



Medicaid and CHIP: Dental Coverage Provides Families with Peace of Mind

Webinar:
February 14, 2024
3:00 p.m. EST

Agenda

- **Children's Dental Health: Trends and Insights**
 - Natalia Chalmers, DDS, MHSc, PhD, Chief Dental Officer, Office of the Administrator, Centers for Medicare & Medicaid Services
- **Integrating Oral Health & Behavioral Health**
 - Tim Ricks, DMD, MPH, FICD, FACD, FPFA, Dental Public Health Specialist, Indian Health Service Division of Oral Health
- **Children's Dental Health Awareness and Best Practices**
 - Marla Smith-Brown, Senior Director, Seedco Midsouth Regional Office
- **Aliados Health: Oral Health Outreach Strategies**
 - Yoselyn Ayon, Project Manager, Medi-Cal Programs, Aliados Health
- **Connecting Kids to Coverage National Campaign Resources**
 - Helen Gaynor, MPH, Outreach Contractor, Connecting Kids to Coverage National Campaign, Porter Novelli Public Services, Inc.
- **Questions and Answers**

Children's Dental Health: Trends and Insights



Natalia I. Chalmers DDS, MHSc, PhD

Diplomate, American Board of Pediatric Dentistry

Chief Dental Officer

Office of the Administrator,
Centers for Medicare & Medicaid Services



Every day, CMS ensures that 159.2 million* people in the U.S. have health coverage that works

Medicaid & CHIP

Over **88.4 million** enrollees:

- Medicaid: More than 81.4 million individuals
- CHIP: More than 7.0 million

Medicare

Over **66.4 million** enrollees:

- Fee-For-Service: More than 33.9 million
- Medicare Advantage plans: Close to 32.5 million

Marketplace

Over **16.4 million** consumers:

- State based & Federal Marketplace plan selections

*Subtotal: 171.2 million. Adjust for Medicare/Medicaid dual eligibles (-12 million).

CMS Vision Statement and Strategic Pillars

CMS serves the public as a trusted partner and steward, dedicated to advancing health equity, expanding coverage, and improving health outcomes

STRATEGIC PILLARS



ADVANCE EQUITY

Advance health equity by addressing the health disparities that underlie our health system



EXPAND ACCESS

Build on the Affordable Care Act and expand access to quality, affordable health coverage and care



ENGAGE PARTNERS

Engage our partners and the communities we serve throughout the policymaking and implementation process



DRIVE INNOVATION

Drive Innovation to tackle our health system challenges and promote valuebased, personcentered care



PROTECT PROGRAMS

Protect our programs' sustainability for future generations by serving as a responsible steward of public funds



FOSTER EXCELLENCE

Foster a positive and inclusive workplace and workforce, and promote excellence in all aspects of CMS' operations

CMS Cross-Cutting Initiatives

ELEVATING STAKEHOLDER VOICES THROUGH ACTIVE ENGAGEMENT

CMS will ensure that the public has a strong voice throughout CMS' policymaking, operations, and implementation process.

MATERNITY CARE

Work with states, health care facilities, community providers, and other partners to improve the quality of maternity care, expand postpartum coverage, and support a diverse provider workforce.

SUPPORTING HEALTH CARE RESILIENCY

Prepare the healthcare system for operations after the COVID-19 Public Health Emergency (PHE).

NURSING HOMES AND CHOICE IN LONG TERM CARE

Improve safety and quality of care in the nation's nursing homes.

BEHAVIORAL HEALTH

Increase and enhance access to equitable and high-quality behavioral health services and improve outcomes for people with behavioral health care needs.

ORAL HEALTH

Expand access to oral health coverage so consumers achieve the best health possible, and partner with states, health plans, and providers to expand access and coverage.

NATIONAL QUALITY STRATEGY

Shape a resilient, high-value health care system to promote quality outcomes, safety, equity, and accessibility for all individuals, especially for people within historically underserved and under-resourced communities.

DATA TO DRIVE DECISION-MAKING

Make more informed policy decisions based on data and drive innovation and person-centered care through the seamless exchange of data.

FUTURE OF WORK @ CMS

Foster a culture of care that values employee health and well-being, emphasizes workplace flexibilities and leverages technology to support remote and hybrid collaboration.

DRUG AFFORDABILITY

Ensure that prescription drugs are accessible and affordable for consumers, providers, plans, our programs, and state partners.

RURAL HEALTH

Promote access to high-quality, equitable care for all people served by our programs in rural and frontier communities, Tribal nations, and the U.S. territories.

COVERAGE TRANSITION (COVID-19/PHE UNWINDING)

Ensure as many individuals enrolled in Medicaid and the Children's Health Insurance Program (CHIP) maintain a source of coverage as possible after the COVID-19 Public Health Emergency (PHE) continuous enrollment requirement expires.

INTEGRATING THE 3Ms (MEDICARE, MEDICAID & CHIP, MARKETPLACE)

Promote seamless continuity of care, including experience with health care providers and health coverage, for people served by the 3Ms.

ORAL HEALTH

CMS will consider opportunities to expand access to oral health coverage using existing authorities and health plan flexibilities. Access to oral health services that promote health and wellness is critical to allow beneficiaries and consumers to achieve the best health possible, consistent with the current program authorities for Medicare, Medicaid/CHIP, and the Marketplace. Therefore, CMS plans to partner with states, health plans, and healthcare providers to find opportunities to expand coverage, improve access to oral health services and consider options to use our authorities creatively to expand access to care.



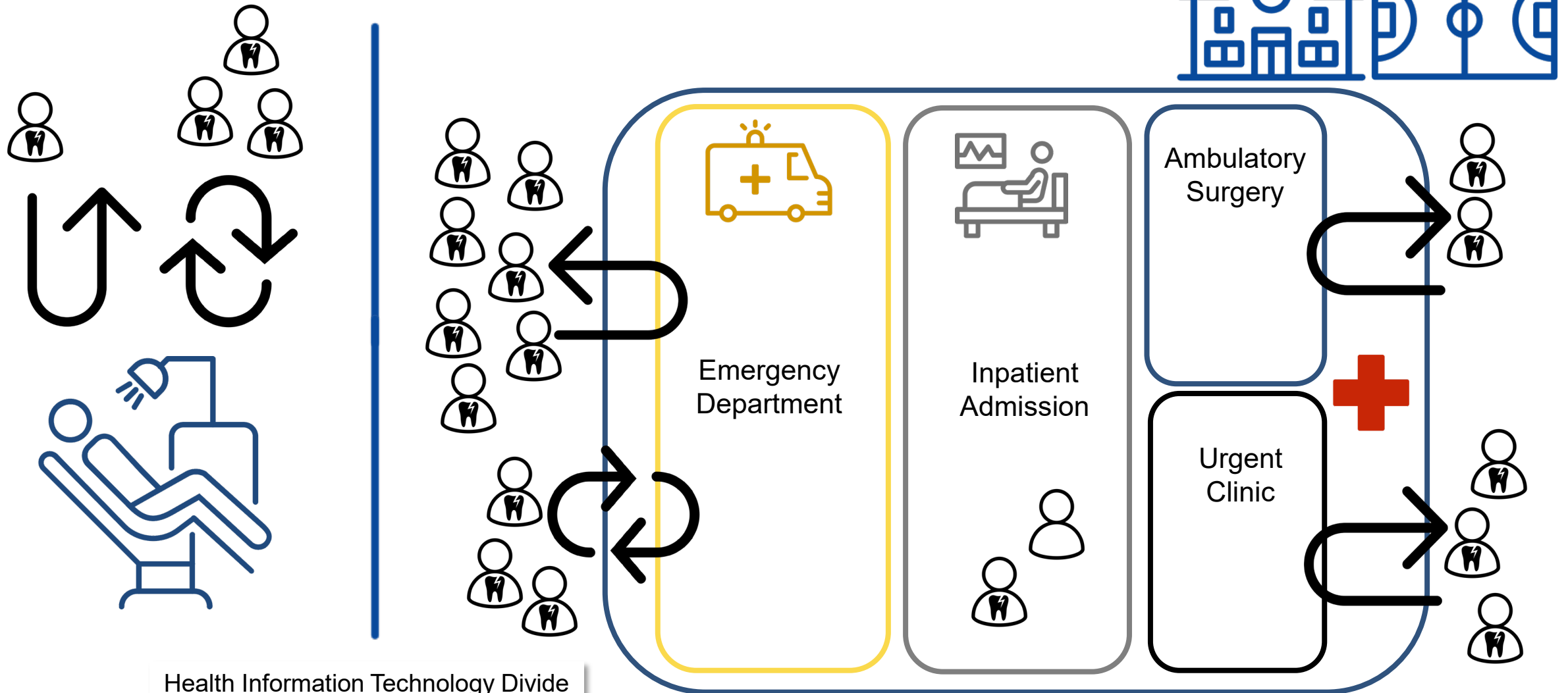
Medicaid covers dental services for all child enrollees as part of a comprehensive set of benefits, referred to as the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit. Dental services for children must minimally include:

- Relief of pain and infections
- Restoration of teeth
- Maintenance of dental health



Medicaid is the single largest payer for mental health services in the United States and is increasingly playing a larger role in the reimbursement of substance use disorder services. Individuals with a behavioral health disorder also utilize significant health care services—nearly 12 million visits made to U.S. hospital emergency departments in 2007 involved individuals with a mental disorder, substance abuse problem, or both.

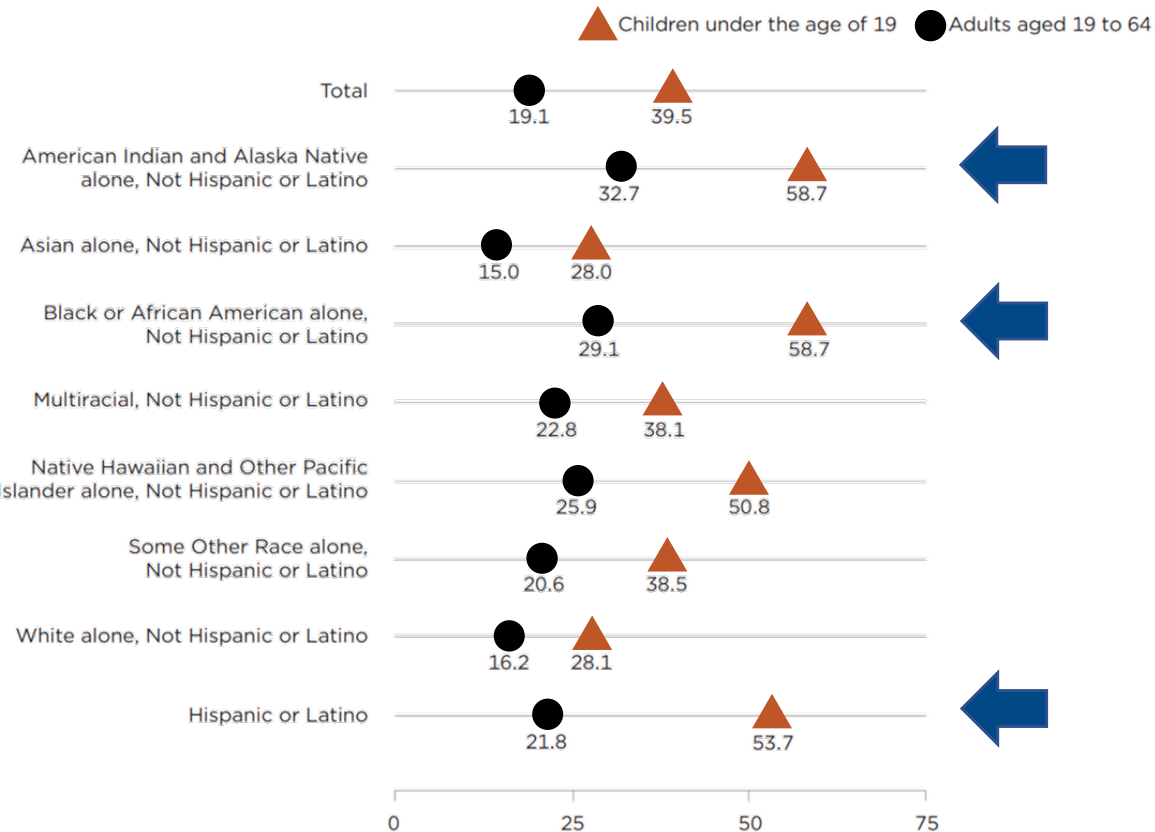
Where Patients Present with Oral Health Needs



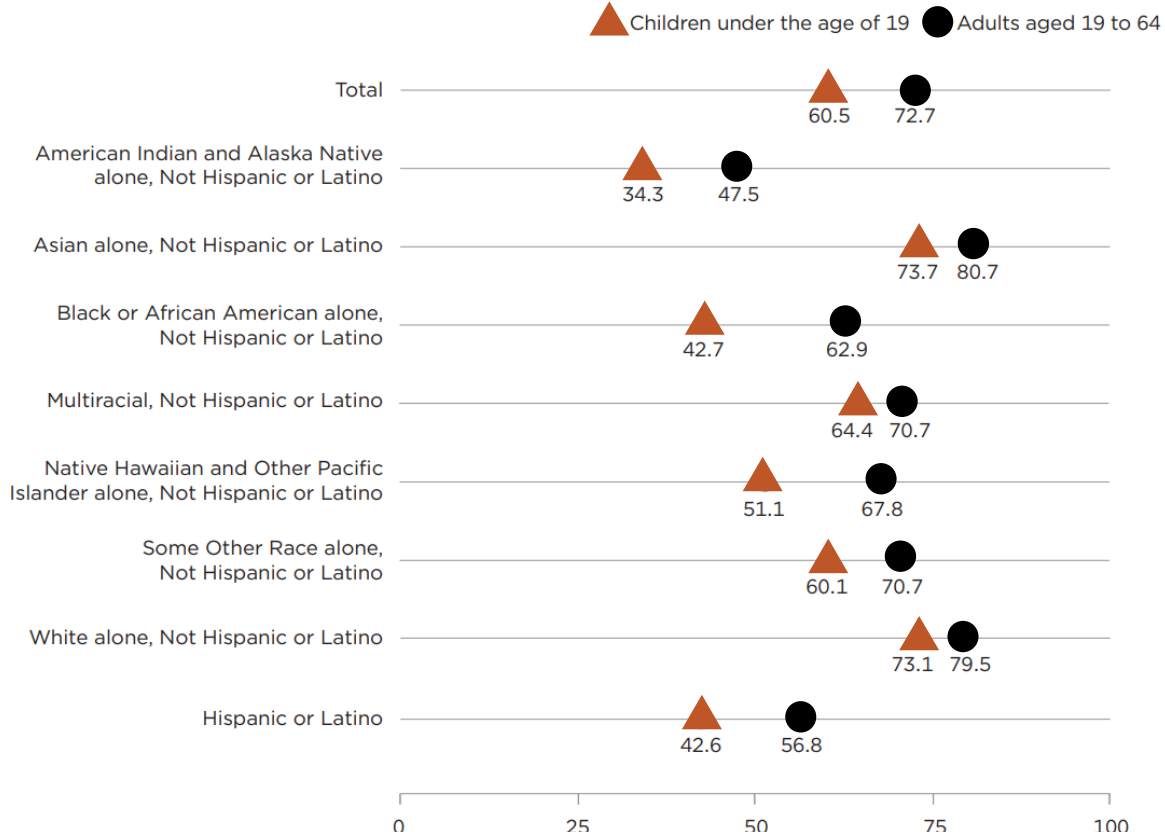
Health Information Technology Divide
Diagnostic Coding
Integration and Coordination of Care

Health Insurance Coverage By Age, Type of Coverage, and Race and Hispanic Origin, 2021

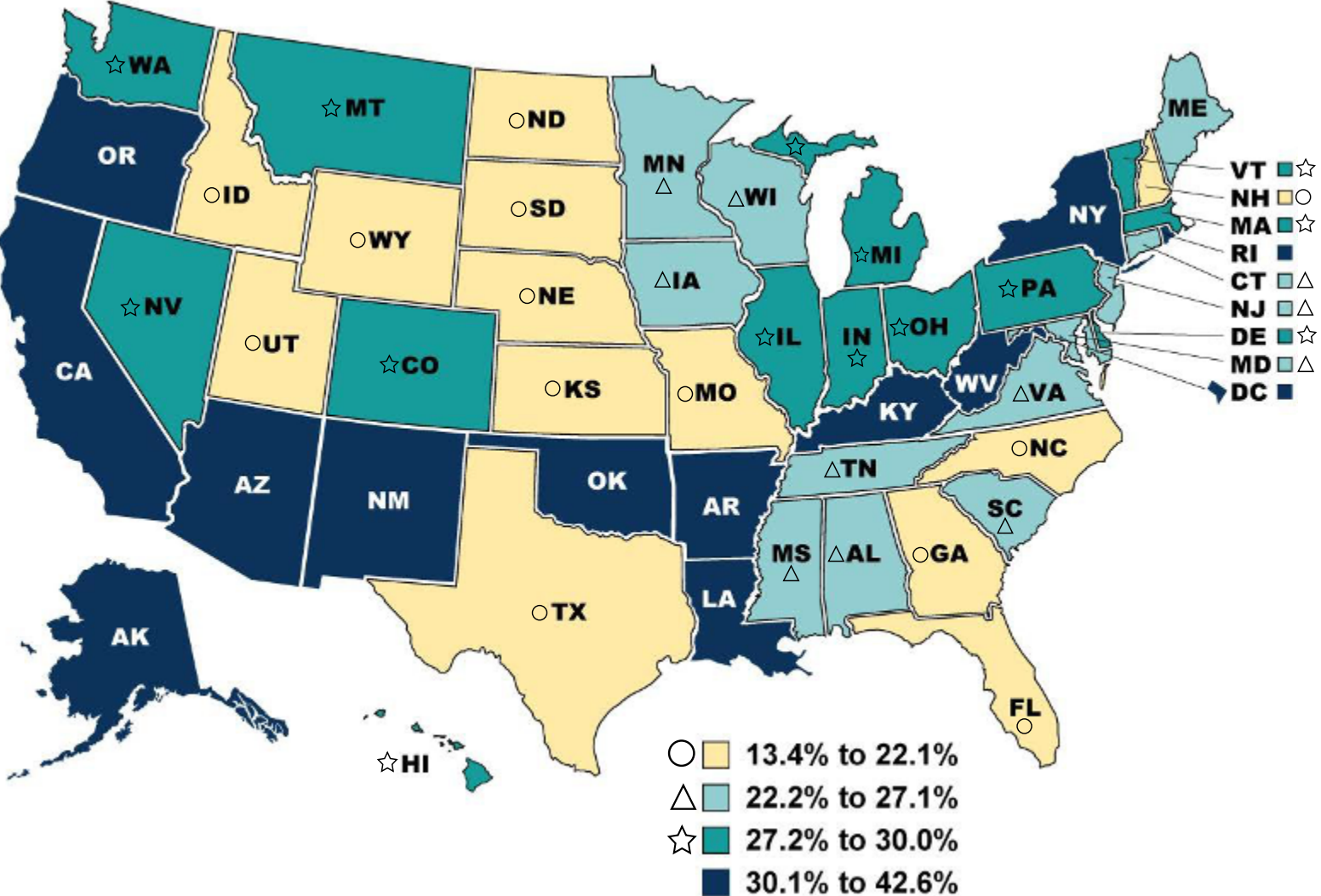
Percentage of People with **Public** Health Coverage



Percentage of People With **Private** Health Coverage



Percentage of Child and Adult Population Enrolled in Medicaid or CHIP, by State, July 2022



Notes:
 Enrollment in Medicaid or CHIP includes individuals with full Medicaid or CHIP benefits and excludes individuals who are eligible only for restricted benefits, such as Medicare cost-sharing, family planning-only benefits, and emergency services-only benefits. The percentage of each state's population enrolled in Medicaid or CHIP was calculated by dividing administrative, monthly point-in-time counts of Medicaid and CHIP adult enrollment by estimates of each state's resident population of adults. Adults enrolled in Medicaid or CHIP in each state include adults and seniors age 19 and older. Estimates of each state's resident population include adults age 18 and over. AZ did not report age-specific enrollment data to CMS. Results for all other states were rounded to one decimal place, and then states were assigned to quartiles.

Sources:
 CMS. Updated July 2022 Applications, Eligibility, and Enrollment Data (as of November 3, 2022).
Available at:
<https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/monthly-reports/index.html>

U.S. Census Bureau. Estimates of the Resident Population for July 1, 2022. Table SCPRC-EST2022-18+POP.
Available at:
<https://www.census.gov/data/tables/time-series/demo/popest/2020s-national-detail.html>

Percentage of Child Population Enrolled in Medicaid or CHIP, by State, July 2022

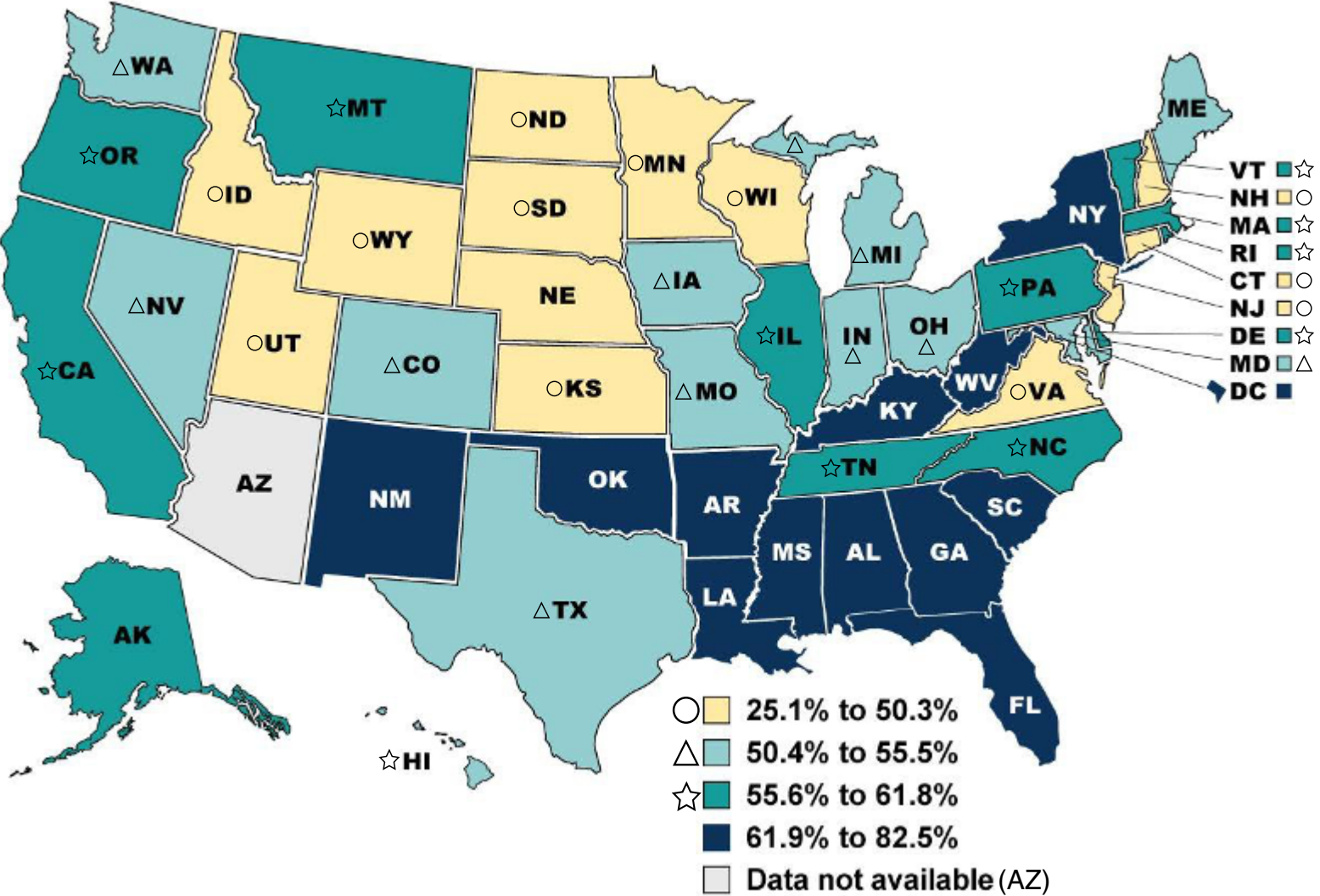
Notes:
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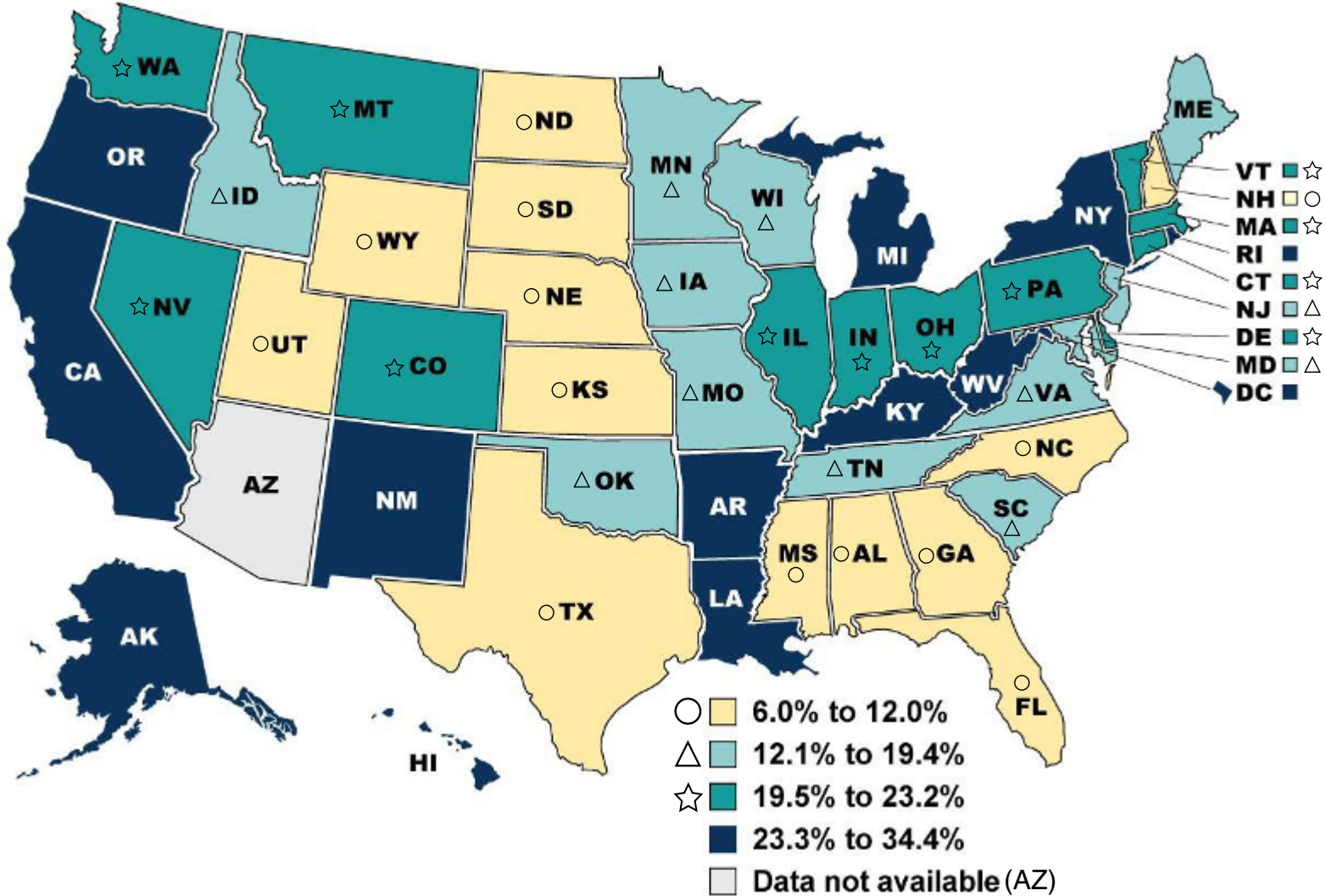
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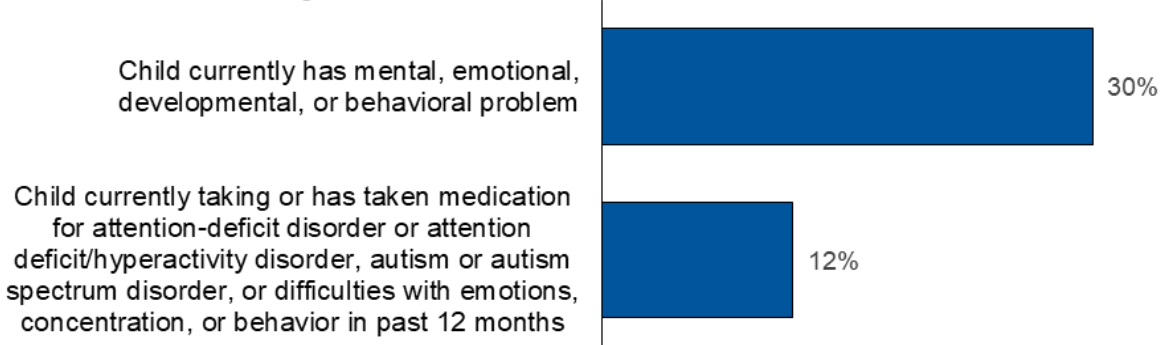
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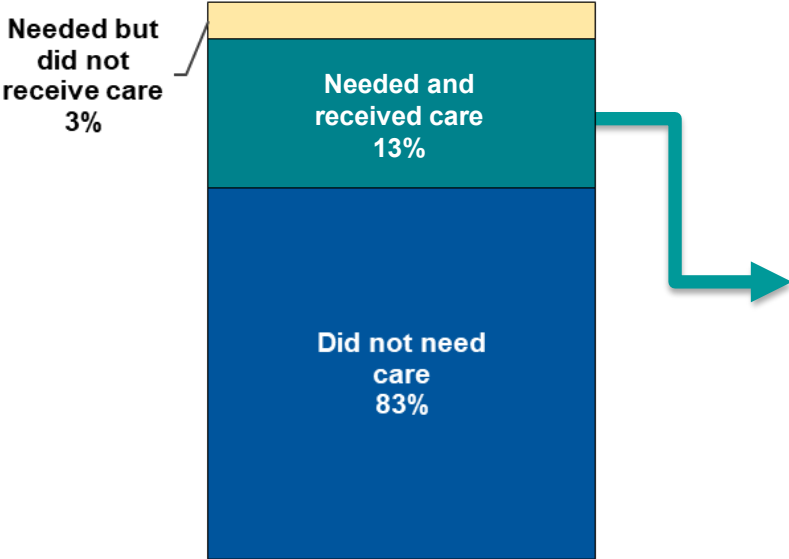


Mental Health Status of Children Enrolled in Medicaid or CHIP, 2021

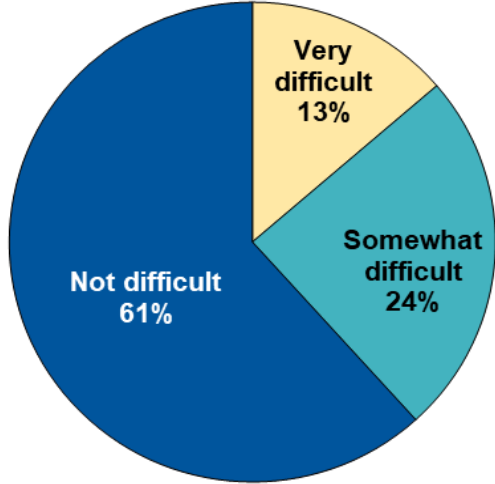
Parent-Reported Current Mental Health Status of Children



Children's Need for and Receipt of Mental Health Care Within Past 12 Months



Difficulty Obtaining Mental Health Care Among Children Who Received Care



Notes:
 Data include non-institutionalized children ages 3 to 17 covered by public insurance (alone or in combination with private insurance). All indicators are based on parent report. To qualify as having a mental, emotional, developmental, or behavioral problem, the child must qualify on the Children with Special Health Care Needs (CSHCN) Screener criteria for ongoing emotional, developmental or behavioral conditions and/or have any of 10 conditions currently (Tourette Syndrome, anxiety problems, depression, behavioral and conduct problem, developmental delay, intellectual disability, speech or other language disorder, learning disability, autism or ASD, ADD or ADHD). Receipt of mental health care is defined as receiving any treatment or counseling from a mental health professional. Level of difficulty obtaining care is among those who needed and received care. Totals do not sum to 100 as <2% of respondents indicated both that their child needed and received care and that it was not possible to obtain care. Responses of missing in error (≤3% of responses for each indicator) are excluded.

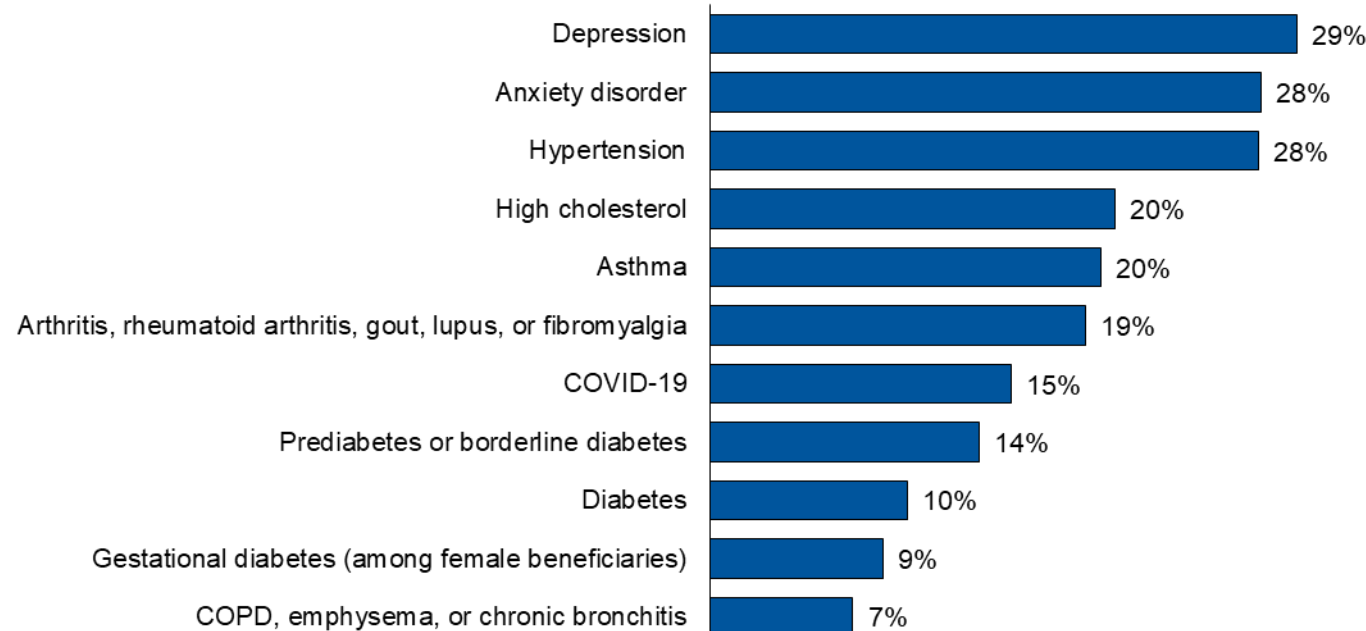
ADD = Attention-Deficit Disorder; ADHD = Attention Deficit/Hyperactivity Disorder; ASD = Autism Spectrum Disorder

Source:
 Mathematica analysis of National Survey of Children's Health, 2021 Public Use Data files.

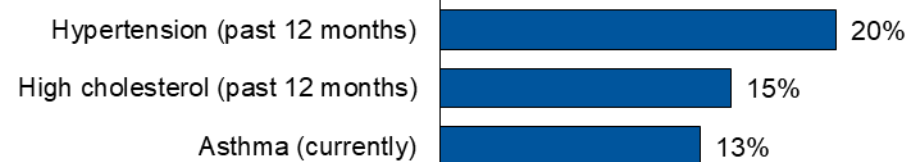
Available at:
<https://www.census.gov/programs-surveys/nsch.html>

Health Conditions of Adults Enrolled in Medicaid or CHIP, 2021

Has ever been told he/she has:



Has currently or within past year:



Notes:

Data include all non-institutionalized civilian adults ages 18 to 64 covered by Medicaid, CHIP, or other state-sponsored health plans. All data on health conditions are based on self-report. Anxiety disorder includes generalized anxiety disorder, social anxiety disorder, panic disorder, post-traumatic stress disorder, obsessive-compulsive disorder, and phobias. Gestational diabetes is limited to female respondents. Responses of refused, not ascertained, and don't know ($\leq 1\%$ of responses for each indicator) are excluded.

COPD = Chronic Obstructive Pulmonary Disease

Source:

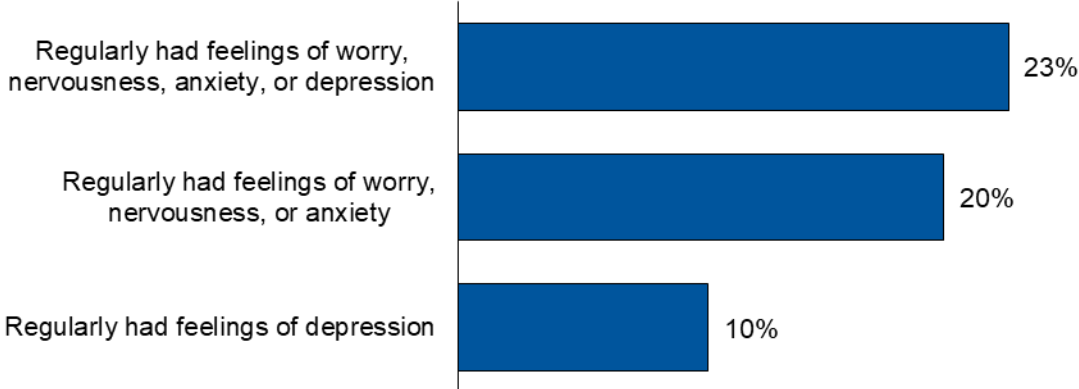
Mathematica analysis of National Center for Health Statistics, National Health Interview Survey, 2021.

Available at:

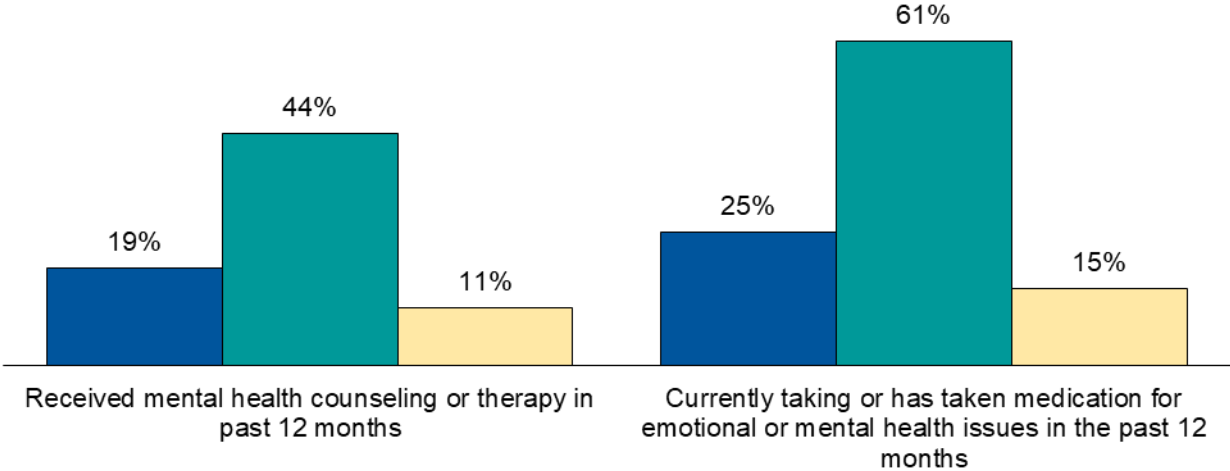
<https://www.cdc.gov/nchs/nhis/data-questionnaires-documentation.htm>

Mental Health Status of Adults Enrolled in Medicaid or CHIP, 2021

Adults with Symptoms of Anxiety or Depression



Adults Receiving Mental Health Care



- All adults
- Adults who regularly had feelings of worry, nervousness, anxiety, or depression
- Adults who did not regularly have feelings of worry, nervousness, anxiety, or depression

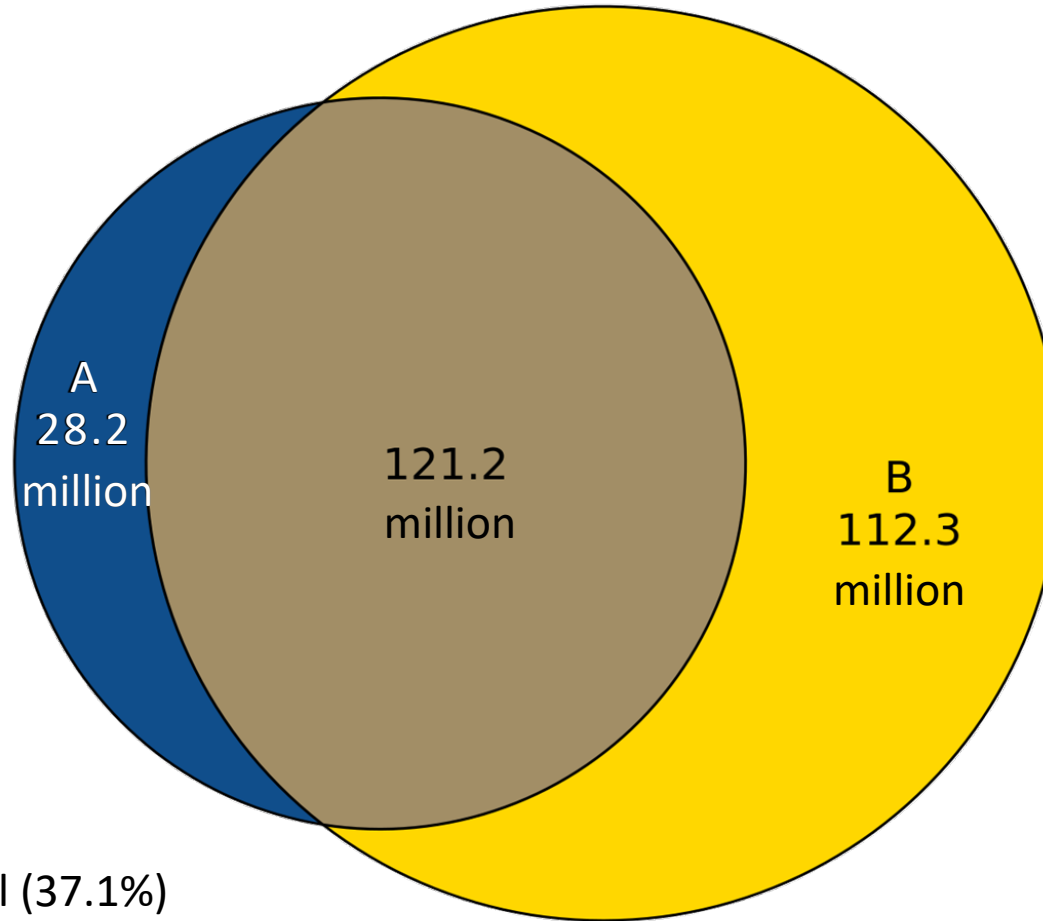
Notes:
 Data include all non-institutionalized civilian adults ages 18 to 64 covered by Medicaid, CHIP, or other state-sponsored health plans. All indicators are based on beneficiary self-report. Regularly had feelings of worry, nervousness, or anxiety is defined as: (1) feeling worried, nervous, or anxious daily and describing the level of those feelings as somewhere in between a little and a lot, or a lot, OR (2) feeling worried, nervous, or anxious weekly and describing the level of those feelings as a lot. Regularly had feelings of depression is defined as: (1) feeling depressed daily and describing the level of those feelings as somewhere in between a little and a lot, or a lot, OR (2) feeling depressed weekly and describing the level of those feelings as a lot. Regularly had feelings of worry, nervous, anxiety, or depression includes respondents who met either (or both) criteria. Responses of refused, not ascertained, and don't know (≤3% of responses for each indicator) are excluded.

Source:
 Mathematica analysis of National Center for Health Statistics, National Health Interview Survey, 2021.

Available at:
<https://www.cdc.gov/nchs/nhis/data-questionnaires-documentation.htm>

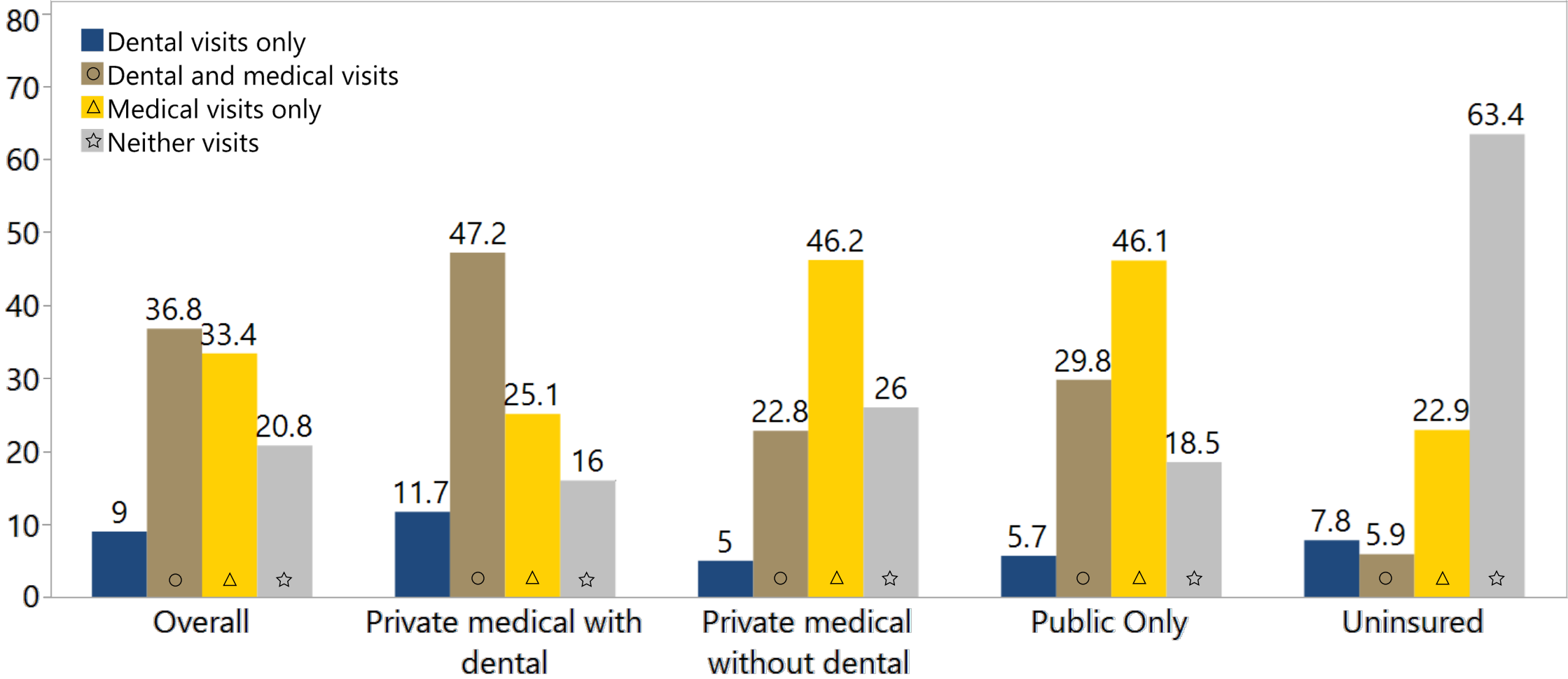


Population with Any Dental and Medical Visits, 2018



- A: Dental only (8.6%)
- B: Medical only (34.4%)
- A and B: Dental and Medical (37.1%)
- C: Neither dental nor medical (19.8%)

Overall Proportion of the Population with Any Dental or Medical Visits by Insurance Coverage, 2019



Barriers to Oral Health Care

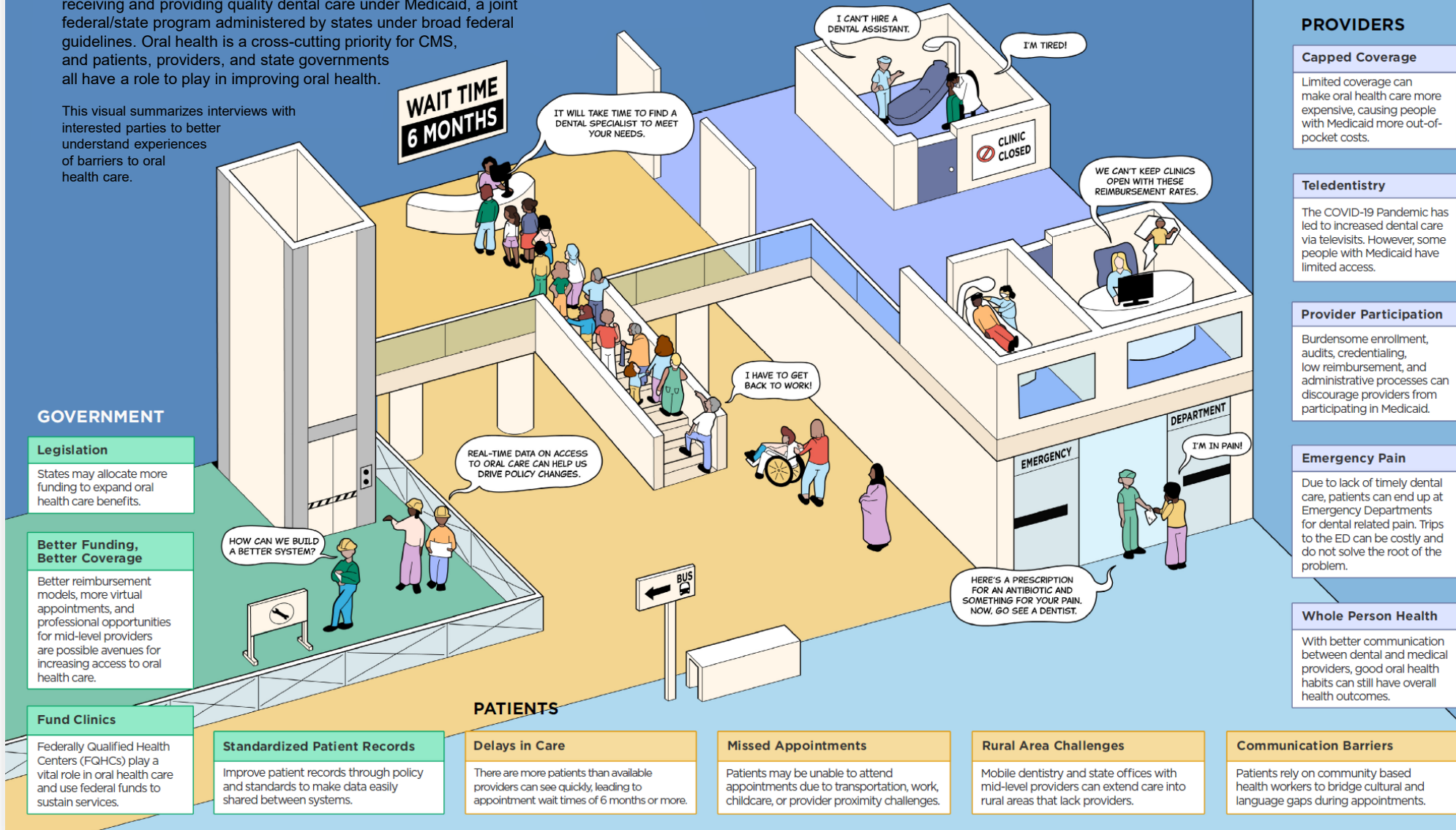
Barriers to Oral Health Care

- Patients and providers report encountering various barriers to receiving and providing quality dental care under Medicaid, a joint federal/state program administered by states under broad federal guidelines. Oral health is a cross-cutting priority for CMS, and patients, providers, and state governments all have a role to play in improving oral health.
- This visual summarizes interviews with interested parties to better understand experiences of barriers to oral health care.

Barriers to Oral Health Care

Patients and providers report encountering various barriers to receiving and providing quality dental care under Medicaid, a joint federal/state program administered by states under broad federal guidelines. Oral health is a cross-cutting priority for CMS, and patients, providers, and state governments all have a role to play in improving oral health.

This visual summarizes interviews with interested parties to better understand experiences of barriers to oral health care.



GOVERNMENT

Legislation

States may allocate more funding to expand oral health care benefits.

Better Funding, Better Coverage

Better reimbursement models, more virtual appointments, and professional opportunities for mid-level providers are possible avenues for increasing access to oral health care.

Fund Clinics

Federally Qualified Health Centers (FQHCs) play a vital role in oral health care and use federal funds to sustain services.

Standardized Patient Records

Improve patient records through policy and standards to make data easily shared between systems.

Delays in Care

There are more patients than available providers can see quickly, leading to appointment wait times of 6 months or more.

Missed Appointments

Patients may be unable to attend appointments due to transportation, work, childcare, or provider proximity challenges.

Rural Area Challenges

Mobile dentistry and state offices with mid-level providers can extend care into rural areas that lack providers.

Communication Barriers

Patients rely on community based health workers to bridge cultural and language gaps during appointments.

PROVIDERS

Capped Coverage

Limited coverage can make oral health care more expensive, causing people with Medicaid more out-of-pocket costs.

Teledentistry

The COVID-19 Pandemic has led to increased dental care via televisits. However, some people with Medicaid have limited access.

Provider Participation

Burdensome enrollment, audits, credentialing, low reimbursement, and administrative processes can discourage providers from participating in Medicaid.

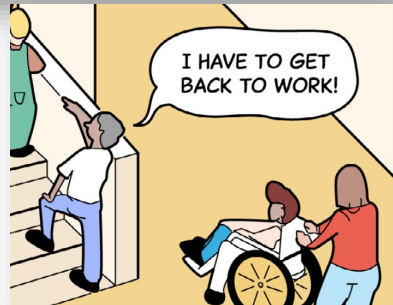
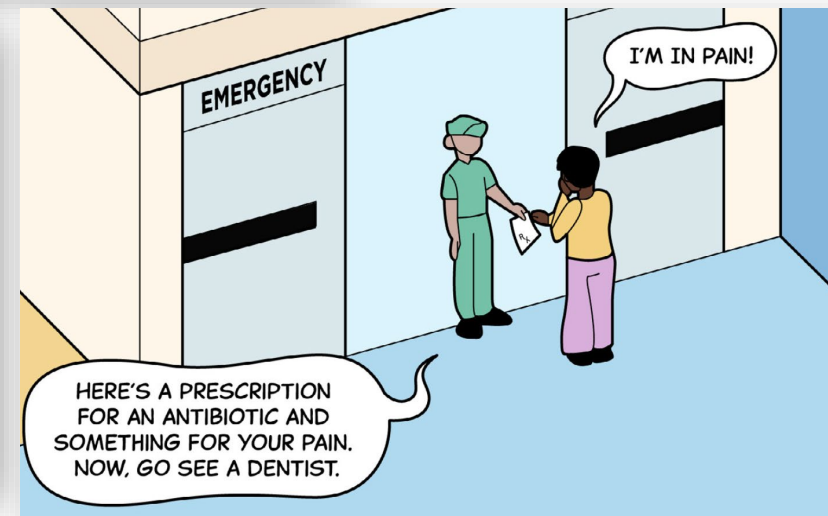
Emergency Pain

Due to lack of timely dental care, patients can end up at Emergency Departments for dental related pain. Trips to the ED can be costly and do not solve the root of the problem.

Whole Person Health

With better communication between dental and medical providers, good oral health habits can still have overall health outcomes.

Barriers to Oral Health Care



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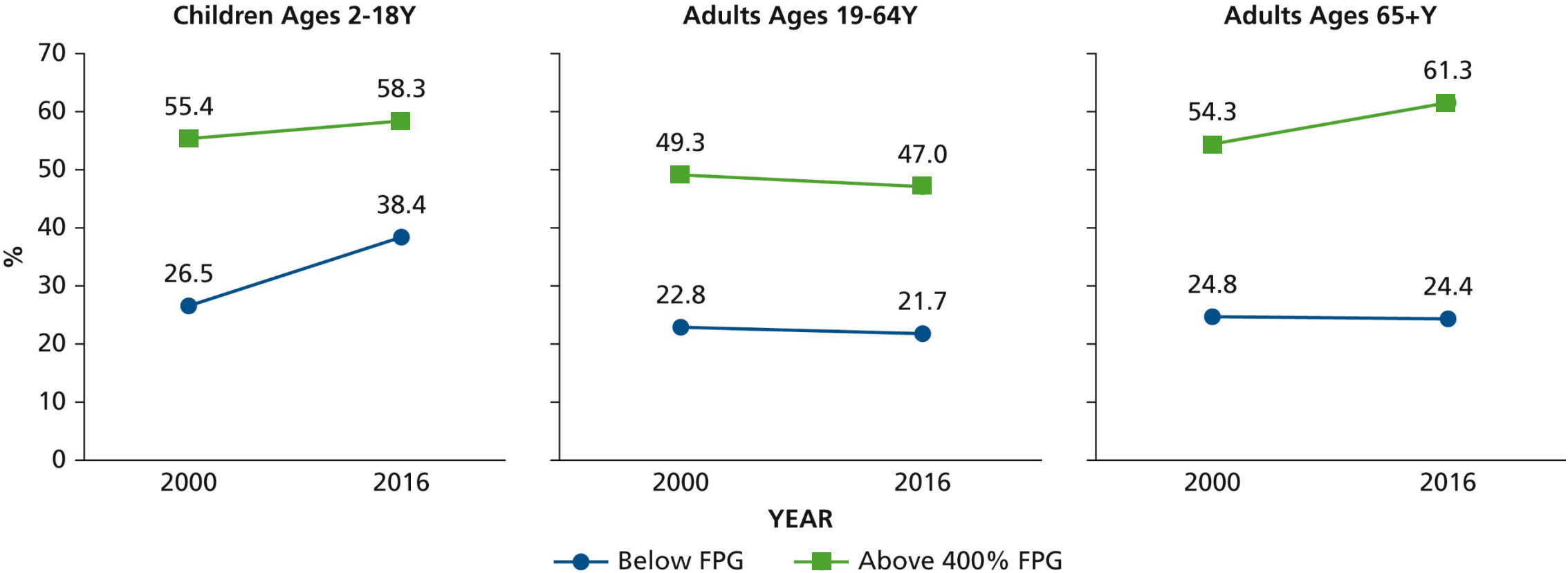
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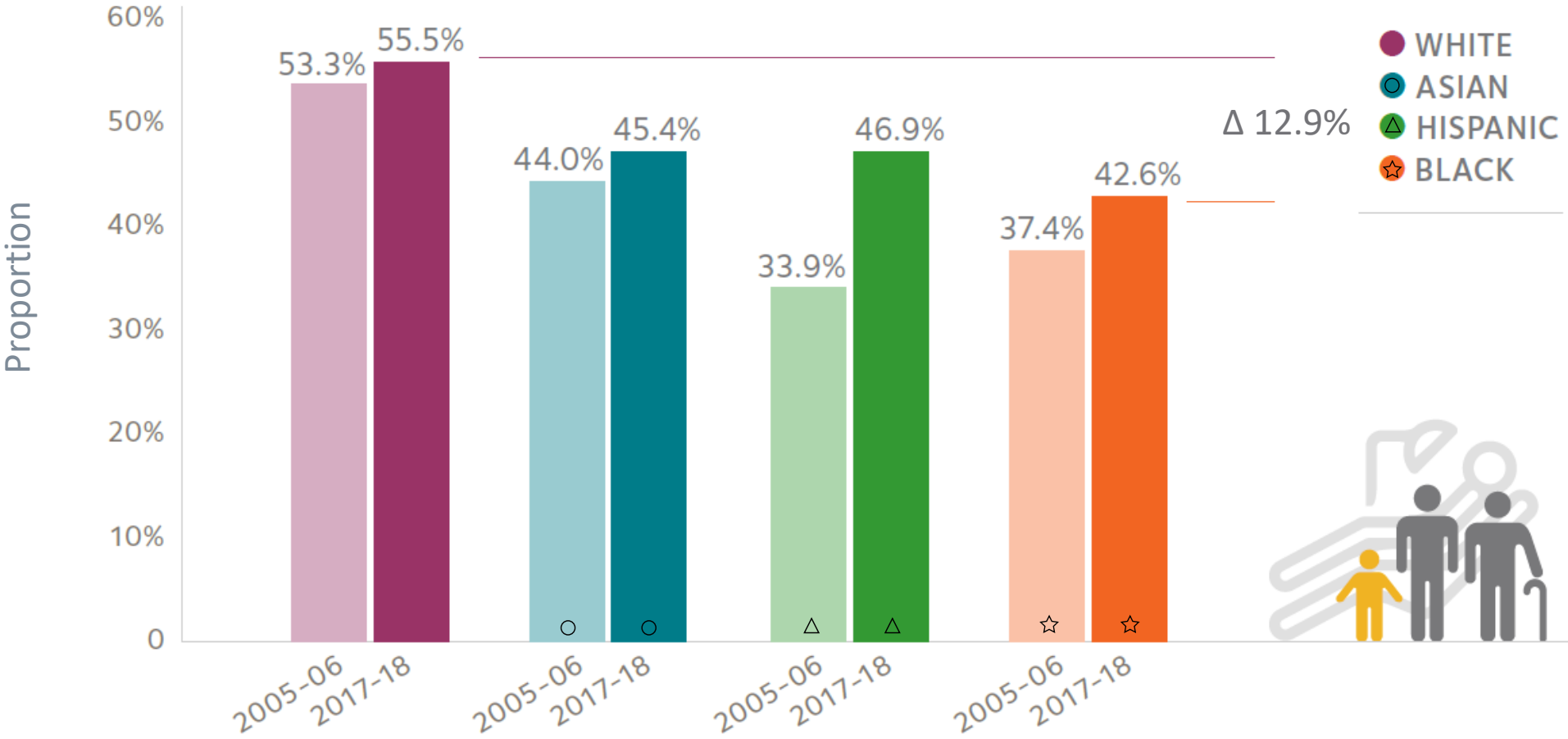
Whole Person Health

Better communication between dental and medical providers can lead to good oral health habits and positive overall health outcomes.

Dental Visit in the Past Year By Poverty

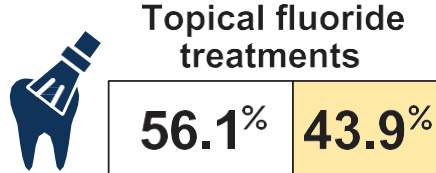
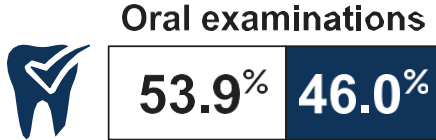
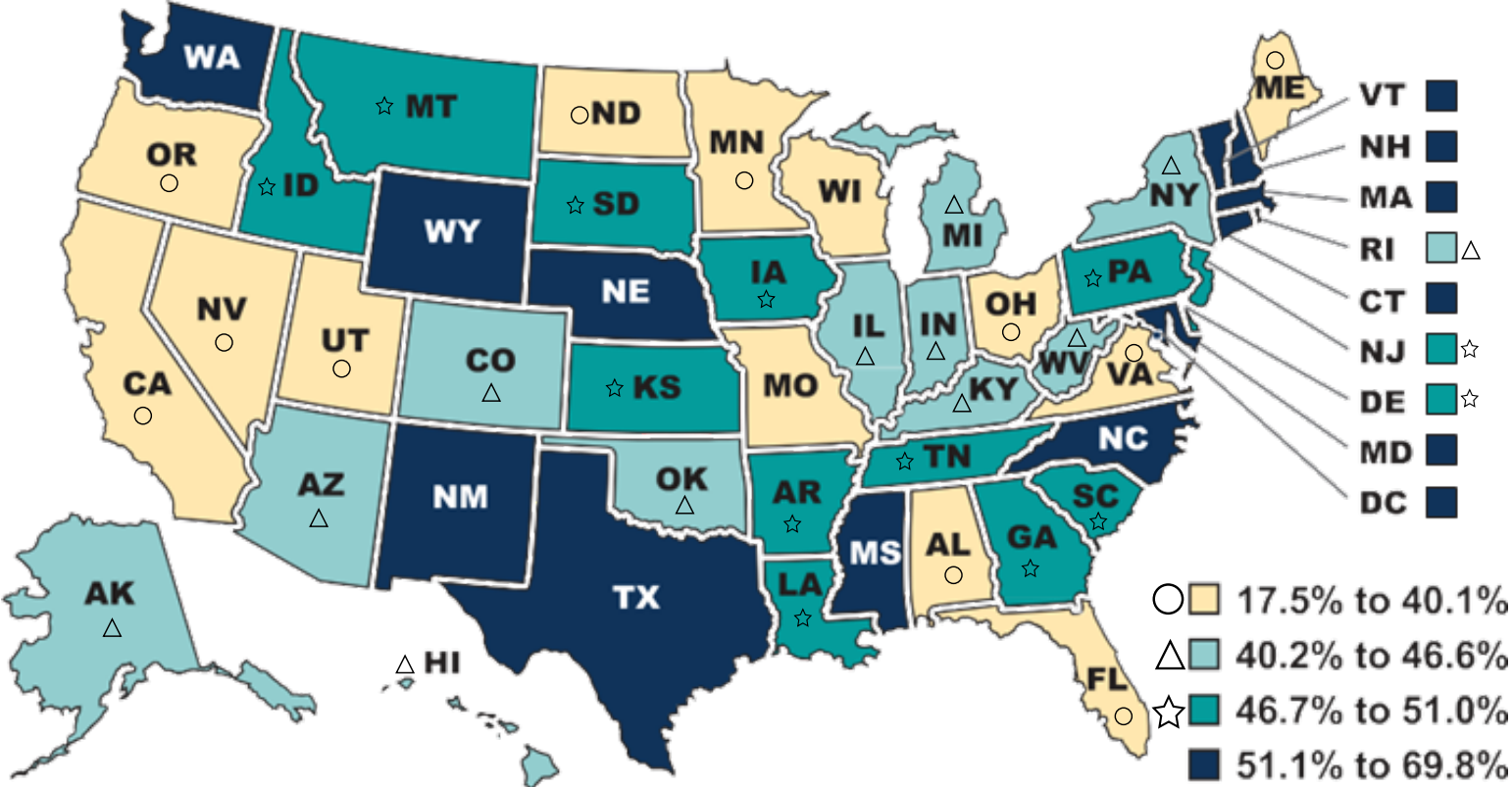


Children With A Dental Visit In The Past Year



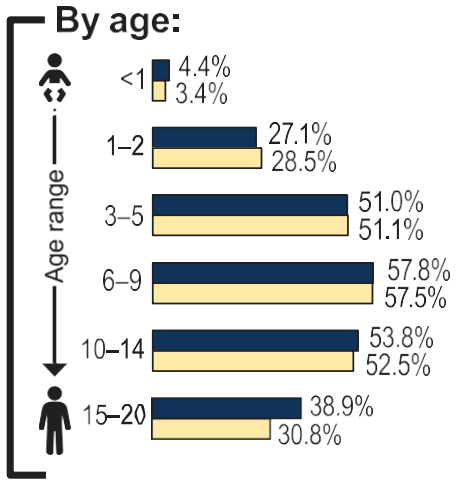
Children and Adolescents Who Received Oral Examinations or Topical Fluoride Treatments, 2018

Beneficiaries with at Least One Oral Examination



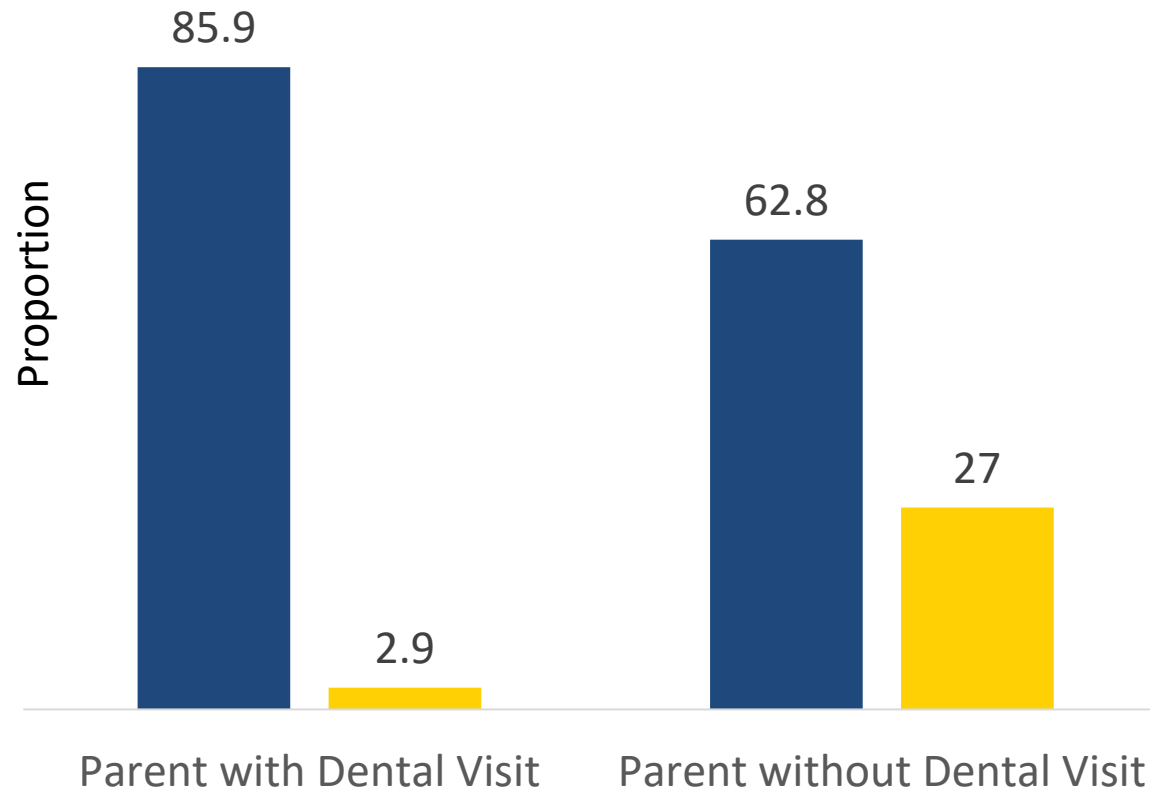
Beneficiaries received:

- At least one oral examination
- At least one fluoride treatment
- No oral examinations or fluoride treatments



Parents Dental Care Experience is Key to Coverage and Access

■ Child with Dental Visit ■ Child without Dental Visit



ORAL HEALTH

By Brandy J. Lipton, Tracy L. Finlayson, Sandra L. Decker, Richard J. Manski, and Migan Yang

The Association Between Medicaid Adult Dental Coverage And Children's Oral Health

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ABSTRACT Although all state Medicaid programs cover children's dental care, Medicaid-eligible children are more likely to experience tooth decay than children in higher-income families. Using data from the 1999–2016 National Health and Nutrition Examination Survey and the 2003, 2007, and 2011–12 waves of the National Survey of Children's Health, we examined the association between Medicaid adult dental coverage (an optional benefit) and children's oral health. Adult dental coverage was associated with a statistically significant 5-percentage-point reduction in the prevalence of untreated caries among children after Medicaid-enrolled adults had access to coverage for at least one year. These policies were also associated with a reduction in parent-reported fair or poor child oral health with a two-year lag between the onset of the policy and the effect. Effects were concentrated among children younger than age twelve. We estimated declines in poor oral health among all racial and ethnic subgroups, although there was some evidence that non-Hispanic Black children experienced larger and more persistent effects than non-Hispanic White children. Future assessments of the costs and benefits of offering adult dental coverage may consider potential effects on the children of adult Medicaid enrollees.

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Tracy L. Finlayson is a professor in the School of Public Health, San Diego State University.

Sandra L. Decker is a health economist in the Division of Research and Modeling, Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality, in Rockville, Maryland.

Richard J. Manski is a professor and chair of the Department of Dental Public Health at the University of Maryland School of Dentistry, in Baltimore, Maryland.

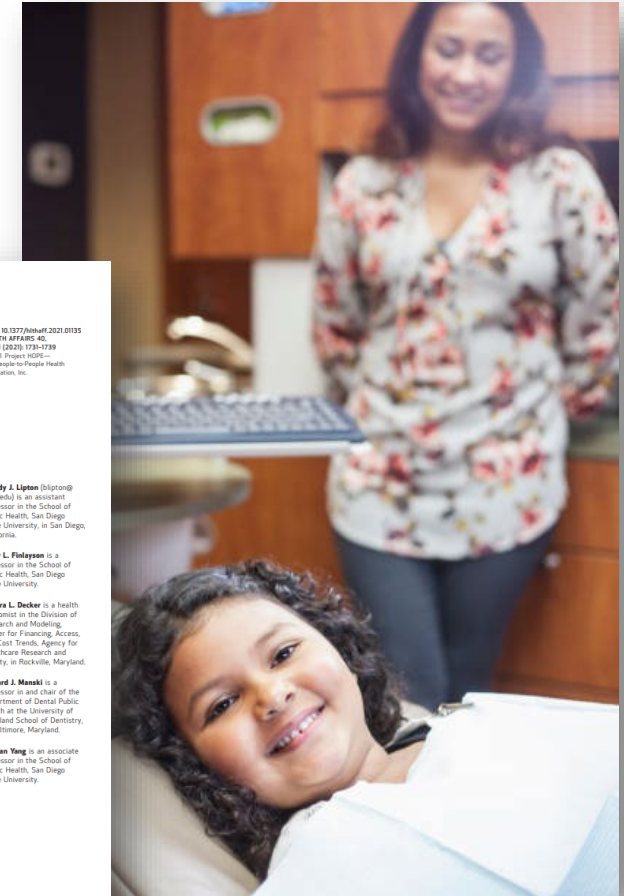
Migan Yang is an associate professor in the School of Public Health, San Diego State University.

Despite considerable progress, tooth decay remains the most common childhood chronic disease.¹ Medicaid-eligible children are more likely to experience tooth decay compared with children in higher-income families but are less likely to visit the dentist annually (29 percent versus 55 percent).² All state Medicaid programs cover a comprehensive set of preventive and restorative dental services for children under the Early and Periodic Screening, Diagnostic, and Treatment benefit. Although financial barriers are frequently reported as the reason for not receiving needed dental care among both adults and children,³ noncost barriers may also play an important role in explaining income-based disparities in children's dental care use.

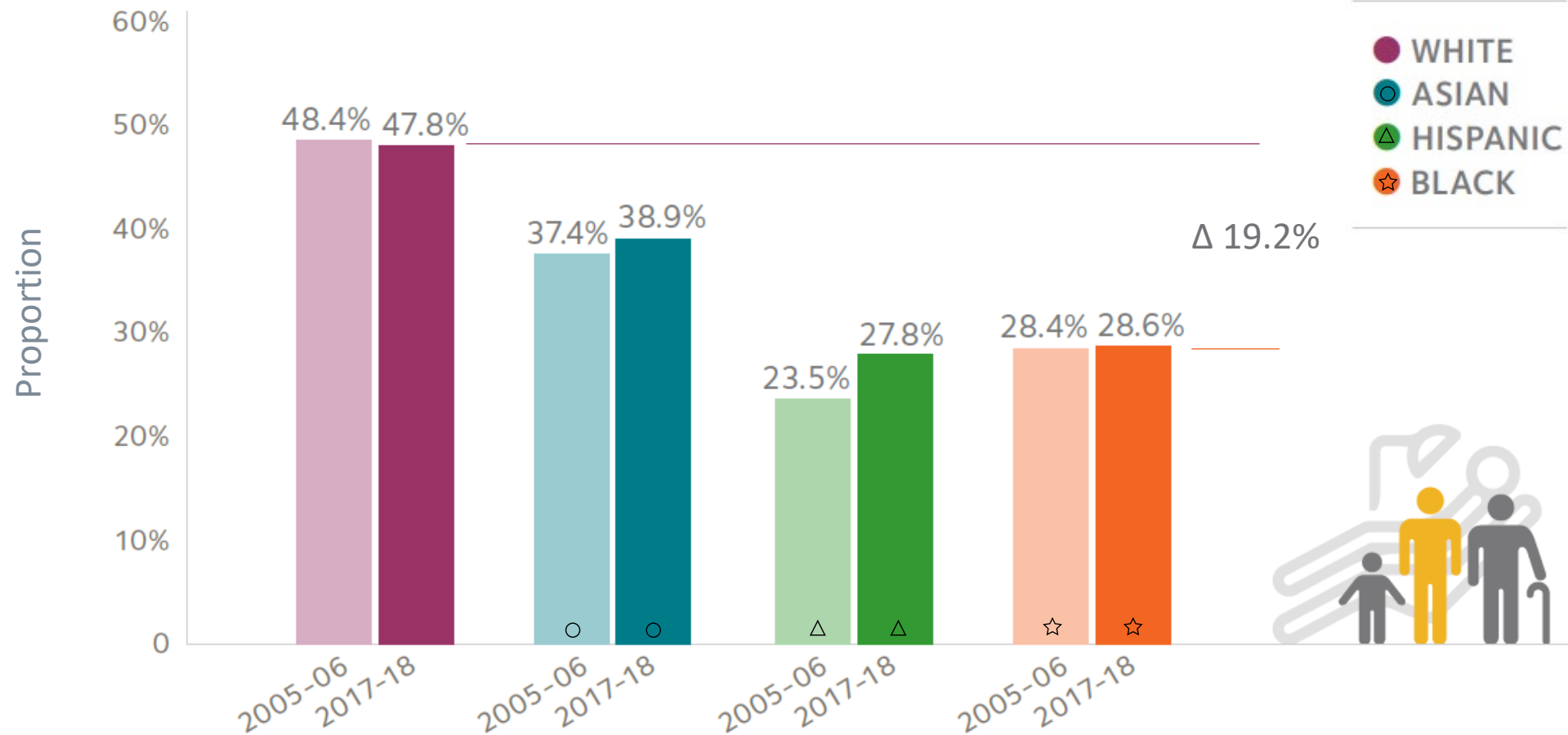
Children are more likely to have regular dental visits when their parents have dental coverage or a recent dental visit.^{4,5} Parental dental coverage may facilitate children's dental care use in several ways. For example, providers may relay information about recommended dental care or dental benefits available to publicly insured children when a parent has a dental visit. As many general dentists treat both adults and children,⁶ families may cluster their appointments when both parents and children have dental coverage, reducing transportation barriers and requiring less time off work. Parent dental coverage may also reduce out-of-pocket health care spending,⁷ which could increase available resources for children's health care needs.

In contrast to the requirements for children, states are not required to provide any level of

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Adults With A Dental Visit In The Past Year





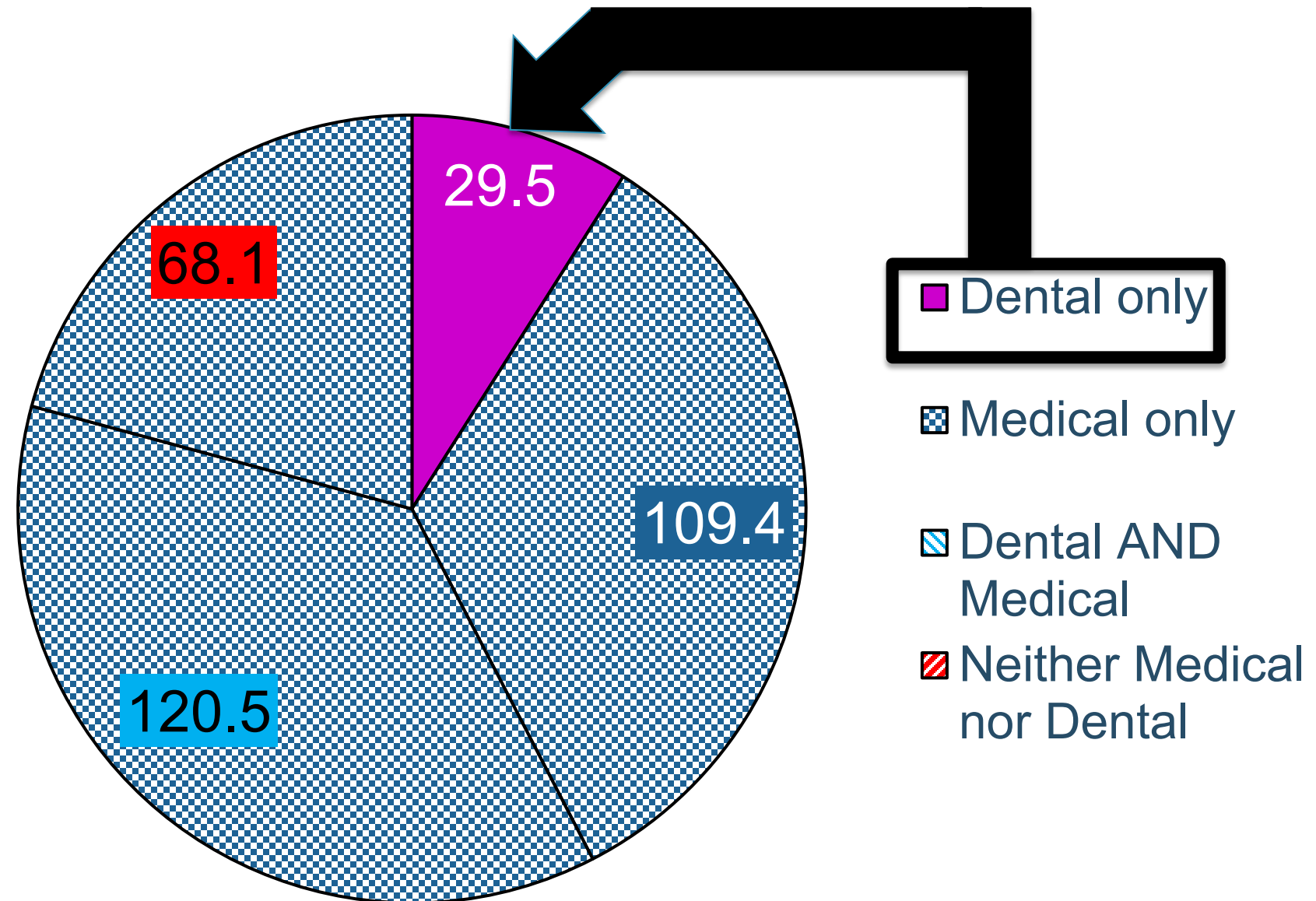
Integrating Oral Health & Behavioral Health



Tim Ricks, DMD, MPH, FICD, FACD, FPFA
Dental Public Health Specialist
Indian Health Service Division of Oral Health



Why Bridge the Gap Between Oral Health & Overall Health?



Depression Screening Dental Settings - Recommendations

- Data: An estimated 10 million people in the U.S. suffer from undiagnosed depression.
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5769115/>
- U.S. Preventive Services Task Force Recommendation:

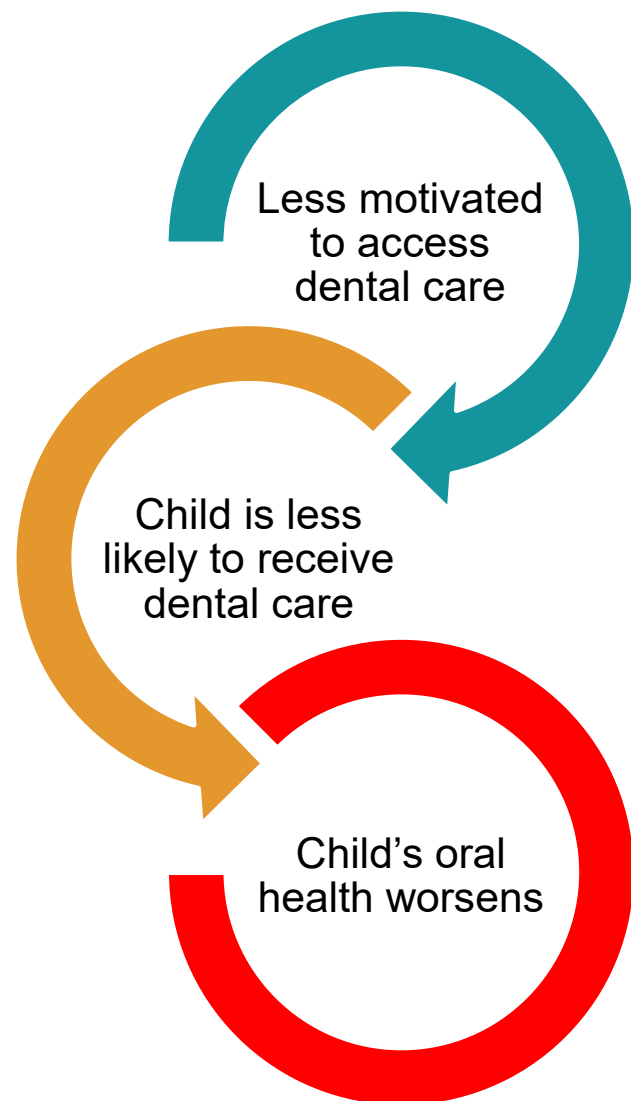
Population	Recommendation	Grade
General adult population, including pregnant and postpartum women	The USPSTF recommends screening for depression in the general adult population, including pregnant and postpartum women. Screening should be implemented with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.	B There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.
Adolescents aged 12 to 18 years	The USPSTF recommends screening for major depressive disorder (MDD) in adolescents aged 12 to 18 years.	B

<https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/depression-in-adults-screening>

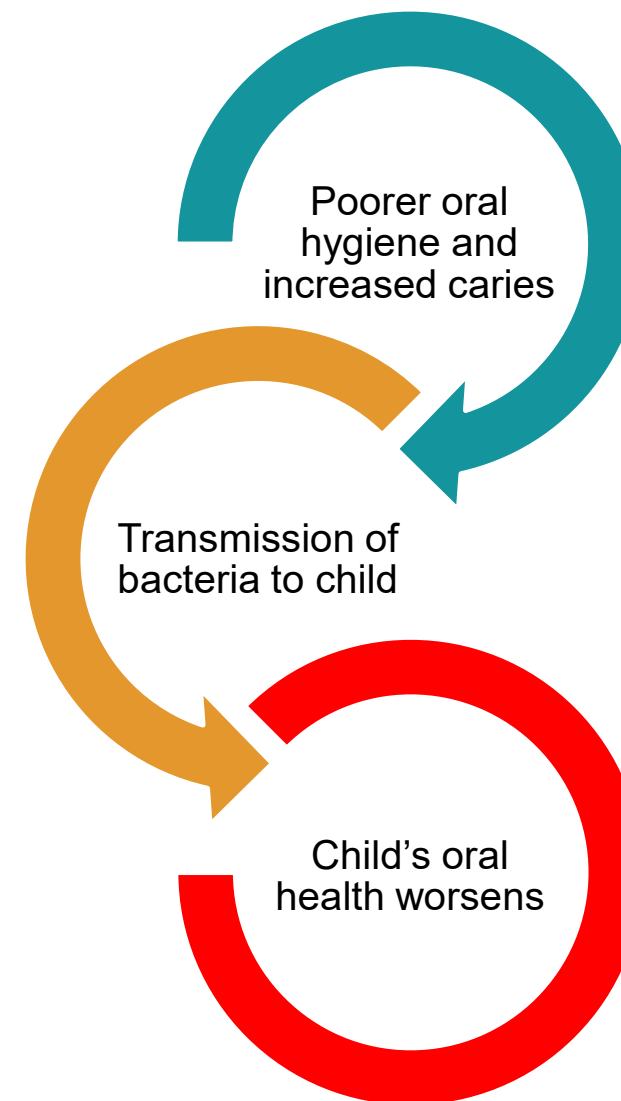
<https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/screening-depression-suicide-risk-children-adolescents>

How does **adult depression** affect children?

Indirect Effect



Direct Effect



How does **adolescent depression** affect their oral health?

Less likely to brush their teeth

Increased consumption of sugar

Increased risk for tooth decay



+



=

Avg. 18 tsp/day



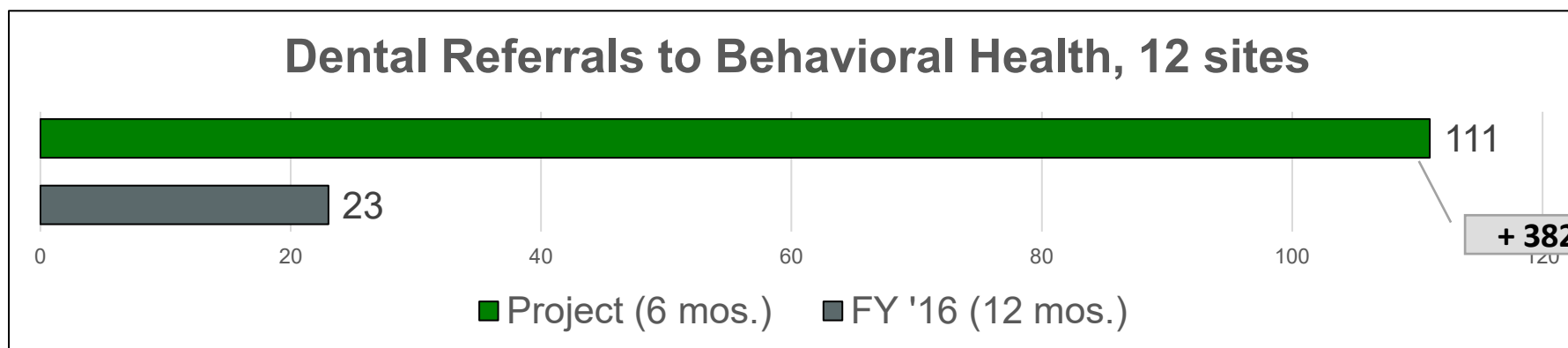
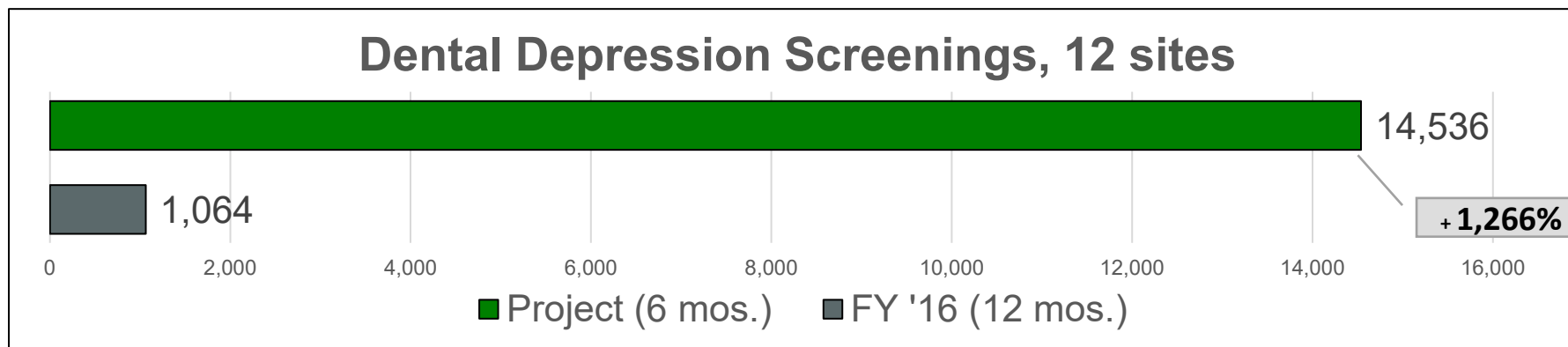
Depression Screenings – PHQ-2 Tool

In the past 2 weeks, have you?	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed, or hopeless**	0	1	2	3

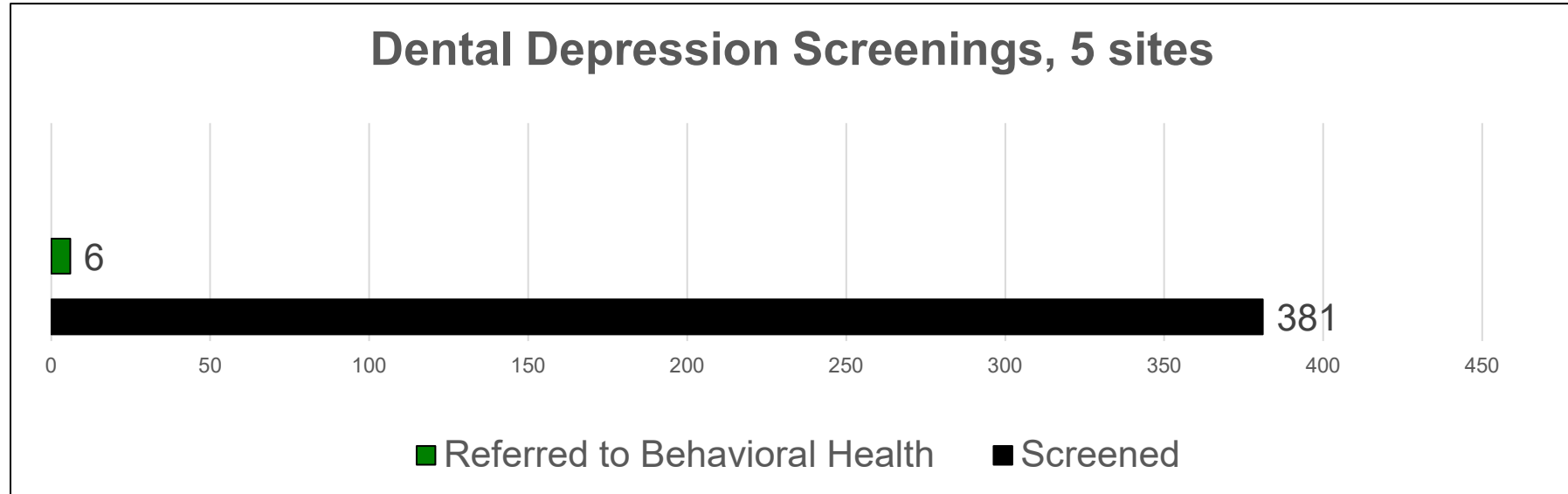
**** For adolescents, add “irritable” to the second question**

- Frequency: Annually
- Ages: 12 years and over
- Form: PHQ-2 Scored, Adult & Adolescent versions
- Referral: When the patient has an overall score of 3 or higher

Depression Screenings – Results, Phase I (2017)



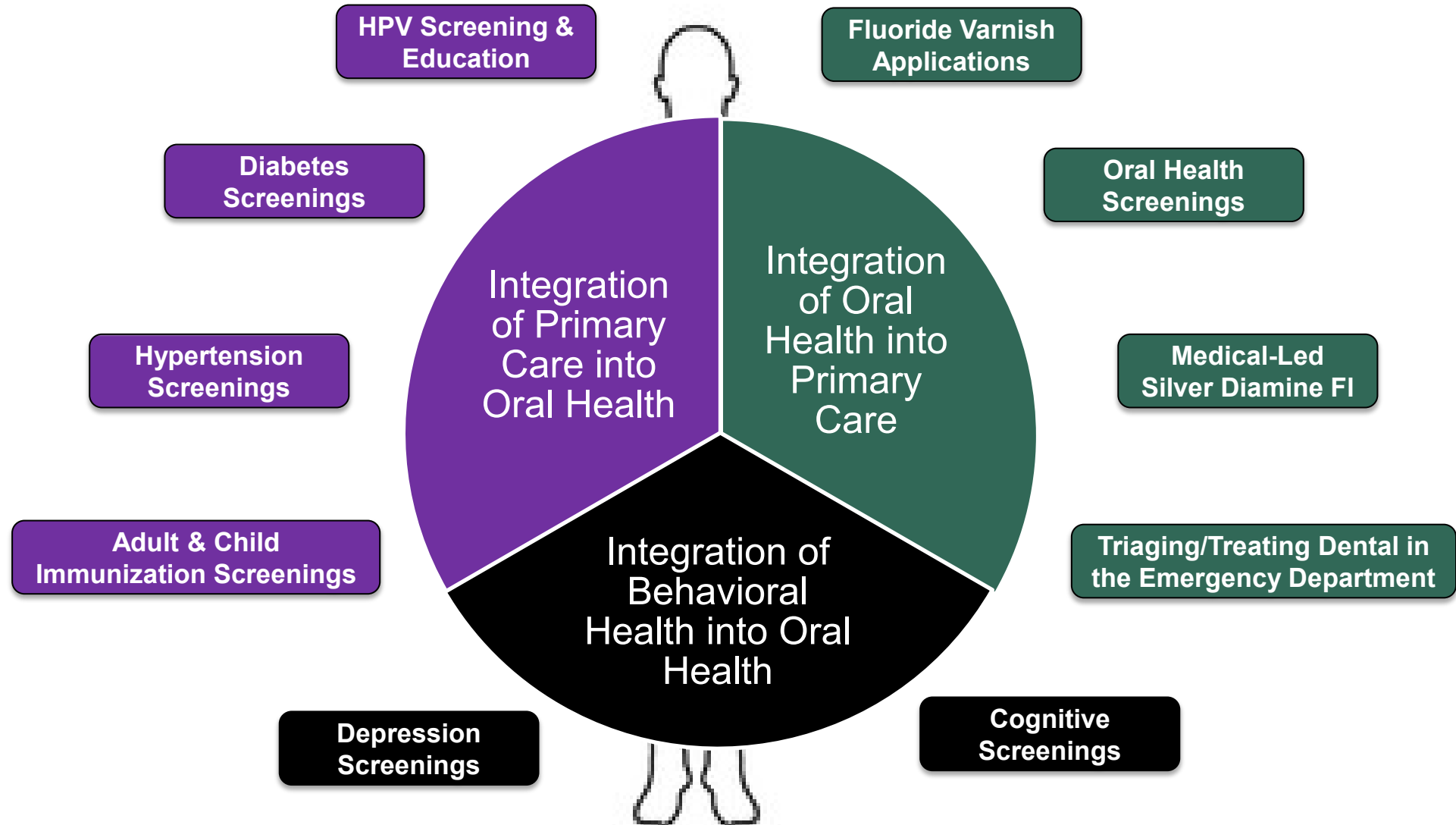
Depression Screenings – Results, Phase II (2024)



	Phase I (2017)	Phase II (2024)
Number screened per month per site	202	127 (3 sites)
Percent positive and referred to behavioral health	2.6%	1.6%

Indian Health Service Multi-Directional Integration Initiatives

Committed to whole person health



Questions?

- Dr. Tim Ricks, Dental Public Health Specialist
 - Tim.Ricks@ihs.gov
 - (301) 549-2629
- IHS Dental Portal (data briefs, initiatives)
 - <https://www.ihs.gov/doh>
- IHS Recruitment Page (job opportunities)
 - <https://www.ihs.gov/dentistry>

Children's Dental Health Awareness and Best Practices



Marla Smith-Brown

Senior Director

Seedco Midsouth Regional Office



SEEDCO MSRO PROGRAM SERVICES

Founded in 1987, Seedco is a national nonprofit organization dedicated to advancing economic opportunities for people, businesses and communities in need.



SEEDCO MSRO PROGRAM SERVICES

Six Key Program Services

- Strong Fathers, Stronger Families
- Connecting Kids to Coverage
- Red Nose Day Comic Relief
- Linking You & Neighbors to Coverage
- Midsouth More Than Ready
- Impact



CONNECTING KIDS TO COVERAGE (CKC)

- The CKC program is funded through a cooperative agreement via the Department of Health and Human Services.
- The program connects West Tennessee families with children to free to low-cost health insurance via the State of Tennessee.
- Families are connected with an enrollment counselor and receive supportive services.



THE IMPORTANCE OF CHILDREN'S DENTAL HEALTH MONTH



- February is National Children's Dental Health Month
- Tooth decay is one the most common chronic conditions in the U.S., but cavities are preventable.
- Untreated cavities can cause pain and infections. They can also lead to problems with eating, speaking, and learning.
- Poor oral health impacts school attendance and overall academic performance.



Regional data

Shelby County, TN



Has 58 practicing dentists per 100,000 residents

Tipton County, TN

Has 21 practicing dentists per 100,000 residents



Fayette County, TN



Has 21 practicing dentist per 100,000 residents

Haywood County, TN

Has 17 practicing dentist per 100,000 residents



Hardeman County, TN



Has 28 practicing dentist per 100,000 residents

Lauderdale County, TN

Has 16 practicing dentist per 100,000 residents



Regional Data: TN Compared To United States

TN

USA

Children who have received preventive dental care	74% (2020-2021)	75% (2020-2021)
Children whose teeth are in excellent or very good condition	77% (2020-2021)	77% (2020-2021)
Children without health insurance	5% (2019)	6% (2019)

Partnerships

Seedco MSRO is so grateful for our partnerships that allows us to conduct multiple outreach events throughout the year.

- Concorde Career College
- Bellevue Mobile Dental Services
- DentaQuest
- TN Ceal
- Humana
- ShotRX
- Meharry Medical College School of Dentistry





Seedco Supports Children's Dental Health Month

- Seedco is dedicated to advocating for quality healthcare for children and their families.
- Over the past five years Seedco has hosted annual dental fairs to promote awareness regarding the importance of oral health.
- Outreach has been conducted in across our entire service area: Shelby, Fayette, Tipton, Haywood and Lauderdale counties.
- Virtual webinars with medical providers to provide tips to parents about good oral health.
- Seedco staff volunteered at Midsouth Mission of Mercy hosted at Bellevue Christian Church. Providing dental care to over 3,000 individuals in just two days.

SEEDCO' S ANNUAL CHILDREN'S DENTAL HEALTH MONTH MOBILE CLINIC

On 02/24/24 Seedco MSRO will be hosting an Annual Dental Clinic Health Resource Fair
We are expecting to provide 100 individuals with medical care services.

Services include



DENTAL CLEANING
AND EXTRACTIONS



VACCINATIONS AND
CHILDREN
IMMUNIZATIONS



DENTAL SUPPLIES
GIVEAWAYS



ON THE SPOT HEALTH
INSURANCE ENROLLMENT
SERVICES AVAILABILITY

AFTER THE EVENT

- Seedco MSRO prioritizes holistic family supportive services.
- Staff members contact individuals within 48 hrs. after the event to provide wraparound services.
- Seedco MSRO enrollment counselors provide referrals for housing programs and refer parents to our workforce development team.
- If a family does not qualify for TennCare they are referred to our Certified Navigators.



Seedco Social Media Presence

- From providing health facts to highlighting events, our social media platforms allow us to connect with the community at large.
- For December, according to our data analytics via Business Suites, our Instagram account reached 464 individuals and Facebook reached 6.3K.
- Be sure to like us on Facebook: Seedco Mid-South
- Be sure to follow us on Instagram: seedco_msro



JOIN US!



MSRO ANNUAL DENTAL CLINIC HEALTH RESOURCE FAIR

Date: 02/24/24

Time: 10a-2p

Location: 843 Highway 51 S
Covington, TN 38019

CONTACT US

901.405.7882

Our Community Partners



**SIGN UP
HERE**



Aliados Health Oral Health Outreach Strategies



Yoselyn Ayon

Project Manager, Medi-Cal Programs

Aliados Health



Aliados Health

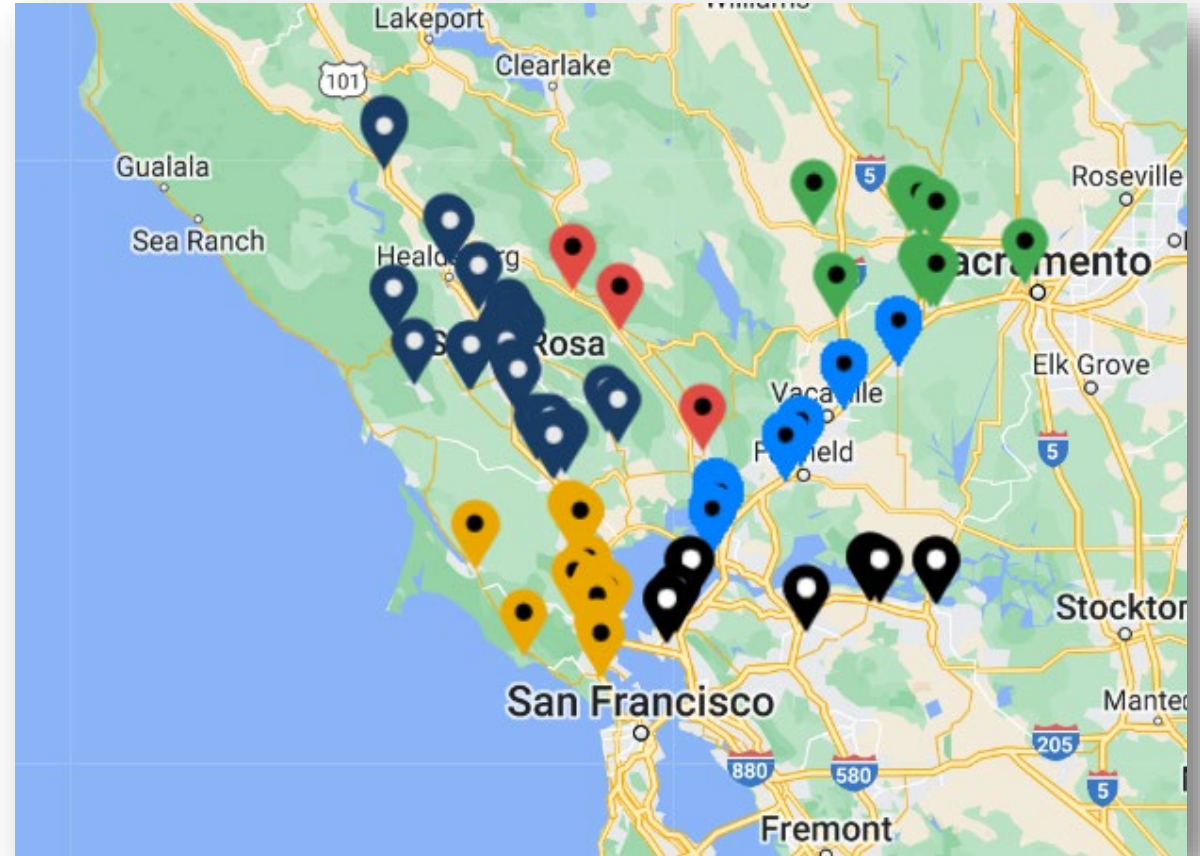
Access | Equity | Advocacy | Innovation



InsureKidsNow.gov

Who We Are

- California-Bay Area
- 6 Counties
(Marin, Yolo, Sonoma, Solano, Contra Costa, Napa)
- 16 community health centers
- 55% of our patients are Latino



Mission & Vision

Mission

Aliados Health strengthens the capacity of member health centers to provide comprehensive, integrated care that improves health and health equity in their communities. Through leadership in advocacy, informatics, outreach, enrollment, and population health, our work ensures that members have the support and resources they need to offer consistently high-quality clinical care and effective care coordination.

Vision

Vibrant community health centers partner to advance well-being and health equity for all.



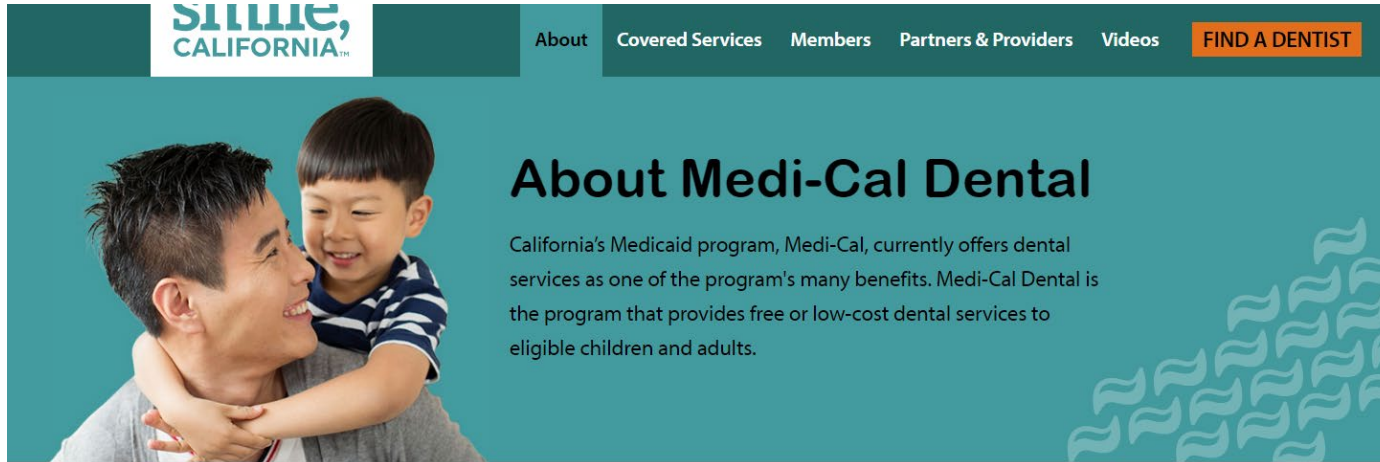
Medi-Cal Dental Program



Covered Services



Smile California



The **Medi-Cal Dental Program** provides free or low-cost dental services to children and adults who receive Medi-Cal, California's Medicaid program. To find a Medi-Cal dentist, click [here](#).

Services covered by Medi-Cal Dental may include:

- Exams and x-rays
- Cleanings
- Fluoride treatments
- Emergency services



Partners & Providers

Materials for Medi-Cal Members

Children's Dental Health Education Packages

Provider Testimonials

Videos

Oral Health and School Readiness

Social Media

Provider Application and Validation for Enrollment (PAVE)

Provider Bulletins

Dental School Graduates

Primary Care Physician Toolkit

Media Materials

Presentations for Partners

Provider Office Language Assistance Sign

Logo and Brand Guidelines

Downloadable Webpage Banners

Campaign Backgrounder

Co-Brand With Us

Materials for Medi-Cal Members

- ▶ **Medi-Cal Dental Covered Services Flyer**
- ▶ **Smile Care Plan**
- ▶ **Medi-Cal Dental Brochure**
- ▶ **Healthy Smiles from Pregnancy Through The Toddler Years Brochure**
- ▶ **Don't Wait Until it Hurts to See the Dentist Fotonovela**
- ▶ **Older Adult Expansion Flyer**
- ▶ **Brochure for Pregnant Members**
- ▶ **Flyer for Pregnant Members**
- ▶ **Pregnancy Toolkit**



<https://smilecalifornia.org/about/>



Reaching the Community



Outreach Strategies



Partnership

Create partnerships with schools/daycares

Mobile Clinic Services



Outreach Events

Health fairs

Back to School Events

Health Hubs (food distribution sites)



Bilingual Material

Provide easy-to-read Spanish material

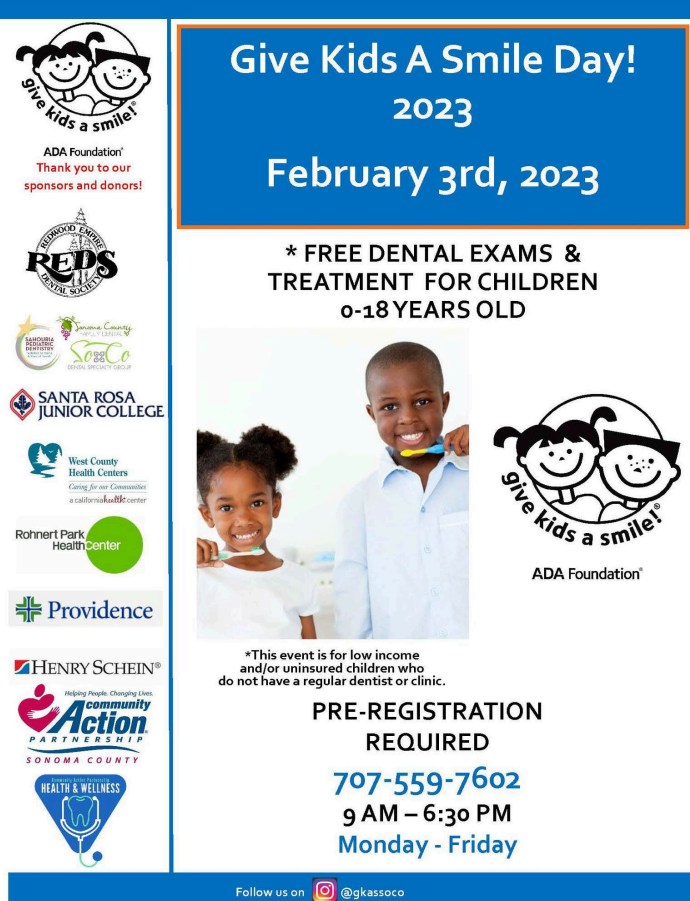
Keep wording simple



Key Outreach Strategy

Mobile Clinic

- Give Kids a Smile Day
 - Since 2005
 - Provide preventive dental exams and sealants to underserved children
 - Help children in urgent need of dental treatment access emergency services
- Elementary school visits every two weeks.
 - Provide dental services to children.
 - Assist parents in getting dental insurance and finding a dental home for their children




Give Kids A Smile Day!
2023
February 3rd, 2023

*** FREE DENTAL EXAMS & TREATMENT FOR CHILDREN 0-18 YEARS OLD**

*This event is for low income and/or uninsured children who do not have a regular dentist or clinic.

PRE-REGISTRATION REQUIRED
707-559-7602
9 AM – 6:30 PM
Monday - Friday

Follow us on  @gkassoco

The poster features a vertical column of logos on the left: ADA Foundation, REDS (Regional Endodontic Dental Society), Sonoma County Health Services, Santa Rosa Junior College, West County Health Centers, Rohnert Park Health Center, Providence, Henry Schein, and Community Action Partnership Sonoma County. The center features a photo of two children brushing their teeth and the 'Give Kids a Smile' logo. The right side contains the event title, date, and contact information.



Key Outreach Strategy

Health Hubs

- Food Distribution
 - Provide food for 400-600 families a week
 - 2 different locations
 - Provide outreach flyers
- Host Resource Fair/Toy Drive
 - Provide dental services: teeth screening and schedule appointments
 - Provide housing support services, nutrition education, reading time, toys, jumpy house



CONTACT



Yoselyn Ayon-Project Manager Medi-Cal Programs
Email: yayon@aliadoshealth.org



Connecting Kids to Coverage National Campaign



Helen Gaynor, MPH

Outreach Contractor, Connecting Kids to
Coverage National Campaign

Porter Novelli Public Services, Inc.

**PORTER
NOVELLI** 
PUBLIC SERVICES

Connecting Kids to Coverage National Campaign: Initiatives

The Connecting Kids to Coverage National Campaign reaches out to families with children and teens eligible for Medicaid and the Children's Health Insurance Program (CHIP) to encourage enrollment and to raise awareness about the health coverage and specific benefits available under these programs.

The Campaign conducts annual initiatives tied to priority topics and key times of year:

- Oral Health
- Mental Health
- Vaccinations
- Missed Care
- Peace of Mind
- Youth Sports
- Year-Round Enrollment
- Back-to-School
- Rural Communities
- Multicultural Outreach

InsureKidsNow.gov

The website for Campaign information and resources



InsureKidsNow.gov

Resources

Enter keyword



Get Email Updates

En Español

1-877-KIDS-NOW (1-877-543-7669)

Find Coverage for
Your Family ▾

Campaign
Information ▾

Outreach Tool
Library

Webinars & Videos ▾

Campaign Notes
eNewsletter ▾

Initiatives ▾

Millions of children and teens qualify for free or low-cost health and dental coverage through Medicaid & the Children's Health Insurance Program (CHIP).

[Learn about coverage options](#) for your family or help us [spread the word](#) about free or low-cost health insurance coverage!



Initiatives: Oral Health

Campaign materials remind families that children enrolled in Medicaid and CHIP have coverage for comprehensive dental services, including cleanings, x-rays, fluoride treatments, and more.

Oral health impacts overall health!
Make the call to catch up on missed dental visits to ensure your kids stay healthy.
#Enroll365

**#Enroll365
Dental Visits:
Covered.**

Piense En Sus Dientes
Mantenga buenos hábitos dentales a cualquier edad. Haga lo siguiente:
• Realice chequeos dentales regulares, a partir de 1 año de edad.
• Cepille los dientes dos veces al día durante 2 minutos usando una pasta con fluoruro.
• Limite los alimentos y bebidas con azúcar.

Think Teeth
Keep up good dental habits at every age by:
• Getting regular dental check-ups, starting at age 1.
• Brushing twice a day for 2 minutes using fluoride toothpaste.
• Limiting foods and drinks with sugar.

Medicaid y CHIP cubren servicios dentales para niños, tales como limpiezas, fluoruro, selladores y refuerzos. La inscripción está abierta todo el año.
Aprenda más en [InsureKidsNow.gov](https://insurekidsnow.gov)

Medicaid and CHIP cover children's dental services - including teeth cleanings, fluoride, sealants, and fillings. Enrollment is year-round.
Learn more at [InsureKidsNow.gov](https://insurekidsnow.gov)

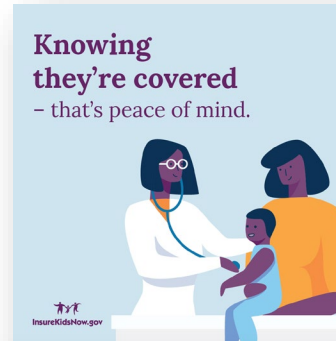
Resources

- Digital videos
- Live reads
- Social media content
- Infographics
- Posters and palmcards
- eSignatures
- Newsletter templates
- Coloring pages

Outreach Tool Library

Campaign Materials can be found in the Outreach Tool Library:

- Ready-to-print posters
- Palmcards
- Social media posts
- Text messages
- Videos
- PSAs
- Template newsletters



Mit einer Krankenversicherung sind sie auf alles vorbereitet, was das Schuljahr bringt.

Kinder, die krankenversichert sind, sind besser darauf vorbereitet, in der Schule gut abzuschneiden und im Leben erfolgreich zu sein. Medicaid und CHIP bieten kostenlose oder kostengünstige Krankenversicherungen für Kinder und Jugendliche. Kinder können regelmäßige Vorsorgeuntersuchungen, Impfungen, Arzt- und Zahnarztbesuche, Krankenhausbehandlung, psychologische Betreuung, rezeptpflichtige Medikamente und vieles mehr in Anspruch nehmen. Anspruchsberechtigt sind vierköpfige Familien mit einem Einkommen von bis zu \$50,000 (in einigen Bundesstaaten sogar noch höher).

Besuchen Sie **InsureKidsNow.gov** oder rufen Sie die Nummer **1-877-543-7669 (KIDS-NOW)** an, um mehr über einen erschwinglichen Krankenversicherungsschutz für Ihre Familie zu erfahren.

InsureKidsNow.gov

Paid for by the U.S. Department of Health & Human Services | CMS Product No. 11667-G May 2022

Ka fikir Ilkaha Arag dhakhtarkaaga Ilkaha Inta Aad Uurka Leedahay

Waa muhiim inaad booqato dhakhtarka ilkaha markaad uur leedahay. Sabab? Caafimaadka afkaagu wuxuu muhiim u yahay caafimaadka ilmahaaga ee koraya.

- Bololka ilkuhu waxa sababa bakteeriya. Ilmahaagu wuxuu kaa "qaadi karaa" bakteeriyada.
- Ilaalinta ilkahaaga iyo ciridkaaga caafimaad hadda waxay kaa caawin kartaa ilaalinta ilkaha ilmahaaga hadhow.
- Waa kuwan sida aad uga hortagi karto cudurka ilkaha:
 - Cadayo oo findhicilo maalin kasta, oo isticmaal daawada cadayga ee fluoride.
 - Cun cunto caafimaad leh.
 - Booqo dhakhtarka ilkaha Daryeelka ilkaha xilliga uurka waa badbaado - tan waxaa ku jira raajada iyo suuxdinta gudaha.

Jadwal u samee baaritaan maanta Haddii aad u baahan tahay caawinaad helida dhakhtarka ilkaha, weydii dhakhtarkaaga. Hubi inaad u sheegto dhakhtarkaaga ilkaha ama nadaafadda inaad uur leedahay.

Waxaad xaq u yeelan kartaa caymis caafimaad oo bilaash ah ama qiimo jaban iyada oo loo marayo Medicaid. Gobolada qaarkood waxay leeyihiin caymis ilkeed oo loogu talagalay haweenka uurka leh.

Si aad wax badan uga barato, booqo **InsureKidsNow.gov** ama wac **1-877-KIDS-NOW (543-7669)**.

XUSUUS:

InsureKidsNow.gov

Paid for by the U.S. Department of Health & Human Services | CMS Product No. 11774-SOM January 2023

Customizable Resources

Many Campaign resources can be customized to include information specific to your community:

- Visit the Outreach Tool Library at www.InsureKidsNow.gov/outreach-tool-library/index.html to review the Customization Guide
- Email CMS Division of Multimedia Services (DMS) with customization requests and your organization's information: MultimediaServices@CMS.hhs.gov
 - Grantees must include their project officers on the email

Think Teeth
Every Step of The Way

Give your baby healthy teeth from the start. It's easy!

- Gently brush baby's teeth twice a day. Use a tiny amount of fluoride toothpaste.
- Take your baby to the dentist by her first birthday. Continue regular check-ups as recommended.
- Tooth decay is caused by bacteria. Your baby can "catch" the bacteria from you.
 - Keep your mouth healthy.
 - Don't share cups or spoons.
- Put only water, milk, or formula in bottles or sippy cups.
- Don't put your baby to bed with a bottle or sippy cup.
- Limit sweet snacks and sugary drinks, including juice.

Medicaid and the Children's Health Insurance Program (CHIP) cover children's dental services, such as teeth cleanings, check-ups, x-rays, fluoride, dental sealants, and fillings. Your child could be eligible!

To enroll your child, call **1-877-KIDS-NOW (543-7669)** or visit InsureKidsNow.gov. Already covered? Use the Dentist Locator on InsureKidsNow.gov to find a dentist near you and call to schedule a dentist appointment today.

LOGO 1 LOGO 2

InsureKidsNow.gov
CMS Product No. 11000
March 2021

Your program name(s)

Your website and/or phone number

Up to two logos

Medicaid and CHIP Continuous Enrollment Unwinding

In March 2020, CMS waived certain Medicaid and CHIP requirements and conditions. The easing of these rules helped prevent people with Medicaid and CHIP from losing their health coverage during the pandemic.

- In April 2023, the continuous coverage requirement ended and states are now required to restart eligibility reviews.
- **The Connecting Kids to Coverage National Campaign encourages beneficiaries to:**
 - **Update their address, email, and phone number with their state Medicaid offices**
 - **Check their mail for a letter regarding their Medicaid or CHIP renewal**
 - **Complete their renewal form, if received and return it right away.**
- Resources and additional information are available at [Medicaid.gov/Unwinding](https://www.Medicaid.gov/Unwinding), including a [Communications Toolkit](#) and [graphics](#) in 7 languages, including [English](#) and [Spanish](#). Partners can find:
 - Social media copy and graphics
 - Drop-in articles and key messaging
 - Toolkits for specific settings, including clinical offices and health care settings
 - The [Medicaid.gov/renewals](https://www.Medicaid.gov/renewals) page to help families connect with their state Medicaid office.

Keep in Touch

Interested in learning more about the Campaign and its resources?

- Email us: ConnectingKids@cms.hhs.gov
- Follow us on Twitter: [@IKNgov](https://twitter.com/IKNgov)
- eNewsletter sign up: [“Campaign Notes”](#)



Questions?