



Dental Public Health State Activity Submission Form

ASTDD’s goal in collecting information about successful state Dental Public Health activities (e.g., practice, program, service, event, or policy) is to share this information with other states, territories, and stakeholders who may be interested in implementing similar activities. We thank you for your time and willingness to share your experiences.

Please complete the form below and return to Lori Cofano, ASTDD Best Practices Project Coordinator, at lcofano@astdd.org

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STATE DENTAL PUBLIC HEALTH ACTIVITY (e.g., practice, program, service, event, or policy) Minimum=300 Maximum=500	
Activity title:	Reducing barriers: Using teledentistry in long-term care and group homes
State/Territory:	Idaho
Summary overview, which may include the following:	
<ul style="list-style-type: none"> • Objectives • Rationale • Personnel • Key partners • Costs & sustainability 	

Individuals with special healthcare needs, including older adults and those with disabilities, living in long-term care facilities in Idaho's Dental Health Professional Shortage Areas (Dental HPSAs) often face challenges accessing dental care and are deprived of daily oral health prevention. The Idaho Department of Health & Welfare's Oral Health Program (IOHP) is proud to share a successful model to address challenges in access to care through pilot programs funded by the Health Resources Services and Administration (HRSA). The IOHP managed sub-awards in Southern Idaho: Your Special Smiles (YSS) and Idaho State University's Dental Hygiene Department's Bengal Smiles for Life (BSL). YSS and BSL used portable dental equipment and teledentistry to provide residents in long-term care and group homes with patient-specific hygiene and preventive services.

Dr. Brooke Fukukoa (YSS), Ms. Jingjing Qian (YSS), Ms. Rachele Williams (BSL), Dr. Paul Glassman, Ms. Kelli Broyles (IOHP), and Mr. Matt Zaborowski (IOHP) established a workgroup and coined two unique phrases and delivery care models "Assisted Oral Hygiene (AOH)" and "Guided Oral Hygiene (GOH)."

AOH is the "physical assistance with oral hygiene procedures for individuals who are unable to adequately perform their recommended self-care oral hygiene regimen. Assisted oral hygiene is a specific service and may be delivered separately or as part of a remote oral health support program."

GOH is "utilizing audio and video technology to guide a patient or caregiver as they carry out self-care oral hygiene on a regularly scheduled basis. Guided oral hygiene is patient-specific and does not apply to the use of generic prerecorded oral hygiene instruction videos. Guided oral hygiene is a specific service and may be delivered separately or as part of a remote oral health support program. Guided oral hygiene can be represented by a combination of OHI (D1330) and synchronous teledentistry (D9995)."

For each patient, an AOH or GOH session typically takes 15-30 minutes. This approach allows the dentist to virtually be introduced to the patient, train staff at the facilities, and support a collaborative approach to gather consent, medical history, etc. Some program services incorporate non-traditional oral health workforce members, like Certified Nursing Assistants (CNAs). They can utilize intraoral cameras and iPads to send photos securely to the dental provider to allow them to create a patient-specific treatment or hygiene regimen. YSS requires CNAs to complete training and a written and practical test administered by the dentist before delivering the services.

Idaho State University's Dental Hygiene Department (ISU) has implemented the BSL program into its dental hygiene curriculum. Senior dental hygiene students are trained in various clinical settings to practice at the top of their scope. They have successfully been part of this innovative delivery of oral healthcare services and sustainable effort to achieve an equitable and inclusive health system.

For patients in LTCFs who would otherwise not visit a dentist, these services have helped inform them of their dental needs and make referrals to a dentist. These programs have also improved caregiver confidence in caring for their resident's oral health.

Lessons learned (Successes and **Challenges**):

- COVID-19 and high staff turnover rates at care facilities presented and continue to present significant challenges for these projects; however, utilization of teledentistry enabled the programs to persevere and provide some oral health care services. During lockdowns, YSS trained CNAs to apply silver diamine fluoride (SDF) to specific sites with synchronous teledental supervision as prescribed by the dentist.
- Accommodating the unique healthcare needs of those living in long-term care facilities and group homes present challenges in providing care. These projects utilized quality improvement strategies to determine when the residents would be available to schedule the AOH and GOH sessions and their receptivity to the oral healthcare services. Technology presented challenges with the efficiency of teledentistry. Unstable Wi-Fi caused difficulty in synchronous communication between providers and agility in moving from room to room in the facilities.
- Program staff made changes and were highly adaptable to accommodate this population's needs. Patient cooperation improved with subsequent sessions, and post-interaction surveys highlight patient, caregiver, and facility support of the results of this project and improvements in oral health outcomes.
- Innovative projects like these face sustainability challenges as they are initiated with federal funds. The projects are starting to bill for services, this will help cover a portion of the program costs after the end of federal funding. Upon billing, costs for onsite oral healthcare services will be billed to insurance. Lack of reimbursement from Medicaid in Idaho for SDF application, and fluoride varnish applications are the most significant barriers to continuing the provision of preventive care services to those who deserve them the most. The projects provide income-adjusted fees (sliding fee scale) for patients without insurance.
- Payment of dentists for teledental exams is also a significant expense that needs to be accounted to continue and expand provision of care utilizing teledentistry. Medicaid in Idaho does not re-imburse for asynchronous teledental visits.
- YSS is collaborating with the Idaho Healthcare Association (IHCA) to support financial challenges after the end of the subgrant funding. The BSL program will continue services with the next batch of dental hygiene students as a result of being incorporated into ISU's hygiene school curriculum.
- **Reference links**

1. [Link](#) to a free CE presentation from Dr. Brooke Fukuoka on using teledentistry as a practice builder and a community outreach tool. Do not miss her thoughtful insights on the

importance of preventative care and SDF usage as well!

2. Link to the [YSS Website](#), which references the program services and other portable dentistry services provided in Idaho through teledentistry utilization.
3. An article in [Dentistry IQ](#) describing these services.

TO BE COMPLETED BY ASTDD	
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