Welcome and Introductions: Beth Giesting called the meeting to order. Members introduced themselves for the benefit of those on the phone. Giesting noted that this meeting is intended to be the last for the State Innovation Models (SIM) process.

Review of Minutes: Minutes were approved with no revisions.

Updates

Adult dental benefits:
  - It was reported that key legislators would prefer to request restoration of benefits for all adults covered by Medicaid and that it will be important that the Administration supports the initiative.
The last time adult benefits were covered (2009) the cost was about $4.5 million in state funds. Most likely the program would cost now because of the increase in enrollment and the expected pent up demand.

There is no official ROI at this point but arguments should include the connection to medical necessity as well as the increased incidence of ER utilization for dental conditions among Medicaid-covered adults.

Fees haven’t been raised since full benefits were covered, which impede access since the fees don’t even cover the cost of some supplies and labs.

**DOH Updates:**

**3rd Grade Surveys:**
- Completed 3rd grade oral health basic screening survey (67 schools, over 3,000 children, both commercial and Medicaid covered). Hope to have report out by the end of the year.
- Will be able to show county level data rather than just state level data. A lot variation among schools. Able to link child with free and reduced school lunch program so can correlate with income level.
- A lot of children going in for treatment rather than preventive services
- Dental sealant rate is actually higher than expected (around 30 something percent)
- Will be able to submit to CDC’s national surveillance system
- Survey will need to be done every 3-5 years

**Dental Director:**
- Completed interviews for dental director, which is part-time position. Will also recruit a full-time coordinator.

**Sealant Program:**
- Starting at West Hawai‘i CHC with 3 elementary schools. Still coordinating with schools but expect to start in January or February. Will be assessing costs and strategies to make program sustainable. HDS is currently funding this program. Considering best approach to parental consent for dental and other school-based health services.
- On a parallel track, Lanai CHC is working on a school-based dental program to open around mid-December

**Other updates:**

**Lynn Fujimoto:**
- Working with Maui College to create a path for CHW curriculum with special focus on patient/family oral education and coordinating care. Will earn ADA-approved CDHC (community dental health coordinator) certificate
- Pediatric residency program still going well. At 5 FQHCs on 4 islands with 10 residents – 5 first year and 5 second year.

**Deb Mattheus:**
- Due to lack of awareness about importance of oral health care during pregnancy, SON is working on a project (funded by HDS) to provide education and links to dental homes for pregnant women and mothers in WIC. Looking at oral health beliefs and behaviors and tracking if that changes with education. Also looking at barriers to getting dental care. Working with DOH to identify two sites in Oahu, currently working in Kona. Will see if there is any change in dentists who are treating pregnant women

**Andrew Tseu:**
Hawaii Health Care Innovation Models Project  
Oral Health Committee Meeting  
October 23, 2015

- Pilot project with teledentistry being planned with West HI CHC. Looking for funding.
- Training family/care givers for people with IDD to help them understand oral health needs. Training OH professionals on common dental issues for people with IDD and how best to serve them. Meeting FQHCs and county dental societies. (DOH does not have the ability to pay for dental care for adults with IDD.
- DOH has an oral surgeon on board who works at Queen’s and wants to work with Kona. Possibility to decrease patients being transported to Oahu.

Maureen:
- New study from Japan shows that second hand smoke increases dental carries in children. Abby will forward article to group

Curtis Toma:
- On 416 reports, which captures claims-based data, the sealant rate is in the single digits. It is notable that there is such a disparity between the 416 report and survey data.
- Adult Micronesian residents from the nations under the Compacts of Free Association can get medical coverage through the Connector but such coverage doesn’t include dental care, which is less than the emergency care covered by Medicaid.

Oral health draft report corrections and recommendations:
- Pediatricians get paid same low fee that dentists get for fluoride varnishes ($4 compared to about $20 nationally). Increasing the rate requires legislative action. While the budget for this would be small encouraging increased fluoride varnishes could have a big impact.
- No specific information in initial draft on pregnant women in adult section. Abby will add it (page 8).
- Reimbursement rates aren’t the only factors that keep private dentists from seeing Medicaid patients. No shows and the inability to charge for such missed appointments is also a big factor. Not only are the reimbursement fees low but dentists have to pay GE tax.
- Disparities in Native Hawaiians and Pacific Islanders (PRAMS data). Should be available in a month or two.
- Continue to send any edits to Abby or Beth (final report due January 31st)

Continuation of Oral Health Work:
- The OH Committee is such a vibrant and committed group and there’s so much going on it would be great to continue to convene. When the new DOH dental director is hired, he/she could take lead.
- The Hawaii Island Oral Health Task Force should also be consulted to see how it might benefit or contribute to such convenings. Could be useful to have at least 1 annual meeting of HIOHTF to share news about programs and progress across the state.
- While SIM OH work is essentially finished, SIM staff will convene another meeting in December so that all members can catch up with developments, especially pertaining to Medicaid dental benefits.

Adjournment at 9:30 am