

Advocating for Healthy Smiles: Children and Oral Health

February 9, 2017 2:00 p.m. EST



Agenda

- Overview and Introductions
- Addressing the Issue: Connecting Children Enrolled in Medicaid and CHIP with Oral Healthcare
- Promoting the Importance of Oral Health
- School-based Initiatives Promoting Oral Health Benefits and Services
- Using Social Media to Promote Medicaid & CHIP Enrollment
- Campaign Resources
- Questions and Answers



The Importance of Oral Health: Not Just What, but Why

Lynn Douglas Mouden, DDS, MPH
Chief Dental Officer
Centers for Medicare & Medicaid Services



Poll Question: How often does your organization leverage oral health benefits in your Medicaid and CHIP outreach and enrollment work?

- a. Never
- b. Rarely
- c. Regularly
- d. Always

Dental Caries (Tooth Decay) in Children

- A transmissible bacteria-based disease
- Most serious when it develops early before age 3
- Common: 50% of children have had at least one cavity by age 5
- Chronic: once established can last a lifetime
- Consequential: pain, interference with development and eating, and other serious infections
- Expensive: children treated in the operating room can cost \$9,000 -\$15,000 per episode









The Importance to Children, Parents and State Medicaid Programs

- Inequitably distributed: 80% of the disease is found in 20% of children – mostly Medicaid children
- More than 6 million school hours are lost each year due to dental problems
- Lack of access to dental care is often cited in surveys of unmet need among parents of Medicaid-enrolled children

Addressing the Issue: Connecting Children Enrolled in Medicaid and CHIP with Oral Healthcare

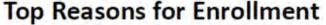
Laurie Norris, JD

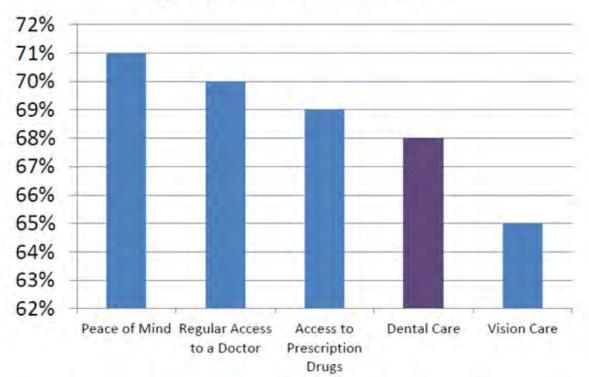
Senior Policy Advisor for Oral Health Centers for Medicare & Medicaid Services





Dental Coverage Motivates Families to Enroll in Medicaid and CHIP



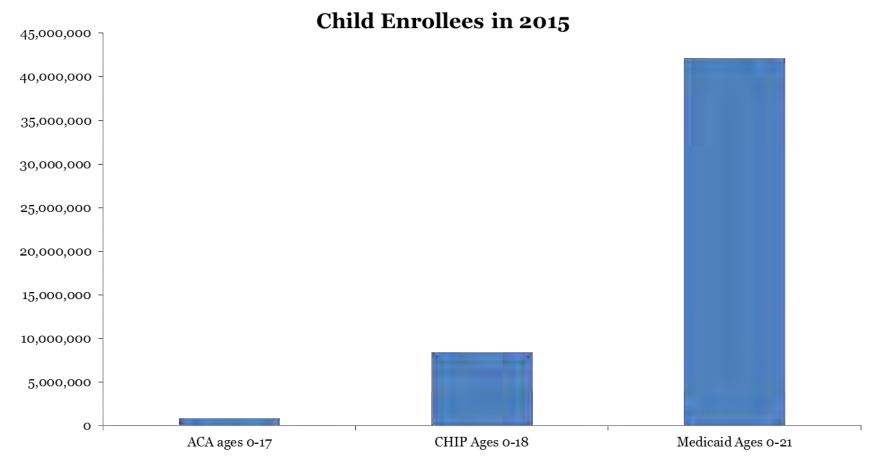


68% of parents surveyed cited dental care as a motivating factor for enrolling their child in Medicaid or CHIP - making it one of the top 5 reasons for enrollment.

Source: Informing CHIP and Medicaid Outreach and Education, Topline Report, Key Findings from a National Survey of Low-Income Parents, Centers for Medicaid and Medicare Service (CMS), November 2011



More Than 50 Million Children Have Public or Marketplace Dental Coverage



Sources: ACA (ASPE 2015 Enrollment Report, available at http://aspe.hhs.gov/sites/default/files/pdf/83656/ib_2015mar_enrollment.pdf; CHIP (CMS Report: FFY15 Number of Children Ever Enrolled in Medicaid and CHIP); Medicaid (CMS 416 data FFY 2015 Line 1a).



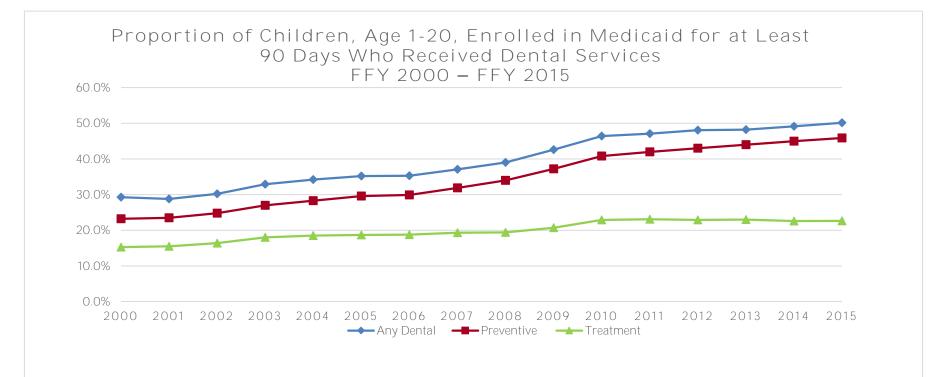
Scope of Children's Dental Benefits

Varies

Affordable Care Act	CHIP	Medicaid
 Pediatric dental care is an "essential health benefit." Scope of benefits: varies by plan May not have annual or lifetime maximums Cost-sharing is allowed but limited Dental benefits may be embedded in health coverage or may be in a standalone dental plan 	 Dental coverage is mandatory. Scope of benefits: must cover dental services necessary to prevent disease, promote oral health, restore oral structures to health and function, and treat emergency conditions Cost sharing and limits vary by state 	 Dental coverage is mandatory. Scope of benefits: must cover dental screenings and dental care necessary to correct or ameliorate dental conditions No cost sharing or annual or lifetime limits allowed



Steady Progress on Children's Use of Dental Care in Medicaid



Source: FFY 2000-2015 CMS-416 reports, Lines 1, 1b, 12a, 12b, and 12c

Note: Data reflect updates as of 10/2/15.

Data for OH were excluded in the calculation of the percentages for FFY 2011 through FFY 2015.



CMS Advances Oral Health Initiative 2.0

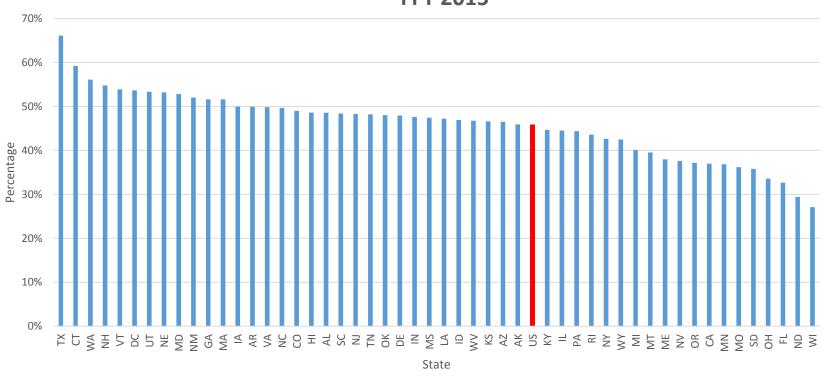
- Aim: Increase by 10
 percentage points the
 proportion of children
 receiving a preventive
 dental service
- National Goal:
 - FFY 11 Baseline = 42%
 - FFY 15 Progress = 46%
 - FFY 18 Goal = 52%
- Each state has its own baseline and goal.





Preventive Dental Services, by State

Proportion of Children Ages 1-20 Receiving A Preventive Dental Service FFY 2015



Source: FFY 2015 CMS-416 reports, Lines 1b and 12b.

Note: With the exception of OH, the national FFY 2015 percentage used data reported by states as of August 30, 2016.



Good News on Disparities: Access to Care

By race/ethnicity:

Child had a dental vis 2000	sit within the pre and 2014	vious year
	2000	2014
Hispanic children	56.8%	78.2%
Black children	67.2%	79.3%
White children	74.9%	80.5%

Source: Larson, K, Cull, WL, Racine, AD, Olson, LM. *Trends in Access to Health Care Services for US Children:* 2000–2014. Pediatrics, Vol. 138, Issue 6, December 2016.

By source of insurance:

In 2012, after adjusting for demographic and parent characteristics, there was no difference between public and private insurance as to parentreported use of dental care by children.

Source: Shariff, JA and Edelstein, BL. *Medicaid Meets Its Equal Access Requirement For Dental Care, But Oral Health Disparities Remain.* Health Affairs, Vol. 35 No. 12, December 2016.



Not So Good News on Disparities: Oral Health Status

By race/ethnicity:

Percent of children ages 5 to 9 with untreated tooth decay¹

	1999-2002	2011-2012
Hispanic children	34.5%	24.5%
Black children	30%	24%
White children	19%	15%
	1999	2014
Al/AN children, ages 2 to 5	68%²	41%³

Sources: ¹ADA Health Policy Institute, presentation at the National Child Health Policy Conference, February 2016; ²Indian Health Service, Early Childhood Caries Collaborative webpage, https://www.ihs.gov/doh/index.cfm?fuseaction=ecc.display; ³Ricks, TL, Phipps, KR, Bruerd, B. *The Indian Health Service Early Childhood Caries Collaborative: Five-year Summary*.

Pediatric Dentistry, Vol. 37 No. 3, May/June 2015.

By household income:

Percent of chi	ldren ages 5 to 9 tooth decay	with untreated
	1999-2002	2011-2012
<100% FPL	32.5%	25%
100%-199% FPL	30%	21.5%
200%-399% FPL	17.5%	15%
400%+ FPL	9.5%	Not available

Source: ADA Health Policy Institute, presentation at the National Child Health Policy Conference, February 2016.



How You Can Help...

Outreach	 Parents highly value dental coverage for their kids. Leverage this interest in your outreach activities. Use campaign resources: buttons, banners
Enrollment	 Mention dental coverage in your enrollment conversations – "your coverage includes medical, dental, vision" Use campaign resources: Think Teeth materials and digital button and banners
Connect	 Teach parents about the Medicaid/CHIP dentist locator Post the dentist locator widget on your website Distribute special needs flyer



Thank you!

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Dr. Lynn Mouden Lynn.Mouden@cms.hhs.gov





School-Based Health Alliance School Oral Health Project

Donna Behrens

Director of School Oral Health Services
School Based Health Alliance



Project Goal



To create a respectful, shared learning space that will promote a robust learning community that inspires innovation and mutual learning among the Alliance, school oral health partners and local school districts



Why Schools?

- 36% of students with access to health care missed 2 or more days due to dental pain
- 73% of students who can not afford dental care missed 2 or more days due to dental pain
- 12 times more restricted activity days due to dental pain for low SES children
- 51 million school hours are missed each year due to dental problems
- 2.3 times more likely to have poor academic performance for children with poor oral health





Why Schools?

- Time when critical health behaviors, beliefs, and attitudes are formed
- Time of receptivity of youth
- Time to reinforce health messages
- Time to learn to make healthy decisions and adopt healthy behaviors



SBHA Year 1 Focus: Foundation Building, Learning, and Listening

- Endeavored to learned as much as possible about each of the ten school districts
- Understood the unique political and policy environment of each school district program and provider group
- Learned more about the connections between the schools, providers, parents and other community partners and stakeholders in each district

SBHA Year 2: Launching, Supporting, and Innovating



- Create the space and provide the support for a learning community within and among the school districts that is focused on increasing consent rates
- Support the convening in each participating school district of state and local groups to discuss policy, funding, and sustainability
- Work with a group of national oral health stakeholders to create a on line resource compendium of schoolbased oral health tools, resources, information and links to national, state and local sites with information
- Convene a group of national, state, and local stakeholders to create some consensus around what is meant when one says "school-based oral health"



What is our Learning Community?

 The shared space where teams learn from each other, and experts, and work together to collectively identify and test ways to increase the number of consents for oral health



- Utilize the Plan Do Study Act small quick test to learn how a specific observable change works in real world
- Focus on increasing consents for oral health services

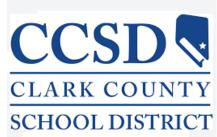
Who is Part of Our School Oral Health Learning Community?





























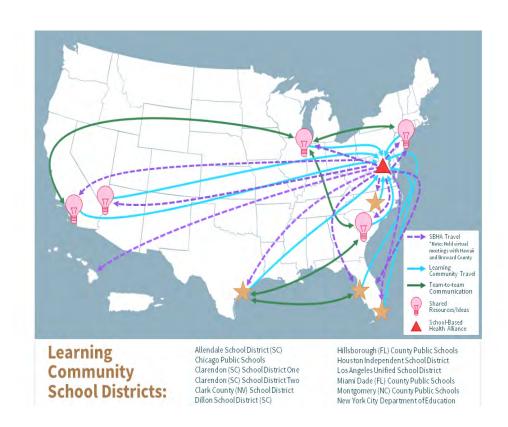






Progress to Date

- Defining and aligning around components of school oral health
- Participation of 12 school districts in the learning community – pre-launch and launch completed
- Launch basecamp and data portal
- Creation of a repository for school oral health resources –beta just launched







If you want to go fast, go alone.

If you want to go far, go together.



Thank you!

Donna Behrens – Director, School Oral Health Services

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Kate Schechter – Program Manager, School Oral Health <u>kschechter@sbh4all.org</u>

Nataki Duncan – Program Assistant nduncan@sbh4all.org





Smiles for a Lifetime School-Based Dental Program

Georgia Famuliner, R.N.Operations Director
Smiles for a Lifetimes





Preventive and Restorative Pediatric Dental Services provided in these S.C. rural impoverished communities:

- Allendale County School District
- Dillon Four School District
- Clarendon 1 School District
- Clarendon 2 School District

Serving ages K-4 – 12th grades



Outreach and Enrollment Efforts

- Each location employs an Outreach worker.
- Outreach attends school and community events (PTO meetings; Back to school events; Health Fairs; Open House, etc.)
- Outreach serves as liaison between Smiles, schools, and community.
- Increases consent return through parent/relative contact.
- Assists parent in completing consents, as needed.
- Outreach via telephone and in-person contact.



- 3,677 children served in 2015-2016 school year.
- Since opening in 2001, Smiles has treated 14,636 patients and filled 88,016 cavities.
- Community Outreach Advocate





Resources for Children and Families

- Smiles Collection Specialist assists parents with Medicaid enrollment.
- Receives Self-Pay
 Demographic Information
 sheet for patients that are non Medicaid eligible or have no
 private insurance.
- Verifies that above is correct.

- Contacts parents to see if they are offered dental insurance.
 Encourages patient to add child to their policy during open enrollment.
- If company offers no benefits, or they cannot afford insurance, then encourage Medicaid enrollment.
- Explains to parents that enrolling in Medicaid not only helps Smiles, but also assists hospitals, physician offices, Optometrists, pharmacies, and other medical facilities receive payment.



Child's Name:		MaleFemale _
Social Security #		DOB:
Parent's Name:		
Mailing Address:		
Home Phone:	Cell Pr	none:
		y#
Medicaid #		
**Please list the following		en though not eligible)
**Please list the following		en though not eligible)
**Please list the following Private Insurance:	information on chart (eve	en though not eligible) (this is parent's nam
**Please list the following Private Insurance: Employee Name:	information on chart (eve	3 3 7
**Please list the following Private Insurance: Employee Name:	information on chart (eve	(this is parent's nam
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**Please list the following Private Insurance: Employee Name: DOB Employer: Group#	information on chart (every special Security #	(this is parent's nam



 The Smiles for a Lifetime mission promotes over-all health and wellbeing for each patient.

Collection
 Specialist



Thank you!

Georgia Famuliner

<u>GFamuliner@welvista.org</u>



Using Social Media to Promote Medicaid & CHIP Enrollment

Matt Jacob

Communication & Outreach Director Children's Dental Health Project



1. Work "dental" into your messages

Kids' dental exams, cleanings and other services are included in Medicaid coverage. Learn more: http://bit.ly/24L24j9



2. Use the right hashtags so others can "find" you

Besides using #Enroll365, try using hashtags such as #WomensHealth, #LatinoHealth and #MomAndBaby.



2. Use the right hashtags so others can "find" you



CDC Diabetes @CDCDiabetes Jan 29

THREE types of #diabetes and their impact on #WomensHealth.

1.usa.gov/1Z1ZIvu



Xavier Becerra 🧼 @XavierBecerra - Jan 27

I'll be on @MSNBC, talking about news of the day with @chucktodd shortly. Tune in! #immigration #WomensHealth



Riverside Med Center @RiversideMC Jan 21

Low-carb diets are proving to boost metabolism, according to this study. #WomensHealth ow.ly/na\p308dD2w



LeAnn Thieman @LeAnnThieman - Jan 21

#Nurse #Wellness: Women Twice as Likely to Die from #HeartAttack. dld bz/eDs77 #womenshealth #hearthealth #stress

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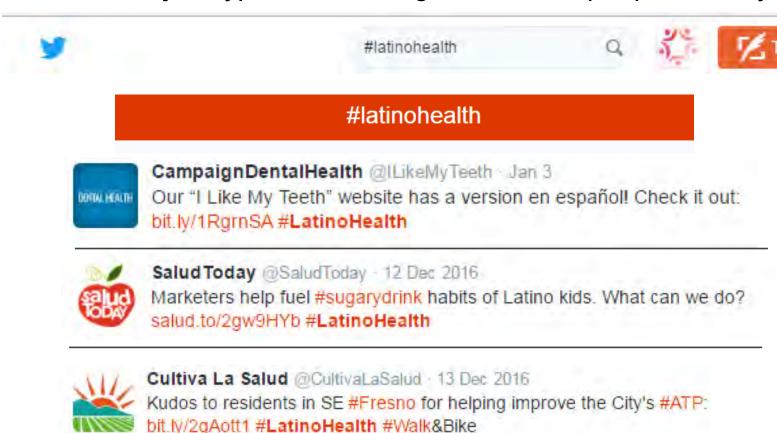


LeAnn Thieman @LeAnnThieman - Jan 21

#Nurse #VVellness: Vvomen Twice as Likely to Die from #HeartAttack. dld.bz/eDs77 #womenshealth #hearthealth #stress



In Twitter, just type in a hashtag to find what people are saying





3. Appeal to your audience's curiosity

• Use free sites to create a quiz (e.g., Playbuzz

or Qzzr)





4. Put a face on the issue

Health care and coverage is really a human story — it's about people and families.

Photos are a good way to reinforce this.

5. Look for social media events that connect with your issue — and start participating

- You don't need an invitation.
- It's a great way to raise the profile of your work.
- Your messages will probably be liked, shared or "retweeted" so they are likely to reach a larger audience.



Participate in Twitter Events

Twitter Chat – This event uses a Q&A format to educate or engage a broader audience about a topic. One Twitter user asks the Q's and waits for others to answer.



Twitter Storm – This event is not moderated. At the beginning, a host organization welcomes people to the Storm and then anyone who wants can send tweets during the time period (hour).

Participate in Twitter Events

Tuesday, February 14 (1-2 pm ET/10-11 am PT)

Host:

Salud Today (@SaludToday)

Format:

Chat (Q & A)

Hashtags:

#SaludTues #iLikeMyTeeth



Participate in Twitter Events

Wednesday, February 22 (2-3 pm ET/11-12 noon PT)

Host:

MomsRising (@MomsRising)

Format:

Chat (Q & A)

Hashtag:

#WellnessWed



"I don't have time to write tweets"



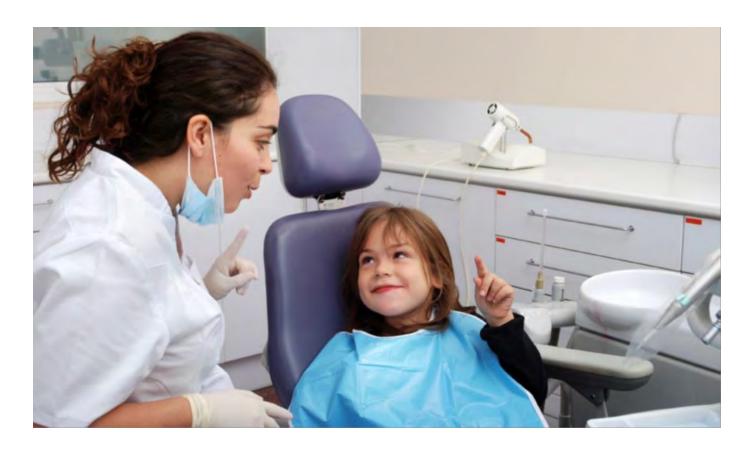
- Email mjacob@cdhp.org to receive a message kit with a variety of tweets to choose from.
- 2. Use the social media messages from the Think Teeth page: https://www.insurekidsnow.gov/initiatives/oral-health/index.html

Thank you!

Matt Jacob mjacob@cdhp.org



Connecting Kids to Coverage National Campaign Resources





InsureKidsNow.gov Resources



Find materials in the Outreach Tool Library or by choosing a Campaign & Initiative topic on the Campaign website.



Additional Campaign Materials



- Outreach Materials— Customizable Posters/Palmcards, Videos, Tip Sheets
- Informational Webinars
- "Campaign Notes" **eNewsletter**
- Ready-Made Articles, Radio **Scripts**
- Digital Media Tools
- TV & Radio PSAs (forthcoming)
 InsureKidsNow.gov



Examples of Material Topics

Year-round Enrollment

Oral Health

- Vision
- Teens
- Sports





Think Teeth

Digital Media Tools

- Sample social media posts
- Website buttons and banners
- Widgets







Think Teeth

- eNewsletters
- Sample articles
- Tear Pads
- Distribution tips



You can help your child prevent cavities! Here's how:

- Get regular dental check-ups, starting at age 1.
 Ask about dental sealants that prevent tooth decay.
- · Brush twice a day for 2 minutes using fluoride toothpaste.
- · Limit foods and drinks with sugar.

Your child could be eligible for dental care through Medicaid and CHIP. Services include teeth cleanings, check-ups, x-rays, fluoride, dental sealants and fillings.

To enroll your child, call **1-800-318-2596** (TTY: 1-855-889-4325) or visit **HealthCare.gov**. To find a dentist, use the Dentist Locator on **InsureKidsNow.gov**.





CAUS Droot et No. 11774

Dental Care for Children with Special Needs

If your child has a developmental distallating, a behaviorial issue of a physical invasion, by important for you to this a demands who can give demand can whate accommodately your climbs a impact assistant. Children with special meets—ask maid arriving discreters, Down syndrome and commodate judy — may meet arrival to time or support where several a demand of the commodate pudy — may meet arrival to time or support where several a demand of the commodate pudy.



Supports for Special Needs at the Dentist

Finding the right dentiat for your child requires belancing your child's needs with the dentist's experience. Call or visit the dentist's office to find out if the dentist's familiar with your child's toordoon and how it yould affect his or her or all health. Describe the special supports your child may need and ask whether the dentist can provide them. When looking for a dentist, think about these special supports and dentist wealth affect.

- PRE.APPCINTMENTS: Does the denote offer pro-appointments! A pre-appointment would give your child a charce to meet the denote and see the earn room and equipment. This toylid help your child feel more controllable and be more copierated during the actual detail appointment.
- ACCESSBLETY: Are the areas reside and outside the demon's office accessible for your child? If your child uses a wheelchair, you'll want to find a demon's office where the wheelchair will fit through the from door and in the examination room.
- EXPERENCE: Demissis and their staff who have already cared for children with special needs may have developed strategies that could help support your child. They may also be able to give you advice on oral health home care. We special for its unknown seems.
- SPECIALIZED CLINICAL TRAINING Some general densits and most pediatric dentists get special training to their children with special needs. Before scheduling an appointment, find out whether the dential has had such remain.
- SEDATION: Some children may need general anesthesia, while others may need some mild sedason, which can be given by mouth or from an N drig. Speak with the dentity about your child's options, and find our what he or she recommends for your child.

Steps to Finding the Right Dentist

These recourses can help you find a demins who can meet your child's special meets.

Use the near tests how Democracy Location on Inservationities gave to find nearly stemess that except Medicald coverage. Either your child's state. Medicald plan name, and 2P dode on address. He's March's Under the relover information's column, look for the demissis ther "Can Accommodate Special Needs." Sellow you make an appointment call or use the demissis ther "Can Accommodate Special Needs." Sellow you make an appointment call or use the demissis of the demission of the demissio

cal or vital the clerifor's ortice to talk about your criter's spin • Family videous is a removed of imperienced family members of children with special needs, Connect with Family videos in your state of week family/clerifor orghidrens for find information on a variety of looks, as well as reflorals, and support from other families.

HealthCare

On to HealthCard, gov or call 1-805-218-2506 (TTF: 1-855-885-4325) to learn more about Medical and not be Childran's Health resurance Program and now to smith your nighte could. These programs store the dental Servalls (1984-91 feet).





Find a Dentist

- Download the Widget: <u>http://datawarehouse.hrsa.gov/tools/widgets.aspx</u>
- Use the Dentist Locator Tool: Go here http://www.insurekidsnow.gov/state/index.html then click on your state.

Insure Kids Now Widget





Customizable Materials

Posters, flyers, palmcards and tear pads

You may choose to insert your program name(s), your state's annual income eligibility limit for a family of four, your website address and/or phone number, and up to two logos. *Please Note:* You may request these changes on all customizable materials.

Your program name(s)

Your state's annual income eligibility limit for a family/household of four

Your website and/or phone number

Up to two logos





Learn how to request material customization here:

https://www.insurekidsnow.gov/downloads/library/print/materialscustomizationguide-english.pdf

InsureKidsNow.gov

Outreach and Enrollment Best Practices

- Outreach Video Library
 - https://www.insurekidsnow.gov/webinarsvideos/video/index.html
- Webinar Archive
 - https://www.insurekidsnow.gov/webinarsvideos/webinars/index.html



Keep in Touch With the CKC Campaign

- Follow us @IKNGov
- Engage with the Campaign on social media
 - Re-tweet, share or tag messages using the hashtags #ThinkTeeth, #Enroll365, #KidsEnroll, #Medicaid and #CHIP
- Sign up for eNewsletters here:
 - https://www.insurekidsnow.gov/newsletter/subscribe/index.html
- Email us at: <u>ConnectingKids@cms.hhs.gov</u>



Questions?



Thank you!



