



**RI Health Care System Planning - Oral Health Care
Workgroup Meeting #2: Discussion and Prioritization
of Recommendations**

October 25, 2024

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Welcome and Meeting Goals



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Agenda / Primary Meeting Goals

1. Welcome and Meeting Goals
2. Reminders about Workgroup Purpose and Process
3. Follow-up from October 2, 2024, Meeting and Review Minutes
4. Discussion and Prioritization of Recommendations
5. Discuss Possible Areas of Overlap, Collaboration, and Collective Action
6. Review Next Steps
7. Public Comment

Reminders about Workgroup Purpose and Process

Purpose and Goals of RI Health Care System Planning Initiative

Overarching Goal: High-quality, affordable, equitable, accessible, culturally and linguistically appropriate health care system

The HCSP will be developed through a comprehensive planning process that:

- Applies quality data for actionable health care policy, oversight, and accountability
- Engages a broad and inclusive group of stakeholders, including residents/health care consumers
- Coordinates with other health and human service systems to ensure continuity of care, supportive service delivery and basic needs
- Aligns current and future needs
- Is overseen by the Health Care System Planning Cabinet with the support and cooperation of all departments, offices, boards and agencies

Health Care System Planning Goals

- Ensure **solvency** of the health care system
- Foster an **integrated delivery system that coordinates care** across the health care continuum focused on population health, care transitions, and patient-centered care
- Ensure **access to affordable, quality, easy to navigate, and comprehensive care**
- Ensure **health equity and reduce disparities** in access and outcomes
- Incentivize **investments in system transformation** to promote innovation
- Strengthen **preventive, and primary physical & behavioral health services** to maintain appropriate utilization & promote efficiencies
- Invest in efforts to address the **social factors that impact health**
- Establish state infrastructure to **oversee health system performance**, improvement, and equity, as well as promote transparency

Health Care System Plan Report Structure and Content

Purpose and Content of December Report

The Rhode Island Health Care System Plan Report will:

- Clarify the State's health system strengthening framework
- Provide a preliminary assessment of the current capacity, strength, and future needs of the State's health care system by sector and a series of cross-cutting structures
- Identify and explore enhancements to the state structures, policies, and other levers that will facilitate implementation and support health system strengthening efforts
- Identify and prioritize the assessment's key findings and an associated set of emerging recommendations or strategic opportunities
- Develop an action-oriented Health Care System Plan Report that details the purpose of the plan, the process applied to develop it, key findings, and short-term and long-term action steps to address the issues identified

Primary Care Workgroup Charge

- **Workgroup Charge:**

- Provide critical input regarding the Primary Care Sector's strengths, services gaps, challenges, and strategic opportunities to enhance access, quality, equity, and performance

- **Scope of Recommendations:**

- Develop actionable recommendations (both short and long-term) for how state agencies (e.g., OHIC, EOHHS, RIDOH) and stakeholder organizations can collaborate to advance primary care.
- Recommendations may include a) application of state policy tools and b) multi-party action with shared accountability.

Addressing Oral Health

- As a reminder, EOHHS is convening a separate **Oral Health Workgroup** to focus on issues specific to dental services or treatments and care delivered by dental professionals, including integration of oral health and primary medical health.
- This Primary Care Workgroup will discuss recommendations from the Oral Health Workgroup before their inclusion in the December report.

Oral Health Workgroup Meeting Schedule

Workgroup Meeting #1 [complete]: Review and Discussion of National and State Landscapes

- **Objective:** Review and discuss the strength of the State's oral health/dental care system. Identify market, fiscal, regulatory, operational, strategic assets, strengths, and challenges impacting primary care.

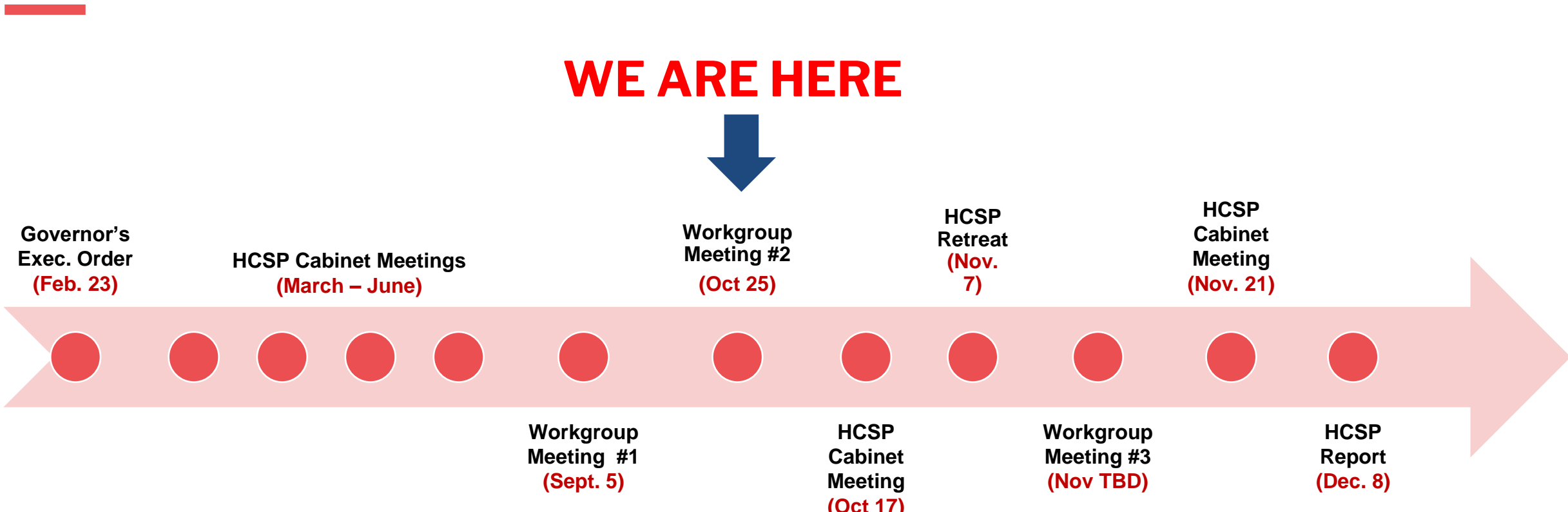
Workgroup Meeting #2 [today]: Discussion and Prioritization of Recommendations

- **Objective:** Review, discuss, and prioritize emerging recommendations to leverage identified strengths and/or address challenges.

Workgroup Meeting #3: Final Recommendations on Key Findings and Strategic Opportunities

- **Objective:** Review feedback from HCSP Retreat and finalize workgroup recommendations.

Rhode Island HCSP Initiative Timeline



Follow-up from October 2nd Meeting



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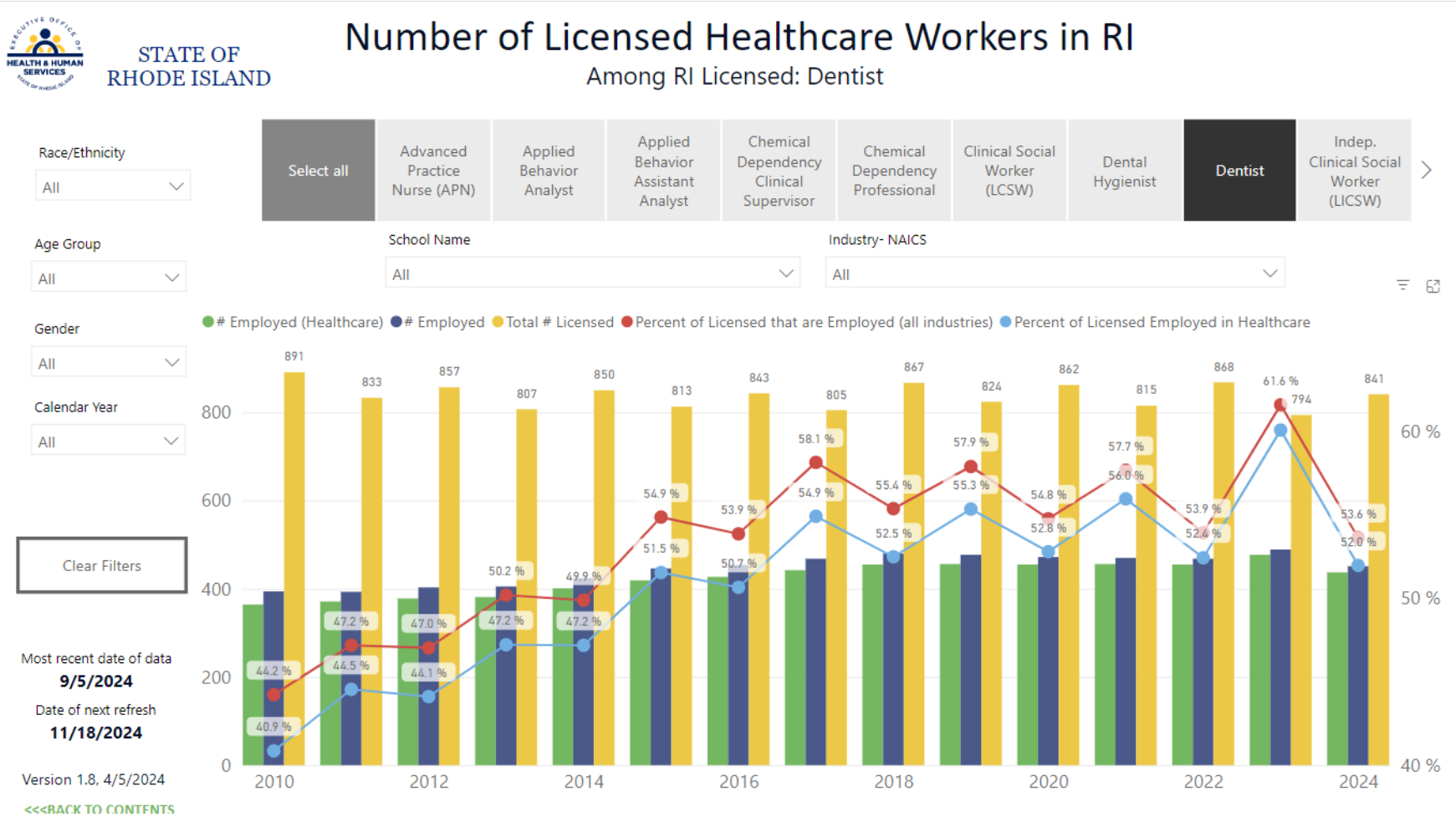
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Topics of interest

- Data
 - Several organizations, including RIDOH, EOHHS, insurers, and RIDA, capture data, but it is not a unified effort.
 - How to best measure integration
- Equity
 - RIDOH data shows disparities in the use of services and outcomes based on race/ethnicity, zip code, disability, chronic condition
- Shortage of workers and students
 - Data suggest a lower dentist-to-population ratio than in neighboring states and nationally
 - The lack of a dental school impacts recruitment and public health dentistry
 - CCRI Hygiene dental programs spots are limited due to physical space
 - Reduction in students in the DA program at CCRI
- Career pathways

Discrepancies in total dentist number

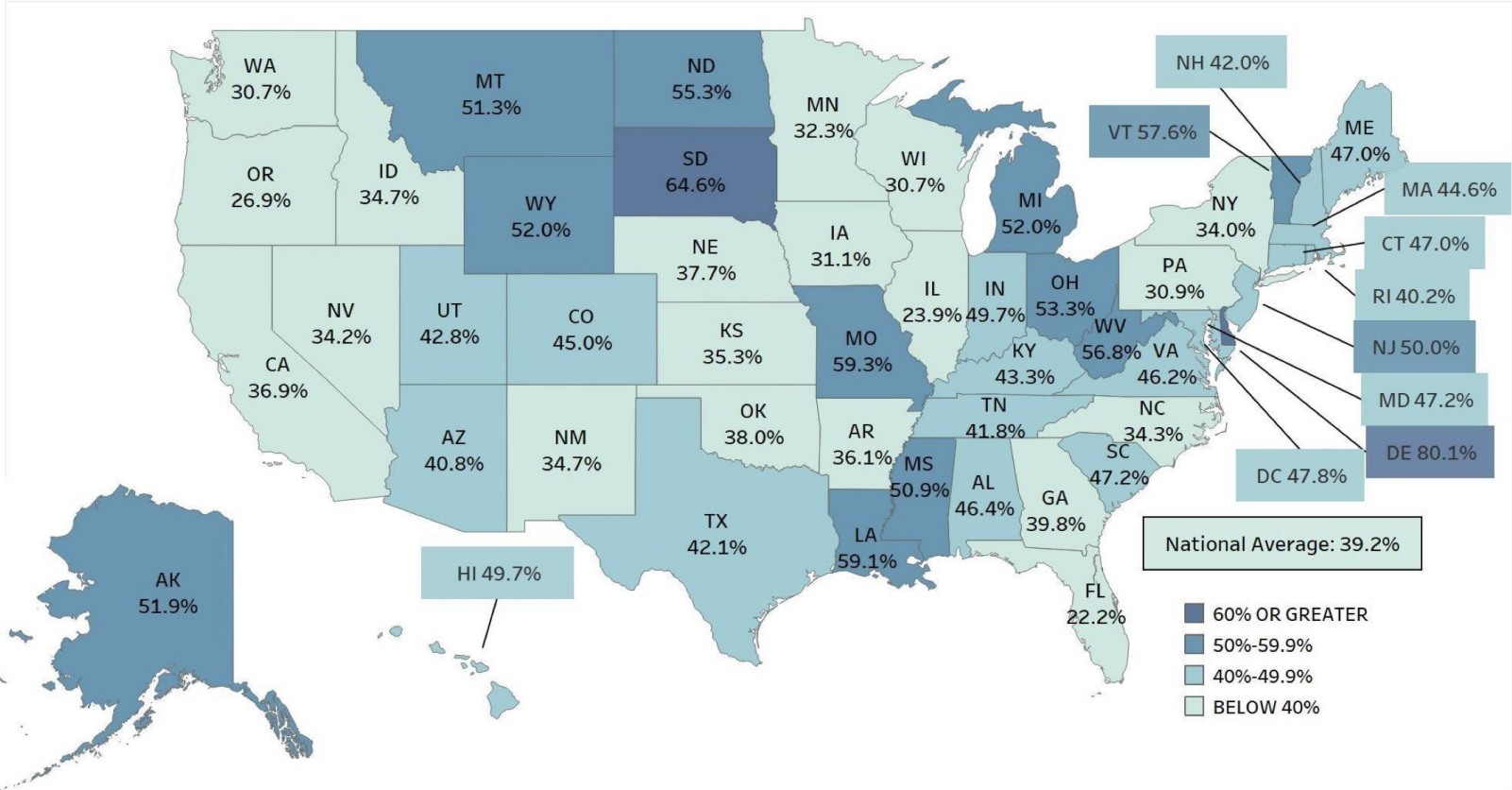
These are likely based on renewal periods, maintenance of license by those not practicing, and when data is captured. Example is EOHHS data which lists 841 licensed dentists in 2024, yet as of 10/22/24, 705 are licensed and 605 practice in RI.



Medicaid reimbursement-Children

American Dental Association Health Policy Institute reports Rhode Island Medicaid reimbursement for children is 40.2% of commercial in 2024.

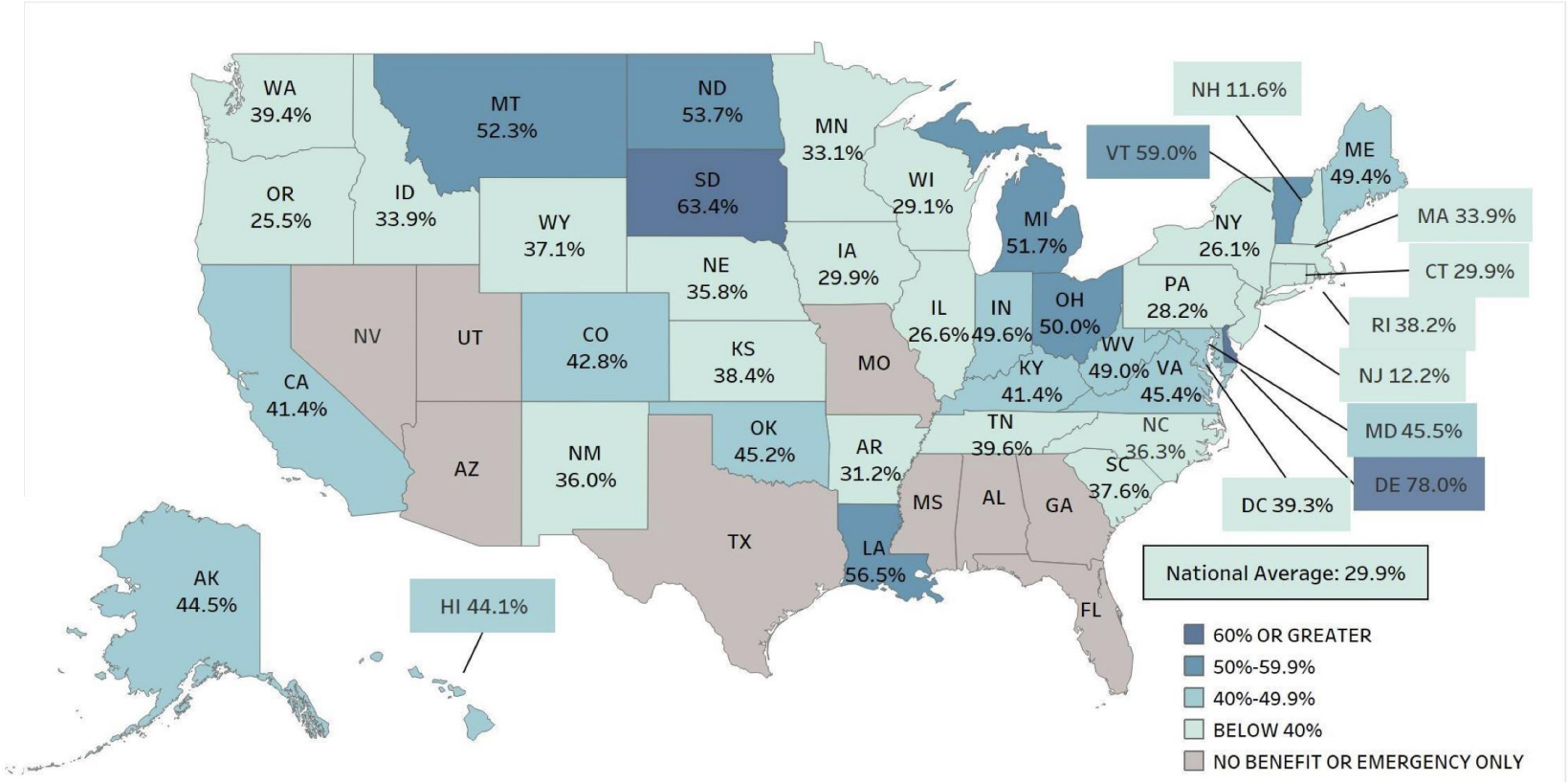
Medicaid FFS Reimbursement as a Percent of Average Dentist Charges, Child Dental Services, 2024



Medicaid reimbursement-Adult

American Dental Association Health Policy Institute reports Rhode Island Medicaid reimbursement for adults is 38.2% of commercial in 2024.

Medicaid FFS Reimbursement as a Percent of Average Dentist Charges, Adult Dental Services, 2024



Discussion and Prioritization of Recommendations



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Discussion and Prioritization of Recommendations (1 of 3)

- **Goal:** Today we will be discussing and prioritizing recommendations to address the most pressing oral health/dental care challenges in Rhode Island.
- **Sources for Recommendations:** The draft recommendations were informed by our first work group meeting, prior State Plans and Dental Workforce Strategic Plan and recommendations, and Work Group co-chair input.
- **Scope of Recommendations:** The goal for the December HCSP report is to identify high-level priorities. There will be an opportunity to think about more detailed implementation strategy details after the December HCSP report is published.

Definitions & Terms

For the purpose of the OH Workgroup recommendations please note the following;

- **Dental care** refers to when a dental service/oral health care is provided by a dental health professional.
- **Oral health care** refers to oral health care provided by a non-dental professional.
- **Oral health care system** is an umbrella term for both dental services and oral health care delivery.

Discussion and Prioritization of Recommendations (2 of 3)

- **Based on the national and state scan, we have identified the following goals and organized the recommendations beneath the goal they seek to advance:**
 - 1. Dental Care Practice Support/Workforce Retention:** Improve the retention of our current oral health/dental care providers by improving their current work experience.
 - 2. Payment and Investment:** Pay for oral health/dental care services in a manner that a) supports the practice of high-quality oral health/dental care and b) attracts and retains oral health/dental care clinicians to practice in Rhode Island.
 - 3. Workforce Recruitment:** Increase the number of people choosing to work in oral health/dental care.
 - 4. Accountability:** Improve data collection, analysis, and reporting to support evaluation and monitoring of intervention impact.

Opportunities for Cross-Sector Collaboration

- For each recommendation, we will briefly discuss whether there is any overlap with any of the other HCSP Cabinet Sector Workgroups:
 1. Behavioral health
 2. Hospital
 3. Long-term care and health aging services
 4. Health-related social needs services

Recommendations (1 of 14)

Dental Care Practice Support/ Workforce Retention: Improve the retention of our current dental professionals by improving their current work experience.

Recommendation

- Increase the efficiency of administrative processes and protocols to reduce professional burnout.

Example Activities:

- Streamline pre-authorization system for procedures.
- Survey dental professionals to analyze the time it takes to complete current administrative measures to set a baseline.
 - Analyze the efficacy and efficiencies of existing processes and protocols, such as reviewing current administrative measures for consolidation or removal.
- Align administrative credentialing and other administrative agency forms and processes with ADA to reduce administrative burden
- Explore opportunities (e.g., incentives, training, funding) to increase digital record-keeping for dental professionals.

Discuss Cross-Sector Collaboration:

(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (2 of 14)

Dental Care Practice Support/ Workforce Retention: Improve the retention of our current dental professionals by improving their current work experience.

Recommendation

- Increase satisfaction in salary and benefits among dental professionals as relates to livability in Rhode Island

Example Activities:

- Compare current rates of pay and benefits packages for dental professions to national and regional averages to establish a baseline, along with a survey of satisfaction with pay and benefits.
- Explore opportunities to increase compensation and benefits that are competitive, fair, and equitable for dental professionals.
- Monitor retention rates regularly

Discuss Cross-Sector Collaboration:

- (1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (3 of 14)

Dental Care Practice Support/Workforce Retention: Improve the retention of our current dental care providers by improving their current work experience.

Recommendation:	<u>Reduce the health education debt of dental care providers.</u>
Example Activities:	<ul style="list-style-type: none">• Invest state funds in the RI Health Professional Loan Repayment Program.• Coordinate and facilitate access to information about and support in applying for state and federal scholarships, loan forgiveness, and loan repayment programs.
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (4 of 14)

Dental Care Practice Support/Workforce Retention: Improve the retention of our current dental care providers by improving their current work experience.

Recommendation:	<u>Explore how to use health information technology to facilitate the provision of high-quality dental care</u>
Example Activities:	<ul style="list-style-type: none">• Improve digital health information exchange• Explore the expansion of e-consults• Facilitate and expand the use of telehealth/teledentistry• Explore opportunities (e.g., incentives, training, funding) to increase digital record keeping for dental professionals.
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (5 of 14)

Payment and Investment: Pay for dental care services in a manner that a) supports the practice of high-quality dental care and b) attracts and retains dental health professionals to practice in Rhode Island.

Recommendation:	<u>Dental reimbursement rates should support the costs of providing care</u> <u>Dental reimbursement rates should be sufficient relative to neighboring states so as not to encourage movement across borders.</u>
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Example Activities:	Review reimbursement rates using FAIR Health Review dental insurance premiums Review costs of providing dental care
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	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services
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Recommendations (6 of 14)

Payment and Investment: Pay for dental services in a manner that a) supports the practice of high-quality dental care and b) attracts and retains dental clinicians to practice in Rhode Island.

Recommendation:	<u>Accelerate the provision of prospective payment opportunities for dental care practices</u>
Example Activities:	<ul style="list-style-type: none">• Establish payment options that are a hybrid or fee-for-service and prospective capitation• Reward improving oral health over simply paying for and procedures that may not be evidence-based
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (7 of 14)

Payment and Investment: Pay for oral health/dental care services in a manner that supports the practice of high-quality integrated oral health care

Recommendation:	<u>Investment in oral health integration in primary and behavioral health care settings.</u>
Example Activities:	<ul style="list-style-type: none">• Support oral health integration in primary medical and behavioral health care settings and bridge to dental services• Support programs to assess and address health-related social needs (e.g., social and human services programs, community health workers)
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (8 of 14)

Payment, Investment and Regulation: Assure robust participation in Medicaid dental programs by practices across the state in both private practices and health centers.

Recommendation: Review payment structure to assure it covers costs of care.
Develop policies that remove barriers and increase access.
Provide training to increase awareness of populations seeking care and decrease stigma.

- Example Activities:**
- Rate reviews
 - Collaborative quality improvement programs
 - Training in social determinants of health

Discuss Opportunities for Cross-Sector Collaboration: (1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (9 of 14)

Workforce Recruitment: Increase young people going into dental careers

Recommendation:

High school programs that introduce dental careers
Partnerships with pre-dental programs at local schools
Consider innovative workforce approaches

Example Activities:

- Educate and mentor potential oral health clinicians to help them succeed in oral health care environments.

Discuss Opportunities for Cross-Sector Collaboration:

(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (10 of 14)

Workforce Recruitment: Increase the number of people choosing to work in a dental health care professional field.

Recommendation:	Develop a statewide Dental Recruitment and Retention Program that coordinates the identification, recruitment, training, and support of individuals committed to dental careers in Rhode Island.
Example Activities:	<ul style="list-style-type: none">• Identify how Graduate Medical Education can target dental care• Increase resident opportunities• Emphasize recruitment of people from underrepresented in medicine (URiM) group• Establish a “Work in RI” marketing campaign focused on graduating dental students, dental hygiene students, and residents.
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (11 of 14)

Workforce Recruitment: Increase the number of people choosing to work in a dental health care professional field.

Recommendation:	<u>Establish and coordinate dental training in institutions of higher education</u>
Example Activities:	<ul style="list-style-type: none">• Consider a dental school in RI, either associated with Brown or University of Rhode Island• Consider additional dental residencies in hospitals and health centers associated with medical training programs, to support interprofessional education and practice• Promote dental staff, including public health dental hygienists in interprofessional settings
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (12 of 14)

Workforce Recruitment: Increase the number of people choosing to work in a dental health care professional field.

Recommendation:	<u>Explore alternative models to increase diversity of dental professionals</u>
Example Activities:	Review opportunities to advance dental health care professional education and licensing pathways <ul style="list-style-type: none">• Foreign-trained dentists, dental therapists and advanced-practice advanced practice dental hygienists
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (13 of 14)

Accountability: Improve data collection, analysis, and reporting to support evaluation and monitoring of intervention impact.

Recommendation:	<u>Collect, analyze, monitor, and report on data points that describe the state of Rhode Island's oral health/dental care system</u>
Example Activities:	<ul style="list-style-type: none">• Establish and publicize a Dental Health Care System Dashboard that tracks:<ul style="list-style-type: none">• Current workforce (e.g., number of current dental providers, level of clinical activity, size of patient panels)• Future workforce (e.g., number of trainees graduating from a RI institution of higher education)• Patient experience (e.g., adults with access to usual source of care)
Discuss Opportunities for Cross-Sector Collaboration:	(1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Recommendations (14 of 14)

Accountability: Improve data collection, analysis, and reporting to support evaluation and monitoring of intervention impact.

Recommendation: Conduct targeted oral health/dental care research required to inform the design of future policy
Provide state support for RI Oral Health Coalition to play a role in data collection

Example Activities:

- Analyze the impact of under-investment in dental care and the connection to higher hospitalizations, ED visits and urgent care visits
- How lifestyle has changed for dental clinicians
- State-supported coalition – either executive branch or legislature
- Purpose would be to ensure the state remains focused on oral health care (could be a continuation of this work group)
- Bring together voices of all coalition for consistent data

Discuss Opportunities for Cross-Sector Collaboration: (1) Behavioral health, (2) hospital, (3) long-term care and health aging services, (4) health-related social needs services

Discuss Cross-Cutting Structures and Systems



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Health Care System Planning

Five Sectors- Oral health connects with all of these.

- Behavioral Health Services
 - BH conditions often associated with adverse oral health due to medications
 - Oral health impacts self-esteem
- Health-Related Social Needs
 - Housing, nutrition, safe neighborhoods all connect with oral health
- Hospitals
 - Use of Emergency Dept for dental reflects failure of the health system
- Long-Term Care and Healthy Aging
 - Older adults in long term care suffer oral problems that impact quality of life
- Primary Care
 - Opportunity for oral health risk assessment, screening, education, prevention and referral in primary care.

Cross-Cutting Issues

- Data
- Equity
- Health Information Exchange
- Quality
- Value-Based Payments
- Workforce Transformation

Cross-Cutting Structures and Systems

- **The December report will review the following cross-cutting structures and systems, identifying opportunities for improvement:**
 - Data monitoring, oversight and on-going assessment and surveillance
 - Health information technology and exchange
 - Payment models and value-based payment models
 - Workforce
 - Quality and performance improvement (incl. provider training and technical assistance)
- **Beyond the draft recommendations we have already discussed, what changes to these cross-cutting structures would most benefit Rhode Island's oral health care system?**

Review Next Steps



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Review Next Steps

- Our next meeting is scheduled for TBD
- We will distribute a summary of today's discussion within a week.
- We will distribute materials before the next meeting. The focus of the next meeting will be a review of feedback from HCSP Retreat and a discussion to finalize workgroup recommendations for inclusion in the December report, including integration of oral health.

If you have questions or ideas to share or want to schedule an individual meeting, please contact Melissa Campbell (mcampbell@rihca.org)

Public Comment

