



Dental Access in Rural Maryland: Innovative Approaches to Care

Introduction

The Maryland Rural Health Association (MRHA) and Maryland Community Health Resources Commission (CHRC) are partnering to produce a series of white papers. MRHA is a non-profit organization whose mission is to educate and advocate for the optimal health of rural communities and their residents. The CHRC was created by the Maryland General Assembly through the Community Health Care Access and Safety Net Act of 2005 to expand access to health care for low-income Marylanders and underserved communities in the state and to bolster the capacity of Maryland's health care safety net infrastructure to deliver affordable, high-quality health services. The CHRC has awarded 190 grants totaling \$60.3 million. Of this, more than half (99 of 190) have supported programs in rural areas.

The first white paper in this series, *"Social Determinants of Health and Vulnerable Populations in Rural Maryland,"* published in December 2016, and the second white paper, *"Bringing Care Where It Is Needed: A Rural Maryland Perspective,"* published May 2017, can be found on the MRHA website:

<http://www.mdruralhealth.org/about-us/current-publications-educational-documents/>

This third white paper provides an overview of the difficulties in accessing dental care in isolated rural communities, how health services can be provided in non-traditional settings, and how new partnerships can be formed to meet the community needs.

Background

Of Maryland's 24 counties, 18 are designated as rural by the state. Rural jurisdictions in Maryland have a population of over 1.6 million and differ in demographics, environment, and geography from the urban areas in the state. Rural communities share common challenges, as they are often poor,

geographically isolated, and lack the services and employment opportunities found in urban and suburban communities. Moreover, rural communities often lack sufficient numbers of dental care professionals to adequately treat the rural population.

In 2000, the Surgeon General declared oral disease a "silent epidemic," a statement which remains true today. According to the DentaQuest Institute's April 2017 Report: "Executive Summary: Narrowing the Rural Interprofessional Oral Health Care Gap," poor oral health affects overall physical health and significantly contributes to the expanding cost of the US health care system. The report details that "adults in rural communities are more likely to have all natural teeth missing than their non-rural peers...and children living in rural areas are more likely to have unmet dental needs, less likely to have visited a dentist in the past year, and less likely to see a dental care team for ongoing preventive care."

The CHRC has supported 24 community-based oral health programs in rural communities for a total of more than \$4.1 million that have brought needed dental services to more than 27,000 residents. These programs have helped individuals overcome the lack of access to adequate and necessary dental care.

Strategies

Each rural community faces unique challenges to providing access to dental care for their residents. A variety of strategies are therefore needed to address these challenges and ensure that individuals have an opportunity to receive necessary care.

Five MRHA organizational members have received CHRC grant funds to deliver dental care services in rural jurisdictions through a number of community-based strategies. These strategies have included: (1) supporting new or expanding existing dental clinics in the community; (2) subsidizing dental care provided by community dentists for those unable to bear the cost of treatment; and (3) partnering with the University of Maryland School of

Dentistry to provide dental care while also providing clinical training to senior students. Examples of each of these strategies are detailed in this white paper.

Supporting Dental Clinics in the Community

In rural communities, the need for dental services is often greater than available resources. There are fewer dental health professionals per capita in rural areas, resulting in having to travel farther to obtain oral health care services. Without adequate public transportation systems in much of rural Maryland, rural residents may face barriers in accessing care, which can lead to a reliance on the closest Emergency Department for dental care. Since 2015, the CHRC has supported new and existing dental clinics in Charles County that have served residents without other access to affordable dental care.

Health Partners

The Health Partners dental clinic has been serving Charles County since 2009 and received the first of two CHRC grants in 2015 to help address the growing need for access to dental care in their community.

Health Partners' efforts focus on addressing the needs of low-income residents who lack access to dental health care. Over the last two years, the Health Partners dental clinic has provided dental services to 1,720 individuals, more than 1,300 of whom were on Medicaid. In that time, the clinic has provided more than 11,981 dental services for their patients. The CHRC grant has allowed Health Partners the opportunity to add a dentist, a dental assistant, and an additional administrative clerk to their staff and has expanded their capacity to bill Medicaid for services provided. This allows the organization to work towards achieving a model of sustainability.

Partnerships are essential in developing successful safety net programs, and Health Partners has used partnerships to maintain access to Charles County residents in need of dental services. Health Partners has built relationships with the University of Maryland Charles Regional Medical Center, the Charles County Department of Health's dental clinic, LifeStyles, Inc., and Southern Maryland Mission of Mercy, all of whom have played a role in successful patient recruitment.

Health Partners continues to expand their reach in the community and build a patient base that will make their dental clinic sustainable. With two part-time

dentists treating patients two-and-a-half days a week in the Waldorf location and the opening of a second location in Nanjemoy, Health Partners has become a dental home for the uninsured in Southern Maryland, as well as Medicaid and Medicare recipients.

Subsidizing Dental Care from Community Dentists

Dental care is expensive and may be out of reach for those who lack dental insurance. In Western Maryland, CHRC funding has been utilized to subsidize the provision of dental care by existing dentists in the community. A number of CHRC-funded organizations have cultivated relationships with local dentists, which have resulted in a decrease in the number of individuals using the Emergency Department for dental care. Two MRHA members, Allegany Health Right and Mountain Laurel Medical Center, are utilizing this strategy to improve the oral health of residents of Allegany and Garrett Counties, respectively.

Allegany Health Right

Since 2014, Allegany Health Right has implemented three oral health grants funded by the CHRC. These grants have connected residents to subsidized dental care and provided needed access to oral health education for vulnerable, low-income, uninsured, and underinsured adults, including those covered by Medicare and Medicaid. The Western Maryland Health System also supports Allegany Health Right's dental program. CHRC funds allowed Allegany Health Right to expand its ongoing Dental Access Program in Allegany County and to deploy an oral health focused Community Health Worker to educate residents on oral hygiene and encourage people to adopt better oral health habits.

Through the efforts of these programs, more than 1,000 low-income adults have received urgent dental treatment, and more than 1,000 benefited from oral health education. By leveraging donated and discounted treatment offered by local dental providers, the programs were able to secure approximately \$250,000 worth of dental care. Over 400 people worked one-on-one with the Community Health Worker to work on improving their oral health, and the majority of these individuals reported improved self-rated oral health and the adoption of better oral health practices.

Allegany Health Right programs have been successful in reducing the number of Medicaid-

covered adults who use the Western Maryland Health System's Emergency Department for dental care, a population which generally accounts for over half of the patients who present at the Emergency Department for dental conditions. Over the course of a two-year CHRC grant-funded program aimed at providing care for this population, the hospital reported that the percentage of dental patients covered by Medicaid presenting to the Emergency Department for dental conditions decreased from 62% of total visits to 39%. This success was achieved by giving people an appropriate alternative to receive their dental care in community-based settings.

Mountain Laurel Medical Center

In 2016, Mountain Laurel Medical Center received CHRC funds to implement the "Improving Chronic Conditions by Integrating Oral Health in the Primary Care Setting" program, which aimed to identify existing patients without adequate dental care. A special focus was placed on patients with chronic diseases such as diabetes and hypertension and built upon an existing collaboration with a local dental group and the local health department's dental clinic to provide subsidized dental services. Dental care was provided for patients on a sliding scale based on income and at significantly reduced out-of-pocket costs as compared to the cost of accessing these services in the community.

In the first year, 136 patients received dental care, 90 of whom required advanced dental treatments, 62 individuals were provided with preventative dental care, and 93 patients received periodontal screenings. The patients were identified by Mountain Laurel clinical staff and referred to care. All patients enrolled in the program either completed or are still actively engaged in their treatment plan. All patients served would not have been able to access dental care without the program. A total of 24 patients presented to the Emergency Department for dental-related complaints during this time, and Mountain Laurel is working to reduce this number by ensuring that more individuals are able to access same day acute dental visits to area providers when necessary.

Partnering with the University of Maryland School of Dentistry

The University of Maryland School of Dentistry has partnered with different health care organizations in the state to provide low-cost, quality dental care to

the communities lacking adequate oral care providers. The University partners with community non-profit dental organizations to provide needed dental services while allowing dental students to gain required clinical experience. These partnerships also provide the community organization with a revenue-generating service with minimal expenses. The CHRC has supported two MRHA members taking advantage of innovative university-community dental partnerships, which have served residents of Carroll, Cecil, and Harford Counties.

Access Carroll

Founded in 2005, Access Carroll is a private, nonprofit health care organization that began its mission by providing free primary health services to a targeted 18,000 uninsured residents of Carroll County. Beyond primary health care, the organization faced high demands for coordinated care, chronic health services, and specialty care, of which dental and oral health services were among the highest. In 2013, Access Carroll opened the first-ever family dental clinic in Carroll County to provide accessible and affordable comprehensive dental services for any county resident on a sliding fee scale.

The success of the Access Carroll Family Dental Clinic is largely attributed to the pioneering support of the CHRC, which awarded operational funding of dental services in 2010. Comprehensive dental services are provided in a person-centered and integrated setting that includes prevention and hygiene, state-of-the-art digital diagnostics, restorative, and emergency care. Prosthetics, including bridges, crowns, and dentures, have been the greatest sought service beyond emergency care. Since 2014, more than 700 prosthetic services are provided annually. Access Carroll utilizes a hybrid staffing model including a core paid team, professional volunteers, and a partnership with the University of Maryland School of Dentistry. Access Carroll began working with fourth-year dental students and faculty in 2015, and the partnership has now grown into a formalized externship program for both third- and fourth-year dental students to gain direct patient care experience in the community health setting. The relationship has yielded tremendous and exciting outcomes, while expanding the model and value of integrated care to newly graduating dental professionals.

The initial goal of having a dental clinic for low-income residents was borne from high demands for adult emergency extractions. The majority of patients seen at Access Carroll had not received basic oral health services for many years and suffered from pervasive cavities, poor hygiene, and chronic infections. On opening day of the new Family Dental Clinic, more than 400 patients were on an emergency extraction waiting list. Beyond extraction services, the new clinic is a premier and state-of-the-art dental care home for residents of any age.

Access Carroll Family Dental Clinic has been a tremendous and valuable service for low-income and at-risk Carroll County residents, directly impacting the lives of 6,687 individuals with more than 12,000 professional visits, with services conservatively valued at \$3.42 million dollars. As part of an integrated health care team, the dental staff are directly engaged in chronic disease management and addressing the devastating opioid epidemic plaguing the community. As best practices, dental staff screen every patient at every visit for blood pressure, chronic conditions, medication usage, and unsafe alcohol and opioid consumption. The dental clinic supports other community health initiatives of the Local Health Improvement Coalition and Population Health Committee, including Emergency Department diversion by responding quickly to emergency dental needs while preventing potential emergencies as a strategic partner of Carroll Hospital.

West Cecil Health Center

Since 2008, West Cecil Health Center has been providing quality health care services to residents of Cecil and Harford Counties. West Cecil is focused on ensuring open access to primary care, behavioral health, women's health, and dentistry services regardless of age, insurance status, or ability to pay. In 2014, the rising need for dental providers presented a large gap in dental services. With a state average ratio of 1,360:1 for dental providers to residents, Cecil County saw a devastating ratio of 2,560:1; nearly double the state average.

In 2015, West Cecil expanded its services to include a four-chair dental suite staffed by one full-time general dentist and one part-time dental hygienist. The result was an immediate and overwhelming demand, as there are no other dental providers in the area that will provide services to all patients on a sliding fee basis. Less than a year after

opening the doors to its dental office, demand far exceeded capacity, creating wait times of six months or more for new appointments.

The only other organization in Cecil County offering similar services was a clinic located in Perryville and operated by the University of Maryland School of Dentistry. The University's clinic provided comprehensive care for children and elderly, but only served adult patients on an emergency basis. The dental clinic was set to close in December 2016, potentially leaving an even larger gap in dental services for area residents. In an effort to preserve and improve access to affordable dentistry services, West Cecil entered into a collaborative venture with the University of Maryland and Union Hospital to take over operation of the clinic and create a new dental home for area residents. Under the agreement, the clinic retains its status as a teaching site for the dental school.

This partnership, with funding and support from the CHRC, has helped fill this gap by providing the community with a 26-chair dental center with comprehensive, acute, and emergent services on a sliding fee scale to all patients. Through this collaborative effort, West Cecil has ensured the continuity of dental care to the Cecil and Harford communities that they serve.

Conclusion

The MRHA and CHRC hope this white paper has helped to demonstrate how these five rural Maryland community organizations are working diligently and creatively to address dental health inequities for the most vulnerable Maryland populations. These integrative models of care have been woven into the fabric of community health to give individuals and families a reason to smile, manage acute and chronic health conditions, obtain employment and self-sufficiency, and gain greater ability to build a legacy of good health for generations to come.

There are more examples of MRHA members and CHRC-funded programs across the state addressing the needs of rural Maryland. To learn more about MRHA and CHRC and how these organizations partner with rural organizations across the state, please visit their websites, listed below:

www.mdruralhealth.org

<http://dhmh.maryland.gov/mchrc/pages/Home.aspx>

Published October 2017