COMMONWEALTH OF MASSACHUSETTS
SPECIAL COMMISSION ON ORAL HEALTH MEETING
ACCESS & COVERAGE SUBCOMMITTEE

Friday, February 7, 2025
Via Microsoft Teams
11:00 AM
General (Open Session) Meeting Minutes

Commission Members
Present: 6

1. Chair: Michael Monopoli
2. Tracye Moore
3. Alex Sheff
4. Siobhian Sprott
5. Samantha Jordan
6. Caitlin Sullivan

Commission Members
Not Present: 3
1. Michael Scailabba
2. Erin Bonney
3. Gina Terenzi

Staff Present:
1. Angela Verheyen

I. Welcome

II. Call to Order | Determination of Quorum
Time and call to order 11:05 AM by Michael Monopoli
#Present: 6

1. Chair: Michael Monopoli
2. Tracye Moore
3. Alex Sheff
4. Siobhian Sprott
5. Samantha Jordan
6. Caitlin Sullivan

Absent: 3
1. Michael Scailabba
2. Erin Bonney
3. Gina Terenzi

Recused: 0
Abstained:0

III. Approval of Agenda

DISCUSSION
Review the posted agenda; no changes

ACTION
Motion by Michael Monopoli to approve the agenda, seconded by Siobhian Sprott, and unanimously approved by a roll call vote as follows:
#Present: 7

1. Chair: Michael Monopoli
2. Tracye Moore
3. Alex Sheff
4. Siobhian Sprott
5. Samantha Jordan
6. Caitlin Sullivan

Absent: 3
1. Michael Scialabba
2. Gina Terenzi

Recused: 0
Abstained:0

IV. Approval of Meeting Minutes for 1-17-2025

DISCUSSION

Members were allowed time to review meeting minutes from 1-17-2025 and made the following changes before voting to approve.

"Discussed the importance of distinguishing which work group would lead on issue areas where overlap would occur."

Please amend the "full adult dental coverage" statement to reflect "full adult dental coverage in MassHealth."

ACTION
Motion by Michael Monopoli to approve the 1-17-2025 meeting minutes was seconded by Alex Sheff and unanimously approved by roll call vote as follows:
Absent: 3
Recused: 0

Abstained:0

IV. **Work on the Plan for Developing an Oral Health Needs Assessment**

<u>DISCUSSION</u>

Each member presents a brief introduction to the group
Slides were presented by the chair, Michael Monopoli, a review of the agenda and expectations for the meetings and this workgroup and to make recommendations for the assessment and pick topics to complete the worksheet
What will be the main topic access and/or coverage?

- MassHealth and Medicare (elders)
- Lenses on Racial Equity and Social Determinates of Health (SDOH)
- Chronic Disease Management 80-20 rule and moving away from surgical
    o Chair Michael Monopoli will share this resource with the workgroup
- Surveillance to make recommendations and current trends to move policy forward to create data for public and private settings
- Communication
- Emerging Topics

Potential topic areas and subtopic areas were drafted to start the discussion.

We did not discuss provider directories. This is an area to consider because it is essential for people to find care by identifying what providers participate in their network, how to find a provider, and the cost of services. Out-of-pocket cost is the number one barrier for everyone.

- There is a Workforce workgroup also working on provider groups and issues around this area; we'll need to coordinate

Access, teledentistry and minimally invasive care, mobile and school-based Community Health Centers (CHC), and other ways to provide care other than traditional brick and mortar offices

We need clear definitions of what we mean by access, population of focus, and public health.

- Threats and strengths for data utilization rate, patient languages, benefits design, and benefits and perception of surveillance and MassHealth
- What data do we want to collect and what queries do we need
- What topics of focus and framework
- Think about the problem and the data we need for access and coverage
    o For example, Low utilization of teledentistry
        ▪ What is the driving problem
        ▪ Are there any solutions where there is successful data
        ▪ And if something changes, does it make a difference
        ▪ How are we going to prioritize the problems and solutions

Recommendation to set up the table in the following way for each topic area

- The problem, Drivers of the problem, Solution, Prioritizing problem, and intervention
    - This type of framework will help with these subtopics
    - Identify what already exists (data already available) and answer these questions
    - What drivers do we need to collect new data
    - What are the driving solutions, and why are they underutilized

How do we move forward with Access and Coverage as our main topic

- Positive impact full coverage for adults and the potential cuts to the program
- Point out ways MassHealth adult is critical for accessing care and that this coverage cannot go away
- Leverage more access to the framework
- Caveat coverage space: Is there any other coverage space expansion that is important on the connector and big picture ideas of expansion outside of MassHealth
- Expanding the number of providers who take MassHealth or increasing the number of patients seen

Access to providers (stats on % on who takes MassHealth) and how we solve this challenge

- Topics are avenues to solve access issues and fit into this area
  Education and health literacy and the linkage with primary care – population and hierarchy of needs – pain, need, and insurance coverage and the cost
- Perception that adults don't utilize or understand the importance of oral health care
    - Low utilization rates
    - Can primary care help drive
    - What is driving the problem
    - Is OH literacy the reason for low utilization
- What is the unmet need for access, and are we assuming everyone needs to see the dentist once a year, and What is the ideal utilization measure
    - Look at the data we already have on utilization and how it is interpreted
    - There is an assumption that dental cleaning or intermittent problem-based care = access
    - Can they get everything they need from primary care
    - We need to make some assumptions about what access is
    - What is the site where you receive care
    - Emergency department utilization for non-traumatic dental conditions is an indicator of inadequate access to routine dental care
    - The need for baseline research and data

Provider types and scope of practice

- Bring data to the conversation and other states who have expanded the scope of practice
- Other dental providers as part of the solution (not just dentists)
- Look at other states like Minnesota and the dental therapist and how this position evolved

Overview of discussion

- Define what access is and what information is needed to move toward access and utilization data
- Define a dental home and its meaning
- Define the dental team and scope of practice
- Look at ED utilization
- Care through medical providers and other places
- Utilization data from ADA and Dental Alliance and defining the dental home and preventive and routine care and if a person has seen the same dental provider one year and then the following year
- Did a person get a dental exam at least once annually in 2 consecutive years
- Look at utilization based on types of service

CHIA survey question "Did you get the care you needed in the last year?"

- Given to residents every other year
- This is a high-level report but can be broken down by geographic or other lenses with other details
- Recommendations for future surveys to introduce additional questions from the list above
- Is there a qualitative experience around this
- Data that already exists will be retrieved
- Identify cost and provider availability and look at data that is not publicly available
- Take the main question and payer type of geography down to the municipality level to see the population with the greatest access issue
- Data on answers around "I didn't need care or didn't want it" as part of the definition
  - Did you need OH care in the last year
  - Did you receive it, and what were the reasons
  - Define what access is based on perception and symptoms
  - Affordability and cost as a barrier and data around it
    - Not aware of any data CHIA includes "unable to access care due to cost"

CHIA has claims data for MassHealth and commercial insurance

- Look at out-of-pocket costs for covered services and any regional or population differences
- Cost comparison regionally according to income

Many providers, including MassHealth, are not participating in 3rd-party payers. Recommend during license renewal a question about 3rd party payers and any data on this trend and the areas it is impacting

Disability and young children in the operating room

- Access for special populations and coverage

- Utilization data
- Clinics for Individuals with Disability Disorder (IDD) patients
- Underserved populations and use of teledental and mobile dentistry
  - The impact on access for patients who cannot get to the dentist

Next meeting

- Solutions and strengths
- Understand the Commission work and OH needs assessment
  - Report and Recommendations
  - Development and assessment
  - Solutions we are aware of
  - Other areas not happening or surveying information to focus on
  - Medicare Advantage and dually eligible
  - Medical necessity and Medicare
- Looking for a spokesperson (s) to present at the full meeting on February 27

V. Adjourn

DISCUSSION
None.

ACTION
There was a motion by Michael Monopoli to adjourn the meeting, seconded by Alex Sheff, and unanimously approved by roll call vote as follows:
Approved: 5

1. Chair: Michael Monopoli
2. Tracye Moore
3. Alex Sheff
4. Caitlin Sullivan
5. Samantha Jordan

\# Absent: 4
1. Michael Scailabba
2. Erin Bonney
3. Siobhian Sprott
4. Gina Terenzi

\# Recused: 0

\# Abstained:0

Let the record show the meeting adjourned at 12:29 PM.