



# Dental Public Health Project Descriptive Report Form

Name of Project
<b>A Unified Approach to Patient Wellness: Integrating HPV Prevention and A1c Testing in Dental Care</b>
Executive Summary
<p>Virginia Garcia Memorial Health Center (VGMHC) is leading innovative work in medical dental integration through human papillomavirus (<a href="#">HPV</a>) prevention and <a href="#">HbA1c</a> testing. This work encompasses state policy alignment, integration of oral and systemic health, feasibility in the safety-net setting, and expanding access to preventive services without new infrastructure.</p> <p>The Oregon legislature passed a law in 2019 allowing dentists to administer all vaccines to patients of all ages after completing an Oregon Board of Dentistry approved course. When COVID-19 reached our service area shortly thereafter, we quickly trained dentists to administer COVID vaccines and later included flu and HPV vaccines. The state’s childhood immunization rates were already falling, and the dental team could provide another entry point for parents to ensure their children were vaccinated. Because of the increasing rate of HPV-related oropharyngeal cancer cases nationally, the dental area narrowed our scope to focus on HPV education and vaccinations. The dental team continues to partner with medical teams for additional vaccines as needed for our patients.</p> <p>Building on successful HPV education and vaccination efforts, the dental team expanded its role to support patients with diabetes. By offering HbA1c testing during dental visits, access to screening increased, enabling earlier identification of undiagnosed diabetes or prediabetes and facilitating timely intervention. This integration improves patient convenience by reducing the need for separate primary care visits, while reinforcing a preventive, whole-person approach to care.</p> <p>Dental teams serve as an important extension of primary care, closing gaps in routine diabetes monitoring and easing capacity constraints across the system. This effort strengthens collaboration between dental and medical providers, enhances care coordination, and expands the impact of dental professionals on overall health, thus positioning oral health settings as a valuable touchpoint for proactive chronic disease management.</p>
Name of Program or Organization Submitting Project
Virginia Garcia Memorial Health Center (VGMHC)

## Detailed Project Description

### Project Overview

#### HPV Vaccination

HPV is the most common sexually transmitted infection in the U.S. with nearly every sexually active person having an HPV infection in their lifetime.<sup>1</sup> HPV can cause six different types of cancer, including oropharyngeal cancer, of which 70% are HPV positive.<sup>2</sup> Nationally, HPV-related oropharyngeal cancer cases are rising, with an estimated 3,500 new cases per year in women and 16,200 per year in men.<sup>3</sup> Current projections estimate an upward trend for the next decade, and Oregon is no exception.

Childhood vaccination rates have plummeted nationwide. Oregon has one of the highest non-medical opt-out rates in the nation at 9.7% compared to the national rate of 4%.<sup>4</sup> HPV vaccination is 90% effective at preventing these cancers, especially when given to children ages 9-12. HPV vaccination rates are even worse. Nationally, 63% of children ages 13-17 are vaccinated.<sup>5</sup> In Oregon, about 65.8% of children are vaccinated.<sup>6</sup> In 2026, these grim statistics led the Oregon legislature to declare [March 4 HPV Awareness Day](#) to reduce the stigma around HPV vaccinations through education and information. Dental providers see many adolescents and young adults who are unvaccinated for HPV; they can serve as an access point for HPV vaccine education and vaccinations.

#### Diabetes HbA1c

Diabetes is one of the most prevalent chronic diseases seen in patients at VGMHC. Managing diabetes through regular HbA1c testing is challenging in primary care due to competing demands, limited visit time, and difficulty ensuring patients complete routine monitoring.

Dental teams were already involved in addressing diabetes due to an incentive for meeting a statewide Medicaid metric for completing dental exams for patients with diabetes. This created an opportunity to close the HbA1c testing gap by incorporating this testing into dental care, expanding access, and improving timely monitoring. It reinforced coordinated, team-based chronic disease management, making this a practical and high-impact initiative.

#### Target populations

- HPV Vaccination: HPV vaccines are offered to dental patients ages 9-26, most of whom come from low-income households. Additionally, about 54% of patients are Latiné and 13% are uninsured. While the vaccine is 90% effective against HPV-related cancers when given to children ages 9-13, it remains highly effective for those ages 14-26.<sup>7</sup>

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<sup>1</sup> National Cancer Institute, 2021

<sup>2</sup> National Cancer Institute, 2025

<sup>3</sup> CDC, 2021

<sup>4</sup> Johns Hopkins Bloomberg School of Public Health, 2025

<sup>5</sup> CDC, 2024

<sup>6</sup> America's Health Rankings, 2024

<sup>7</sup> CDC, 2024

- Diabetes HbA1c: Initially, the target population was patients who were overdue for HbA1c testing who had a primary care provider (PCP) at VGMHC. Later, this was expanded to include patients without a PCP when there was a systemic concern. VGMHC provided the required documentation for referral and follow-up with abnormal results.

## Project goals

### HPV Vaccination

**Goal:** To educate all dental staff and patients about the HPV vaccine's ability to prevent oropharyngeal cancers and provide on-site vaccination in the dental clinic. The objective was to increase the knowledge of our clinical staff, thereby increasing their confidence in having conversations with patients and caregivers on the topic.

#### **Measures:**

- Train the entire dental team to confidently discuss the HPV- oropharyngeal cancer connection and introduce HPV vaccination to parents.
- Provide materials designed by the [Oregon HPV Dental Task Force](#) to educate parents and encourage HPV vaccines for their children.
- Train VGMHC dentists at sites co-located with medical to offer the HPV vaccines and establish a pathway to refer the patient to primary care.

### Diabetes HbA1c

**Goal:** To increase awareness of the entire dental team on the clinical significance of HbA1c testing in diabetes management and teach them to perform the point of care test.

#### **Measures:**

- Establish protocols for identifying patients eligible for the HPV vaccination, placing orders, and documenting results.
- Implement a system to ensure test results are routed to the PCP.
- Automate a workflow to capture required elements and route patients without a PCP to membership services to establish care, along with required follow-up.

## 1. What lessons learned would be useful for others seeking to implement a similar project, including what did not work?

Critical to our success with this integrated work is a shared electronic health record (EHR) with primary care ([Epic](#)), which eliminates duplicative work and risk communication breakdowns.

### HPV Vaccination

Initially, the goal was to provide several types of childhood immunizations in the dental chair. Dentists completed training for all vaccines, but the complexity of vaccine forecasting forced a rethinking of this approach. Additionally, storing vaccines required a monitored refrigerator. Ultimately, the dental program focused on HPV vaccinations due to their direct connection to oral cancers. These vaccinations were provided in dental clinics co-located

with primary care, which already had vaccine supplies, refrigeration, and monitoring processes in place.

The primary care vaccine coordinator at each clinic site is responsible for maintaining the refrigerator temperature logs, vaccine ordering and expiration date monitoring. Utilizing the medical inventory and the shared EHR links to the state vaccine registry streamlined both documentation and inventory management.

The dental program expected to provide more first doses of HPV vaccinations; however, nearly all doses administered were second doses. Patients who begin the series in primary care may be more comfortable completing it with a dentist.

**Key lessons learned:**

- Review vaccine history like a health history. Begin HPV conversations while discussing the health history or during oral cancer screening.
- Add HPV vaccine history to patient questionnaire if a shared EHR if not available.
- Recommend vaccines similar to recommending dental care.
- Reinforce HPV vaccinations as the norm, like routine childhood immunizations.
- Use clear, consistent messaging across medical and dental visits. This shared messaging included HPV vaccine posters, text messaging campaigns and digital displays in patient waiting areas.

*Diabetes HbA1c Testing*

HbA1c testing was initially provided for patients who showed systemic signs of diabetes, but had no diagnosis or primary care physician. Due to Oregon state requirements for dental HbA1c testing, VGMHC had to first ensure compliance with rules for documentation and referral. As a result, the dental program began with patients with an established VGMHC PCP, who were overdue for an HbA1c and later expanded to include patients without a PCP.

**Key lessons learned:**

- A strong relationship with our integrated training team was essential; the dental team adapted the medical workflows for their use.
- If dental does not have access to shared vaccine supplies with a medical team, there is a significant learning curve and cost to set up and maintain a monitored vaccine refrigerator.
- Ensure staff can identify overdue HbA1c tests. VGMHC includes indicators in the schedule view, making identification easy for staff when reviewing schedules for preparation for the day. Overdue HbA1c tests and other care gaps automatically appear in the after-visit summary for staff to review with the patient.
- VGMHC has a Vaccine and Lab Program Manager who is responsible for gaining the lab waivers and maintaining elements for compliance. Without this expertise, there would be a steep learning curve and longer time to implement.
- Ongoing (monthly and quarterly) maintenance for the HbA1c testing machines has been challenging to incorporate into dental assistants' standard work.
- Have a clinical team member who can customize workflows and automations in the EHR is why this work has been successful. VGMHC's Associate Dental Director understood clinical workflows from working in the dental clinic and could translate that into customized workflows within the EHR.

- Hygienists are well positioned to discuss and implement HbA1c tests.

## Resources, Data, Impact, and Outcomes

### 1. What resources were necessary to support the project, such as staffing, volunteers, funding, and collaboration with other agencies or organizations?

Project success relies heavily on three critical roles: a data analyst versed in dental workflows to ensure accurate, trustworthy data extraction; an EHR informatics specialist to build and automate workflows within the health record; and a project manager to track details and drive momentum while clinical staff remain focused on patient care and production.

#### HPV Vaccination

- Participation/collaboration: VGMHC's Dental Director participated in the Oregon HPV Dental Task Force from 2021-2022 and utilized the [Human Papillomavirus \(HPV\) Dental Toolkit](#) for patient and provider education materials.
- VGMHC initially received a grant from the Knight Cancer Institute to fund the primary work on this initiative, including customizing and printing educational materials for staff and patients, addressing billing customizations with the EHR, and piloting HPV vaccinations in co-located clinic sites.
- Subsequent funding was granted by a Medicaid payor to provide ongoing training for staff and education materials for patients.

#### Diabetes HbA1c

- The clinical training team, which included medical assistant, nurse, pharmacy tech, dental assistant and dental hygiene trainers, was instrumental in designing workflows and adapting training materials for the dental team. The entire training team trained over 65 dental team members during an all-dental staff meeting. All dental team members were trained to administer HbA1c tests.
- The EHR team was instrumental in adapting workflows for the dental team and ensuring billing and coding were done properly, as well as capturing critical elements required by Oregon state law.
- HbA1c point-of-care testing machines were purchased during an end-of-year sale ahead of the roll out in anticipation of this project launch. Additional machines were later purchased with money through a grant from a Medicaid payor.

### 2. What process measure data (counting) were collected?

#### HPV Vaccination

- Number of overall staff trained on HPV and the importance of HPV vaccines: Approximately 132 at time of project, which included all dental staff including receptionists, referral coordinators, and dental operations managers. It was important that the entire department be able to talk about HPV vaccines and spark conversations outside the clinic as well.
- Number of staff trained to conduct clinical discussion with parents: Initially 15 dentists, 30 dental assistants, and 9 dental hygienists.
- Survey to measure improvement of staff understanding:

- Oral health implications of HPV: 23.1% improvement – staff who agree or strongly agree “I have an understanding of the oral health implications of HPV.”
- Value of HPV vaccinations: 7.7% improvement – staff who agree or strongly agree “I understand the value of HPV immunization.”
- Comfort level for talking to patients about HPV vaccination: 17.9% improvement – staff who agree or strongly agree “I feel comfortable speaking to patients about HPV vaccinations.”
- Improve parent awareness of HPV: half of the dental clinics saw an increase in HPV vaccination rates within 90 days after a dental visit, though not a statistically relevant improvement.
- Paid claims: 15 claims processed by insurance, 4 VGMHC Foundation assistance for uninsured patients, and 4 resubmitting.
- HPV vaccinations administered through May 2026: 23

#### Diabetes HbA1c

- Number of dental staff trained: 65
- Number HbA1cs administered from March 2025 – May 2026: 256
- Number HbA1cs declined: 80
- Acceptance rate of HbA1cs by patients: 76.2%

### **3. What outcome measure data (results) were collected, such as improvement in health?**

Dentists were trained to administer HPV vaccines in 2022. The number of HPV vaccines administered in the dental clinic is statistically insignificant at this time, so it would be difficult to measure improvements in health. Looking at HPV vaccination rates across the organization is potentially misleading as vaccine misinformation has grown significantly over the past years. VGMHC continues to monitor the number of HbA1c tests provided in the dental clinic and works with medical partners to determine if dental screening is helping to improve the diabetes – HbA1c Poor Control (CMS122) metric. VGMHC trained dental staff to administer HbA1c tests in March 2025 and has been collecting data for about a year.

### **4. How frequently were data collected?**

- Staff were surveyed during the active HPV rollout to measure improvement of understanding and comfort while addressing patients about HPV vaccines.
- HPV vaccination and HbA1c testing data are collected in the EHR as part of the visit, Data collection is on-going.

### **5. How were the results shared?**

- HPV vaccination data are updated weekly and included on our intranet. These data are shared with dental staff and across the organization. Most of this data sharing occurs internally. Most of the external data sharing has been related to process and replicability.
- The VGMHC Dental Director shared progress with vaccinations and in particular HPV, with a variety of organizations, including:
  - Organization for Safety, Asepsis and Prevention (OSAP) annual conference in Minneapolis, MN, in 2022 (invited)
  - American Association of Dental Boards (AADB) annual meeting in 2022 (invited)

- The NW Tribal Comprehensive Coalition meeting in 2022 (invited)
- The NW Tribal Support Center annual meeting in 2023 (invited)
- An American Dental Association Roundtable in 2023 (invited)
- The National Organization for Dentist Immunizers (NODI) in 2024
- The National Network for Oral Health Access and the National Center for Health in Public Housing webinar, *Strengthening Oropharyngeal Cancer Screening in Dental Settings*, in 2026 (invited)
- HbA1c data are updated weekly and shared on a dashboard, which is also shared with the VGMHC board of directors as a measure of our medical/dental integration.

## Budget and Sustainability

### 1. What was the budget for the project?

A grant of \$25,500 was divided as follows: 0.12 FTE project manager salary for 39 weeks (55% of grant), start-up supply costs (2%), initial printing of educational materials (4%), conference travel (28%), and \$3,700 for EHR improvements (11%).

VGMHC does not have a budget for HbA1c implementation. Point of care HbA1c testing machines years were purchased before the pilot at a very reduced price; however, due to the pandemic, implementation was significantly delayed. Existing meeting times were utilized for training staff, as well as using existing workflows and project management time that was part of other initiative work. Additional supplies (controls, optical testing, lancets, trays, Band-Aids) cost about \$300, with an analyzer average cost of \$3,000 per clinic site. On-going costs were approximately \$200/year for controls, optical scan tests, and other needed supplies. The cost of an HBA1c cartridge per patient is approximately \$8.

### 2. How was the project funded, such as governmental or philanthropic funding?

VGMHC received a grant from the Knight Cancer Institute at Oregon Health & Science University for \$25,500. At that time, this was the only dental funding granted. Significant funding from CareOregon Dental, an Oregon Medicaid dental plan payor, supported investments in the dental program aimed at increasing dental access and supporting quality improvement initiatives. Some of this funding supported both HPV vaccinations and HbA1c implementation, which helped cover the cost of project management and data analyst support for the dental team.

### 3. What was the sustainability plan for the project?

**Sustainability of HPV Immunizations:** VGMHC will continue providing HPV vaccinations at co-located sites, while leveraging medical department supplies to maintain cost-efficiency. HPV advocacy and communication training are incorporated into the new hire onboarding process. Financial viability is managed through established insurance billing workflows. Currently VGMHC bills a CPT code on a medical claim, with the billing provider being the site medical director and the service provider being the dental team member. We can report reimbursement from Medicaid at this time. We have not experienced billing commercial insurances as yet. Initial conversations with a plan that has Medicaid and commercial plans, indicated reimbursement would be possible from their commercial plan. Ongoing monitoring of reimbursement and an annual review is conducted to ensure long-term operational feasibility.

**Sustainability of HbA1c testing in dental clinics:** VGMHC continues to provide HbA1c testing in all dental clinics. Staff have visibility in the EHR to determine the need for tests. Testing and communication training is incorporated into the new hire onboarding process. Financial viability is managed through established insurance billing workflows. Reimbursement is provided from Medicaid plans. VGMHC does not have experience billing commercial plans currently. Ongoing reimbursement monitoring and an annual review will be conducted to ensure long-term operational feasibility for the dental program.

**Resources**

[Oregon House Bill 2220](#) – relating to vaccines administered by dentists

[Oregon Laws related to Dental HbA1c Testing](#)

[2022.04 Dental Office HPV Materials: Toolkit ENG+SPAN Web.pdf](#)

[Figure 1 VGMHC A1c One Pager](#) Figure 1 VGMHC A1c One Pager

[Figure 2 VGMHC Dental A1c Workflow](#)

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## HbA1c Testing: Why it is Important for Our Patients and How Our Dental Teams Can Help:

### What is HbA1c Testing?

The A1c test measures average blood sugar levels over the past 2-3 months, helping assess diabetes management and risks for complications like heart disease, nerve damage, and eye issues.

### How This Helps Our Patients

**Early Detection:** Identifies undiagnosed diabetes or prediabetes, allowing early intervention.

**Preventive Care:** Helps prevent serious conditions like heart disease, kidney failure, and blindness by managing blood sugar.



**Comprehensive Care:** Ensures diabetes is controlled, reducing long-term complications.

**Efficient Appointments:** Patients can get an A1c test during dental visits, avoiding an additional appointment.



### Why It's Important

**Helping Meet a Challenging Metric and Have a Major Impact on Primary Care:** Achieving effective diabetes management and regular A1c testing is an ongoing challenge for primary care providers. Dental teams help relieve pressure on primary care providers, making diabetes management more effective.

**Better Patient Outcomes:** Early intervention and monitoring improve patient health.

**Teamwork at Its Best:** This initiative isn't just about adding a test, it is enhancing the teamwork between dental and primary care teams for better patient care.

**Expanded Role:** Dental teams contribute to broader healthcare goals, impacting patient health directly.

### Shaping the Future of Healthcare - Together!

A1c testing in dental settings is a step toward transforming patient care, offering an exciting opportunity for dental teams to make a significant impact on patient health.



Figure 1 VGMHC A1c One Pager

# VG Dental A1c Workflow

Reason: Overdue A1c or Provider concern

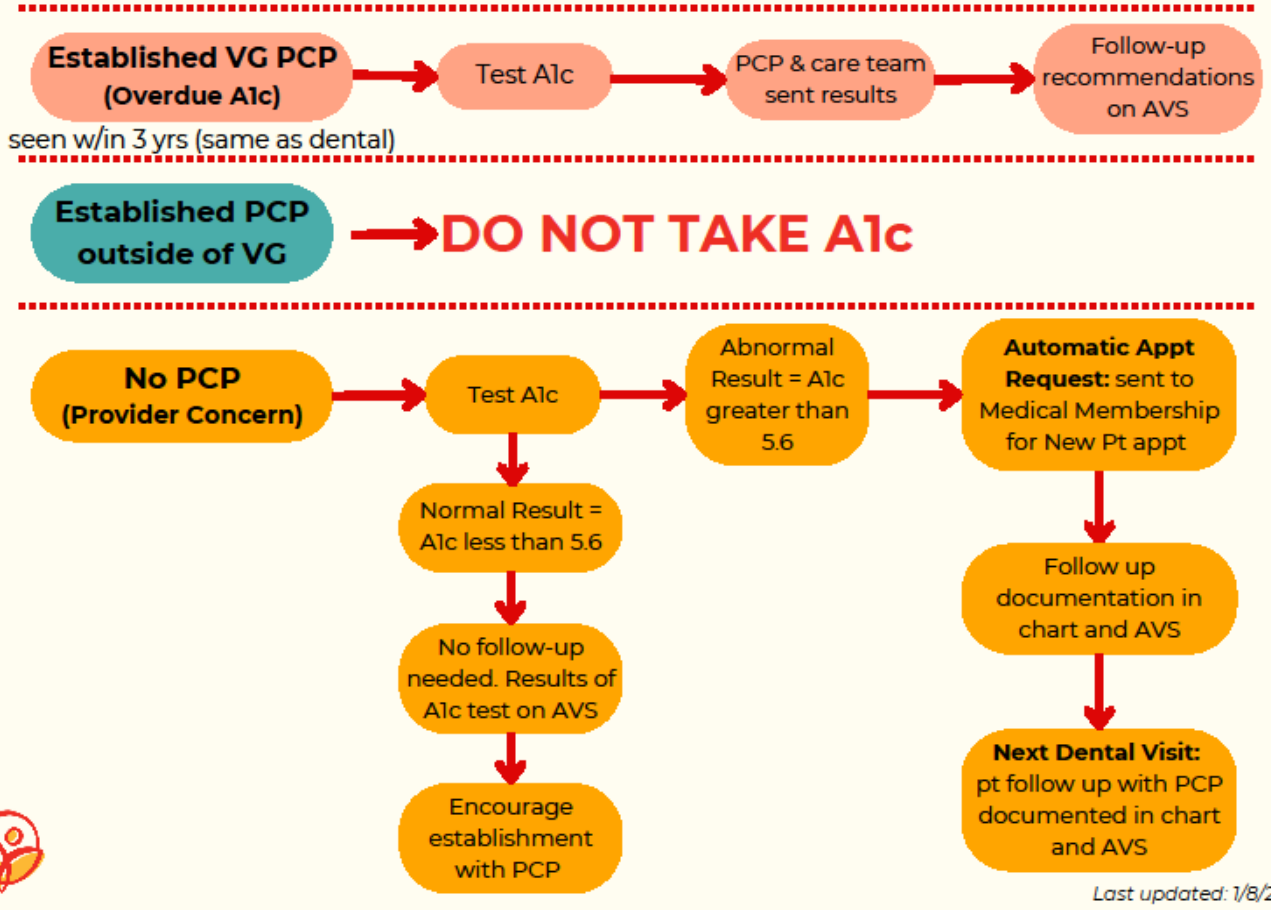


Figure 2 VGMHC Dental A1c Workflow

Last updated: 1/8/2026