

2023 Annual Meeting & Celebration!



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>>>

WELCOME

Executive Director T.J. Clarke II, MBA



AGENDA

- Opening Remarks from Executive Director
- Introduction of COHI Board Members and Staff
- Overview of COHI's Recent Advocacy and Success
- Community Engagement Efforts
- Presentations on Recent Research
- Remarks from the President of the Board
- Awards Ceremony





Stay Connected and Win a Prize!



Mankyou



FOR BEING HERE!

We appreciate your support to strengthen and safeguard access to quality, affordable oral health services for all Connecticut residents.

DONATE TO THE CAUSE FOR A SUCCESSFUL 2024





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JOIN OUR MAILING LIST TO STAY IN TOUCH





Mark the square when you hear it said during the speaking program.

Mark 5 in a row to enter to win tonight's raffle prize!

Dental Therapy	Community Health Centers	Dental Sealants	HUSKY	CareQuest Institute for Oral Health
Medical- Dental Integration	Oral Hygiene	Advocacy	Barriers to Access	Dentists
Oral Health Literacy	Affordability		Periodontal	Community Engagement
Every Smile Counts	Cultural Competence	Oral Health Workforce	Health Equity	Fluoride
Preventative Care	Dr. Howard I. Mark	Quality Care	Medicaid	Dental Insurance

Thank you to our Sponsors

Platinum



Thank you to our Sponsors

Gold

JoAnn Price

Co-Founder and Managing Partner of Fairview Capital Partners, Inc.



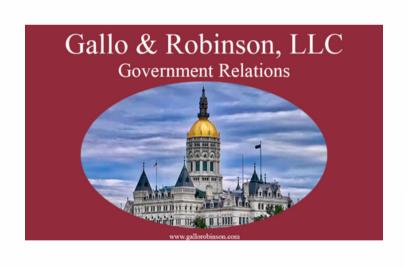
Thank you to our Sponsors Silver Bronze





Dr. Jean and Dr. Steve Schensul

Phil Richmond, MS, LADC

















Thank you to our Sponsors

Community Partners

























Dr. David Fenton





Advocating for Better Oral Health for All for Over 20 Years!

Our Mission:

To strengthen and safeguard access to quality, affordable oral health services for all Connecticut residents

Our Vision:

All Connecticut residents will have equal opportunity to obtain the services needed to maintain good oral health



HOW WE ADVOCATE FOR THE COMMUNITY:



OCTOBER 2022

A MEDICAID GAP ANALYSIS OF ORAL HEALTH CARE FOR ADULTS IN CONNECTICUT



FUNDED BY

CareQuest Institute for Oral Health &

Connecticut Health Foundation

- Lead and collaborate in statewide oral health advocacy efforts
- Conduct oral health research to uncover the root causes of existing problems and recommend solutions
- Communicate the impact of structural and social factors on oral health and help reduce disparities
- Promote the necessity of good oral health for overall health and well-being throughout the state

RECENT POLICY ADVOCACY EFFORTS:

- Expanding Medicaid coverage to cover periodontal treatments for adults with certain chronic health conditions. (2023)
- Securing a 25% increase in adult rates for all dental services and an additional increase for endodontic services (the first adult dental rate increase since 2008. (2022)
- Expanding coverage for second annual cleanings authorized for adults on Medicaid who have certain medical conditions. (2022)
- Expanding Medicaid (HUSKY) to children up to 12 years old, regardless of immigration status (2022), and 15 years old by 2024.
- Allowing 19 to 26-year-olds to remain on their family's dental insurance plans, helping thousands of young people in Connecticut maintain continuity of care. (2021)
- Adding Dental Coverage included in the Covered CT program. (2021)
- Adding Licensed Dentists to the list of telehealth providers. (2020)

HUSKY Health is Now Available to Children 12 and Under with Any Immigration Status



Special Announcement!
Medicaid to Expand Coverage for
Treating Periodontal (Gum) Disease







Empowering Community Voices to Help Eliminate Inequities and Barriers to Oral Health Access and Quality Care for All of Connecticut

Increasing Utilization of Oral Health Medicaid Services, especially for adults

Expanding and diversifying the oral health workforce: dental therapist, community health workers, and others

Complete the dental bill of rights, including Medical Loss Ratio Legislation

Improving preventive oral health services for children

Expanding care for Individuals with Intellectual and Developmental Disabilities

Expand eligibility and benefits for Medicaid oral health services



COMMUNITY ENGAGEMENT OUTREACH:

Gary Turco, MS, Community Engagement Specialist























COMMUNITY ENGAGEMENT SUPPORTED RESEARCH:

- Medicaid utilization barriers
- Non-emergency medical transportation
- Medicaid provider participation

- Individuals with special needs unique access problems
- Oral health literacy
- Dental Therapy knowledge and grassroots support



Provider and Practice Feedback Needed to Understand Medicaid Network Participation



COHI needs to hear from oral health professionals on changes to help incentivize more private providers to join the Medicaid network or increase their member patient load.

You can help our advocacy in one of two ways:

Complete a short questionnaire - https://forms.gle/mYVCCn2jDEuvYdyn9

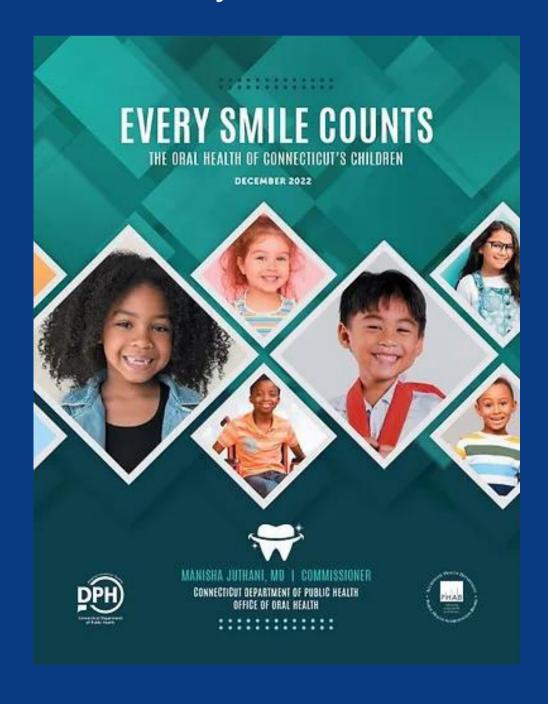
Schedule a conversation to provide your feedback at info@ctoralhealth.org.

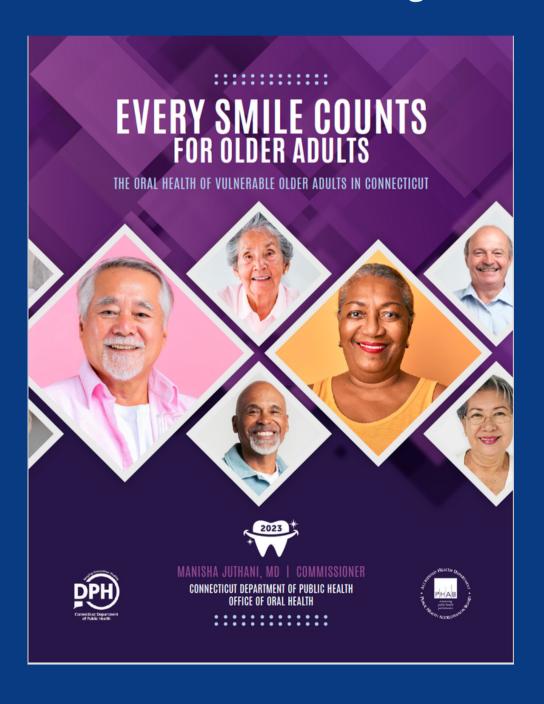


Every Smile Counts for Connecticut'sChildren and Older Adults

New studies to determine residents' oral health status, investigate barriers to access and quality care, and identify solutions to achieving better outcomes conducted in partnership and behalf of the Connecticut Department of Public Health Department of Public Health

Presented by: Samira Abdelrehim, Megna Senthilnathan, and Victoria DAgostino





Key Findings: Children (under 21)

More than 4,600 Kindergarten and third-grade children in 46 schools and 37 school districts were screened around the state.

Report follows the 2007, 2012, and 2017 to inform the development of state policies and programs for children's optimal oral health. It identifies several serious concerns and outlines numerous policy recommendations for stakeholders to consider and pursue.

- Dental decay continues to be a public health problem for CT children, with at least 1/3 (34%) of children affected. (Affects children's learning in the classroom)
- There are socioeconomic, race-based, and ethnicity-based disparities in levels of dental disease. (Asian, Black, Hispanic, and Multiracial all lag behind white children, as well as lower income behind higher-income families)
- Only 28% of third-grade children have protective dental sealants, also race and ethnicity-based disparities.
- Connecticut has not met the objectives for either national or state improvement plans.

View the full report here: https://www.ctoralhealth.org/everysmilecounts-children-2022



DECEMBER 2022

Every Smile Counts 2022 is a survey conducted through the Connecticut Department of Public Health, Office of Oral Health to assess the oral health status of children in Connecticut.

DENTAL DECAY CONTINUES TO BE A PUBLIC HEALTH PROBLEM FOR CONNECTICUT KINDERGARTEN AND THIRD GRADE CHILDREN.



15%

f Connecticut's kindergarten nd third grade children need ental treatment



16°

of Connecticut's kindergarter and third grade children have untreated decay.

THERE ARE RACE-BASED AND ETHNICITY-BASED DISPARITIES IN LEVELS OF DENTAL DISEASE AMONG CONNECTICUT'S KINDERGARTEN AND THIRD GRADE CHILDREN.



Inere are socioeconomicbased disparities in levels of dental disease among Connecticut's kindergarten and third grade children.



ace-based and ethnicity-based ealth disparities continue to exist rates of dental decay experience mong Connecticut's kindergarten nd third grade children.

28% OF THIRD GRADE CHILDREN IN CONNECTICUT HAVE PROTECTIVE DENTAL SEALANTS.



Race-based and ethnicity-based disparities continue to exist in rates of Connecticut's kindergarten and third grade children who have



Connecticut has not met the objectives for either national or state improvement plans for third grade children's dental decay experience, untreated dental decay, or dental sealants.



Connecticut Department
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Office of Oral Health
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Hartford, Connecticut 06134-0308

funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.



Key Findings: Older Adults (64+)

Targeted two high-risk adult populations: residents of long-term care (LTC) facilities and adults attending federally subsidized congregate meal sites (CM) sites).

Twenty-three LTC facilities were screened throughout Connecticut, along with 26 CM sites located in the same communities as the LTC facilities. 84.5% of survey respondents were age 65 or older.

Follows 2013 report to inform the development of state policies and programs to improve the oral health of Connecticut's older adult population.

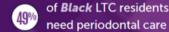
- Many vulnerable older adults in Connecticut with teeth (dentate) are not getting the dental care they need. 54% in LTC and 19% in CM sites needed dental care.
- Many vulnerable older adults in Connecticut do not have any natural teeth and many do not have dentures to facilitate eating. 45% in LTC and 17% in CM sites did not have a full set of dentures.
- Periodontal disease is a problem for 44% of residents in LTC and 13% at CM sites.
- Hispanic residents had the highest prevalence of needing urgent dental care (52%) in LTC sites and Black participants at CM sites had the highest rate of untreated decay.



Many vulnerable older adults in Connecticut's LTC facilities do not have any natural teeth and many do not have dentures to facilitate eating.



need periodontal care



of White LTC residents

Vulnerable older adults in Connecticut's LTC facilities have significantly more untreated dental decay, substantial ooth loss, and no natural teeth compared to the general population of older adults in the United States

are less likely to be edentulous

have substantial tooth loss

have untreated dental decay

at CM sites report fair or poor oral health



HISPANIC

15% of those screened at the CM sites reported barriers to accessing dental care





ADOPTING DENTAL THERAPY IN CONNECTICUT



Presented By:

Dr. Krisha Shah, MPH Student Dr. Hir Akhani, MPH Student

DENTAL THERAPY IN CONNECTICUT

Hir Akhani, BDS, MPH, Krisha Shah, BDS, MPH, TJ Clarke II, MBA, Gary Turco, M.S.



ABSTARCT

The study suggests Connecticut should implement a dental therapy program to meet the demand for dental literature review, comparison of various states model workforce for individuals from underserved communities. community health planning, policy strategies, and the program for public insured or under-insured

Keywords: Dental Therapy, Policy Recommendation, States Laws, Access, Preventive Care.

WHAT IS DENTAL THERAPY?

Dental therapists are highly-trained dental providers who work as part of the dental team, similar to a physician assistant in medicine.

First introduced to the US in 2005, a dental therapist can provide routine preventative and restorative care. and education to their patients, especially in areas with shortages in dental care.

Some areas dental therapists are specifically trained to

- Schools
- Nursing Homes
- Tribal clinics • Senior Centers
- Community Health Centers Mobile Clinics
 - Rural Community

ANALYSIS

This project involves conducting a literature review of state models and dental therapy programs, collecting data through interviews with healthcare providers, allied healthcare workers, and advocacy organizations, and analyzing and comparing different state models to determine the best fit for Connecticut.

NEED OF DENTAL THERAPY IN CONNECTICUT

- Over 800,000 Medicaid enrollees are eligible for oral health services. 2/3 of adults and 1/3 of children don't visit a dentist annually.
- Dental cavities, a preventable condition, impact 34% of Connecticut children, with higher rates among minorities and lower-income families.

CURRENT LAWS OF DENTAL THERAPY IN CT

- Compulsory need to be registered licenced dental hygienist.
- Complete a 3-year accredited dental therapy program after 0-1 year of college education.
- Obtain written certification from an accredited institution signed by a licensed dental therapist.
- Pass a recognized dental competency exam.
- Complete 1000 hours of clinical training under a licensed dentist's supervision.
- Attend 6 hours of dental therapy-related continuing education.
- Establish a collaborative agreement with a licensed

OBJECTIVE

• BY 2025- CHANGE OF LAW FOR COST-EFFECTIVE DENTAL THERAPY EDUCATION

care in community settings. The study recommends Decouple dental hygiene and dental therapy, create a licensure program, and this program based on data collected through a establish training opportunities for diversification and expansion of the oral health

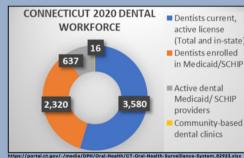
• BY 2028- INTRODUCE THE DENTAL THERAPY PROFESSION IN CONNECTICUT.

promotion would be important factors in implementing
Enhancing cultural competence and linguistically appropriate care for the benefit of residents with public insurance/limited access to affordable oral health, preventive care in the community, and decreased emergency dental visits.

STATE-VIEW OF DENTAL THERAPY

MINNESOTA	ALASKA	WASHINGTON	
ork under licenced dentist.	Work under licenced dentist.	Work under a licenced dentist.	
d follow chapter rules.	Can work in community settings and	Can work in federally qualified or	
rve in underserved areas.	tribal areas with limited function only.	tribal centers.	
dual degree required.	No dual degree required.	They need to finish CODA accredited dental hygiene program,	
reement with dentist and ust be renewed every year.	Formal education of 3 years from collage and 3 months of preceptorship under a licenced dentist.	or 400 hours of clinical preceptorship under a licenced dentist.	





STATES CURRENTLY PRACTICING

Alaska, Minnesota, Oregon, Washington, Maine. (GREEN COLOR IN

SOME EXAMPLES OF OUTCOMES

- In 2021 study involving 2.6 million adults found that dental therapy in Minnesota led to a notable increase in dental visits among low-income and Medicaid-eligible adults.
- Improved access and patient satisfaction by decreasing long waiting and travel times.

- 40,000 native Alaskan natives living in rural communities gained access to dental care.
- Three times more children's dental check-ups and more completed

POTENTIAL POLICY CHANGE

- Establish a Dental Therapy License: Create a dedicated dental therapy license.
- · Alignment with Accreditation Standards: Update requirements to align with federal accreditation for public and private insurance to include dental therapist professionals in reimbursement standards.
- Decoupling Hygienist Prerequisite: Eliminate the need for a dental hygienist license for cost-effective education and workforce development.
- Allow Foreign-Trained Dentists to Practice as Dental Therapists: After proper licensure examinations decided by CODA.
- Creating a Connecticut-Based Curriculum and Education Program: Degree program.

ACTION TO ACHIEVE

A dental therapy model could help alleviate Connecticut's dental professional shortage. Including dental therapists in the workforce can emphasize the importance of oral health access, proactive care, and preventive measures that can improve oral health equity and promote inclusivity in the com

REFERENCES





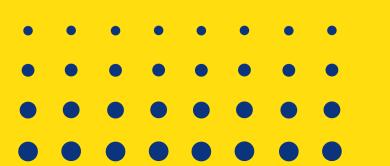




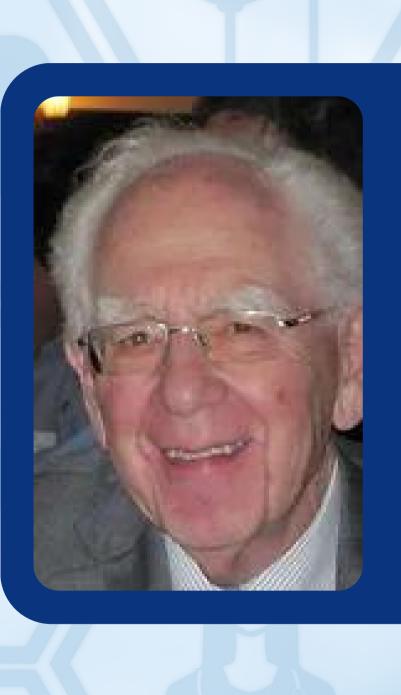
WELCOME FROM

President of the Board Dr. Brianna Muñoz







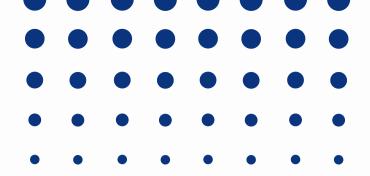


THE HOWARD I. MARK AWARD

To a leader in oral health in Connecticut, who shares with Dr. Mark, COHI cofounder and retired oral surgeon, a passion for improving access to quality oral health services no matter a person's income or wealth.

Presented by COHI Board Vice President, Trisha Pitter, MS & COHI Board Secretary, Roberta Friedman, MS





KATHY MONTAGUE, DMD

2023 HOWARD I. MARK AWARD











ORAL HEALTH CHAMPION AWARDS

Presented annually to individuals who are advocating to support COHI's mission to strengthen and safeguard access to quality, affordable oral health services for all Connecticut residents.

Presented by COHI Board Treasurer Jean Schensul, PhD





PAREESA CHARMCHI GOODWIN, MPH

2023 ORAL HEALTH CHAMPION AWARD













RONALD ALBERT, DMD

2023 ORAL HEALTH CHAMPION AWARD



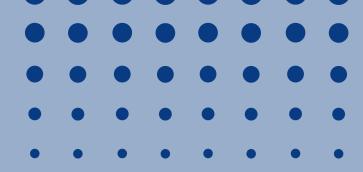












NON-PROFIT ACCOUNTABILITY GROUP

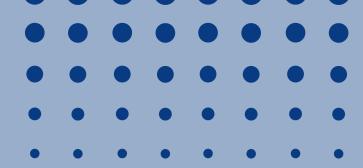
2023 COMMUNITY PARTNER AWARD











HUSKY 4 IMMIGRANTS COALITION

2023 COMMUNITY PARTNER AWARD

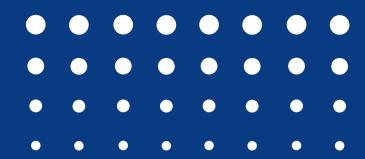












REPRESENTATIVE MARY MUSHINSKY REPRESENTATIVE TONI WALKER REPRESENTATIVE JILLIAN GILCHREST

2023 LEGISLATIVE CHAMPION AWARDS



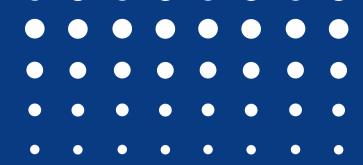












REPRESENTATIVE QUENTIN "Q" WILLIAMS

LEGISLATIVE CHAMPION AWARD

To honor the memory and contributions of Representative Williams's unwavering efforts and enduring commitment to championing oral health equity for all.













FOR COMING

DONATE NOW TO SHOW YOUR SUPPORT







