Oral Health Committee Meeting
Friday, June 12, 2015

Proposed Agenda

1. Welcome and Introductions  
   Danette Wong Tomiyasu

2. State Innovation Model (SIM) Grant  
   Beth Giesting
   • Triple Aim + 1
   • SIM 2 Opportunity
   • Health Care Improvement Targets

3. SIM Process and Timelines  
   Joy Soares

4. Committee Outline, Timeline, and Membership  
   Beth Giesting

5. Dept of Health Oral Health CDC Grant  
   Danette Wong Tomiyasu
   • Areas of focus
   • Collaboration with SIM

6. Potential Areas of Focus for SIM Grant  
   Beth Giesting
   • Scope of practice issues
   • School-based services
   • Increasing utilization of preventive services for children
   • Coverage for Medicaid adults
   • FQHCs
   • Value based purchasing and reimbursement
   • Other?

7. Measures  
   Beth Giesting
   • Healthy People 2020
- OH-1: Reduce the proportion of children and adolescents who have dental caries experience in permanent teeth
- OH-2: Reduce proportion of children and adolescents with untreated dental decay
- OH-8: Increase the proportion of low-income children and adolescents who receive any preventive dental service during the past year (Medicaid)
- OH-12: Increase the proportion of children and adolescents who have received dental sealants on their molar teeth (Medicaid)

- EPSDT 416 Report
  - 12a: Total eligibles receiving dental services
  - 12d: Total eligibles receiving a sealant on a permanent molar tooth
  - 12b: Total eligibles receiving preventive dental services

8. Next steps

9. Adjournment
Welcome and Introductions:
Co-Chair Wong Tomiyasu welcomed the group to the Oral Health Committee meeting and attendees introduced themselves. There will be 6 meetings total, all of which will be at DOH, and parking passes will be provided to those who need it.

Review of SIM Process:
Co-Chair Giesting gave an overview of SIM process: (please see slideshow for more details)
  • Health care innovation/transformation started with stakeholder convenings in 2012
  • SIM round 1 was carried out in 2013 with more stakeholder engagement
  • First plan was broad and high level
  • SIM round 2 provides opportunity to create a more finely tuned implementation plan, more narrowly focused
  • All Payer Claims Database (APCD) and No Wrong Door (through Executive Office on Aging) also working in parallel to SIM
Hawaii Health Care Innovation Models Project
Oral Health Committee Meeting
June 12, 2015

- SIM 2 focus is on behavioral health integration with primary care and oral health improvement, specifically for Medicaid population
- SIM 2 grant ends January 31, 2016 (Innovation Plan due)

Oral Health in Hawaii and Action Plan
Soares discussed health system change, SHIP deliverables and overview of other committees/decision making flow (please see slideshow)

A committee member asked about possibility of funding for next round of SIM
- Soares responded: CMMI said there is not a plan to do SIM round 3 as we know it. SIM team doesn’t know exactly what round 3 will look like, so focus on sustainability and how to move forward with limited or no additional funding
- Co-Chair Giesting responded: Federal government is emphasizing states should learn how to maximize federal dollars through Medicaid

A committee member asked about structure of committees, and if oral health should also focus on workforce and OH payment
- Co-Chair Giesting: Oral Health committee should also focus on workforce and payment for oral health, because other committees are going to be addressing behavioral health

Discussion regarding strategy to improve oral health
- Items listed are important operational issues but need to develop a strategy for an effective oral health SYSTEM
- We know sealants and varnishes work, but how do we get people to utilize those services
- Nationwide there is an increase in people going to FQHC’s and emergency rooms for oral health issues
- Suggestion to cross out children regarding preventive services, and instead target whole population
- Another member pointed out that children have coverage, if not access, while adults don’t have coverage either
- Need to develop more partnerships
- Group agreed to identify strategies to provide dental coverage for adults
- Committee member suggested we discuss barriers and how to overcome them
- Will review measures to correlate to goals
- A committee member stated that education is key for utilization issues
- Will need more information about changing trends and dynamics in the field

Committee Goals and Milestones:
Membership suggestions:
- Joan from public health nursing
- Patti from Med-QUEST
- Alan from CCMC

Co-Chair Wong Tomiyasu discussed current DOH activities:

DOH lost pretty much entire dental health division in 2009
In 2013, applied for and received a CDC grant to rebuild infrastructure
There has never been a state plan for oral health before
- Just completed a survey of 3rd graders. Will be the first representative sample from the state, as before it was a convenient sample (wasn’t acceptable at a national level)
- Planned over a year, took 5 months to collect data
- Data is still being entered and cleaned (HPCA is involved in doing that)
- Will be analyzed and interpreted by an epidemiologist with ASTHO
- Might be available before the end of the year, might have some data to work with in fall
- Information will help us to quantify the needs and areas for improvement

Working primarily on data surveillance system
Environmental scan looking at what is already in existence
Pilot dental sealant project
Andrew Tseu update on clinics:
- 5 dental clinics (one at Hawaii state hospital)
- 5 dentists and one oral surgeon
- Goal to use oral surgeon at Queen’s instead of contracting out
- Currently not accepting new patients
- Do not see any children
- Have to be under QI (ABD population)
- A lot of elder patients unable to afford care at other places
- Dental clinics are free at this time
- Bill Medicaid for emergency services

Question from participant about Oral Health Policy Review
- Co-Chair Wong Tomiyasu: still need to do an environmental scan before updating policy
- Opportunity to use DOH and/or SIM’s technical assistance team at CDC
- Oral health nationally seems to be seen as secondary, and part of SIM is reconnecting oral health and behavioral health to the rest of the medical field
- Very few SIM states are addressing oral health

Co-Chair Giesting started discussion regarding targets and areas of focus
- What does an optimal system for dental care look like?
- Come up with something that addresses the infrastructure
- DOH in need of a Dental Director (possibly part-time) and Program Coordinator (full time, likely a dental hygienist), clerical staff, and a part-time epidemiologist in dental
- Dan Fujii will draft items/issues for a system framework so we have an idea of what would work and what is missing to make it work
  - Currently no coordination or way to put it all together, lacking structure
  - Lack of integration with the rest of health care system
  - Two phases:
    - Phase 1: How do we address issues right now (plan for next 5 years)
    - Phase 2: will focus on integration and value based purchasing
  - Dental is currently a “cottage” industry, but is changing over time
Medical field is becoming more team-based, might be that oral health will also change.

In California, teledentistry bill passed through collective effort through a virtual dental home:
- Population was Head Start pre-schools and nursing homes
- Innovative model of having allied health dental professionals going to these communities and taking images, upload to cloud
- Trying to replicate something similar in Hawai’i
- Problem is with reimbursement once care is taken out of 4 walls of a clinic

If coverage for Medicaid adults isn’t realistic, who should be covered and for what types of services? ABD, DD, pregnant women?

Co-Chair Giesting pointed to measures identified in SIM 1 and asked committee to see if these are still useful.

Strategy for Oral Health (Dani and Dan) will be discussed next meeting.

Soares asked if HDS can provide the percentage of PMPM that goes to preventative vs. restorative (for CDC to give us TA), and for information about care coordination provided by CCCMC; HDS will check with Patti Bazin to see if they can release the CCMC data. Charge data is incomplete because FQHCs charge dental care as PPS visits without specifying the procedure. (HDS is exploring ways FQHCs can provide procedure data.)

Health Care Innovation Website:
The Hawai’i Health Care Project site (hawaiihealthcareproject.org) is no longer being maintained. A new website will be hosted on the Governor’s Office site, http://governor.hawaii.gov. Policy Analyst Trish La Chica will be managing content for the website, which will include program updates, agendas, minutes, and meeting materials, opportunities to provide feedback, and health care innovation reports and resources.

Next Meeting
The next Oral Health Committee meeting will be on July 10th at 10 am at DOH.

Adjournment
The meeting was adjourned at 10:02 am.
State Innovation Model Design 2

ORAL HEALTH COMMITTEE

JUNE 12, 2015
Welcome and Introductions

1. Dani Wong Tomiyasu, Co-Chair
2. Beth Giesting, Co-Chair
3. Mary Brogan, DOH DD Division
4. Kathy Fay, Hawaii Dental Service
5. Brendon Friedman, Hawaii Keiki
6. Dan Fujii, WCCHC

SIM Staff:
• Joy Soares
• Abby Smith
• Nora Wiseman
• Trish La Chica

7. Lynn Fujimoto, HDA President
8. Ellie Kelley-Miyashiro/Noelani Greene, HDHA
9. Deb Mattheus, UH SONDH
10. Kathy Suzuki-Kitagawa, HPCA
11. Curtis Toma, MQD
Review: 2012 - 2014

2012
- Hawaii Healthcare Project
- Learning Sessions
- Getting started
- PCMH, ACO, Care Coord.

2013
- SIM 1
- Stakeholder Consultation
- Health Summit
- Expanded discussions
- High level plan
- 6 Catalysts

2014
- SIM 2 Priorities
- ACA, NWD, APCD
- Transition
- SIM 2 Proposal
- Associated projects
- New Governor
SIM Goals

Triple Aim + 1

- Better health
- Reliably good quality care
- Cost-effective care
- + Reducing disparities in health status and access to care
SIM Initiative

SIM is based on the premise that state-led innovation, supported by broad stakeholder input and engagement, will accelerate health care delivery system transformation to provide better health and better care at a lower cost.

SIM encourages public and private sector collaboration to design and test multi-payer models to transform the health care systems in the state.
SIM2 Targets

Behavioral health integration with primary care – effective awareness, diagnosis and treatment
- Patients in primary care settings with mild to moderate behavioral health conditions
- Patients with chronic conditions in combination with behavioral health conditions

Oral health improvement via increased access to timely and preventive services
- Access for children and increase dental sealants and fluoride varnishes
- Strategies to increase coverage for low-income adults

FOCUS IS ON MEDICAID
SIM 2: Developing a Plan of Action

Oral Health

- 1999 DOH study showing worst rates of decay and unaddressed dental needs, particularly for children*
- Reliable current data on OH lacking
- Interventions:
  - Support DOH in rebuilding OH program
  - Explore value-based purchasing
  - Develop ROI analysis to prove the value of oral health services

*Hawaii State Department of Health, 2004 Hawaii Oral Health Profile, 1989 vs 1999 prevalence
## SIM 2: Developing a Plan of Action

**Health System Change Entails:**

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<thead>
<tr>
<th>Change in care delivery</th>
<th>Effective use of HIT, data</th>
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<tbody>
<tr>
<td>Value-based payment change</td>
<td>Workforce change that supports team care model</td>
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<tr>
<td>Attention to care coordination, links to support population health</td>
<td>Coordination of policy and resources needed to change</td>
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SHIP Deliverables

- Description of health care environment
- Health system design and performance objectives
- Delivery and payment innovations
- Population health plan
- Workforce plan
- Financial analysis
- Monitoring and evaluation plan
- Operational plan
SIM 2: Developing a Plan of Action

Committees

- Steering
- Delivery & Payment
- Health IT
- Work Force
- Population Health
- Oral Health
Steering Committee
Delivery & Payment Committee
HIT Committee
Workforce Committee
Oral Health Committee
Population Health Committee

SIM 2 Decision-Making Workflow

Steering Committee
Innovation Director Finalizes, Submits
State Innovation Plan

Support by Health Innovation Program Staff, Governor’s Office
SIM 2: Developing a Plan of Action

Proposed All-Committee Meetings

- SIM Strategies and Plans with Bruce Goldberg - June
- Initial SHIP Draft and Committee Check-In - September
- Structure & Sustainability Plans - November
- Final SHIP Celebration and Next Steps - January

Website:  http://governor.hawaii.gov/healthcareinnovation/sim/
SIM 2: Oral Health

Oral Health Committee

- Review of goals
- Anyone missing?
SIM 2: Oral Health

Oral Health Committee

- What can we accomplish?
  - Current DOH activities (Dani)
  - Potential areas of focus for SIM (Beth)
SIM 2: Oral Health

- Review of measures from 2013

Healthy People 2020
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SIM 2: Oral Health

Oral Health Committee

- Next steps

- Next meeting: July 10