UCSF
University of California
San Francisco

California Department
of Public Health
OFFICE OF ORAL HEALTH

Webinar II:
Implementing School-Based/Linked Programs and Integrating Dental Referrals

Sep 21st, 2021

UCSF
University of California
San Francisco

Welcome, House Keeping Tips and Introduction of the Speakers

Keiko Miyahara, RDH, MS
California Oral Health Technical Assistance Center (COHTAC)

Housekeeping Tips

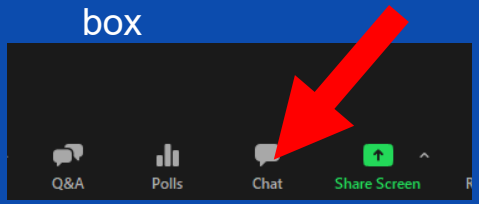
To achieve the best participant experience, please note the following:

SOUND AND VIDEO

- Join with computer or internet if you have a poor phone signal
- Expand Zoom window to ‘’full screen mode”
- Adjust presentation to “fit to window”

Q&A

- For technical difficulties, type your question in the Chat box



- Ask your questions for the speakers in the Q&A box at the bottom of your screen

RECORDING

- This session will be recorded and posted on the COHTAC’s website

UCSF

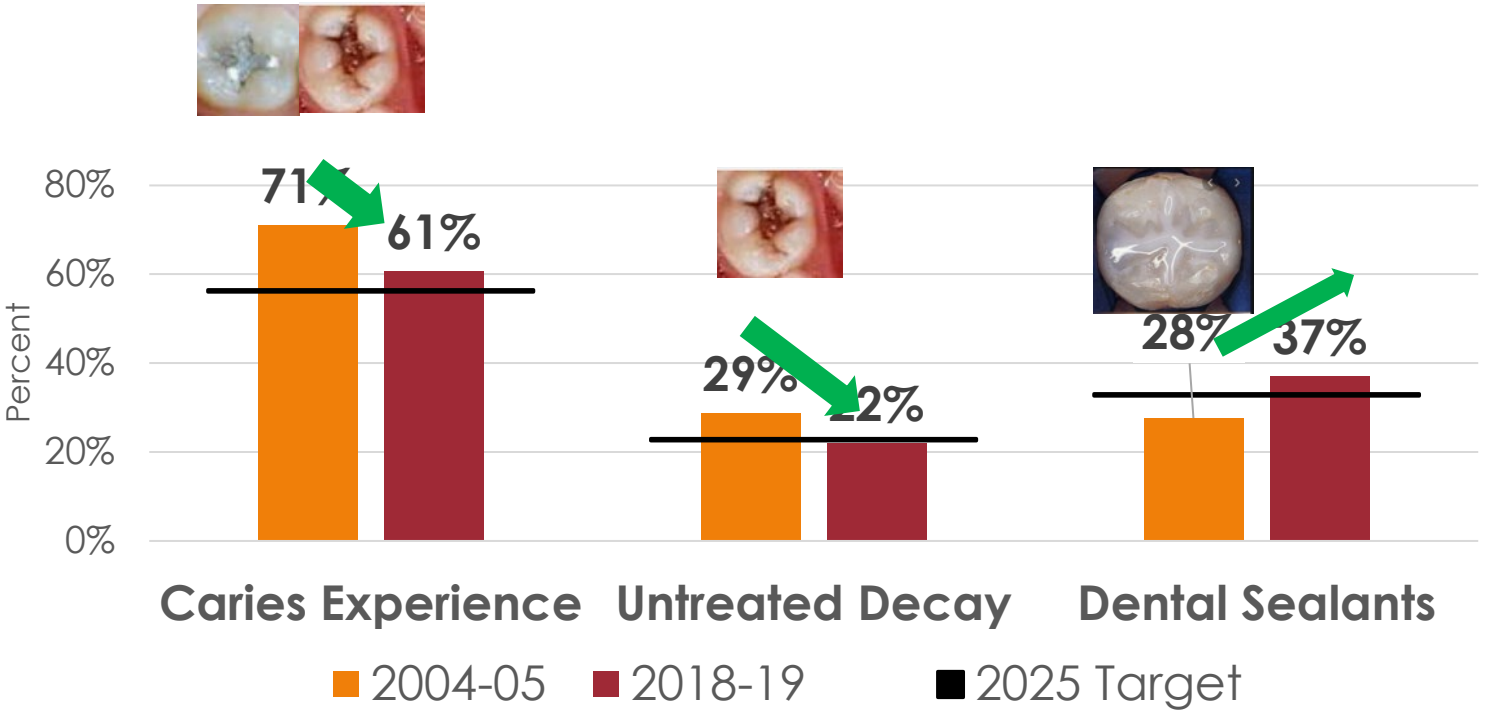
Local Oral Health Program Oral Health Initiatives

JAYANTH KUMAR, DDS, MPH

STATE DENTAL DIRECTOR

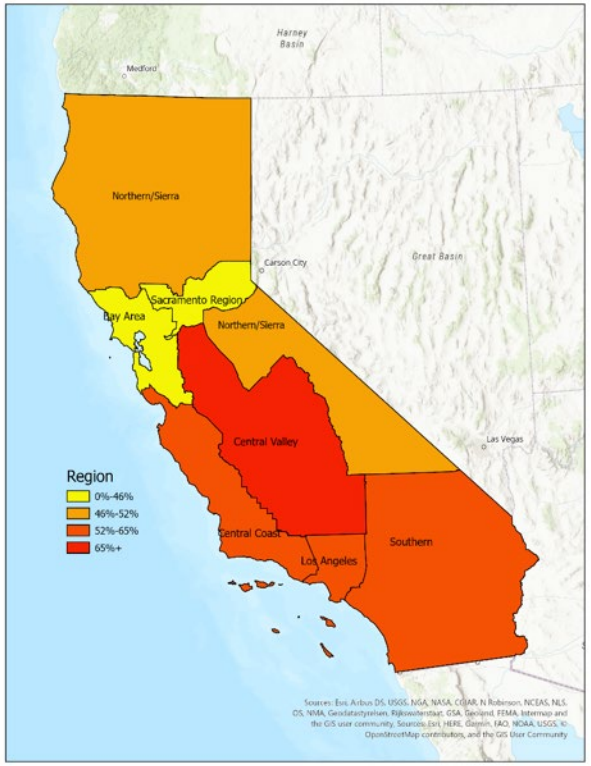
California Department of Public Health
Center for Healthy Communities
Office of Oral Health

California Smile Survey:
Results from 2004-2005 and 2018-19

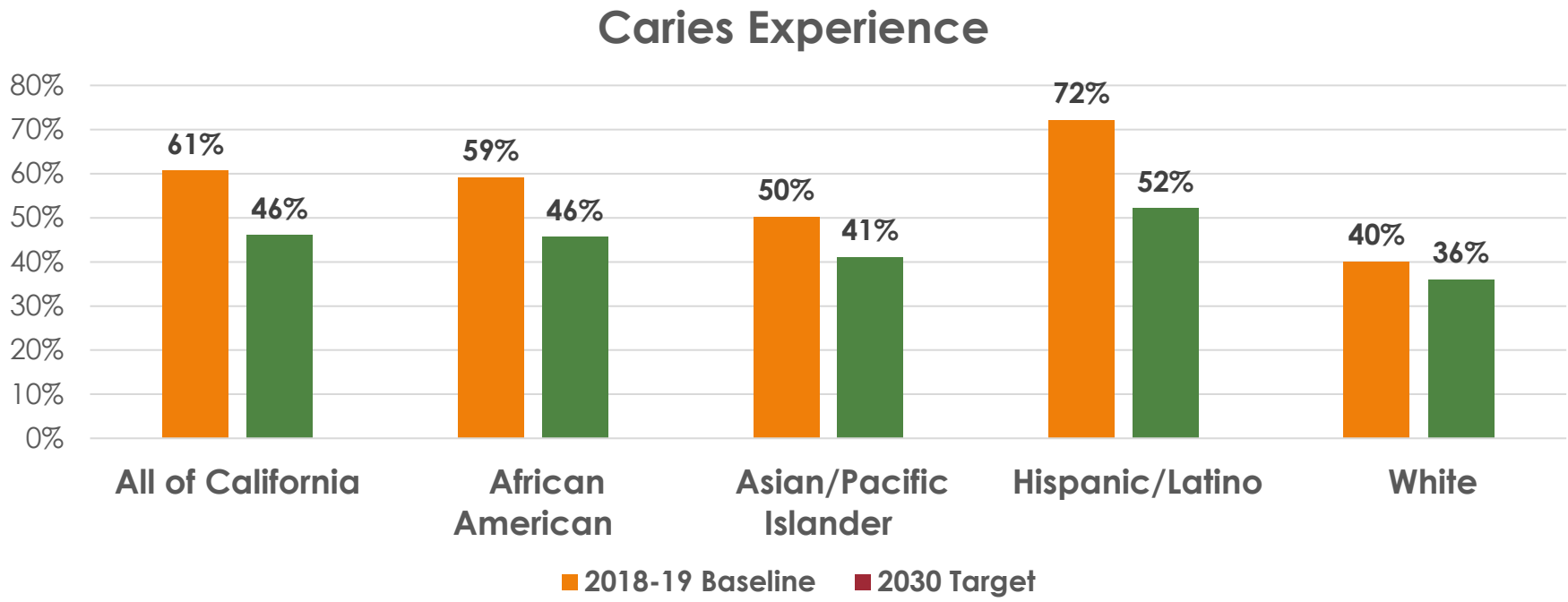


Caries Experience by Region, California Smile Survey 2018-2019

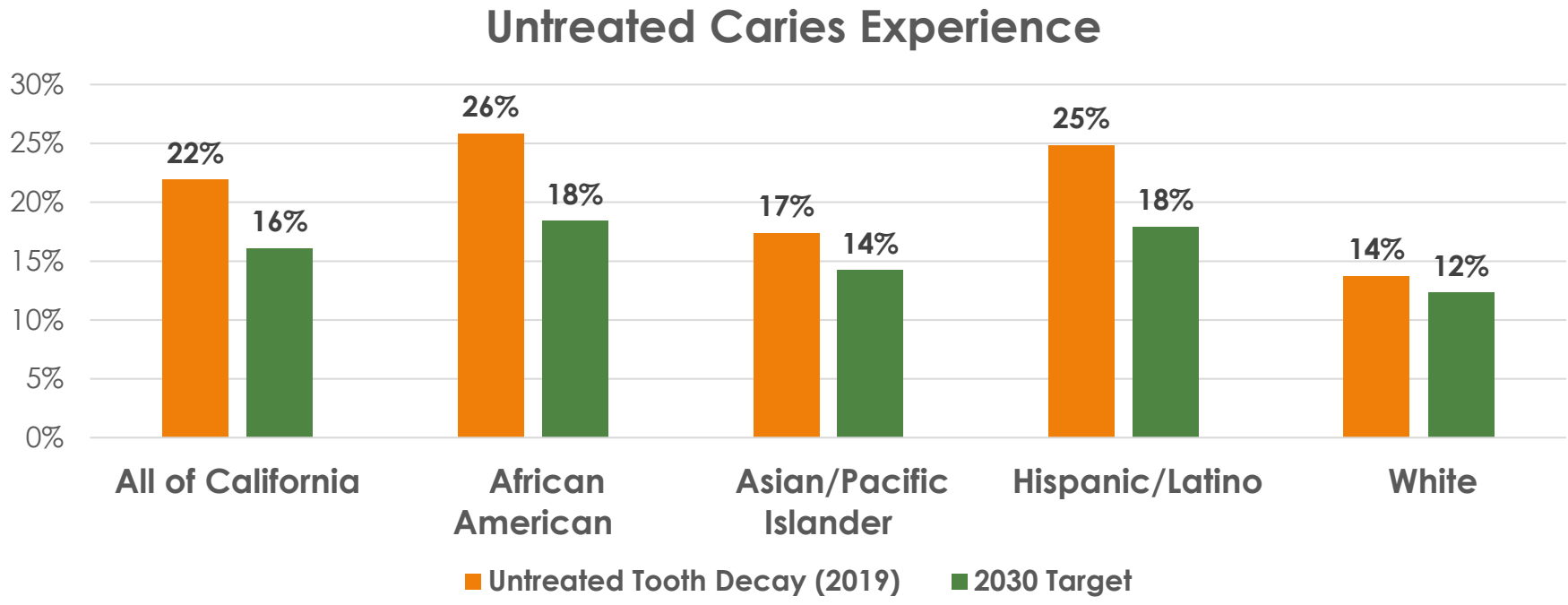
Region	Caries Experience Percent
California	**60.6%**
Bay Area	45.4%
Sacramento	46.2%
Northern/Sierra	51.6%
Southern	60.4%
Central Coast	64.2%
Los Angeles	64.7%
Central Valley	75.9%



Goal: Reduce health disparities among children by 50 percent statewide by December 31, 2030.



Goal: Reduce health disparities among children by 50 percent statewide by December 31, 2030.



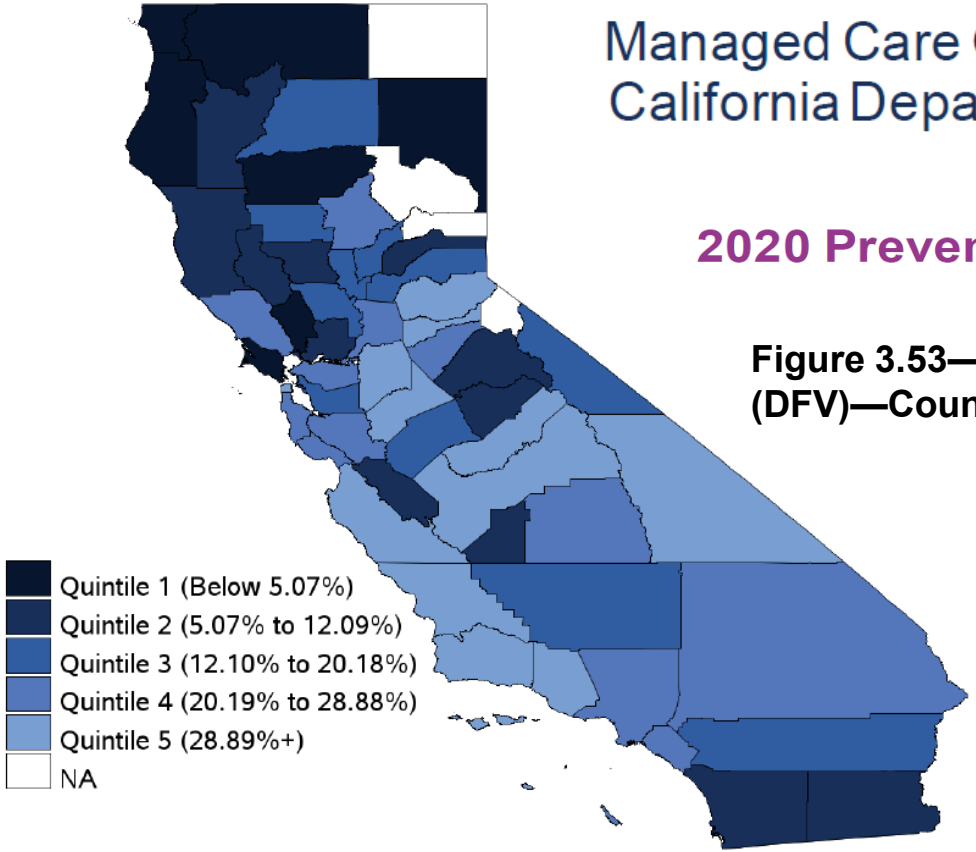
Public Health and Population Health Management

SOURCE: Auerbach J. The 3 Buckets of Prevention. J Public Health Management Practice 201http://journals.lww.com/jphmp/Citation/publishahead/The_3_Buckets_of_Prevention_.99695.aspx

Managed Care Quality and Monitoring Division
California Department of Health Care Services

2020 Preventive Services Report

Figure 3.53—Dental Fluoride Varnish (DFV)—County-Level Results



"While the percentage of members receiving dental fluoride varnish treatments is 23 percent, only about 3 percent of members received treatments from a non-dental provider. This finding indicates MCPs have an opportunity to work with medical providers to ensure members receive dental fluoride treatments."

School Dental Program

	Schools	K-6th Enrollment
Rural	1223	398,008
Urban	3403	1,648,061
Total	4626	2,046,069

Definition for targeting school-based or school-linked dental programs

All public elementary urban schools with > 50% of students on the free/reduced lunch program and all rural schools are considered eligible for a school-based/-linked sealant program.

California Advancing & Innovating Medi-Cal (CalAIM) Dental

- Caries Risk Assessment Bundle for young children (0 to 6 years of age) and Silver Diamine Fluoride for young children (0 to 6 years of age) and specified high-risk and institutional populations
- Pay for Performance for two adult and 17 children preventive services codes and continuity of care through a Dental Home

Appendix H: Dental in Proposition 56 vs. CalAIM

Dental Procedure Code	Description	Proposition 56 Supplemental Payment	CalAIM Performance Payment
D0120	Periodic oral evaluation – established patient	No	Yes
D0145	Oral evaluation for a patient under three years of age and counseling with primary caregiver	No	Yes
D0150	Comprehensive oral evaluation – new or established patient	No	Yes
D0601	Caries risk assessment and documentation, with a finding of low risk (children ages 0-6)	No	Yes
D0602	Caries risk assessment and documentation, with a finding of moderate risk (children ages 0-6)	No	Yes
D0603	Caries risk assessment and documentation, with a finding of high-risk (children ages 0-6)	No	Yes
D1110	Prophylaxis – adult	Yes	No
D1120	Prophylaxis - child	No	Yes
D1206	Topical application of fluoride varnish (child)	No	Yes
	Topical application of fluoride varnish (adult)	Yes	No
D1208	Topical application of fluoride – excluding varnish (child)	No	Yes
	Topical application of fluoride – excluding varnish (adult)	Yes	No
D1310	Nutritional counseling for the control of dental disease (child)	No	Yes

Dental Procedure Code	Description	Proposition 56 Supplemental Payment	CalAIM Performance Payment
D1320	Tobacco counseling for the control and prevention of oral disease (adult)	No	Yes
D1351	Sealant – per tooth (child)	No	Yes
D1352	Preventive resin restoration in a moderate to high caries risk patient – permanent tooth (child)	No	Yes
D1354	Interim caries arresting medicament application – per tooth (children ages 0-6 and restricted adult populations)	No	Yes
D1510	Space maintainer – fixed, unilateral – per quadrant (child)	No	Yes
D1516	Space maintainer – fixed, bilateral, maxillary (child)	No	Yes
D1517	Space maintainer – fixed, bilateral, mandibular (child)	No	Yes
D1526	Space maintainer – removable, bilateral, maxillary (child)	No	Yes
D1527	Space maintainer – removable, bilateral, mandibular (child)	No	Yes
D1551	Re-cement or re-bond space maintainer – bilateral space maintainer, maxillary (child)	No	Yes
D1552	Re-cement or re-bond space maintainer – bilateral space maintainer, mandibular (child)	No	Yes
D1553	Re-cement or re-bond space maintainer – unilateral space maintainer – per quadrant (child)	No	Yes
D1556	Removal of fixed unilateral space maintainer – per quadrant (child)	No	Yes
D1557	Removal of fixed bilateral space maintainer – maxillary (child)	No	Yes
D1558	Removal of fixed bilateral space maintainer – mandibular (child)	No	Yes
D1575	Distal shoe space maintainer – fixed unilateral – per quadrant (child)	No	Yes
D1999	Unspecified preventive procedure, by report (adult)	No	Yes

Thank you!

Questions and Answers

UCSF
University of California
San Francisco

California Department
of Public Health
OFFICE OF ORAL HEALTH

Deciding Between School-Based or School-Linked and Provider Aspects

Sep 21st, 2021

Bahar Amanzadeh, DDS, MPH

Overview

- School-Based versus School-Linked Dental Programs
- Dental Providers' Scope of Practice
- Overview of Providers' Billing Capability

Results of the Survey to LOHPs: Potential Challenges:

- Sustainability and billing: 92%
- Tracking referral closure: 75%
- Identifying dental providers who will perform screening: 48%
- School based educational and preventive programs: 15%
- Identifying schools: 12%

Some Main Questions:

- Provider Challenges: Challenges of volunteer dentist and establishment of Dental Home; Shortage of providers and short-staffed; RDH and RDHP availability in rural counties; no community clinics in a region who would be willing to go to schools

- Screening and other services: bringing providers up to speed; capacity for more services like sealants; passive consent

Some Main Questions:

- Billing and contracting: dental director option; paying for screeners; Contracting: with providers to do screenings and manage the referrals

- Adopting to the a digital referral system and integrating with other systems: Training of staff and advertisement of referral system to parents

- Partnerships and relationships: Re-establishing relationship and trust with schools and integration with wellness programs; MOUs with schools; FQHCs and schools

UCSF
University of California
San Francisco

School-Based versus School-Linked Dental Programs

School Dental Program Models

School screening

- Case identification and referral management

(hearing & vision screening)

Sealant Program

- One time contact for a long lasting clinical preventive service (e.g., Immunization)

Primary care

- Establishing ongoing care for a child

(Dental home)

Active and Passive Consent

Communicate, Communicate, Communicate

Passive

- Higher rate of return

Active

- We can get more information like demographics and Medi-Cal ID

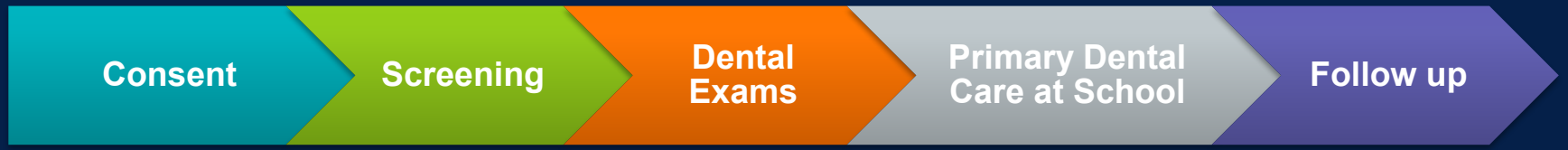
School-Linked Dental Programs

- Passive Consent

School-Based Sealant Dental Programs

- Passive Consent for Screening
- Active Consent for Sealants or Start with Active

School-Based Primary Care Dental Programs



- Passive Consent for Screening
- Active Consent for Exams and Treatments
- Some Start with Active Consent

How to Decide Which One is the Right Match?

- School buy-in
- Availability of space at schools
- Best option for the children/community
- Cost and labor considerations
- Sustainability
- History of existing school dental programs
- Participation level
- COVID considerations
- Provider choice
- Availability of providers in the community
- Reach

Consideration – A quick check

	School-Linked	School-based
Availability of a billing provider		✓
Number is small (<2000/1 provider)		✓
Lack of adequate space	✓	
Limited resources	✓	
Limited support from school	✓	
Sustainability	✓	

You can always start with a screening program and expand but not the other way around!

Dr. Jay Kumar

UCSF

University of California
San Francisco

Dental Providers Scope of the Services in relation to School Dental Programs and Billing Capabilities

Screenings/Assessments in School Setting

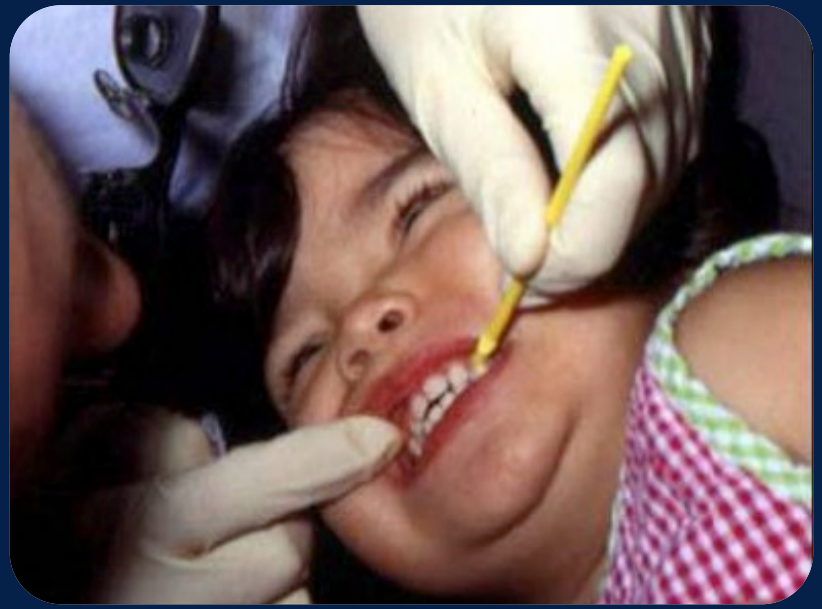
- Dentists
- Registered Dental Hygienists (RDH)
- Registered Dental Hygienists in Alternative Practice (RDHAP)
- Registered Dental Assistants with Extended Functions (RDAEF): under the direction of a dentist, RDHAP or RDH.
- Nurses or Nurse Practitioners who have been trained
  - Not for KOHA

Dental Sealants

- Place dental sealants
  - Dentists
  - RDHs
  - RDHAPs
  - RDAEF or RDAs with a sealant certificate
- Screen for dental sealants
  - Dentists
  - RDHs
  - RDHAPs

Fl Varnish

- Dentists
- RDH
- RDHAP
- RDAs
- Nurses or Nurse Practitioners
  - who have been trained



Primary Dental Care

Cleaning; Scaling and Root Planing:

- RDH
- RDHAP
- Dentists

Restorative Care and Simple Extractions

- Dentists

Billing

Fee for Service

- Need Medi-Cal ID
- Screening not billable at the moment but honorarium through Office of Oral Health
- Dentists, RDHAPs

Federally Qualified Health Centers

- Need to establish the school as an Extramural Site
- They can bill for the bundle of services

Panel Discussion

Guest Speaker:

Travis D. Tramel Ph.D., MA, RDHAP

GeriSmiles Dental Hygiene Practice

Questions and Answers

UCSF
University of California
San Francisco

Thank you!