

Oral Health Resource Bulletin



Volume 44 • June 2020

Prepared by

National Maternal and Child Oral Health Resource Center



Cite as

National Maternal and Child Oral Health Resource Center. 2020. *Oral Health Resource Bulletin: Volume 44*. Washington, DC: National Maternal and Child Oral Health Resource Center.

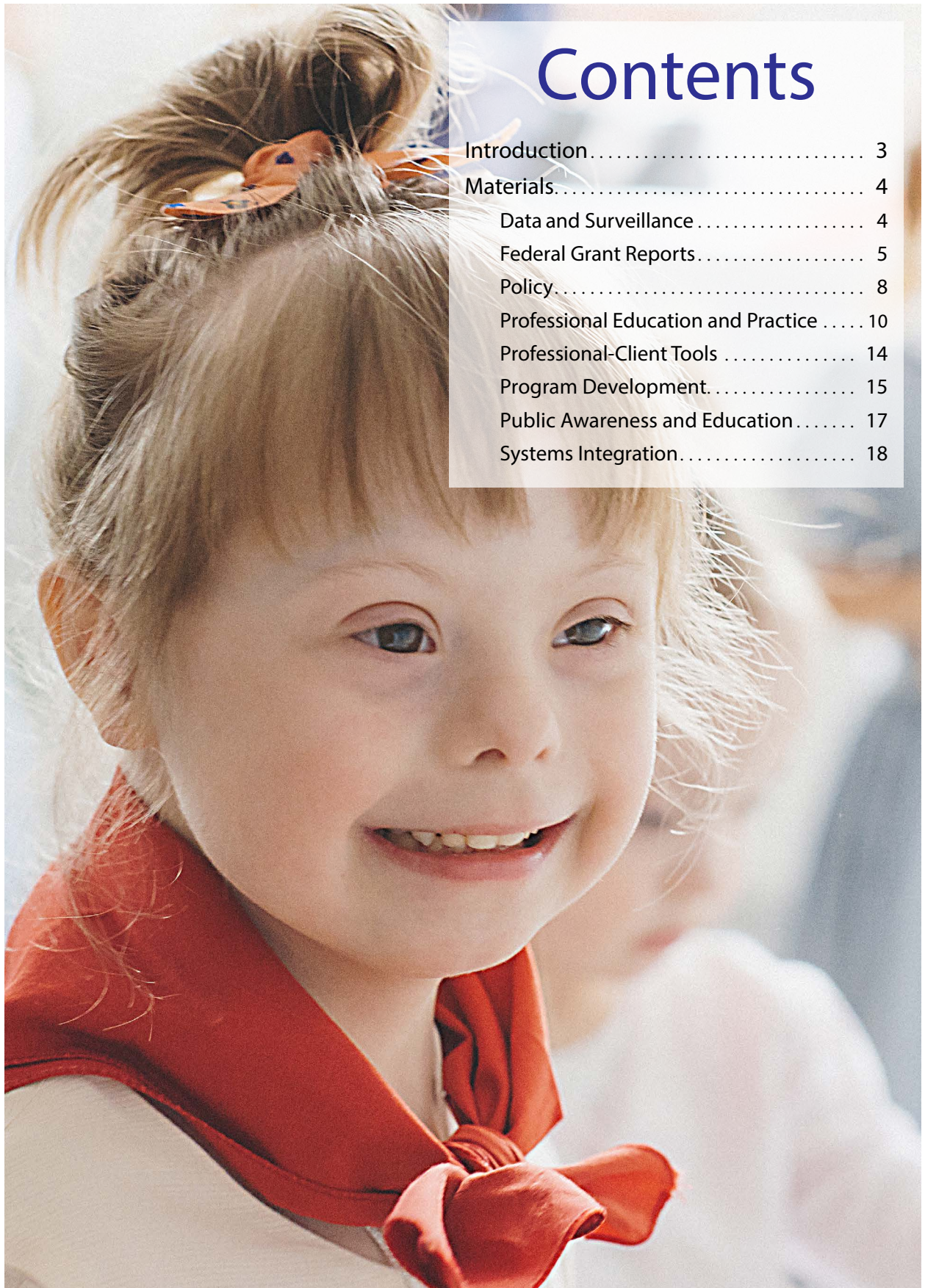
Oral Health Resource Bulletin: Volume 44 © 2020 by National Maternal and Child Oral Health Resource Center, Georgetown University

This publication was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an annual award totaling \$1,000,000 with no funding from nongovernmental sources. This information or content and conclusions are those of the author and should not be construed as the official policy of HRSA, HHS, or the U.S. government, nor should any endorsements be inferred.

The following National Maternal and Child Oral Health Resource Center staff members assisted in the development of this publication: Ruth Barzel, Katrina Holt, Sarah Kolo, and Olivia Pickett.

Permission is given to photocopy this publication or to forward it, in its entirety, to others. Requests for permission to use all or part of the information contained in this publication in other ways should be sent to the address below.

National Maternal and Child Oral Health
Resource Center
Georgetown University
Box 571272
Washington, DC 20057-1272
(202) 784-9771
E-mail: OHRInfo@georgetown.edu
Website: www.mchoralhealth.org



Contents

Introduction.....	3
Materials.....	4
Data and Surveillance.....	4
Federal Grant Reports.....	5
Policy.....	8
Professional Education and Practice.....	10
Professional-Client Tools.....	14
Program Development.....	15
Public Awareness and Education.....	17
Systems Integration.....	18

Introduction



The *Oral Health Resource Bulletin* is a periodic publication designed to stimulate thinking and creativity within the maternal and child health community by providing information about selected materials of interest. Each successive volume is intended to supplement rather than replace previous volumes. The materials listed in the bulletin have been incorporated into the National Maternal and Child Oral Health Resource Center (OHRC) library.

OHRC is committed to continuing to provide effective mechanisms for sharing information about materials that enhance oral health programs and services. If you have materials that you feel would be useful for program development, implementation,

or evaluation, please become part of this process. Materials such as curricula, guidelines, policies, standards, and reports are especially welcome. If you have any materials that you think might be of interest, please send a copy to

National Maternal and Child Oral Health
Resource Center
Georgetown University
Box 571272
Washington, DC 20057-1272
(202) 784-9771
E-mail: OHRCinfo@georgetown.edu
Website: <http://www.mchoralhealth.org>

Materials

Data and Surveillance

AN ANALYSIS OF UTAH'S EMERGENCY DEPARTMENT NON-TRAUMATIC DENTAL VISITS 2007–2017

This report describes a study conducted to assess the rate of oral-health-related emergency department (ED) visits to all Utah hospitals between 2007 and 2017, as well as monetary charges associated with those visits. The report presents study methods, including data and analysis, and key findings in the following areas: (1) who goes to the ED for non-traumatic oral health visits and (2) challenges with insurance coverage and access to oral health care in Utah. Data are presented in tables and figures.

Martin M, Silver M, Okada B, Michelson K, Steed S. 2019. *An Analysis of Utah's Emergency Department Non-Traumatic Dental Visits 2007–2017*. Salt Lake City, UT: Utah Department of Health, Oral Health Program. 25 pp. <http://health.utah.gov/oralhealth/resources/reports/2019%20-%20UDOH%20Analysis%20of%20Emergency%20Dept%20Non-traumatic%20Dental%20Visits.pdf>

FEDERALLY AVAILABLE DATA (FAD) RESOURCE DOCUMENT

This document provides federally available data, detailed data notes, stratifier information, and Statistical Analysis System coding for national maternal and child health-related outcome and performance measures. Topics include preventive medical and dental visits, cesarean deliveries, perinatal regionalization, breastfeeding, safe infant sleep, developmental screening, hospitalization for nonfatal injuries, physical activity, bullying, medical home, transitions to adult health care, smoking, and adequate insurance.

Maternal and Child Health Bureau. 2018. *Federally Available Data (FAD) Resource Document*. Rockville, MD: Maternal and Child Health Bureau. 172 pp. <https://mchb.tvisdata.hrsa.gov/uploadedfiles/TvisWebReports/Documents/FADResourceDocument.pdf>

ORAL HEALTH QUALITY INDICATORS FOR THE MATERNAL AND CHILD HEALTH POPULATION

This handout outlines a set of maternal and child health quality indicators identified by the Center for Oral Health Systems Integration and Improvement Quality Indicator Advisory Team to monitor oral health services delivered in public health programs and systems of care. Indicators for women of child-bearing age and pregnant women are broken into three categories: access, utilization, and outcomes. Indicators for children are broken into four categories: access, utilization, process, and outcomes.

Center for Oral Health Systems Integration and Improvement Quality Indicator Advisory Team, Dental Quality Alliance, and National Maternal and Child Oral Health Resource Center. 2019. *Oral Health Quality Indicators for the Maternal and Child Health Population*. Washington, DC: National Maternal and Child Oral Health Resource Center; Chicago, IL: Dental Quality Alliance. 2 pp. www.mchoralhealth.org/PDFs/MCH_OralHealth_Indicators_Handout.pdf

ORAL HEALTH SCREENING SURVEY OF PRESCHOOL-AGE CHILDREN, 2016–17

This data brief reports results of an oral health screening survey of preschool-age children conducted by the Ohio Department of Health during the 2016–2017 school year. The brief presents overall findings and discusses results of the survey compared to findings for the nation as a whole, access to oral health care, and the significance of the findings. Statistical data is provided, and a description of study methods is included.

Ohio Department of Health, Oral Health Program. 2018. *Oral Health Screening Survey of Preschool-Age Children, 2016–17*. Columbus, OH: Ohio Department of Health, Oral Health Program. 5 pp. https://odh.ohio.gov/wps/wcm/connect/gov/77764ffc-75d7-4286-843a-fbe9fe999c2f/Oral+Health+Status+of+Preschool-Age+Children+in+Ohio.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-77764ffc-75d7-4286-843a-fbe9fe999c2f-mzsJx97

ORAL HEALTH SCREENING SURVEY OF THIRD GRADE SCHOOLCHILDREN IN OHIO, 2017–18

This data brief reports results of an oral health screening survey of children in third grade conducted by the Ohio Department of Health during school year 2017–2018. The brief presents overall findings and discusses disparities in oral health; access to oral health care; impact on access to oral health care and insurance status on oral health status; percentage of children with a history of tooth decay, untreated tooth decay, and dental sealants in Ohio vs. in the nation as a whole; and survey results compared with *Healthy People 2020* objectives. The significance of the findings is also discussed. Statistical data is provided, and a description of study methods is included.

Ohio Department of Health, Oral Health Program. 2018. *Oral Health Screening Survey of Third Grade Schoolchildren in Ohio, 2017–18*. Columbus, OH: Ohio Department of Health, Oral Health Program. 11 pp. https://odh.ohio.gov/wps/wcm/connect/gov/e7b49fbe-27ac-40bd-9ee4-db17a86a9339/2017-18+Survey+Data+Brief+-+FINAL.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-e7b49fbe-27ac-40bd-9ee4-db17a86a9339-mXWDHW2

PENNSYLVANIA ORAL HEALTH SURVEILLANCE PLAN 2019–2024

This report includes information about the Pennsylvania oral health surveillance plan, the purpose of which is to provide a source of reliable and valid information for monitoring oral health status in the state. Topics include a framework for a state-oral-health surveillance system, oral health indicators, data sources, resources, data dissemination and use, privacy and confidentiality, and evaluation.

Pennsylvania Department of Health, Bureau of Health Promotion Risk Reduction. 2019. *Pennsylvania Oral Health Surveillance Plan 2019–2024*. Harrisburg, PA: Pennsylvania Department of Health. 21 pp. <https://paoralhealth.org/wp-content/uploads/2019/09/Revised-Oral-Health-Surveillance-Plan.pdf>

Federal Grant Reports

ARIZONA PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Arizona Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report offers information about project progress (including accomplishments), significant changes during the project period, and project evaluation. The project's impact is also discussed.

Northern Arizona University. 2019. *Arizona Perinatal and Infant Oral Health Quality Improvement Project [FY 2019 progress report]*. Flagstaff, AZ: Northern Arizona University. 20 pp. www.mchoralhealth.org/PDFs/H47MC29818.pdf

CALIFORNIA PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the California Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report includes information about project progress, significant changes during the project period, and project evaluation. The project's impact and sustainability are also discussed.

California Department of Public Health. 2019. *California Perinatal and Infant Oral Health Quality Improvement Project [FY 2019 progress report]*. Sacramento, CA: California Department of Public Health. 8 pp. www.mchoralhealth.org/PDFs/H47MC28480.pdf

COLORADO PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FINAL REPORT]

This final report provides a summary of the project activities and accomplishments of the Colorado Perinatal and Infant Oral Health Quality Improvement project during the project period ending in 2019. The project's main goal was to increase the proportion of pregnant women in Colorado who receive oral health care. The report includes information about project progress, significant changes during the project period, and project evaluation.

Colorado Department of Public Health and Environment. 2019. *Colorado Perinatal and Infant Oral Health Quality Improvement Project* [final report]. Denver, CO: Colorado Department of Public Health and Environment. 37 pp. www.mchoralhealth.org/PDFs/H47MC28479.pdf

CONNECTICUT PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2016 PROGRESS REPORT]

This progress report provides information about the Connecticut Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2016. The report discusses the project's progress and significant changes that took place during the project period. A project evaluation is included, along with plans for the upcoming budget year. [Funded by the Maternal and Child Health Bureau]

Connecticut Department of Social Services. 2019. *Connecticut Perinatal and Infant Oral Health Quality Improvement Project* [FY 2016 progress report]. Hartford, CT: Connecticut Department of Social Services. 53 pp. www.mchoralhealth.org/PDFs/H47MC26549.pdf

MAINE PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Maine Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report includes information about project

progress (including project accomplishments), significant changes during the project period, and project evaluation. The project's impact is also discussed.

MaineHealth. 2019. *Maine Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Portland, ME: MaineHealth. 36 pp. www.mchoralhealth.org/PDFs/H47MC28898.pdf

MARYLAND PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Maryland Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report includes information about project progress (presented separately for each project objective), significant changes during the project period, and project evaluation. The project's impact is also discussed.

Maryland Department of Health. 2019. *Maryland Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Annapolis, MD: Maryland Department of Health. 61 pp. www.mchoralhealth.org/PDFs/H47MC28476.pdf

MASSACHUSETTS PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FINAL REPORT]

This final report provides a summary of the project activities and accomplishments of the Massachusetts Perinatal and Infant Oral Health Quality Improvement project ending in 2019. The report includes information about project progress, significant changes during the project period, and project evaluation. The project's impact is also discussed.

Massachusetts Department of Public Health. 2019. *Massachusetts Perinatal and Infant Oral Health Quality Improvement Project* [final report]. Boston, MA: Massachusetts Department of Public Health. 14 pp. www.mchoralhealth.org/PDFs/H47MC29819.pdf

MINNESOTA PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Minnesota Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report offers information about project progress (including project accomplishments), significant changes during the project period, and project evaluation. The project's impact is also discussed.

Children's Dental Services. 2019. *Minnesota Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Minneapolis, MN: Children's Dental Services. 9 pp. www.mchoralhealth.org/PDFs/H47MC29816.pdf

NEW MEXICO PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FINAL REPORT]

This final report provides a summary of the project activities and accomplishments of the New Mexico Perinatal and Infant Oral Health Quality Improvement project ending in 2019. The project was a collaboration among the University of New Mexico's Health Sciences Center, Center for Development and Disability, College of Nursing, and Department of Dental Medicine. The report also discusses project sustainability, progress during the project period, and project evaluation.

University of New Mexico. 2019. *New Mexico Perinatal and Infant Oral Health Quality Improvement Project* [final report]. Albuquerque, NM: University of New Mexico. 23 pp. www.mchoralhealth.org/PDFs/H47MC28481.pdf

NEW YORK PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2018 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the New York Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2018. The report offers information about project progress (including accomplishments) and project evaluation. Publications produced by the project are included.

Health Research Inc./New York State Department of Health. 2019. *New York Perinatal and Infant Oral Health Quality Improvement Project* [FY 2018 progress report]. Albany, NY: Health Research Inc./New York State Department of Health. 135 pp. www.mchoralhealth.org/PDFs/H47MC26548.pdf

RHODE ISLAND PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Rhode Island Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report includes information about four separate projects that are part of the main project. For each activity, progress, accomplishments, significant changes and barriers, and evaluation are discussed.

Rhode Island Department of Health. 2019. *Rhode Island Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Providence, RI: Rhode Island Department of Health. 35 pp. www.mchoralhealth.org/PDFs/H47MC28477.pdf

SOUTH CAROLINA PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the South Carolina Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report offers background on the project and information about project progress (including accomplishments), significant changes during the project period, and project evaluation. The project's impact is also discussed.

South Carolina Department of Health and Environmental Control. 2019. *South Carolina Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Columbia, SC: South Carolina Department of Health and Environmental Control. 34 pp. www.mchoralhealth.org/PDFs/H47MC29817.pdf

TEXAS PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Texas Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report describes the purpose of the project and information about project progress (including accomplishments), significant changes during the project period, and project evaluation. The project's impact is also discussed.

Texas Department of State Health Services. 2019. *Texas Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Austin, TX: Texas Department of State Health Services. 35 pp. www.mchoralhealth.org/PDFs/H47MC29820.pdf

VIRGINIA PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Virginia Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. Project goals and objectives are discussed, along with progress during the project period, significant changes that took place during the period, and project evaluation.

Virginia Department of Health. 2019. *Virginia Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Richmond, VA: Virginia Department of Health. 30 pp. www.mchoralhealth.org/PDFs/H47MC28478.pdf

WEST VIRGINIA PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2016 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the West Virginia Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2015. The report includes information about the Marshall University community and school oral health team's contribution to West Virginia's perinatal population oral health survey during the

period 2014–2015. It discusses methodology and provides an evaluation and preliminary findings of the 2014 survey. [Funded by the Maternal and Child Health Bureau]

West Virginia Department of Health and Human Resources. 2019. *West Virginia Perinatal and Infant Oral Health Quality Improvement Project* [FY 2016 progress report]. Charleston, WV: West Virginia Department of Health and Human Resources. 53 pp. www.mchoralhealth.org/PDFs/H47MC26550.pdf

WISCONSIN PERINATAL AND INFANT ORAL HEALTH QUALITY IMPROVEMENT PROJECT [FY 2019 PROGRESS REPORT]

This progress report provides a summary of the project activities and accomplishments of the Wisconsin Perinatal and Infant Oral Health Quality Improvement project during the 1-year project period ending in 2019. The report offers information about project progress (including accomplishments), significant changes during the project period, and project evaluation.

Children's Hospital of Wisconsin. 2019. *Wisconsin Perinatal and Infant Oral Health Quality Improvement Project* [FY 2019 progress report]. Milwaukee, WI: Children's Hospital of Wisconsin. 53 pp. www.mchoralhealth.org/PDFs/H47MC28475.pdf

Policy

2019–2024 STRATEGIC PLAN: A ROADMAP FOR ORAL HEALTH EQUITY & ACCESS IN NC

This document offers strategies for developing an effective oral health system in North Carolina and identifies three strategic priorities: advance systemic change, influence policy, and increase organizational effectiveness. For each priority, goals, sub-goals, and targeted actions are presented. A strategic planning overview and a timeline are included.

North Carolina Oral Health Collaborative. 2019. *2019–2024 Strategic Plan: A Roadmap for Oral Health Equity & Access in NC*. Cary, NC: North Carolina Oral Health Collaborative. 25 pp. <https://oralhealthnc.org/wp-content/uploads/2019/12/NCOHC-Strategic-Plan-2019-Public-Facing-1.pdf>

COVERAGE BRIEF: IMPROVING ACCESS TO ORAL HEALTH CARE IN PREGNANCY

This brief provides an overview of the status of dental coverage during pregnancy, using data related to Medicaid dental coverage available to pregnant women in each state as of September 2019. Topics include the impact of a woman's oral health during pregnancy and after birth, barriers to accessing oral health care during pregnancy, oral health coverage for pregnant women through state Medicaid programs, and available data about oral health coverage for pregnant women through Medicaid.

Eke C, Mask A, Reusch C, Vishnevsky D, Quinonez RB. 2019. *Coverage Brief: Improving Access to Oral Health Care in Pregnancy*. Washington, DC: Children's Dental Health Project. 4 pp. www.cdhp.org/resources/384-coverage-brief-improving-access-to-oral-health-care-in-pregnancy

FAST-TRACK TO TELEDENTISTRY: REMOVING BARRIERS TO CARE WHILE MAXIMIZING OVERALL HEALTH

This paper provides information on the benefits of teledentistry and how to make it more accessible. It discusses the impact of not receiving oral health care, new uses of and approaches to teledentistry, potential savings for states from increasing the use of teledentistry, and the promise of teledentistry. What states can do to make it easier for health systems, hospitals, and safety net clinics to adopt teledentistry initiatives is also discussed, including expanding the workforce, updating reimbursement policies, enhancing legal clarity, and making it easier for health professionals to share patient information.

DentaQuest Partnership for Oral Health Advancement. 2020. *Fast-Track to Teledentistry: Removing Barriers to Care While Maximizing Overall Health*. Boston, MA: DentaQuest Partnership for Oral Health Advancement. 19 pp. www.dentaquestpartnership.org/sites/default/files/DQP_Fast-trackToTeledentistry_Final.pdf

IMPROVING PREGNANCY-RELATED ORAL HEALTH COVERAGE WOULD BOLSTER MATERNAL HEALTH, REDUCE HEALTH CARE COSTS

This document provides information about the importance of oral health to women's and children's overall health and discusses the benefits of making comprehensive oral health coverage a guaranteed part of pregnancy-related Medicaid coverage. Other topics include the importance of oral health coverage to mothers' and children's well-being, the contribution of oral health disparities to disparities in maternal health outcomes, and variations in pregnancy-related oral health coverage by state.

Le C, Burroughs M. 2020. *Improving Pregnancy-Related Oral Health Coverage Would Bolster Maternal Health, Reduce Health Care Costs*. Washington, DC: Families USA. 3 pp. https://familiesusa.org/wp-content/uploads/2020/03/OH_Pregnancy-Related-Oral-Health_FactSheet.pdf

MEDICAL-DENTAL INTEGRATION IN MINNESOTA: BENEFITS FROM CHANGES IN LAW AND POLICY

This brief summarizes the emergence of a conceptual framework for medical-dental integration and describes the need to address practical and legal barriers to integration to promote emerging strategies to encourage increased collaboration among oral health professionals and non-oral-health professionals in Minnesota. The brief describes ways that medical-dental integration can take place, provides a national and a Minnesota context, discusses models of integrated care and barriers and strategies in law and policy, and provides examples of medical-dental integration.

Kreuger J. 2019. *Medical-Dental Integration in Minnesota: Benefits from Changes in Law and Policy*. St. Paul, MN: Network for Public Health Law. 8 pp. www.networkforphl.org/resources/medical-dental-integration-in-minnesota-benefits-from-changes-in-law-and-policy-2

POLICY FRAMEWORK SUPPORTING SCHOOL-BASED DENTAL SEALANT PROGRAMS AND THEIR APPLICATION IN MINNESOTA

This brief identifies innovative laws and policies that could encourage consideration, adoption, and implementation of state-level school-based dental sealant programs. The brief examines the state of the law as it relates to such programs in Minnesota. Topics include considerations for forming partnerships between schools and oral health professionals, overcoming policy barriers, and statewide coordination.

Bauerly BC. 2019. *Policy Framework Supporting School-Based Dental Sealant Programs and Their Application in Minnesota*. St. Paul, MN: Network for Public Health Law. 13 pp. www.networkforphl.org/wp-content/uploads/2020/01/School-Based-Dental-Sealant-Programs-Issue-Brief.pdf

STATE TELEHEALTH LAWS & REIMBURSEMENT POLICIES

This report provides a guide to telehealth-related policies, laws, and regulations for all states and the District of Columbia. The report contains information about Medicaid fee-for-service and managed care policies. Telehealth policies are organized into three areas: Medicaid reimbursement; private payer law; and professional regulation, health, and safety. Within these category areas, topic focuses include modality of reimbursement (for Medicaid); requirements and parity (for private payer law); and licensing, consent, and online prescribing (for professional regulation/health and safety).

Center for Connected Health Policy. 2019-. *State Telehealth Laws & Reimbursement Policies*. Sacramento, CA: Center for Connected Health Policy. Semi-annual. www.cchpca.org/about/projects/state-telehealth-laws-and-reimbursement-policies-report

TELEDENTISTRY: HOW TECHNOLOGY CAN FACILITATE ACCESS TO CARE

This paper presents information about how technology can facilitate access to oral health care. Barriers to access are described, including lack of insurance coverage, transportation difficulties, low income, and an insufficient number of dentists who participate in Medicaid. The paper provides a definition of teledentistry, and its role in filling these gaps is discussed.

Challenges associated with the use of teledentistry are described, and methods are presented.

Association of State and Territorial Dental Directors. 2019. *Teledentistry: How Technology Can Facilitate Access to Care*. Reno, NV: Association of State and Territorial Dental Directors. 5 pp. <https://www.astdd.org/docs/teledentistry-how-technology-can-facilitate-access-to-care-3-4-19.pdf>

Professional Education and Practice

ADDRESSING TOBACCO IN DENTAL SETTINGS: A RESOURCE FOR DENTAL PROFESSIONALS

This document for oral health professionals focuses on screening and counseling for tobacco use and exposure during dental visits. The document explains why addressing tobacco use and exposure is important and provides guidelines for how to screen and provide counseling in 1–3 minutes using the “5As” protocol: ask, advise, assess, assist, arrange. Tobacco and oral health facts are also provided.

American Academy of Pediatrics. 2018. *Addressing Tobacco in Dental Settings: A Resource for Dental Professionals*. Itasca, IL: American Academy of Pediatrics. 4 pp. https://ilikemyteeth.org/wp-content/uploads/2018/12/tobacco-resource-for-physicians_v5a.pdf

CHILDREN'S DRINK FACTS 2019: SALES, NUTRITION, AND MARKETING OF CHILDREN'S DRINKS

This report focuses on children's drinks, defined as drinks intended for children ages 2–11 to consume, as indicated on brand websites. The report identifies and analyzes sweetened children's drinks in the fruit drink, flavored water, and drink mix categories as well as those without added sweeteners (added sugars or low-calorie sweeteners) in the 100 percent juice, juice/water blend, and plain water/seltzer categories. Topics include the children's drink market, children's drink nutrition, on-package marketing, and advertising.

Harris JL, Romo-Palafos M, Choi YY, Kibwana A. 2019. *Children's Drink FACTS 2019: Sales, Nutrition, and Marketing of Children's Drinks*. Hartford, CT: Rudd Center for Food Policy and Obesity. 78 pp. <http://uconnruddcenter.org/files/Pdfs/FACTS2019.pdf>

DEAR MEDICAL DIRECTOR [CONTEST NON-PAYMENT FOR FLUORIDE VARNISH APPLICATION]

This template letter is designed for pediatricians or pediatric practices to place on their own letterhead for use in appealing denials for coverage of and payment for fluoride varnish application by pediatricians. The letter provides an explanation for why such denials are inappropriate, including that they violate the intent of current procedure terminology (CPT) guidelines and Affordable Care Act requirements.

American Academy of Pediatrics. 2019. *Dear Medical Director* [contest non-payment for fluoride varnish application]. Itasca, IL: American Academy of Pediatrics. 2 pp. [https://downloads.aap.org/AAP/Documents/Template for Appeal Fluoride Varnish-2019_clean.docx](https://downloads.aap.org/AAP/Documents/Template%20for%20Appeal%20Fluoride%20Varnish-2019_clean.docx)

FLUORIDE VARNISH AND SILVER DIAMINE FLUORIDE: A RESOURCE GUIDE

This guide provides an annotated list of resources on the use and application of fluoride varnish and silver diamine fluoride, including materials on data and surveillance, professional education and training, and public education. Descriptions of and contact information for relevant organizations are included. [Funded by the Maternal and Child Health Bureau]

Barzel R, Holt K. 2020. *Fluoride Varnish and Silver Diamine Fluoride: A Resource Guide*. Washington, DC: National Maternal and Child Oral Health Resource Center. 15 pp. www.mchoralhealth.org/PDFs/Resource-Guide-fv-sdf.pdf

HEALTH CARE TRANSITION: BUILDING A PROGRAM FOR ADOLESCENTS AND YOUNG ADULTS WITH CHRONIC ILLNESS AND DISABILITY

This book addresses aspects of transitioning from pediatric to adult health care for adolescents and young adults with chronic illness or disability. It includes a framework, tools, and case-based examples to inform developing and evaluating a health-care-transition (HCT)-planning program that can be implemented regardless of an individual's disease or disability. Selected topics include defining successful transition, financing transition, special issues in transition, and models of HCT programs. One chapter provides an overview of the Dental Education in the Care of Persons with Disabilities Program at the University of Washington School of Dentistry.

Hergenroeder AC, Wiemann CM, eds. 2018. *Health Care Transition: Building a Program for Adolescents and Young Adults with Chronic Illness and Disability*. New York, NY: Springer. 394 pp. <https://link.springer.com/book/10.1007%2F978-3-319-72868-1>

ORAL DISEASE PREVENTION IN PRIMARY CARE: SERVICES AND REIMBURSEMENT FOR CHILDREN 0–3

This fact sheet for non-oral-health professionals provides information about billing Medicaid for applying fluoride varnish to the teeth of infants and children from birth through age 3 in Virginia. Information includes which types of health professionals can bill for this service, what Medicaid covers, and to whom to apply for reimbursement. Other preventive oral health services for this age range are discussed, and links to oral health education and training activities are included.

Virginia Health Catalyst. 2018. *Oral Disease Prevention in Primary Care: Services and Reimbursement for Children 0–3*. Glen Allen, VA: Virginia Health Catalyst. 1 p. <https://vahealthcatalyst.org/wp-content/uploads/2019/08/VHC-Integration-Toolkit-Varnish-MedicalProviders-Feb2017.docx.pdf>

ORAL HEALTH CARE DURING PREGNANCY: PRACTICE GUIDANCE FOR TEXAS PRENATAL AND DENTAL PROVIDERS

This document provides guidance on oral health care during pregnancy for prenatal care health professionals and oral health professionals in Texas. Topics include myths vs. facts, guidance for health professionals, oral conditions during pregnancy, and oral health pharmacological considerations for pregnant women. It also includes resources for pregnant women and parents about good oral health during pregnancy and during infancy, available in English and in Spanish, as well as a dental referral form for pregnant women. The document was adapted from *Oral Health Care During Pregnancy: A National Consensus Statement* and *Oral Health Care During Pregnancy: Practice Guidance from Maryland's Prenatal and Dental Providers*. [Funded by the Maternal and Child Health Bureau]

Texas Department of State Health Services, Oral Health Improvement Program. 2020. *Oral Health Care During Pregnancy: Practice Guidance for Texas Prenatal and Dental Providers*. Austin, TX: Texas Department of State Health Services. 23 pp. www.dshs.state.tx.us/dental/pdf/TX-DSHS-OHIP-Perinatal-Guide-Final-AccessibleForm.pdf

ORAL HEALTH CHECKLIST FOR PRENATAL PROVIDERS

This checklist is geared for prenatal care health professionals and oral health professionals. The checklist offers tips for discussing oral health with pregnant women during prenatal visits and dental visits, counseling them about oral health, and providing them with a referral to a dentist or to prenatal resources. For oral health professionals, the checklist also includes guidance about providing care for pregnant women.

Texas Department of State Health Services, Oral Health Improvement Program. 2020. *Oral Health Checklist for Prenatal Providers*. Austin, TX: Texas Department of State Health Services, Oral Health Improvement Program. 3 pp. www.dshs.state.tx.us/dental/pdf/Provider-Checklist.pdf

ORAL HEALTH DURING PREGNANCY: PRACTICE GUIDANCE FOR VIRGINIA'S PRENATAL AND DENTAL PROVIDERS

These practice guidelines for oral health professionals and prenatal care professionals in Virginia provide information about the oral health of pregnant women and their infants in the state, state statistics on oral health care utilization during pregnancy, practice guidance, a visual guide of oral conditions that can occur during pregnancy, a pharmacological considerations chart, a sample dental referral form, and educational resources to share with pregnant women. [Funded by the Maternal and Child Health Bureau]

Virginia Department of Health, Dental Health Program. 2019. *Oral Health During Pregnancy: Practice Guidance for Virginia's Prenatal and Dental Providers*. Richmond, VA: Virginia Department of Health, Dental Health Program. 20 pp. www.vdh.virginia.gov/content/uploads/sites/30/2019/03/PracticeGuideforVirginiaPrenatalDentalProvidersWEB.pdf

PERIODICITY SCHEDULE & ALTERNATIVES FOR PEDIATRIC PREVENTIVE ORAL HEALTH IN PRIMARY CARE

This document includes a periodicity schedule and alternatives for pediatric oral health care provided in primary care settings in Maine, based on MaineCare reimbursement limitations. Services are organized by age of the child (ages 6 months to 5 years) and include parent education, oral evaluation, fluoride application, and referral to a dentist. [Funded by the Maternal and Child Health Bureau]

From the First Tooth. 2019. *Periodicity Schedule & Alternatives for Pediatric Preventive Oral Health in Primary Care*. Portland, ME: From the First Tooth. 1 p. www.fromthefirsttooth.org/wp-content/uploads/2019/06/FTFT-Billing-and-Coding-Information-and-Periodicity-v2.docx.pdf

PRACTICE PATTERNS OF POSTGRADUATE DENTAL RESIDENCY COMPLETERS FROM SELECT LONG-TERM HRSA-FUNDED PRIMARY DENTAL CARE TRAINING PROGRAMS

This report describes a study conducted to examine practice patterns of graduates of primary care dental postgraduate training programs with a history of Health Resources and Services Administration funding. The study aims were to assess the impact of graduates' training experience on current practice patterns and subsequent patient access to care and to measure the long-term impact of these programs on improving dentists' capacity to meet the needs of those who are underserved. The report provides background and discusses study methods, findings, and limitations. A discussion of the findings, including information about policy implications, is included.

Amah G, Jura M, Mertz E. 2019. *Practice Patterns of Postgraduate Dental Residency Completers from Select Long-Term HRSA-Funded Primary Dental Care Training Programs*. Rensselaer, NY: Oral Health Workforce Resource Center. 54 pp. www.oralhealthworkforce.org/wp-content/uploads/2019/07/OHWRC_Practice_Patterns_of_Postgraduate_Dental_Residency_Completers_2019.pdf

QUALITY RESOURCE GUIDE: INTRODUCTION TO PATIENTS WITH SPECIAL HEALTHCARE NEEDS

This document for oral health professionals provides information about dental treatment and prevention of oral disease for people with special health care needs (SHCN). Topics include oral health needs among those with SHCN, delivery of care and principles to guide it, developing the oral health care team, scheduling, desensitizing, decreasing acids, additional assistance, special concerns, fluoride and tooth remineralization, and caries arrest with silver diamine fluoride.

Wong A, Sands W. 2018. *Quality Resource Guide: Introduction to Patients with Special Healthcare Needs*. New York, NY: Metropolitan Life Insurance Company. 8 pp. https://media.specialolympics.org/resources/health/disciplines/specialsmiles/Special-Smiles-Intro-to-Patients-with-Special-Healthcare-Needs-2019.pdf?_ga=2.145346045.856698797.1577288797-939872259.1574941178

SHARE THE LOVE IN FEBRUARY; IT'S NATIONAL CHILDREN'S DENTAL HEALTH MONTH

This video provides information about the importance of good oral health for young children and how to promote oral health for this population. Topics including providing oral health education, using fluoridated toothpaste and helping children brush their teeth in the classroom, advising parents to brush a child's teeth with fluoridated toothpaste in the morning and before bed, talking to parents about food choices that promote oral health, and advising parents to seek care for their child from a dentist or dental hygienist.

National Center on Early Childhood Health and Wellness. 2020. *Share the Love in February; It's National Children's Dental Health Month*. Itasca, IL: National Center on Early Childhood Health and Wellness. 1 video (58 sec.) www.youtube.com/watch?v=Vp1KxsZ7zsI (English), www.youtube.com/watch?v=ldBK7T67SQs (Spanish)

TITLE V NATIONAL PERFORMANCE MEASURE 13 (ORAL HEALTH): STRATEGIES FOR SUCCESS

This resource provides detailed information to help state Title V maternal and child health programs in their implementation of the national performance measure on oral health (NPM 13) and oral-health-related state performance measures. It provides sample strategies for addressing NPM 13.1 (preventive dental visit for pregnant women) and 13.2 (preventive dental visit for children and adolescents, ages 1–17). The resource also provides sample evidence-based or evidence-informed strategy measures (ESMs); possible data sources for ESMs; a selection of resources, including best practice reports, curricula, guides, and risk assessments; and contacts for more assistance.

National Maternal and Child Oral Health Resource Center. 2020. *Title V National Performance Measure 13 (Oral Health): Strategies for Success*. 18 pp. Washington, DC: National Maternal and Child Oral Health Resource Center. www.mchoralhealth.org/PDFs/NPM13_StrategiesForSuccess.pdf

TRAUMA-INFORMED CARE AND ORAL HEALTH: RECOMMENDATIONS FOR PRACTITIONERS

This document, which is based on the Adverse Childhood Experiences (ACE) Study, provides background on childhood adversity and trauma; outlines the connection between ACE and oral health outcomes; and describes methods that dentists and other oral health professionals can embed in their practice, teaching, and research to promote health in all domains: physical, mental, and social-emotional. Trauma, toxic stress, and resilience are discussed, and a list of oral health conditions associated with a history of trauma and adversity is included.

Hammett M with Altman L, Severin C, Stillerman A, Villanueva C. 2019. *Trauma-Informed Care and Oral Health: Recommendations for Practitioners*. Illinois ACEs Response Collaborative and Health & Medicine Policy Research Group. 8 pp. www.hmprg.org/wp-content/uploads/2019/01/Trauma-Informed-Care-and-Oral-Health.pdf

Professional-Client Tools

DENTAL SEALANT PERMISSION SLIP—TEMPLATE

This dental sealant permission slip template can be used to obtain consent from parents for students to receive dental sealants as well as other related preventive oral health services from a school-based dental sealant program. The template can be customized with the program name and other information. Space to provide additional information that parents would like the program to know is included. The form is written in Arabic, Burmese, English, Hmong, and Spanish.

Children's Health Alliance of Wisconsin. No date. *Dental Sealant Permission Slip—Template*. Milwaukee, WI: Children's Health Alliance of Wisconsin. 5 pp. www.chawisconsin.org/download/dental-sealant-permission-slip

ORAL HEALTH ASSESSMENT FORM

This form, for parents and oral health professionals to fill out, provides space to write information about children over age 3 to give the child's child care facility or school. Part I, for parents to fill out, is for the child's name, age, birthdate, grade, and child care facility or school name. Part II, for an oral health professional to fill out, is for the child's oral health status and insurance status. Space for the oral health professional's name, signature, and stamp, as well as the date of the oral examination, is included.

DC Health. 2019. *Oral Health Assessment Form*. Washington, DC: District of Columbia Department of Health. 1 p. https://dchealth.dc.gov/sites/default/files/dc/sites/doh/service_content/attachments/DOH%20Oral%20Health%20Assessment%20Form%202019.pdf

SPECIAL CARE: ORAL HEALTH EDUCATIONAL RESOURCES

This series of handouts provides information for oral health professionals to use and to share with families with children with special health care needs to foster good oral hygiene practices. Oral health professionals can also use the handouts to improve their office set-up and services and assess families' satisfaction with services. Some handout topics include a dental office considerations checklist, a family satisfaction questionnaire, different positions for toothbrushing, and focusing on the basics (oral hygiene, oral health, and special problems).

National Maternal and Child Oral Health Resource Center. 2018. *Special Care: Oral Health Educational Resources*. Washington, DC: National Maternal and Child Oral Health Resource Center. Multiple items. www.mchoralhealth.org/SpecialCare/handouts.php

Program Development

ADOLESCENT ORAL HEALTH CAMPAIGN: FINAL REPORT 2017/2018 SCHOOL YEAR

This final report provides information about the Utah Department of Health's Oral Health Program's Adolescent Oral Health Campaign during the 2017–2018 school year. The goal of the campaign was to educate middle school and high school students in Utah about oral health and to encourage positive oral health behaviors and increase use of oral health services. Topics include goals and objectives, methods, results, and limitations.

Neufeld L, Gero A, Harris H. 2018. *Adolescent Oral Health Campaign: Final Report 2017/2018 School Year*. Salt Lake City, UT: Utah Department of Health, Bureau of Maternal and Child Health. 14 pp. <http://health.utah.gov/oralhealth/resources/reports/2017-2018%20-%20Adolescent%20Oral%20Health.pdf>

CHECK UP ON ORAL HEALTH: AGE ONE DENTAL SERVICES—MICHIGAN COUNTY PROFILE 2019

This document provides information about age 1 dental services in Michigan. The document includes background about the importance of good oral health in early childhood and offers statistics, by county, on infants and children under age 2 who participate in Medicaid who had at least one dental visit in 2017. Factors contributing to low access are presented. Information about Michigan Perinatal Oral Health Guidelines and a dental periodicity chart are included.

Michigan Oral Health Coalition. 2019. *Check Up on Oral Health: Age One Dental Services—Michigan County Profile 2019*. Lansing, MI: Michigan Oral Health Coalition. 4 pp. www.mohc.org/wp-content/uploads/2019/06/Call-to-Action-2019.pdf

CURRENT STATUS AND STRATEGIES TO IMPROVE ORAL HEALTH PROGRAM INFRASTRUCTURE AND CAPACITY IN THE US AFFILIATED PACIFIC ISLANDS: A NEEDS ASSESSMENT AND TECHNICAL ASSISTANCE PROJECT—EXECUTIVE SUMMARY

This executive summary focuses on a project conducted to amass information about oral health program infrastructure and capacity, strengths, gaps, and needs in the U.S.-affiliated Pacific islands. The summary discusses approaches and methods and presents selected findings in the following areas: oral health needs, public oral-health-care-delivery sites, funding for oral health programs and services, workforce, policy mandates, and partnerships and collaboration. The summary also identifies opportunities and next steps.

Association of State and Territorial Dental Directors and Pacific Island Health Officers Association. 2019. *Current Status and Strategies to Improve Oral Health Program Infrastructure and Capacity in the US Affiliated Pacific Islands: A Needs Assessment and Technical Assistance Project—Executive Summary*. Reno, NV: Association of State and Territorial Dental Directors. 5 pp. www.astdd.org/docs/usapi-executive-summary.pdf

DENTAL THERAPY START UP GUIDE FOR TRIBAL LEADERS

This guide discusses oral health issues in tribal communities and offers potential solutions to these communities' oral health challenges. Topics include how Alaska has used dental therapists (instead of dentists) to provide needed oral health services, how tribes can evaluate the potential of using dental therapists to meet their oral health needs, complying with state statutes and regulations, implementing tribal licensing, developing the workforce, building financial stability, and integrating dental therapists into a tribe's oral health team. Stories from individuals and a tribe are included.

National Indian Health Board, Tribal Oral Health Initiative. 2019. *Dental Therapy Start Up Guide for Tribal Leaders*. Washington, DC: National Indian Health Board. 88 pp. www.nihb.org/docs/03252019/NIHB%20TOHI%20Guidebook%20WEB.pdf

HEALTH CARE TRANSITION: BUILDING A PROGRAM FOR ADOLESCENTS AND YOUNG ADULTS WITH CHRONIC ILLNESS AND DISABILITY

This book addresses aspects of transitioning from pediatric to adult health care for adolescents and young adults with chronic illness or disability. It includes a framework, tools, and case-based examples to inform developing and evaluating a health-care-transition (HCT)-planning program that can be implemented regardless of an individual's disease or disability. Selected topics include defining successful transition, financing transition, special issues in transition, and models of HCT programs. One chapter provides an overview of the Dental Education in the Care of Persons with Disabilities Program at the University of Washington School of Dentistry.

Hergenroeder AC, Wiemann CM, eds. 2018. *Health Care Transition: Building a Program for Adolescents and Young Adults with Chronic Illness and Disability*. New York, NY: Springer. 394 pp. <https://link.springer.com/book/10.1007%2F978-3-319-72868-1>

IMPROVING THE ORAL HEALTH OF IOWANS: I-SMILE DENTAL HOME INITIATIVE

This document provides information about the I-Smile Dental Home Initiative, the goal of which is to help children in Iowa have good oral health beginning at an early age. The document describes what I-Smile coordinators do and discusses the availability of preventive oral health services to children enrolled in Medicaid in Iowa and the increase in the percentage of this population that has received preventive services since the establishment of I-Smile. The state of children's oral health in Iowa is also discussed.

Iowa Department of Public Health. 2020. *Improving the Oral Health of Iowans: I-Smile Dental Home Initiative*. Des Moines, IA: Iowa Department of Public Health. 2 pp. <https://www.mchoralhealth.org/PDFs/ImprovingOralHealthIowans.pdf>

ORAL HEALTH IMPROVEMENT PLAN FOR CONNECTICUT 2019–2024

This plan was developed to guide state and community programs in their efforts to improve the oral health of all Connecticut residents. It consists of four focus areas: prevention, access to and utilization of

oral health care, integration of oral health services and general health services, and data collection and analysis. The plan outlines 16 objectives under the four focus areas, offers suggested strategies, and lists potential partners. The state of oral health in Connecticut is also addressed.

Connecticut Department of Public Health. 2018. *Oral Health Improvement Plan for Connecticut 2019–2024*. Hartford, CT: Connecticut Department of Public Health. 22 pp. https://portal.ct.gov/-/media/Departments-and-Agencies/DPH/dph/oral_health/PDF/Improvement-Plan-Booklet_Web-Ready.pdf?la=en

PENNSYLVANIA ORAL HEALTH PLAN 2017–2020

This plan is intended to serve as a blueprint for how efforts by multiple stakeholders, resources, and interests can be combined to strengthen Pennsylvania's capacity to prevent oral disease and to help individuals with oral disease achieve good oral health. The purpose and development of the plan, goals and priorities, and the methodology are discussed. Other topics include risk factors for oral disease in Pennsylvania, access to oral health care, oral health workforce development, oral health infrastructure, and plan implementation and evaluation.

Pennsylvania Department of Health. 2018. *Pennsylvania Oral Health Plan 2017–2020*. Harrisburg, PA: Pennsylvania Department of Health. 75 pp. www.health.pa.gov/topics/Documents/Programs/2017-2020PennsylvaniaOralHealthPlan.pdf

PROMOTING HEALTHY SMILES THROUGH EDUCATION AND PREVENTION: PREVENTIVE SERVICES PROGRAM 2017–2018—FINAL SCHOOL YEAR REPORT

This report provides information about the Missouri Oral Health Preventive Services Program (PSP). The report includes background information about the importance of oral health; PSP participant numbers and demographics; and information about participants' oral hygiene, untreated tooth decay, and dental sealant status and about their access to community fluoridated water. Follow-up care recommendations are included.

Missouri Department of Health and Senior Services, Office of Dental Health. 2018. *Promoting Healthy Smiles Through Education and Prevention: Preventive Services Program 2017–2018—Final School Year Report*. Jefferson City, MO: Missouri Department of Health and Senior Services, Office of Dental Health. 36 pp. health.mo.gov/blogs/wp-content/uploads/2019/05/psp-report.pdf

Public Awareness and Education

BABY STEPS FOR TINY TEETH

This video shows a conversation between a new mother and her friend. Topics include the importance of not cleaning an infant's pacifier with saliva, not putting a child to sleep with a bottle, and not giving infants juice. The video provides a dentist's perspective on why it is important for infants to visit the dentist. It shows the dentist examining an infant while explaining each step of the process. Tips on how to check an infant's mouth for tooth decay and how to clean an infant's gums and teeth are provided. The video is available in English and in Spanish. [Funded by the Maternal and Child Health Bureau]

Texas Department of State Health Services. 2019. *Baby Steps for Tiny Teeth*. Austin, TX: Texas Department of State Health Services. 1 video (6:37 min.). youtu.be/nyEbrW2oCzw (English), <https://youtu.be/uURvt0UCX5U> (Spanish)

GETTING TO KNOW ME: INFORMATION FOR YOUR DENTAL OFFICE WHILE YOU ARE PREGNANT

This form is designed as a tool for pregnant women to provide information to help dental office staff understand and meet their needs. The form includes information about prenatal care received, what the woman does to take care of her mouth and teeth, and what questions she has about taking care of her mouth and teeth. It also includes information about problems experienced during pregnancy and whether the woman smokes, vapes, or drinks alcohol. [Funded in part by the Maternal and Child Health Bureau]

National Center on Early Childhood Health and Wellness. 2019. *Getting to Know Me: Information for Your Dental Office While You Are Pregnant*. Itasca, IL: National Center on Early Childhood Health and Wellness. 1 p. www.mchoralhealth.org/PDFs/ncechw-getting-to-know-me-pregnancy.pdf

A HEALTHY MOUTH FOR YOUR BABY

This document is intended to help parents keep their infant's mouth healthy. It lists five steps that parents can take: protect the infant's teeth with fluoride, check and clean the infant's teeth, feed the infant healthy food, don't put the infant to bed with a bottle, and take the infant to the dentist before age 1. A conversation between two women in which one learns from the other about how to keep a baby's teeth healthy is included. The document is available in two versions, one intended for a general audience (which is available in English and in Spanish) and one intended for an American Indian/Alaska Native audience.

National Institute of Dental and Craniofacial Research. 2019. *A Healthy Mouth for Your Baby*. Bethesda, MD: National Institute of Dental and Craniofacial Research, National Oral Health Information Clearinghouse. 12 pp. www.nidcr.nih.gov/sites/default/files/2019-08/a-healthy-mouth.pdf (English), www.nidcr.nih.gov/sites/default/files/2019-08/healthy-mouth-spanish.pdf (Spanish), www.nidcr.nih.gov/sites/default/files/2019-08/healthy-mouth-baby-aian.pdf (American Indian/Alaska Native)

ORAL HEALTH IN MARYLAND

This infographic provides statistical information about the percentage of pregnant women with oral health problems who visit a dentist. It includes statements about the importance and safety of receiving oral health care during pregnancy and about public insurance coverage for oral health care during pregnancy in Maryland. A website address with more information is included. [Funded by the Maternal and Child Health Bureau]

Maryland Department of Health. 2018. *Oral Health in Maryland*. Baltimore, MD: Maryland Department of Health. 1 p. phpa.health.maryland.gov/oralhealth/Documents/PregnancyInfographic.pdf

PREGNANCY AND ORAL HEALTH

This fact sheet for pregnant women provides information about the importance of good oral health during pregnancy for both pregnant women and their infant. Topics include the importance of taking care of the mouth during pregnancy, the safety of getting oral health care during pregnancy, and the importance of good nutrition during pregnancy. Tips for choosing healthy snacks and drinks, how to care for the mouth if a woman has morning sickness, and finding a dentist are included.

Ohio Department of Health, Oral Health Program. 2018. *Pregnancy and Oral Health*. Columbus, OH: Ohio Department of Health, Oral Health Program. 1 p. https://odh.ohio.gov/wps/wcm/connect/gov/02972d42-c8af-46eb-a712-037079e79e7a/Pregnancy+and+Oral+Health+Fact+Sheet.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_M1HGGIK0N0JO00QO9DDDDM3000-02972d42-c8af-46eb-a712-037079e79e7a-mz5TYKg

TIPS FOR GOOD ORAL HEALTH DURING PREGNANCY/TIPS FOR GOOD ORAL HEALTH DURING INFANCY

These tip sheets for pregnant women and parents of infants provide information about how to keep the mouth healthy during pregnancy and in infancy. The pregnancy tip sheet discusses practicing good oral hygiene, eating healthy foods, getting oral health care, and practicing other healthy behaviors. The safety of receiving oral health care during pregnancy and coverage through Maryland Medicaid are also discussed. The infant tip sheet discusses providing good oral hygiene for infants. The pregnancy tip sheet and the infant tip sheet are on one double-sided document, with information about pregnancy on one side and information about infants on the other. The tip sheets are available in English and in Spanish. [Funded by the Maternal and Child Health Bureau]

Maryland Department of Health. 2018. *Tips for Good Oral Health During Pregnancy/Tips for Good Oral Health During Infancy*. Baltimore, MD: Maryland Department of Health. 2 pp. <https://phpa.health.maryland.gov/oralhealth/Documents/TipsGoodOralHealthDuringPregnancyEng.pdf> (English), <https://phpa.health.maryland.gov/oralhealth/Documents/TipsGoodOralHealthDuringPregnancySpan.pdf> (Spanish)

Systems Integration

INTEGRATION OF ORAL HEALTH AND PRIMARY CARE PRACTICE: INTEGRATED MODELS SURVEY RESULTS—EMBEDDED DENTAL PROVIDERS

This document outlines results from a survey of health centers on different models of medical and dental integration that the National Network for Oral Health Access conducted in 2019. The survey gathered information from health centers about how oral health professionals are being utilized in medical settings. Results are presented in the following categories: general integration, embedded oral health professionals, and focus groups. The survey is included.

National Network for Oral Health Access. 2019. *Integration of Oral Health and Primary Care Practice: Integrated Models Survey Results—Embedded Dental Providers*. Denver, CO: National Network for Oral Health Access. 31 pp. www.nnoha.org/nnoha-content/uploads/2019/10/NNOHA-2019-Integrated-Models-Survey-Results.pdf

PROVIDING COMPREHENSIVE CARE FOR YOUR PATIENTS: AN ORAL HEALTH INTEGRATION TOOLKIT FOR HEALTH CARE PROVIDERS

This report provides information for health professionals about how to create an integrated health system that incorporates oral health. The report explains what care integration is. It discusses how to create an integration plan and factors to consider when integrating care. Integration care models for women's health, early childhood health, older adult health, chronic disease, and behavioral health are provided. Each model includes factors to consider and practical examples.

Virginia Health Catalyst. 2019. *Providing Comprehensive Care for Your Patients: An Oral Health Integration Toolkit for Health Care Providers*. Glen Allen, VA: Virginia Health Catalyst. 18 pp. https://vahealthcatalyst.org/wp-content/uploads/2019/12/Integration-Toolkit_FINAL-1.pdf

