The Mid-Ohio Valley Health Department (MOVHD) is the only regional health department in West Virginia (WV) serving six counties. The Oral Health Program at MOVHD began in December 2007 with hiring a full-time dental hygienist/coordinator. MOVHD is one of only three health departments of 49 in the state that have any type of dental program. Since oral health is not classified as one of the ten essential public health services, it has not received state funding other than for initial start-up funds. Oral health education and community outreach are provided across the lifespan to all sectors of the population. Low income children and adults are aided in obtaining needed dental treatment. The three main service programs are:

I. Early Smiles, First Dental Visit: Is directed toward the large population of low income families through the MOVHD Clinical Department and Women, Infant and Children’s Programs (WIC). Early Smiles, First Dental Visit is an attempt to reach the youngest most vulnerable children to prevent dental caries. MOVHD Public Health Practice Dental Hygienists, with Public Health Practice Permits through the WV Board of Dental Examiners, educate parents of children ages one-five and aid in establishing a dental home. Preventive treatment is provided when appropriate.

II. The School-Community Partnership for Children’s Oral Health in West Virginia: Provides oral health screenings and preventive dental services of prophylaxis (cleaning), fluoride varnish and dental sealants when appropriate in Wood and Roane County Schools. The goals of the program in addition to education and prevention are a positive first dental experience and to aid in establishing a dental home. The program is managed by registered dental hygienists MOVHD addresses Healthy People 2020 objectives for children and adolescents in programs but the main focus of this reporting is on the adult program.

III. Smiles for Life (SFL) Adult Screening and Referral Program: Provides a means for adults 18 and over who meet income guidelines to obtain “most needed” dental treatment. Program goals are to provide a safety net for the uninsured and under insured of the region, while reducing the number of hospital emergency department visits for dental pain and infection. Education is a strong component of the program to inform patients about prevention and accept personal responsibility for their own health. The SFL Program was developed in response to the 2009 Mission of Mercy (MOM) Free Dental Clinic held at West Virginia University (WVU) at Parkersburg. SFL is a partnership between MOVHD and the Blennerhassett Dental Society with 23 local dentists and 19 dental hygienists donating dental treatment from their private practices from 2011-2015.

The cost to run the SFL Program in fiscal 2015 was $187,790 with $112,217 to cover salary and fringe of a full-time dental hygienist coordinator, full-time office assistant and part-time dental hygienist. The remaining budget covers $40 patient visit stipend for overhead to the dentist volunteers and usual costs to run an office. The stipend was determined based on input from providers. An agreement with the MOVHD is renewed for each dentist annually.

The SFL Program is a true public/private partnership fulfilling an unmet need in the community.(Not to be confused with the Smiles for Life Curriculum) Adult patients are screened through the health department and placed with area dentists who volunteer services from their own office. MOVHD Public Health Dental Hygienists act as gatekeepers screening patients and gathering information to best serve patients and save time for the volunteer dentist. Most patient records are transmitted electronically, a form of teledentistry. Some referrals to specialists are provided through electronic transmission and review of patient records including health history, charting and x-rays. The SFL model provides a consistent, infection controlled source of care in lieu of a once a year mass clinic like
a Mission of Mercy. Providers can be most efficient donating services from their own space while utilizing their own staff, equipment and preferred dental materials. The SFL model is cost efficient compared to a private dental practice or fully staffed treatment facility. Preliminary data indicates that SFL contributes to a 14% reduction in emergency department (ED) visits for dental pain and infection as well as it provides a resolution for the patients’ infection.

**Lessons Learned:**

Sustainability has been the biggest challenge with the SFL Program. Although utilizing dental providers volunteering from their offices is the most economical way to go about providing services there are still costs to run the program. Foundations want to see sustainability over time. The clients served do not have money to pay for services. The State government does not see the value nor realize the negative economic impact of poor oral health.

The SFL Program is a great public/private partnership providing a needed service to the community yet it has received little recognition from state government in the way of ongoing financial support. Past advocacy efforts were having success but changes in political appointments have not provided continued support. Advocacy efforts are ongoing through the MOVHD Administration, WVSOPH and the WV Oral Health Coalition. As a government agency, MOVHD is not permitted to have fundraising events like other non-profits.

Plans for improvement include the merger with the MOVHD Clinical Department that has more experience with billing and providing services to low socio-economic clients. A new agency Executive Director and Finance Director have been reviewing all operations to implement cost-saving measures. The direction of the Clinical Department is also analyzing MOVHD Oral Health Department operations for economy and efficiency. Increased fees have been approved that unfortunately must be passed on to the patients. Utilizing a billing specialist has helped recoup unrealized Medicaid reimbursement. Since April 2015, $22,548 has been reimbursed by Medicaid, double the amount received in 2014. Obtaining a housing source and increased use of dental and dental hygiene students on rotation will help increase program capacity for patients. Collaboration with the Benedum Foundation and the WVU School of Dentistry Rural Health Program has successfully secured a student housing source. Additional Health Science students in medicine, nursing and pharmacy will also be using the facility for rural rotations to help maximize its capacity and cost effectiveness

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