



November 2019

CHW CERTIFICATION NOW AVAILABLE IN MARYLAND MDH accepting applications from experienced CHWS

The Maryland Department of Health (MDH), Office of Population Health Improvement is now accepting certification applications from experienced community health workers (CHWs) who have a minimum of 2,000 hours of paid or volunteer CHW experience and proficiency in Maryland's CHW core competencies. [Click here](#) for further information on the certification process and requirements.

CHWs can learn more about the certification process, including eligibility requirements, required submission documents, and guidance for a successful application during a series of [interactive webinars](#) hosted by MDH this month.

[MDAC has long recognized the critical role CHWs play](#) in helping individuals navigate pathways to good health. MDAC strongly supports CHW certification and the recognition of their important work.

CATHOLIC CHARITIES IMPLEMENTS COLLABORATIVE CARE MODEL Integrates medical, dental and behavioral health

Catholic Charities of the Archdiocese of Washington is working to integrate medical, dental, and behavioral health care in its co-located medical and dental clinics, stand-alone dental clinics, and behavioral health clinics. The agency assists individuals and families in need in Washington, DC and Calvert, Charles, Montgomery, Prince George's and St. Mary's counties in Maryland, including a large number from the immigrant community.



To move to a collaborative care model, Catholic Charities developed a strategic plan and goals around integration to get upper-management buy-in early on. Direct service staff, who were already busy, were a tougher sell. However, once they were given the tools they needed and were educated on the importance of collaborative care to good health outcomes, they bought in.

Catholic Charities successfully integrated depression and anxiety screenings in their medical and dental clinics, and oral health assessment in their behavioral health clinics and during diabetic foot/eye clinics, as well as prenatal dental classes. Moreover, Catholic Charities hosts a radio program to educate its Hispanic population in topics such as prevention and tips for a better overall health.

The program works. The integrated approach to behavioral and physical health through service linkages, which ensures consumers have a primary care physician and a dentist, have improved health outcomes. Routine vital signs, recorded at each medical and dental visit, enables Catholic Charities to provide preventative care to those with diabetes, hypertension, or obesity.

Dental director Lucciola Lambruschini, DDS, MBA noted that although the program is quite successful, it has faced challenges. Staff turnover, prioritization of collaborative care, incorporating training and improving communication across disciplines, and ensuring direct support staff are the link between psychiatric and somatic health were key issues. She recommends that organizations looking to work to a collaborative care model develop a step-by-step plan; leverage organizational strengths such as size, existing community partnerships, and the support of key stakeholders; and start small with an easy win.

OPEN MEMBERS ADVOCATE FOR KEY ORAL HEALTH POLICIES Meet with federal legislators; share oral health info with West Baltimore community

As part of its annual meeting, more than 250 members of OPEN, the Oral Health Progress and Equity Network, traveled to Capitol Hill on October 24th to meet with their elected officials and advocate for policies to improve the oral health of all Americans. MDAC Executive Director Mary Backley met with legislative staff from the offices of U.S. Senators Ben Cardin and Chris Van Hollen to ask them to:

- Support the oral health and well-being of older adults and people with disabilities by adding an oral health benefit to Medicare Part B;
- Encourage healthy pregnancies and put newborns on a path to success by making oral health care a mandatory component of pregnancy-related Medicaid benefits; and
- Invest in efforts to prevent dental disease in every state by fully funding the CDC Division of Oral Health's ability to support state oral health programs, increasing appropriations by \$17.5 million dollars.



The visit to Capitol Hill coincided with memorial services for U.S. Representative Elijah Cummings, a stalwart oral health champion, who died on October 17, 2019. OPEN delivered [a letter](#) to express its sincere condolences to the staff of the Honorable Elijah Cummings on the loss of the beloved Congressman.

Congressman Cummings' unwavering dedication to improving oral health, health equity, and social justice made him an unparalleled champion for the issues promoted by the OPEN network. His tireless efforts to improve access to oral health care changed the lives of countless Marylanders and millions of people throughout the nation.

While most OPEN attendees were on Capitol Hill, a small group participated in a "hearts and hands" visit to Sandtown-Winchester to advance learning about health equity, social justice, and the story of Baltimore. Sandtown-Winchester, a historically black neighborhood that was the home of Freddie Gray, is in an area of West Baltimore experiencing high rates of unemployment, incarceration, violence, and poverty. It's a tough but tight-knit community struggling to improve the day-to-day lives of its residents.



A bright light in the community is Safe Streets, an evidence-based violence prevention and interruption program that works to reduce shootings and homicides in high violence areas. Safe Streets treats violence as an epidemic that can be prevented using disease-control methods. Violence Interrupters, who live and work within targeted neighborhoods with high levels of gun violence, connect with high-risk individuals to defuse potentially violent situations. They link youth and their families with educational opportunities, employment training and assistance, mental health services, substance abuse treatment and other crucial services to provide young people with alternatives to a life of crime and violence.



Safe Streets and OPEN worked together to set up a pop-up event on the corner of Pennsylvania and Third, a busy corner near a transit station. The community came to share a meal, socialize, play, and learn about oral health. Residents were able to discuss oral health concerns with a dentist, get an oral hygiene kit and instruction, learn about the connection between diet and oral health, and get information on how to access dental care. OPEN members were also privileged to hear the community's oral health stories. It was clear that although good oral health is important to residents of Winchester-Sandtown, they face numerous challenges that prevent them from accessing care. Here are a few of their stories:

- Shanae had dental coverage as a child, but that ceased when she turned 21. She did not see a dentist for the next nine years. When she was 30, she got dental insurance through Medicaid. But by that time, she suffered from severe migraines and took many medications for her headaches. Once she had dental insurance and was able to see a dentist, she learned that a nerve in a broken tooth was the cause of her chronic pain. The dentist pulled the tooth, and the pain went away immediately. Her doctor never asked her if she had been to the dentist, or when she last saw a dentist. Shanae said that she did not know what to do when she did not have dental insurance. She thought more events like the OPEN pop-up would be helpful to those in her community, but that it was important to provide oral health information and education, not just free toothpaste and toothbrushes.
- Nathaniel, age 40, is on Medicaid and had a dentist perform two root canals. He was charged \$700, which he had difficulty paying. The dentist told him he needed crowns, but he could not afford the \$1,400 cost. His teeth are "sitting open," breaking, and he has painful oral infections. He wants

to take care of his mouth, but doesn't know how to get the care he needs.

- Herb, a former drug user, has teeth that are “messed up – I didn't know drugs did that.” Herb has been off drugs for a year and has taken positive steps to improve his overall health, but since Medicare does not cover dental, he has been unable to afford to see a dentist. He considered purchasing a Medicare supplement plan, but beneficiaries are required to pay into the plan for year before accessing benefits – and he needs care now. Herb asked, “Why do they think kids need dental care, but adults do not? Who thought that was okay?”

The visit to Sandtown-Winchester was sobering. Although many strides have been made to improve oral health in Maryland, our work is not done until all Marylanders have access to affordable and equitable dental care, no matter their age, where they live, or what their special circumstances might be.

MRHA AND CHRC COLLABORATE ON RURAL HEALTH VIDEO SERIES

Newest video spotlights oral health success story

The Maryland Rural Health Association (MRHA) and the Maryland Community Health Resources Commission (CHRC) have collaborated on the second of a series of videos that highlight the human impact of programs in rural Maryland communities through the experiences of residents receiving services. MDAC is credited at the end of the video for its contributions to the content.

The video features the story of Jimmy, a middle-aged man who suffered from dental pain and infections. Jimmy tried to use his moustache to mask his dental problems, but as his oral health worsened, he covered his mouth when he smiled. After much-needed treatment at the West Cecil Community Center, Jimmy is now pain-free and full of confidence and broad smiles.



Jimmy's story is not unique. In 2016, rural Marylanders made 13,677 emergency department visits for chronic dental conditions, costing \$7.5 million. Community based dental programs, such as the one in West Cecil, help reduce avoidable emergency department visits and treat the root cause of oral health problems, not just the pain.

[Watch the video](#) to learn more about Jimmy and how communities throughout rural Maryland are working to positively change lives.

NOVEMBER 21, 2019 IS NATIONAL RURAL HEALTH DAY

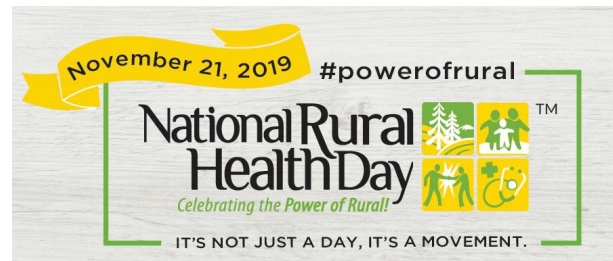
Celebrates "the power of rural" and highlights rural healthcare challenges

Rural communities are wonderful places to live and work, which is why an estimated 57 million people – nearly one in five Americans – call them home. These small towns, farming communities and frontier areas are places where neighbors know each other, listen to each other, respect each other and work together to benefit the greater good. They are also some of the best places to start a business and test your “entrepreneurial spirit.” These communities

provide the rest of the country with a wealth of services and commodities, and they are the economic engine that has helped the United States become the world economic power it is today.

These rural communities also have unique healthcare needs. Today more than ever, rural communities must address accessibility issues, a lack of healthcare providers, the needs of an aging population suffering from a greater number of chronic conditions, and larger percentages of un- and under-insured citizens. And rural hospitals – which are often the economic foundation of their communities in addition to being the primary providers of care – struggle daily as declining reimbursement rates and disproportionate funding levels make it challenging to serve their residents.

That is why the National Organization of State Offices of Rural Health sets aside the third Thursday of every November – November 21, 2019 – to celebrate [National Rural Health Day](#). First and foremost, National Rural Health Day is an opportunity to “Celebrate the Power of Rural” by honoring the selfless, community-minded, “can do” spirit that prevails in rural America. But it also is an opportunity to bring to light the unique healthcare challenges that rural citizens face – and showcase the efforts of rural healthcare providers, State Offices of Rural Health and other rural stakeholders to address those challenges.



MRHA NAMES GARBELY OUTSTANDING RURAL HEALTH PRACTITIONER

Recognized for work to build, sustain oral health infrastructure on Eastern Shore

The Maryland Rural Health Association has named Sandra Garbely-Kerkovich, DMD Outstanding Rural Health Practitioner of the Year for her outstanding leadership in optimizing access to dental care, including oral surgery and pediatric dentistry, on the Eastern Shore. Garbely is the Senior Vice-President and Chief Dental Officer at Choptank Community Health Systems. Jacob Frego, Executive Director and Jennifer Berkman, Deputy Director of the Eastern Shore Area Health Education Center nominated her for the award.



Garbely is a strong advocate for residents of the Eastern Shore and a leader in recruiting dental professionals to the area. Noting that patients had to travel over the Bay Bridge to seek surgical services, Garbely developed an oral surgery program at Choptank Community Health that provides much-needed surgical services to the region. She also developed a Pediatric Dental Consortium to build capacity for pediatric dental health that will bring pediatric dentists, dental residents, and fellows to the Shore and will provide opportunities for continuing education, networking, and building a foundation for the recruitment of additional pediatric dental health professionals. She also secured funding for needed equipment to expand capacity and increase the breadth of services offered to patients.

In presenting the award, Jennifer Berkman said, "Dr. Garbely has worked tirelessly to place dental health in the forefront of needed services for the medically underserved and rural residents of the Shore. Dr. Garbely's leadership has had a lasting impact in building and sustaining a more robust infrastructure to serve our rural citizens. As a champion of dental health as an important component of overall health and well-being, Dr. Garbely has optimized the delivery of care and health outcomes for citizens of the Eastern Shore."

ROMAINE RECEIVES MSDA DISTINGUISHED SERVICE AWARD

Recognized for exceptional contributions to dental health in Maryland



MDAC board member Diane Romaine, DMD, MAGD, DICOI received the Maryland State Dental Association's Distinguished Service Award for her exceptional contributions to the dental health of the state through service.

Romaine, who practices general dentistry in Frostburg, initiated the Western Maryland Mission of Mercy in 2010. She was awarded the Jane A. Fiscus, MD Community Health Leadership Award in 2013 for her work to improve the health and well-being of the citizens of Allegany County and the surrounding area. In 2015, she was named Maryland Rural Health Practitioner of the Year for her work to increase advanced general access for patients in Western Maryland. She was a tireless advocate for legislation that established the Medicaid adult dental pilot program.

In addition to the MDAC board of directors, Romaine sits on the AHEC West and Western Maryland Health System Community Advisory boards. She is president of the Maryland State Dental Association Foundation, serves on the American Dental Association Eldercare Workgroup, and is a Dean's Faculty educator at the West Virginia University and University of Maryland Schools of Dentistry.

FAMILIES USA ISSUES STATEMENT ON PASSING OF U.S. REP. CUMMINGS

America has lost a steadfast patron for health care and social justice

Families USA executive director Frederick Isasi released the following statement regarding the passing of Congressman Elijah Cummings (D-MD):

"We are deeply saddened that Rep. Elijah Cummings has passed away. He was an unswerving champion for civil and human rights and the epitome of an individual who put people before politics.

Rep. Cummings decided as a sixth-grader that he would commit his life to law and helping people. He was a proud and undaunted advocate for social and racial justice and his dedication to ensuring a level playing field for marginalized and vulnerable people was exemplary. A member of the Phi Beta Kappa Society, during a May 2019 commencement speech at Baltimore's Morgan State University, he told the graduates, 'You are better and more valuable to our country because of the obstacles you've overcome.'

Rep. Cummings had many accomplishments over his storied career. Families USA heralds his commitment to ensure and protect access to high-quality, affordable health care for America's families. He understood that access and equity are essential to achieving health care justice for all.

Last July, Cummings — who chaired the House Oversight Committee — convened a hearing to discuss the importance of protecting the Affordable Care Act (ACA) and Medicaid coverage for our nation's families. He was deeply concerned that a repeal of the health care law would strand families without access to the critical health care services the law provides, and he used that hearing to let consumers share their very personal health care journeys. As someone who battled in his own health, Rep. Cummings spoke passionately about how experiencing a serious illness was a stark reminder of the gift of good health.

Rep. Cummings also led congressional efforts to expand access to oral health care for all families. His fight intensified more than a decade ago when Deamonte Driver, a 12-year-old Marylander, died from an untreated tooth infection. On an anniversary of Driver's death, Cummings told his fellow members of Congress, "My heart is heavy today, as it is every year at this time...I am humbled, however, that God has turned the pain of Deamonte's death into a passion. There isn't a day that goes by that I am not grateful that I can use my platform to help families like Deamonte's who cannot help themselves.'" Because of his work, oral health care was expanded nationally as well to the families he represented in Maryland.

We take this moment to honor his bright legacy and urge everyone — specifically those who hold elected office — to carry it on.

AFTER 22 YEARS OF SUCCESS, CDHP TO CLOSE AT YEAR END

Resources will move to Community Catalyst

The Children's Dental Health Project, (CDHP), a leading advocate for oral health coverage for pregnant women and children, will close at the end of this year. CDHP Executive Director Meg Booth sent the following announcement to its partners on November 6, 2019:

As a supporter of the Children's Dental Health Project (CDHP), I am reaching out to share some news about our future. After extensive deliberation, CDHP will be moving our oral health policy and advocacy materials to a leading national consumer voice on health care, [Community Catalyst](#). In doing so, we are preparing to end operations as an independent nonprofit by the end of the year. We will close our doors on December 31, 2019. Luckily, all our resources -- old and new -- will be transferred to our longtime national partner.

After years of reviewing our work and talking with many of you, we have determined that it is time to integrate children's oral health policy and advocacy into a broader mission-focused organization.

We accomplished what we set out to do -- and more.

Twenty-two years ago, CDHP was created as a "project" to be the voice of children who needed dental coverage. It was deliberately named a project because we knew securing dental coverage for children was a solvable problem. While it took a little longer than anticipated, we indeed achieved this goal. In fact, CDHP not only expanded coverage by getting a guaranteed dental benefit in the Children's Health Insurance Program (CHIP), but we also went further.

Our efforts helped secure oral health coverage for children in the Affordable Care Act. Because of CDHP, 90% of children now have some form of dental coverage, opening the door to kids getting the care they need to grow up healthy. I call that success!

Strong partnerships were key to our success and our future.

Deep and trusted partnerships have been central to CDHP's success over the years. We have leaned on many of our partners for support and expertise, and they have done the same with us. By transferring our work to Community Catalyst -- a trusted partner that shares our values -- our legacy of progress will continue to make a difference in the lives of children and families.

We at CDHP believe it's critical to make space for our partners to integrate oral health into broader agendas, so dental disease doesn't hold any family back from achieving their dreams. Addressing the oral health of a whole family includes, but must go beyond, the dental care system. As we look forward to shifting CDHP's work to Community Catalyst, we will be encouraging other partners to take up the baton on broad systems-change to help families achieve good oral health and economic stability. We will be releasing new research that we hope will launch the next generation of oral health advocacy for families and will be available for all to use. The greatest legacy CDHP could leave would be for each of our partners to include oral health in their portfolio of work.

There is more work to be done. But for now, let's celebrate.

This is a promising time for oral health, with more oral health policy expertise and advocates than ever before. There is always more that can be done, and CDHP has never been low on energy to support families. However, as we shift our work into its next phase, this is also a time for celebrating. We're proud of the progress we have made for kids' and families' health and wellbeing over the past two decades -- from improving children's dental coverage to making in-roads in expanding oral health access in pregnancy. We also celebrate our supporters like you, who have been critical players in our innovation and

Our next steps.

CDHP is fortunate to have the time to transition our work on the issues we care about to our longtime partners at Community Catalyst. You can call or email CDHP until the end of November. And, please begin to show your support for Community Catalyst's expanding leadership and commitment to oral health. Keep your eye out for our new research to build on, and know that our extensive resources will remain available to you to continue creating positive change for kids, families and communities.

- You can find the press release announcing our news online [here](#).
- Our website also has a resource answering some [frequently asked questions](#) about CDHP's future, which may continue to be updated.

Thank you to all of our partners, funders, staff, and board directors for 22 years of being the voice for children's oral health.

ADA ISSUES CHILDREN'S DENTAL HEALTH MONTH MATERIALS

Focus on oral health benefits of fluoride



The American Dental Association (ADA), sponsor of the February 2020 National Children's Dental Health Month, has issued campaign materials for use by dental professionals, healthcare providers, and educators to promote the benefits of good oral health.

The focus of this year's campaign is on the oral health benefits of fluoridated water. Downloadable posters in English and Spanish, a program planning guide, activity sheets for kids, and other resources are available [here](#).

"Kids are more protected against dental disease when mom has good oral health. That supports children's development and academic success. It also benefits families' economic security. Women with good oral health earn 4.5-percent more than their peers."

- Meg Booth, Executive Director - Children's Dental Health Project

NEWS

[Medicaid Covers a Million Fewer Children. Baby Elijah Was One of Them.](#)

[Does Poor Dental Hygiene Impact Your Heart Health?](#)

[Poor Dental Health Linked to Colorectal Polyps](#)

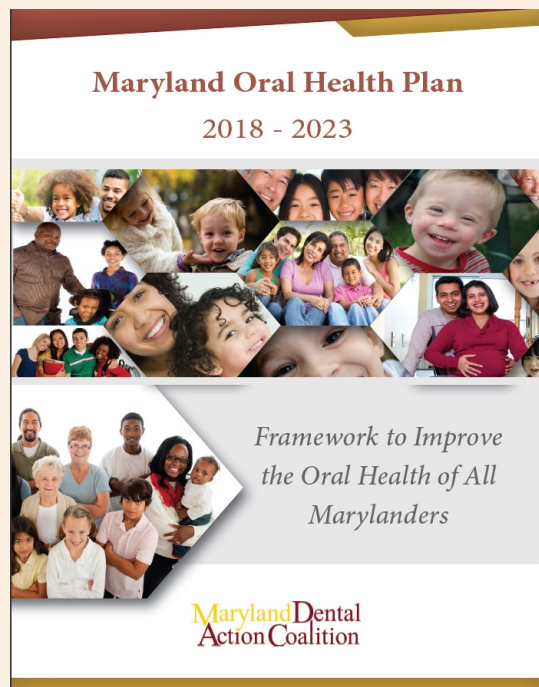
[Not Brushing and Flossing? Your Poor Oral Health Might Impact Your Heart and Mind](#)

[Infants and Toddlers Eat Too Much Sugar, Researchers Say](#)

['Invincible' Teen Vapers Face Fears, Ask For Help](#)

ARTICLES

2018-2023 MARYLAND ORAL HEALTH PLAN GOALS



[Medicaid Adult Dental Benefits Increase Access and Reduce Out-Of-Pocket Expenditures](#)

[Improving Care for Individuals Dually Eligible for Medicare and Medicaid](#)

[Poor Families Spent 10 Times More of Their Income on Dental Care than Wealthier Families](#)

[Delivering Risk-Stratified Care](#)

[Children's Drink FACTS 2019: Sales, Nutrition, and Marketing of Children's Drinks](#)

[Antibiotic Use for the Urgent Management of Dental Pain and Intra-oral Swelling Clinical Practice Guideline \(2019\)](#)

[The Interprofessional Role in Dental Caries Management: Impact of the Nursing Profession in Early Childhood Caries](#)

[Infection Control in Healthcare Personnel: Infrastructure and Routine Practices for Occupational Infection Prevention and Control Services \(2019\)](#)

[The Maternal and Child Health Bureau–Funded Perinatal and Infant Oral Health Quality Improvement \(PIOHQI\) Initiative 2013–2019 Final Report](#)

[HRSA Strategic Plan FY 2019-2022](#)

[CDC: Health, United States 2018](#)

[Characteristics of Patients in a National Outbreak of E-cigarette, or Vaping, Product Use–Associated Lung Injuries — United States, October 2019](#)

[Integration of Oral Health and Primary Care Practice Integrated Models Survey Results: Embedded Dental Providers](#)

EVENTS

[16th Annual Maryland Health Equity Conference, December 5, 2019](#)

[MDAC Members' Meeting, December 9, 2019 \(save the date!\)](#)

[AIDPH 2020 Colloquium: Confronting Inequity through Oral Health Policy, January 14-15, 2019](#)

[OSAP Dental Infection Control Boot Camp™ 2020, January 27-29, 2020](#)

The 2018-2023 Maryland Oral Health Plan outlines 11 oral health goals in three key areas:

Access to oral health care:

- All Maryland children have comprehensive dental insurance coverage through public (Medicaid/MCHP) or private insurance.
- All Maryland adults have comprehensive dental insurance coverage through Medicaid or private insurance.
- All Maryland residents have a dental home.
- Strengthen the oral health safety net provider system.
- Integrate the oral health care system within the medical health care system.

Oral disease and injury prevention:

- Use data to advance optimal oral health for all Marylanders.
- Improve public awareness of oral disease and injury prevention.
- Promote community-based oral disease and injury prevention programs.

Oral health literacy and education:

- Increase understanding of the relationship between oral health and overall health, and promote good oral health practices and access to oral health care.
- Improve collaboration between oral health and other health and human services providers so that patients understand how to navigate the oral health care system and establish a dental home.
- Educate medical professionals and students about the importance of the oral/systemic connection and foster collaboration between medical and dental disciplines and communities.

[**Download the plan now!**](#)

The Maryland Oral Health Plan is financially supported by the Maryland Department of Health.



[National Mobile Dentistry Conference, February 28-29, 2020](#)

[Association of Maternal and Child Health Programs Annual Conference, March 21-24, 2020](#)

[Special Care Dentistry Association Annual Meeting, April 3-5, 2020](#)

National Oral Health Conference, April 6-8, 2020 (Save the date!)

[NRHA Annual Rural Health Conference, May 19-22, 2020](#)

MDAC Members' Meeting
December 9, 2019
5:00 PM - 7:00 PM
Maryland State Dental Association
8901 Herrmann Drive
Columbia, MD

WEBINARS

[Advancing Health Equity through Community Health Workers and Peer Providers: Mounting Evidence and Policy Recommendations, November 20, 2019](#)

[From the Mountains to the Sea: Rural Health Issues and Resources, November 21, 2019](#)

ORAL HEALTH RESOURCES

ACCESS TO ORAL HEALTH CARE

Medicaid

[Medicaid Dental Guidance to States: An Opportunity to Aim for Equity](#)

[A Checklist for Advocates: Improving Children's Oral Health Care in Medicaid/CHIP](#)

Medicare

[Adding a Dental Benefit to Medicare: Addressing Racial Disparities](#)

[Policy Options for Improving Dental Coverage for People on Medicare](#)

[Creating an Oral Health Benefit in Medicare: A Statutory Analysis](#)

Policy

[Study: Medicaid Block Grants and Per Capita Caps Would Risk Families' Oral Health](#)

[Improving Oral Health in Maine: Key Lessons for Policy Advocates](#)

RURAL HEALTH

[The Rural Primary Care Practice Guide to Creating Interprofessional Oral Health Networks](#)

ORAL DISEASE AND INJURY PREVENTION

[Promoting Oral Health in Schools: A Resource Guide](#)

[Know the Risks: E-cigarettes and Young People](#)

[Healthy Habits for Happy Smiles](#)

[FDA "The Real Cost" E-cigarette Prevention Posters](#)

[HPV Vaccine is a Lifesaver](#)

ORAL HEALTH LITERACY AND EDUCATION

[Healthy Teeth, Healthy Kids](#)

[Pregnancy and Oral Health](#)

[School Nurse Resources](#)

[Tiny Smiles, Give Kids a Smile Toolkit](#)

[Age 1 Dental Visit](#)

[Oral Health, Overall Health, and Learning](#)

[AAP: Protect Tiny Teeth Toolkit](#)

PROVIDER RESOURCES

[Maryland Rural Health Plan](#)

[CMS Rural Health Strategy](#)

LEGISLATIVE CONTACTS

[U.S. Senators \(MD\)](#)

[U.S. Representatives \(MD\)](#)

[Maryland State Legislators](#)

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amazonsmile

[Integration of Oral Health and Primary Care
Technical Assistance Toolkit](#)

[American Academy of Pediatrics \(AAP\)
Oral Health Prevention Primer](#)

[Trauma Informed Care in Dentistry: Why It
Matters and How to Get Started](#)

[Managing Older Adults Chairside Guide](#)

[Nutrition Counseling for Obesity Prevention
in Children: A Handbook for the Dental
Community](#)

[Opioids and Children and Adolescents:
Information for Oral Health Professionals](#)

[Addressing Tobacco in Dental Settings: A
Resource for Dental Professionals](#)

[Sports Dentistry: Guidelines for Dentists
and Sports Medicine Physicians](#)

[Oral Health Care During
Pregnancy: Practice Guidance for
Maryland's Prenatal and Dental Providers](#)

[Answering Questions About HPV Vaccine:
A Guide for Dental Professionals](#)



MDAC is pleased to welcome the following new members:

- Laila Saghir, RDH - Smile Programs, The Mobile Dentist
- Marina Schmidt, RDH, MPH
- Julie Teter, RDH, BS, M.Ed - AHEC West

Join us! To become a MDAC member, [click here.](#)

CONTACT

Do you have events or announcements you'd like to share? Contact MDAC, and we'll make every effort to include them in our next newsletter, as space permits.

[Contact MDAC](#)

JOIN

MDAC is statewide coalition of clinical care providers, governments, non-profits, academic institutions, managed care organizations, foundations and associations working collaboratively to improve the health of all Marylanders through increased oral health promotion, disease prevention, education, advocacy and access to oral health care.

[Join MDAC](#)

www.mdac.us

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