



# Dental Public Health State Activity Submission Form

ASTDD’s goal in collecting information about successful state Dental Public Health activities (e.g., practice, program, service, event, or policy) is to share this information with other states, territories, and stakeholders who may be interested in implementing similar activities. We thank you for your time and willingness to share your experiences.

Please complete the form below and return to Lori Cofano, ASTDD Best Practices Project Coordinator, at [lcofano@astdd.org](mailto:lcofano@astdd.org)

| <b>FIRST CONTACT PERSON FOR INQUIRIES</b>  |  |
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| <b>SECOND CONTACT PERSON FOR INQUIRIES</b> |  |
| Name:                                      | Tina Fulks, RDH, BA  |
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| <b>STATE DENTAL PUBLIC HEALTH ACTIVITY (e.g., practice, program, service, event, or policy)</b><br>Minimum=300 Maximum=500  |   |
|---|---|
| Activity title:   | <b>Ohio Department of Health School-Based Dental Sealant Program (SBSP)</b> |
| State/Territory:  | OH  |
| Summary overview, which may include the following:  |   |
| <ul style="list-style-type: none"> <li>• Objectives</li> <li>• Rationale</li> <li>• Personnel</li> <li>• Key partners</li> <li>• Costs &amp; sustainability</li> </ul>  |   |
| <p>The Ohio Department of Health (ODH) Oral Health Program (OHP) has operated a School-based Dental Sealant Program (SBSP) for more than 40 years. Data collected through a screening survey of 3<sup>rd</sup> grade schoolchildren in 1988 indicated that more than 90% of caries was on the pits and fissures of the back teeth, but only 11% of students had one or more sealants. Shortly after, the ODH began to provide grants to local agencies to operate SBSPs, funded through the Maternal and Child Health Block Grant. Schools with 40% or more of students eligible for the Free and Reduced-Price Meal Program are targeted for the program. SBSPs bill Medicaid for eligible children; ODH pays for sealants for non-Medicaid eligible students.</p> |   |

Typically, students in grades 2 and 6 participate. Teams of dental hygienists and dental assistants bring portable dental equipment and supplies to schools. Parental permission is required, and a letter is sent home indicating services provided. Students in need of follow-up dental care are referred to school staff for assistance in getting care. Students whose families do not have a dentist are most typically referred to local safety net dental programs.

Sealants are re-checked the following year to assess long-term retention (LTR). The most recent complete LTR data of resin-based sealants averaged 91% in 2019. Due to COVID, SBSPs switched to glass ionomer cement sealants, starting the fall of 2020. Data are now indicating that LTR has declined by approximately 20%, however, these data are based on fewer schools and sealants placed. Other measures of quality are assessed as well via on-site reviews and program reports.

The number of grants has varied through the years depending on funding. At one time, 22 programs funded by state and local dollars were operating in 42 Ohio counties and about 29,000 children received sealants each year. Over time, programs have consolidated to serve multiple counties, and some have ceased operations for various reasons. Today, 12 grants totaling approximately \$724,000 are funded by the OHP; these serve 407 schools in 34 of Ohio's 88 counties. Before the COVID-19 pandemic, about 20,000 children were served each year by state-funded programs. State and local SBSPs in Ohio have primarily served children in Ohio's large urban centers and schools in Appalachian Ohio, a 32-county area along the eastern and southern borders of the state.

#### Lessons learned (Successes and **Challenges**):

##### Program Administration:

There are several duties that a local SBSP team member must be able to do to make the program successful: program promotion in the community, liaison to participating schools, classroom education and promotion; distribution and collection of consent forms, Medicaid billing, and reporting. We have seen that these tasks achieve the best results when the person doing them is dedicated to the SBSP and does also have a position elsewhere. Similarly, better results are seen if members of the sealant team are only employed by the SBSP. The team needs to have a lot of flexibility in their schedules to accommodate snow days or other occasions when school is closed, or the program can't be accommodated. If the sealant team members have other jobs, rescheduling the day at the school can be difficult. Days or even a week may be lost in getting a school rescheduled. It's important to be clear about the demands of this program when discussions are first occurring so that potential applicants understand the nature of the work and expectations.

##### Program Participation:

Program participation is a challenge with SBSPs and is the one quality assurance metric that is somewhat disappointing, as it has declined in the past several years even prior to the impact of the COVID-19 pandemic. The OHP plans to conduct an evaluation of the SBSP which will include focus groups or a survey of parents to better understand the reluctance of parents to grant consent.

Better participation is seen when SBSPs provide consent forms to schools at the beginning of the school year, so the forms are sent home with all other "start of school year" paperwork. Consent will drop if forms are sent home just before the program is scheduled to start at a school. Incentives can be effective in increasing the return of consent forms. Classroom education is important to get students on-board as they can influence whether parents give consent. Classroom education and incentives can also help to get support from teachers who have a lot of influence on students. The OHP provides a sample consent form to schools in the spring so that it can be printed, and copies provided to schools before the end of the school year. The OHP assists in translating the form into several languages.

##### Medicaid Billing:

Given the FRPMP eligibility requirements of ODH-funded sealant programs, a substantial proportion of children at schools with sealant programs are expected to be Medicaid beneficiaries. Some agencies that operate SBSPs do not provide many other clinical services and are not always knowledgeable or experienced in billing Medicaid. In addition, they may not be versed in making sure that they have a credentialed dentist for billing. Currently in Ohio, agencies that operate SBSPs must initiate the process to recredential providers on a regular basis with each Medicaid managed care plan. Local SBSPs sometimes forget how long a process this can be and their dentist's

credentialing expires and they are unable to bill. The OHP reminds SBSPs of the need to maintain the credentials of dentists and serves as an intermediary with the Ohio Department of Medicaid when problems arise.

Many of the challenges of operating a SBSP can be prevented by ensuring expectations are clear on various aspects of the program when a local agency is considering whether to apply for funding or when they are newly funded. For example, expectations are made clear in the Request for Proposal (RFP) so programs understand what they must commit to if funded. A Bidders' Conference is conducted during the application period to review provisions in the RFP and emphasize program expectations and recommendations. Answers to questions posed by potential applicants are posted on the OHP website so all can see them.

| <b>TO BE COMPLETED BY ASTDD</b> |                              |
|---------------------------------|------------------------------|
| Activity Number:                | 38002                        |
| Submission Date:                | May 2022                     |
| Submission Filename:            | SUM38002OH-sealant-prog-2022 |