



Public Health Project/Activity Descriptive Report Form

Please provide a detailed description of your **successful dental public health project/activity** by fully completing this form. Expand the submission form as needed but within any limitations noted. Please return completed form to: lcofano@astdd.org

NOTE: Please use Arial 10 pt. font.

CONTACT PERSON PREPARING THE SUBMISSION AND TO ANSWER QUESTIONS

Name: Diane Teigiser

Title: Administrator

Agency/Organization: Maryland Dental Action Coalition (MDAC)

Address: 10015 Old Columbia Road, Suite B-215, Columbia, MD 21046

Phone: (301) 312-5456

Email Address: dteigiser@mdac.us

PROVIDE CONTACT INFORMATION FOR ONE ADDITIONAL PERSON WHO COULD ANSWER QUESTIONS REGARDING THIS PROGRAM

Name: Mary Backley

Title: Chief Executive Officer

Agency/Organization: Maryland Dental Action Coalition (MDAC)

Address: 10015 Old Columbia Road, Suite B-215, Columbia, MD 21046

Phone: (301) 312-5456

Email Address: mbackley@mdac.us

SECTION I: ACTIVITY OVERVIEW

Title of the dental public health activity:

Maryland Medicaid Adult Dental Pilot Program Mapping Project

Public Health Functions* and the 10 Essential Public Health Services to Promote Oral Health:
Check one or more categories related to the activity.

"X"	Assessment
	1. Assess oral health status and implement an oral health surveillance system.
	2. Analyze determinants of oral health and respond to health hazards in the community
	3. Assess public perceptions about oral health issues and educate/empower them to achieve and maintain optimal oral health
Policy Development	
X	4. Mobilize community partners to leverage resources and advocate for/act on oral health issues
	5. Develop and implement policies and systematic plans that support state and community oral health efforts
Assurance	
	6. Review, educate about and enforce laws and regulations that promote oral health and ensure safe oral health practices
X	7. Reduce barriers to care and assure utilization of personal and population-based oral health services
X	8. Assure an adequate and competent public and private oral health workforce
	9. Evaluate effectiveness, accessibility and quality of personal and population-based oral health promotion activities and oral health services
	10. Conduct and review research for new insights and innovative solutions to oral health problems

*[ASTDD Guidelines for State and Territorial Oral Health Programs that includes 10 Essential Public Health Services to Promote Oral Health](#)

Healthy People 2030 Objectives: Please list HP 2030 objectives related to the activity described in this submission. If there are any state-level objectives the activity addresses please include those as well.

Healthy People 2030 Objectives:

- Reduce the proportion of adults with active or untreated tooth decay — OH-03
- Increase use of the oral health care system — OH-08

2018-2023 Maryland Oral Health Plan Objectives:

The mapping project also addresses two goals in the Maryland Oral Health Plan: (1) to ensure all Maryland residents have a dental home, and (2) improve collaboration between oral health and social service providers to help patients navigate the oral health care system and establish a dental home.

Provide 3-5 Key Words (e.g. fluoride, sealants, access to care, coalitions, policy, Medicaid, etc.) These will assist those looking for information on this topic:

Acquiring oral health data, Use of oral health data, Medicaid, adult dental benefits, access to care, state coalitions, dual-eligible adult population

Executive Summary: Complete after Section II: Detailed Activity Description. Please limit to 300 words in one or two paragraphs.

Provide a brief description of the dental public health activity. Include information on: (1) what is being done; (2) who is doing it and why; (3) associated costs; (4) outcomes achieved (5) lessons learned, both positive and negative.

The Maryland Dental Action Coalition's (MDAC) efforts to secure Medicaid dental benefits for all Maryland adults took a significant step forward in 2017 with the passage of legislation to establish a Medicaid adult dental pilot program, which provides access to basic diagnostic, preventive, and restorative dental services to Maryland adults ages 21-64 who are dually eligible for Medicaid and Medicare.

The success of the pilot program is essential to achieve MDAC's ultimate goal of dental benefits for all Maryland adults on Medicaid. To increase awareness of the new dental benefit and help ensure there are a sufficient number of Medicaid providers, MDAC needed to understand the geographic distribution of both the 35,000 dual-eligible adults in a state with a population of 6.1 million and the Medicaid providers willing to treat adults, many of whom have special needs.

With the help and support of Maryland Medicaid and the Maryland Department of Health Office of Oral Health, MDAC developed a series of maps to depict the location, by county and/or zip code, of dual-eligible adults, locations of safety-net providers that treat adult dental patients on Medicaid, and social service agencies that work with the dual-eligible population.

The cost of the mapping project was minimal (MDAC, Office of Oral Health, and Medicaid staff time), but the outcomes were highly beneficial. The maps enabled MDAC to identify areas of the state with the highest concentrations of dual-eligible adults and shortages of Medicaid providers to treat them. MDAC used learnings from the mapping project to develop a targeted direct mail campaign to make duals aware of their new dental benefit, increase the number of Medicaid providers in areas of the state with the highest concentrations of duals, and form effective partnerships with key social service agencies.

SECTION II: DETAILED ACTIVITY DESCRIPTION

Provide detailed narrative about the dental public health activity using the headings provided and answering the questions. Include specifics to help readers understand what you are doing and how it's being done. References and links to information may be included.

****Complete using Arial 10 pt.**

Rationale and History of the Activity:

1. What were the key issues that led to the initiation of this activity?

The single most important step to improve the oral health of underserved and at-risk populations in Maryland is a Medicaid adult dental benefit. In May 2017, Governor Larry Hogan signed SB 284, which established the Maryland Medical Assistance – Adult Dental Coverage – Pilot Program. The Medicaid adult dental pilot program is a critical step toward comprehensive dental coverage for all Medicaid adults.

The statewide program, which went into effect in June 2019, serves individuals between the ages of 21 and 64 who are dually eligible for both Medicare and Medicaid. This diverse, low-income population includes people with multiple chronic conditions, physical or developmental disabilities, mental illness or cognitive impairments, and individuals who are relatively healthy. For the first time, dual-eligible adults, many of whom have had no dental coverage for years, are able to access much-needed diagnostic and restorative services, obtain preventative care, and establish a dental home.

Although policy change is a crucial first step, coverage does not automatically lead to access. Utilization of the new dental benefit is essential to the success of the pilot program and secure Medicaid dental coverage for all eligible Maryland adults. While the need for preventative dental care is great for all low-income adults, the special needs of dual eligible adults can make it especially difficult to access care.

Although MDAC knew the safety-net dental clinics in the state that serve Medicaid patients, it needed to understand the geographic distribution of these clinics relative to the population density of the areas they serve. Additionally, MDAC was unaware of the population of duals in each of Maryland's 24 counties and the social service agencies that serve this population. In 2018, MDAC undertook a mapping project in an effort to identify areas of the state with the largest concentrations of dual eligible adults and a shortage of Medicaid providers to treat them. MDAC mapped social service agencies to identify potential partners that could help increase awareness of the new dental benefit among the dual-eligible population.

In 2019, MDAC formed a Medicaid Adult Dental Collaborative comprised of dental providers, social service professionals, caregivers, and representatives from county health departments. This entity works to ensure that eligible participants are aware of and can access their new dental benefits; increase the number of Medicaid providers and build capacity to serve the dual-eligible population; and evaluate the program, make any necessary course corrections, and provide feedback to Medicaid. The mapping project helped inform the Collaborative's work to further attain these goals.

2. What rationale/evidence (may be anecdotal) did you use to support the implementation of this activity?

To inform its efforts to improve the oral and overall health of Marylanders, MDAC collects data on health inequities from various state sources, including the Maryland Department of Health Office of Oral Health, Office of Minority Health, and Maryland Medicaid. It also gathers state and federal data from the Centers for Disease Control and Prevention, the U.S. Department of Health and Human Services, and the U.S. Census Bureau. These data are used to develop programs to serve the most vulnerable populations in regions of the state with the greatest need.

To develop inputs for the mapping project, MDAC used census data to determine population by county in Maryland. Medicaid provided the number of duals by county. MDAC then determined the percentage of the total state population and the percentage of dual-eligible adults in each county. Thus, MDAC was able to use its limited resources for maximum benefit by focusing efforts on areas of with the highest percentage of duals, such as Baltimore City, Baltimore County, and the Eastern Shore.

MDAC used the Maryland Department of Health Office of Oral Health's 2019 Oral Health Resource Guide, a listing of public health dental clinics (including FQHCs, CHCs, safety net clinics, and schools of dentistry and dental hygiene), to map the locations of Medicaid providers. This guide lists the services available at each clinic, so MDAC mapped only the providers that treat adult patients.

MDAC conducted a Google search of social service agencies statewide that serve dual-eligible adults. It also worked with the Coordinating Center and the Maryland Department of Health Office of Genetics and People with Special Health Care Needs to identify potential social service partners to help inform duals of their new dental benefits.

MDAC worked with a data scientist at the Maryland Department of Health Office of Oral Health, who used the state's global information system to input the data and create the maps.

In 2019, MDAC formed a Medicaid Adult Dental Collaborative to help ensure the success of the Medicaid Adult Dental Pilot Program. In anticipation of Medicaid dental coverage for all Maryland adults, the Collaborative identifies and works with Maryland Medicaid to address barriers to care within those areas with the highest concentration of dual-eligible adults, a lack of Medicaid providers, and social service agencies willing to partner to help ensure the success of the pilot program.

3. What month and year did the activity begin and what milestones have occurred along the way? (May include a timeline.)

- 05/2017: Maryland Governor Larry Hogan signs SB 284, which established the Maryland Medical Assistance – Adult Dental Coverage – Pilot Program into law.
- 12/2018: MDAC, in collaboration with the Maryland Department of Health Office of Oral Health and Maryland Medicaid, begins mapping the geographic locations of 35,000 dual-eligible adults, Medicaid providers, and social service agencies in Maryland.
- 03/2019: MDAC mapping project completed and the Medicaid Adult Dental Collaborative formed.
- 06/2018: MDAC hosts convening with coalition members and Medicaid to address pilot program benefit package. Maryland Medicaid finalizes pilot program dental benefit package of services.
- 04/2019: Mapping project outcomes presented to the Medicaid Adult Dental Collaborative. Mapping project outcomes presented to Maryland Medicaid and MDAC membership.
- 06/2019: Maryland Medicaid launches Medicaid Adult Dental Pilot Program. MDAC hosts CE class on “Treating Patients with Anxiety and Special Needs.”
- 07/2019: MDAC develops direct mail (postcard) test campaign to increase awareness of the new dental benefit and how to access it. The postcard included telephone numbers to make a dental appointment at the ASO (Administrative Service Organization) auto-assigned provider, arrange transportation, or get answers to questions about the new dental benefit.
- 09/2019: MSDA Chesapeake Dental Conference.
 - MDAC presentation on Medicaid Adult Dental Pilot Program
 - Distribution of one-sheets to outline pilot program and recruit/enroll providers in MD Medicaid
- 11/2019: Direct mail test (postcard campaign) drops.
 - Chase Brexton Health Services (Baltimore City/Baltimore County)
 - Chesapeake Health Care (Eastern Shore)

The sections below follow a logic model format. For more information on logic models go to: [W.K. Kellogg Foundation: Logic Model Development Guide](#)

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
--------	--------------------	---------	----------

1. What resources were needed to carry out the activity? (e.g., staffing, volunteers, funding, partnerships, collaborations with various organizations, etc.)

The mapping project, Medicaid Adult Dental Collaborative, and associated projects were funded through grants from the Abell Foundation, Leonard and Helen R. Stulman Charitable Foundation, and DentaQuest Partnership for Oral Health Advancement.

The Maryland Department of Health Office of Oral Health (OOH) provided in-kind support by assigning a data scientist to help MDAC collect data and use the state global information system to produce the maps. Both MDAC and OOH staff worked on the project part time and completed it with two months.

The diversity of MDAC’s network and strong relationship with its partners is its greatest asset. Much of its success – legislatively and programmatically – can be attributed to the strength and participation of its network, beginning more than ten years ago with the implementation of Dental Action Committee recommendations by the O’Malley Administration and the Maryland Department of Health on new policies, practices, and regulations to ensure access to dental care for all low-income Maryland

children. Today, MDAC's local, county, regional, and state partners constructively collaborate on programs and initiatives to address the goals outlined in the Maryland Oral Health Plan (MOHP), a five-year roadmap developed by MDAC to improve the oral health of Marylanders through increased oral health promotion, disease prevention, education, advocacy, and access to oral health care.

Through its on-going communication and cooperative work with partners throughout the state, MDAC is aware of the issues, obstacles, and hurdles that practitioners face in the delivery of care and that uninsured populations face in accessing care. MDAC mobilizes key partners with firsthand knowledge of the issues to support its advocacy efforts and programs.

In 2019, MDAC formed a Medicaid Adult Dental Collaborative comprised of members from a diverse statewide network that includes dental clinicians, the retired state oral health director, and representatives from county health departments, the Maryland State Dental Association, and two social service organizations. Their guidance and experience serving the dual eligible population was used to address issues that impede access to care. The Collaborative leveraged the mapping project to increase awareness and utilization of the new Medicaid dental benefit and recruit dental providers.

To track patient utilization and the number of Medicaid providers serving dual-eligible patients, MDAC uses quantitative data from Maryland Medicaid and the Administrative Service Organization and takes action as needed.

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
--------	--------------------	---------	----------

2. Please provide a detailed description the key aspects of the activity, including the following aspects: administration, operations, and services.

The MDAC mapping project identified three key regions of the state with a large population of dual-eligible adults, which prompted these activities to:

Increase dental benefit utilization focused on areas with a high percentage of dual-eligible adults:

- Help eligible pilot program participants find a dental home.
- Help Medicaid beneficiaries understand their dental coverage. Since there is an annual cap, treatment plans may need to be structured over several years.
- Help Medicaid beneficiaries obtain preventative services on a routine basis to maintain their good oral health and reduce the need for costly restorative services.

Prior to the implementation of the Medicaid Adult Dental Pilot Program in June 2019, Maryland Medicaid mailed welcome packets to all eligible participants that explained the new dental benefit, how to access a provider, and included answers to frequently asked questions (FAQs). Dental providers enrolled in Medicaid received an overview of the program, including patient eligibility requirements, FAQs and dental services reimbursement rates from the Maryland Department of Health. MDAC distributed the patient FAQs to social service agencies that work with the dual eligible population, and developed a provider recruitment flier, including provider FAQs, that was distributed at the Maryland State Dental Association's Chesapeake Dental Conference.

Participation of the dual eligible adult population is essential to the achievement of MDAC's goal of Medicaid dental coverage for all eligible adults. While more than 35,000 welcome packets containing information about the new dental benefit were sent to dual eligible adults, MDAC heard from social service case managers that some clients thought the welcome packet was a scam and needed reassurance about the legitimacy of the coverage. Others set the welcome packet aside and forgot it or threw it away.

MDAC developed a list of more than 100 social service agencies statewide that work with the dual-eligible population. It made presentations to social service organizations serving the largest percentage of duals to help increase awareness of the new dental benefits available to their clients.

As part of the launch of the pilot, MDAC conducted a direct mail campaign to dual eligible adults auto-assigned to safety-net dental clinics at Chase Brexton Health Care in Baltimore and Chesapeake Health Care on the Eastern Shore, areas with a large population of dual-eligible adults. The mailing included information about the new dental benefit and numbers to call to make an appointment, for further information or arrange transportation.

Increase Provider Engagement and Participation:

- Increase the number of private dentists enrolled as Medicaid providers, especially those who work with adults with disabilities.
- Host a continuing education class on “Treating Patients with Anxiety and Special Needs.”
- Work with the Maryland State Dental Association (MSDA) to disseminate messaging about the pilot program to their members statewide.
- Make presentations to social service organizations to increase awareness of benefits available to their clients.
- Connect potential providers with credentialing assistance for those registering to participate in the Maryland Heathy Smiles program for the first time.
- Disseminate FAQs about benefits and market webinars about functionality of the Medicaid billing system.
- Support providers in creating and maintaining dental homes for their patients.

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
--------	--------------------	---------	----------

3. What outputs or direct products resulted from program activities? (e.g., number of clients served, number of services units delivered, products developed, accomplishments, etc.)

While the need for preventative dental care is great for all low-income adults, the special needs of dual eligible individuals make it especially difficult to access care. To help improve access, MDAC:

- Established a Medicaid Adult Dental Collaborative to increase awareness and utilization of the dental benefit through partnerships with dental clinics and social service agencies.
- Conducted a direct mail campaign to increase awareness of this new dental benefit and provide phone numbers to make an appointment, arrange transportation, or answer any questions.
- Increased the capacity of Medicaid providers, especially those who work with individuals with disabilities.
- Increased benefit utilization by helping consumers understand their dental coverage, find a dental home, and obtain routine preventive services.
- Worked collaboratively with Maryland Medicaid to provide feedback on the benefit package and reimbursement rates, identify areas for improvement, and ensure all stakeholders are heard.

The collaborative has been a driving force behind the success of the Medicaid adult dental pilot program. According to Maryland Medicaid, more than 12% of eligible adults received dental care in the first seven months of the program. More than 8,000 claims were processed and Medicaid paid credentialed providers more than \$1.3 million for services rendered. Statewide, there are 683 participating providers, with more than 440 registered as a dental home for eligible adults.

To encourage dental providers to participate in the Medicaid adult dental pilot program and address any uncertainties about treating dual-eligible adults, MDAC hosted a continuing education class on *Treating Adults with Anxiety and Special Needs: Approach and Technique for Positive Outcomes*. Harvey Levy, DMD, MAGD, FACD, FICD, an engaging clinician who frequently presents courses and seminars to dental groups nationwide, led a class at the Maryland State Dental Association designed to give clinicians the knowledge, tools, and practical clinical tips needed to treat dual-eligible adults, many of whom have special needs. MDAC applied for three CEUS for the class, which was approved by the Maryland State Board of Dental Examiners. More than 60 dentists, hygienists, and dental assistants registered for the class.

MDAC collaborated with researchers from the University of Maryland School of Dentistry to gather information about providers’ experiences caring for patients covered by the Adult Dental Pilot Program. The quality improvement survey was designed to be completed by professionals working in dental settings as well as those who work in care coordination for this population. Data obtained informed

MDAC's efforts to provide technical assistance to providers and care coordination agencies, as well as provide important feedback to Medicaid to support improvements to the pilot program to reach a greater number of eligible adults.

INPUTS	PROGRAM ACTIVITIES	OUTPUTS	OUTCOMES
--------	--------------------	---------	----------

4. What outcomes did the program achieve? (e.g., health statuses, knowledge, behavior, care delivery system, impact on target population, etc.) Please include the following aspects:
 - a. How outcomes are measured
 - b. How often they are/were measured
 - c. Data sources used
 - d. Whether intended to be short-term (attainable within 1-3 years), intermediate (achievable within 4-6 years), or long-term (impact achieved in 7-10 years)

Since the launch of the Medicaid Adult Dental Pilot Program in June 2019, thousands of dual-eligible Maryland adults have received access to dental care, many for the first time in years.

Despite the closure of dental offices for several months in 2020 due to the State of Emergency in Maryland and resulting hesitance to see a dentist during the COVID-19 pandemic, the number of dual eligible adults who received diagnostic, preventative, and restorative dental services through the Medicaid Adult Dental Pilot Program was nearly that of the previous year.

Year	No. of Claims	Unique Members	Unique Providers	Medicaid Paid YTD	No. of Members at Cap
2019 ¹	8,017	4,268	563	\$1,360,399	296
2020 ²	7,919	4,140	576	\$1,250,084	297
2021 ³	4,070	2,740	447	\$108,732	8

¹ June 1, 2019 – December 31, 2019

² Per Executive Order due to the State of Emergency in Maryland, dental offices closed for all elective and non-urgent procedures from March 24, 2020 to May 6, 2020

³ January 1, 2021 to June 24, 2021

Source – Maryland Department of Health, 6/24/2021

For the thousands of Maryland adults who are using their new dental benefit, access to dental care has already improved both their oral and overall health. Providers report that patients note how much better they feel overall. In some cases, the treatment of active oral infections has enabled patients to reduce or eliminate their prescription drugs.

MDAC's Medicaid Adult Dental Collaborative will build on this success and address provider engagement, barriers to participation, benefit utilization, and adding services to fit the needs of the Medicaid population. MDAC will continue to strengthen communications and collaboration with Maryland Medicaid to support program improvements and expand eligibility to include adults with chronic health conditions. To build on the release of the state's first ever diabetes action plan, the MDAC Collaborative will work to further document the link between oral health and chronic health conditions, including diabetes, heart disease, and stroke.

Budgetary Information:

Revised January 2021

NOTE: Charts and tables may be used to provide clarity.

1. What is the annual budget for this activity?

\$108,500

2. What are the costs associated with the activity? (Including staffing, materials, equipment, etc.)

Expenses for the mapping project include:

- MDAC personnel & benefits: \$11,930
- Project director: \$21,200
- In-state travel: \$150
- Meetings: \$1,500
- Communications/Education: \$100
- Supplies: \$2,800

Postcards:

Photo rights: 1 image @ \$9.80/image = \$9.80

Printing: 1500 postcards @ \$0.17 each = \$255.00

Postage: 500 postcards @ \$0.56 each = \$280.00

Provider recruitment one-sheets:

Printing (8"x10", 2-sided, color) 100 @ 1.10 ea. + \$110.00

3. How is the activity funded?

The mapping project and associated activities were fully funded through grant support from the DentaQuest Partnership for Oral Health Advancement (now CareQuest Institute for Oral Health), the Leonard and Helen R. Stulman Charitable Foundation, and the Abell Foundation.

4. What is the plan for sustainability?

Although the initial mapping project is completed, MDAC is currently mapping the social determinants of health to gain a deeper understanding of the key issues in each region of the state that negatively affect oral health. The project will identify, by county and zip code, population by race and ethnicity, Medicaid and private dental providers, hospitals and urgent care centers, public transportation routes, healthy food sources, school sealant program sites, and areas of the state with/without a fluoridated public water supply. MDAC will use the data to gain a deeper understanding of the barriers to good oral health faced by particular populations and regions of the state. MDAC will also use the data in the development of the next Maryland Oral Health Plan.

Throughout its history, public and private sector agencies, departments, foundations, and other organizations have financially supported MDAC's programs and activities. MDH/OOH has financially supported MDAC since its inception with collaborations on to address oral health access, disease prevention, and literacy and education.

A key component of the CareQuest Institute for Oral Health's grant making strategy is elevating the importance of community voice in driving local and statewide change. This approach relies on a combination of community and state-based advocacy organizations that use a health and/or racial equity lens to influence policy. Each of the past five years, CareQuest Institute has awarded MDAC a grant in support of its collective network of state partners and community stakeholders to change state policies to address inequities in oral health care, particularly for the Medicaid adult population.

Lessons Learned and/or Plans for Addressing Challenges:

1. What important lessons were learned that would be useful for others looking to implement a similar activity? Was there anything you would do differently?

Small, simple, and low cost data projects can yield big benefits.

The mapping project, although a minor component of MDAC's overall work to ensure the success of the Medicaid Adult Dental Pilot Program, gave MDAC a factual representation of the geographic distribution of dual-eligible adults, Medicaid providers, and social service agencies across the state. This enabled MDAC to focus its efforts to increase awareness of the new dental benefit in areas with the greatest number of dual-eligible adults, recruit adequate Medicaid providers, test marketing initiatives, and make more effective use of its limited resources.

The maps revealed that a high concentration of duals reside in Baltimore City, Baltimore County, and on Maryland's Eastern Shore, so MDAC targeted its direct mail campaign to those areas. They highlighted areas with a shortage of Medicaid providers, which enabled MDAC to work with the state dental association to recruit Medicaid providers in underserved regions of the state. The maps identified areas in which social service agencies that serve dual eligible adults operate. MDAC used this data to identify potential partners, form new relationships, and develop key partnerships to increase awareness of the new Medicaid dental benefit.

The importance of data cannot be overstated.

It was helpful to see the locations of Medicaid providers, particularly in relation to the total population and population of duals in each county. The lack of Medicaid providers in rural areas was a clear visualization of the challenges many Marylander's face in accessing care. It reinforced the need to recruit providers in underserved with a large population of duals.

Partnerships are crucial.

The MDHOH and Maryland Medicaid were instrumental to the successful completion of this project. MDAC collected data from the Office of Oral Health on federally qualified health centers, community health centers, safety net clinics, and clinics at schools of dentistry and dental hygiene throughout the state. Maryland Medicaid provided the number of dual-eligible in Maryland by county. MDAC worked with the Evaluation and Surveillance Program Manager at the Maryland Department of Health Office of Oral Health, who used the state's Geographic Information System (GIS) to develop the final maps. Their help and support were invaluable to the project.

2. What challenges did the activity encounter and how were those addressed?

MDAC is one of only a handful of states that does not have an adult dental benefit in Medicaid. However, Maryland Medicaid does cover basic preventive, diagnostic, and restorative dental services for pregnant women and former foster children under age 26. Although Maryland has a robust network of private and public health dentists that serve children on Medicaid, dental services for adults are provided primarily through safety net providers. Since the Maryland Healthy Smiles list of dental providers does not distinguish between those that serve children and those that serve adults, MDAC used the Maryland Oral Health Resource Guide, developed by the Maryland Department of Health, to identify the clinics and locations that serve adults on Medicaid.

Another challenge was to figure out how many adults in Maryland were dually eligible for Medicaid and Medicare, and to determine the areas of the state in which they reside. MDAC asked Medicaid for the number of duals by zip code, but the department could not provide that information due to HIPPA requirements. However, Medicaid did give MDAC the number of duals that reside in each of the 24 counties in the state. MDAC used U.S. Census data to map the overall population. This helped MDAC determine duals as the percentage of the total population of each county in the state.

MDAC has an extensive network of oral health stakeholders from across the state, including clinical care providers and representatives from state and local governments, managed care organizations, non-profit organizations, associations, foundations, and academia. However, MDAC did not have many relationships with social service agencies, and especially those that serve dual eligible adults.

MDAC leveraged its existing relationships with the Maryland Department of Health Office of Genetics and Children with Special Health Care Needs and Parents Place of Maryland to connect and form partnerships with social service agencies that serve adults with disabilities, including

The Arc of Baltimore and the Coordinating Center. MDAC conducted a Google search to identify social service agencies statewide that serve dual-eligible adults, resulting in a list of more than 100 mapped by zip code.

Available Information Resources:

Share any models, tools, and/or guidelines developed by the program specifically for this activity that may be useful to others seeking additional information. Hyperlink resources if possible.

Maryland Senate Bill 284: *Maryland Medical Assistance Program – Dental Coverage for Adults – Pilot Program*: <https://legiscan.com/MD/bill/SB284/2018>

Maryland Medicaid Adult Dental Pilot Program Overview:
https://www.mdac.us/file_download/inline/c9b60298-2f63-43fc-9863-d6e5f055056a

Mapping project: <https://www.mdac.us/initiatives/medicaid-collaborative/mapping-project.html>

Maryland Maps: Populations vs. Providers, Social Service Agencies:
https://www.mdac.us/file_download/inline/6032c956-bd5e-490b-9e78-771d119a6773

Maryland Oral Health Plan 2018-2023: https://www.mdac.us/file_download/inline/de993e4e-e717-45b4-aff0-435d29cf4c8e

TO BE COMPLETED BY ASTDD	
Descriptive Report Number:	23015
Associated BPAR:	Dissemination of Data from State-Based Surveillance Systems
Submitted by:	Maryland Dental Action Coalition
Submission filename:	DES23015MD-medicaid-adult-mapping-project-2021
Submission date:	August 2021
Last reviewed:	August 2021
Last updated:	August 2021