Medical Assistance Program Oversight Council

## **Oral Health Response During COVID-19 First Wave**

December 2020

Marty Milkovic: Director of Community Engagement

Kate Parker-Reilly: Director of Care Coordination & Outreach



## the dental plan for **HUSKY Health**

# BeneCare® DENTAL PLANS

#### Agenda

#### 1 COVID-19 FIRST WAVE IMPACTS & MITIGATION STRATEGIES

- CTDHP Operations Access to Care Dental Service Delivery
- Members

#### 2 NEXT STEPS AND UPDATES

Planning efforts and updates



### ABOUT THE CONNECTICUT DENTAL HEALTH PARTNERSHIP

- Connecticut Dental Health Partnership
  - One Provider Network
  - One Fee Schedule
  - One Set of Benefits
  - One Set of Administrative Rules
- CTDHP is comprised of:
  - Member Services Local Call Center
  - Network Development/Provider Education
  - Dental Health Care Specialists- Care Coordination & Outreach
  - Prior Authorization & Utilization Management
  - Grievance and Appeals
- CTDHP's focus:
  - Timely and proximate access for members
  - Efforts to increase overall utilization and use of preventive services
  - Referral and intensive care management supports for members
  - Integration of oral health in primary care settings 0
  - Improved outcomes and controlled costs 0





## **COVID-19 AND ORAL HEALTH**

- Routine, preventative dentistry has been delayed due to **dental practices closing March-June** following Executive Orders to "stay safe, stay home."
- Dental practices re-opening and following CDC and American Dental Association guidelines has resulted in lower capacity and lower patient volume.
  - Based on the ADA Health Policy Institute tracking of the economic impact on dental practices, in November 60.6% of CT dental practices reported being open, but with lower patient volume than usual.\*
  - 75% of dentists surveyed by CTDHP Dental Policy Advisory Committee reported pre-screening patients twice before encounters and 100% of Dentists surveyed noted they are complying with CDC and ADA guidelines.\*\*
- Dentistry is safe, delaying care could escalate to more serious dental issues and potentially impact overall health.
  - COVID-19 rate among dentists is less than 1% according to ADA.
  - CT State Dental Association commissioned survey indicates among patients that had visited the dentists in the months since COVID-19, 6 in 10 said they were extremely comfortable or very comfortable at their dentist appointments.\*\*\*





<sup>\*</sup> ADA Health Policy Institute COVID-19 Economic Impact on Dental Practices Wave 18, Week of November 16

<sup>\*\*</sup> Survey: CT Medicaid Dentist Sept 2020 CTDHP

<sup>\*\* &</sup>quot;Survey: CT Residents Trust Their Dentists to Assure Safety" The Patch November 23, 2020

## COVID-19 FIRST WAVE IMPACTS ON CTDHP OPERATIONS

- Operations moved to Work From Home March 25<sup>th</sup> after the Governor's "Stay Safe, Stay Home" Executive Order.
- Incoming Call Volume to CTDHP Call Center has experienced significantly more call volume after April 2020 than during any month in 2019.
  - Root cause analysis suggests increased calls were related to restarting of service delivery and higher Medicaid volumes.
- Prior Authorizations and Grievance/Appeals Teams have returned to pre-First Wave volume starting in September.



#### Incoming Call Volume: 2019 v 2020



### **COVID-19 FIRST WAVE IMPACTS ON CTDHP OPERATIONS**

- Outreach team quickly pivoted to virtual outreach modalities. Outreach activities experienced lowest dip in activity in April (25 activities) however, efficiencies gained in less travel time has resulted in higher outreach activities during February-October 2020 than in 2019.
  - 912 activities in 2020 v. 779 activities in 2019 0

- Dental Health Care Specialists (DHCS) continue to provide longitudinal care coordination to members experiencing acute oral health needs, presence of behavioral health challenges, distinct special needs, and co-morbid medical conditions.
  - DHCS report increased complaints of jaw clenching, and teeth grinding. This aligns with 0 literature suggesting pandemic related- stress is manifesting in physical signs and symptoms.

#### NO ESPERE A QUE LE DUELA ORAL HEALTH & COVID-19

El COVID-19 está cambiando la forma en aue los dentistas brindan atención a sus pacientes .El personal de Connecticut Dental Health Partnership desea asegurarseque usted se sienta cómodo en sus visitas al dentista.

Es Seguro! Los chequeos dentales son una parte importantede su salud dental. Los dentistas pueden ayudar a prevenir el desarrollo de problemas y tratar síntomas existentes antes de que se compliquen.

No dude en llamarnos. 855-CT-DENTAL (855-283-3682), Lunes a Viernes, 8:00 AM to 5:00 PM.



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st share

## CTDHP Mitigation Efforts During First Wave of Pandemic

#### DON'T WAIT TILL IT HURTS CAMPAIGN

eNewsletter in English and Spanish sent to members with emails highlighting dental office safety practices during pandemic, ED avoidance, and promoting preventative care.

All members receiving care coordination received specialized COVID-19 letter articulating safety, expectations and precautions in dental service delivery

Outreach team presenting at established systems of care/collaborative groups, community based organizations that serve Medicaid population, reinforcing safety, expectations, and adaptations in dentistry service delivery to communicate to organizations' population/clients.

Examples: Our Piece of the Pie Youth Programs, Early Head Start, WIC, Christian Community Action, OB/GYN Offices

| eNewsletter | Sent Volume |  |  |
|-------------|-------------|--|--|
| English     | 170,000     |  |  |
| Spanish     | 23,500      |  |  |
|             |             |  |  |

| Outreach Type    | Volume           |  |
|------------------|------------------|--|
| Conference Calls | 314              |  |
| ePresentations   | 38               |  |
| Oral Health Kits | 135              |  |
|                  | Jan-October 2020 |  |

#### PHONE CAMPAIGNS

Automated calls if:

- Members not compliant with preventative dental schedule
- Adult Members close to benefit limit max
- Members with problem- focused exam
- Members seen in ED for dental services In-Person calls for:
- New members identified by CHN as not having established Dental Home
- Prenatal Members

| Campaign Type   | Successful Call  |  |
|-----------------|------------------|--|
|                 | Volume           |  |
| Automated Calls | 209,675          |  |
| New Member      | 6,803            |  |
| Prenatal        | 9,675            |  |
|                 | Jan-October 2020 |  |



### **COVID-19 FIRST WAVE IMPACTS ON ACCESS TO CARE**

- Access to Care/Network Adequacy has remained above the contractual standard
  - 100% of membership have access to 1 provider within 20 miles 0
  - 98.79% of membership have access to 2 providers within 5 miles.
- Most offices have fully re-opened following CDC/ADA Guidelines
  - All but 1 FQHC has resumed normal operations.
- Due to school closures, School Based Health Centers had reduced oral health screenings, many are now fully operational.
- The ABC Program (assessment and fluoride varnish application at Pediatric Well Child Visits) saw its lowest rates of service in April and May, but has since rebounded. This could be linked to reduced well-child visits.







### COVID-19 FIRST WAVE IMPACTS ON SERVICE DELIVERY

- Guidelines by the American Dental Association Advisory Task Force and CDC have reduced concurrent patient volumes and office capacity:
  - Waiting rooms closed
  - Prescreening in parking lot or at door with temperature check and exposure questions
  - Full PPE, changed for every patient and for every staff member that patient exposure
  - Using high-speed evacuation for dental procedures producing an aerosol.
  - Having patients rinse with a 1% hydrogen peroxide solution before each appointment
  - Cleaning and disinfecting public areas frequently, including door handles, chairs and bathrooms.



## ADA study finds COVID-19 rate among dentists less than 1%

JADA publishes report from ADA Science & Research Institute, Health Policy Institute October 15, 2020





### **COVID-19 FIRST WAVE IMPACTS ON MEMBERS**

- Utilization significantly reduced with lowest encounters in March-June, as expected with offices servicing only urgent/acute needs.
- ED utilization rates remained low (0.1298 per 1,000 members) during the first wave, suggesting member behavior was appropriate in seeking care at dental offices to meet urgent needs and avoiding the ED.
- CTDHP's Care Coordination team engages with patients post-ED visit via phone, email, or letter to coordinate linkage to dentists and oral health specialists. During this time period, our Dental Health Care Specialists report appropriate ED utilization, working critical cases (e.g., motor vehicle accidents with oral trauma, systemic infection).



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## **COVID-19 FIRST WAVE IMPACTS ON MEMBERS**

#### Context:

• In Federal Fiscal Year 2019, CMS ranked CT #2 in percentage of Medicaid Eligible members aged 1-20 who received preventative dental services. CT at 61.5% of population. 12.4% points over the median.



Source: https://www.medicaid.gov/state-overviews/scorecard/eligibles-who-received-preventative-dental-services/index.html

HUSKY Health

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## COVID-19 FIRST WAVE IMPACTS ON MEMBERS

#### Member Experience

CTDHP Dental Health Care Specialist (DHCS) received referral from New Haven school based dental program. Children aged 6, 8, 9 receiving HUSKY Health needed to establish dental home and engage in treatment plan. The family primarily spoke Pashtu and had not engaged in any oral health treatment prior to screening from the school based dental program.

DHCS secured pediatric dentistry appointments with translation supports in March. Offices were then closed to non-urgent/ acute visits. To keep family engaged, the DHCS contacted the father weekly to check in on the family to identify changes in condition/acuity, appointment time changes due to dental office closures, and assess for social service needs. DHCS provided referrals to SNAP, food pantries, and offered encouragement for the family to contact school to get help with distance-based learning for his children.

As the dental office was working to re-open, appointments were rescheduled several times. Appointments for all three children were completed in October (eight months from original appointment) and treatment plan to start in November. The family continues to engage with CTDHP and the school based health center.









### **CTDHP NEXT STEPS & PLANNING**

- Addressing Oral Health Inequity:
  - Enabling CTDHP staff to assess for social determinants of health and provide referrals. Collaboration 0 with United Way underway.
  - Oral Health Equity Plan in development, receiving support from Connecting to Care CT led by Dr. 0 Cecilia Frometa at Yale University School of Medicine/Child Study Center. Kicking off assessing efforts against national standards for Culturally and Linguistically Appropriate Services (CLAS) this month.
  - Continued data analysis to report on utilization patterns along racial/ethnic and geographical data 0 sets to plan and execute targeted interventions at the micro and local level.



#### United Way of Connecticut





#### **CTDHP NEXT STEPS & PLANNING**

- Racial inequalities exposed during the pandemic further illuminated heath disparities nationally and within Connecticut.
- However, utilization analysis initiated in summer 2020 suggests among the adult population the Hispanic, Multi-Racial Non-Hispanic, and Black/African American Non-Hispanic populations have the higher utilization rates as compared to White/Caucasian Non-Hispanic and Unknown, Non-Hispanic populations. This confirms earlier analysis conducted by the CT Voices for Children in 2016.
- Geo-spatial analysis is currently underway to develop local and microtargeted interventions and campaigns.

| Utilization Rate by Race/Ethnicity Adult Population Continuously Enrolled 24 Month<br>Period (Jan 2018-December 2019) |                              |  |   |  |  |
|---|------------------------------|--|---|--|--|
| Race/Ethnicity  | 24 Month<br>Utilization Rate | Difference from<br>Highest Utilizing<br>Population | Difference From<br>Next Highest<br>Ranked<br>Population |  |  |
| Hispanic  | 57.83%                       |  |   |  |  |
| Multiracial<br>Non-Hispanic   | 56.12%                       | -1.71%   | -1.71%  |  |  |
| Black/African American<br>Non-Hispanic  | 55.68%                       | -2.15%   | -0.44%  |  |  |
| Asian<br>Non-Hispanic   | 54.34%                       | -3.49%   | -1.34%  |  |  |
| Pacific Islander  | 53.42%                       | -4.41%   | -0.92%  |  |  |
| Native American/Alaskan Native<br>Non-Hispanic  | 51.77%                       | -6.06%   | -1.65   |  |  |
| White/Caucasian<br>Non-Hispanic   | 48.75                        | -9.08%   | -3.02%  |  |  |
| Unknown Non-Hispanic  | 47.50                        | -10.33%  | -1.25%  |  |  |



## **CTDHP NEXT STEPS & PLANNING**

- Strategic Partnerships:
  - CTDHP and Food Pantries: Providing CTDHP toothbrushes, toothpaste, and materials highlighting safety at dental offices.
  - CTDHP and ConnIE (HIE): Working with DSS and partners to enable medical and oral health integration and real time alerts for oral health ED visits for the CTDHP care coordination team to quickly respond to members.
  - Beacon and Community Health Network: Collaborating on oral health case conferences by **CTDHP Dental Health Care Specialists.**
  - CTDHP and UCONN Health Leaders (UCHL): Support the pre-med group in adding oral health in patient assessments.
  - Submission of Expression of Interest (EOI) to CMS/CHIP Oral Health Affinity Group to "Advancing Prevention and Reducing Childhood Caries in Medicaid"

# FCODSHARE









#### Remember.....don't wait till it hurts

Questions?



## 855-CT-DENTAL (855-283-3682) Monday-Friday 8am-5pm www.ctdhp.com



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