



Public Health
Advisory Commission
of Alexandria, VA

PUBLIC HEALTH ADVISORY COMMISSION

**Thursday, August 16, 2018
5:30 – 7:00 p.m.
Fourth Floor Conference Room
Alexandria Health Department**

- I. Establishment of Quorum
- II. Approval of the July minutes
- III. Updates from the Chair
- IV. Update from AHD
- V. Legislative Agenda
- VI. Adjourn

Commission Members	
<input type="checkbox"/>	Chair, Ann Harbour
<input type="checkbox"/>	Vice-Chair, Patricia Rodgers
<input type="checkbox"/>	Stacy Biddinger
<input type="checkbox"/>	Chris Dunay
<input type="checkbox"/>	Daniel Hawkins
<input type="checkbox"/>	John Herring
<input type="checkbox"/>	Dr. Jessica Hill
<input type="checkbox"/>	Brian Hricik
<input type="checkbox"/>	Patrick Killeen
<input type="checkbox"/>	Allen Lomax
<input type="checkbox"/>	Michael Millman
<input type="checkbox"/>	Richard Merritt
<input type="checkbox"/>	Dr. Barbara Nowak
<input type="checkbox"/>	Dr. Michael C. Trahos
<input type="checkbox"/>	Katya Wanzer
Alexandria Health Dept. Staff	
<input type="checkbox"/>	Dr. Stephen A. Haering, Health Director
<input type="checkbox"/>	Janine B. McCormick, Executive Secretary



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**Minutes of the Thursday August 16, 2018
PHAC Meeting
5:30 – 7:00 p.m.
Fourth Floor Conference Room
Alexandria Health Department**

Present	Ann Harbour (Chair), Tricia Rodgers (Vice-Chair), Stacy Biddinger, Brian Hricik, Patrick Killeen, Allen Lomax, Michael Millman, Richard Merritt, Dr. Michael C. Trahos
Absent (Excused)	Daniel Hawkins, John Herring, Dr. Jessica Hill, Dr. Barbara Nowak, Katya Wanzer
Absent (Unexcused)	Chris Dunay
AHD Representatives	Dr. Stephen A. Haering, Janine B. McCormick
Guests	Dr. Natalia Golub, Natalie Talis

I. Establishment of a Quorum

- Meeting called to order at 5:34 pm. A quorum was established

II. Approval of the June 2018 Minutes

- Allen Lomax (AL) moved to approve the July 2018 minutes, Patrick Killeen (PK) seconded, all in favor, minutes approved

III. Updates from the Chair

IV. Update from AHD

Dr. Natalia Golub (NG), Johns Hopkins Preventive Medicine Resident, provided information about immigrant health and AHD's Refugee Health Program. AHD Health Planner Natalie Talis provided a brief overview of the Community Health Assessment currently underway – Pop-Up-Public-Health will occur throughout the City 9/4 – 10/28 to gather data on Community Themes and Strengths. The next Community Meeting will be held Saturday, 11/3.

V. Legislative Agenda

- AL moved to advise the city council to advocate for adding an adult dental benefit under the upcoming Medicaid expansion, Dr. Michael C. Trahos (MT) seconded, all in favor, motion approved

- MT moved to amend Richard Merritt’s proposed legislative agenda item to “increase provider capacity by seeking specific legislative remedies to provider shortages in primary care and behavioral health, PK seconded, all in favor, motion approved
- Richard Merritt (RM) proposed advocating to increase the cigarette tax (50 cents/pack in 2019, 75 cents/pack in 2020, \$1.00/pack in 2021) across the Commonwealth to generate revenue towards expanding primary care for low-income residents who do not benefit from Medicaid expansion, Michael Millman (MM) seconded, Allen Lomax (AL) (representative of the Partnership for a Healthier Alexandria abstained), proposal adopted
- MT moved to support reintroduction of 2016 HB-900, creation of Associate Physician License, to increase capacity in primary care and behavioral health, Brian Hricik (BH) seconded, all in favor, motion approved
- AL moved to support an amendment to 2016 HB 1054 to expand allowance of expedited partner therapy (EPT) to include locally administered health departments and programs managed by a local health department, TR seconded, all in favor, motion approved

VI. Adjourn

- Meeting adjourned at 7:05 pm.

Legislative Agenda Items for Consideration

Submitted by Dan Hawkins:

Women's health-what is known about their access to needed care (esp. for pregnancy) and for health status and outcomes and what more is needed-especially for women of color?

Immigrates-do they have adequate access to care specifically, primary care and public health services and if not, what more needs to be done? What local organizations can help and is City support adequate?

How can City and local organization help with Medicaid enrollment once expansion kicks in in January? Need to consider how enrollment will be promoted and steps for getting people registered.

Submitted by Richard Merritt:

Advocate for the distribution of a large part of the State surplus to community health centers, free health clinics and/or local health department for the singular purpose of improving access to primary care services for those low-income uninsured residents who will not qualify for Medicaid under the Medicaid expansion.

If distribution of the state surplus for this purpose is not feasible, then advocate for the state to increase the cigarette tax by 50 cents/per pack in 2019. 75 cents/pack in 2020 and \$1.00 a pack in 2021, and devote those new revenues toward expanding access to primary care for all low-income residents who do not benefit from Medicaid expansion.

Submitted by Mike Millman and Tricia Rodgers:

Adult Dental Benefit under Medicaid

Attachment II

Proposal for Legislative Agenda: Support efforts to expand Medicaid to include a comprehensive dental benefit for adults.

Background:

Currently, Medicaid will only pay for emergency extractions for adults on Medicaid.

Approximately 10,000¹ residents who are currently enrolled or who are newly eligible for Medicaid won't have access to comprehensive dental care. (6,500 will be newly eligible)

The City currently invests in the oral health care of Alexandrians who seek care at the Northern Virginia Dental Clinic, at Neighborhood Health, and through a network of dental professionals who agree to see patients at a reduced rate.

Unfortunately, many go to the Emergency Department, where they can receive help with pain management and infection only. In the first seven months of this calendar year, 125 people came to the Inova Alexandria Emergency Department complaining of dental pain or other oral health issues. While their insurance status is unknown, many low-income people without dental coverage seek treatment at emergency departments for relief of symptoms and treatment of infections. Access to a dental benefit would allow people to secure preventive and restorative services and decrease avoidable ED visits for dental related issues.

A comprehensive dental benefit for all adults can also improve health outcomes for Alexandria children. Children enrolled in Medicaid/FAMIS have comprehensive dental benefits, but only 57% of children in Alexandria utilize preventive dental care.² Research shows that parents are more likely to take children to see the dentist if they have dental coverage themselves, and children who begin seeing the dentist by age one have improved long-term health outcomes and save money.

In Alexandria, 5% of adults have diabetes.³ Studies show when a person with diabetes' dental disease is treated they are 39% less likely to visit the hospital, 13% less likely to visit the doctor, and they save \$2,840 in annual medical costs compared to a person with diabetes who has untreated dental disease

Access to oral health services by low-income Alexandrians and the high cost of treatment are mentioned consistently in local health needs assessments. In the most recent Inova Community Health Needs Assessments, 10% of respondents to the community survey cited dental problems as an important health issue and a majority of respondents said that the availability of care was inadequate to meet the need, particularly among people who lack insurance.

An adult dental benefit will decrease reliance on opioid prescriptions for pain related to untreated dental disease

A comprehensive benefit will support the Medicaid work requirements; the appearance of one's mouth and teeth can affect a person's ability to interview for a job.

¹ This includes 3800 currently enrolled adults (U.S. Census Bureau, 2010-2016 American Community Survey Five Year Estimates) and 6500 newly eligible adults (The Commonwealth Institute, Closing the Coverage Gap: By Locality, January 11, 2018).

² Virginia Department of Medical Assistance Services, Smiles for Children State Fiscal Year 2015 Pediatric Participation Report.

³ Virginia Department of Health, Division of Policy and Evaluation, Behavioral Risk Factor Surveillance Survey, 2014

Attachment II

Last session, Senator George Barker and Delegate Mark Sickles (Fairfax) introduced a budget amendment to include a comprehensive dental benefit (with an annual cap) for adults. According to the most recent Inova Community Health Needs Assessment: