Florida Oral Health Alliance Virtual Meeting
Teledentistry
Tuesday, August 20, 2019
11 AM – 12:30 PM

Go-to-Meeting Link: https://global.gotomeeting.com/join/288428197
You can also dial in using your phone: +1 (872) 240-3412
Access Code: 288-428-197

Florida Oral Health Alliance Result: All Florida children, youth and families have good oral health and well-being, especially those that are vulnerable.

Meeting Results:
By the end of the meeting participants will have:
• Developed a deeper understanding of the methods for using teledentistry to better meet the needs of underserved populations and address disparities currently present in the field.
• Understand how the signing of HB 23, Florida's telehealth bill, impacts the oral health landscape in the state.
• Received updates from the OPEN Network with further opportunities to travel and connect with state and national Network partners in the coming weeks and months.

Meeting Agenda

<table>
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<th>Time</th>
<th>Agenda Item</th>
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<tr>
<td>11:00-11:10 a.m.</td>
<td>Welcome/Introductions</td>
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<td>11:10 – 11:50 a.m.</td>
<td>Emerging Issues in Oral Health</td>
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<td></td>
<td>• Teledentistry; Dr. Paul Glassman, Professor of Dental Practice; Director,</td>
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<td>Community Oral Health; Director, Pacific Center for Special Care; University</td>
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<td>of the Pacific Arthur A. Dugoni School of Dentistry</td>
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<td>11:50-12:10 p.m.</td>
<td>Q&amp;A with Dr. Glassman</td>
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<td>12:10-12:30 p.m.</td>
<td>Closing and Review of Upcoming Meetings/Learning Opportunities; Updates from Alliance Partners</td>
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Florida Oral Health Alliance August 20 Meeting Participants

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<tr>
<th>Meeting Participants</th>
<th>Title</th>
<th>Organization</th>
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<tbody>
<tr>
<td>Jena</td>
<td>Outreach Manager</td>
<td>Florida Healthy Kids</td>
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<tr>
<td>Doug</td>
<td>Florida Executive Director</td>
<td>DentaQuest</td>
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<tr>
<td>Robert</td>
<td>DDS</td>
<td>Florida Department of Health</td>
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<tr>
<td>Tamara-Kay</td>
<td>Dental Director</td>
<td>C. L. Brumback Primary Care Clinics</td>
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<tr>
<td>Paul</td>
<td>DMD, MA, MBA</td>
<td>Pacific University</td>
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<tr>
<td>Alexandra</td>
<td>Governmental Affairs Liaison</td>
<td>Florida Dental Association</td>
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<tr>
<td>Jennifer</td>
<td>School-Based Sealant Program Coordinator</td>
<td>Florida Department of Health</td>
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<tr>
<td>Nancy</td>
<td>Dental Quality Coordinator</td>
<td>C. L. Brumback Primary Care Clinics</td>
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<tr>
<td>Aida</td>
<td>MPH Student &amp; Pediatric Dental Assistant</td>
<td>Florida International University</td>
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<tr>
<td>Casey</td>
<td>Director of Third Party Payer and Professional Affairs</td>
<td>Florida Dental Association</td>
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<tr>
<td>Louiza</td>
<td>Data Analyst</td>
<td>Florida Department of Health</td>
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<tr>
<td>Aaron</td>
<td>Government Operations Consultant</td>
<td>Agency for Healthcare Administration</td>
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<tr>
<td>Robert</td>
<td>DDS</td>
<td>Florida Department of Health</td>
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<tr>
<td>Nelsigleny</td>
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<td>MCNA Dental</td>
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<tr>
<td>Rosa</td>
<td>Pediatric Dentist</td>
<td>Liberty Dental</td>
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<tr>
<td>Kristin</td>
<td>Chief Operating Officer</td>
<td>Florida Institute for Health Innovation</td>
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<tr>
<td>Project Staff</td>
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<td>Azam</td>
<td>Project Coordinator</td>
<td>Florida Institute for Health Innovation</td>
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<tr>
<td>Katelyn</td>
<td>Project Coordinator</td>
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Meeting Minutes

Emerging Issues in Oral Health

1. Teledentistry; Paul Glassman, DDS, MA, MBA, Professor Emeritus; University of the Pacific Arthur A. Dugoni School of Dentistry
Dental Care Utilization

- Annual dental visit as a measure is not a great indication of whether someone has good dental care and has their needs met.
  - Nonetheless, the marker (and the low bar it represents) captures less than half of children.
- Total non-utilizers of dental care system is currently 60%
  - Our current system not meeting 40% of individuals oral health needs
- Current dental care system treats wealthiest and healthiest

Quadruple Aim

- Produce better outcomes
- Lower cost per capita
- Improve patient experience
- Improve clinician experience

Measurement

- Many people trying to figure out how we define oral health and how we develop measurements for this system, how do we incentivize providers to produce better health outcomes

Declining Role for the Dental Drill

- Remineralization, buffering agents, sealing caries, caries arresting medications
- All kinds of things that can keep people healthy in community settings, can be done by allied personnel, and it can reach a larger portion of the population

Care for Chronic Oral Diseases

- Acute Care/Surgical Intervention → shifting to chronic disease management

Virtual Dental Home

- Idea of a medical home has primary physician that will manage all of patient’s healthcare
- Dental home refers to a physical dental office typically
- Concept Model – allied personnel on-site + dentist off-site + cloud-based EHR
  - Allied personnel onsite – intake and periodic recall visits, record collection, communication with dentist
  - Dentist off-site – record review, decision about dental treatment, what & where
- Idea of telehealth connected teams
Reach people, emphasize prevention, and lower costs
- Majority of people kept and verified healthy on-site
  - About 2/3 of children had all needed services completed by dental hygienist
- Continuous presence
- Community organization integration
- Dentist integration

San Mateo County, 2018

- 27 sites, multiple agencies and schools, 2 full time community teams
- 2010 – CA only state to adopt VDH
  - by 2019 – upwards of 10 states had at least started VDH discussions, nationwide

Dental Care in the Future

- Dental Practice = geographically distributed, telehealth enabled, oral health teams
- Chronic disease management – using biological, medical, behavioral, and social tools
- Integrated with general health, educational, and social service systems

The Legal and Regulatory Environment

- Ability to use telehealth
  - Scope of practice laws, regulation, interpretation
    - Ability of allied personnel to collect diagnostic records prior to a patient being seen by a dentist
    - Ability of allied personnel to perform procedures ....
  - Ability to be paid for services performed using telehealth technologies
    - Principle: consider telehealth technologies as communication tools, distinct from the health services that are being provided
    - Require payors to pay for covered services whether performed in-person or with the use of telehealth technologies

Training on Using Telehealth Connected Teams

- University of the Pacific has an entire course on VDH
- Dashboard: each column is an area of activity that practices must go through to get themselves ready for this
- Regulatory environment: very important
  - Signed MOU with community sites
  - Scope of Project change to HRSA submitted/approved, etc.
- IT systems, Enrollment, Clinical Workflow, Patient Care, etc. also areas of activity

Open Discussion
Q: Is this going to replace the school-based sealant programs, or will it work alongside?
- Glassman: We look at it as enhancing the school-based sealant programs, bringing them up to another level
- School-based sealant programs are one of the best interventions oral health has, but one issue is that they are not permanently placed within the schools, they come in once maybe twice a year to deliver the sealants.
  - With VDH, they are permanently placed within schools, and whether it is 1 day a week, or 2 days a month, it is permanent and allows people to see it as an integrated service
- Broward Sealant Program: one of the biggest (6th or 7th) in Florida, but they are not electronic yet, everything is written down and recorded

Q: How do you capture the data and how has the data been communicated between the providers, and are you looking at any particular measures to demonstrate impact?
- In terms of capturing data -- idea is to use a cloud-based EHR, and if you have a cloud-based system the information is available to you in your office, at home, etc. If you don’t have a cloud-based system there are ways to work around that that are available
- In terms of measures – interesting question because it’s something we advocate for, for folks to really think about what information is going to give you credibility
  - Testing a system in CA right now, looking at a value-based, full service system
  - Some examples that are fairly basic that we encourage people to look into are:
    - Collection of data on children who have not received dental care
    - This is also a measure of severity of disease
    - If you can track dentist’s decision over time, those that need to come into office vs. those that are ok just being seen in community, that is important (in CA, about 1/3 needed to take a trip to the dental office, but 2/3 did not... after about a year, only about 20% of children needed to take a trip to the dental office so you can see severity of disease is decreasing)

HB23: issue with this bill is it allows for dentists who are out of state to able to participate in the telehealth system in Florida. Unusual and not allowed in most other states.
- There are some people who are developing teledentistry systems throughout the US
- It skipped over the idea of dentists making the treatment plan based off of record review, which is something that is very strongly practiced in CA – it’s a system that requires a very well calibrated team, so that the dentist has a very trusted dental hygienist working with him, this is extremely important as the dentist is not meeting with the patient in-person

Aaron Messer, AHCA:
- With teledentistry, I would like to refer you to our telehealth rule if you are trying to set up telehealth guidelines, it will tell you what you can or cannot do in terms of guidelines and I would assume teledentistry falls underneath that
Dr. Glassman Response:
- Thank you. We are seeing states adopting rules that allow for asynchronous communication between providers, very few states have anything regarding teledentistry – only a few states recognize this, but my feeling is that this is beginning to change
- This could be an opportunity in FL to change the regulatory environment

Dr. Doug Manning, DentaQuest
- As far as synchronous and asynchronous, there are telehealth advisory committees that the new bill is based on they recommended asynchronous
- Managed Care says they should cover asynchronous

Does there need to be a new code developed for teledental exams?
- Glassman: Considered a comprehensive exam, there is no difference. Some states require that the location of services be put onto the claims form, but the exam is considered comprehensive
- #2: we have dentists that have been doing this for a long time, and after doing it for a while they agree
- #3: we have a recognition that you have a trained oral health professional (not a high school student collecting records and doing charts, it’s a dental hygienist), and they are capable of recognizing these things, so the dentist must trust the dental hygienist on site to recognize issues and make a treatment call – requires trust between providers, a robust on-site exam, and
- #4: if you picture a spectrum of children, many children will be in a gray area where the dentist may not be comfortable making a diagnosis or treatment call and the dentist has the ability to bring the child into the office for an in-person call

Paul Glassman:
- If you are starting to think about policy initiatives in FL, there is a variety across the state, but this procedure is fairly simple process

Learning Opportunities & Updates
- Next meeting is tentatively scheduled for: Friday, October 4, 2019
- DentaQuest Partnership website has a new webinar: Oral Health & the Opioid Epidemic
  - Thursday, August 29 at 1:00 ET - This webinar will discuss how the dental industry has been working to address the opioid epidemic and provide guidance for dental providers regarding appropriate prescribing patterns and best practices for treating dental pain.
  - Register here
- 2019 Fight Like Health Summit: September 12-13 in Melbourne, FL
  - September 12 & 13
  - This annual health policy and advocacy conference will feature participants from a cross section of health care including advocates, health care providers, policy
makers, health care attorneys, physicians, students, members of the business community, navigators, and certified application counselors (CACs).
  o More info and registration details can be found at www.healthyfla.org/summit.

• 2019 OPEN Nationals:
  o October 23-25, 2019.
  o Location: Renaissance Baltimore Harborplace Hotel.
  o 202 East Pratt Street Baltimore, Maryland 21202.
  o Register here.
  o If you are a DentaQuest grantee, book your travel here.
    ▪ DEADLINE TO REGISTER IS AUGUST 31ST. For more info, reach out to your grants manager or visit oralhealth.network.