

Oral Health and Primary Care

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Introduction

- Why Primary Care
- National Oral Health Curriculum
- WDSF Projects
 - Engaging Primary Care Providers
 - ABCD
- Barriers and Other Issues



Current Recommendations

- American Academy of Pediatrics
- American Academy of Family Physicians
- Dental: AAPD

How can this be done?



Why Primary Care?

- Dental disease is preventable
- Good evidence that primary care interventions can make a difference
- Shrinking supply of dentists – growing population
 - “Cannot drill and fill our way out of this crisis”
- Children and LSES individuals with poor access have better medical access
 - >100 million without dental, 50 million lack medical



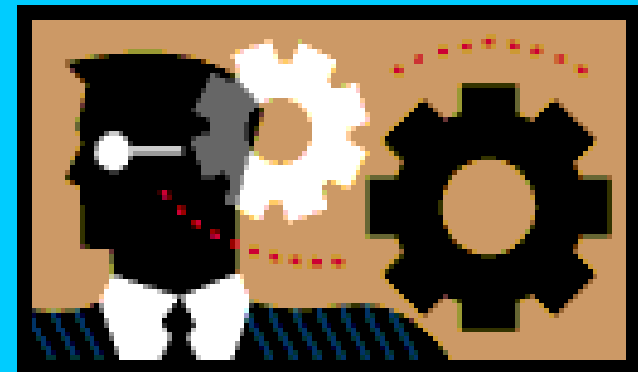
Why Primary Care? Con't

- By age 2, children have usually seen a provider 7 times
- 88,000 family physicians
- 40,000 pediatricians
- 50% of all primary care office visits done by family physicians



Why Primary Care? Con't

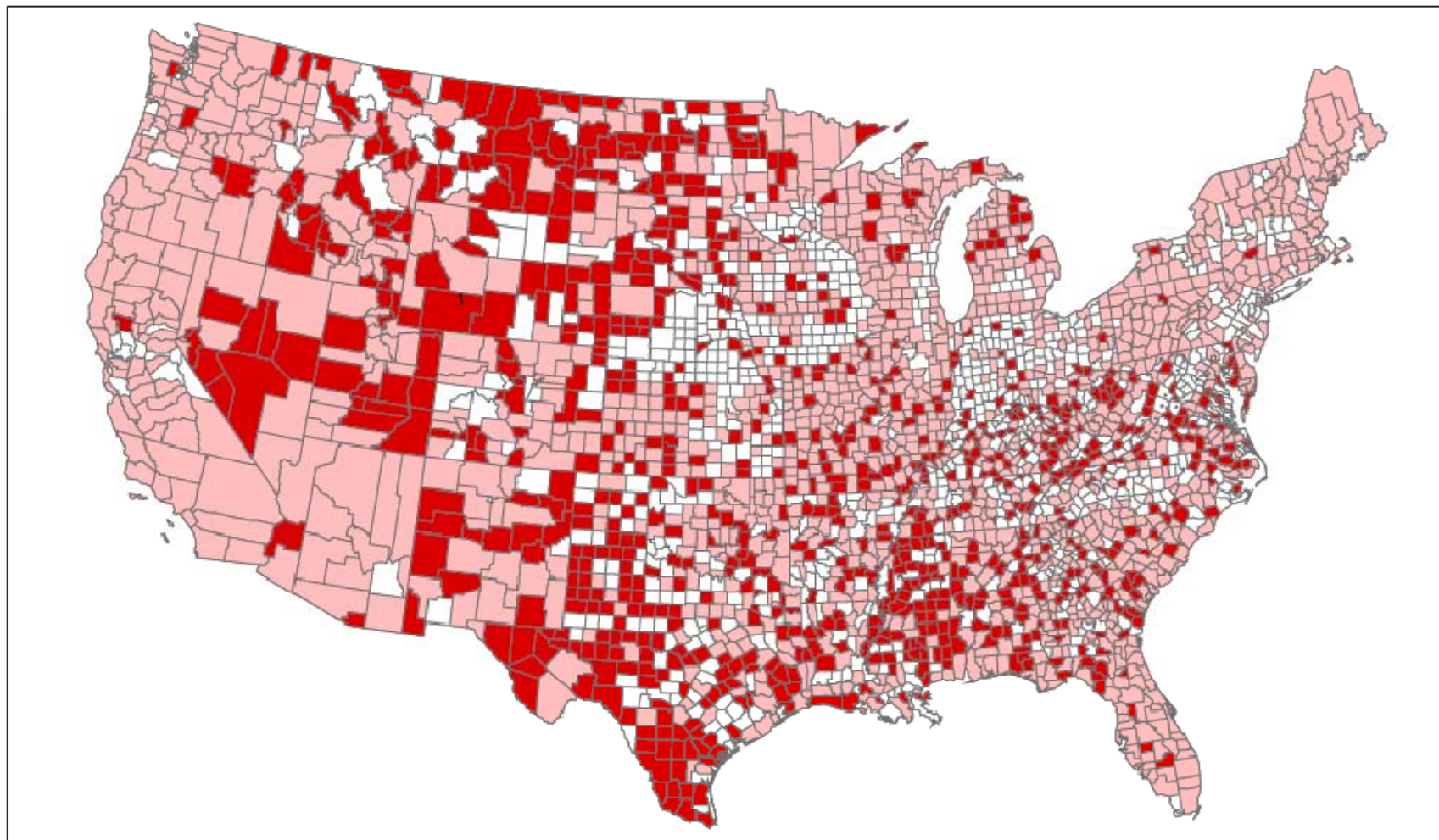
- The mouth is part of the body
 - Pregnancy
 - Heart Disease
 - Diabetes






- Primary care forms the base of all functioning health systems in the world



PRIMARY CARE HEALTH PROFESSIONAL SHORTAGE AREAS



2002 County HPSA Status

-  Full Primary Care HPSA
-  Partial Primary Care HPSA
-  Not a HPSA

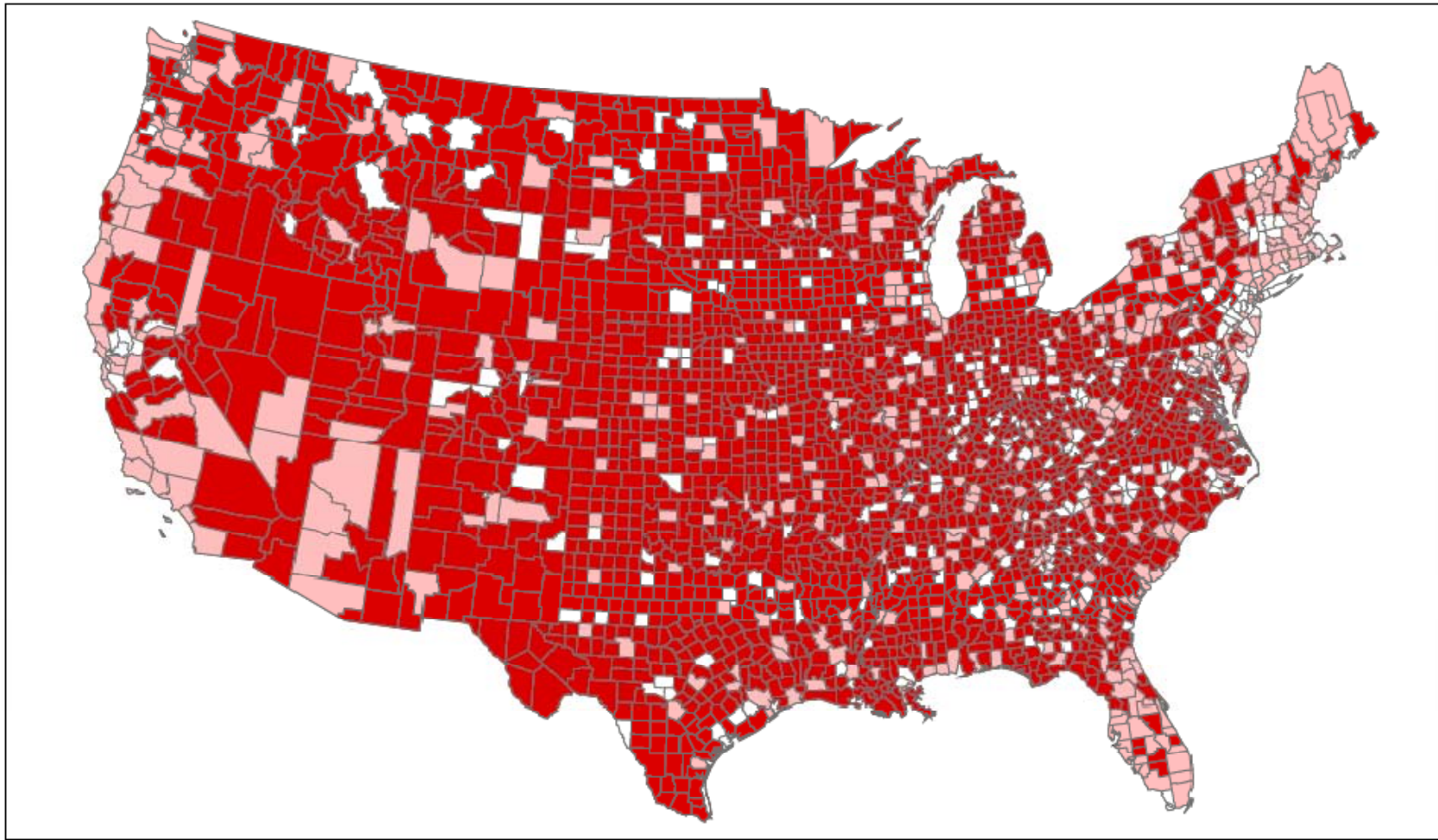


www.graham-center.org

Prepared by the Robert
Graham Center: Policy
Studies in Family
Medicine and Primary Care

Data Source: 2003 Area
Resource File (U.S.
Department of Health
and Human Services)

PRIMARY CARE HEALTH PROFESSIONAL SHORTAGE AREAS IF FAMILY PHYSICIANS WERE WITHDRAWN



2002 County Primary Care
HPSA Status After Withdrawal

- HPSA/Becomes Full HPSA
- Remains Partial HPSA
- Not a HPSA



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Can Residents Learn Oral Health?

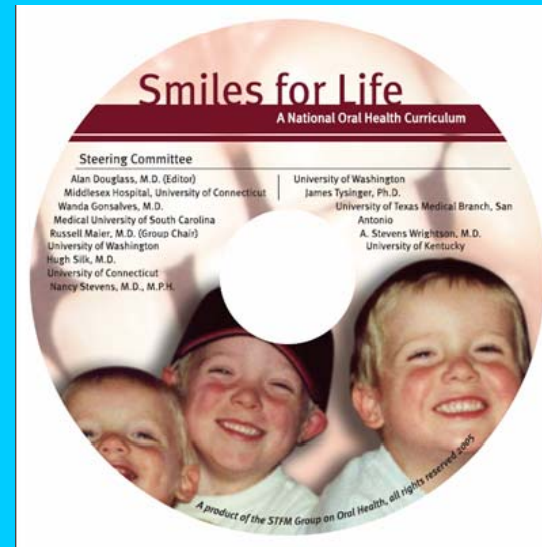
- Residents rated modules highly
- Residents found material applicable to everyday practice
- Residents retained information over time



Smiles for Life

Version 2 Summer 2008

- Complete curriculum
- 6 modules
 - Intro
 - Child
 - Adult
 - Emergencies
 - Pregnancy
 - Fluoride Varnish
- Other Materials – PDA, patient education
- State standard for teaching physicians
- Over 40,000 downloads



www.stfm.org/oralhealth/



DELTA DENTAL
**Washington Dental Service
Foundation**

Community Advocates for Oral Health

Washington Dental Services Foundation Activity

- Engaging Primary Care Providers
- Access to Baby and Child Dentistry



ENGAGING PRIMARY CARE PROVIDERS

- Policy Change
- Training
- Communications



Training at Sea Mar-Everson Clinic



POLICY CHANGE

Resolutions



Reimbursement

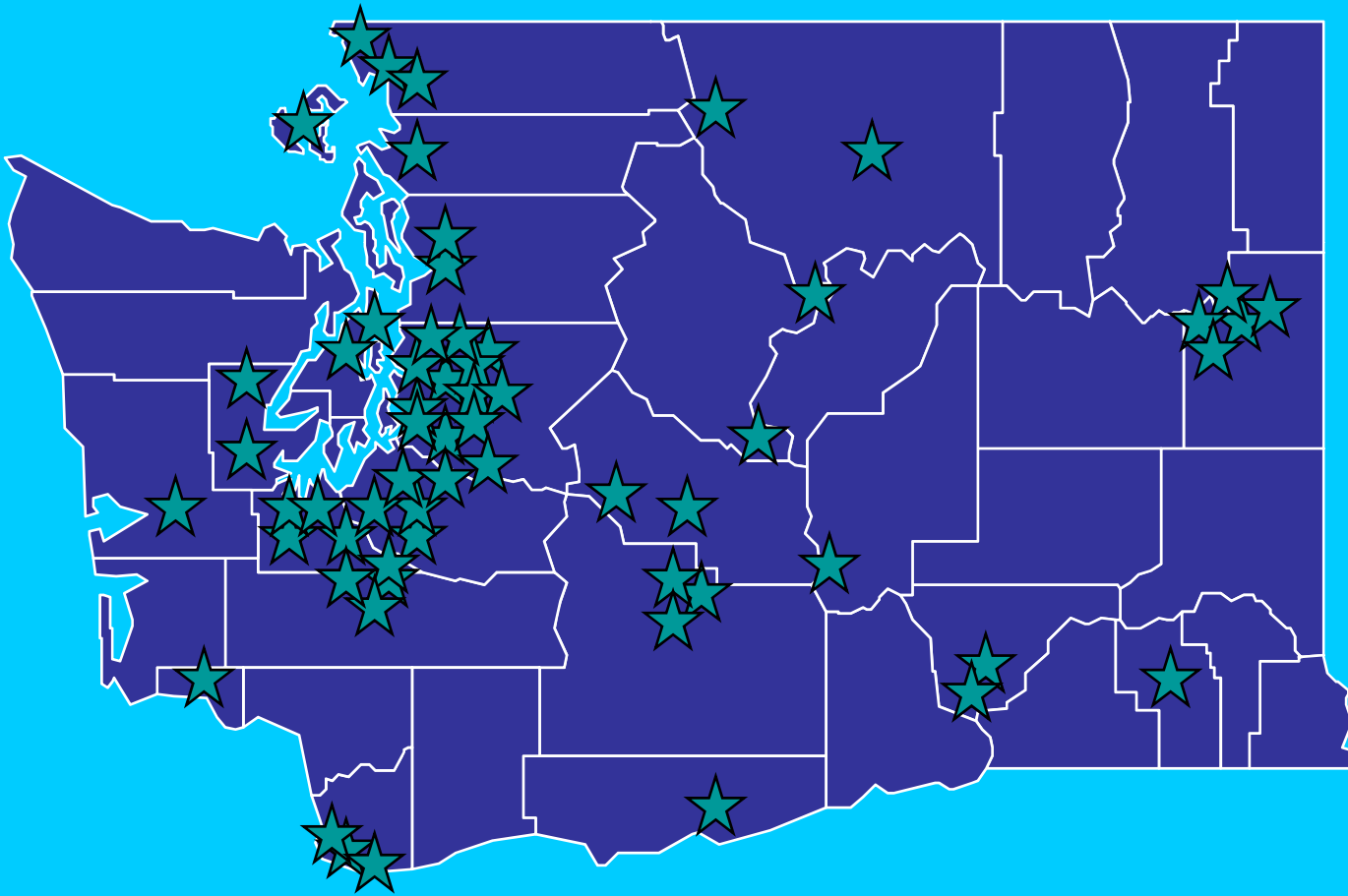


Building Political Will to Expand Medicaid Reimbursement

- Public awareness campaign: radio, TV, print
 - Message: oral health matters & baby teeth are important
 - Partnered with medical associations & hospitals
- Folded into a broader effort to increase health care coverage for kids
- Built support with key legislators & children's advocates



PRIMARY CARE TRAININGS- 2002-2008



Trained:
>1,800
providers &
staff
Including 750
MDs



Medicaid Reimbursement--2008

CDT/HCPCS Code	ICD-9-CM Diagnosis Code	Description	Maximum Allowable Fee	Limitations
D0120	V20.2	Periodic oral evaluation	\$29.46	One periodic oral evaluation is allowed every six months through age 5 per provider, per client
D1203	V20.2	Topical application of fluoride	\$13.66	Up to 3 times in a 12-month period through age 5, per provider, per client
D9999	V20.2	Family oral health education	\$27.58 Potential Total: \$70	Limited to one visit per day per family, per provider. Up to 2 visits in a 12-month period through age 5 per provider, per client.



Demonstration Project: Group Health

- Large medical system reaching 560k members
- Pilot in 6 of 25 clinics
- Nationally, this is the first comprehensive project that pairs:
 - Large healthcare delivery system
 - Public & private dental benefits
- Including oral health in EHR, health education materials, etc.



ABCD

Access to Baby and Child Dentistry

- Goal
 - Increase access to dentists trained to see young children
 - Preventive and restorative care for children infancy to age 6
 - Payment and scheduling mechanism built into the project
- Present in 30/39 counties
- Over 650 dentists trained
- Emphasis on seeing children on Medicaid
 - Medicaid utilization rate in ABCD counties among children under 6: increased **19.5% → 39.6%** from 1997 to 2005
 - Increased utilization of Medicaid dental in ABCD counties among children under 2: from **1.4% in 1997 to 14.5% in 2004**



Roadblocks or Throughways

- National and Local Politics
- Scope of Care
- Coding
- Financing
- Insurance/Medical Silos
- Expertise
- Lack of a Health System
- Administrative, Dental, Medical Champions



Future Directions

- Oral health is part of overall health
- Continue to improve the dental-medical interface
 - Primary care providers are uniquely positioned to help
 - Better training of primary care providers
 - Encourage primary care providers to screen patients and apply fluoride varnish
- Financial incentives need to be realigned to focus on prevention
 - Reimbursement for primary care
- Continue to work on legislative change
- Medicare and oral health

An ounce of prevention is worth a pound of cure



Questions

