Emergency Room Redirect for Non-Traumatic Dental Conditions Pilot Program

A collaborative effort by:
Department of Health and Human Services,
LIBERTY Dental Plan, University Medical Center, and Teladentistry.com.
State of Nevada
Department of Health and Human Services,
Division of Public and Behavioral Health

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Why University Medical Center of Southern Nevada (UMC)?

- One of the 50 largest public hospitals in America
- Affiliated with both UNLV School of Medicine and School of Dental Medicine
- Forward thinking administration
- Large Medicaid population
- Highest encounter rate for non-traumatic dental conditions in the Emergency Department
Non-Traumatic Dental Conditions

**Definition**: Emergency room visit for an oral condition that results from disease and decay due to long term neglect.

A traumatic dental condition results from an accident or sports injury such as a fall, car accident, or gun shot wound.

Non-Traumatic  VS  Traumatic
Fiscal Impact of Oral Conditions in the Emergency Departments

• $867 million to $2.1 billion in 2010 – according to ADA’s Health Policy Institute

• From 1997 to 2000, dental related discharge diagnostic codes encompassed 0.7% or 4.1 million visits of all emergency department encounters.

• The ER is often the safety net of the health care system for those that are unable to access care from a primary medical or dental provider due to
  • Geographic
  • Financial
  • Cultural or
  • Attitudinal barriers
Nevada Emergency Room Visits 2012-2017
Utilization by Age Group

Statewide Non-Traumatic Dental Emergency Department Encounters, 2017

- 65%: 0-5 years
- 20%: 6-20 years
- 8%: 21-44 years
- 3%: 45-64 years
- 4%: 65+ years
Payer Sources in Emergency Departments

Statewide Emergency Department Encounters by Payer Source, 2017

Statewide Non-Traumatic Dental Emergency Department Encounters by Payer Source, 2017
Lessons from Other State Programs

**Missouri:**
- 30 day pilot program had such a significant impact the model was implemented.
- Decrease in number of opioid prescriptions as well as decrease of 8-9,000 total ED visits to the hospital.
- Half of patients referred for care came to the dental clinic for treatment.

**Michigan:**
- Care coordinator within the hospital triages patient and determines eligibility (financial and dental needs).
- Must volunteer 8 hours and attend health education class to receive dental services (urgent care received treatment).
- 30% of patients referred to the program followed the protocol to become a participant.

**South Carolina:**
- Hospital partnered with local dentists and allocates 10% of revenue to sustain community health programs.
- ED patients are referred to a local dentists who provides restorative and emergency care at no charge to the patient.
- Created a dental home, 36% reduction in ED visits, sustainable model due to hospital support.
Collaborative Objectives

• Decrease admission rate for non-traumatic dental conditions in ER
• Reduce the number of opioids prescribed
• Increase dental treatment for dental pain and decay
• Educate for oral health among health care providers
• Coordinate Medicaid members to dental home for proper care with transportation assistance.
• Increase visibility and build partnerships between dental and medical practitioners
• Improve health outcomes for emergency room patients at University Medical Center.
Current Utilization of the ED for Non-Traumatic Dental Conditions

Patient walks into UMC ER → Patient Forms are filled out → Patient is taken back to be triaged

Is this a traumatic dental condition:
- Yes → Follows standard protocol and the Patient is seen by the ER Doctor
- No → Infection persists and patient returns when pain medication completed.

Infection persists and patient returns when pain medication completed.

Patient receives antibiotic and pain medication.
Helping People. It’s who we are and what we do.

Proposed Utilization of the ED for Non-Traumatic Dental Conditions

1. Patient walks into UMC ER
2. Patient intake forms are filled out
3. Patient is taken back to be triaged

Is this a traumatic dental condition?

- YES: Follow standard protocol and the patient is seen by the ER Doctor

- NO: Patient is given the option to see ER doc or a voucher to be seen at the Teladentistry Kiosk

Teladentistry will gather all required patient information

Does patient need to be seen by ER Staff?

- YES: Patient will be seen by live dentist through Teladentistry Kiosk

- NO: Patient will be seen by live dentist through Teladentistry Kiosk
Options

If Liberty (LDP) Medicaid Member, Teladentistry will advise that LDP will reach out to help schedule an appointment with a local dentist for follow up care.

Teladentistry will send a follow up email to UMC at XXX@XXX which will include exam findings.

LIBERTY (LDP) will provide a follow up email to UMC with a status update on appt / treatment to UMC at xxx@xxx.com

If Member has a commercial dental plan, Teladentistry will assist Member to locate a dentist through their insurance.

Teladentistry will send a follow up email to UMC at XXX@XXX which will include exam findings.

Teladentistry will call patient 48 hours after exam to inquire whether patient was seen at a local dentist. Will send follow up email to UMC at xxx@xxx.com

If Member in uninsured, Teladentistry will refer the Member to a local FQHC who will be able to work with the patient to get services completed.

Teladentistry will send a follow up email to UMC at XXX@XXX which will include exam findings.

Teladentistry will call patient 48 hours after exam to inquire whether patient was seen at a local FQHC. Will send follow up email to UMC at xxx@xxx.com
D9995 Teledentistry- synchronous; real-time

Live video (synchronous): Two-way interaction between a patient and a dental provider using audiovisual telecommunications technology.

Currently used by Liberty Dental Plan

https://www.ada.org/~/media/ADA/Publications/Files/D9995andD9996_ADAGuidetoUnderstandingandDocumentingTeledentistryEvents_v1_2017Jul17.pdf
Measurements of Success –

Project is scheduled to launch in Summer 2019

- Analyze patients routed to teledentistry area vs. the number of patients that complete the consultation or request other forms of treatment

- Analyze patterns of emergency department utilization

- Average length of emergency department visit for non-traumatic dental condition

- Summarize cost savings to the ER

- Once proven successful we will do full implementation of referrals to the teledentistry area within the hospital
- The next goal would be to model this program within other hospitals throughout the state especially those in rural Nevada.
References


Saving Nevada Smiles, One Tooth at a Time

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