

Teledentistry in Arizona

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Objectives

- Describe traits of an urban/suburban teledentistry program.
- Apply lessons learned from the development and implementation of a teledentistry program.
- Identify areas of focus for the future success of teledentistry.



Who are you?

- Clinical dentist, clinical hygienist, administrator, other position?
 - Practice location: Rural, urban, suburban?
 - Clinic/office type: Private practice, government agency, community health center, detention center/prison, mobile dentistry?
 - Anyone working with teledentistry?
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Who is ATSU?



Who is ATSU?

- Health sciences university
- “First in whole person healthcare”
- Two campuses
- Dozens of partnerships with community health centers
- First dental school in Arizona



HRSA Funding

- \$1.7 million over 5 years
- Focus on interprofessional education
- Develop telehealth connected teams
- Hire one dentist, one hygienist, part-time grant manager
- Funds to cover educational expenses and travel for dissemination
- Grant #D85HP20045



Additional Support and Disclaimer

- This project has received support from MouthWatch, LLC
- The presenter is a clinical advisor with MouthWatch, LLC
- Delta Dental of Arizona Foundation awarded ATSU-ASDOH \$40,000 in grant funding to purchase the teledentistry vehicle



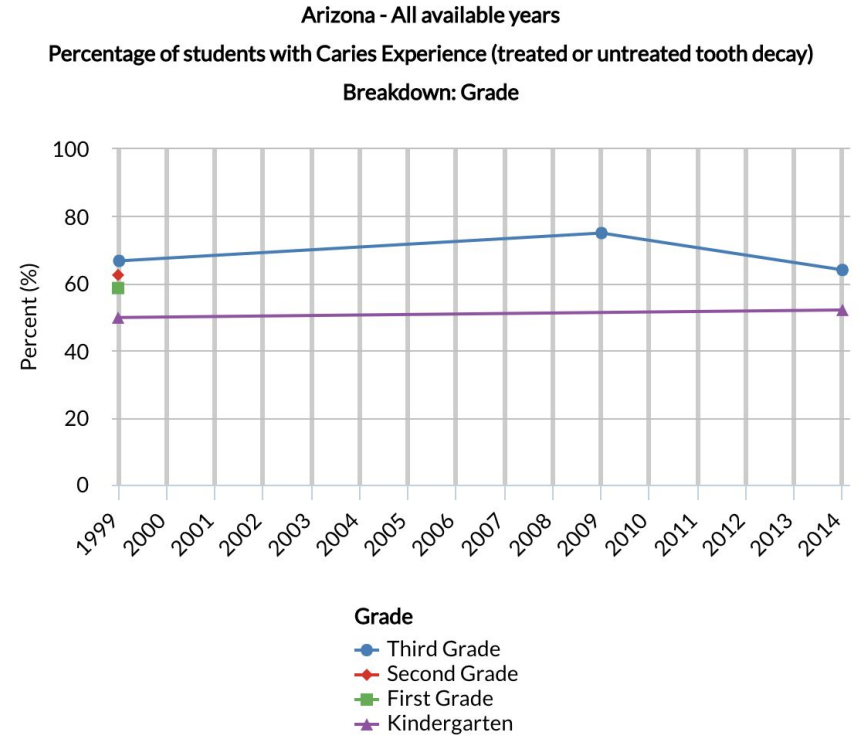
Grant Objectives

- Expand didactic IPE curricular offerings
- **Expand clinical IPE telehealth connected teams at local underserved partnering sites** and IPE clinical training experiences at partnering FQHCs
- Implement special population oral health education center
- Evaluate and disseminate outcomes



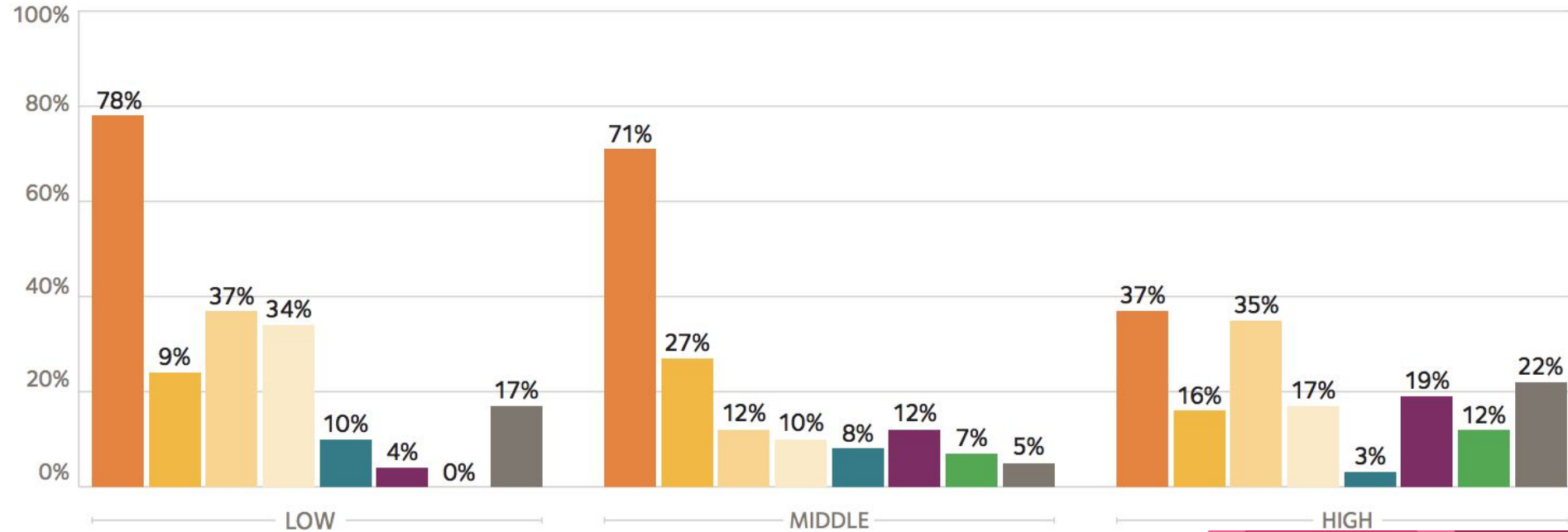
The Stats for Arizona and Phoenix

- Phoenix is the 5th largest city
- Phoenix metro has the 12th highest population
- Arizona children have some of the highest rates of dental disease
- Adults might make it to a dentist but for what reason?
- Most children in Arizona live close to a Medicaid dentist, so why do they have disease?



Data Source: State Oral Health Survey

Why aren't people going to the dentist?



Cost / Afraid of Dentist / Inconvenient location or time / Trouble finding a dentist
No original teeth / No perceived need / No reason / Other

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social integration	Health coverage
Income	Transportation	Language	Access to healthy options	Support systems	Provider availability
Expenses	Safety	Early childhood education		Community engagement	Provider linguistic and cultural competency
Debt	Parks	Vocational training		Discrimination	Quality of care
Medical bills	Playgrounds	Higher education		Stress	
Support	Walkability				
	Zip code / geography				

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

What options do we have to reach populations?

Community water fluoridation	Reaches all within a fluoridated community regardless of barriers
School-based programs	Reach highest number of high-risk kids but only during the school year
Water fluoridation	Passive vehicle, requires strict oversight
Sealants	Best option for preventing occlusal caries, requires dental personnel
Fluoride varnish	Good option for early carious lesions, can be applied by anyone
Fluoride rinses	Not as cost effective as others, requires keeping a close eye on kids
Mobile vans	Need a lot of space, costly to maintain, can provide nearly any service
Portable dentistry	Easy to move equipment, need space within a facility, can provide most services

Working at the Top of Your Scope

With any system of care delivery, it will only be most efficient if everyone is working at the top of their scope. Some systems allow for this, others inhibit it. With advancements in technology, we have ways for all members of the oral health team to work at the top of their scopes.



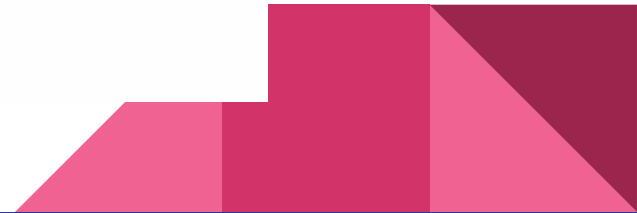
What is teledentistry?

Teledentistry is the use of technology (including digital radiographs, digital photos/videos, electronic health records, the Internet, etc.) to facilitate the delivery of oral healthcare and oral health education services from a provider in one location to a patient in a physically different location.

American Dental Association



Teledentistry and Telehealth



Why teledentistry in an urban or suburban area?

- Patients face barriers getting to a dentist
- More costly to send a dentist into the field to examine patients
- Surgical care is often not provided on the same day as the examination
- Allows all members of the oral health team to work at the top of their scopes
- Dentist makes him/herself available as needed for consultations, examinations, and surgical care either in the field or at a dental office



Steps to Developing the Program

- Learning about teledentistry
- Learning about state laws
- Being in compliance for reimbursement
- Developing community partners
- Developing curriculum
- Purchasing equipment and supplies



Learning About Teledentistry

- Dr. Paul Glassman
- ADA Teledentistry Guidance
- Comprehensive ADA Policy Statement on Teledentistry
- UoP Teledentistry White Paper

D9995 and D9996 ADA Guide – Version 1 – July 17, 2017 – Page 1 of 10
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D9995 and D9996 – ADA Guide to Understanding and Documenting Teledentistry Events

Developed by the ADA, this guide is published to educate dentists and others in the dental community on these procedures and their codes first published in CDT 2018 and effective January 1, 2018.

Introduction

CDT 2018 marks the first time teledentistry codes have been added to the code set. Teledentistry provides the means for a patient to receive services when the patient is in one physical location and the dentist or other oral health or general health care practitioner overseeing the delivery of those services is in another location. This mode of patient care makes use of telecommunication technologies to convey health information and facilitate the delivery of dental services without the physical constraints of a brick and mortar dental office.

The two full CDT Code entries are:

D9995 teledentistry – synchronous; real-time encounter

Reported in addition to other procedures (e.g., diagnostic) delivered to the patient on the date of service.

D9996 teledentistry – asynchronous; information stored and forwarded to dentist for subsequent review

Reported in addition to other procedures (e.g., diagnostic) delivered to the patient on the date of service.

The following pages contain a number of Questions and Answers, and Scenarios, all intended to provide readers with insight and understanding of how care is delivered and reported when teledentistry is a facet of the process.

Questions and Answers

1. What is telehealth and teledentistry?

Telehealth is not a specific service; it refers to a broad variety of technologies and tactics to deliver virtual medical, health, and education services. As an umbrella term, it is further defined when applied to specific health care disciplines, such as dentistry.


Teledentistry, according to the ADA's *Comprehensive Policy Statement on Teledentistry*, refers to the use of telehealth systems and methodologies in dentistry. Teledentistry can include patient care and education delivery using, but not limited to, the following modalities:

- Live video (synchronous): Live, two-way interaction between a person (patient, caregiver, or provider) and a provider using audiovisual telecommunications technology.
- Store-and-forward (asynchronous): Transmission of recorded health information (for example, radiographs, photographs, video, digital impressions and photomicrographs of patients) through a secure electronic communications system to a practitioner, who uses the information to evaluate a patient's condition or render a service outside of a real-time or live interaction.
- Remote patient monitoring (RPM): Personal health and medical data collection from an individual in one location via electronic communication technologies, which is transmitted

ADA American Dental Association®
America's leading advocate for oral health

Learning About State Laws - ARS 36-3611

"Teledentistry" means the use of data transmitted through interactive audio, video or data communications for the purposes of examination, diagnosis, treatment planning, consultation and directing the delivery of treatment by dentists and dental providers in settings permissible under title 32, chapter 11 or specified in rules adopted by the board.



Learning About State Laws - ARS 32-1289.01

A dentist who holds an active license pursuant to this chapter and a dental hygienist who holds an active license pursuant to this article may enter into an affiliated practice relationship for the delivery of dental hygiene services.



Developing Community Partners

- Maricopa Juvenile Detention Centers
- East Valley Adult Resources
- Maricopa Reentry Center
- Arizona Recreation Center for the Handicapped
- Children's Rehabilitative Services



Being in Compliance for Reimbursement

- Patient focus is those on Medicaid or no insurance
- Medicaid requires in person consent
- Only a hygienist can bill D0191
- CMS Policy on Asynchronous Reimbursement:
 - As a condition of payment, **you must use an interactive audio and video telecommunications system** that permits real-time communication... **Asynchronous** “store and forward” technology... **is permitted only in Federal telemedicine demonstration programs in Alaska or Hawaii.**
- Asynchronous may be covered if explicitly stated in law or policy



Developing New Curriculum

- Become familiar with teledentistry laws and regulations
- Identify options for technology and gain confidence in using technology
- Learn how to diagnose using digital records
- Learn what data should be collected in the field to diagnose in clinic
- Develop plans for overcoming barriers to teledentistry



Developing New Curriculum

Classroom

- Lecture 1: What is teledentistry? and practicing using digital records
- Lecture 2: Review of teledentistry concepts and guest speaker
- Lecture 3: Plan your own teledentistry program

Lab

- 3 hour intraoral camera lab

Teledentistry Rotation

- Provide preventive care and gather clinical data in field
- Review cases and develop treatment plans at school




Purchasing Equipment and Supplies

- Portable dental unit
- Nomad and sensor
- Chairs
- Computers
- Cameras
- Disposables
- Preventive supplies
- Tubs
- EHR



What about the future?

- State legislation should allow all members of the oral health team to work at the top of their scopes
 - Supervision constraints should be evaluated and revised if needed
 - Reimbursement mechanisms need to be developed
 - Dental students should be trained how to use digital records to diagnose
 - Hygiene students should be trained how to collect digital records
 - Practicing providers should be trained how to use teledentistry to advance their practices and reach additional populations
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The background is a solid pink color. In the top right corner, there is a decorative graphic consisting of several overlapping geometric shapes, including triangles and squares, in various shades of pink and dark pink.

Questions?

Thank you!

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