



ANNUAL UPDATE ••• 2019 •••

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Partnership for Children's Oral Health



A KLINGENSTEIN PHILANTHROPY

MaineHealth



MaineGeneral Health



From the First Tooth is led and administered by MaineHealth and implemented in partnership with Northern Light Health, MaineGeneral Health, the Maine Primary Care Association, and other partners.

DENTAL CARE IS HEALTHCARE

Launched statewide in 2009, From the First Tooth (FTFT) has grown to become a source of oral health education, clinical training and support to integrate oral health assessments and fluoride varnish into primary care settings, where most young children receive regular preventive care.

We still have significant progress to make to ensure that every Maine child has access to and receives appropriate preventive oral healthcare from the eruption of their first tooth. FTFT, an initiative led by MaineHealth and funded by the Sadie and Harry Davis Foundation, has been supporting the integration of dental care into the pediatric medical home for eleven years. As part of a natural evolution, FTFT has joined other partners to build a broader effort to address the challenges of children's oral health under the umbrella of the Partnership for Children's Oral Health (the Partnership).

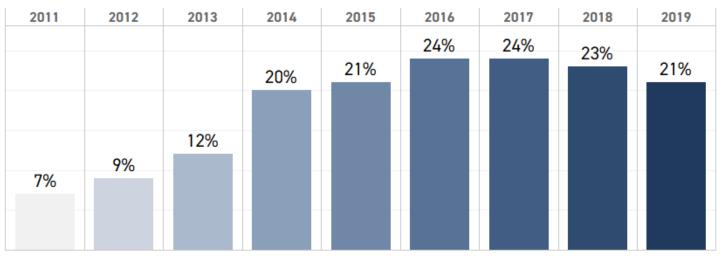
In this report, we take stock of the progress FTFT has made in preventing Early Childhood Caries and plan for the journey ahead as we work toward our vision for the future.

PROGRAM IMPACT

WELL-CHILD VISITS – MAINECARE

Definition: Percent of well-child visits with an oral evaluation and/or fluoride varnish for children ages 12-47 months. The percentage of well-child visits with an oral evaluation and/or fluoride varnish increased 181% from 2011 to 2019 (7.4% to 20.8%)

Percentage of well child visits with an oral evaluation and/or flouride varnish application for children 12-47 months

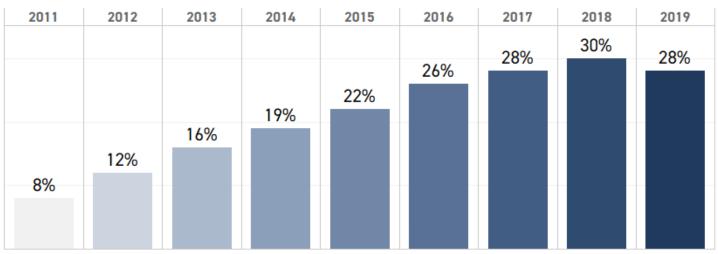


Data Source: MaineCare claims data from the University of Southern Maine Muskie School

4 BY 4 – MAINECARE

Definition: Percent of children who recieved at least four fluoride varnish applications by four years of age. The percentage of children who received at least four fluoride applications in any setting increased 277% from 2011 to 2019 (7.5% to 28.3%)

Percentage of children who have received at least 4 flouride varnish applications by 4 years of age, by year



Data Source: MaineCare claims data from the University of Southern Maine Muskie School

PROGRAM IMPACT

CHILDREN REACHED BY FTFT - MAINECARE

Definition: Percent of children ages 12-23 months with at least one well-child visit in a calendar year who have received at least one oral evaluation and/ or fluoride varnish in their primary medical care settings.

This measure increased 124% from 14.5% in 2011 to 32.5% in 2019. A high of 36% was achieved in 2015 following successful implementation of Maine's Improving Health Outcomes for Children (IHOC) First STEPS initiative, funded by the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services. Since then, rates have been relatively stable in the low 30% range.

2011 2012 2013 2014 2015 2016 2019 2017 2018 36% 35% 34% 33% 32% 31% 25% 20% 14%

Percent of children reached by FTFT with at least one well-child visit in the measurement year, by year, ages 12-23 months

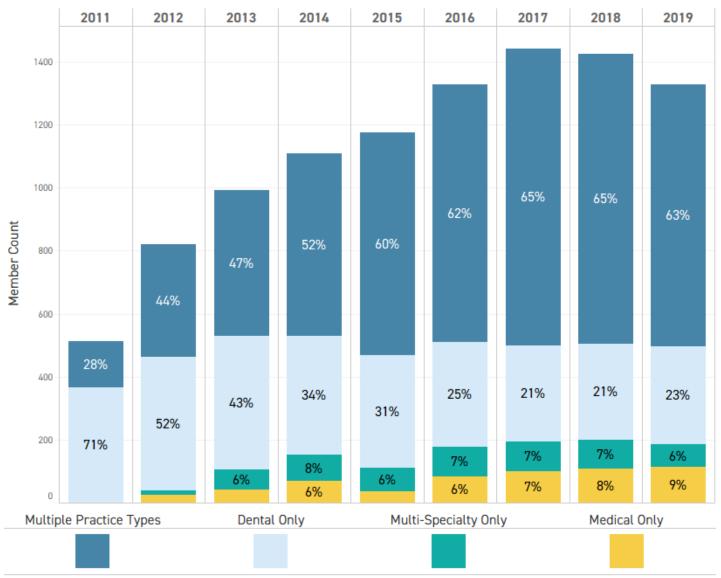
Data Source: MaineCare claims data from the University of Southern Maine Muskie School

PROGRAM IMPACT

DELIVERING FLOURIDE VARNISH IN MULTIPLE SETTINGS HAS IMPROVED ACCESS FOR CHILDREN WITH MAINECARE

In comparing the rates of fluoride varnish application in different settings from 2011 to 2019, it is evident that the growth in the number of children who receive regular fluoride varnish applications (four applications by age four) has been largely driven by an increase in applications being provided in a combination of medical and dental settings. These data indicate that implementing FTFT's model of integrating preventive oral healthcare into the pediatric medical home is making a difference.

Percentage of 4 year old MaineCare members who have received at least 4 flouride varnish applications by 4 years of age, by year, by provider type

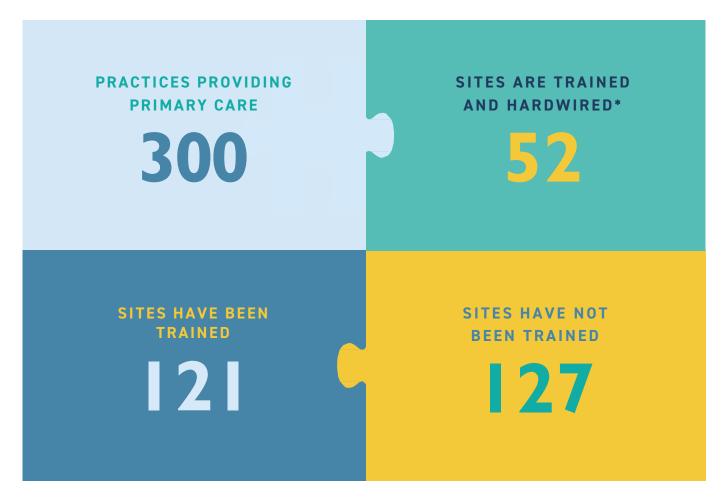


Data Source: MaineCare claims data from the University of Southern Maine Muskie School

RECENT SUCCESSES AND PROGRESS

- FTFT Health Systems Workgroup (a partnership of MaineHealth, Northern Light Health, MaineGeneral Health and Maine Primary Care Association) formed to collaborate on determining the status of FTFT implementation at the approximately 300 pediatric medical homes across Maine.
- Created and deployed a comprehensive survey to 165 pediatric medical homes to ascertain their training level, the number of FTFT implementation steps they had in place, and whether they were achieving the two major elements of success – electronic medical record (EMR) integration and consistent training of staff. The current response rate is just under 40%.
- Selected as one of two successful programs from across the nation to present on the CMCS Learning Collaborative (Advancing Prevention and Reducing Childhood Caries in Medicaid and CHIP) Webinar Series "Improving Children's Oral Health Using Fluoride Varnish in Non-Dental Settings."
- Finalized FTFT Toolkit for Primary Care Practices.
- Made 135 contacts with sites for technical assistance/to answer questions and distributed 2,328 pieces of educational material.
- Submitted final Before the First Tooth grant report to the Health Resources and Services Administration; developed and launched virtual BTFT training module directed at clinical providers and staff who work with prenatal patients.

CURRENT SNAPSHOT OF FTFT IN ACTION



- Implementation Steps
 - Dental Home
 - Risk Assessment
 - Evaluation
 - Plan
 - Referral

- Elements of Success
 - Practice Training
 - EMR Integration

*Hardwired is defined as having adopted all five implementation steps and utilizing both elements of success.

Based on current information in the database and historical knowledge

PLANNED GOALS FOR 2021

- Document contact information for 100% of pediatric medical homes in Maine.
- Continue to gather implementation status from all practices that have received FTFT training.
- Increase number of practices trained, implemented and hardwired; targets to be determined.
- The Partnership's Health Integration Action Team (HIAT) becomes the FTFT Advisory Group.

EARLY 2021 ADVISORY GROUP DISCUSSION

- What are the next actions that FTFT should take to ensure that its model is a component of the standard of care statewide for children?
- Given the impact of COVID-19 on pediatric primary care, how do we bring FTFT back to the forefront of healthcare providers' minds?
- What should our 2021 targets be for the number of practices trained, implemented and hardwired?
- What is FTFT's role in improving pediatric dental home access in Maine?

KEY CONTRIBUTORS

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PARTNERSHIP FOR CHILDREN'S ORAL HEALTH

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