

Building a Teledentistry Program That Expands Access and Increases Equity

CareQuest Institute Continuing Education Webinar

May 19, 2022

Housekeeping

- We will keep all lines muted to avoid background noise.
- We will send a copy of the slides and a link to the recording via email after the live program.
- We'll also make the slides and recording available on carequest.org.

To receive CE Credits:

- Look for the evaluation form, which we'll send via email.
- Complete the **evaluation by Friday, May 27**.
- Eligible participants will receive a certificate soon after via email.

We appreciate your feedback to help us improve future programs!



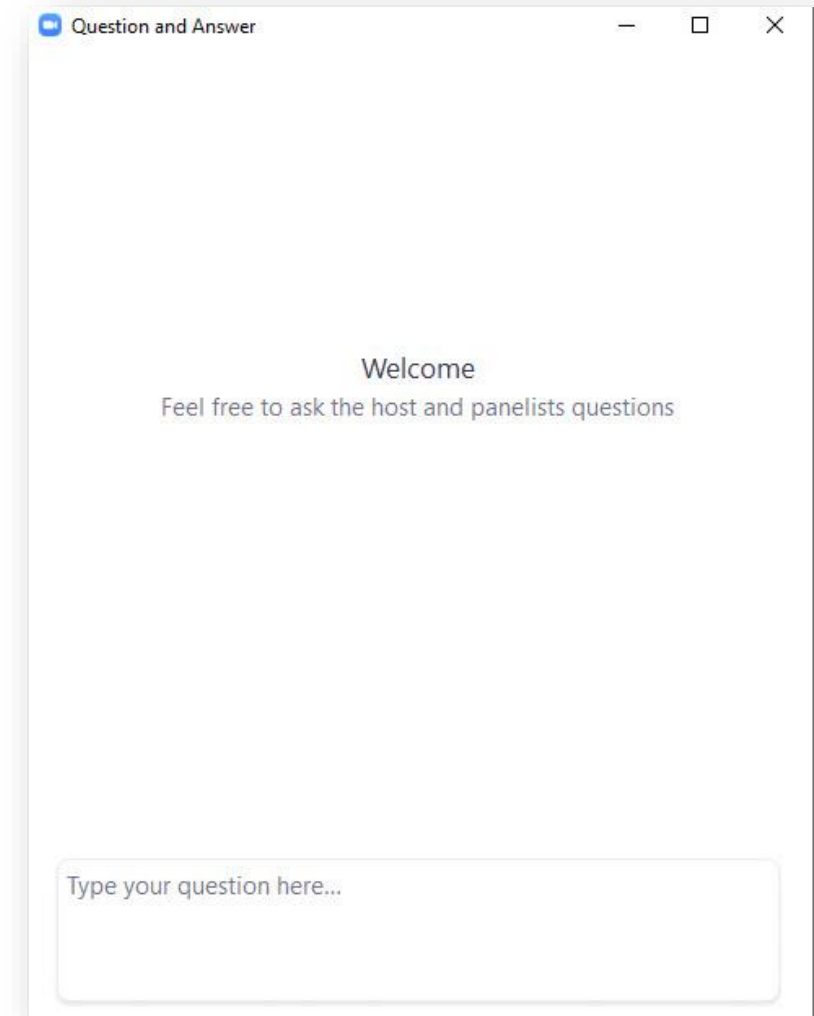
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*Full disclosures available upon request



Question & Answer Logistics

- Feel free to enter your questions into the **Question & Answer box** throughout the presentations.
- We will turn to your questions and comments toward the end of the hour.



Learning Objectives

At the end of this webinar, you'll be able to:

- Identify components of a successful and flexible teledentistry program.
- Recognize how to overcome common obstacles and misconceptions about teledentistry to recognize its full potential.
- Describe how to create and manage a teledentistry program in a public or private setting.
- Discuss how teledentistry can help achieve strategic aims within a practice, including expanding access to different patient populations.

Our Strategy

Vision

A future where every person can reach their full potential through optimal health

Mission

To improve the oral health of all

Purpose

To catalyze the future of health through oral health



Today's Presenters

Building a Teledentistry Program That Expands Access and Increases Equity



WEBINAR | Thursday, May 19, 2022 | 3-4 p.m. ET | ADA CERP Credits: 1

MODERATOR



Caroline McLeod, RDH, MS
Value-Based Solutions Manager,
CareQuest Institute for Oral Health

PRESENTER



Marybeth Shaffer, DMD
Dental Director,
Community Action Agency
of Columbiana County

PRESENTER



Nathan Suter, DDS
Chief Innovation Officer,
Enable Dental

Value of Teledentistry

Caroline McLeod, RDH, MS

Teledentistry

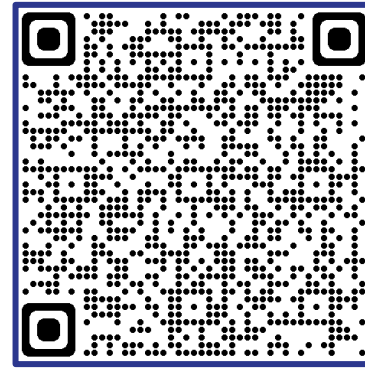
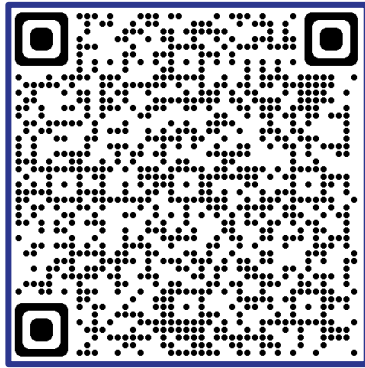
Teledentistry — using telehealth systems and methodologies for oral health care — is a flexible, convenient way to connect patients and providers in different physical locations.



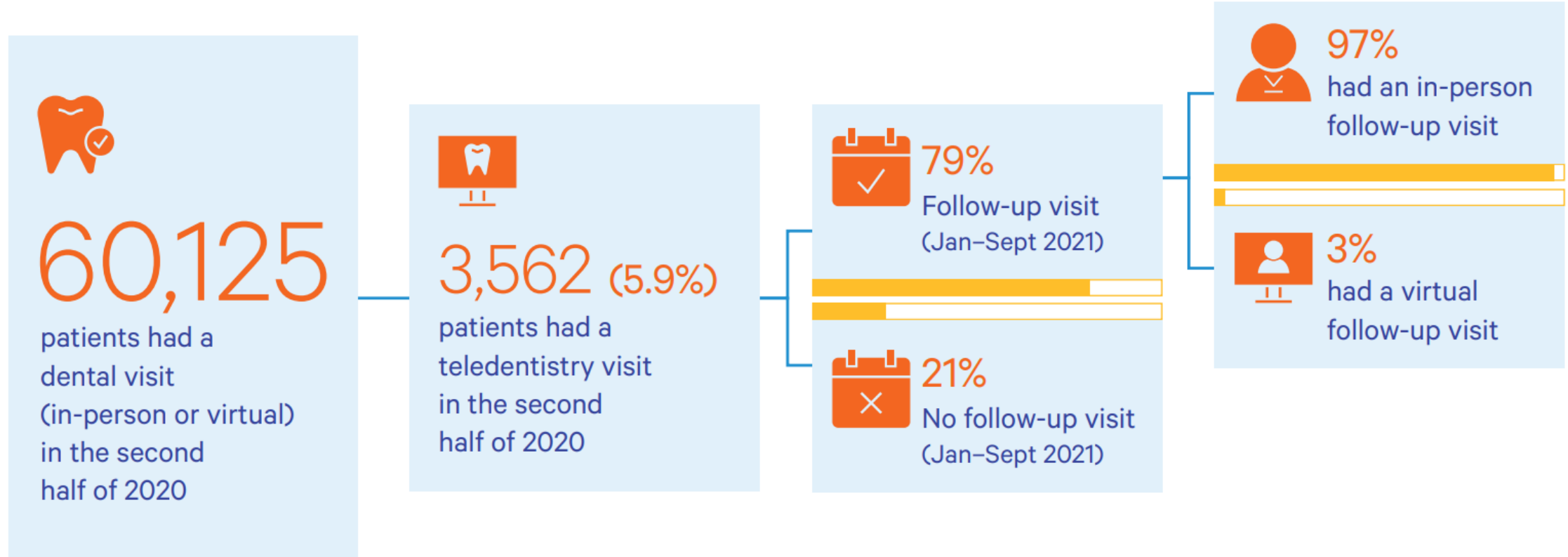
VALUE

Patients

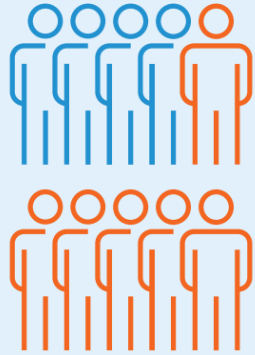
Dental
Teams



Value to Patients



Value to Patients



Six out of 10
patients had an
in-person visit within three
weeks of their teledentistry visit.

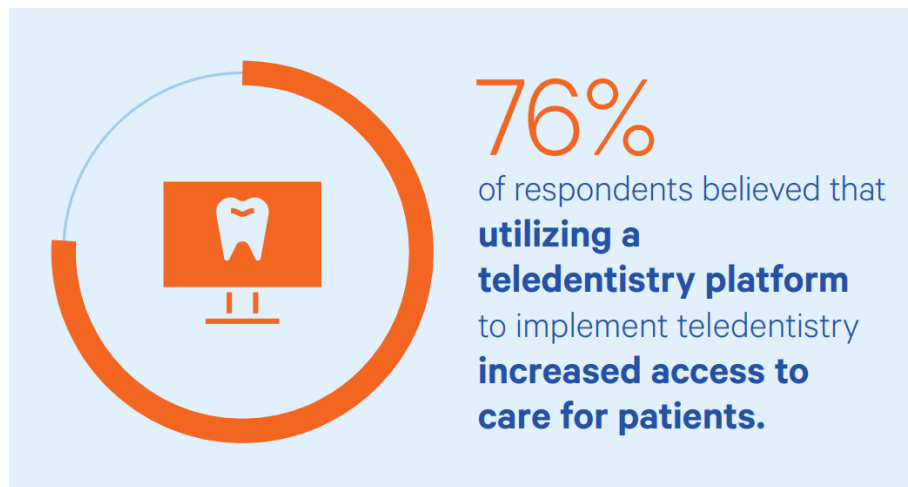
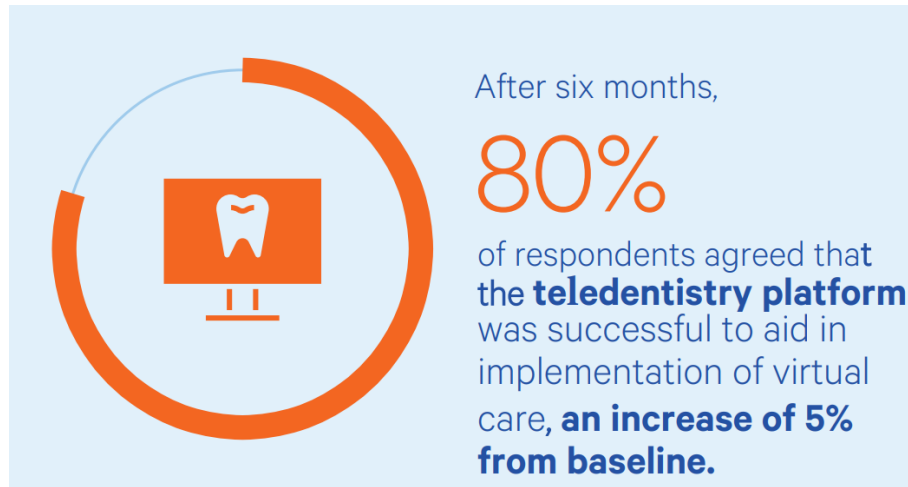


Teledentistry was
more often used by individuals
living in rural areas (13%)
compared to those
living in suburban (10%)
or **urban (6%)** locations.



Those who had a teledentistry visit were
more likely to have
restorative care (minor and major),
diagnostic services, prosthodontic
care, or an oral surgery or endodontic
procedure at their first in-person visit
than those who did not have a teledentistry visit.

Dental Team Value



- 22% agreed teledentistry aided in **accurate diagnoses.**
- Many agreed teledentistry made it easier to **prescribe medication** to established patients (69%) and new patients (44%).
- 51% of participants agreed that teledentistry **improved interaction between patients.**
- 44% agreed teledentistry made **referrals** more efficient.

Contact Information

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Teledentistry

Community Action Agency of
Columbiana County

May 19, 2022



Ohio State Dental Board Implements New Teledentistry Rule

May 26, 2020

Ohio law defines “teledentistry” as the delivery of dental services through the use of synchronous, real-time communication and the delivery of services of a dental hygienist or expanded function dental auxiliary pursuant to a dentist’s authorization. The law requires a dentist who desires to provide dental services through teledentistry to apply for a teledentistry permit from the Ohio State Dental Board (“OSDB”).

Pursuant to the mandate under Ohio Revised Code 4715.436, the OSDB is implementing the following teledentistry permit rules and requirements (to be set forth under Ohio Administrative Code Chapter 4715-23). These regulations, which were subject of a public hearing on February 19, 2020, are effective on May 30, 2020.

1. A dentist wishing to provide services through teledentistry must apply to the OSDB. There is a \$20 application fee for a teledentistry permit. The application must contain the following: (1) The address where dental services will be provided through teledentistry; (2) The name and license or registration number of each dental hygienist or expanded function dental auxiliary who will perform dental services through teledentistry when the dentist is not physically present and the location where they will provide these services; and (3) A description of all equipment used to establish and maintain synchronous, real-time communication during the provision of dental services through teledentistry. Any description must include manufacturer name and model number. Other general permit requirements are found in [OAC 4715-23-01](#).
2. Requirements on the proper and approved continuing education courses for a teledentistry permit can be found in [OAC 4715-23-02](#).
3. When services are provided under a teledentistry permit and the patient is not examined in person by the authorizing dentist, informed consent must be obtained before the placement of interim therapeutic restorations or the application of silver diamine fluoride. Guidelines on how to obtain informed consent are detailed in [OAC 4715-23-03](#).
4. Equipment requirements (which can be found in [OAC 4715-23-05](#)):

¹ORC 4715.43(A)(5).

²Id. at (B).

- Triage emergency patients (prescribe antibiotics/analgesics responsibly)
- Facilitate referrals
- Remote periodic examinations

Dental Emergency Exam

Patient calls during closure or limited availability
(Theirs or Yours)

Sample Verbal Consent

Thank you for meeting/talking with me today, and I'd like to start by asking for your consent to receive care through this teledentistry platform (by telephone/by video).

I am in a private space to avoid others from hearing our conversation; are you also in a private space? [wait for answer] Just so you know, if you are in a public area or with other people around, they might see and hear our conversation, and that is a risk associated with this visit. I want to assure you that everything we discuss today is confidential. Add that you will record this visit in the treatment record for future reference.

*Optional: Our visit will not be recorded, and this technology has no ability to record our visit. I ask that you please don't record this as well.

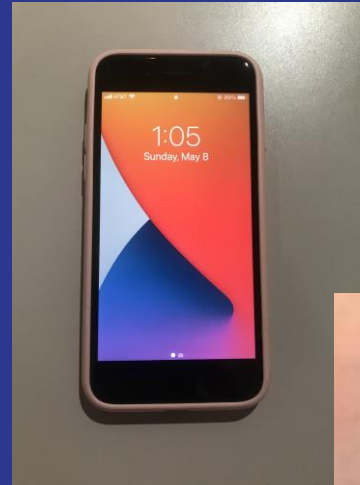
Documentation Needed

- Services were provided via telephone/video/platform name (ex: Zoom, Skype, etc.)
- Location of patient/family per their report: (ex: patient residence)
- Location of provider: (ex: provider's clinic location/provider's home office)
- Identity was confirmed using patient date of birth/visual confirmation
- Consent for use of teledentistry visit was provided to and completed by parent/legal guardian: verbally/written/electronically

Home Emergency Teledentistry Exam

American Dental Association
Photographs Taken at Home, A “How To” Primer
(Adapted from the University of Minnesota staff)

- Use the camera phone or any single reflex
- Retractor is a spoon
- Send photo securely



Emergency Exam Case



Call about “swelling on gum”

Record Treatment Notes as Normal (SOAP/ Dental Limited Exam)

Note:

Patient contacted today for: Emergency

Reviewed medical history: no changes; changes entered in EHR; initial visit entered in EHR

Area of concern: Upper right; LR, UL; LL; Anterior; tongue

Pain reported: 0 -10

Is there swelling: none; slight, moderate, severe in gingiva; slight, moderate, severe in face; unable to determine

Describe the swelling: there is not swelling; indurated (firm); fluctuant (water bag feeling); unable to determine

Is there suppuration/purulence: none, light, moderate, heavy, unable to determine

Duration of pain: no pain, started today, couple days, 1 week, couple weeks, 1 month, couple months, more than 3 months, unknown

Pain overtime: gotten worse, gotten better, stayed the same, not sure

Other difficulties: none, with talking, with breathing, with swallowing, with sleeping, with working, with completing daily activities

Systemic Complications:

Treatment Note, Continued

Fever: none, unknown, low grade <100, high >100, occasional

Lymphadenopathy: none, slight, moderate, severe, unable to determine

Other systemic complaints: fatigue, want to be left alone, unable to do normal tasks, not eating, none.

The patient shared: none, pictures, video, pan xray, PA xray

Diagnosis: caries, periodontal disease, fractured tooth, abscess, necrotic pulp, irreversible pulpitis, reversible pulpitis, trauma, ulcer, herpes, unable to determine - needs office visit

Discussed treatment options with patient: palliative care, needs an office visit, homecare options, patient unsure of what they want right now

Confirmed patient allergies: NKA or type in allergy

Pain control discussed, prescription given: no, no patient has pain meds at home, yes and record

Anticipatory Guidance:

Future Recommendations:

Ohio Medicaid Reimbursement Rates, ADA Diagnostic Codes

Visual exam: Patient attends a video call with provider				
Limited oral evaluation, problem focused + <u>teledentistry</u> - synchronous; real-time encounter	D0140 + D9995	\$22.58	\$22.58	
Periodic oral evaluation, established patient + <u>teledentistry</u> - synchronous; real-time encounter	D0120 + D9995	\$17.08	\$17.08	

Referral

Use of teledentistry for referrals

Referral Teledentistry

- Send the medical history, diagnostic information, radiographs/digital pictures securely to the referral doctor
- Establish a phone or video consult with the patient
(can be done at referring dentist's office)
- After teledentistry consult, patient is scheduled for initial treatment



Remote Exam

Hygienist/EFDA at a remote service location

State Dental Board Permit Requirements


- Teledentistry equipment & eligibility
- List of teledentistry services location
- Teledentistry staff
- License verification


Equipment Checklist & Eligibility

- HIPAA compliance
- Security of records
- Contingency plan for emergencies or interruption
- Dedicated space


Teledentistry Permit – Equipment Checklist & Eligibility Upload

4715-23-05 – Equipment requirements and Eligibility for teledentistry - Write your initials by each and sign below indicating that you understand.


 All equipment used to provide dental services through teledentistry must comply with the Health Insurance Portability and Accountability Act (HIPAA), Health Information Technology for Economic and Clinical Health Act (HITECH), as well as all state and federal laws and regulations.

 Authorizing dentists providing dental services through teledentistry:

- (1) Are solely responsible for securing and protecting all patient records and data related to the provision of dental services through teledentistry, and
- (2) Must take reasonable steps to prevent the compromise, breach, or theft of patient records or data related to the provision of dental services through teledentistry.

 Contingency plan - Authorizing dentists providing dental services through teledentistry must have a contingency plan established to:

- (1) Refer patients to a local healthcare provider in the event of a dental emergency;
- (2) Manage an interruption in connection or communication while providing dental services through teledentistry.

 Dedicated space - All equipment used for providing dental services through teledentistry must be utilized in a space dedicated to providing dental services through teledentistry. This space may also function as a space in which dental services are provided when the dentist is physically present.

Page 1 of 3

Equipment Checklist & Eligibility

- Encrypted data
- High-definition camera
- Microphone to enable verbal communication
- Digital x-ray machine
- Current Ohio license/familiarity with laws governing teledentistry


	Encryption - Authorizing dentists must ensure that all data connections and storage (including cloud storage) used in the provision of dental services through teledentistry are encrypted.
	High definition intraoral camera - High definition intraoral cameras must be used to provide dental services through teledentistry.
	Microphone - A microphone must be utilized to allow verbal communication between the dentist, patient, and staff during the provision of dental services through teledentistry.
	Digital x-ray machine - A digital x-ray machine capable of producing high definition images that can be immediately transmitted to the authorizing dentist during the patient's appointment must be available while providing dental and diagnostic services through teledentistry.
	Patient records - All patient records must be transmitted, transported, handled, stored, protected, and secured in compliance with HIPAA, HITECH, as well as all state and federal laws and regulations.
	You have a current Ohio Dental License, and it is in good standing.
	You have read all laws and rules governing teledentistry in the state of Ohio, including but not limited to sections 4715.43 through 4715.437 of the Revised Code and 4715-23-01 through 4715-23-06 of the Administrative code.


Page 2 of 3


Required Equipment List


EQUIPMENT LIST FOR SYNCHRONOUS TELEDENTISTRY SERVICES		
NAME	MANUFACTURER	MODEL NUMBER
Laptop computer	Dell	XPS
Intraoral camera	Mouthwatch	N/A
Portable X-ray	Aribex	Nomad Pro 2
Xray sensor	Dexis	Gendex
Portable dental chair	ASEPT	ADC-01
Portable operator stool	ASEPT	ADC-08
Portable unit	DNTL	Proseal 1
Cordless prophylaxis system	DTSPPLY	Nupro Freedom


Data must be encrypted
 Dentists acknowledges familiarity with laws/rules


 Encryption - Authorizing dentists must ensure that all data connections and storage (including cloud storage) used in the provision of dental services through teledentistry are encrypted.


 High definition intraoral camera - High definition intraoral cameras must be used to provide dental services through teledentistry.

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 You have read all laws and rules governing teledentistry in the state of Ohio, including but not limited to sections 4715.43 through 4715.437 of the Revised Code and 4715-23-01 through 4715-23-06 of the Administrative code.


Note: Equipment selected based on compatibility with existing computer software and is not an endorsement of any product or model.

Remote Access Requirements

- Safe delivery protocols
- License of dental hygienist/expanded function in good standing

 You have established all necessary policies, protocols, and orders to safely deliver dental services through teledentistry at all locations where dental services will be provided through teledentistry.

 The license or registration of dental hygienists and expanded function dental auxiliaries who will provide dental services through teledentistry for you are in good standing.

 _____ Date

Page 3 of 3

Basic Required Equipment



Secure interface with dentist at a remote site

Dental Headstart Program



School Dental Care Program Could Cut Cavities in Half: Study

March 9, 2021, at 8:22 a.m.

The trial program involved free, twice-yearly visits by dental hygienists to nearly 7,000 students at 33 public, high-need elementary schools in Massachusetts.

"The widespread implementation of oral health programs in schools could increase the reach of traditional dental practices and improve children's oral health -- all while reducing health disparities and the cost of care," said senior author Dr. Richard Niederman. He's chair of the department of epidemiology and health promotion at New York University's College of Dentistry.

After six visits, there was a more than 50% decline in untreated cavities. In one group of schools, the rate of cavities fell from 39% to 18%, and decreased from 28% to 10% in a second group of schools.



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Helps to Eliminate Barriers to Care

- Brings preventive care to children rather than bringing children to care
- Insufficient knowledge of oral health
- All patients now have a dental home and connection to one of our facilities in rural Columbiana County, a county with a low dentist participation in Medicaid
- Cost effective when done with teledentistry

Some obstacles exist with reimbursement

Dental Equipment



Mobile X-ray and Intraoral Camera



Hygienist Begins Exam



Information can be relayed to the dentist through intraoral camera pictures



Tongue

Cheek



Roof of mouth

Bite and teeth are examined visually





Dentist can order a closer visual of any suspected area and x-rays, if necessary





Hygienist can apply
fluoride varnish or silver
diamine
as directed



Oral hygiene instruction is given to the child.

Follow-up call is made to parent to discuss findings, arrange for dental home-based care, provide guidance, and reinforce oral hygiene instruction



Contact Information

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Teledentistry: Private Practice and DSO Settings

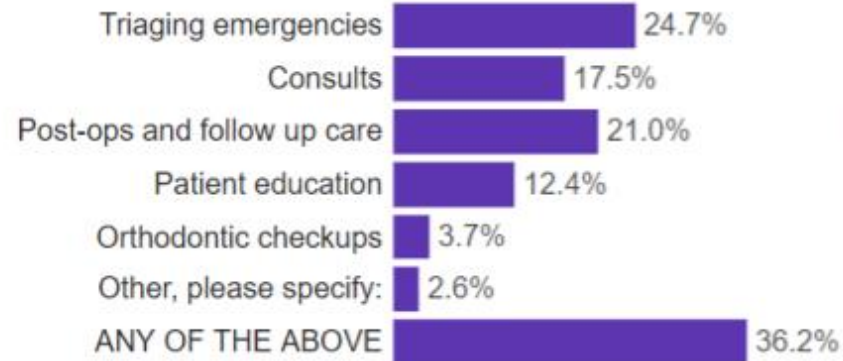
Nathan Suter, DDS
Chief Innovation Officer
Enable Dental

Use of Teledentistry in Private vs. Public Health Settings

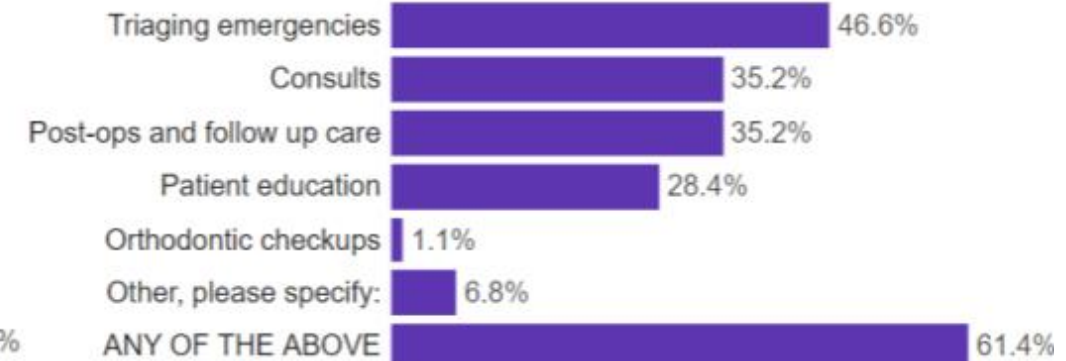
HPI: Industry Survey: Question of the Week

Is your practice using virtual technology/telecommunications to conduct any of the following?

Private practice dentists

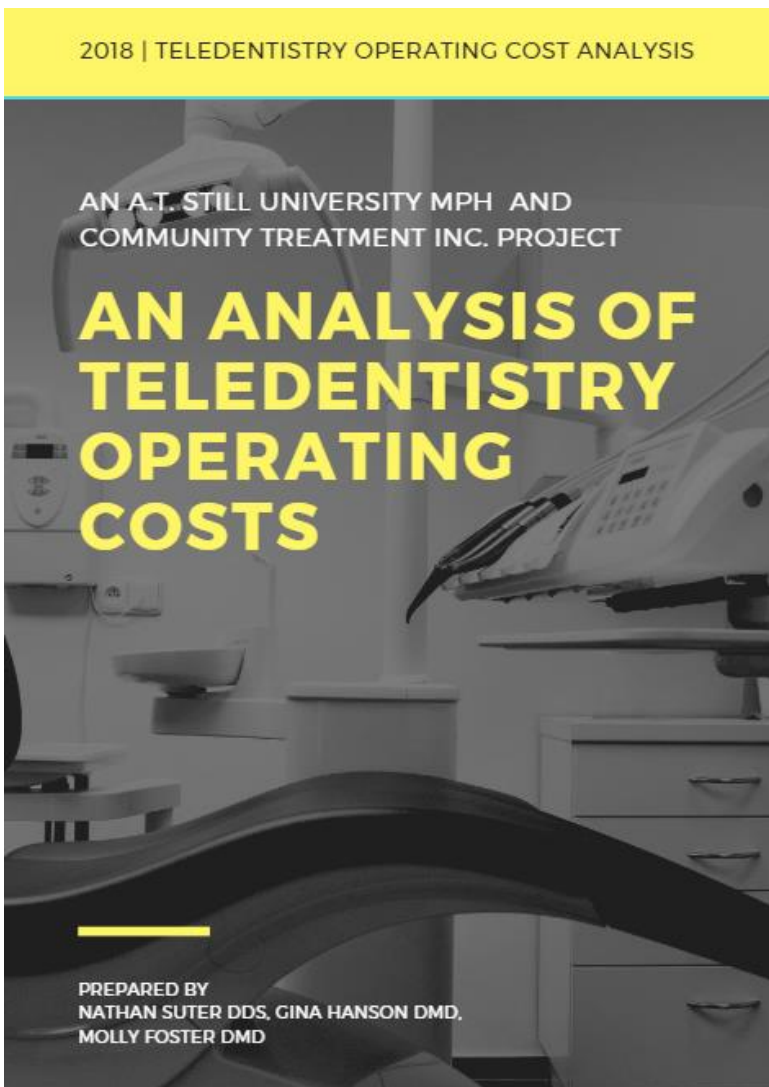


Public health dentists



Insight: Dentists are using virtual technology in various ways, especially in public health settings.

Clinical Cost vs. Teledentistry



AN OVERVIEW

TELEDENTISTRY PILOT

Figure 1: Number of Teledentistry Exams





The successful adoption of teledentistry depends on our industry moving to more modern, cloud-based software. Without these tools, the IT limitations will limit both the ease of adoption for the team but also the user experience of the patient.

Private Practice Model



Private Practice Using Teledentistry

- Started in December 2018
- Increasing Hours of Operation
- Increase Hygiene Availability
- For exams on hygiene only days



Increasing Access and Availability

- Hygiene only days
- Ramping up for backlog
- Conferences
- Vacation
- Sick Days



Radiographs



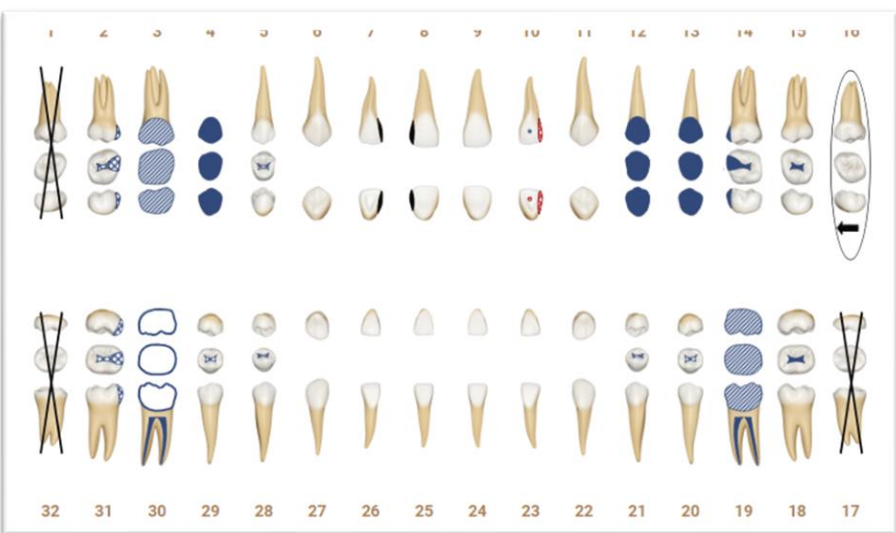
Extra-oral photos



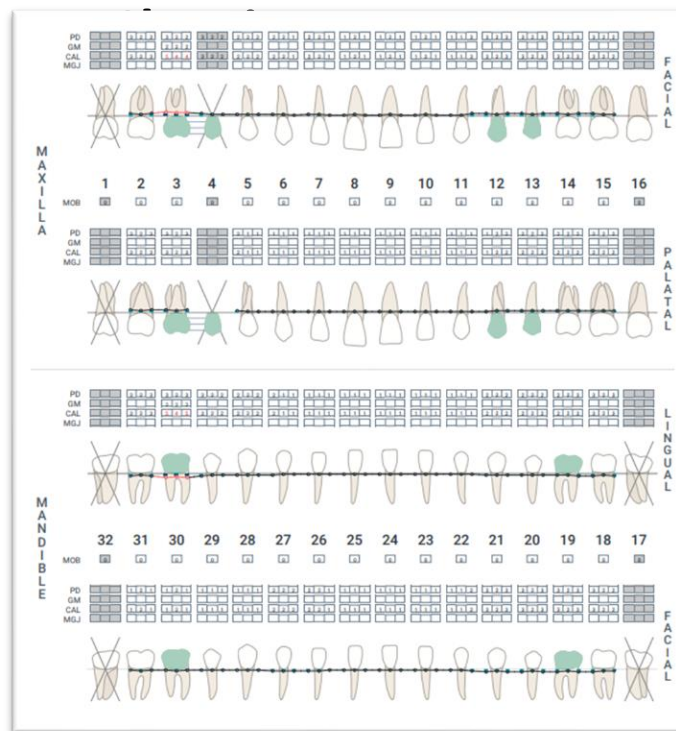
Intra-oral photos



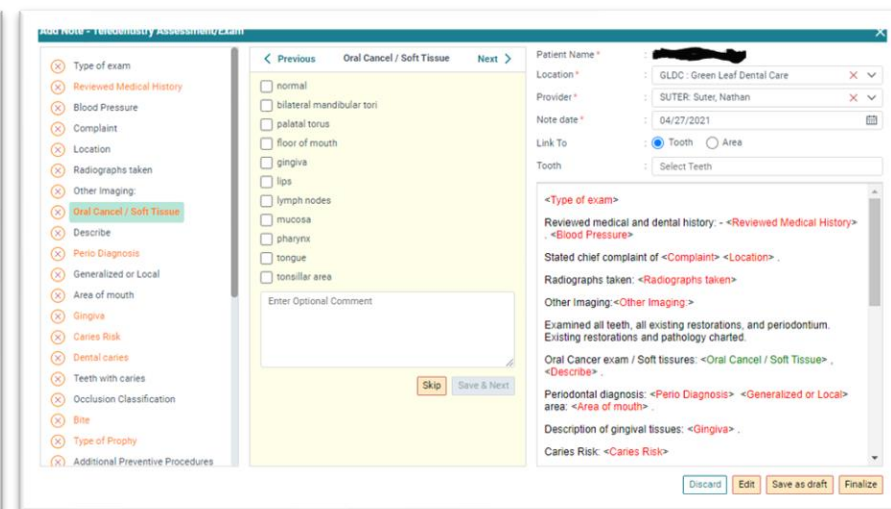
Tooth Charting



Periodontal

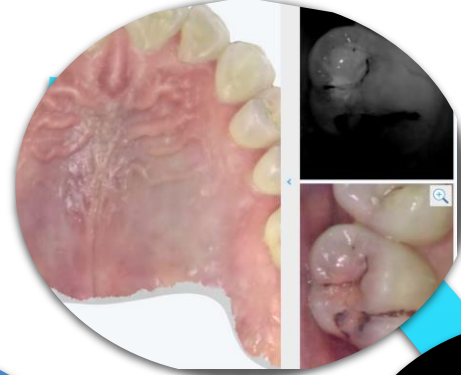


Logic-Based Clinical Notes



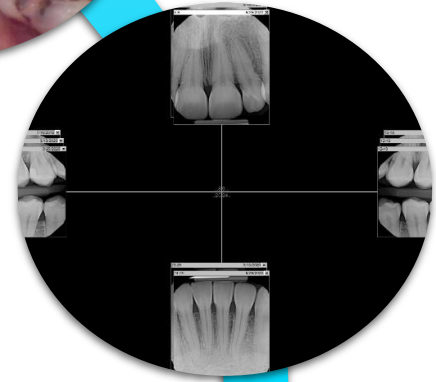


My Workflow



3D Scan

- Intraoral scanner
- NIRI + Intra-oral



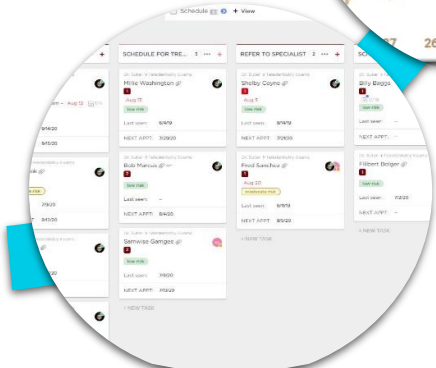
Radiographs

- Digital x-ray and cloud x-ray software



Hygiene Assessment Documentation

- Electronic dental record



Examination

- Electronic dental record plus work-flow tool



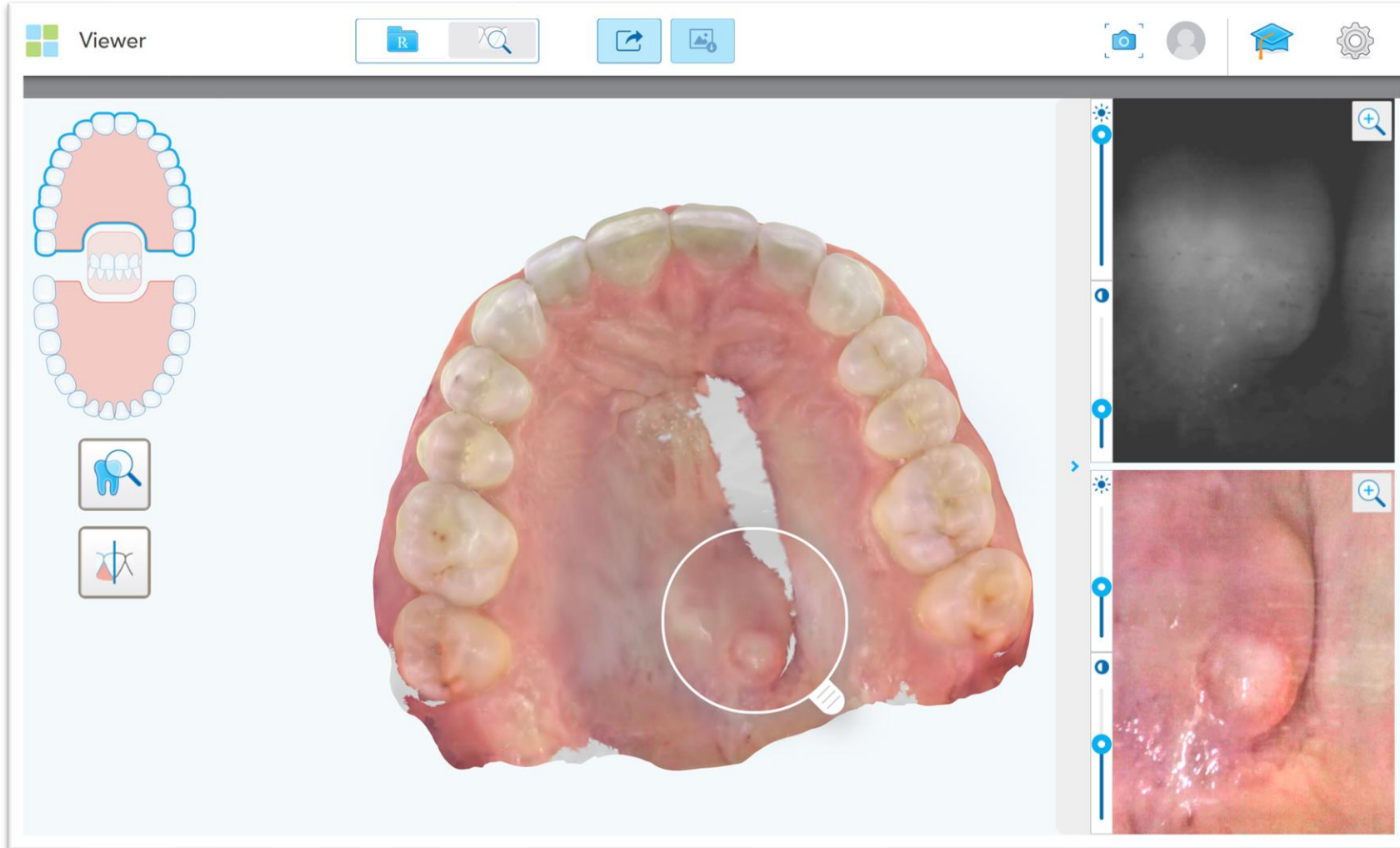
3D Intraoral Scanning (IOS)

- Consistent 3D representation of patients' dentition
- The scanner's machine learning identifies and notifies the operator of missed images
- Cloud based and allows for communication with staff, patient, specialists, and lab.



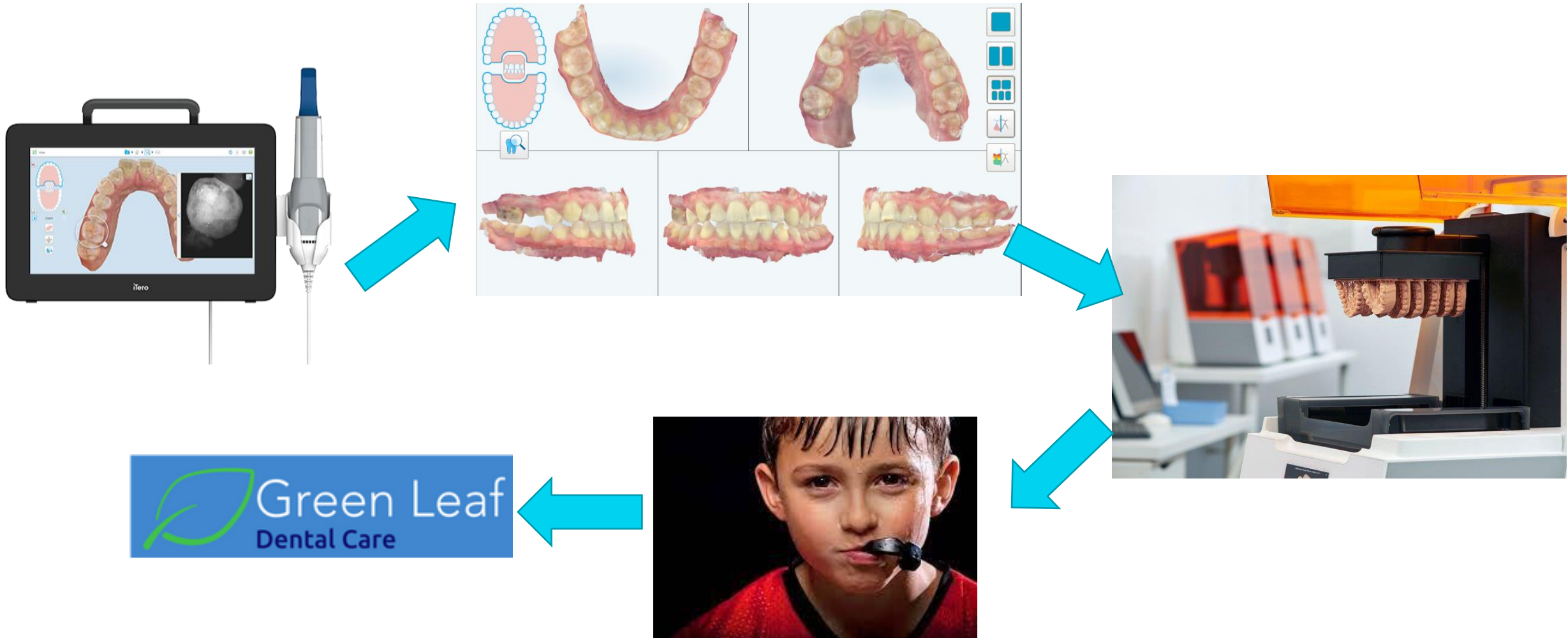
Detailed Diagnostic Capabilities

Enables hard and soft tissue imaging



Community Engagement and Marketing

- Taking scanner to local high school football summer camp
- Provide teledentistry screening and free 3D printed athletic guard



Hybrid Schedule

	OP-1	OP-2	OP-3	OP-4
7:00am				
:10				
:20				
:30				
:40	aerosol procedures	non-aerosol procedures	hygiene operator	virtual operator
:50				
8:00am		Aqe:55 IntCmDnLw, IntCmDnUp		
:10				
:20				
:30	Aqe:28 LimitedEx, PA1st, ResCmP4+s#15	DDS2 0920 General		
:40				Aqe:9 ReEvalPOp
:50			Aqe:70 LimitedEx, PA1st- Absess upper left	
9:00am	DDS2 0355 High Production			
:10				
:20				
:30				
:40				
:50				
10:00am		Aqe:63 PntcPrFHN# 3, PntcPrFHN# 5, CmPorFHN# 2,		Synchronize2 - HDH2
:10				
:20				
:30		DDS2 04200 General		
:40				
:50				
11:00am	Aqe:30 CmBldPin#30, CompEx, PA1st			
:10				
:20	DDS2 0280			
:30				
:40	^ Fill/Crown - DDS2 ^	Aqe:85 Deliver Denture		
:50				
12:00pm				
:10				
:20				
:30				
:40				
:50				
1:00pm	Aqe:12 ResCmP2s# 3, ResCmP2s# 5, ResCmP3s# 4		Aqe:60 1BWX, Assess, PA1st, 2DOrllmgs, Teledent,	
:10				
:20				
:30	DDS2 0545 General		Aqe:60 PP	
:40				Synchronize3 - HDH2
:50				
2:00pm		Aqe:80 ImmUpDen#2*15, ExtErpTh# 6, ExtErpTh# 7,		
:10				
:20				
:30				
:40		DDS2 01875 General		Synchronize4 - HDH2
:50				
3:00pm				
:10				
:20				
:30	Aqe:62 Resin2#10			
:40				
:50				
4:00pm	DDS2 0160	Lab/Insert - DDS1	Asynchronous Evaluations	Asynchronous Evaluations
:10		Aqe:55 UpParMtBs#2*13		Aqe:35 CompEx
:20				^ Virtual Exam - DDS1 ^
:30		DDS2		
:40				
:50				
5:00pm			Aqe:9 PeriodicX	
:10			Aqe:11 PeriodicX	
:20			Aqe:10 PeriodicX	
:30			Aqe:16 PeriodicX	
:40			Aqe:42 PeriodicX	
:50			Aqe:15 PeriodicX	
6:00pm			Aqe:13 PeriodicX	Aqe:30 CompEx
:10				
:20				
:30				
:40				
:50				
7:00pm				
:10				

Clinical Brief in JPHD Special Issue 2020



PRACTICE BRIEF | [Free Access](#)

Teledentistry applications for mitigating risk and balancing the clinical schedule

Nathan Suter DDS

First published: 11 December 2020 | <https://doi.org/10.1111/jphd.12421>

SECTIONS

PDF TOOLS SHARE

Abstract

The upheaval of providers and their patients has led to many changes in the way people live and work. In addition to the changes in Personal Protective Equipment (PPE) guidelines, there has been evidence of rapid adoption of telehealth services. In April of 2020, the American Dental Association's Health Policy Institute released a report stating that 1 in 4 dentists nationally were utilizing teledentistry to perform limited evaluations. Many of these dentists are new to teledentistry, and unfortunately, direct-to-patient consultations yield limited clinical outcomes. The more traditional methods of using teledentistry have been extending the reach of dental care for over a decade, using an allied team member such as a dental hygienist or expanded-function dental assistant. As dentistry adapts to this new environment, it is important that there be adequate awareness of the diverse uses of teledentistry to meet the needs of the population. This brief, outlines one dental clinic's attempt at providing a broad use of teledentistry.



Volume [80](#), Issue [S2](#)
[Special Issue: A System Ripe for Change: Progressing Value-Based Care in Oral Health](#)
Fall 2020
Pages S126-S131

Figures References Related Information

Metrics

score **9**

Details

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Check for updates

Keywords

teledentistry telehealth
synchronous store-and-forward
asynchronous covid-19

Organizing Asynchronous and Follow Up

Asynchronous is not very ideal for a “schedule”

The screenshot displays a software interface for a dental practice. On the left is a navigation sidebar with a search bar and a question mark icon. The main area is titled 'Health Center Workspace' and shows a Kanban board for 'Teledentistry'. The board is divided into six columns: ASSESSMENT (4 items), EXAM (3 items), TREATMENT (2 items), REFERRAL (1 item), RECALL (1 item), and SEDATION (0 items). Each column contains cards for individual patients with their names and key details.

Column	Count	Patient Name	Treating Provider	Grade	Tx Consent Signed	Urgency	Other Info
ASSESSMENT	4	Jane Smith	Nathan Suter	3	Yes	Early Needs	🔗
ASSESSMENT	4	Dwane Johnson					C
ASSESSMENT	4	Charles Xavier	Dr. Hosenstein				🔗
ASSESSMENT	4	Monica Geller					
EXAM	3	Johnny Storm		5		Early Needs	🔗 N
EXAM	3	Jane Doe	Dr. Buffay	5	No	No Obvious	🔗
EXAM	3	Scott Summers	Dr. Olga				
TREATMENT	2	Tommy Quinn		4	No	Early Needs	
TREATMENT	2	Bruce Banner	Dr. Mazzoli	4	Yes	Early Needs	
REFERRAL	1	Kamala Khan	Dr. Cook	3	Yes	Urgent	
REFERRAL	1	Steve Rogers	Dr. Olga	5	Yes	No Obvious	

Footer



DSO Model



AT-HOME DENTAL MODEL

Patient-centered care coordination
using tech-enabled care teams





Prior to visit

Demand generation and patient intake. We identify the patients needs through the intake process.

URGENT

NON URGENT



Visit #1: Hygienist

Arrive at patient's nursing home, community center, or private residential home.



Assessment & Cleaning

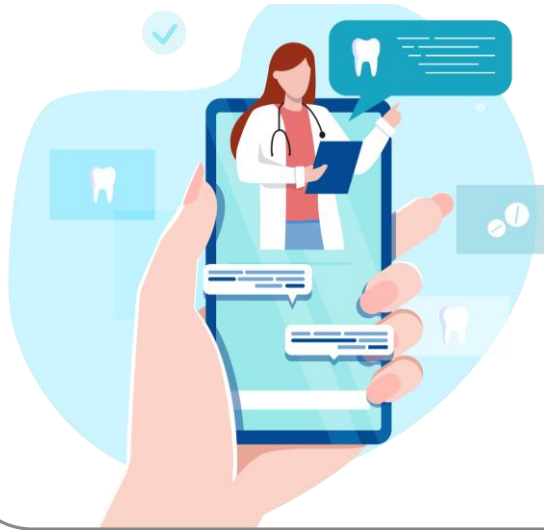
Collect patient's medical and dental history, capture x-rays, 3D scan, intraoral images, and documents assessment.



Asynchronous Examination

Dentist reviews patient's medical history, images, and notes in order to provide a diagnosis and treatment plan.

RECALL



Care Coordination Summary

Clinical Practice Manager will contact patient's responsible party and coordinate next visit (if applicable).

URGENT



Visit #2: Dentist Treatment

Team arrives at patient's residence. Dentist performs any accepted treatments.

RECALL



Recall: Routine visits

Administrative team will contact patient's responsible party when the next routine appointment is scheduled.

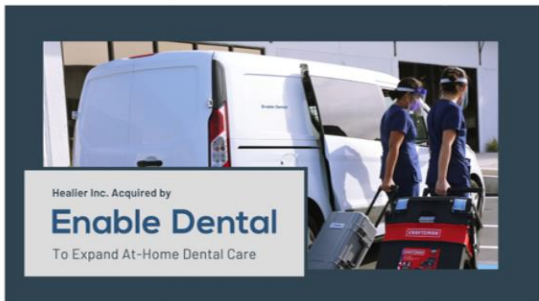
Cutting Edge Technology Investments

Custom Software for Workflows

Enable Dental Acquires Healer Inc. to Expand At-Home Dental Care

Posted on Thursday, May 12, 2022

The acquisition adds Healer's organizational technical software to Enable's operations, helping them grow to be the largest portable, at-home dental service organization in the country. Their combined technology and operational workflow capabilities will advance treatment coordination and propel digitized dentistry.



Enable Dental, the leading provider of portable, at-home dental services, announced it has acquired Healer Inc., a dental software company focused on helping care teams organize work.

The addition of Healer and its staff will significantly improve Enable's service offering, help accelerate its geographic expansion, and deepen its investments in technology to further its teledentistry and digital capabilities while bringing equitable dental care to geriatric and special needs patients across the country.

"Bringing dental services to where people need them requires complex logistics, communications, and data," CEO Paul Langley states. "We're excited to enhance our innovative delivery model by

customizing our technology and building new capabilities. This acquisition will allow us to expand our reach and support our partnerships with better tools to provide exceptional dental care wherever it is needed."

"Many seniors and adults with disabilities face major barriers to accessing needed care," said Dr. Nathan Suter, CEO of Healer. "Enable Dental is a patient-centered portable care model equipped to address the oral health needs of these populations. Healer is excited to join Enable Dental and advance our collective mission to improve the oral health of all."

Differentiated Imaging Software



3D Intraoral Scanner

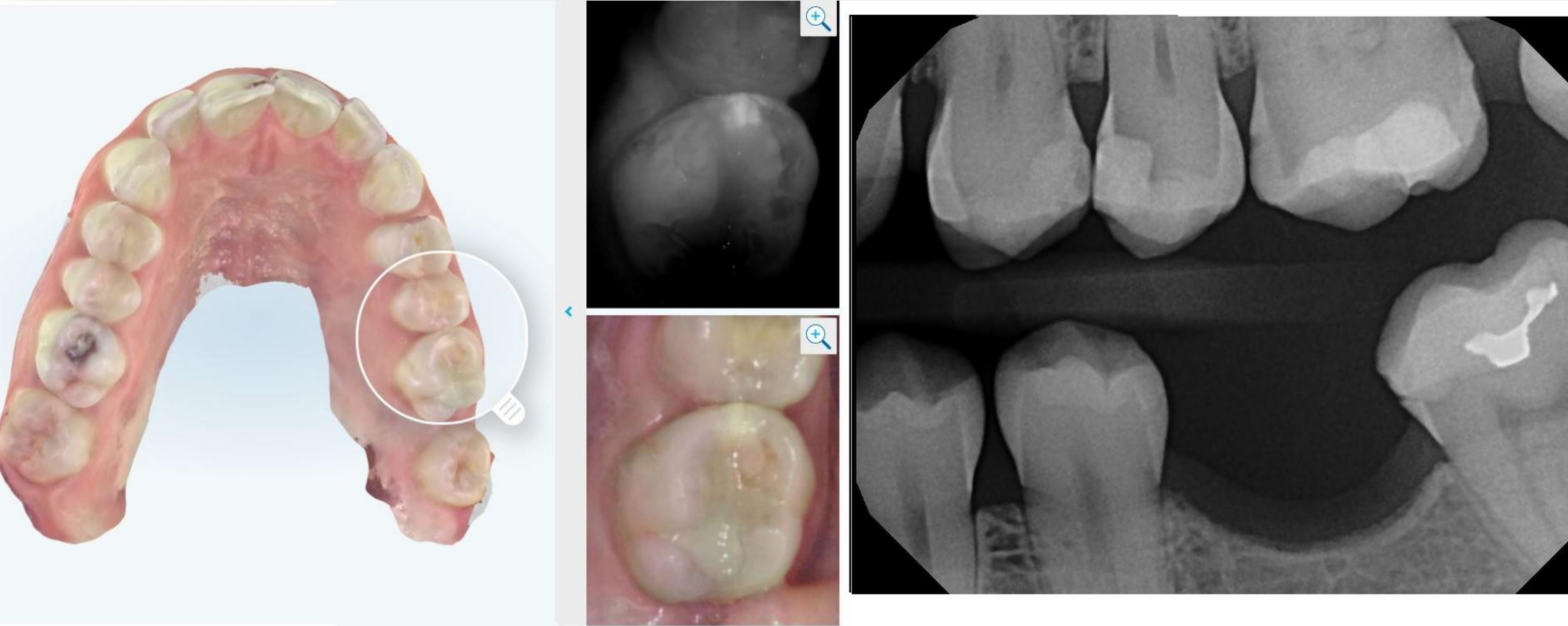
Allows for a more comprehensive view for the dentist and the patient



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Enhanced Diagnostic Capabilities

When combining multiple modalities, you can better visualize the problems



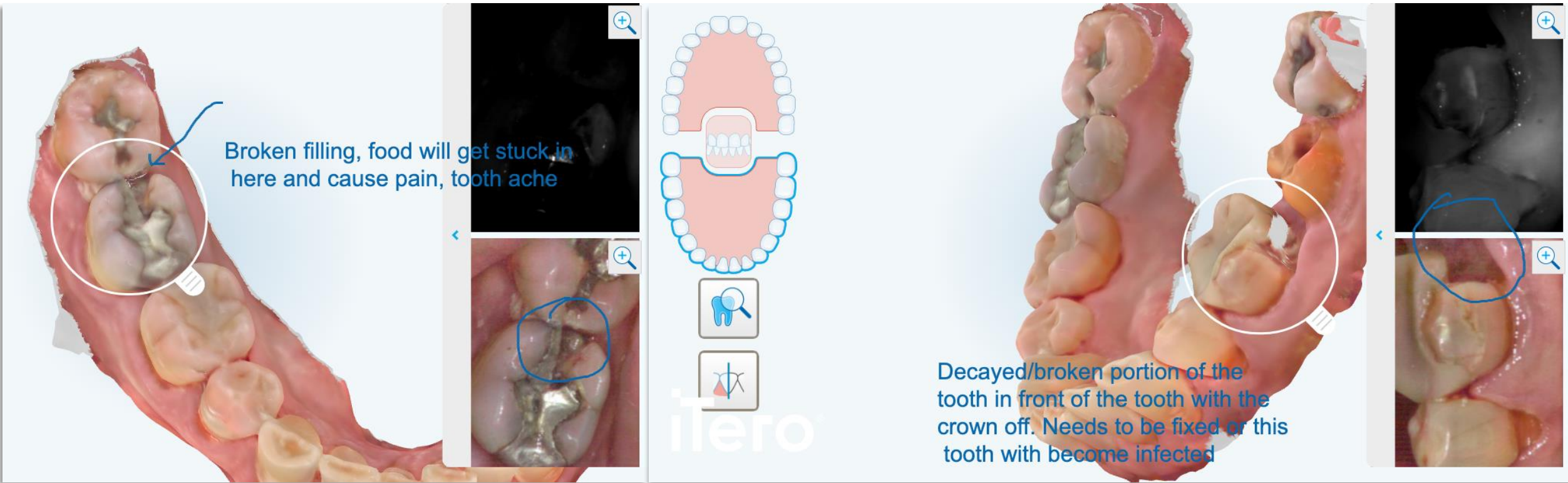
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Enhanced Patient Education Capabilities

Visual tool that allows for better communication from all care team members

- Hygienist
- Dentist
- Care Coordinator
- Patient/Guardian



Footer

Benefits to Implementing Teledentistry

1

Adds a tool that allows the practice to adapt to situations

2

Increases access to hard-to-reach patients

3

Encourage hygienists and dentists to practice at their highest levels

4

Lower cost of delivery

5

Differentiates you from the competition

6

Increase capacity to practice without adding the fixed cost of another operator

Contact Information

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Chief Innovation Officer,
Enable Dental

dr.suter@enabledental.com

Questions & Discussion

To Explore More Industry-Leading Research

Resource Library

We publish white papers, research reports, briefs, articles, posters, infographics, and tools on topics ranging from adult dental benefits to teledentistry. Use the filters below to find resources by type or topic.

Search by Keyword: Filter by Topic: - Any - Filter by Type: - Any -

Title	Topic	Type
Improving Care Coordination Between Oral and Medical Providers	Care Coordination	Video
Veteran Oral Health: Expanding Access and Equity	Expanding Access	White Paper
2021 Oral Health Information Technology Virtual Convening	Care Coordination	Presentation
Dental Fear Is Real. Providers Can Help.	Expanding Access, Health Equity	Visual Report
Why We (Still) Need to Add Dental to Medicare	Adult Dental Benefit, Expanding Access, Health Equity	Report
A Cross-Sectional Analysis of Oral Health Care Spending over the Life Span in Commercial- and Medicaid-Insured Populations	Expanding Access, Health Equity	Article
Time Is on the Side of Change in Dentistry	COVID-19 and Oral Health, Health	Article

www.carequest.org/education/resource-library

Missed Connections
Providers and Consumers Want More Medical-Dental Integration

Oral health and overall health are inextricably linked. There is mounting evidence to suggest that poor oral health is related to a variety of chronic health conditions, such as high blood pressure, dementia, diabetes, and obesity. Despite this known connection, dental care is still largely siloed from medical care. The Centers for Disease Control and Prevention (CDC) estimates that integrating basic health screenings into a dental setting could save the health care system up to \$100 million every year.¹

CareQuest Institute for Oral Health conducted a nationally representative survey in January and February 2021 to assess consumers' perspectives on oral and overall health (n=5,320). CareQuest Institute also conducted a nationwide survey of oral health providers to assess perspectives and current behaviors related to interprofessional practice (n=377). Consumers and oral health providers described a lack of integration between medical and oral health care, and a desire for increased interprofessional collaboration.

Key Findings:
Medical-dental collaboration is currently uncommon.

- 63% of consumers report that their primary medical doctor "rarely" or "never" asks about their oral health.
- 33% of consumers report that their oral health provider "rarely" or "never" asks about their overall health.
- 45% of responding oral health providers report "rarely" integrating their care with clinicians outside of dentistry, with only 14% reporting it is part of their "daily" practice.
- Less than a third of consumers report receiving general health screenings from their oral health provider.
- A majority (89%) of adults report never receiving a referral from their oral health provider to a non-oral health professional.
- Almost a fourth (24%) of participating oral health providers report currently implementing interprofessional practice.

Webinar Evaluation

Complete the **evaluation by Friday, May 27** to receive CE credit.

Upcoming Webinars:

- Thursday, June 16, 1 – 2 p.m. ET
How's America's Oral Health? Barriers to Care, Common Problems, and Ongoing Inequity
- Thursday, June 30, 1 – 2 p.m. ET
Becoming an Ally: Creating an Inclusive Environment for LGBTQ+ Patients

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