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**Little Hoover Commission  
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Chair Nava, Vice Chair Varner and Honorable Members of the Commission;

Thank you for the invitation to address your Commission and provide an update on the California Department of Public Health's (CDPH) Oral Health Program (OHP). In the following testimony, you will learn about the progress made in the last two years with respect to the development and implementation of the California Oral Health Plan, our collaboration with the Department of Health Care Services' (DHCS) Medi-Cal Dental Program, and the opportunities presented by the new funding opportunity for improving oral health.

### **Oral Health Program**

The OHP promotes oral health and reduces oral diseases through prevention, education, and organized community efforts.

The Budget Act of 2014 established a state Oral Health Program with the charge of building the infrastructure for a robust oral health program. The California State Legislature set forth a vision to assess and improve oral health in the state. The Legislature requested that CDPH prepare an assessment of the burden of oral diseases in California and lead the development of an oral health plan based on the findings of the assessment.

A report titled *Status of Oral Health in California: Oral Disease Burden and Prevention*, a comprehensive review of oral health and dental care was published in 2017. <sup>i</sup> The *California Oral Health Plan 2018–2028 (Plan)* <sup>ii</sup> was recently released to provide a roadmap of oral health priorities for the next 10 years for the state to address.

The OHP is structured around the core public health functions of assessment, policy development and assurance identified in the Institute of Medicine Report, *The Future of Public Health*. <sup>iii</sup> The role of OHP for each of the functions is based on Association of State and Territorial



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Dental Directors' (ASTDD) framework - *Ten Essential Services to Promote Oral Health in the U.S.* that correspond directly to the Centers for Disease Control and Prevention's (CDC) Public Health Essential Services.<sup>iv</sup> The ASTDD has developed the *Guidelines for State and Territorial Oral Health Programs*<sup>v</sup> to help states accomplish these essential services by identifying the oral health program capacity and infrastructure needs.

The role of the State Dental Director has progressed from planning a program in the first two years to implementation of the strategies recommended in the Plan.

Current CDPH oral health initiatives include:

- The California Healthcare, Research and Prevention Tobacco Tax Act of 2016 Oral Health Initiative, through which funding in the amount of \$30 million is available annually to implement the Plan. In addition to building the infrastructure and capacity for a statewide oral health program, this funding supports two evidence-based interventions recommended by the Guide to Community Preventive Services Taskforce<sup>vi</sup>- Community Water Fluoridation and School-based/School-linked Dental Program;
- Oral Health Workforce Expansion Program, which is funded in the amount of \$1.5 million for three years by the federal Health Resources and Services Administration (HRSA). The overall goal of this grant is to expand the Virtual Dental Home (VDH) delivery system of care for oral health services to reach underserved populations, in conjunction with a Value-Based Incentive (VBI) funding mechanism pilot project; and
- Perinatal Infant Oral Health Quality Improvement Project is funded in the amount of \$1 million for 4 years by HRSA. The goal of this project is to improve access to oral health care for pregnant women and infants through the development of a pilot project that has the potential to be scaled statewide.

## **Overview of the California Oral Health Plan 2018-2028**

CDPH in collaboration with DHCS developed the stakeholder-driven Plan to improve the oral health of Californians and achieve oral health equity.

In 2015, in collaboration with DHCS, CDPH convened an advisory committee to guide the development of the Plan. The advisory committee assessed available studies and reports to identify major oral health issues in California. The Plan provides a roadmap for addressing these issues.

The Plan identifies five key goals for improving oral health and achieving oral health equity for all Californians:

- Goal 1: Improve the oral health of Californians by addressing determinants of health and promote healthy habits and population-based prevention interventions to attain healthier status in communities.
- Goal 2: Align the dental health care delivery system, payment systems, and community programs to support and sustain community-clinical linkages for increasing utilization of dental services.
- Goal 3: Collaborate with payers, public health programs, health care systems, foundations, professional organizations, and educational institutions to expand infrastructure, capacity, and payment systems for supporting prevention and early treatment services.

- Goal 4: Develop and implement communication strategies to inform and educate the public, dental teams, and decision makers about oral health information, programs, and policies.
- Goal 5: Develop and implement a surveillance system to measure key indicators of oral health and identify key performance measures for tracking progress.

The Plan also details corresponding strategies and activities for each of these five priority goals. While this plan covers a 10-year timeframe, CDPH, and its partners, will use the Plan as a basis to develop two-year action plans providing guidance to local and state entities on short-term priorities. The Plan takes in to account recent fiscal developments, notably, the California Healthcare, Research and Prevention Tobacco Tax Act of 2016 that provides \$30 million annually to support this plan. Additionally, the recent implementation of policies in the Medi-Cal Dental Program, such as the Dental Transformation Initiative present a unique opportunity to demonstrate innovative local solutions as well as enhance utilization of dental services across the life span. The OHP offers the structure for collective action to assess and monitor oral health status and oral health disparities, prevent oral diseases, increase access to dental services, promote best practices, and advance evidence-based policies.

### **Coordination Between Local Oral Health Programs and Medi-Cal Dental Program**

To support the implementation of the Plan, CDPH is providing \$18 million in grant funds to 61 Local Health Jurisdictions (LHJs). All LHJs will have the opportunity to develop a community oral health improvement plan through a collaborative process, mobilize communities to implement interventions that promote healthy habits and reduce harmful factors, increase the proportion of the population receiving evidence-based preventive interventions and clinical services, and conduct evaluation and share best practices. As part of this initiative, the Medi-Cal Dental Program has shared detailed County-Age-Race/Ethnicity utilization data. These grantees will be able to identify the needs such as outreach, education, care coordination, case management and provider shortages, and work with the Medi-Cal Dental Program to address the needs.

CDPH has established a Training and Technical Assistance Center at the University of California San Francisco Dental School. The OHP will create a learning community to share best practices and success stories. In addition, plans are being developed to support a robust public health surveillance and evaluation effort, enhance communication and oral health literacy, and address the needs of special populations groups such as older adults, pregnant women and people with diabetes.

### **Tracking Oral Health Indicators**

Assessment is a key objective of California's public health efforts to address the nature and extent of oral diseases and their risk factors by collecting, analyzing, interpreting, and disseminating oral health data. The OHP and the Medi-Cal Dental Program have discussed ways to gather not only data on process measures but also on outcome measures. The need for current data to support the development of oral health programs and policies is being addressed through the establishment of a public health surveillance program.

The OHP is planning to gather health outcome data (e.g., prevalence of tooth decay, untreated disease, urgent dental need, tooth loss, etc.) through surveys. Some State Medicaid Programs are requiring International Classification of Disease (ICD) diagnostic codes in dental claims submission. The utility of including such codes for developing oral health policies has not been demonstrated.

## **Collaboration with the Medi-Cal Dental Program**

The role of the State Dental Director is to provide consultation on policy and clinical issues. The Medi-Cal Dental Program and the OHP hold regular meetings to discuss best practices and policies. In addition, we coordinate our efforts by participating in joint meetings with stakeholders. We share state and national reports related to policies, programs and practices.

The OHP collaborated with the Medi-Cal Dental Program to plan and implement the Dental Transformation Initiative (DTI) as well as the Plan. The Medi-Cal Dental Program and the OHP created a joint panel of reviewers to evaluate applications for Domain 4 Local Dental Pilot Projects and selected the contractors. We are exploring opportunities to promote school-based/linked programs. These are collaborations between health care practitioners in clinical settings and programs in the community—both working to improve the health of people and the communities in which they live.

DHCS is in the process of developing health disparities fact sheets based on the 39 health indicators identified in the Let's Get Healthy California Task Force Final Report. The OHP partnered with DHCS to develop a fact sheet, titled Health Disparities in the Medi-Cal Population: Dental Visits During Pregnancy. The programs are exploring other opportunities related to improving oral health literacy, enhancing delivery of care including inter-professional approaches to the prevention and treatment of oral diseases and measuring progress.

## **Promoting Evidence-based Programs and Practices**

The development of Domain 2 of the DTI is an example of collaboration to bring about system level changes. The goal of this initiative is to assess caries risk and to manage the disease using preventive services and non-invasive treatment approaches instead of more invasive and costly restorative procedures. To implement this initiative, we worked with a workgroup and developed tools, resources and a continuing education course. The types of issues we weigh in include pilot testing promising approaches, coverage and frequency of effective interventions, and evaluation questions.

## **Scaling up Promising Practices**

Increasing the proportion of children, adolescents, and adults who visited the dentist in the past year is a Healthy People 2020 Leading Health Indicators (LHI), a set of selected national health objectives.<sup>vii</sup> This is a priority in the Plan. Screening, counseling, and preventive services are recommended in community settings. Working closely with the Medi-Cal Dental program, linkages can be established among people, providers, and community resources for facilitating cross referrals. Data are being provided to LHIs to assess and understand the variation in dental visit rates and develop improvement strategies.

The OHP, in collaboration with the Department of Education, the Medi-Cal Dental Program and other stakeholders is promoting the kindergarten oral health assessment requirement (Atkins, SB 379, signed in 2017). Stookey et al.,<sup>viii</sup> found positive impact of school-based oral health screening in San Francisco. Over the past 17 years, the prevalence of tooth decay in kindergarten children has declined from 60 percent to 35 percent. This school-based screening data had multiple uses beyond immediate detection of children needing referral for dental care. The replication of such an approach has the potential to increase dental visit rates and improve oral health. As part of the California Healthcare, Research and Prevention Tobacco Tax Act of 2016 local oral health program initiative, training will be provided to promote this policy in all school districts across the State.

In 2017, the LA Trust and its partners promoted the kindergarten oral health assessment requirement in Los Angeles County. The Los Angeles Unified School District adopted a resolution to mandate this requirement.

### **Statewide Media Campaign**

The OHP convened a communication workgroup to explore opportunities for using a variety of channels to deliver tailored messages to individuals, communities and health professionals and to develop a Strategic Oral Health Communication Plan. The purpose is to promote an integrated communication strategy to achieving the goals, objectives and strategies identified in the Plan by deploying limited resources effectively and by evaluating those efforts. The workgroup surveyed various health information technology such as mobile phone apps and text messaging that can be used to inform health behaviors and decisions. The COHP has provided a list of education resources to Local Health Jurisdictions. The OHP is working with the Medi-Cal Dental Program to launch an outreach and education effort.

According to a systematic review from CDC's Community Guide Branch, "health communication campaigns can change health behaviors when combined with the distribution of free or reduced-price related products." ix Although this review did not include oral health products, there is the potential to use multiple channels such as mass media (television, radio), print media (brochures, posters), community events (health fairs), and digital media (social media) to promote tooth brushing habits.

The OHP is exploring several campaigns that will also improve oral health literacy. Oral health literacy is defined as the degree to which individuals can obtain, process and understand basic oral health information and services needed to make appropriate decisions about oral health.x To enhance communication in dental settings and increase the capacity to create a respectful environment, dental teams should communicate using plain language, simple visuals, and use the "teach-back" method. We are proposing creating a toolkit specific for dental teams based on the Agency for Healthcare Research and Quality, Universal Precautions Toolkit.xi

The American Dental Association Foundation's *Tiny Smiles* xii is designed to engage three influential groups –dental professionals, medical professionals, and early educators to communicate with parents and caregivers about oral health. The American Academy of Pediatrics designed a campaign called Brush, Book and Bed.xiii This program aims to improve oral health services in the medical home by linking oral health information with messages about early literacy, sleep, and establishing a regular nighttime routine.

In closing, I would like to thank the Commission for giving me the opportunity to discuss the initiatives undertaken by the OHP.

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<sup>ii</sup> California Department of Public Health. California Oral Health Plan 2018-2028. Available from:

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<sup>v</sup> ASTDD. Guidelines for State and Territorial Oral Health Programs. Available from: <https://www.astdd.org/state-guidelines/>.

<sup>vi</sup> Community Preventive Services Task Force (CPSTF). The Community Guide. Oral Health. Available from:

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<sup>vii</sup> U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion. Healthy People 2020, Oral Health. Available from: <https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Oral-Health>.

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<sup>x</sup> U.S. Department of Health and Human Services. Healthy people 2010: understanding and improving health. Washington, DC: U.S. Government Printing Office; 2000 November. Available from: <http://www.healthypeople.gov/2010>.

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<sup>xii</sup> ADA Foundation. Tiny Smiles. Available from: <http://www.scholastic.com/givekidsasmile/>.

<sup>xiii</sup> American Academy of Pediatrics. Brush, Book Bed. Available from: <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Oral-Health/Pages/Brush-Book-Bed.aspx>.