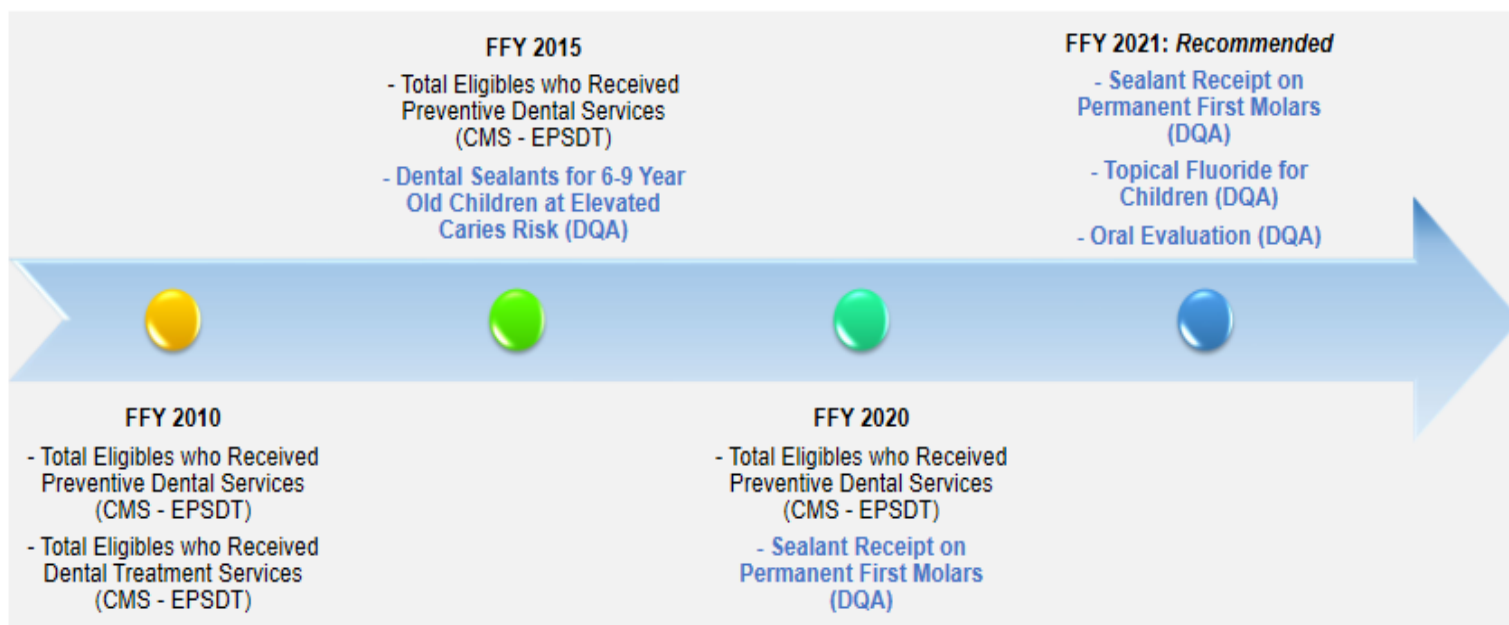
<https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html>

Washington Smile Survey: 18% rampant decay
Oregon Smile Survey: 5% rampant decay

Closing the gap: moving from broad utilization indicators to evidence-based quality measures




Centers for Medicare & Medicaid Services: Core Set of Children's Health Care Quality Measures for Medicaid and CHIP - Dental and Oral Health Services





Value-based Care

- ▶ The Centers for Medicare & Medicaid Services (CMS) began emphasizing **value-based**, quality healthcare over the **quantity** of provider visits in 2008 (13 years ago).
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Dental Quality Alliance (5-21-2021)

DQA: Established by the American Dental Association

- ▶ ADA asking **private** dental offices to voluntarily submit their “unidentified” data to build up a usable database.
- ▶ “Take dental services out to the community.” It is no longer, “Build it and they will come.”
- ▶ “Preventistry”- Prevention, rather than treatment.
- ▶ Shared decision-making; Become a coach; Be patient – not everyone sees the importance of dental. People are not taught about dental care.
- ▶ “It’s more important to BE with someone.”

Dental Quality Alliance (5-21-2021)

- ▶ Value-based payments are a key strategy to controlling costs
- ▶ Addressing inequities now will save money down the road.
- ▶ Many organizations are hiring “extenders” of the health team, like Traditional Health Workers, nurses, medical assistants, and ?

CareQuest



Blue circle: DentaQuest Foundation

Red circle: DentaQuest Institute

Blue & Red partnered: DentaQuest Partnership for Oral Health Advancement

Purple circle: Now CareQuest

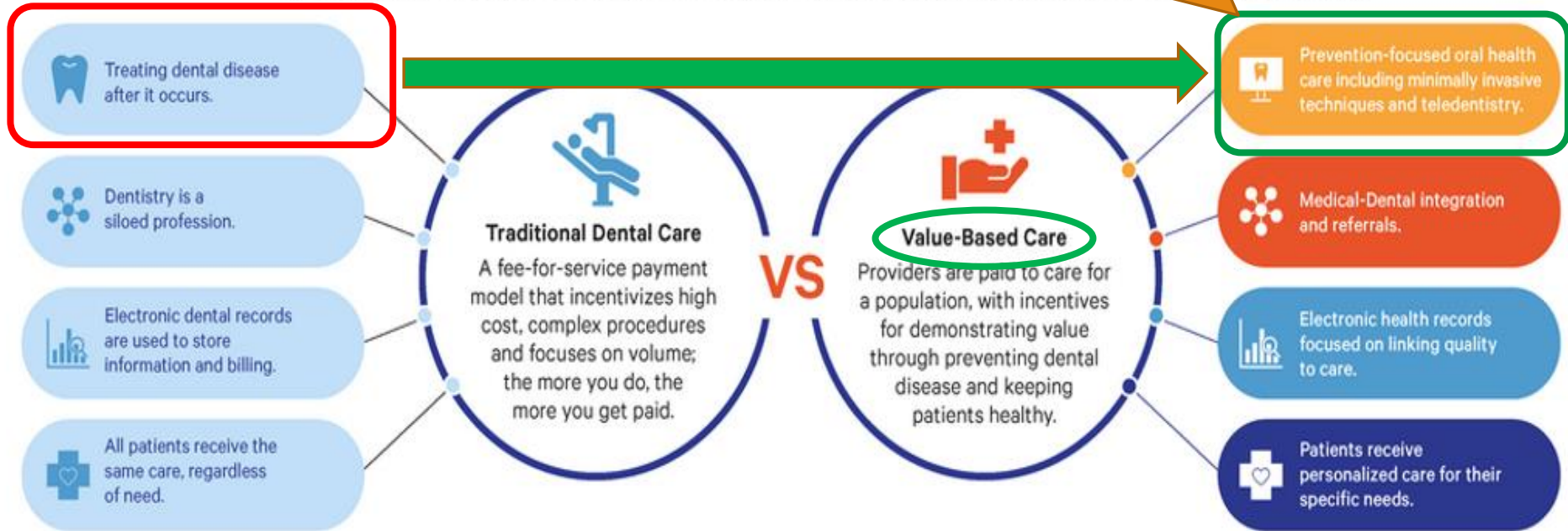
Improving the

For more than two centuries dentists have practiced dentistry. Business plan, staffing, documentation, health insurance, and communication have all been designed and

Prevention-focused oral health care including minimally invasive techniques and teledentistry.

care delivery, and procedures, volume over value.

The transition to value-based care (VBC) has the potential to change each of those in a significant way.




Online Courses

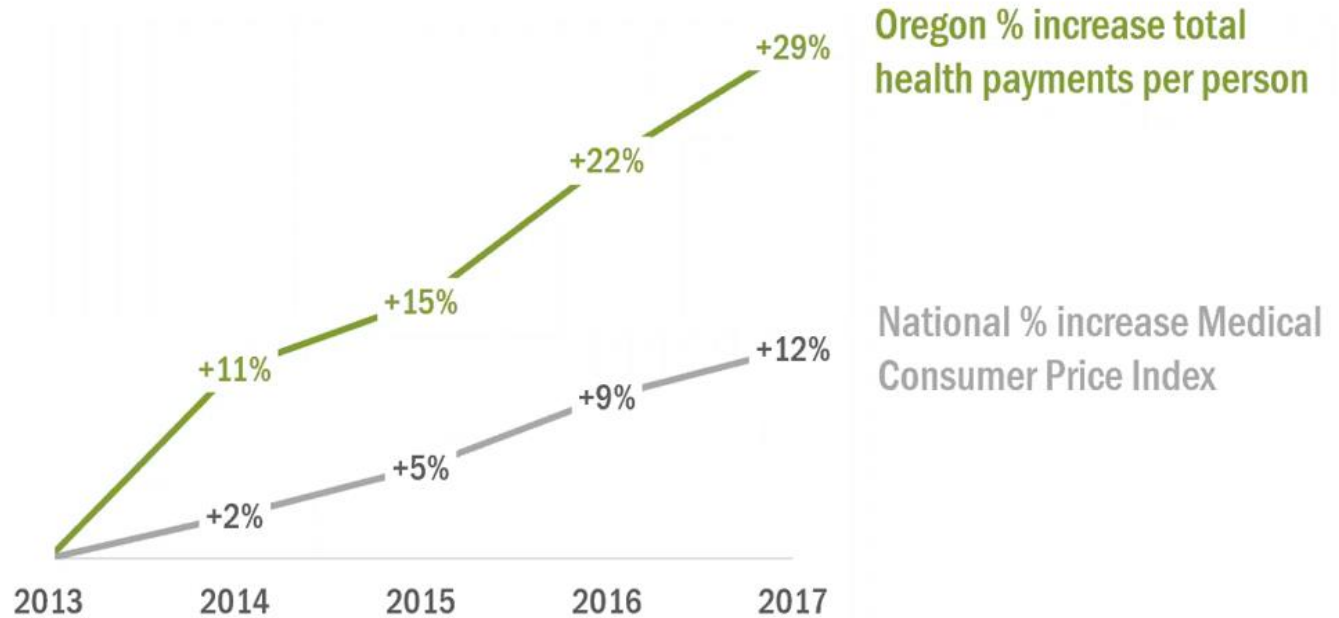
<https://www.carequest.org/education/online-courses>



CareQuest Webinar (5-27-2021)

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- ▶ “As systems transition to value-based payment models, the provider will no longer benefit financially from increasing services, and instead will learn to focus on improving care (preventing complications and readmissions), and ultimately on delivering the best outcome for the patient.”
 - ▶ Example: Value-based care based on “time-units” rather than on fee-for-service. Less tendency to overtreat.

Health care costs are growing in Oregon




Source: Oregon's All Payer All Claims database. Includes only claims-based payments for all lines of business. Non-claims payments such as value-based payments or alternative payment methodologies are not included. Carriers' profit margin and administrative overhead not included.

CareQuest Webinar (5-27-2021)

- ▶ The “Oregon Value-based Payment Compact” represents a collaborative partnership to advance the adoption of value-based payment across the state.
- ▶ The Compact, jointly sponsored by the Oregon Health Authority and the Oregon Health Leadership Council, already has 45 signatories, covering 71 percent of the people in Oregon.
- ▶ Advanced Health; Aetna, a CVS Health Company; AllCare Health; CareOregon; Cascade Health Alliance; Columbia Pacific CCO; Eastern Oregon CCO; Health Net of Oregon; Health Share of Oregon; Intercommunity Health Network CCO; Jackson Care Connect; Kaiser Permanente Northwest; Legacy Health System; Moda Health; OHSU Health; Oregon Association of Hospitals and Health Systems...and many more.



CareQuest Webinar (5-27-2021)

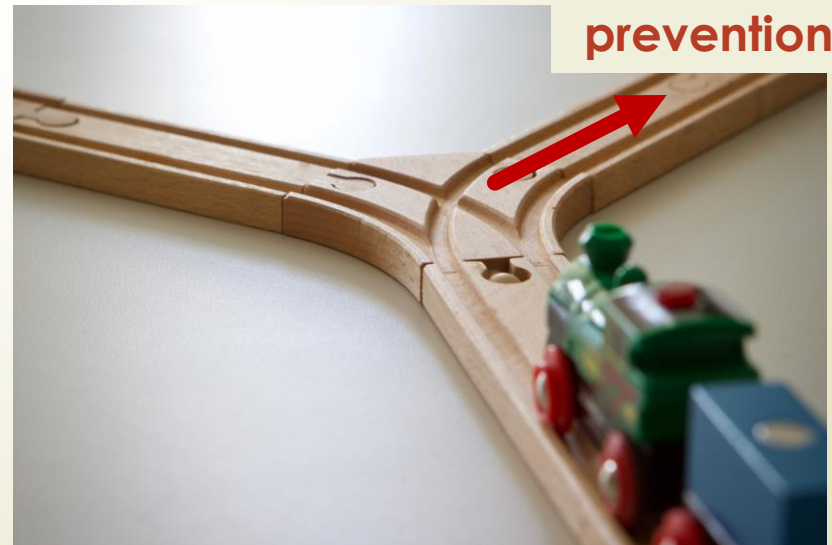
- ▶ “Take the care to the people.”
 - ▶ Walmart’s convenient health supercenters, with an aggressive cash-pay pricing strategy of \$40 primary care visits and \$25 dental exams, not only bypass insurance companies, but also reduce administrative costs and represent a giddy ability to scale.
 - ▶ Many Walmart stores are in rural locations where health system competition is sparse.
 - ▶ CVS is opening 1,500 HealthHUBs, and Walgreens partnered with VillageMD to open over 500 primary care clinics. These options offer consumers convenience, price transparency, and a reasonably good patient experience.
 - ▶ Create dental clinics that can serve as medical exam rooms.
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CareQuest

- ▶ “We are going to have to break down the walls of the dental clinic. The hygienists, dental health coordinators have to get out into the community. We cannot lower disease in the clinic. The last 100 years has shown us that. Just get to know the people in the community. Can you just be cool? Go out and BE COOL in the community.”

**We are on the right track.
Don't get off the train!!!**

**Value-
based
prevention**





Update on OHA

➤ Karen Phillips

