

## Waiver Project Proposal: DENTAL EMERGENCY NEEDING TREATMENT (DENT)

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<b>Project Title</b>	Dental Emergencies Needing Treatment-DENT
<b>Rationale for the Project</b>	
<p><b>Problem Statement:</b> Access to dental care for adults enrolled in Apple Health is very limited, leading to inappropriate use of the ED for dental emergencies. Dental pain was the #1 reason uninsured adults visited WA EDs in 2011, costing \$36 million over an 18 month period.</p> <p>Molina reported 3,453 members visited the Emergency Department (ED) for dental issues in 2014 statewide. The cost of these visits was \$963,168. Molina has 38% of the market statewide, so we estimate a total of roughly \$2,534,652 being spent by all MCOs on ED cost annually, for dental visits statewide. There would still be costs to HCA associated with the dental care patients received after being diverted from the ED. This is difficult to estimate but it is assumed to be significantly less than the cost of an ED visit. ED visits for dental issues are expensive but most importantly, they cannot address the underlying condition, leading to repeat visits to the ED.</p> <p><b>Evidence Base:</b> There is a growing body of research that highlights the need to expand oral health access to reduce the use of Emergency Departments to seek care. This care would be more effective if it had been delivered earlier, resulting in better health outcomes at a lower cost.<sup>1</sup></p> <p><b>Dental Emergencies Needing Treatment (DENT):</b> DENT connects patients to dental care and expands the network of dental providers accepting Apple Health. A Community Health Worker receives referrals from the Emergency Department and connects patients with Medicaid accepting dentists, provides behavioral coaching and ensures that patients follow their dental care plan. DENT also works to recruit new dentists to accept Apple Health patients.</p> <p>In 2015 Better Health Together (BHT) received 4,000 clients referrals from Providence ED and other departments:</p> <ul style="list-style-type: none"><li>• 100% of eligible clients were enrolled in Health Insurance;</li><li>• 93% of referred clients were scheduled with a Medicaid Accepting Dentist;</li><li>• Medicaid Accepting Dental Network increased from 22 providers to 53 providers; and</li><li>• Emergency Dental Appointments increased from 51 appoints per month to 225 appointments per month.</li></ul> <p>BHT estimates DENT has generated over \$2 million in savings from avoidable Emergency Department</p>	

<sup>1</sup> [http://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIBrief\\_0513\\_1.pdf](http://www.ada.org/~media/ADA/Science%20and%20Research/HPI/Files/HPIBrief_0513_1.pdf)

readmissions costs in the first 18 months of this program through the following assumptions:

- On average, the hospital billed \$650 per ER visit; (Note: the average cost of ED Dental claims paid by Molina indicate an average cost per visit of roughly \$280.)
- Past data shows that a dental patient who does not get adequate dental care will return to the ED four times; and
- A majority of patients who are enrolled in DENT do not return to the ED for dental issues, resulting in significant savings per enrolled client.

**Priorities**

- Dental care is one of the priority areas for both the BHT and North Sound Accountable Community of Health.
- Dental is the most needed & least available service for Apple Health adults in Whatcom/Skagit.
- San Juan County qualifies as a Dental Health Professional Shortage Area (a population greater than 5,000 per dental provider).
- Every county in Spokane region is a Dental Health Professional Shortage Area.
- In 2012, dental issues were the 9<sup>th</sup> most common reason for an ED visit, 940 cases or 2.8% at Providence Medical Center Everett in 2012.
- In 2014, at Providence Health Care in Spokane, the 4<sup>th</sup> most common reason for Apple Health Enrollees visiting a Providence facility was dental issues with 1,491 visits.
- Clallam and Jefferson counties are federally designated dental health professional shortage areas. In Jefferson County only 37.5% of providers, or 3 dentists, treat Medicaid patients. In 2014, fewer than 1 in 13 Apple Health-insured adults saw a dentist. Even among children ages 5 and under assisted by the state’s ABCD program, only 1 in 3 used a dental service in 2014. Transportation challenges, poverty and lack of dentists who accept Apple Health all add up to this region featuring the worst access to oral health care in the state.
- Most Counties in the Cascade Pacific Region are considered Federally Designated Health Professional Shortage Areas for Dental Care for low income population. The majority (86%) of counties in the Region have a ratio lower than 50 dentists per 100,000 people. Both Pacific and Wahkiakum counties have one of the lowest dentists-to-population ration in the state of Washington (19:100,000 and 25:100,000 respectively). In Wahkiakum County, only one private dentist provider treated Medicaid patients in FY 2014, while in Pacific three dentists treated Medicaid patients. Overall, Medicaid utilization in both counties is lower than the state average of 36%.

**Project Description**

*Which Medicaid Transformation Goals<sup>1</sup> are supported by this project/intervention? Check box(es)*

- ✓ Reduce avoidable use of intensive services
- ✓ Improve population health, focused on prevention

*Which Transformation Project Domain(s) are involved? Check box(es)*

- ✓ Care Delivery Redesign
- ✓ Population Health Improvement – prevention activities

**Target Population:** Children and adults who visit the ED with a dental emergency.

**Goals:**

- 50% reduction in use of Emergency Department for dental emergencies;
- 100% of eligible clients enrolled in Health Insurance;
- 90% of clients referred scheduled with a Medicaid Accepting Dentist;
- 100% of clients receive behavioral coaching; and
- Increase Medicaid Accepting Dental Network by 100%

**Intervention:**

- DENT accepts referrals from referring partners such as EDs, Urgent Care Centers and other organizations for emergency dental issues.
- DENT Community Health Workers connect patients with an appropriate dental appointment. The Community Health Worker provides behavioral coaching to ensure patients are ready for their appointments.
- DENT recruits dental providers from FQHC’s and private dental offices to create a Dental Provider Network.
- DENT collaborates with other community programs to meet patient needs such as applying for health insurance and accessing other community resources

**Partners:** Washington Dental Service Foundation can support public/private partnerships in this work, and will explore funding needs with potential partners as appropriate. Will need to identify partners beyond Washington Dental Service Foundation and WAHA in the North Sound. Partner types would include hospitals, MCOs (Molina has indicated support for this project) and organizations that provide referral services (e.g. Project Access, CHOICE, Benton-Franklin Health Alliance, public health, Community Health Workers (CHWs) and local CHW networks, other referral agencies). BHT’s region already includes 47 Medicaid accepting Dentists and Federally Qualified Health Centers. Molina has indicated support for the DENT project.

**Health Disparities:** Access to dental care is most difficult for low-income adults. Medicaid recipients and the uninsured account for two-thirds of all ED dental visits. The incidence of oral disease is disproportionately high among low-income communities. Oral health disparities are profound; non-Hispanic Blacks, Hispanics, and American Indians and Alaska Natives in all age groups, generally have the poorest oral health of any racial and ethnic group.

**Core Investment Components**

**Cost:**

DENT Program Manager	\$50,000 +26% Benefits=\$63,000	Develops and maintains Provider Network (.5 FTE) and Care Coordination (.5 FTE) for 750 clients annually
Community Health Worker	\$42,000 +26% Benefits=\$53,000	Provides Care Coordination (1.0 FTE) for 1500 clients annually

**Best Estimate:** Based on the experience of the DENT pilot in Spokane, we project roughly 2,250 people will be served by this project in the first year, and would grow in subsequent years. Based on the experience of the DENT pilot in Spokane, we project a project cost per client of \$52.

**ROI:** Based on Resources & Sustainability data, a crude regional ROI would be approximately \$1,162,805 (regional cost estimate) - \$348,000 (\$116K pilot cost x 3 for scaling) x 50% reduction = \$407,402 annual savings, not including the cost of dental care\*\* provided to patients diverted from the ED.

(\*\*Note: This is difficult to estimate but it is assumed to be significantly less than the cost of an ED visit. ED visits for dental issues are expensive and cannot address the underlying condition, leading to repeat visits to the ED.)

**Relationship to Washington’s Medicaid Transformation Goals:**

Oral Health  
Per capita Medicaid spending  
Avoidable ED visits

**Project Metrics**

- 1) Number of referrals from ED
- 2) Number of dental appointments made
- 3) Amount of time to be contacted
- 4) Percent no-show rate
- 5) Increase in Medicaid accepting dentist in Network
- 6) Increase in number of Emergency Dental Appointments

Can all be tracked by coordinating entity