Evidence-Based Practices to Improve Oral Health in the SBHC Setting

2016-2017 SBHC Performance Measures Webinar Training Series
Disclosure Statement:
No financial relationships to disclose

Maureen Daly, MD, MPH
Anne Gibbs, RDH
Gail Reeder, MPH

Planning Committee
Greta Klingler
Lynn Bakken
Kristina Green
Maureen Daly

Statement of Disclosure

We have no relevant financial relationships with commercial interests pertaining to the content presented in this program.
Webinar Objectives

1. Describe the Colorado SBHC oral health performance measure.

2. Discuss two best practices in oral health that can be delivered in the primary care setting.

3. Identify the appropriate oral health service codes to use in order to maximize billing revenues.
Housekeeping...

**Sign in** - Please type name & Email in the Chat Box.

**Questions** - Everyone is muted. Please type your questions into the Chat Box.

**Recording** - We are recording this. The recording & slides will be available on the CDPHE website.

**Evaluation** - We will provide the link to the evaluation after the presentation in the Chat Box. Please complete before March 15th.

**CNEUs** - If you are an RN or NP, you will need to stay throughout the entire webinar and complete the evaluation before March 23th in order to receive CNEUs.
Performance Measure Work Group
(May to November 2015)

- Deidre Callanan - CASBHC
- Lynn Bakken - MCPN
- Erin Major - SCCC SBHCs
- Ann Galloway - GRHD SBHCs
- Jen Suchon - Northside SBHC
- Cassie Comeau - SCCC SBHCs
- Suzy Rosemeyer - APS SBHCs
- Anne Taylor - RMYC SBHCs
- Sonja O’Leary - DH SBHCs
- Shannon Morrison - Apex
Rationale for Oral Health Measure

• Best practice
• Relevance to population served
• Ability to use measure to improve care
• Highlight SBHC oral health services
Oral Health Screen

Definition

Percentage of SBHC users (aged 3 to <21yrs) with documentation of annual oral health screen by:

• SBHC PCP OR
• SBHC Dental Professional.
Reporting Measure

TWO OPTIONS FOR REPORTING

(1) **Apex reports** Screens by PCP using the following code:

   **D0190**: Oral health screening by PCP, 3-20 years

(2) **You report** at the end of the year the percentage of users with oral health screen by SBHC dental professional on the Hub.
Oral Health Integration in School Based Health Centers

March 8, 2016

Presenters
Anne Gibbs
CDPHE Oral Health Unit
National Impact

Dental caries is the most common chronic disease
Dental disease is largely preventable

Children with at least one untreated, decayed tooth
- 20% (1 out of 5) ages 5-11
- 13% (1 out of 7) ages 12-19 yrs
- 25% ages 5-19 yrs (low-income families)
- 11% ages 5-19 yrs (higher-income families)
Colorado Impact

39.7% of kindergarteners have already experienced tooth decay\(^1\)
By 3\(^{rd}\) grade, 55.2% of children have experienced tooth decay\(^1\)

CO Children
1-14 yrs old\(^2\)
Child Health Survey
Personal Impact

- Pain
- Infection
- Difficulty sleeping
- Increased disease in permanent teeth
- Impaired chewing and nutrition
- Poor self-esteem
- Extensive and expensive treatment
- School/work absences
- General anesthesia carries a slight but real risk of death
- Multiple exposures to general anesthesia before age 2 years associated with 2-fold increase in ADHD$^4$
Preventive Oral Services in Primary Care

Why?

- Shortage of dentists
- Clients go to the doctor’s office earlier and more often than the dentist’s office
- Emphasizes oral health-systemic connection
- National guidelines support oral health services in primary care setting
CO Dental Shortage Areas
Oral Preventive Services in the Medical Home

Preventing Dental Caries in Children from Birth Through Age Five Years
Risk Assessment

- Determines scope of services to be provided
- Risk assessment must be part of the medical record in accordance with Colorado Medicaid/CHP+
- Required for ages 0-4 years
Oral Exam

Caries
- Early stage - white, demineralized areas
- Later stage - cavities or obvious decay
- Restorations are evidence of previous decay/high risk

Periodontal disease
- Erythematous, bulbous, bleeding gingiva, tooth mobility, gingival recession
- Early stage - gingivitis
- Later stage - periodontitis
Fluoride Varnish

- Adheres well to tooth surface limiting ingestion
- A meta-analysis suggests a **37% reduction** in decayed, missing, and filled tooth surfaces on primary teeth in high risk populations\(^1\)

- Apply **every six months** for all children
- ADA/AAP recommend **every three months** for highest risk\(^2\)
- Cost: approx $1 per application
Certification Training for Primary Care

“Qualified Medical Personnel”

- MDs, DOs, NPs and PAs with a focus on primary care, general practice, internal medicine, pediatrics
- Participated in on-site training by the Cavity Free at Three (CF3) team or have completed Mod 2 (child oral health) and Mod 6 (fluoride varnish) in the Smiles For Life (SFL) curriculum when treating Child Clients age 0-12 yrs
- Participated in Module 3 (adult oral health) and Module 6 (fluoride varnish) in the SFL curriculum when treating Child Clients ages 12-20 yrs.
- Qualified medical personnel who complete this training must provide the documentation of this training when requested.
Certification Training for Primary Care

CavityFreeAtThree.org
Free training for CO providers treating children ages birth- age 12

- Group training
- Certification emailed
- Didactic component
- Hands-on component
- Post training support
CF3 Provider Resources

- Cavity Free at Three training
  - Children’s oral health
  - Pregnancy and oral health
  - Hands-on component
- Certification for medical providers
- Patient education materials (in 11 languages!)
- Follow up support /Technical assistance
  - Billing
  - EHR
  - Medicaid/CHP+ application
  - Clinical implementation coaching
  - Policy development
Certification Training for Primary Care

Smiles for Life (SFL)

Web based modules

- Must log-in individually, complete modules and post-training test
- Print certificate
- 2 modules for treating children ages birth-12 yrs
- 2 modules for treating children ages 12-20 yrs
Upcoming Certification Trainings

UPCOMING TRAININGS

CF3 offers medical and dental providers free training, resources and support to help them deliver preventive oral health services in their practices. Over 5,000 medical and dental providers, health professional students and children’s oral health advocates have participated in CF3 training.

By successfully completing CF3 training, primary care providers will be certified to deliver oral health screening and fluoride varnish services in Colorado.

Components of CF3 Training Includes:

- Information about preventing dental disease in pregnant women and young children
- Key oral health messages using motivational interviewing
- Caries risk assessment
- Hands-on clinical skills training in oral health screening and fluoride varnish application
- Help with billing preventive oral health services
- Provider resources supporting patient education

REGISTER HERE FOR UPCOMING TRAININGS AND PRESENTATIONS

<table>
<thead>
<tr>
<th>Date/Time</th>
<th>Location</th>
<th>Trainer</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friday, February 26</td>
<td>CU Family Medicine Student Interest Group, Anschutz Medical Campus, Aurora, E2RN Room 1202</td>
<td>TRD</td>
<td>Certification Training Lunch included with RSVP</td>
</tr>
<tr>
<td>Thursday, March 3</td>
<td>Colorado Dept. of Public Health and Environment, 4300 Cherry Creek Drive South, Building A, 1st Floor, Sabin Room, Denver, CO 80246</td>
<td>TRD</td>
<td>Certification Training Refreshments Provided</td>
</tr>
<tr>
<td>Friday, March 11</td>
<td>Concorde Career College, 111 N. Havana, Room 403, Aurora, CO 80010</td>
<td>Valene Haustein, RDH, MBA</td>
<td>Open to Dental Hygiene Students Lunch Provided with RSVP</td>
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<tr>
<td>Wednesday, March 16</td>
<td>Colorado Coalition for the Homeless, 2130 Stout Street</td>
<td>TRD</td>
<td>Certification Training Refreshments Provided</td>
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</tbody>
</table>

COLORADO Department of Public Health & Environment
Medicaid Dental Billing for the Medical Professional

Gail Reeder, MPH
Dental Outreach Coordinator

March 8, 2016
Our Mission

Improving health care access and outcomes for the people we serve while demonstrating sound stewardship of financial resources.
Objectives

• Dental Benefit in rule
• DentaQuest-Dental Providers
• Web Portal-Medical Providers
• Billing Information by codes and age
• High Risk
• Provider Revalidation
Visit the **Stakeholders Tab** for more information on our rules
DentaQuest Scope of Services

- Network Development, Provider Relations and Education
- Utilization Management-review by specialty appropriate dentist
- Customer Service
- Member Outreach and Wellness Programs
- Utilization Review
- Claims Processing and Payment
- Quality Improvement
- Eligibility Data
- Encounter Data Transmission
- Complaint and Grievance Resolution
- Reporting
The **ORM** outlines the benefit.
The Department Web Portal

Provider Training is available. Schedule posted on our website.
## Code Table

**ORAL HEALTH CODES AVAILABLE TO QUALIFIED MEDICAL PROFESSIONALS** (These codes are also used by dental professionals)

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION</th>
<th>REIMBURSEMENT</th>
<th>Frequency</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>D0145</td>
<td>Oral health evaluation and counseling with primary caregiver (ages 0-2 years)</td>
<td>$ 30.44</td>
<td>2-up to 4/yr if high risk</td>
<td>Use Pediatric Oral Health Screening (Cavity Free at Three) Form. Must be billed with Well-Child Visit (WCV).</td>
</tr>
<tr>
<td>D0190</td>
<td>Oral health screening by PCP (ages 3-4 years)</td>
<td>$ 15.91</td>
<td>2-up to 4/yr if high risk</td>
<td>Must be billed with WCV.</td>
</tr>
<tr>
<td>D0190</td>
<td>Oral health screening by PCP (ages 5-20 years)</td>
<td>$ 15.91</td>
<td>3</td>
<td>Doesn’t have to be with WCV.</td>
</tr>
<tr>
<td>D1206</td>
<td>Topical fluoride varnish (0-4 years)</td>
<td>$ 16.02</td>
<td>2-up to 4/yr if high risk</td>
<td>Must be billed with WCV.</td>
</tr>
<tr>
<td>D1206</td>
<td>Topical fluoride varnish (ages 5-20 years)</td>
<td>$ 16.02</td>
<td>3</td>
<td>Doesn’t have to be billed with WCV.</td>
</tr>
</tbody>
</table>
High Risk

Child Members determined to be at high risk for caries (decay) are eligible for additional services.

High risk is indicated by:

1. presents with demonstrable caries
2. has a history of restorative treatment
3. has a history of dental plaque
4. has a history of enamel demineralization
5. is a child member (age 0 through 20 years old) of a mother with a high caries rate, especially with untreated caries
6. a child member (age 0 through 20 years old) who sleeps with a bottle containing anything other than water, or who breastfeed throughout the night (at-will nursing)
7. is a child member (age 0 through 20 years old) who has special health needs
Visit the **Provider Tab** to Enroll/Revalidate
Contact Information

Gail Reeder
Dental Outreach Coordinator
Gail.Reeder@state.co.us

Bill Heller
Director, Provider Relations and Dental Programs
Vacant

Medicaid Dental Program Policy & Operations Specialist
Alan S. Kislowitz, MSHA

Colorado Medicaid and CHIP Dental Programs Contract Manager
CASBHC ORAL HEALTH RESOURCES
(1) SBHC Screening Form for School-Aged Children
(2) CASBHC’s Oral Health Toolkit
http://www.casbhc.org/oral_health.html

Deidre Callanan, Director of Clinical Programs at CASBHC
303-570-0988
callanan@casbhc.org
Questions or Concerns?
Thank You!