Alameda County Healthy Teeth
Healthy Communities Update

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ALAMEDA COUNTY DEPARTMENT OF PUBLIC HEALTH

JAN 8TH, 2018
Of **156,342** children (0-20) eligible for Denti-Cal Services:

- Only **43,932** (28%) were seen by a dentist in 2014.
- Of these, only **21,634** (49%) saw a dentist in the following year.

**1 in 7** children on Medi-Cal in Alameda County gets recommended annual preventive dental care.
The emphasis of this Plan is for those who have the greatest need and least capacity to access dental services to achieve health equity.

1. ACCESS

Increase the availability and utilization of oral health services and education programs in locations frequented by pregnant women, children, teens and their caretakers, such as schools, WIC, Head Start, primary care providers’ offices, and other locations.

2. EDUCATION

Educate children, teens, caregivers, and pre-natal women about the importance and “how-to’s” of establishing and maintaining good oral health through schools, healthcare, childcare and social service providers as well as through a broader social marketing campaign.

3. WORKFORCE DEVELOPMENT

Increase the number of oral health care educators and providers practicing in underserved communities who are indigenous to and/or representative of these communities. Increase the number and cultural competency of other oral health providers who serve young children, pregnant women and teens living in underserved communities.

4. COORDINATION AND OVERSIGHT

Provide coordination and oversight of dental care programs to underserved populations throughout the County, and advocate for policies that support the goals of this plan.

5. EVALUATION

Establish a mechanism for regularly evaluating the progress of the Strategic Plan in accomplishing its objectives.
ACCESS to DENTAL CARE for CHILDREN covered by MEDI-CAL

Provider Factors

Client/Patient Factors

System Factors
Local Dental Pilot Project Goals

**Prevention**
Increase the utilization of children ages 1-20 enrolled in Medi-Cal who receive any preventive dental service, by at least ten (10) percentage points over a 4-year period.

**Access to Care**
Increase the number of actively participating providers in each county who provide preventive services.

**Continuity of Care**
Increase utilization of children continuously enrolled in the Medi-Cal Dental Program who receive services performed by the same provider in 2-, 3-, 4- consecutive year periods.
HTHC Strategy 1: Increase Dental Care Coordination

- Create a cross-agency workforce of Community Dental Care Coordinators (CDCC) who are linguistically and culturally responsive to community

- Leverage existing infrastructures for outreach and care coordination

- Develop a web-based Care Coordination Management System (CCMS) to link families to dental appointments and support continuity of care
HTHC Strategy 2: Increase Safety Net Dental Network and Capacity

- Expand provider network through recruiting private dentists into Denti-Cal and enhancing FQHC participation.

- Offer additional local educational and financial incentives to participating dentists.

- Develop a Dental Community of Practice (COP) to connect dental providers to additional training and technical assistance.
Train Dental Care Coordinators

Rethink Places

Create Connected Care

Credit to Gobee’s Group

Healthy Teeth, Healthy Communities (HTHC)
Path of Establishing “Dental Home” as Illustrated by Community Dental Care Coordinators (CDCCs)
HTHC Governance Structure

Steering Committee

Implementation Workgroup

Sustainability Workgroup

Analysis, Accountability + Quality Improvement Workgroup

Care Coordination Forum

Dental Community of Practice
### Steering Committee Members

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization &amp; Title</th>
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<tbody>
<tr>
<td>Dr. Baharak Amanzadeh</td>
<td>ACPHD/ODH / Dental Health Director</td>
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<tr>
<td>Angela Ball</td>
<td>ACPHD / Public Health Nursing Director</td>
</tr>
<tr>
<td>Janis Burger</td>
<td>First 5 Alameda County / Chief Executive Officer</td>
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<tr>
<td>Dr. Muntu Davis</td>
<td>ACPHD / Chief Health Officer</td>
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<tr>
<td>Quamrun Eldridge</td>
<td>ACPHD/CHS Community Health Services Division Director</td>
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<tr>
<td>Eileen Espejo</td>
<td>Children Now / Senior Managing Director, Media &amp; Health Policy</td>
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<tr>
<td>Dr. Jared Fine</td>
<td>ACPHD/ODH / Dental Ambassador</td>
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<tr>
<td>Colleen Chawla /or Danice Cook</td>
<td>ACPHD / HCSA Director</td>
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<tr>
<td>Oscar Gomez</td>
<td>HOP - Health Outreach Partners / CEO</td>
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<tr>
<td>Dr. David Hoffman</td>
<td>Alameda Health System / MD, Highland Hospital</td>
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<tr>
<td>Dr. Huong Le</td>
<td>Asian Health Services / Chief Dental Officer</td>
</tr>
<tr>
<td>Liz Maker</td>
<td>ACPHD/CAPE - Evaluation Unit / Program Specialist/Lead Evaluator</td>
</tr>
<tr>
<td>Tracey Schear/ or Kimi Sakashita</td>
<td>HCSA/Center for Healthy Schools and / Communities (CHSC) Director</td>
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<tr>
<td>Ralph Silber</td>
<td>Alameda Health Consortium / Executive Director</td>
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<tr>
<td>Rhodora Ursua</td>
<td>Alameda Health Consortium / Director of Programs</td>
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<tr>
<td>Kimi Watkins-Tartt</td>
<td>ACPHD / Deputy Director</td>
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<tr>
<td>Miriam Abrams</td>
<td>Strategy Consultant/Facilitator</td>
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HTHC Timeline

- **Project Started**
  - April 2017
  - Steering Committee and Community of Practice formed
  - Financial system set up
  - Contracts, MOUs, SSAs in place

- **Hiring internal staff**
- **Evaluation Work Group formed**
- **Care Coordination Leadership Team formed**

- **Develop Training curriculum and protocols for Community Dental Care Coordination**
  - Jul-Nov

- **Finalize the Development of interim Web-based Care Coordination Management System**
  - Oct-Nov 2018

- **Initiate enrolling Medi-Cal Dentists into program**
  - Nov-Dec 2018

- **Initial Training for Care Coordinators Oct 10-Nov 30**

- **Dental Providers First Training and enrollment Nov 4**

- **Begin care coordination**
  - Nov-Dec 2019

- **Project Accomplished**
  - Dec 2020
Accomplishments of Community Dental Care Coordination

- Countywide diverse workforce of 27 Community Dental Care Coordinators (CDCCs) from 14 agencies hired
- An initial 8 week interactive training curriculum was designed and implemented
- CDCCs have started their outreach efforts
Language Abilities of CDCCs
(Speaking, Reading, Writing, Translation)

- Spanish: 12
- Cantonese: 1
- Mandarin: 1
- Taiwanese: 1
- Vietnamese: 1
- Hindi: 1
- Bengali: 1

Number of CDCC
Collective Assets: Prior Work Experience of CDCCs

- Community Health/Outreach Worker/Promotora: 14
- Case Manager/Patient Navigator: 10
- Receptionist/Front Desk Staff: 10
- Administrator or Manager: 5
- Dental Assistant: 5
- Health Insurance Application Assistant: 5
- Other*: 12

* Other Includes Experience in Business/Customer Service, Research, Tutoring, Mobile Dental Clinics
CDCCs’ Training
Power of CDCCs
Dental Community of Practice Network Aims to build a sufficient network of dentists who are collectively and individually motivated and proficient to improve access to dental care for Medi-Cal children.
Dental Community of Practice Goals

1. Identify barriers, find solutions and support for dentists who wish to expand capacity to serve the target population.

2. Support dentists in connecting with peers in the community who are serving the target population by creating formal avenues for sharing experiences and learning together.

3. Engage motivate more dentists to better serve children from low income families in our community.

4. Offer training and education to help increase dentists clinical and cultural competency to serve the target population through a care coordination model.

5. Develop a shared sense of responsibility for the dental health of our communities.
Accomplishments of Dental Community of Practice Network

- Kicked off Continuing Education Program on November 4th for over 60 dentists (private and FQHCs dentists)
- 21 in the process of signing contract, followed by in-office meetings
- Developed Incentive Model and 3 year Continuing Education Curriculum
- Partnered with 3 Dental Societies for Promotion
- Initiated a mentorship collaboration with Pediatric Dental Specialists
Colleague to colleague...
Distribution of hired and trained CDCCs and contracted and trained Providers as of Jan 2018

<table>
<thead>
<tr>
<th>District</th>
<th># of CDCCs</th>
<th># of providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>District 1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>District 2</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>District 3</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>District 4</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>District 5</td>
<td>7</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>24</td>
<td>19*</td>
</tr>
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</table>

*Providers Counted twice: TV is in 2 & 3, WO is in 3 & 5
Accomplishments of the Care Coordination Management System

- Metrics finalized for the Web-based Care Coordination Management System to outreach, link families to dental appointments and support continuity of care
- Design of Ecchange as the interim solution and going online by February
Evaluation Plan Overview

- Outcome Evaluation
- Process Evaluation

Some Accomplishments of the Evaluation Group

- Metrics development
- Surveys of dentists and CDCCs
- Training Evaluation
Performance Metrics: Preventive Dental Visit

<table>
<thead>
<tr>
<th>Children on Denti-Cal:</th>
<th>Average Per CDCC (Annually)</th>
<th>All CDCCs (Annually)</th>
<th>Project Total (Over 3.5 Years)</th>
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<tbody>
<tr>
<td>Receive Initial Contact through Outreach</td>
<td>600</td>
<td>15,000</td>
<td>52,500</td>
</tr>
<tr>
<td>Receive Care Coordination</td>
<td>276</td>
<td>6,900</td>
<td>24,150</td>
</tr>
<tr>
<td>Receive Dental Care (65% Show Rate)</td>
<td>179</td>
<td>4,475</td>
<td>15,663</td>
</tr>
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15,663 = 10% increase from baseline
Performance Metrics: Continuity of Care

<table>
<thead>
<tr>
<th>Services Received</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
<th>Project Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>An exam from the same service location with no gaps in services for 2 continuous periods</td>
<td>2-3% Increase</td>
<td>2-3% Increase</td>
<td>2-3% Increase</td>
<td>2-3% Increase</td>
<td>10% Increase (49% to 59%)</td>
</tr>
<tr>
<td>An exam from the same service location with no gaps in services for 3, 4, 5 or 6 continuous periods</td>
<td>2-3% Increase</td>
<td>2-3% Increase</td>
<td>2-3% Increase</td>
<td>2-3% Increase</td>
<td>Baselines Unknown</td>
</tr>
</tbody>
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There is currently no Alameda County baseline for the percentage of children receiving an exam for 3 or more continuous periods.
### HTHC Performance Metrics

#### How Much Did We Do?
- # of CDCCs Trained and Deployed (25)
- Number of Families Receiving:
  - Outreach (52,500)
  - Care Coordination (24,150)
  - Preventive Care (15,633)
- Number of Dental Service Locations that Serve Medi-Cal Children (FQHC or Private Dentist – 35)

#### How Well Did We Do It?
- Client Satisfaction with CDCC and Dental Care
- Appointment Scheduling and Client Tracking Through Web-Based System (CCMS)
- % of Children Receiving Preventive and Restorative Services
- % of Children Receiving Dental Care for 2 or More Consecutive Years (Dental Home)

#### Is Anyone Better Off?
- Reduced Dental-Related Emergency Department Visits
- Improved Dental Health Outcomes
Sustainability Planning

- Plans for ongoing sustainability analysis through the project Steering Committee and Sustainability Workgroup to build on the infrastructure and to leverage other funding.

- Plans for partnerships with UCSF School of Dentistry and DentaQuest Foundation to identify and document lessons learned and best practices in order to support potential scaling or replication in other jurisdictions.

- Results to inform policy changes through DHCS on increasing reimbursement rates and incentives.
Challenges and Successes

- Fast ramp-up
- Collaborative nature
- County-wide coordination
- New workforce
- Multiple county policies and procedures
- Hiring

- Ground breaking
- Innovative
- Multi-faceted
- Aims for system change
- Robust evaluation plan
Our Assets and Accomplishments

- The amazing workforce of Community Dental Care Coordinators!
- The presence and momentum of our partnerships
- County leadership
- Our community trust
- A well-designed program
- Positive response from the dental community
Vision for Alameda County:

All children are cavity free
All adults can access the needed dental services
Healthy Teeth, Healthy Communities (HTHC)