

**NOVA Oral Health Subcommittee on Adults**  
**Thursday, June 22, 2017, 2:00 pm – 4:00 pm**  
**Arlington Free Clinic**

**Participants**

Marian Harmon, Marymount University Nursing Program	Betty Peebles, JCB Foundation
Cheryl Johnson, The Arc of NOVA	Carmen Regan, Northern Virginia Dental Clinic
Jody Kelly, Arlington Free Clinic	Tricia Rodgers, Northern Virginia Health Foundation
Allen Lomax, Partnership for Healthier Alexandria	Lesby Zavala, NVFS
Ondrea McIntyre-Hall, Northern Virginia Family Service	Lauren Gray, Virginia Oral Health Coalition

**Action Items**

- Contact Senators Kaine & Warner to thank them for opposing the Senate healthcare bill, and share [VaOHC's action alert](#) with colleagues, friends, and family – especially in states with Senators who are on the fence.
- Edit the work plan in Google Drive [here](#) by Friday, July 7 at 5 pm – in particular, consider more concrete strategies necessary to meet our primary objectives. Instructions on how to edit the document are highlighted at the top.
- At next subcommittee meeting, all members will be prepared to discuss specific objectives they want to tackle and assign immediate action steps (so be thinking about that while you comment on the work plan!).
- Lauren will research innovative initiatives from other states to improve access to oral health care for older adults and individuals with special health care needs (ISHCN).
- Review the following online resources:
  - Betty Peebles identified Health Drive, a Massachusetts-based company that provides dental and medical care to LTC residents: <http://www.healthdrive.com/> (unclear from their website where they operate in VA)
  - US Department of Health and Human Services, Administration for Community Living, and Office on Women's Health – Oral Health for Older Adults Website (<https://oralhealth.acl.gov/>)
  - Tooth Wisdom – Health Resources for Older Adults (<http://www.toothwisdom.org/>)
  - VA DBHDS Fixed Rate Dental Pilot Program ([website](#)).

**Upcoming Meetings**

- Full Steering Committee: Wednesday, July 12, 10 am – 12 pm at Northern Virginia Family Service in Oakton
- Subcommittee on Adults: Wednesday, August 23, 2 pm – 4 pm at Northern Virginia Dental Clinic

**Notes**

*Policy Update – Senate Health Care Bill*

- Sarah Bedard Holland (VaOHC) conferenced in to the meeting to provide an update on the newly released Republican Senate bill to replace the Affordable Care Act
- Main takeaways:
  - The Senate bill is very similar to the House’s American Health Care Act bill.
  - No CBO analysis yet; expected early next week – that will give a better idea of the fiscal impact of the bill, including how many millions of Americans will lose coverage; likely to be at least as bad as the AHCA, which projects coverage loss for 23 million Americans.
  - New legislation would allow insurers to charge older adults five times more than younger people; under the ACA, it’s three times more.
  - The bill would establish a per capita cap funding structure for Medicaid and remove the mandate to provide essential health benefits. This would have a disproportionate negative effect for the aged, blind, and disabled.
- All Subcommittee members were encouraged to contact Senators Kaine & Warner to thank them for opposing the bill, as well as to ask contacts in states with on-the-fence Republicans to vote “no.”
- VaOHC emailed out an [action alert](#) with specific details about what Steering Committee & Subcommittee members could do.

*Work Plan Draft for Subcommittee on Adults*

- Together, Subcommittee members reviewed the following documents to help guide their work plan development:
  - The [priorities and strategies identified at the NOVA Oral Health Forum](#) by participants serving adults across various populations (uninsured/under-insured, older adults, and ISHCN); and
  - The [workgroup structure](#) agreed to by the full steering committee in April.
  - The [Subcommittee on Children work plan draft](#)
- The Subcommittee on Adults members identified several key priorities and formulated objectives and strategies to meet those objectives. The [draft work plan is available online](#).
- Key discussion points:
  - Subcommittee operations – Narrow focus to just one subset of the “adult” population, or broaden to focus on multiple subsets?
    - Consensus: Remain broad for now, but identify specific objectives for certain target populations: underinsured/uninsured adults (working poor); older adults; and adults with disabilities.
    - Consensus: Identify champions for each objective and target population.
  - Specific population considerations:
    - For adults with disabilities, the Department of Behavioral Health and Developmental Services (DBHDS) has already stepped up to the plate with their fixed rate dental pilot program (see [website](#), under “Health Support Network” near the bottom of the page). There may be opportunity to leverage the relationships already created via that program to improve access.
    - Subcommittee needs a better understanding of the models that already exist and have proven successful in other areas to improve access to dental care for

older adults in particular – Lauren agreed to do some research and bring back to the group.

- Connections that need to be made:
  - To identify the scope of the need for dental care among older adults residing in LTC facilities or isolated in the community, need to reach out to AAAs, LTC facility leadership, and groups that serve older adults.
    - Betty Peebles – list of LTC facilities; mentioned that she heard of Medicaid covering dental care for LTC residents.
    - Tom Fonseca – contacts with aging/older adult service providers? NVAN?
    - Local health departments may be interested in helping to collect data on oral health access and need among these groups.
    - Faith-based groups
  - Marian - Culpeper Garden independent living facility where students provide care; Neighborhood Health looking at expanding mobile unit services to LTC facilities.
  - Does Medicaid pay for dental care for LTC residents? Betty will research company that provides dental care to LTC residents in Alexandria.
    - When you're in LTC, only required to keep \$40-50 of your resources
    - No dental benefit in Medicaid or Medicare – unclear how the company would get reimbursed for it
    - Betty was pretty certain that they were covering three visits a year for the NF residents
- Legislative advocacy at the local and state levels is important to advance this work
  - Local level – meet with Boards of Supervisors, City Councils, etc.
  - State level – advocate for protection of existing benefits. Note: VaOHC operates a legislative committee; if you are interested, please read about it [here](#). An application is required.

### *Partner Updates*

#### Northern Virginia Family Service

- Prince William program for individuals 18+ without insurance to get ~\$300 toward dental check-ups and treatment plans
- Direct assistance funding is now used up, but program can still connect people to care

#### Arlington Free Clinic

- Moving dental suite on site
- Jody Kelly would like advice from other safety net folks on how best to do it
- Limited to three 8-hour days and Saturday mornings
- Looking at expanding to serve a larger population (higher income threshold)

*Adjourn at 4:00 pm*