



April 2020

HOGAN SIGNS TELEHEALTH LEGISLATION

Authorizes use of teledentistry during COVID-19 crisis



Governor Larry Hogan signed legislation on April 3 authorizing the use of telehealth technology to communicate with new and existing patients, effective immediately. [Senate Bill 402/House Bill 448](#) enables all licensed or board certified Maryland healthcare professionals to use telehealth technology to communicate with new and existing patients during the state of emergency. MDAC and 35 partner organizations sent [a letter to Governor Hogan](#) on April 1, 2020 to request his signature on the legislation.

Visit the [Maryland Healthcare Commission's Telehealth Resource Center](#) for provider information and resources. Read guidance from [Maryland Medicaid](#) regarding billing for teledentistry services. Visit the MDAC website for [teledentistry resources for dental providers](#).

CHOPTANK UTILIZES TELEDENTISTRY DURING COVID-19 CRISIS

Providers address patients' oral health issues, prevent emergency room visits

The Maryland Department of Health has authorized the use of teledentistry during the state of emergency due to the COVID-19 pandemic, a recognition of the importance of oral health to overall health and a significant step forward in improving access to dental care.

Sandra Garbely-Kerkovich, DMD, Vice President and Chief Dental Officer at Choptank Community Health System, is one of many dentists across the state using teledentistry – a live video or phone call with a patient– to view a dental problem in a person's mouth, triage dental conditions, address urgent dental issues to keep patients out of hospital emergency rooms, or educate patients on good oral hygiene habits. Choptank fully implemented teledentistry around the first week of April, after a trial run with a couple of pilot sites, providers, and patients. Dr. Garbely-Kerkovich graciously agreed to an interview with MDAC to share her experience and insights. Her answers to our questions are below:

What challenges, if any, have you faced in treating patients via teledentistry?

Not all patients qualify or would benefit from teledentistry visits. We are still trying to discuss this as a clinical team and see what patients would benefit from this type of visit. We are also still trying to figure out how we can get buy-in from patients for this visit. We are working through obstacles such as a patient's ability to have internet access, understand how to download the app, and have the technology at home on a tablet, computer, or smart phone. We have put together a list for patients of hot spots for internet access and have certain staff members now allocated to walk patients through the process of downloading the app, mostly on their smart phones. It takes time and patience to help these patients with the technology, but we are having more and more success as we designate appropriate staff to this task. The 'Google-Duo' app we are using is HIPPA compliant and has very clear reception with video and audio applications.

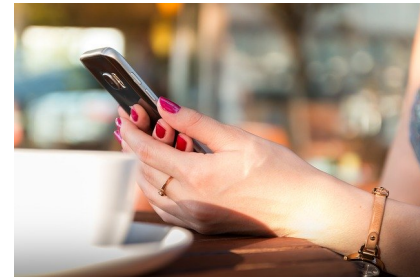
What are the benefits and opportunities of treating patients via teledentistry?

The most important benefit to our patients is the ability to triage and access a patient's current dental concerns without having the patient leave their homes and be at higher risk of being exposed to the coronavirus. These patients are provided a limited oral evaluation where we can discuss their current dental needs and discuss possible treatment options that will allow them to avoid coming into the dental office during this time of risk. We can address ways they can lower risk at home by changing their eating habits or using rinses or OTC medications to address some areas of concern that are not an immediate urgent or emergent need. We can even address urgent/emergent needs by running through some basic steps to determine needs of the patient that a simple phone call would allow. We are able to call in antibiotic and/or

other medications as needed to help address active dental pulpitis or infection. This can save the patient an initial visit to the dental office, and if the patient does eventually need to be seen in the office for a tooth extraction, pulpotomy, sedative filling, etc. we can jump directly to treatment that day and save multiple trips to the office. Teledentistry also keeps us engaged with our patients who are at high risk of dental disease and decay that at most times is affecting their overall health. We have the ability to also address patients with chronic medical diseases and how their dental health is affecting these areas of their health and outcomes. If needed, we can then forward this patient to their medical provider via this telehealth function. These patients know we are here for them, and they get to see and talk directly with their dentist or hygienists. This will only help establish and reinforce the patients' trust in their providers. It will also hopefully lower no-shows for future appointments, and help to improve their overall dental and medical health moving forward.

Have you used teledentistry to treat patients participating in the Medicaid adult dental waiver program?

Most of our in-office dental visits prior to the Maryland Department of Health's approval of teledentistry, and now with teledentistry, have been our adult population with urgent/emergent needs. These are our Medicaid adults who are active/existing CCHS patients, as well as a lot of new patients who are seeking care and do not currently have a dental home. We have patients in this group coming from a couple of hours away seeking care. They are in pain, have active swelling and infection that can become life threatening, and we need to see them and make sure we are helping address their dental needs by keeping them out of the emergency rooms and hospitals. This is important especially in the time of the coronavirus, but even before and after this pandemic. We work closely with our local health departments and hospitals and need to continue to do so as they are grateful to our teams for this access to dental care for this population of patients. We feel we are, as always, the safety net for these patients. Having this option of teledentistry only adds one more component to the access to care for these patients. An example of the ability to utilize teledentistry from one of our adult Medicaid patients comes from a truck driver. This patient was essential personnel and had a dental emergency with a loose tooth, but could not come into the office for care since she was on the road with her job duty. She contacted our office with her concerns. We were able to set up a teledental visit with one of our providers who did need to actually see the patient to assess her situation and dental needs. The provider worked with the patient on an appropriate treatment protocol to help alleviate her pain and concerns while she was on the road. We then provided the patient with an appointment at one of our dental sites to further address her dental needs. Win-win for an adult Medicaid patient and teledentistry, I think.



What services have you provided Medicaid adult dental waiver program participants through teledentistry?

Most times, this population of patients is most vulnerable due to their existing medical conditions and the barriers to care they face. We have been able to reach out to these patients who are at high risk and were on our radar for urgent/emergent treatment needs. We were able to help them work through all the paperwork, insurance barriers or concerns, and set up case workers to address barriers such as transportation issues – all via a teledental visit. We were able to help them fill out their medical history and sliding fee forms with the assistance of a dental staff member, link them in real time to their dental provider to address their dental concerns, determine if they need to come in, and when would be best time for them to come into our office for direct dental care at one of our dental sites. A lot of these patients have transportation issues or are home bound. By taking care of a lot of their insurance issues, cost of treatment questions, paperwork that needs to be filled out, transportation issues, and other barriers to care, we are able to expedite their actual in-office visits. We are able develop trust and lower the anxiety these patients face as they seek dental care. They should be more willing to access care and show up for their appointments, actually. This will allow us to keep them out of the emergency rooms and hospitals long term and contribute to their overall health outcomes.

How have patients you've treated under the Medicaid adult dental waiver program responded to your use of teledentistry?

Most patients are having some difficulty with the technical aspects, but with help from either our dental staff or their family members to walk them through the process, we are able to get them on-line. The patients are very grateful to be able to see and speak with our clinical team and their providers. They want to talk with someone, and are so relieved to have someone walk them through all the paperwork, insurance questions, etc. Believe it or not, we are having trouble getting them off the video call since they really want to talk with someone, see their provider, and have their dental concerns addressed in a convenient, safe environment.

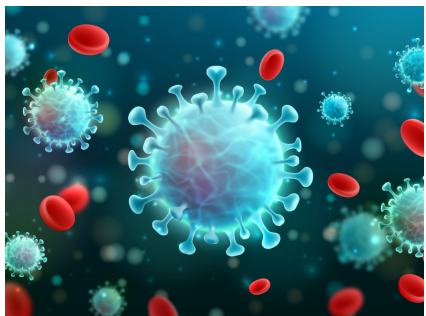
If permitted, would you like to continue the use of teledentistry after the state of emergency is over? If so, why? If not, why not?

I do not think we have a choice. Life as we know it in the dental world and how we provide care has changed forever. I am fortunate enough to have been practicing and providing care to patients for 30 years now, and I felt the effects of the HIV/AIDS onset. It totally changed infection control practices and the way we provide care to patients. This COVID-19 pandemic will do the same. We are looking at more PPE guidelines, including more effective use of N-95 masks. We are looking at implementation of more elaborate isolation rooms, utilization of dental extra-oral suction (aerosol terminators) systems, increasing the HVAC air filtration guidelines and 'Pure Breeze' equipment, and possible testing requirements for all dental staff and patients.

Our dental associations and communities need to look at state-of-the-art clinical studies guidelines to provide less invasive care to our patients – no longer just a “drill and fill” mentality. Teledentistry must be a part of this process as we look forward to new compliance mandates, guidelines, and recommendations - not only at the CDC, FDC, ADA, OSHA and NIOSH levels, but at the individual state levels - to provide safe, effective and low-risk care to our patients.

FEDERAL, STATE GUIDANCE URGES POSTPONING NON-URGENT CARE

Move to emergency dental treatment to reduce risk of COVID-19 spread



U.S. Surgeon General Vice Admiral Jerome Adams asked health systems on March 22nd to “cancel or delay nonessential elective procedures in a way that minimizes potential harm to patients. These include dental procedures as well.” The guidance was issued in an effort to contain the spread of the COVID-19 virus.

On April 8th, The CDC Division of Oral Health updated their previous guidance, stating that “In order to protect staff and preserve personal protective equipment and patient care supplies, as well as expand available hospital capacity during the COVID-19 pandemic, the CDC recommends that dental facilities postpone elective procedures, surgeries, and non-urgent dental visits, and

prioritize urgent and emergency visits and procedures now and for the coming several weeks.”

PREVENT THE SPREAD OF COVID-19

Tips from Asst. Surgeon General & Chief Dental Officer at U.S. Public Health Service

The following tips on preventing the spread of COVID-19 are courtesy of Rear Admiral Timothy L. Ricks, DMD, MPH, FICD, Assistant Surgeon General and Chief Dental Officer at the U.S. Public Health Service.

Steps you can take to reduce the spread of COVID-19:

- Health care professionals can [take steps to protect themselves](#) at work and at home. Older people and people with serious chronic medical conditions are at [higher risk for complications](#).
- Follow the policies and procedures of your agency/organization related to illness, cleaning and disinfecting, and work meetings and travel.
- Stay home if you are sick, except to get medical care. Learn [what to do if you are sick](#).
- Inform your supervisor if you have a sick family member at home with COVID-19. Learn what to [do if someone in your house is sick](#).
- Wash your hands often with soap and water for at least 20 seconds. Use hand sanitizer with at least 60% alcohol if soap and water are not available.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow. Throw used tissues in the trash and immediately wash hands with soap and water for at least 20 seconds. If soap and water are not available, use hand sanitizer containing at least 60% alcohol. Learn more about [coughing and sneezing etiquette](#) on the CDC website.
- Clean AND disinfect frequently touched objects and surfaces such as workstations, keyboards, telephones, handrails, and doorknobs. Dirty surfaces can be cleaned with soap and water prior to disinfection. To disinfect, use [products that meet EPA's criteria for use against SARS-CoV-2](#) the cause of COVID-19, and are appropriate for the surface.
- Avoid using colleagues' phones, desks, offices, or other work tools and equipment, when possible. If necessary, clean and disinfect them before and after use.
- Practice social distancing by avoiding [large gatherings](#) and maintaining distance (approximately 6 feet or 2 meters) from others when possible.

Please go to www.cdc.gov/coronavirus/ for the latest information about how to protect yourself or what to do if you think you are sick.

SANTA FE GROUP ISSUES CALL TO ACTION TO DENTAL PROFESSION

Seeks volunteers to address COVID-19 response and recovery

The Santa Fe Group, an oral health think tank that fosters policy and initiates actions to improve the health and well-being of the public, issued the following call to action to oral health professionals regarding COVID-19 response and recovery:

In our 25-year history as an action-oriented, nonprofit think tank, passionate about improving lives through oral health, the volunteer members of the Santa Fe Group have never experienced anything like the COVID-19 pandemic. We share in the nation's collective shock and grief as every hour brings news about rising health care systems demands, critical stay at home orders, new cases, and deaths. We also marvel at the extensive work of our dental colleagues who fight under unprecedented conditions for ways to address

emergency oral health services.

Therefore, as part of our well-established mission to connect, convene and communicate with healthcare professionals to help catalyze change, we ask you to consider two important endeavors:

Addressing Response and Recovery:

Currently, the Santa Fe Group is working with our partners to develop a thoughtful plan, including appropriate testing protocols and in-office mitigation techniques, to win patient confidence and help bring back the practice of dentistry. Also, the Santa Fe Group will work with other organizations to develop a comprehensive consensus statement and white paper on the role of dentistry in the COVID-19 response that takes into account all phases, including preparing for the second wave and facilitating with future testing and vaccine administration. If you are interested in keeping abreast of these efforts, please send your email/contact information to: SantaFeGroupOralHealth@gmail.com.

Answering the Call to Volunteer:

Although the entire dental enterprise and dental professionals are experiencing tremendous volatility, we must not overlook dental team members' much needed skills to support both the public health and clinical care needs while we collectively work to return to practice. Given the urgency of the moment to save lives and contribute to this stage of the response, we call upon the dental profession and the entire dental enterprise to consider joining us in an effort to contribute to the COVID-19 crisis through volunteering. Needed services are diverse, vary geographically and include support for contact tracing, hotline management, health education, triage and screening services, provision of consultations for oral problems, and much more. Should you wish to join in this effort, please see below for helpful links and resources.

The effects of the COVID-19 pandemic will be long lasting and its imprint on all health professions will be profound. However, right now the passing minutes are too precious to waste. We call on you to use your time and your critical skills to help make a difference.

With gratitude and support,
The Volunteer Members of the Santa Fe Group

Link to be informed on response and recovery:

- SantaFeGroupOralHealth@gmail.com

Links to resources to volunteer your services:

- Go to the [Medical Reserve Corps site](#) to learn more and access your local unit
- Contact your local hospital or your State's hospital association, or try: [Health Guide](#)
- [USA Hospital Associations](#)
- Access the [Emergency System for Advanced Registration of Volunteer Health Professionals](#) (ESAR-VHP) to pre-register as a volunteer health professional.

OOH LAUNCHES ORAL CANCER AWARENESS CAMPAIGN

Social Marketing Campaign Reveals Oral Cancer is Twice as Common in Men

In recognition of National Oral Cancer Awareness Month, the Maryland Office of Oral Health has launched a social marketing campaign that brings attention to the often-overlooked impact of oral cancer. The campaign relies primarily on transit advertising (poster ads on buses, at transit stops, and in Metro cars) to reach out to men and their significant others with the jarring and little-known fact that oral cancer is twice as common in men. The campaign brings attention to the need to talk with your dentist about getting an oral cancer exam and understanding the signs, symptoms, and risk factors of oral cancer. The campaign began in late March and is currently running in Baltimore City, Baltimore County, and portions of Montgomery county until early May.



MDH OFFICE OF ORAL HEALTH RELEASES 2019 LEGISLATIVE REPORT

Cites progress to improve oral health safety net programs and access to care

Last month, the Maryland Medicaid Program and the Maryland Department of Health Office of Oral Health submitted a legislative report to the Governor and the Maryland General Assembly on efforts to improve oral health in Maryland.

The report focused on key initiatives, including the availability and accessibility of Maryland Medicaid dentists; Medicaid dental administrative services organization (ASO) utilization outcomes, and allocation and use of related dental funds; the results of the Oral Health Safety Net Program administered by the Office of Oral Health; the findings and recommendations of the Office of Oral Health's Oral Cancer Initiatives; and

other related oral health issues.

[Read the report](#) to learn more about the oral health accomplishments in Maryland.

DEADLINE SUSPENDED FOR CHW CERTIFICATION APPLICATIONS

Deadline extended to 30 days after termination of state of emergency



Community health workers (CHWs) may continue to submit applications for certification based on experience until 30 days after the state of emergency has been terminated in Maryland.

CHWs no longer need to request an extension to submit an application for certification based on experience. The previous deadline of March 31, 2020 has been extended to 30 days after termination of the state of emergency in Maryland. To date, more than 500 CHWs have been certified.

For more information, eligibility requirements and application instructions, visit [Community Health Worker Certification](#).

To access the CHW application and materials in Spanish, visit [CHW Certification Application in Spanish](#).

For information about accreditation for CHW certification training programs, visit [Community Health Worker Certification Training Program Accreditation](#).

"I go to the dentist every six months, I get a cleaning, so I'm fortunate enough that those fluoride treatments as a child worked. Not getting any cavities."

-Daniel Tosh, American comedian, actor, writer

NEWS

[Patients in Pain, Dentists in Distress: In a Pandemic, the Problem with Teeth](#)

[Maryland Governor Signs New Telehealth Rules, Programs Into Law](#)

[As Some States Consider Reopening, ADA Offers PPE Guidance to Dentists](#)

[How to Keep Your Teeth Healthy During the COVID-19 Outbreak](#)

[FDA Approves New Swab to Ramp Up COVID-19 Testing](#)

[UH to Launch Clinical Trial in the Fight to Protect Clinicians Against COVID-19](#)

ARTICLES

[Emerging Health Workforce Strategies To Address COVID-19](#)

[Teledentistry: Providing Access to Care](#)

MD ADULT DENTAL WAIVER PROGRAM BY THE NUMBERS



The Maryland Adult Dental Waiver Program is off to a terrific start! According to Maryland Medicaid, from June 1, 2019 December 31, 2019:

- 7,759 claims were submitted
- 4,160 unique members filed valid claims
- 280 members met annual \$800 cap
- 546 unique providers submitted claims

[During the COVID-19 Crisis](#)

[ADA Policy on Teledentistry](#)

[Fast-Track to Teledentistry: Removing Barriers to Care While Maximizing Overall Health](#)

[Growing Data Underscore that Communities of Color are Being Harder Hit by COVID-19](#)

[We're All in This Together: Protecting Individuals with Complex Health Needs During COVID-19](#)

[Communities of Color at Higher Risk for Health and Economic Challenges due to COVID-19](#)

[The Color of Coronavirus: COVID-19 Deaths by Race and Ethnicity in the U.S.](#)

[States Use Race and Ethnicity Data to Identify Disparities and Inform their COVID-19 Responses](#)

[Stemming the Risk of Disability Bias During the COVID-19 Pandemic](#)

[With Half of Adults Over 65 Lacking Dental Insurance, Poll Finds Strong Support for Universal Medicare Dental Benefit](#)

[Brush Up on Oral Health: Choosing Healthy Drinks](#)

[Clemson Researchers Unraveling Role Of Fungi In Early Childhood Dental Health](#)

[Efforts to Keep Healthy Smiles During the COVID-19 Pandemic](#)

[Resources for Oral Health Professionals to Keep Kids Safe](#)

WEBINARS

[COVID-19 Infection Control Protocols and Procedures \(Recorded\)](#)

[Infection Control and Preventive Care During a National Health Crisis \(recorded\)](#)

[School-Based Health Centers in the Time of COVID-19 \(recorded\)](#)

[Pathways to Improving Children's Oral Health Using Silver Diamine Fluoride, May 20, 2020](#)

[Practical Aspects and Examples of Teledentistry](#)

● **\$1,303,003.82 spent year-to-date**

Note: 2019 numbers have been adjusted to reflect claims received after the first of the year for services performed in 2019.

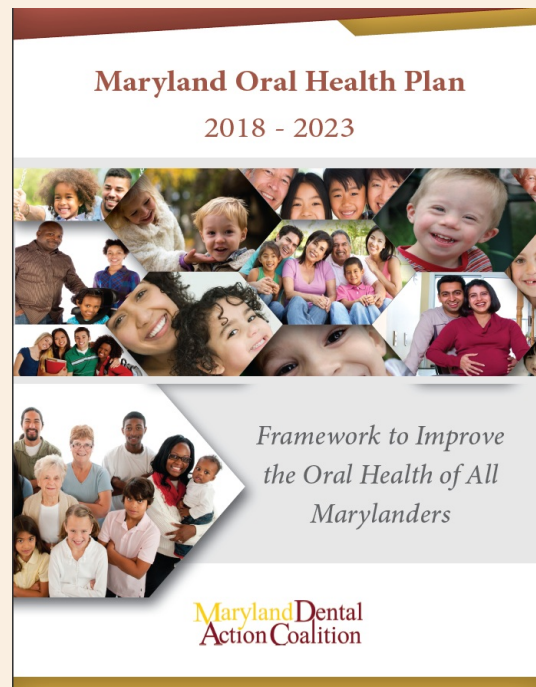
From January 1, 2020 - February 12, 2020:

- **1,021 claims were submitted**
- **814 unique members filed valid claims**
- **12 members met annual \$800 cap**
- **281 unique providers submitted claims**
- **\$173,182.00 spent year-to-date**

Following guidance from Governor Hogan in response to the COVID-19 outbreak, all elective dental procedures have ceased for the time being and many practices in the state have temporarily closed.

However, Governor Hogan extended teledentistry coverage to all Maryland Healthy Smiles participants. This is an exciting and innovative way to ensure people receive care during this uncertain time. MDAC will report on the impact of that coverage in the coming months.

2018-2023 MARYLAND ORAL HEALTH PLAN GOALS



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.

[Coronavirus Disease \(COVID-19\) Advice for the Public: Myth Busters](#)

EVENTS

In light of federal and state actions to contain the novel coronavirus, the events listed below may be postponed or cancelled. For the most up-to-date information, please check with the event sponsor.

[ADHA Annual Conference 2020, June 12-14, 2020](#)

[Special Care Dentistry Association Annual Meeting, August 7-9, 2020](#)

[National Conference on Health Communication, Marketing & Media, August 10-12, 2020](#)

[Health Literacy in Action Conference, October 18-20, 2020](#)

VIDEOS

[Q&A: COVID-19 Transmission and Emergency Care](#)

[Hidden Pain: America's Oral Health Crisis](#)

WEBINARS

[Oral Health for People with Intellectual and Developmental Disabilities \(recorded\)](#)

PODCASTS

[The Doctor Is In - Episode Six: Vaping & Teen Health](#)

- 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](#)

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

COVID-19 RESOURCES

PATIENT RESOURCES

[Oral Health Home Habits for Healthy and Happy Smiles](#)

[CDC: What You Need to Know About Coronavirus Disease 2019 \(COVID-19\)](#)

[World Health Organization Coronavirus Disease \(COVID-19\) Advice for the Public](#)

[Maryland Public Health Association](#)

PROVIDER RESOURCES

[Maryland Department of Health Coronavirus 2019 \(COVID-19\) Outbreak](#)

[Using Teledentistry to Maintain Services and Contact with Patients During the Time of COVID-19 Physical Distancing](#)

[CDC: Interim Infection Prevention and Control Guidance for Dental Settings During the COVID-19 Response](#)

[COVID-19 Resources](#)

[How Coronavirus Spreads](#)

[Coronavirus: How to Protect Yourself from COVID-19](#)

[MedChi Coronavirus Resource Center](#)

[Social Distancing: Places And Events To Avoid Because Of Coronavirus](#)

[Self-Quarantine? Isolation? Social Distancing? What They Mean And When To Do Them](#)

[What Are the Symptoms of COVID-19?](#)

[Steps to Help Prevent the Spread of COVID-19 if You Are Sick](#)

[How to Prepare Your Household for Coronavirus](#)

[Emergency Preparedness Checklist](#)

[What Is a Dental Emergency?](#)

[Dr. Sanjay Gupta Shows the Proper Way to Wash Your Hands](#)

[How to Protect Yourself and Others](#)

[Social Distancing: What Does It Mean?](#)

[Coronavirus Disease \(COVID-19\) Advice for the Public: Myth Busters](#)

ORAL HEALTH POLICY

[National Council of State Legislatures: COVID-19 Resources for State Legislators and Staff](#)

[Oral Health Care Access in the COVID-19 Era and Beyond](#)

[State Health Coverage Strategies for COVID-19](#)

Medicaid

[Medicaid's Role in the Next Phase of COVID-19 Response: Part I](#)

[Addressing the Needs of the Medicaid Population During the COVID-19 Pandemic](#)

[How Should Medicaid Health Plans](#)

[Non-Surgical Caries Management Approaches: Treatment Recommendations During the COVID-19 Pandemic](#)

[COVID-19 Public Health Resources](#)

[COVID-19 Printable Handouts \(multiple languages\)](#)

[Talking to Kids About Coronavirus](#)

[Talking to Older Adults About Coronavirus](#)

[Tips for Oral Health Providers on Talking to Patients about COVID-19](#)

[ADA: COVID-19 State Mandates and Recommendations](#)

[ADA: What Constitutes a Dental Emergency?](#)

[ADA: Interim Mask and Face Shield Guidelines](#)

[ADA Coronavirus \(COVID-19\) Center for Dentists](#)

[ADA Releases Coronavirus Handout for Dentists Based On CDC Guidelines](#)

[COVID-19 Coding and Billing Interim Guidance](#)

[How Do I Ethically Continue to See Patients During the COVID-19 Pandemic?](#)

[CDC: Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#)

[CMS: FAQs on Catastrophic Plan Coverage and the Coronavirus Disease 2019 \(COVID-19\)](#)

[CMS: Adult Elective Surgery and Procedures Recommendations](#)

[CMS: Coverage and Payment Related to COVID-19 - Medicare](#)

[CMS: Current Emergencies](#)

[American Chemistry Council: EPA Approved COVID-19 Fighting Products](#)

[Medicare Telemedicine Health Care Provider Fact Sheet](#)

[COVID-19 Economic Impact on Dental Practices](#)

[NNOHA COVID-19 Resources](#)

[OSHA Guidance Summary: Preparing Workplaces for COVID-19](#)

[Respond to COVID-19?](#)

RURAL HEALTH

[Rural Response to Coronavirus Disease 2019 \(COVID-19\)](#)

LEGISLATIVE CONTACTS

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

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

[Maryland State Legislators](#)

[AIDPH COVID-19 Resource Center](#)

SUPPORT MDAC

Give a little to make a big impact! Your gifts, both large and small, will be used to promote good oral health behaviors, prevent oral disease and injury, and improve access to oral health care for all Marylanders, no matter where they live or what their special circumstances might be. Please help us continue this important work.

[DONATE NOW!](#)

MDAC is a 501(c)3 non-profit organization and contributions to support its activities are most appreciated. Thank you.

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

FOLLOW US

