

Integrating Oral Health Care into Primary Care

A Resource Guide



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Introduction



In 2000, *Oral Health in America: A Report of the Surgeon General* emphasized that oral health is integral to overall health and should not be viewed as separate from overall health.¹ Since then, several federal reports have highlighted integrating oral health care into primary care as a promising strategy to expand access to oral health care and reduce health inequities; improve care coordination, health outcomes, and patient satisfaction; and reduce health care costs. The 2011 Institute of Medicine reports, *Advancing Oral Health in America* and *Improving Access for Oral Health for the Vulnerable and Underserved*, recommended that the Health Resources and Services Administration (HRSA) address the need for improved access to oral health care through the development of a core set of oral health competencies for non-oral-health professionals.^{2,3} In response, HRSA released *Integration of Oral Health and Primary Care Practice*, which provides interprofessional oral health core clinical competencies to facilitate change in the clinical practice of primary care health professionals working in safety net settings.⁴ This document was followed by the release of the *U.S. Department of Health and Human Services Oral Health Strategic Framework 2014–2017*, which asserts that interprofessional education and collaborative practice present

tremendous possibilities for integrating oral health care and primary care and improving patient-centered care.⁵ In addition to these federal reports, many organizations have developed resources to support the integration of oral health care into primary care. The focus of primary care for pregnant women, infants, children, and adolescents includes family medicine, pediatrics, and obstetrics and gynecology.

Young children are seen by primary care health professionals more often than by oral health professionals. It is recommended that infants and children have 12 preventive pediatric health care (well-child) visits in the first 36 months of life and an annual well-child visit between ages 3 and 21.⁶ During these visits, health professionals frequently confront morbidity associated with dental caries.⁷ Well-child visits offer an opportunity to integrate oral health care (e.g., risk assessment, screening, preventive intervention, anticipatory guidance and counseling, referral to an oral health professional) into pediatric health care. Such integration, in turn, can increase access to oral health services, thereby improving oral health.⁸ With early referral to an oral health professional, there is an opportunity to maintain good oral health, prevent oral disease, and treat oral disease early. Establishing

collaborative relationships between primary care professionals and oral health professionals at the community level is essential for increasing access to oral health care for all children and for improving their oral health and overall health.⁷

Pregnancy is a unique period during a woman's life and is characterized by complex physiological changes, which may adversely affect oral health. Access to preventive oral health care is essential for pregnant women to have the best possible oral health and overall health. In many states, pregnant women with low incomes are eligible for Medicaid dental coverage that they don't have during other periods of their lives.⁹ Since non-oral-health professionals (e.g., obstetricians, family physicians,

nurse midwives) are often first to assess pregnant women's health, they play a critical role in connecting women with the oral health care system and community-based programs.¹⁰ These professionals can integrate oral health care (e.g., risk assessment, screening, preventive intervention, anticipatory guidance and counseling, referral to an oral health professional) into primary care visits, thereby increasing women's access to oral health care during the perinatal period.¹¹

Integrating oral health care into primary care is a key strategy for improving access to oral health care and oral health, especially for vulnerable and underserved groups that face barriers to accessing the oral health care system.

References

1. U.S. Department of Health and Human Services. 2000. *Oral Health in America: A Report of the Surgeon General*. Bethesda, MD: National Institute of Dental and Craniofacial Research.
2. Institute of Medicine, Committee on an Oral Health Initiative. 2011. *Advancing Oral Health in America*. Washington, DC: National Academies Press.
3. Institute of Medicine, Committee on Oral Health Access to Services and National Research Council. 2011. *Improving Access to Oral Health Care for Vulnerable and Underserved Populations*. Washington, DC: National Academies Press.
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5. U.S. Department of Health and Human Services, Oral Health Coordinating Committee. 2016. *U.S. Department of Health and Human Services Oral Health Strategic Framework 2014–2017*. Washington, DC: U.S. Department of Health and Human Services.
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9. Eke C, Mask A, Reusch C, Vishnevsky D, Quinonez RB. 2019. *Coverage Brief: Improving Access to Oral Health Care in Pregnancy*. Washington, DC: Children's Dental Health Project.
10. Oral Health During Pregnancy Expert Workgroup. 2012. *Oral Health Care During Pregnancy: A National Consensus Statement*. Washington, DC: National Maternal and Child Oral Health Resource Center.
11. Association of State and Territorial Dental Directors. 2019. *Best Practice Approach: Perinatal Oral Health* (upd. ed.). Reno, NV: Association of State and Territorial Dental Directors.









About This Guide

The National Maternal and Child Oral Health Resource Center (OHRC) developed this publication, *Integrating Oral Health Care into Primary Care: A Resource Guide*, to help health professionals, program administrators, educators, and others understand the benefits of integrating oral health care into primary care and to provide information about how to implement oral health care integration in materials, programs, and systems of care.

The resource guide is divided into two sections. The first section describes materials, such as briefs, curricula, fact sheets, guidelines, manuals, papers, reports, and videos, published from 2015 through 2020, that reflect current science and practice as well as seminal (i.e., very important or influential) resources published before 2015. The second section lists federal agencies, national professional associations, resource centers, and national coalitions that may serve as resources.

In the materials section, each resource includes an icon to help readers quickly identify materials. The key to the categories appears on the right.

For further information, we encourage you to contact the organizations listed in the second section of the resource guide. Your state and local departments of health, state and local oral-health-related associations and societies, state or local oral health coalitions, and university-based libraries are additional sources of information. OHRC will update the resource guide periodically, and we would appreciate hearing from you if you know of any relevant resources that are not included in this edition.

	Assessment (questionnaire, readiness assessment, survey)
	Book
	Brief, paper, or report
	Curriculum (course, training)
	Guide or guidelines (pocket guide, practice guidance, resource guide, training guide, user guide)
	Infographic or poster
	Tool (brochure, checklist, flipbook, flipchart, form, handout, tip sheet, toolkit)
	Video

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Materials

Materials

Data and Surveillance



Fluoride Varnish Application Among North Dakota Family Practice Physicians & Pediatricians: 2016 Chartbook

This chartbook presents findings from a survey of family physicians and pediatricians in North Dakota conducted to study fluoride-varnish application in clinical practice. Contents include a study overview; methods and response demographics; and findings related to assessment, fluoride-varnish application, referral, and need for education and training.

Schroeder S, Ahmed A. 2016. *Fluoride Varnish Application Among North Dakota Family Practice Physicians & Pediatricians: 2016 Chartbook*. Grand Forks, ND: University of North Dakota School of Medicine and Health Sciences, Center for Rural Health. 15 pp.



Fluoride Varnish Application in Primary Care Settings

This fact sheet presents findings from a survey of primary care health professionals in North Dakota to assess their knowledge about fluoride-varnish application and determine how many were providing and billing for the service. Contents include information about the percentage of pediatricians and family practice physicians who conducted oral health risk assessments; those who had a list of dentists for client referral; and those who applied fluoride varnish for infants, beginning at age 6 months, and for children.

University of North Dakota School of Medicine and Health Sciences, Center for Rural Health. 2016. *Fluoride Varnish Application in Primary Care Settings*. Grand Forks, ND: University of North Dakota School of Medicine and Health Sciences, Center for Rural Health. 2 pp.



Improving the Oral Health of Farmworker Children and Their Families: Focus Group at Western Forum for Migrant and Community Health

This report summarizes findings from focus group discussions about improving the oral health of farmworker children and their families. Topics include integration models of care in community settings, key components of and barriers to integrated primary care and oral health care models, strategies to address key barriers, resources to support integration of primary care and oral health care, measuring success, and conclusions.

Harder+Company. 2015. *Improving the Oral Health of Farmworker Children and Their Families: Focus Group at Western Forum for Migrant and Community Health*. Bethesda, MD: National Association of Community Health Centers. 6 pp.



Integration of Oral Health and Primary Care Practice: Integrated Models Survey Results—Embedded Dental Providers

This report presents results from a survey of health centers to identify models of medical and dental integration. The survey gathered information from health centers about how oral health professionals are providing care in medical settings. Results are presented in the following categories: general integration, embedded oral health professionals, and focus groups.

National Network for Oral Health Access. 2019. *Integration of Oral Health and Primary Care Practice: Integrated Models Survey Results—Embedded Dental Providers*. Denver, CO: National Network for Oral Health Access. 31 pp.



Medical-Dental Integration in North Dakota

This fact sheet describes the reach, patients served, and outcomes of a medical-dental integration model employed in the University of North Dakota's Center for Family Medicine in Bismarck. The model includes offering oral health screenings, fluoride varnish application, dental referrals, and care coordination for patients in the primary care setting while also educating medical residents and direct care staff quarterly on the association between oral health and overall health.

Schroeder S, Knutson S. 2020. *Medical-Dental Integration in North Dakota*. Grand Forks, ND: Center for Rural Health. 2 pp.



Oral Health in Oregon's CCOs: A Metrics Report

This report examines oral health care data in the context of Oregon's health system transformation, including the launch of coordinated care organizations and expansion of the state Medicaid program, Oregon Health Plan. Topics include provider distribution, utilization, patient experience, care coordination, and oral health integration. Information about stakeholder groups, technical specifications, and a measure dashboard are included.

Oregon Health Authority. 2017. *Oral Health in Oregon's CCOs: A Metrics Report*. Salem, OR: Oregon Health Authority. 34 pp.



NH Oral Health Baseline Survey I: Identifying Oral Health Resources and Promising Practices in Community-Based, Non-Traditional Settings

This report presents the results of a survey to identify community-based oral health programs that take place outside traditional dental offices in New Hampshire. It discusses models, including child-focused programs; voucher programs; and programs in dental operatories, medical offices, senior centers, and institutional facilities. The report also provides cross-model comparisons and discusses networks for follow-up care and referral, alignment of reimbursement and services, opportunities for increasing integration between oral health care and overall health care, and lessons learned.

New Hampshire Oral Health Coalition. 2017. *NH Oral Health Baseline Survey I: Identifying Oral Health Resources and Promising Practices in Community-Based, Non-Traditional Settings*. Concord, NH: New Hampshire Oral Health Coalition. 56 pp.

Policy



Better Together: Co-Location of Dental and Primary Care Provides Opportunities to Improve Oral Health

This brief presents findings from a study to assess oral health care capacity in community health centers (CHCs) in California. Topics include the geographic distribution of CHCs with co-located oral health care and primary care; size, productivity, and revenues of co-located sites compared to those without on-site oral health care capacity; and opportunities to improve access to oral health care in CHCs.

Pourat N, Martinez AE, Crall J. 2015. *Better Together: Co-Location of Dental and Primary Care Provides Opportunities to Improve Oral Health*. Los Angeles, CA: UCLA Center for Health Policy Research. 33 pp.



Dear Medical Director [contest non-payment for fluoride varnish application]

This template letter is designed for pediatricians or pediatric practices to place on their own letterhead for use in appealing denials for coverage of and payment for fluoride varnish application by pediatricians. The letter provides an explanation for why such denials are inappropriate, including that they violate the intent of current procedure terminology (CPT) guidelines and Affordable Care Act requirements.

American Academy of Pediatrics. 2019. *Dear Medical Director* [contest non-payment for fluoride varnish application]. Itasca, IL: American Academy of Pediatrics. 2 pp.



Coverage Brief: Improving Access to Oral Health Care in Pregnancy

This brief provides an overview of the status of dental coverage during pregnancy, using data related to Medicaid dental coverage available to pregnant women in each state as of September 2019. Topics include the impact of a woman's oral health during pregnancy and after birth, barriers to accessing oral health care during pregnancy, oral health coverage for pregnant women through state Medicaid programs, and available data about oral health coverage for pregnant women through Medicaid.

Eke C, Mask A, Reusch C, Vishnevsky D, Quinonez RB. 2019. *Coverage Brief: Improving Access to Oral Health Care in Pregnancy*. Washington, DC: Children's Dental Health Project. 4 pp.



Dental Caries in Children from Birth Through Age 5 Years: Screening

These recommendations from the U.S. Preventive Services Task Force provide information about dental caries prevention in infants and children from birth through age 5. They include a recommendation statement, an evidence report, a research plan, a clinical summary, a consumer fact sheet, and an evidence synthesis. The recommendations also discuss prescribing fluoride supplements for infants and children, starting at age 6 months, whose water supply is deficient in fluoride and applying fluoride varnish to infants' and children's teeth starting upon eruption of the first primary tooth.

U.S. Preventive Services Task Force. 2014. *Dental Caries in Children from Birth Through Age 5 Years: Screening*. Rockville, MD: U.S. Preventive Services Task Force. Multiple items.



Health Investments That Pay Off: Strategies to Improve Oral Health

This brief outlines oral health interventions to improve population health and the quality of health care and to reduce health care costs. It includes an overview of the problem, strategies to implement and finance evidence-based interventions, and strategies to support data collection related to interventions. Topics include expanding dental sealant programs; paying primary care health professionals to provide fluoride-varnish applications; updating and investing in community-water-fluoridation systems; improving data-analysis capabilities; expanding scope-of-practice laws and changing Medicaid reimbursement policies; and considering emerging models for new types of health professionals, including dental therapists and advanced dental hygienist practitioners.

Wilkniss S, Tripoli S. 2015. *Health Investments That Pay Off: Strategies to Improve Oral Health*. Washington, DC: National Governors Association. 33 pp.



Improving Lifetime Oral Health: Policy Options and Innovations

This brief highlights state policy options for improving oral health for children, adolescents, and adults and system-level reforms to improve oral health care and reduce costs. Topics include oral health screening and assessment in primary care settings, expanding access to school-based care, raising awareness about healthy behaviors, expanding coverage for adults with low incomes, and ensuring an adequate oral health workforce. Additional topics include improving oral health care access for pregnant women, coordinating primary care and oral health, expanding access to health professionals through teledentistry, understanding the state role in community water fluoridation, and maximizing data.

Johnson T, Goodwin K. 2016. *Improving Lifetime Oral Health: Policy Options and Innovations*. Denver, CO: National Conference of State Legislatures. 11 pp.



Integrating Oral and General Health Through Health Literacy Practices: Proceedings of a Workshop

These proceedings summarize presentations and discussions from a National Academies of Sciences, Engineering, and Medicine workshop held on December 6, 2018. Topics include integration of oral health care, primary care, and health literacy; systems thinking, integration, and health literacy as a catalyst; health literacy and care integration; exploring pathways to integration; developing a research agenda for integration; and reflections on the workshop.

Olson S, Wojtowicz A, Rapporteurs; National Academies of Sciences, Engineering, and Medicine, Board on Population Health and Public Health Practice, Roundtable on Health Literacy. 2019. *Integrating Oral and General Health Through Health Literacy Practices: Proceedings of a Workshop*. Washington, DC: National Academies Press. 102 pp.



Integration of Oral Health and Primary Care: Communication, Coordination, and Referral

This paper discusses challenges in integrating oral health care and primary care for populations with low health literacy. The paper provides background on the issues and focuses on weaknesses in the areas of communication, coordination, and referral. Topics include referral networks, risk management, clinical referral guidelines, performance measures, electronic tools and integrated health records, interprofessional education and collaborative practice, research, and demonstration programs.

Atchison KA, Rozier RG, Weintraub JA. 2018. *Integration of Oral Health and Primary Care: Communication, Coordination, and Referral*. Washington, DC: National Academy of Medicine. 12 pp.



Integration of Oral Health into Pediatric Medical Primary Care in Community Health Centers

This report provides information about an investigation into and analysis of conditions and contexts, attitudes, beliefs, resources, and policies associated with integrating oral health care into care provided at federally qualified health centers. The report presents a rationale for promoting oral health at well-child visits, implementation science (a tool to identify best practices) and study methods, results, and a discussion.

Boston University, Center for Research to Evaluate and Eliminate Dental Disparities. 2015. *Integration of Oral Health into Pediatric Medical Primary Care in Community Health Centers*. Boston, MA: Boston University, Center for Research to Evaluate and Eliminate Dental Disparities. 91 pp.



Medical-Dental Integration in Public Health Settings: An Environmental Scan

This report discusses the results of an environmental scan to identify, categorize, and describe examples of medical-dental integration in public health settings. Findings inform public health officials and other stakeholders about programs and policies that encourage coordination and integration. Topics include integration in clinical settings, multimedia health campaigns, co-location of medical and oral health services, health workforce innovations, integrated insurance benefits, and health care reform.

McKernan SC, Kuthy RA, Reynolds JC, Tuggle L, Garcia DT. 2018. *Medical-Dental Integration in Public Health Settings: An Environmental Scan*. Iowa City, IA: University of Iowa Public Policy Center. 72 pp.



The Need for Defining a Patient-Centered Dental Home Model in the Era of the Affordable Care Act

This report describes medical home and dental home models of care, Affordable Care Act-related health care system changes, and options for integrating oral health care and other health care. Topics include medical-dental integration approaches, features of highly integrated systems, integrating oral health into medical and health home models, integrating oral health into training programs, advantages and barriers to integration, and future directions for the patient-centered dental home.

Damiano PC, Reynolds JC, McKernan SC, Mani S, Kuthy RA. 2015. *The Need for Defining a Patient-Centered Dental Home Model in the Era of the Affordable Care Act*. Iowa City, IA: University of Iowa, Public Policy Center. 32 pp.



Oral Health: An Essential Component of Primary Care

This paper presents a framework for integrating oral health care into primary care. Topics include a call to action, why focusing on oral health is important, complementary roles for primary care and oral health care, lessons from behavioral-health-integration efforts, the oral-health-care-delivery framework, primary care transformation, overcoming barriers to integration, tips for primary care practices, and actions to spur implementation. An introductory video and case examples are also available.

Hummel J, Phillips KE, Holt B, Hayes C. 2015. *Oral Health: An Essential Component of Primary Care*. Seattle, WA: Qualis Health, Safety Net Medical Home Initiative. 67 pp.



Oral Health Care During Pregnancy and Through the Lifespan

This paper presents information and recommendations for obstetricians, gynecologists, and others about oral health care during pregnancy and through the lifespan. Topics include general health, common oral health conditions during pregnancy, periodontal disease and pregnancy outcomes, oral health assessment and counseling during pregnancy, and access to oral health care.

American College of Obstetricians and Gynecologists, Committee on Health Care for Underserved Women. 2013. *Oral Health Care During Pregnancy and Through the Lifespan*. Washington, DC: American College of Obstetricians and Gynecologists. 6 pp.



Oral Health Care Service in North Dakota Community Health Centers

This brief examines oral health services provided to residents by federally funded community health centers (CHCs) and their satellite sites in North Dakota. Contents include information and data on state and CHC population demographics such as income status, health insurance status, and race/ethnicity; sources of CHC revenue; and CHC dental vs. medical costs per visit and per patient.

Lee J, Schroeder S. 2016. *Oral Health Care Service in North Dakota Community Health Centers*. Grand Forks, ND: University of North Dakota School of Medicine and Health Sciences, Center for Rural Health. 5 pp.



Oral Health Integration in Statewide Delivery System and Payment Reform

This brief explores opportunities presented by State Innovation Model projects and other state innovation efforts to include oral health in delivery system and payment reform. It outlines opportunities in the following areas: Medicaid benefit design and expansion, practice-level oral health reform, and statewide delivery-reform models.

Chazin S, Crawford M. 2016. *Oral Health Integration in Statewide Delivery System and Payment Reform*. Hamilton, NJ: Center for Health Care Strategies. 8 pp.



Oral Health Reimbursement Chart

This chart presents survey findings for the 50 states and the District of Columbia on reimbursement for oral health risk assessment, oral examination, fluoride varnish, anticipatory guidance, and education. It presents information on the following topics: type of health professional, services, fees, procedure codes, delegation, age limit for services, number of varnish applications reimbursed annually, training requirement, payor, payment by Medicaid or the Children's Health Insurance Program, and legislative approval to reimburse health professionals. Information about commercial payment and procedure codes is also included.

American Academy of Pediatrics, Oral Health Initiative; Medicaid | Medicare | CHIP Services Dental Association; National Academy for State Health Policy. 2018. *Oral Health Reimbursement Chart*. Elk Grove Village, IL: American Academy of Pediatrics, Oral Health Initiative. 1 chart.



Perinatal and Infant Oral Health Care

This report proposes guidelines for perinatal and infant oral health care, including caries risk assessment, anticipatory guidance, preventive strategies, and therapeutic interventions, to be followed by the stakeholders in pediatric oral health. The report presents methods and background and discusses the perinatal period, anticipatory guidance, and management of perinatal and infant oral health.

American Academy of Pediatric Dentistry, Council on Clinical Affairs. 2016. *Perinatal and Infant Oral Health Care*. 4 pp.



Perinatal Oral Health Policy Statement

This paper provides information about oral health for women during the perinatal period. The paper provides background and discusses methods. It includes a strategic framework for improving perinatal oral health with guidance and examples in the following categories: monitor perinatal oral health status; educate and engage women of reproductive age, prenatal care health professionals, and community providers; promote partnerships; develop policies and plans; promote quality care; ensure a competent and adequate oral health workforce; and support, conduct, and promote research.

Association of State and Territorial Dental Directors. 2020. *Perinatal Oral Health Policy Statement*. Las Vegas, NV: Perinatal Oral Health Policy Statement. 6 pp.



U.S. Department of Health and Human Services Oral Health Strategic Framework 2014–2017

This framework provides the context for leveraging oral health priorities and actions across the U.S. Department of Health and Human Services and partner agencies. The framework aligns key activities with goals and associated strategies in response to recommendations from the Institute of Medicine and discussions with external stakeholders. Topics include integrating oral health care and primary care, preventing oral disease and promoting oral health, increasing access to oral health care and eliminating disparities, increasing the dissemination of information and improving health literacy, and advancing oral health in public policy and research.

U.S. Department of Health and Human Services, Oral Health Coordinating Committee. 2016. *U.S. Department of Health and Human Services Oral Health Strategic Framework 2014–2017*. Washington, DC: U.S. Department of Health and Human Services. 48 pp.



Varnish! Michigan Babies Too! Program Evaluation Report

This report presents findings and recommendations from an evaluation of a program to increase awareness of oral health among health professionals, facilitate the incorporation of oral health into well-child visits, and increase access to preventive care for young children at high risk for dental caries. Topics include a project overview, purpose, key questions, and evaluation methods. Additional topics include findings on health professionals reached, training, confidence in program delivery, program fidelity, health professional satisfaction, supply of fluoride varnish, children reached, and benefits and barriers.

Michigan Public Health Institute, Center for Child and Family Health. 2016. *Varnish! Michigan Babies Too! Program Evaluation Report*. Lansing, MI: Michigan Department of Health and Human Services, Oral Health. 33 pp.



White Paper: Opportunities for Improving Oral Health and Chronic Disease Program Collaboration and Medical-Dental Integration

This paper discusses opportunities for state oral health programs and chronic-disease-prevention programs to make connections between oral health and chronic-disease-prevention interventions and health-promotion messages. It presents the problem, offers a framework for these programs to use in planning how to integrate oral-health-promotion strategies into chronic-disease and health-promotion initiatives, and provides examples of states that have tested innovative approaches to building communication between oral health and chronic-disease-prevention program staff.

Association of State and Territorial Dental Directors. 2018. *White Paper: Opportunities for Improving Oral Health and Chronic Disease Program Collaboration and Medical-Dental Integration*. Reno, NV: Association of State and Territorial Dental Directors. 7 pp.

Practice Guidance



1st Look Program

These tools are designed to help primary care physicians reduce the incidence of dental caries in early childhood by conducting oral health risk assessments, providing anticipatory guidance, applying fluoride varnish, and referring children to a dental home by age 1. Contents include information about fluoride varnish products and vendors; program participation, certification, and billing; presentation slides and handouts; and educational materials about oral health in infants, young children, and pregnant women. A training course is also available.

Smile Alabama! 2017. *1st Look Program*. Montgomery, AL: Alabama Medicaid Agency. Multiple items.



Best Practice Approach: Perinatal Oral Health (upd. ed.)

This report provides a description of perinatal oral health, including its significance and background, barriers to accessing oral health care for this population, and a strategic framework for improving perinatal oral health. It also includes guidelines and recommendations, research evidence, best practice criteria, state practice examples, and a logic model.

Association of State and Territorial Dental Directors. 2019. *Best Practice Approach: Perinatal Oral Health* (upd. ed.). Reno, NV: Association of State and Territorial Dental Directors. 27 pp.



Bright Futures: Oral Health—Pocket Guide (3rd ed.)

This pocket guide offers health professionals an overview of preventive oral health supervision during five developmental periods: prenatal, infancy, early childhood, middle childhood, and adolescence. It is designed to help health professionals implement specific oral health guidelines during these periods. For each period, information about family preparation, risk assessment, interview questions, screening, examination, preventive procedures, anticipatory guidance, measurable outcomes, and referrals is discussed. [Funded by the Maternal and Child Health Bureau]

Casamassimo P, Holt K, eds. 2016. *Bright Futures: Oral Health—Pocket Guide* (3rd ed.). Washington, DC: National Maternal and Child Oral Health Resource Center. 90 pp.



Brush, Book, Bed: A Program of the American Academy of Pediatrics—Implementation Guide

This guide is designed to help pediatricians and other health professionals improve the implementation of oral health services in the medical home through the Brush, Book, Bed program by linking oral health information to messages about reading to children and setting a regular bedtime. The program is aimed at parents of infants and children ages 6 months to 6 years. Topics include workflow, training and resources, talking points, supplies and tips, dental referral, and coding for oral health services.

American Academy of Pediatrics, Children's Oral Health Initiative. 2015. *Brush, Book, Bed: A Program of the American Academy of Pediatrics—Implementation Guide*. Elk Grove Village, IL: American Academy of Pediatrics. 23 pp.



Caries Risk Factors for Primary Care Providers Based on Shared Determinants of Health

This report provides information about a project to develop a caries risk assessment tool for pediatric health professionals. It discusses why caries risk assessment tools are not widely used and what methods pediatric health professionals are using to assess risk instead, methods for collecting data (including analyzing retrospective chart reviews and conducting interviews with pediatric health professionals), results, and a discussion.

Frese W, Nowak A, Royston L, Mathew T, Casamassimo P, Wright R, Silverman J, Yin H. 2015. *Caries Risk Factors for Primary Care Providers Based on Shared Determinants of Health*. Chicago, IL: American Academy of Pediatric Dentistry, Pediatric Oral Health Research and Policy Center. 15 pp.



Considerations for Oral Health Integration in Primary Care Practice for Children

This report provides oral health information for pediatric primary care health professionals. It discusses the importance of the dental home, dental-caries-risk assessment, anticipatory guidance, and fluoride-varnish application. Also included are case studies on recognizing risk factors for caries, applying fluoride varnish during a routine well-child visit, and injury treatment.

Health Resources and Services Administration. 2012. *Considerations for Oral Health Integration in Primary Care Practice for Children*. Rockville, MD: Health Resources and Services Administration. 85 pp.



Integration of Oral Health and Primary Care Practice

This report describes the structured approach, processes, and outcomes of an initiative to improve early detection and prevention of oral health problems by enhancing primary care health professionals' competence in the area of oral health. The recommendations and implementation strategies provide guidance for designing a competency-based, interprofessional practice model to integrate oral health care and primary health care.

Health Resources and Services Administration. 2014. *Integration of Oral Health and Primary Care Practice*. Rockville, MD: Health Resources and Services Administration. 21 pp.



Minnesota's 21st Century Dental Team Toolkit

This toolkit provides information about collaborative dental hygiene practice, dental therapy, and medical-dental integration. Each topic includes links to relevant subtopics and includes tutorials, videos, templates, and other tools. A resource library is included, with links to educational resources. A video with information about the toolkit as a whole is also included.

Normandale Community College. 2020. *Minnesota's 21st Century Dental Team Toolkit*. Bloomington, MN: Normandale Community College. Multiple items.



OHI Toolkit

This toolkit is a guide for community health centers (CHCs) to use in their efforts toward infrastructure improvements to integrate new oral health services or enhance existing services. It helps CHCs assess their readiness to integrate new oral health services or enhance existing services; provides links to Health Resources and Services Administration requirements, regulations, and resources; and offers infrastructure enhancement strategies.

National Network for Oral Health Access. 2019. *OHI Toolkit*. Denver, CO: National Network for Oral Health Access. Multiple items.



Oral Disease Prevention in Primary Care: Services and Reimbursement for Children 0–3

This fact sheet for health professionals provides information about billing Medicaid for applying fluoride varnish to the teeth of infants and children from birth through age 3 in Virginia. Information includes which types of health professionals can bill for this service, what Medicaid covers, and to whom to apply for reimbursement.

Virginia Health Catalyst. 2018. *Oral Disease Prevention in Primary Care: Services and Reimbursement for Children 0–3*. Glen Allen, VA: Virginia Health Catalyst. 1 p.



Oral Health: Child and Teen Checkups (C&TC) Fact Sheet for Primary Care Providers

This fact sheet provides information for physicians, nurse practitioners, physician assistants, and nurses about their role in and responsibility for supporting the oral health of infants, children, and adolescents from birth to age 20 who are eligible for Minnesota’s Early and Periodic Screening, Diagnostic, and Treatment program. The fact sheet discusses requirements for the visit, personnel training, and documentation of counseling and referral; provides recommendations for oral health risk assessment and fluoride-varnish application; and explains why preventive oral health care is important. Anticipatory guidance, professional recommendations, and resources are included.

Minnesota Department of Health, Child and Teen Checkups Program. 2016. *Oral Health: Child and Teen Checkups (C&TC) Fact Sheet for Primary Care Providers*. St. Paul, MN: Minnesota Department of Health, Child and Teen Checkups Program. 2 pp.



Oral Health Care During Pregnancy: A National Consensus Statement

This report includes a consensus statement that resulted from an expert workgroup meeting held on October 18, 2011, in Washington, DC, convened by the Health Resources and Services Administration in collaboration with the American College of Obstetricians and Gynecologists and the American Dental Association. It contains guidance on oral health care for pregnant women for both prenatal care health professionals and oral health professionals, pharmacological considerations for pregnant women, and guidance for health professionals to share with pregnant women. [Funded by the Maternal and Child Health Bureau]

Oral Health During Pregnancy Expert Workgroup. 2012. *Oral Health Care During Pregnancy: A National Consensus Statement*. Washington, DC: National Maternal and Child Oral Health Resource Center. Multiple items.

Also see state-specific guidance:

- California: *Oral Health During Pregnancy and Early Childhood: Evidence-Based Guidelines for Health Professionals*
- Maryland: *Oral Health Care During Pregnancy: Practice Guidance for Maryland’s Prenatal and Dental Providers*
- Massachusetts: *Oral Health Practice Guidelines for Pregnancy and Early Childhood*
- Michigan: *During Pregnancy, the Mouth Matters: A Guide to Michigan Perinatal Oral Health*
- New York: *Oral Health Care During Pregnancy: A Summary of Practice Guidelines*
- South Carolina: *Oral Health Care for Pregnant Women*
- Texas: *Oral Health Care During Pregnancy: Practice Guidance for Texas Prenatal and Dental Providers*
- Virginia: *Oral Health During Pregnancy: Practice Guidance for Virginia’s Prenatal and Dental Providers*
- Washington: *Guidelines for Oral Health Care in Pregnancy*



Oral Health Care During Pregnancy and Through the Lifespan

This paper presents information and recommendations for obstetricians, gynecologists, and others about oral health care during pregnancy and through the lifespan. Topics include general health, common oral health conditions during pregnancy, periodontal disease and pregnancy outcomes, oral health assessment and counseling during pregnancy, and access to oral health care.

American College of Obstetricians and Gynecologists. 2013. *Oral Health Care During Pregnancy and Through the Lifespan*. Washington, DC: American College of Obstetricians and Gynecologists. 6 pp.



Oral Health Coding Fact Sheet for Primary Care Physicians

This fact sheet explains what Current Procedural Terminology (CPT) codes and Codes on Dental Procedures and Nomenclature (CDT) codes are. It also lists various CPT and CDT codes for oral health services provided in primary care settings. Answers to frequently asked questions are included.

American Academy of Pediatrics. 2019. *Oral Health Coding Fact Sheet for Primary Care Physicians*. Elk Grove Village, IL: American Academy of Pediatrics. 6 pp.



Oral Health Prevention Primer

This primer is designed to help pediatricians and other health professionals address oral health in practice, understand the roles of oral health allies, and learn how to collaborate and advocate to achieve optimal oral health for their community. Topics include assessing oral health risk, applying fluoride, and referrals; payment for oral health services; teaching health professionals about oral health; integrating oral health care into primary care; emerging models; implementing a quality-improvement project; and educating families.

American Academy of Pediatrics, Campaign for Dental Health. 2019. *Oral Health Prevention Primer*. Itasca, IL: American Academy of Pediatrics, Campaign for Dental Health. Multiple items.



Organized, Evidence-Based Care Supplement: Oral Health Integration

This guide offers guidance and resources to help health professionals integrate oral health care into primary care. Topics include an introduction to oral health integration, the rationale for delivering oral health care in the primary care setting, the oral-health-care-delivery framework, how to prepare for successful implementation, staffing options and work flow, structuring referrals to dentists, leveraging success, field-testing results, and case examples.

Hummel J, Phillips KE, Holt B, Viriden M. 2015. *Organized, Evidence-Based Care Supplement: Oral Health Integration*. Seattle, WA: Qualis Health. 115 pp.



Periodicity Schedule & Alternatives for Pediatric Preventive Oral Health in Primary Care

This periodicity schedule and alternatives for pediatric preventive oral health care provides guidance for care in primary care settings based on MaineCare reimbursement limitations. Services are organized by age of the child (ages 6 months to 5 years) and include parent education, oral evaluation, fluoride application, and referral to a dentist. [Funded by the Maternal and Child Health Bureau]

From the First Tooth. 2019. *Periodicity Schedule & Alternatives for Pediatric Preventive Oral Health in Primary Care*. Portland, ME: From the First Tooth. 1 p.



Providing Comprehensive Care for Your Patients: An Oral Health Integration Toolkit for Health Care Providers

This toolkit provides information for health professionals about how to create an integrated health system that incorporates oral health. It discusses how to create an integration plan and factors to consider when integrating care. Integration care models for women's health, early childhood health, older adult health, chronic disease, and behavioral health are provided. Each model includes factors to consider and practical examples.

Virginia Health Catalyst. 2019. *Providing Comprehensive Care for Your Patients: An Oral Health Integration Toolkit for Health Care Providers*. Glen Allen, VA: Virginia Health Catalyst. 18 pp.



WHO Monograph on Tobacco Cessation and Oral Health Integration

This monograph provides information about systematic reviews of the association between tobacco use and oral diseases and potential benefits of tobacco-use cessation on oral health outcomes. For each systematic review, the methodology, results, and a discussion are presented. The monograph also includes policy recommendations related to integrating brief tobacco interventions into oral health programs in primary care.

World Health Organization. 2017. *WHO Monograph on Tobacco Cessation and Oral Health Integration*. Geneva, Switzerland: World Health Organization. 72 pp.



Recommendations for Preventive Pediatric Health Care

This paper provides recommendations for health professionals that represent a consensus by the American Academy of Pediatrics and Bright Futures about the periodicity of health services for infants, children, and adolescents. The recommendations emphasize the importance of continuity of care in comprehensive health supervision, including oral health supervision, and the need to avoid fragmentation of care.

American Academy of Pediatrics. 2020. *Recommendations for Preventive Pediatric Health Care*. Itasca, IL: American Academy of Pediatrics. 1 chart.

Practice Tools

Caries Risk Assessment

This handout is designed to help oral health professionals implement dental-carries-risk assessment. Contents include key elements in the process presented as a series of questions and answers that can be integrated into conversations. A flowchart illustrating how oral health professionals can incorporate caries risk assessment into patient visits is included.

DentaQuest Institute. 2016. *Caries Risk Assessment*. Westborough, MA: DentaQuest Institute. 1 p.

Cavity Free at Three: Provider Resources

These tools for health professionals focus on preventing dental caries in infants and young children from birth to age 3. Contents include guidelines on providing prenatal and infant oral health care, posters, anticipatory guidance, referral forms and standing orders, and videos. Additional resources include training and presentations in Colorado on topics such as communicating the importance of oral health, evidence and standard of care, screening and risk assessment, applying fluoride varnish, billing, and ordering supplies. Brochures for educating pregnant women, parents, and other caregivers are also available.

Colorado Department of Public Health and Environment. 2010–. *Cavity Free at Three: Provider Resources*. Denver, CO: Colorado Department of Public Health and Environment. Multiple items.

Dental Hygiene in Medical Settings and Health Care Clinics

This chart provides a list of states in which dental hygienists may provide services in medical settings such as hospitals and medical offices, as well as in public health clinics. For each state, a link to the relevant statute or rule is provided, and a description of the provision is presented.

American Dental Hygienists' Association. 2019. *Dental Hygiene in Medical Settings and Health Care Clinics*. Chicago, IL: American Dental Hygienists' Association. 5 pp.

From the First Tooth

This initiative provides resources that can help prenatal care health professionals, primary care health professionals, and oral health professionals improve infants' and young children's oral health by integrating preventive oral health care into primary care well-child visits. The initiative is located in New England (Connecticut, Massachusetts, New Hampshire, Maine, Rhode Island, and Vermont). Information for parents and other caregivers about promoting oral health and obtaining oral health care is also included, along with information for community organizations.

From the First Tooth. N.d. *From the First Tooth*. Portland, ME: From the First Tooth. Multiple items.

Integration of Oral Health and Primary Care Technical Assistance Toolkit

This toolkit focuses on improving the oral health of people with HIV by integrating oral health care into primary care. The toolkit provides background information about the oral health status of those with HIV. It offers a brief overview of the components of integration and models of oral health care delivery. Each component, including best practices, is discussed, and links to relevant resources are included. The toolkit also addresses how to build and sustain oral-health-care delivery over time.

HIV/AIDS Bureau. 2019. *Integration of Oral Health and Primary Care Technical Assistance Toolkit*. Rockville, MD: HIV/AIDS Bureau. 34 pp.



Into the Mouths of Babes/Connecting the Docs Toolkit

This toolkit is for health professionals trained to deliver preventive oral health services (oral evaluation and risk assessment, parent or caregiver education, fluoride-varnish application, and dental home referral) to infants and young children from birth to age 42 months enrolled in Medicaid in North Carolina. Contents include videos on preventive oral health procedures and the Priority Oral Health Risk Assessment and Referral Tool (PORRT). Additional contents include steps for fluoride-varnish application to post in the exam room, information on Medicaid reimbursement, the PORRT and referral guidelines, a supply list, parent-education materials in English and in Spanish, training guidelines, and a certificate.

North Carolina Early Childhood Oral Health Collaborative. 2013. *Into the Mouths of Babes/Connecting the Docs Toolkit*. Raleigh, NC: North Carolina Division of Public Health, Oral Health Section. Multiple items.



Oral Health and HPV

This fact sheet for consumers provides information about human papillomavirus (HPV). It explains what HPV is, whether oral health and HPV are linked, and how to prevent oral HPV. HPV warning signs are provided, and treatment is discussed. The fact sheet also includes questions about HPV to ask a primary care health professional. The fact sheet is available in [English](#) and in [Spanish](#).

Oral Health Nursing Education and Practice, American College of Physicians, and National Interprofessional Initiative on Oral Health. 2015–2016. *Oral Health and HPV*. Philadelphia, PA: American College of Physicians. 2 pp.



Oral Health Risk Assessment Tool

This tool is designed to help health professionals implement oral health risk assessment for infants and children from birth to age 6 during health supervision visits. The tool, which can be used to document dental caries risk, presents a checklist for evaluating the oral health status of a child that includes risk factors, protective factors, and clinical findings, as well as an assessment and

plan. Guidance on the factors in the checklist and color photographs depicting clinical findings are included. The tool is available in [English](#) and in [Spanish](#).

American Academy of Pediatrics, Bright Futures and National Interprofessional Initiative on Oral Health. 2011. *Oral Health Risk Assessment Tool*. Elk Grove Village, IL: American Academy of Pediatrics. 3 pp.



Oral Health Toolkit

This toolkit provides oral health resources that health professionals can share with pregnant women and new mothers. The print resources, which include the complete toolkit, brochures, posters, and infographics, are available in Arabic, Cambodian, English, French, Korean, Spanish, and Taiwanese. Videos are available in English and in Spanish. The resources offer information about where to obtain oral health care by state and about how to care for gums and teeth during pregnancy and infancy.

American Academy of Pediatrics. 2018. *Oral Health Toolkit*. Itasca, NY: American Academy of Pediatrics. Multiple items.



TOHF Integrative Collaborative Practice Assessment

These assessments are intended for use in developing continuing education and other programs for health professionals to improve the oral health of their patients. The assessments focus on oral-health-related practices and attitudes for health professionals, including pediatricians, obstetricians, nurses, dental hygienists, and dental assistants; non-clinical staff; and patients. Questions cover practices and attitudes related to providing oral health care to infants, young children, and pregnant women; providing oral health education; and communicating with patients.

HealthEfficient, Horowitz A. 2020. *TOHF Integrative Collaborative Practice Assessment*. Albany, NY: HealthEfficient. 9 pp.

Professional Education and Training



Baby Oral Health Program (bOHP)

This program is designed to help primary care health professionals and oral health professionals provide preventive oral health services to infants and young children. Contents include an introductory video, a clinical practice education caregiver presentation, a caregiver interview chart, a child clinical assessment, a customized report card, and information about oral health developmental considerations. Resources for parents include a provider locator.

Quinonez RB. 2013. *Baby Oral Health Program (bOHP)*. Chapel Hill, NC: University of North Carolina at Chapel Hill School of Dentistry. 1 v.



Connecting Smiles: Improving Health Through Oral Health Integration

This training contains five modules for health professionals and their staff about oral health and children. The modules cover tooth decay, caries risk assessment, anticipatory guidance, the benefits of fluoride and fluoridated water, and fluoride varnish and other strategies for integrating oral health care into primary care. [Funded by the Maternal and Child Health Bureau]

South Carolina Department of Health and Environmental Control. 2018. *Connecting Smiles: Improving Health Through Oral Health Integration*. Charleston, SC: South Carolina Department of Health and Environmental Control. 68 pp.



Core Competencies for Interprofessional Practice: 2016 Update

This report provides core competencies for interprofessional collaborative practice to promote and encourage interprofessional learning experiences to help prepare future health professionals for enhanced team-based care of patients and to improve population health outcomes. It offers information about the integration of core competencies and competency-based interprofessional education to guide curriculum development across health profession schools (i.e., dentistry, medicine, nursing, osteopathic medicine, pharmacy, public health).

Interprofessional Education Collaborative. 2016. *Core Competencies for Interprofessional Practice: 2016 Update*. Washington, DC: Interprofessional Education Collaborative. 47 pp.



EQIPP: Oral Health

This course, part of the Education in Quality Improvement for Pediatric Practice (EQIPP) series, is designed to help pediatric primary care health professionals (PPHPs) recognize the role they play in providing oral health care. Topics include a dental home and PPHPs' role in establishing a dental home, dental caries and caries risk assessment, maternal oral health, anticipatory guidance, and oral-injury prevention. Information about fluoride varnish, including who can apply it and how it is applied, how to address families' concerns, processes for procuring and storing, and billing for applications, is also provided. The course is available at no charge for American Academy of Pediatrics members and for a fee of \$199 for non-members.

American Academy of Pediatrics. 2016. *EQIPP: Oral Health*. Chicago, IL: American Academy of Pediatrics. 1 v.



Fluoride Varnish Training Manual for Massachusetts Health Care Professionals

This manual is designed to help health professionals implement fluoride-varnish applications for infants, children, and adolescents ages 6 months to 21 years who are enrolled in Massachusetts' Medicaid program. Contents include office-based and online training options; steps for establishing and using fluoride varnish in the office; a template for documenting the oral examination, procedure and post-procedure, and risk factors for dental caries; facts on fluoride-varnish application; coding, reimbursement, and claim submission; and information for caregivers about fluoride varnish.

Massachusetts Department of Public Health, Division of Primary Care and Health Access, Office of Oral Health. 2016. *Fluoride Varnish Training Manual for Massachusetts Health Care Professionals*. Boston, MA: Massachusetts Department of Public Health, Division of Primary Care and Health Access, Office of Oral Health. 13 pp.



A Guide for PA Program Student Societies: Pediatric Oral Health Outreach Toolkit

This guide for students in physician assistant programs provides ideas for hosting an oral health outreach event for children using the American Dental Association's National Children's Dental Health Month campaign resources. Contents include step-by-step instructions for introducing the physician assistant profession and the program, tips on building good oral health habits in children, including information about tooth-brushing technique, a group activity and options for individual activities, ideas for concluding the program, and handouts.

Pallas S, Somogyi T, Smith H, Berg K. 2015. *A Guide for PA Program Student Societies: Pediatric Oral Health Outreach Toolkit*. Alexandria, VA: American Academy of Physician Assistants Student Academy. 11 pp.



Improving the Oral Health of Pregnant Women, Children, and Families

This course for community health workers includes six modules about improving the oral health of pregnant women, children, and families: (1) oral health essentials, (2) oral health screening, (3) oral health during pregnancy, (4) oral health knowledge and skills for infants and young children, (5) planning and making changes for good family oral health, and (6) advocacy for oral health for mothers and infants. The course has been approved for continuing education units and medical education units for community health workers and representatives by the New Mexico Department of Health. [Funded by the Maternal and Child Health Bureau]

University of New Mexico Center for Development and Disability. 2019. *Improving the Oral Health of Pregnant Women, Children, and Families*. Albuquerque, NM: University of New Mexico Center for Development and Disability. 6 modules.



Front Line Health Worker Curriculum

This curriculum is designed for front line health workers (FLHWs) (e.g., community health workers, health educators, case managers, care coordinators, public health workers, peer health promoters) who provide oral health outreach, advocacy, patient education, care coordination, health care navigation, and social support for the communities they serve. The curriculum consists of four modules; the first is an introduction, and the remaining three focus on the oral health of children, women (including pregnant women), and adults. A facilitator handbook and resources for FLHWs are also included.

Glicken A, Smiles for Life Steering Committee. 2017. *Front Line Health Worker Curriculum*. Leawood, KS: Society of Teachers of Family Medicine. Multiple items.



Innovations in Oral Health Toolkit (upd. ed.)

This toolkit for faculty provides guidance on integrating oral health into existing health profession curricula. Guidance on using the toolkit is provided, as well as information about the philosophy and methodology behind the toolkit, steps for building a sustainable program, and web-based resources. The toolkit also addresses assessing readiness, creating awareness and securing support, faculty development, simulation learning, case-based learning, service learning, and cooperative education. A video that describes the toolkit is available.

Northeastern University. 2016. *Innovations in Oral Health Toolkit* (upd. ed.). Boston, MA: Northeastern University. Multiple items.



Nurse Practitioner and Midwifery Tool Kit Downloads

This toolkit consists of seven presentations that oral health faculty can download and integrate into their course curricula: (1) *Pediatric Nurse Practitioner Program*, (2) *Family Nurse Practitioner Program*, (3) *Adult Gerontology Primary Care Nurse Practitioners Program*, (4) *Nurse Midwifery Program*, (5) *Women's Health Nurse Practitioner Program*, (6) *Adult Gerontology Acute Care Nurse Practitioners Program*, and (7) *Psychiatric-Mental Health Nurse Practitioner Program*. The presentations offer classroom, simulation, and clinical teaching-learning strategies that address population health issues that are relevant to promoting the health of women, children, families, and communities.

Oral Health Nursing Education and Practice. 2019. *Nurse Practitioner and Midwifery Tool Kit Downloads*. New York, NY: Oral Health Nursing Education and Practice. Multiple items.



Maryland's Mouths Matter: Fluoride Varnish and Oral Health Screening Programs for Kids—Training for EPSDT Medical Providers in Maryland

This curriculum is designed to provide Early and Periodic Screening, Diagnosis, and Treatment non-oral-health professionals in Maryland with knowledge and skills to reduce the incidence of dental caries among children ages 3 and under and to help establish a dental home. The four modules provide information on the role of non-oral-health professionals in children's oral health and describe the dental caries process and how to conduct a dental caries risk assessment. The modules also address anticipatory guidance, fluoride varnish application, and referral to a dentist. [Funded in part by the Maternal and Child Health Bureau]

Tinanoff N, Lowe E, Holt K, Goodman H. 2010. *Maryland's Mouths Matter: Fluoride Varnish and Oral Health Screening Programs for Kids—Training for EPSDT Medical Providers in Maryland*. Washington, DC: National Maternal and Child Oral Health Resource Center; Baltimore, MD: Maryland Department of Health, Office of Oral Health. Multiple items.



The OHNEP Interprofessional Oral Health Faculty Tool Kit for Undergraduate Programs

This toolkit for undergraduate faculty provides curricula templates and resources that can be used when integrating oral health into an undergraduate nursing program. Topics include microbiology, anatomy and physiology, pathophysiology, research methods, pharmacology, health assessment and promotion, fundamentals, nursing care of adults and older adults, nursing care of children, maternity and women's health, community, psychiatric-mental health, leadership in nursing, and professional nursing. *Smiles for Life: A National Oral Health Curriculum* is integrated throughout the toolkit.

Oral Health Nursing Education and Practice. 2019. *The OHNEP Interprofessional Oral Health Faculty Tool Kit for Undergraduate Programs*. New York, NY: Oral Health Nursing Education and Practice. 36 pp.



Oral Health and Dental Services for Pregnant Women

This training is designed to help health workers teach pregnant women about the importance of oral health and the safety of receiving oral health care during pregnancy and to provide pregnant women with resources to enable them to find affordable local oral health care. For each topic, suggestions about how to communicate effectively with pregnant women are included, along with case examples. [Funded by the Maternal and Child Health Bureau]

Texas Health and Human Services, Texas Health Steps. 2018. *Oral Health and Dental Services for Pregnant Women*. Austin, TX: Texas Health and Human Services, Texas Health Steps. 3 sections.



Prenatal Oral Health Program (pOHP)

This program is designed to help prenatal primary care professionals and oral health professionals provide preventive oral health services to pregnant women and new mothers. Contents include videos, guidelines, a referral form and follow-up report card, and a periodicity table. Resources for pregnant women and new mothers include videos on oral health care, a self-evaluation, and a provider locator available in English and in Spanish.

Quinonez RB, Boggess K. 2013. *Prenatal Oral Health Program (pOHP)*. Chapel Hill, NC: University of North Carolina at Chapel Hill School of Dentistry, and School of Medicine. 1 v.



Smiles for Life: A National Oral Health Curriculum (4th ed.)

This curriculum for health professionals and educators comprises eight courses addressing oral health. Courses focus on the relationship between oral health and systemic health; child oral health; adult oral health; acute oral health problems; pregnancy and women's oral health; caries risk assessment, fluoride varnish, and counseling; the oral exam; and oral health for older adults. The courses can be taken for continuing education credit or simply to gain knowledge on the topics.

Clark M, ed. 2017–2019. *Smiles for Life: A National Oral Health Curriculum* (4th ed.). Leawood, KS: Society of Teachers of Family Medicine. Multiple items.



Unfolding Cases

This series of cases focus on children and families in vulnerable situations and their experiences with nutrition and obesity, oral health, mental health, and autism. Each case includes a monologue that introduces the family and the problems it is facing, simulation scenarios, an assignment that asks learners to finish a story, and instructor toolkits. One unfolding case focuses on 4-year-old Mia, who has severe dental caries.

National League for Nursing. 2020. *Unfolding Cases*. Washington, DC: National League for Nursing. Multiple items.

Program Development (National Efforts)



Integrating Sustainable Oral Health Services into Primary Care in School-Based Health Centers: A Framework

This framework offers ideas for school-based health centers (SBHCs) to consider when integrating sustainable comprehensive oral health services into primary care to improve the quality of oral health care of children and adolescents. The framework presents a description of six levels of integration to help SBHCs evaluate their current level of integration and key elements to more fully integrate sustainable comprehensive oral health services into primary care in SBHCs. [Funded by the Maternal and Child Health Bureau]

Lowe E, Barzel R, Holt K. 2016. *Integrating Sustainable Oral Health Services into Primary Care in School-Based Health Centers: A Framework*. Washington, DC: National Maternal and Child Oral Health Resource Center. 1 v.



Interdisciplinary Approaches for Improved Oral Health: Building the Field Through Integrated and Community-Based Health Practices

This paper highlights interdisciplinary approaches for improving oral health: (1) human papillomavirus vaccination uptake, (2) fluoride varnish application, and (3) emergency department utilization for nontraumatic or preventable oral conditions. Each example highlights how population health can be improved with integrated health practices. Each describes the public health significance of the action; highlights best, evidence-based strategies; presents stories from the field to illustrate the impact of the action; and suggests how oral health professionals can advocate for change while optimizing oral health and overall health.

Fleming E, Seymour B, eds. 2019. *Interdisciplinary Approaches for Improved Oral Health: Building the Field Through Integrated and Community-Based Health Practices*. Springfield, IL: American Association of Public Health Dentistry. 10 pp.



The Maternal and Child Health Bureau–Funded Perinatal and Infant Oral Health Quality Improvement (PIOHQP) Initiative 2013–2019: Final Report

This report describes the achievements of 16 projects funded through the PIOHQP initiative to improve oral health for pregnant women and infants, lessons the projects learned, and resources they produced. It provides examples of project achievements and successes in seven strategy areas: network development; workforce enhancement; community outreach; process and procedure development; program development; state practice guidance development; and data collection, evaluation, and reporting. [Funded by the Maternal and Child Health Bureau]

Lorenzo S, Goodman H, Stemmler P, Holt K, Barzel R (eds.). 2019. *The Maternal and Child Health Bureau–Funded Perinatal and Infant Oral Health Quality Improvement (PIOHQP) Initiative 2013–2019: Final Report*. Washington, DC: National Maternal and Child Oral Health Resource Center. 23 pp.



MORE Care: Narrowing the Rural Interprofessional Oral Health Care Gap

This paper provides information about initiating interprofessional networks that integrate and coordinate person-centered oral health care in rural communities. Topics include oral health as a national issue with rural implications, interprofessional practice and the oral-systemic health connection, creating networks and a learning collaborative, state offices of rural health and medical-oral expanded care initiation, and challenges and opportunities for innovation. Examples from Colorado, Pennsylvania, and South Carolina are included.

Boyes S, Davis L, Adams G, Mills M, Deutchman M. 2017. *MORE Care: Narrowing the Rural Interprofessional Oral Health Care Gap*. Westborough, MA: DentaQuest Institute. 35 pp. Exec. summary, 10 pp.



Nurse Practitioner & Dentist Model for Primary Care: A Guide for Implementing Collaborative Care in U.S. Dental Schools

This guide provides a framework for implementing the Nurse Practitioner & Dentist Model for Primary Care to integrate primary care services provided by a nurse practitioner into an academic dental practice environment. It discusses steps to take and elements to consider in the planning, implementation, and evaluation phases of initiating a collaborative-care program involving nurse practitioners and dentists. Topics include an overview of the model, getting started, program fundamentals, sustainability, and next steps.

Dolce MC, Parker JL, Da Silva JD. 2018. *Nurse Practitioner & Dentist Model for Primary Care: A Guide for Implementing Collaborative Care in U.S. Dental Schools*. Boston, MA: Harvard School of Dental Medicine and Northeastern University School of Nursing. 61 pp.



Oral Health: An Essential Component of Primary Care

This guide provides information for primary care practices on implementing an oral-health-care-delivery framework that presents a model for how primary care professionals can screen for oral health issues, offer brief interventions, and coordinate referrals to dentists. The guide is divided into nine sections: (1) introduction, (2) the case for change, (3) the oral-health-care-delivery framework, (4) how to prepare for successful implementation, (5) staffing options and workforce, (6) structuring referrals to dentists, (7) using data for quality improvement, (8) leveraging success, and (9) field-testing results and case examples. An annotated oral health integration tool set is also available.

Safety Net Medical Home Initiative. N.d. *Oral Health: An Essential Component of Primary Care*. Seattle, WA: Safety Net Medical Home Initiative. Multiple items.



Oral Health Program Plans

This webpage provides a comprehensive list of state oral health plans and other resources. Many of the plans include activities for integrating oral health care into primary care.

Centers for Disease Control and Prevention. 2020. *Oral Health Program Plans*. Webpage.

Examples of state plans:

- Alabama: *Your Mouth, Your Health: The Connection of Oral Health to Overall Health*
- Delaware: *Delaware Oral Health Plan 2014: Goals and Objectives*
- Iowa: *Iowa Oral Health Plan 2015–2020*
- Michigan: *Michigan State Oral Health Plan*
- Minnesota: *Minnesota Oral Health Plan: Advancing Optimal Oral Health for All Minnesotans*
- New Hampshire: *New Hampshire Oral Health Data 2015*
- New York: *Oral Health Plan for New York State*
- North Dakota: *Oral Health in North Dakota: Burden of Disease and Plan for the Future—2012–2017*



Providing Preventive Oral Health Care to Infants and Young Children in Women, Infants, and Children (WIC), Early Head Start and Primary Care Settings

This report focuses on seven programs that provide preventive oral health care to infants and young children enrolled in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) or the Early Head Start (EHS) program and in primary care settings. Topics include integrating oral health care into primary care and within WIC and EHS, oral health services offered in WIC and EHS, staff training, and staffing to deliver oral health services.

Revels M, Cruz K, Cheung K, Carver L, Krol D. 2013. *Providing Preventive Oral Health Care to Infants and Young Children in Women, Infants, and Children (WIC), Early Head Start and Primary Care Settings*. Princeton, NJ: Robert Wood Johnson Foundation. 35 pp.



A User's Guide for Implementation of Interprofessional Oral Health Core Clinical Competencies: Results of a Pilot Project

This guide for health center staff describes a set of interprofessional oral health core clinical competencies designed to foster integration of oral health care into primary care. The guide also provides information about three pilot projects' experiences related to implementing the competencies. Contents include recommendations to inform planning, training systems, health information systems, clinical care systems, and evaluation systems.

National Network for Oral Health Access. 2015. *A User's Guide for Implementation of Interprofessional Oral Health Core Clinical Competencies: Results of a Pilot Project*. Denver, CO: National Network for Oral Health Access. 39 pp.

Program Development (State Efforts)



2015 Wisconsin Perinatal-Infant Oral Health Summit: Summary Report and Statewide Plan

This report summarizes information from a summit held on September 9, 2015, to discuss strategies for improving oral health for pregnant women and infants in Wisconsin. The report describes five themes supported by both oral health communities and overall health communities: reimbursements and insurance availability, coordination and integration, training, awareness, and practice settings. Contents include a statewide plan to reduce the prevalence of oral disease among pregnant women and infants who are underserved by integrating high-quality oral health care into the health-care-delivery system. [Funded by the Maternal and Child Health Bureau]

Children's Health Alliance of Wisconsin. 2016. *2015 Wisconsin Perinatal-Infant Oral Health Summit: Summary Report and Statewide Plan*. Milwaukee, WI: Children's Health Alliance of Wisconsin. 27 pp.



Advancing Oral Health Through the Women, Infants, and Children Program: A New Hampshire Project

This brief describes a pilot project to integrate preventive oral health care for women with low incomes and children from families with low incomes through local sites of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) in New Hampshire. The brief also explores alternative channels for bringing oral health care and education to populations with low incomes. Topics include administrative procedures, technology, capacity, funding, lessons learned, and next steps.

Center for Health Care Strategies. 2016. *Advancing Oral Health Through the Women, Infants, and Children Program: A New Hampshire Project*. Hamilton, NJ: Center for Health Care Strategies. 6 pp.



Bright Smiles for Babies: Virginia Oral Health Partnership for Children

This manual contains information and resources to promote oral health in pregnant women and infants and children from birth to age 3 by providing oral health screenings and risk assessment, education, fluoride varnish applications, and referrals. Contents include an oral health protocol; resources about assessment and fluoride varnish; anticipatory guidance; parent handouts in English and in Spanish; and information about oral health in pregnant women and children, including children with special health care needs. Information about Medicaid reimbursement, resources for supplies, professional policies and guidelines, and forms is also included.

Virginia Department of Health, Division of Dental Health. 2017. *Bright Smiles for Babies: Virginia Oral Health Partnership for Children*. Richmond, VA: Virginia Department of Health, Division of Dental Health. 1 v.



Dental Care in Accountable Care Organizations: Insights from 5 Case Studies

This report presents case study findings on successes and challenges related to incorporating oral health care into accountable care organizations (ACOs) in Iowa, Minnesota, Oregon, and Southwest Washington. Each case study provides the ACO's background and market overview and describes payment arrangements and risk-sharing, care coordination, provision of oral health care, challenges to oral health care provision, and results.

American Dental Association, Health Policy Institute; American Academy of Pediatric Dentistry, Pediatric Oral Health Research & Policy Center. 2015. *Dental Care in Accountable Care Organizations: Insights from 5 Case Studies*. Chicago, IL: American Dental Association. 27 pp.



The Impact of Family on Children's Dental Care

This infographic presents information on the percentage of children enrolled in HUSKY A (Medicaid) in Connecticut who received preventive oral health care by race/ethnicity, factors that increased children's likelihood of receiving preventive oral health care, the impact of each factor on the likelihood that children will receive preventive oral health care, and the impact of all three factors on the likelihood that children will receive such care. Topics include continuous coverage, receipt of well child care, and parents who received preventive oral health care. Steps to ensure that families have access to and use oral health care are also described.

Feder K, Lee MA. 2015. *The Impact of Family on Children's Dental Care*. Hartford, CT: Connecticut Health Foundation and Connecticut Voices for Children. 8 pp.



The Importance of Oral Health Care During Pregnancy

This report for health professionals provides information about the importance and safety of oral health during pregnancy and survey results from the Pregnancy Risk Assessment Monitoring System in Maine. Also included is information about ways that Before the First Tooth, Maine's perinatal infant and oral health quality-improvement initiative, can help practices adopt best practice approaches to integrating oral health into prenatal care. [Funded by the Maternal and Child Health Bureau]

Mainehealth. 2017. *The Importance of Oral Health Care During Pregnancy*. Portland, ME: Before the First Tooth. 1 p.



Improving Oral Health Outcomes by Integrating Medical and Dental Care

This toolkit is intended for medical practices in Colorado (i.e., community health centers, clinics, school-based health centers, hospital systems) interested in integrating a dental hygienist into a medical team to offer the full scope of dental hygiene services. The toolkit addresses startup and implementation, including hiring a dental hygienist, building a dental space, integrating the hygienist into the practice, and creating and implementing models of care. Many parts of the toolkit are applicable to other states.

Delta Dental of Colorado Foundation. 2020. *Improving Oral Health Outcomes by Integrating Medical and Dental Care*. Denver, CO: Delta Dental of Colorado Foundation. Multiple items.



Improving Rural Oral Health: Six States' Response to the United States Department of Health and Human Services Oral Health Strategic Framework

This brief explores how six states (Colorado, Iowa, New Mexico, North Carolina, Pennsylvania, and South Carolina) have responded to the U.S. Department of Health and Human Services' Oral Health Strategic Framework. For each state, a summary of how the state is improving access to oral health care and advancing oral health inter-professional practice is provided.

Martin AB, Probst JC, Jones KM. 2017. *Improving Rural Oral Health: Six States' Response to the United States Department of Health and Human Services Oral Health Strategic Framework*. Columbia, SC: South Carolina Rural Health Research Center. 15 pp.



Integration of Oral Health with Primary Care in Health Centers: Profiles of Five Innovative Models

This monograph presents information on five health centers that have successfully integrated oral health care into primary care. Contents include background on oral health disparities and health center leadership in providing access to oral health care; a framework for exploring integration; an overview of the participants, methods, and results; and profiles of the health centers in Colorado, Kansas, Kentucky, Massachusetts, and Washington.

Maxey H. 2015. *Integration of Oral Health with Primary Care in Health Centers: Profiles of Five Innovative Models*. Bethesda, MD: National Association of Community Health Centers. 27 pp.



Medical-Dental Integration in Minnesota: Benefits from Changes in Law and Policy

This brief summarizes the emergence of a conceptual framework for medical-dental integration and describes the need to address barriers to integration to promote emerging strategies to encourage increased collaboration among oral health professionals and non-oral-health professionals in Minnesota. The brief describes ways that medical-dental integration can take place, provides a national and a Minnesota context, discusses models of integrated care and barriers and strategies in law and policy, and provides examples of medical-dental integration.

Kreuger J. 2019. *Medical-Dental Integration in Minnesota: Benefits from Changes in Law and Policy*. St Paul, MN: Network for Public Health Law. 8 pp.



Organizations

Organizations

AMERICAN ACADEMY OF FAMILY PHYSICIANS

P.O. Box 11210
Shawnee Mission, KS 66207-1210
Phone: (800) 274-2237
E-mail: contactcenter@aafp.org
Website: www.aafp.org

The American Academy of Family Physicians (AAFP) represents family physicians, family medicine residents, and medical students who seek to promote the science and art of family medicine and to ensure high-quality, cost-effective health care for clients of all ages.

AMERICAN ACADEMY OF PEDIATRICS

Section on Oral Health
141 Northwest Point Boulevard
Elk Grove Village, IL 60007-1098
Phone: (800) 433-9016
E-mail: oralhealthinfo@aap.org
Website: www.aap.org/oralhealth

The American Academy of Pediatrics' Section on Oral Health focuses on improving communication between pediatricians and pediatric dentists and improving advocacy for oral health, nutrition, and early diagnosis and prevention of oral disease in children, including those with special health care needs.

AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS

409 12th Street S.W., P.O. Box 96920
Washington, DC 20090-6920
Phone: (202) 638-5577
E-mail: resources@acog.org
Website: www.acog.org

The American College of Obstetricians and Gynecologists (ACOG) provides educational materials on pregnancy, birth, contraception, reproductive health, and women's issues such as violence against women, smoking cessation, and underserved women. Members and invited experts serve on various ACOG committees focusing on adolescent health care, gynecologic practice, obstetrics, American Indian affairs, and other topics.

ASSOCIATION OF STATE AND TERRITORIAL DENTAL DIRECTORS

3858 Cashill Boulevard
Reno, NV 89509
Phone: (775) 626-5008
Fax: (775) 626-9268
Website: www.astdd.org

The Association of State and Territorial Dental Directors promotes the establishment of national dental public health policy, assists state oral health programs in the development and implementation of programs and policies for preventing oral disease, builds awareness and strengthens public health professionals' knowledge and skills by developing position papers and policy statements, provides information on oral health to health officials and policymakers, and conducts conferences for the dental public health community.

CENTER FOR INTEGRATION OF PRIMARY CARE AND ORAL HEALTH

Harvard University Schools of Medicine and
Dental Medicine
188 Longwood Avenue
Boston, MA 02115
E-mail: cipcoh@hsdm.harvard.edu
Website: <https://cipcoh.hsdm.harvard.edu>

The Center for Integration of Primary Care and Oral Health (CIPCOH) serves as a national resource to consolidate the evidence base for systems-level oral health integration into primary care training. CIPCOH conducts systems-level research on primary care training; disseminates information, best practices, and resources; recommends and promotes primary care training enhancements; and develops community of practice plans that mobilize stakeholders to integrate oral health care into primary care training and to integrate oral health care into primary care.

CIPCOH is a joint endeavor of the Harvard University Schools of Medicine and Dental Medicine (HMS/HSDM), the HMS Center for Primary Care, and the University of Massachusetts Medical School's Department of Family Medicine and Community Health, in partnership with MCPHS University and Stony Brook University.

DENTAQUEST PARTNERSHIP FOR ORAL HEALTH ADVANCEMENT

465 Medford Street
Boston, MA 02129-1454
Phone: (617) 886-1700
Website: www.dentaquestpartnership.org

The DentaQuest Partnership for Oral Health Advancement focuses on transforming the health care system to achieve better health through oral health by prioritizing person-centered care. The partnership provides grantmaking, research, and care-improvement initiatives, including: (1) a single, national oral health measurement system, (2) person-centered models of care through value-based transformation, and (3) public adult dental benefits.

MATERNAL AND CHILD HEALTH BUREAU

Health Resources and Services Administration
5600 Fishers Lane
Parklawn Building
Rockville, MD 20857
Phone: (301) 443-2753
E-mail: pvodicka@hrsa.gov
Website: www.hrsa.gov/oral-health/index.html

The Maternal and Child Health Bureau provides leadership, in partnership with stakeholders, to improve the physical, mental, and oral health; safety; and well-being of the maternal and child health population, which includes all women; infants; children and adolescents, including those with special health care needs; and their families.

NATIONAL INTERPROFESSIONAL INITIATIVE ON ORAL HEALTH

E-mail: Anita.Glicken@NIIOH.org
Website: www.niioh.org

The National Interprofessional Initiative on Oral Health (NIIOH) is a systems-change initiative to expand interprofessional health workforce capacity by embedding oral health and interprofessional practice competencies across health profession education and practice. It also promotes workforce policies that support a wide variety of health professionals, including oral health professionals, physicians, physician assistants, nurse practitioners, nurses, midwives, pharmacists, social workers, and community health workers. Strategic

activities cultivate oral health champions; facilitate interprofessional learning; develop tools and resources; and support, connect, and align partner efforts to integrate oral health across health care systems.

NATIONAL MATERNAL AND CHILD ORAL HEALTH RESOURCE CENTER

Georgetown University
E-mail: OHRInfo@georgetown.edu
Website: www.mchoralhealth.org

The National Maternal and Child Oral Health Resource Center responds to the needs of professionals working in states and communities with the goal of improving oral health services for pregnant women, infants, children, and adolescents, including those with special health care needs, and their families (MCH population). The resource center collaborates with government agencies, professional associations, foundations, policy and research centers, and voluntary organizations to gather, develop, and share information and materials to promote sustainable oral health services for the MCH population.

NATIONAL NETWORK FOR ORAL HEALTH ACCESS

181 East 56th Avenue, Suite 501
Denver, CO 80216
Phone: (866) 316-4995
E-mail: info@nnoha.org
Website: www.nnoha.org

The National Network for Oral Health Access (NNOHA) works to improve the oral health of underserved populations and contributes to overall health through leadership, advocacy, and support to oral health professionals in safety-net systems. NNOHA's priorities include ensuring that oral health care is integrated into primary care; promoting evidence-based oral-disease-management models; advocating for every health center to have an oral health program; and ensuring that oral health professionals have the information, resources, and support to deliver high-quality services.

ORAL HEALTH NURSING EDUCATION AND PRACTICE INITIATIVE

E-mail: ohnep@nyu.edu

Website: <https://ohnep.org>

The Oral Health Nursing Education and Practice Initiative (OHNEP) is the nursing arm of the National Interprofessional Initiative on Oral Health. OHNEP encourages nursing professionals (nurse practitioners, nurse-midwives, nurses) to partner with family medicine professionals, pediatricians, physician assistants, and oral health professionals to promote interprofessional oral health integration. The initiative develops resources for students and faculty to build interprofessional oral health workforce capacity to improve oral health access, decrease oral health disparities, improve oral health and overall health outcomes, and enhance the health of the communities they serve.



National Maternal and Child Oral Health Resource Center