

**Greater Richmond and Petersburg Oral Health Alliance
Grassroots Advocacy Workgroup
Coalition Offices
Monday, April 23, 2018**

Participants

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Summary

Introduction

- This workgroup has spent the last several months developing ideas about how to advocate for better oral health in the region, ranging from using social media to producing infographics, etc.
- Throughout the process, we grappled with different definitions of “advocacy,” and who the target audience is for our efforts.
- The Coalition received some feedback from Alliance participants that they would like the Coalition staff to provide more concrete direction for our advocacy efforts given that
 - The Coalition has the technical expertise on this topic,
 - The Coalition is already doing legislative advocacy at the state level on issues such as adult dental coverage in Medicaid, and
 - Legislative issues at the state level have effects at the local and regional levels as well.
- To that end, Lauren & Sarah decided to provide a summary of the Coalition’s current legislative priorities and have a discussion about some concrete ways this workgroup (and the broader Alliance) can support those efforts.

Legislative Update – Sarah Holland

Three things have happened since the end of the 2018 General Assembly session:

1. Medicaid Expansion
 - a. The session ended without a budget (the House and Senate could not agree on the budget due to the issue of Medicaid expansion). Therefore, Governor Northam called for the convening of a special session on April 11 to bring the legislature back together to decide on the budget.
 - b. The House budget includes expansion with work requirements, draws down federal funds, and includes an assessment on hospitals to help fund the expansion.
 - c. The House budget, if adopted, would 1) institute a Virginia State Plan Amendment to immediately change Medicaid’s eligibility criteria to include the expansion population; and 2) would mandate that the state Medicaid agency (DMAS) apply for an 1115 waiver from the Centers for Medicare and Medicaid Services (CMS) to institute the work requirements.

- d. The Senate has not produced a budget or voted on the House budget – they recently announced they will convene on May 14th and move the budget into the senate finance committee at that time.
 - e. There will likely be a budget by June 30 to avoid government shut down, but a shut-down seems unlikely. Right now, it seems likely that the budget will include Medicaid expansion.
 - f. Expansion would not include an adult dental benefit, but the extraction-only benefit that currently exists would be given to the expansion population
 - g. The work requirements have a lot of exemptions (like for volunteerism), so only a small percentage of the expansion population would be affected. However, consumer advocacy groups (and the Governor who is opposed to work requirements) are watching closely to ensure that this doesn't pose another barrier to those seeking care. The details of the work requirements will be specified in the 1115 waiver – not the state budget. However, the idea that is currently being proposed is a 90-day lock-out for failing to meet the work requirement.
 - h. If an adult is locked out of Medicaid for failing to meet the work requirement, it would not affect their children's eligibility or enrollment. There is very limited language about the requirement in the house budget, details will need to be worked out as part of the waiver.
2. Adult Dental Benefits in Medicaid
- a. The budget amendment that added a dental benefit for adults with Medicaid (sponsored by Sen. Barker and Del. Sickles) did not make it into conference committee for a vote, but it was discussed on the floor of both the House and Senate money committees.
 - b. Overall this is still a win! The goal was to let them know why we need it and to remind them that there is not a dental benefit currently. While it may have not made it into the final budget, the fact that the amendment was discussed in both chambers' money committees is a really big deal. Not all budget bills even make it to the floor for discussion.
 - c. There was broad acknowledgement from both chambers about the need for the adult dental benefit, but the question that kept resurfacing was: *"How does it get paid for?"* There is a fixed amount of money in the budget and the \$15 million would need to come from somewhere.
 - d. The Coalition is looking into different options for financing the adult dental benefit in Medicaid, including what other states have done with TANF dollars.
 - e. Regardless of whether or not Medicaid expansion passes this year, adult dental in Medicaid will remain the Coalition's top legislative priority for 2018-2019. We will build upon this year's successes and amplify through more grassroots engagement with legislators in the months leading up to the 2019 session.
3. Community Health Workers Certification
- a. The CHW Association worked on legislation to establish a certification process for CHWs, which would have established core educational/experience requirements. The legislation did not pass. However, there are plans to re-introduce it next year.
 - b. The certification process would
 - i. Establish a baseline of educational and experiential requirements for someone to earn the title of "community health worker" – currently none exists and there is a lot of inconsistency
 - ii. Lay the groundwork for future Medicaid reimbursement for CHW services

- c. The legislation did not pass because there was some confusion around which agency would own the certification process. The legislature told the CHW association to go back to speak with the Dept. of Health Professions and resubmit next year.
- d. The Coalition is serving on an advisory committee which is shaping the educational requirements – oral health was not in the original curriculum requirements, but we are trying to ensure that it is going forward.
- e. Having a more formalized process for certifying CHWs could help provide additional supports in the community for care navigation, cultural competency, and patient education.

Legislative Priorities Going Forward

- *Medicaid Expansion is our #1 priority* and if it is approved, the Coalition will be focused on ensuring that the rollout includes information on all of the benefits that are included.
- We will also be sure to focus on adding a dental benefit to Medicaid and educating why this benefit is needed going forward.

Additional Dental Coverage Updates

- Now all aged, blind and disabled (ABD) adults over age 21 who are enrolled in Medicaid are included in managed care (CCC+) (270,000 people – almost half of adult beneficiaries). Previously their care was delivered under a fee-for-service model without care coordination. The CCC+ program was originally a demonstration program only for dually-eligible older adults in Medicare and Medicaid. Now, there are six MCOs which are contracted with DMAS to deliver medical, behavioral health, and other services (including existing extraction benefit + value-add dental benefits; different for each MCO) for all the ABD individuals in Medicaid, not just dual-eligibles.
- Each of the six MCO value-add dental benefits have different coverage for x-rays, cleanings, and annual caps. [Click to see a comparison chart of each plan's services.](#)
- There is a lot of misinformation out there about these new programs and clarification needed; providers may be confused about who to bill now.

Tweetstorm Reminder

- Oral Health Equity Tweetstorm is from 2:00 pm – 3:00 pm today (4/23/18) celebrating National Minority Health Month. Join in with VaOHC in sharing facts about oral health disparities and solutions that can close those inequities by using #NMHM18 and #oralhealth!

Group Discussion: In-District Constituent Visits to Advocate for an Adult Dental Benefit in Medicaid

- The time to start supporting legislative priorities is months ahead of the General Assembly session; that was not something we did in a cohesive way last year. Mobilizing support for an adult dental benefit in Medicaid by constituent visits while legislators are in their home districts this summer would have a great impact.
- The workgroup indicated that they would like to help but are unsure how to start.
- The Coalition could pull together content to use- One pagers, talking points, assisting in framing the messages to legislators. The Coalition could also hop on the phone to prep folks prior to visits.
- The Coalition would need the Alliance members to
 - Identify people who are willing to communicate the issue to their legislator from their community networks

- Identify who the legislators are for those individuals using their address (street, city, state, zip: <http://whosmy.viriniageneralassembly.gov/>)
- Set up home office visits with those legislators (the Coalition can provide step-by-step guide on how to do this)
- Once appointment times are finalized, send to Coalition staff well ahead of time so Lauren & Sarah can put together materials for you and, if needed, schedule preparatory phone calls to make sure everyone feels ready for the visit.
- Sarah pointed out that it is just the task of going to them with this information and letting them know this is what we need.
 - An office visit from two people is HUGE. A visit from a constituent enhances the effect of our advocacy efforts when we go to the General Assembly.
 - We want to remain truthful with the information without coming across as overly scripted.
 - The group seems to collectively understand the importance and have determined some initial steps to make this happen. Some will be setting up appointments within their network to see who else may be interested while others need to pass this through other people before proceeding.
- The Alliance members wanted to know if the website showing the areas the Senators and Legislators are located will show their opinion/stance on Medicaid expansion.
 - Sarah let them know we will be able to give this information.
- The Coalition can provide the information to bring to legislators, but there will be no extensive training on what to say. We want to remain as a truthful yet informative hybrid.

Action Items by Next Meeting (May 21)

- Identify people who are willing to communicate the issue to their legislator from their community networks
- Identify who the legislators are for those individuals using their address (street, city, state, zip: <http://whosmy.viriniageneralassembly.gov/>)
- Set up home office visits with those legislators (the Coalition can provide step-by-step guide on how to do this)
- Once appointment times are finalized, send to Coalition staff well ahead of time so Lauren & Sarah can put together materials for you and, if needed, schedule preparatory phone calls to make sure everyone feels ready for the visit.

Upcoming Meetings

- Monday, May 21, 2:00 pm – 3:00 pm | BlueJeans Video Conference
To join the Meeting:
<https://bluejeans.com/524955805>
To join via phone:
1) Dial 408.740.7256
2) Enter Conference ID: 524955805
- Tuesday, May 22, 1:00 pm – 4:00 pm | Greater Richmond and Petersburg Oral Health Alliance Meeting | The Cameron Foundation, Petersburg VA | Register by May 18:
<http://bit.ly/PetersburgMay22>