



Oral Health Integration for MassHealth ACOs

Starting in January 2020, MassHealth began linking payment to performance on a pediatric oral health quality measure. Integrating oral health into the broader health care system care can help ACOs improve their performance on the pediatric oral health quality measure, as well as lead to better management of chronic conditions and reduce costly Emergency Department (ED) visits.¹



The MassHealth ACO Oral Health Quality Measure reports the percentage of ACO members under age 21 who received a comprehensive or periodic oral evaluation during the year.

Why is integrating oral health into physical healthcare important for ACOs?

- **Tooth decay impairs quality of life.** Tooth decay is the most common chronic childhood disease, and when left untreated, can affect a person's ability to speak and communicate, eat nutritious foods, sleep, play, learn, and work.²
- Poor oral health negatively impacts overall health. Nearly 22% of individuals living with diabetes also have periodontal (gum) disease. Gum disease increases inflammation in the body which can make it more difficult for diabetic patients to control their blood sugar.³
- **Despite access to care, oral health disparities persist**. Children and adolescents from low-income families are more likely than higher-income peers to have untreated dental caries.⁴
- Poor oral health can be costly. Integration of oral health into primary care increases utilization of preventive dental services, thereby reducing costs.⁵

Case Studies of Oral Health Integration

Implementing an Integrated EMR

• Shared electronic medical records (EMR) improve care coordination and create a smoother referral system for patients and staff. Holyoke Health Center invested in a new EMR system to meet patient's dental needs. It is accessible to both the primary medical team and dental providers; it makes automatic referrals for regular dental cleanings. Providers can use the EMR to general appropriate referrals for patients in need of urgent medical or dental care. Implementing an integrated EMR has created a streamlined triage process for patients.

Integrating Oral Health into Inpatient Care

• In one inpatient hospital, hygienists provides oral health screenings and dental cleanings to admitted patients with diabetes mellitus and made referrals to outpatient dentists upon discharge. A dentist supervised the hygienist remotely. Many tools in a standard hospital room can be adapted to provide oral health care – for example, an existing suction tool in the hospital room can be used can used to suction saliva. This case study is presented by Dr. Lisa Simon, a dentist and physician affiliated with Massachusetts General Hospital.

Oral health integration can take various forms along the spectrum of referrals between providers to full integration





PROCESS

Established referral tracking and follow-up between medical and dental providers.

IN PRACTICE:

Dental provider network and bidirectional referrals allows tracking of receipt of pediatric dental exam among ACO/CP attributed children.



Interoperable EHR; care delivery via telehealth.

IN PRACTICE:

Case managers coordinate patient care and can view clinical notes from pediatric dental exam and dental care plan.



Performance payments for PCPs; patient establishes dental home with in-network provider.

IN PRACTICE:

Performance metrics on successful referral rates can be rolled down to case manager team. individual providers, or aggregated at the ACO/CP level.

CO-LOCATION OF MEDICAL AND DENTAL OFFICE PROVIDERS

> Care delivery in close proximity at same physical location.

IN PRACTICE:

Case managers can schedule chronic disease management and oral health preventive care as a single-day tandem visit to PCP/dental office.



Single location for all healthcare. Dental providers are part of the care delivery team with shared financial accountability.

IN PRACTICE:

Dental hygienist working in medical offices; use of telehealth services for communication between hygienist and dentists.

Tools for Oral Health Integration



Consider partnerships with dental schools. Examples: Health Care For All Oral Health Integration Case Studies



Opportunities for MassHealth ACOs to Improve Oral Health and Reduce Cost through Emergency Department Diversion. Examples: <u>UMass Policy Brief</u> and <u>Health Policy</u> Commission Oral Health Policy Brief



Consider using teledentistry technologies that allow dental hygienists to provide services in community settings. Example: Health Policy Commission Oral Health Policy Brief



Train clinical staff in primary care settings on oral health diagnoses and preventive treatments that can be offered in a medical clinic. Examples: Health Care For All Oral Health Integration Case Studies



Train front line medical staff to provide oral health education. Example: Smiles for Life Curriculum



Train and engage CHWs and CHW supervisors on oral health management. Examples: Health Care For All Oral Health **Integration Case Studies**



Consider hosting a pediatric dental residency in a medical setting. Examples: Health Care For All Oral Health Integration Case Studies



Include dental services in an ACO global budget. Examples: Health Care For All Oral Health Integration Case Studies

To find more information about MassHealth covered services for adults and children please visit here: MassHealth **Dental Benefits.**

- Due to the COVID-19 pandemic, MassHealth is in discussions with CMS regarding adjustments to the ACO quality measurement approach, 1. which could impact when this measure becomes linked to payment for performance
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