Members Present:
Dr. Richard Simpson, OHCA chair, AAPD, Alabama Chapter AAP
Dr. Cory B White, Sarrell Dental
Christine Marsh, Sarrell Dental/DentaQuest
Dr. Nathan Smith, Jefferson County Health Department
Dr. Conan Davis, UAB School of Dentistry
Dr. Zack Studstill, Alabama Dental Association
Dr. Lillian Mitchell, UAB School of Dentistry
Danny Rush, Alabama Medicaid Agency
Cathy Caldwell, ADPH All KIDS
Dr. Tommy Johnson, ADPH, Oral Health
Jennifer Morris, ADPH Oral Health

Dr. Simpson called the meeting to order asking members to introduce themselves and state the name of the organization they represent.

Minutes/Approvals:
Dr. Simpson asked for previous meeting minutes to be approved as presented. The minutes were accepted and approved.

Old Business/New Business:
Dr. Simpson stated today’s objective is to review the State Oral Health Plan and its relation to legislation and funding aspects, ultimately completing this document for voting. He stated OHCA has the ability, through communication, to target actionable goals and prioritize them by assigning stakeholders in different areas.

Dr. Johnson introduced the new State Registered Dental Hygienist, Jennifer Morris. He then announced the Oral Health office attended the ADEM conference on October 25, 2018 and asked Mrs. Morris to give a summary of the meeting.

Jennifer Morris summarized the activity/attendance of the Oral Health office at the ADEM conference by stating the Oral Health Office awarded 95 certificates to water systems and wells that maintained an optimal range of fluoridation throughout the year.

Dr. Johnson presented a flyer announcing the start of the ‘Share Your Smile with Alabama’ 2nd annual contest, which began November 7, 2018. Members were asked to share the announcement of the contest through all avenues of their social media. Contest winners will be announced February 1, 2019, at the start of Children’s Dental Health month, in a live news conference at the RSA Tower. The winners will be used to promote oral health practices.
Throughout the year and encourage preventative dental visits of children ages one through 17. Dr. Mitchell suggested that a similar activity be created, Senior Smiles, and be used to promote Older American month in May 2019.

**Modifications of SOHP Stewardship assignments:**
Dr. Studstill suggested the Alabama Dental Association (ALDA) be listed as a ‘provider’ stakeholder. Per Dr. Studstill, this is due to their work with the Governor’s prescription task force, the Public Health Desk, Prescription Division on laws and/or bills promoting the SOHP objective 3.7, which states to promote cessation of over-prescribing opioids to patients by following newest ADA guidelines.

Dr. Danny Rush, Director of Medicaid, stated he would like Alabama Medicaid to be listed as a Provider and Public Health agency stakeholder. He stated as of November 1, 2018, Medicaid has placed restrictions on opioid prescriptions for children; a child who has not received an opioid prescription within 180 days can only receive a five-day prescription, with limits on mme per day, which will also limit mme per prescription.

Cathy Caldwell suggested changing the stakeholder category from the SOHP of Public Health Agencies to include programs. Dr. Simpson agreed to the name change and to add Medicaid and ALL KIDS under this category.

Dr. Lillian Mitchell suggested adding the Department of Senior Services as a stakeholder. She will contact them to confirm their position and representation on this suggestion.

**Amendments to be made under stakeholder categories:**
- Government and Policy makers to include UAB, ALL KIDS, Medicaid, ADPH and DentaQuest based on the idea that each entity would play a vital role in creating policies to initiate legislation.
- ‘Providers’ category to include ALDA, Medicaid, ALL KIDS and FQHC
- Public Health Agencies and Programs to include ADPH, Jefferson County Department of Health, Medicaid and ALL KIDS

Dr. Simpson stated another avenue for improving adult access to care would include reaching out to acquire funding for the free clinics around the state. This process would include identifying their location and which ones have dental clinics that have volunteer physicians and dentist. The idea is to get ALDA districts to take ownership in finding resources and donating equipment to get the clinics operational to provide health services.

Cathy Caldwell suggested reaching out to other organizations and coalitions to collaborate with OHCA in efforts to advocate for health resources. In agreement, Dr. Simpson solicited members to submit the names of councils/organization,
along with contact information, of those that could be active participants in OHCA and in implementing the SOHP.

Dr. Simpson stated FQHCs should be included in the SOHP as an avenue for education. In our efforts to access health care for pregnant moms, FQHCs can educate physicians and dentists on maternal oral health, infant oral health and risk assessment.

Conan Davis commented that during the FQHC annual meeting, members implied an interest in working with OHCA. He also stated the Denta Quest Institute would be hosting a training program for FQHC dentist in February 2019. Cathy Caldwell suggested having an OHCA representative to be a presenter at the FQHC state meeting for educational purposes.

Group discussion of SOHP goals and objectives:
OHCA members discussed which objectives could be accomplished first, within a year, which objectives are promotional, and which are actionable now. Decisions were:

**Objective 1.1** Decrease the proportion of young adults, adults, and older adults who are without dental insurance and increase the utilization rate by those with dental insurance.

This objective could be divided into two tasks: 1. Decrease the proportion of young adults, adults and older adults who are without dental insurance by requiring more access to insurance and 2. Utilizing rates of those with dental insurance by educating and finding out what our limitations are and what factors are keeping people from having access if they have insurance.

1.1.1 Promote adult oral health benefits in the Alabama Medicaid and the Medicare Programs
*We can promote this sub-objective, but to make it actionable it would require legislation and funding.*

1.1.3 Use public service announcements and other innovative outreach methods (e.g., social media, Alabama Department of Public Health video production studio, distance learning, and telehealth resources) to educate the public on the benefits of dental care and insurance.
*OHCA can use this objective to promote the benefits of dental care and insurance and as an opportunity for outreach to the public by providing public service announcements with links to resources *

**Objective 1.2** Reduce the proportion of children, young adults, adults and older adults who experience difficulty, delays, or barriers to receiving oral health care.

1.2.1 Add questions to existing surveys (Behavioral Risk Assessment Surveillance System - BRFSS, MCH 5-year Needs Assessment, other) on barriers to accessing oral health care.
*Actionable sub-objective, to use a collective state questionnaire to add to federal questionnaire on barriers to oral health care*

1.2.2 Educate policy decision makers using GIS mapping and other resources.
*Actionable sub-objective currently in practice by the UAB School of Dentistry*
1.2.3 Incentivize providers to establish practices in dental shortage areas across the state (loan repayment programs, legislative funding for rural scholarships, etc.).

*Actionable sub-objective currently in practice by the UAB School of Dentistry*

1.2.4 Increase the establishment and utilization of Board of Dental Examiners of Alabama approved workforce and delivery models in rural dental shortage areas.

*Actionable sub-objective currently in practice by the Alabama Dental Association and UAB School of Dentistry*

1.2.5 Develop and distribute resources to publicize and promote oral health professions in Jr. High – High School, colleges, and universities statewide

*Actionable sub-objective currently in practice by the UAB School of Dentistry*

**Objective 1.3** Increase the proportion of infants, children, adults, and older adults who received comprehensive dental services during the past year.

1.3.1 Create a communication plan to educate parents and caregivers on the importance of a dental home for infants, children, and young adults.

*Actionable sub-objective currently in practice in many pediatrician and dental offices through a well-child assessment, which includes a medical and dental history review, a physical viewing of the child, reviewing the science of good oral health habits and recommendations.*

Dr. Simpson ended the meeting stating he will email a summary of today’s decisions regarding actionable objectives and which stakeholders will be responsible for implementation. He asked members/stakeholder to email him their list of achievable objectives for the next year, in which he will compile and present in summary at the next quarterly meeting.

Meeting adjourned.

Submitted by:

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Dr. Richard Simpson, Chair    Linda Haigler, ASA-Oral Health Office