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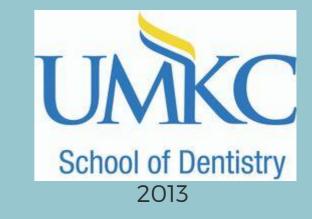
- The Missouri Department of Health and Senior Services
- Arcora Foundation (Foundation of Delta Dental Washington)
- Enable Dental Group
- Mouthwatch LLC
- Multiple FQHCs, Non-Profit Dental Clinics, & Local Health Depts.
- Multiple dental care providers





DR. SUTER BIO SKETCH





2009



Dental Director COMTREA CHC

2013-2018



MO Coalition for Oral Health Board Chair

2014 - Present



NNOHA Outstanding
Clinician Award
November 2016



ADA David Whiston Leadership Award November 2016



MDA Dentist of the Year

November 2019



ADA New Dentist Top 10 Under 10 March 2020



Private Practice Owner July 2018- Present



Access Teledentistry Consultant

January 2018- Present



Community Mental Health

Center since 1974

FQHC since 2012

Dental Clinic opened 2013

19 Dentists

6 Hygienists

Dental Assistants

1 Front office Associates

9,574

22,779

PATIENTS IN 2018

VISITS IN 2018

Mobile Clinic

53 foot tractor trailer

Fixed Clinics
Strip Mall Based

School Based
Built into school buildings

Portable Clinics
Teledentistry

Pilot Program Details

Initial Teledentistry Pilot Demonstration 2017



12 dentists trained



6 hygienists trained



33 Schools + 1 nursing home + 2 primary care



Over 1,200 patients served

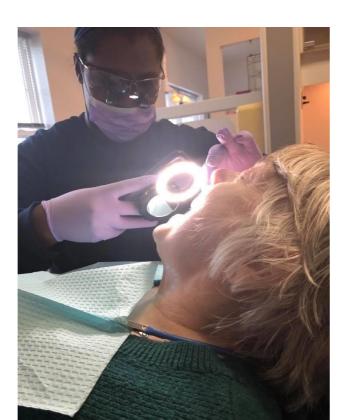


Green Leaf Dental Care



Private Practice Using Teledentistry

- Started in December 2018
- Increasing Hours of Operation
- Increase Hygiene Availability
- For exams on hygiene only days



Increasing Access and Availability

- Hygiene only days
 - Conferences
 - Vacation
 - Sick Days
- 20 extra hours per month
- 22% increase in office hours
- Patients want convenient hours



Teledentistry Workshop Overview

Day 1

- Introduction to Teledentistry
- Examples of Teledentistry Projects around the US
- Access Teledentistry's Four Phase Overview
- Care Coordination
- Data Collection
- Examination
- Follow Up
- Legal/ Regulatory

Day 2

- Technology / Operations
- Financial / Sustainability
- Training / Evaluation
- Photography Hands On Training
- Teledentistry Exam Hands On
- Q&A Closing



When will this end?

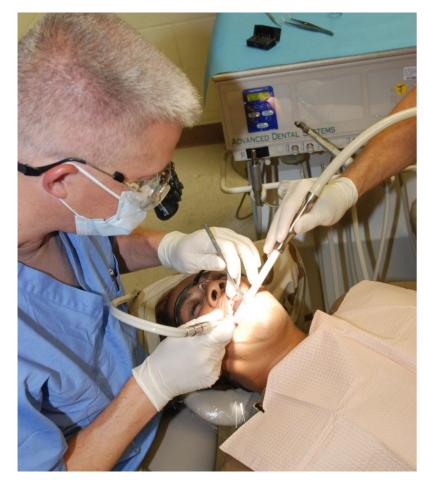
Our Pandemic Summer, The Atlantic -Apr. 15, 2020

Much about that period is unclear, but the dozens of experts whom I have interviewed agree that life as most people knew it cannot fully return. "I think people haven't understood that this isn't about the next couple of weeks," said Michael Osterholm, an infectious-disease epidemiologist at the University of Minnesota. "This is about the next two years."

The pandemic is not a hurricane or a wildfire. It is not <u>comparable to Pearl Harbor or 9/11</u>. Such disasters are confined in time and space. The SARS-CoV-2 virus will linger through the year and across the world. "<u>Everyone wants to know when this will end</u>," said Devi Sridhar, a public-health expert at the University of Edinburgh. "<u>That's not the right question</u>. The right question is: How do we continue?"

https://www.theatlantic.com/health/archive/2020/04/pandemic-summer-coronavirus-reopening-back-normal/609940/

How do we continue?



The good ole days Business as usual

https://en.wikipedia.org/wiki/Dentistry



The next 3-9 months?

https://rarehistoricalphotos.com/london-milkman-1940/

The new normal...



https://www.washingtonpost.com/lifestyle/wellness/dentists-coronavirus-emergency-care/2020/04/12/2db75730-7a91-11ea-b6ff-597f170df8f8_story.html

What is Teledentistry?

Literature: Diagnostic Accuracy

Accuracy of Teledentistry for Diagnosing Dental Pathology Using Direct Examination as a Gold Standard: Results of the Tel-e-dent Study of Older Adults Living in Nursing Homes.

- Study of 235 patients in eight nursing homes in France and Germany
- Patients received a teledentistry exam and the same surgeon performed a clinical exam within 7 days
- 55.4% of patients had dental pathology
- 93.8% sensitivity with only 6 (4.8%) false positives
- Teledentistry was also faster at 12 minutes compared to 20 minutes for a face-to-face exam

Queyroux A, Saricassapian B, Herzog D, Müller K, Herafa I, Ducoux D, Marin B, Dantoine T, Preux PM, Tchalla A. <u>Accuracy of Teledentistry for Diagnosing Dental Pathology Using Direct Examination as a Gold Standard: Results of the Tel-e-dent Study of Older Adults Living in Nursing Homes.</u> J Am Med Dir Assoc. 2017 Jun 1;18(6):528-532. doi: 10.1016/j.jamda.2016.12.082. Epub 2017 Feb 22. PubMed PMID: 28236609.

Literature: Access to Care

Using Teledentistry to Improve access to Dental Care for the Underserved

- A teledentistry network was set up to link the University of Minnesota to dentists and patients in rural areas
- Specialty consultations for oral diagnosis/pathology
- 94% of visits, the providers were confident about providing adequate diagnosis
- High patient satisfaction that teledentistry is a "wonderful service to provide patients of rural areas"

Table 1 Comparison between teledentistry visits and regular office visits			
Distance Traveled and Time Spent by Patient	Teledentistry Clinic	University of Minnesota School of Dentistry Specialty Clinic	
Travel distance to clinic (average, one-way, in miles)	12.6	230.3	
Time missing from work/school (average, in hours)	1.6	18.3	

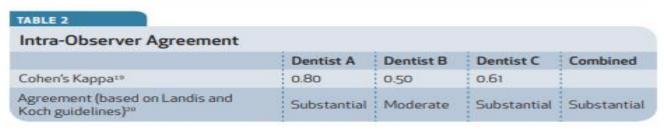


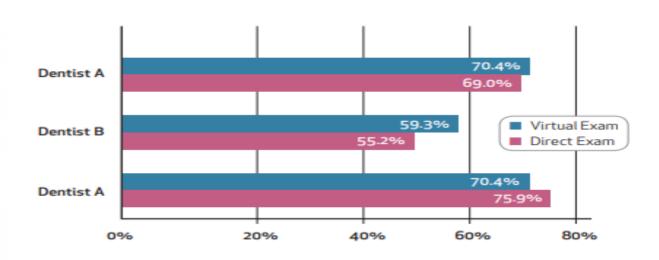
Literature: Comparing Outcomes

In-person versus "virtual" dental examination: congruence between decision-making modalities.

- Study of 29 patients had both an in person and virtual exams performed by three dentists
- A total of 162 virtual exams were performed
- Dentists determined which patients could receive follow up care on site versus referral to a dentist in clinic

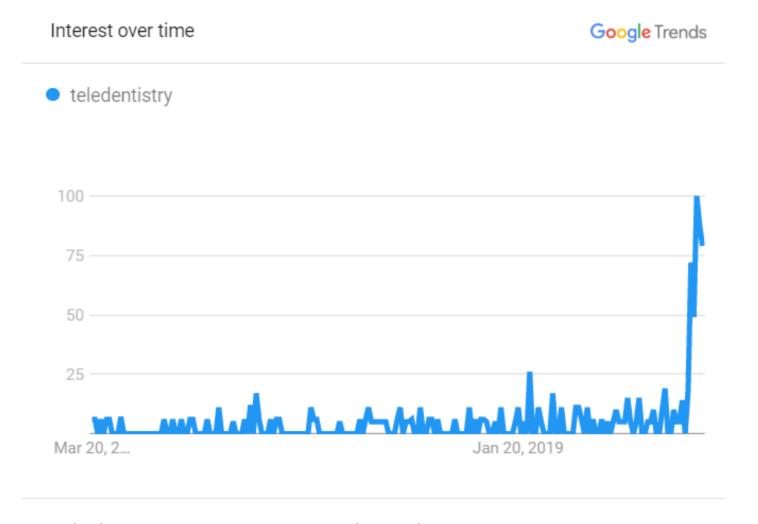
Virtual Examination Agreement With In-P (Virtual Case Count)	erson Exam	ination	
	Dentist A	Dentist B	Dentist C
Both virtual examinations agree with in-person examination	22	19	19
One virtual examination agrees with in-person examination	2	6	4
Neither virtual examination agrees with in-person examination	1	0	2

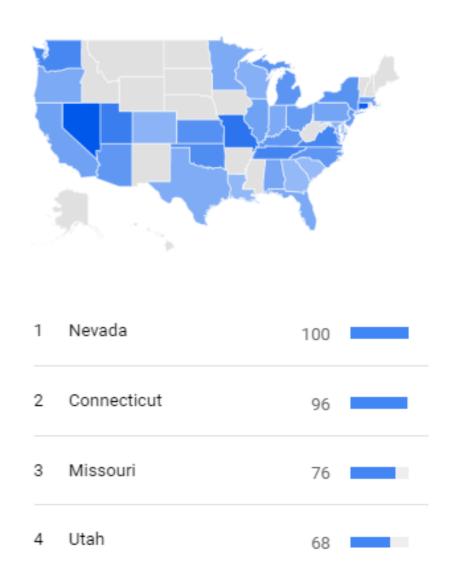




Teledentistry+COVID-19

Google Trends March 2016 - April 12, 2020





Applications of Teledentistry

App 1	Limited Evaluations and Triage	
App 2	COVID Urgent & Non-Urgent Exams	
App 3	Hygiene Only Coverage	
App 4	Satellite Office Coverage	
App 5	Specialist Consultations	
App 6	Outreach Application	
App 7	Medical-Dental Integration	
App 8	Patient Monitoring Devices	

Important Terms

Legal Definitions - may vary by state

- Originating site (location of patient) The physical location of the patient. This is where diagnostic data is collected in order to communicate to the dentist for diagnosis.
- Distant site (location of dentist) The physical location of the dentist or authorized dental provider providing the dental service to an eligible Medicaid client through Teledentistry.
- Presenter (Patient Presenter): An individual with a clinical background (e.g., LPN, RN, etc) trained in the use of telehealth equipment who must be available at the originating site to "present" the patient, manage the cameras and perform any "hands-on" activities to complete the tele-exam successfully. In certain cases, a licensed practitioner such as an RN or LPN might not be necessary, and a non-licensed provider such as support staff, could provide tele-presenting functions. Requirements (legal) for presenter qualifications differ by location and should be followed.

https://thesource.americantelemed.org/resources/telemedicine-glossary

Synchronous

- Live and simultaneous
- Uses video conferencing
- ADA CDT: Adjunctive D9995



- Store and Forward
- Completed at a separate place or time.
- ADA CDT: Adjunctive D9996

Policy and Regulatory

ADA Resources

- Provider Guide
- Technology Resources
- Clinical Note Documentation
- Recorded CE Webinar

Helping Dental Providers Maintain Services and Contact with Patients Using Optimized Systems During the time of COVID-19 Physical Distancing: March 26, 2020

Virtual Visits / Teledentistry Documentation Recommendations March 25, 2020

Prepared by:

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Background

Teledentistry Resources

March 25, 2020

The following is a list of some teledentistry product or resources that providers could use to

of companies and services. Inclusion of a product or service does not constitute an

Most states and many insurers require some form of consent. Written consent is always preferred. In some cases a verbal consent is the only method of consent possible. This

ggested language e in the jurisdiction

my dentist. In the provide teledentistry consultations for their patients. Please note that this is not a complete list photographs or other letailed information endorsement. This is only a sample listing of products and resources. Readers of this document are advised to investigate products they are interested in and make their own decisions about that is life I am responsible for al insurance plan. In

This is a sample listing of teledentistry platforms. There are many companies that offer services

where the company team will bring equipment to a business and do care at those locations, or provide call-center like services where the company dentist will review records and make a referral. These are not included here. As above, readers of this document are advised to investigate products they are interested in and make their own decisions about which products

Virtual Dental Care - www.virtualdentalcare.com/ Company: Teledentix - full featured teledentistry software

Teledentix Communicator - Optimized for physical distancing environment

Mouthwatch - www.mouthwatch.com/ Company: Teledent - full featured teledentistry software Product:

Company: Oral Eye - www.oraleye.com/ Product: Oral Eye - dental consultation system

Dentulu - www.dentulu.com/ Company:

which products or services to use.

Teledentistry Platforms

or services to use.

Dentulu - full feature teledentistry software

Other Communication Platforms

nd strict physical distancing, nges keeping in touch with nd emergency services. There is natients and providers in these

if patients are not able to may be going to already ems. It is dearly critical that

Engagement and his staff at dicine (CDM) have extensive eople who might otherwise en used in these systems needs viders and practices to use in

plemented quickly and can I providers and dental iage leading to efficient

atient Home

ually a hygienist or

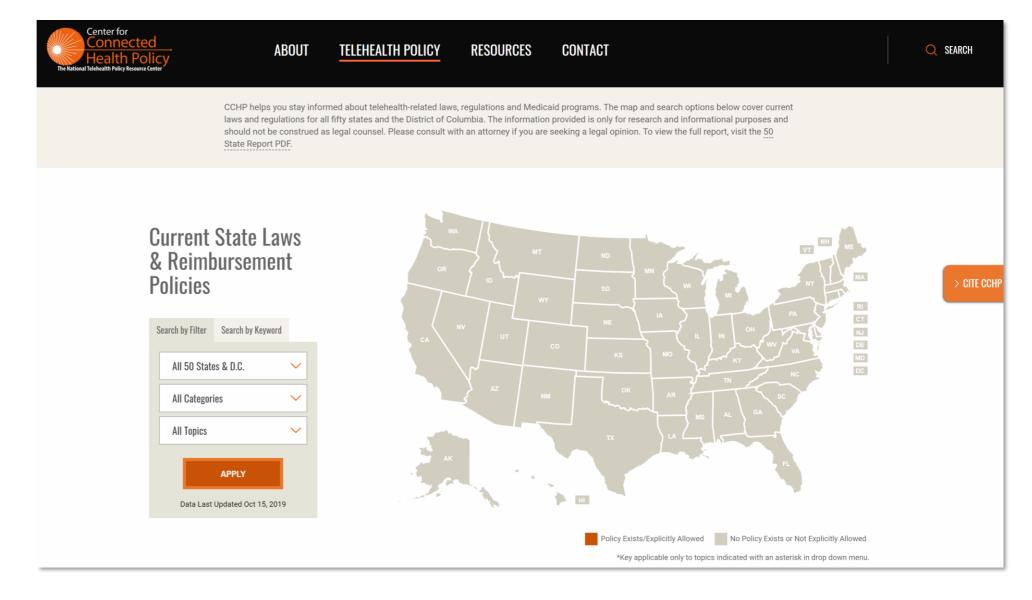
s is not listed in the

State Rules Vary

Statement issued by the American Dental Association

- Several states have laws or regulations that specifically define, establish and authorize the practice of "teledentistry"
- The ADA supports teledentistry laws, rules, and guidelines that provide patient protections by requiring high levels of care through the use of specialized teledentistry technology
- COVID-19 has created an unprecedented national health care crisis that has prompted many states to encourage or broaden the use of telecommunications modalities (e.g., smartphones, FaceTime, Skype, Zoom, etc.) to prevent transmission of the virus and ease the burden on hospitals and emergency rooms
- Due to these evolving needs, information on virtual consultations and evaluations mandates, recommendations and guidelines that have been issued by the states are constantly changing
- We encourage all dentists looking for information on providing dental consultations or evaluations using telehealth during this time to check with their state dental boards, dental societies, governors' offices and departments of health for guidance

Telehealth Resources



Center for Connected Health Policy. State Telehealth Laws. Fall 2019. https://www.cchpca.org/sites/default/files/2019-10/50%20State%20Telehalth%20Laws%20and%20Reibmursement%20Policies%20Report%20Fall%202019%20FINAL.pdf

HIPAA Compliance

Temporary ease in enforcement!

Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency

We are <u>empowering</u> medical providers to <u>serve patients wherever they are</u> during this national public health emergency. We are especially concerned about reaching those most at risk, including older persons and persons with disabilities.

- Roger Severino, OCR Director

OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care <u>providers in connection with the good faith provision of telehealth</u> during the COVID-19 nationwide public health emergency.

https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html

ADA COVID-19 Coding and Billing Interim Guidance

The ADA has compiled a document that goes into great detail on how to bill for teledentistry during the COVID-19 pandemic.

Updated frequently @ ADA.org/virus

COVID-19 Coding and Billing Interim Guidance

ADA.

This is evolving guidance and will be modified as more information becomes available. Please check back frequently.

VERSION: March 25, 2020

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HIPAA & Telecommunication Technology	ļ
Virtual Services During the COVID-19 Pandemic: Practice Considerations Checklist (NEW)	į
Informed Consent Forms: Sample Language For Virtual Services (NEW)	ī
Billing (New Pavers Added).	ī

The American Dental Association (ADA) recognizes the unprecedented and extraordinary circumstances dentists and their patients face. Our guiding principles are to mitigate transmission while also supporting emergency care for patients so as to help prevent overwhelming hospital emergency departments over the next three weeks. Under these circumstances, while some services will continue to be performed in dental offices, the ADA recognizes that patients would be best served when telecommunication technology can be leveraged to support dental care.

The ADA had previously disseminated guidance on use of the teledentistry codes. (D9995 and D9996 – ADA Guide to Understanding and Documenting Teledentistry Events). The following guide is intended to help dental offices navigate issues related to coding and billing for virtual appointments during the current COVID-19 pandemic.

Coding

For services rendered in a dental office:

If you see a patient during the current COVID-19 quarantine environment the services you render in the office should be coded and billed per your current office routines.

For services rendered using telecommunication technology:

If you are providing care using telecommunication technology to triage patients or offer an evaluation to determine if the situation is urgent or emergent, then the following CDT codes can be used to document and report the services in the patient's record and to a third party payer.

Oral Evaluations:

D0140 limited oral evaluation – problem focused

An evaluation limited to a specific oral health problem or complaint. This may require interpretation of information acquired through additional diagnostic procedures. Report additional

25

Informed Consent

Sample language from ADA

COVID-19 Coding and Billing Interim Guidance

AD/

Informed Consent Forms: Sample Language For Virtual Services (NEW)

Our dental office [OR: NAME OF DENTAL PRACTICE] will be using [NAME OF REMOTE COMMUNICATION APPLICATION(S)] remote communication technology to conduct problem-focused evaluations/re-evaluations virtually, to help manage your oral health problem and to determine whether you have a condition that requires immediate in-office treatment.

During the current pandemic the federal government announced that it will not enforce HIPAA regulations (privacy for health records) in connection with medical and dental offices' good faith provision of medical or dental services using non-public facing audio or video remote communications services. Remote patient consultations may take place over applications that allow video chats such as Apple Face Time, Facebook Messenger video chat, Google Hangouts, or Skype and may involve or be based on photos or videos taken with smart phones by the patient and transmitted to the dental office. Please do not contact us using public-facing services such as Facebook Live, Twitch, or TikTok, which are not permitted by the federal government for this purpose.

As always, our office will take dental record confidentiality very seriously, and will do what we can under the circumstances to protect the information you send us. While we believe the risk to such confidentiality is not high, it may be greater than it would be if these remote electronic communications were encrypted, which is one of the main HIPAA requirement that is being relaxed during the nationwide COVID-19 public health emergency.

Certain major dental plans have announced that they will reimburse dental offices for conducting such remote evaluations, and we will submit claims in connection with them.

Our dental office is using one or more of the permitted modalities listed above for remote transmission of information to conduct limited problem focused evaluations. While entirely adequate in the vast majority of cases for such limited purposes, these evaluations may not reveal conditions that would be discovered during an office visit or through the use of specialized teledentistry technology.

Please indicate your understanding of and informed consent to these terms, which will be in effect until the government rescinds its suspension of these HIPAA requirements, by typing your name in the space provided and return via email to this office.

Case Notes

Originating Site: Where the patient is located (you can indicate that "Patient Home Address")

- In traditional teledentistry this is the office, a school, nursing home, etc.
- Patient Presenter: Patient (Traditional teledentistry this is usually a hygienist or EFDA)

Distant Site: Where the provider is located

- "Provider's Home" if working from home so you r home address is not listed in the patient's chart
- List office address if working from the office
- Provider: Your note signature should suffice for this

Case Notes Continued

Methodology: This describes for the record the way you are communicating with the patient.

- Synchronous (Live Interactive) if using a video conferencing system
- Asynchronous (Store and Forward) if using a messaging system
- Describe the technology that was used
 - Zoom, Google Hangout, FaceTime, Teledent, etc.
 - Google Voice, Facebook Messenger, e-mail, etc.
- ➤ COVID-19 Screening questions should be also incorporated into the note
- Chief Complaint, Signs, Symptoms, and plan as usual
- Care Coordination Be sure to detail what the next steps are for the patient.
 - Immediate in-office urgent care
 - Referrals to specialist
 - Pharmacy
 - Wait list

Limited Evaluations and Triage



Applications of Teledentistry

App 1	Limited Evaluations and Triage	
App 2	COVID Urgent & Non-Urgent Exams	
App 3	Hygiene Only Coverage	
Арр 4	Satellite Office Coverage	
App 5	Specialist Consultations	
App 6	Outreach Application	
App 7	Medical-Dental Integration	
App 8	Patient Monitoring Devices	

What Constitutes a Dental Emergency?

The ADA recognizes that state governments and state dental associations may be best positioned to recommend to the dentists in their regions the amount of time to keep their offices dosed to all but emergency care. This is fluid situation and those closest to the issue may best understand the local challenges being faced.

DENTAL EMERGENCY

This quidance may change as the COVID-19 pandemic progresses. Dentists should use their professional judgment in determining a patient's need for urgent or emergency care.

Dental emergencies are potentially life threatening and require immediate treatment to stop ongoing tissue bleeding, alleviate severe pain or infection, and include:

- Uncontrolled bleeding
- Cellulitis or a diffuse soft tissue bacterial infection with intra-oral or extra-oral swelling that potentially compromise the patient's airway
- Trauma involving facial bones, potentially compromising the patient's airway

Urgent dental care focuses on the management of conditions that require immediate attention to relieve severe pain and/or risk of infection and to alleviate the burden on hospital emergency departments. These should be treated as minimally invasively as possible.

- Severe dental pain from pulpal inflammation
- · Pericoronitis or third-molar pain
- Surgical post-operative osteitis, dry socket dressing changes
- Abscess, or localized bacterial infection resulting in localized pain and swelling
- Tooth fracture resulting in pain or causing soft tissue trauma
- Dental trauma with avulsion/luxation
- Dental treatment required prior to critical medical procedures
- Final crown/bridge cementation if the temporary restoration is lost, broken or causing gingival irritation
- Biopsy of abnormal tissue

Other urgent dental care:

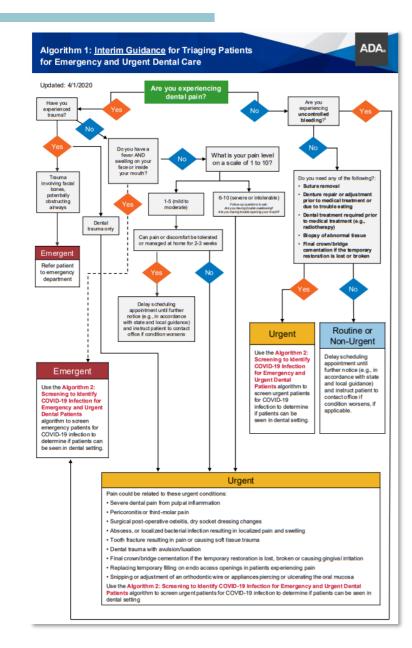
- Extensive dental caries or defective restorations causing pain
 - Manage with interim restorative techniques when possible (silver diamine fluoride, glass ionomers)
- Suture removal
- Denture adjustment on radiation/ oncology patients
- Denture adjustments or repairs when function impeded
- Replacing temporary filling on endo access openings in patients experiencing pain
- Snipping or adjustment of an orthodontic wire or appliances piercing or ulcerating the oral mucosa

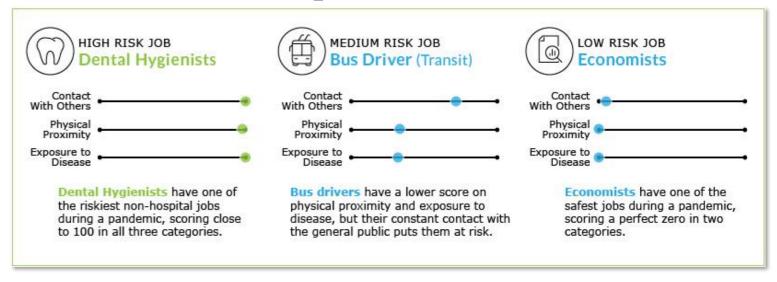
DENTAL NON EMERGENCY PROCEDURES

Routine or non-urgent dental procedures includes but are not limited to:

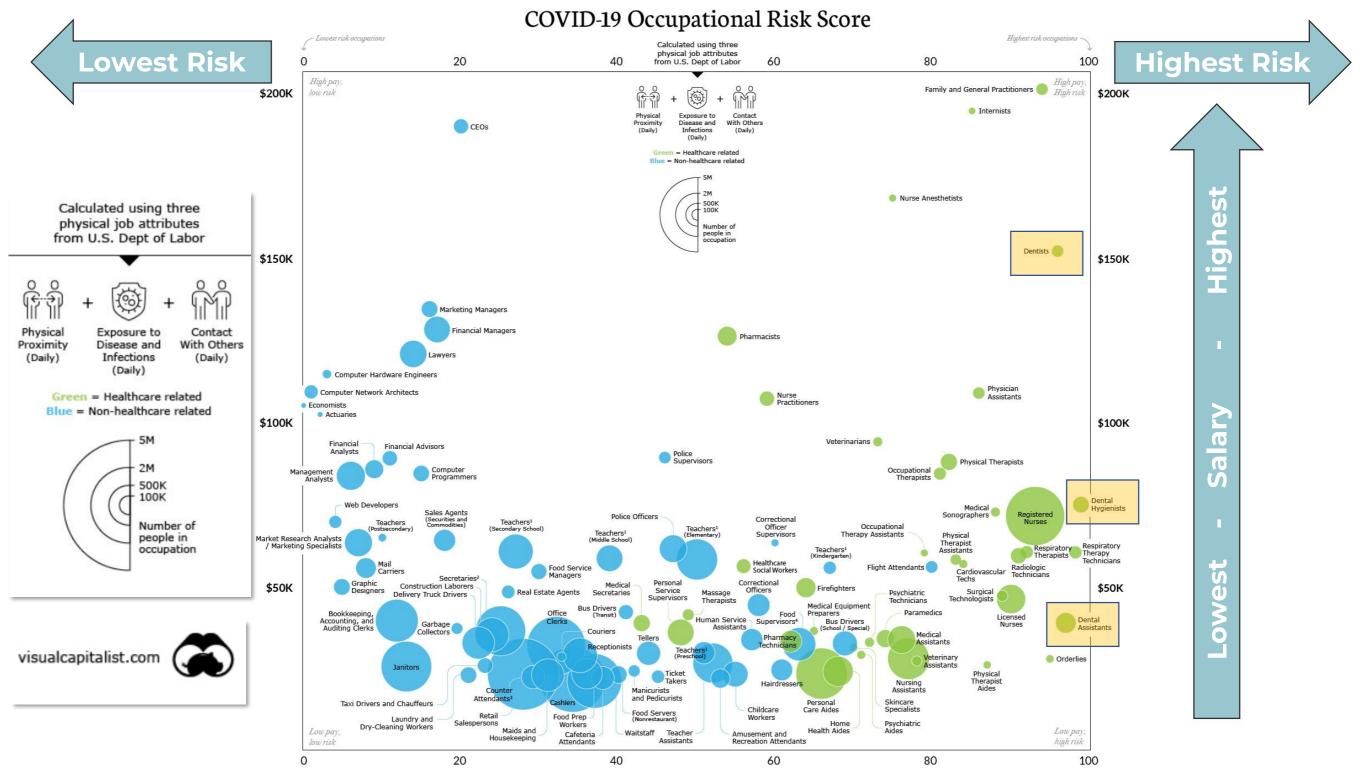
- · Initial or periodic oral examinations and recall visits, including routine radiographs
- · Routine dental cleaning and preventive therapies
- Orthodontic procedures other than those to address acute issues (e.g. pain, infection, trauma)
- · Extraction of asymptomatic teeth
- Restorative dentistry including treatment of asymptomatic carious lesions
- Aesthetic dental procedures

Interim Guidance & Risk of Exposure



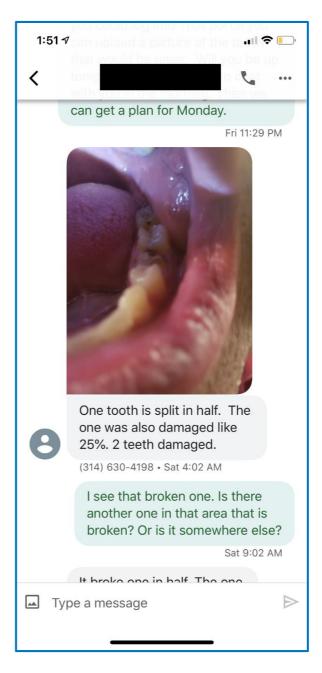


Occupation		\$	COVID-19 Risk Score
Dental Hygienists			99.7
Respiratory Therapy Technicians			95
Sports Medicine Physicians			94.6
Dental Assistants			92.5
Radiation Therapists			92.4
Oral and Maxillofacial Surgeons			92.3
Dentists, General			92.1
Obstetricians and Gynecologists			91.8
Dermatologists	visualcapitalist.com		91.1
Orderlies (Patient Care Assistants)			90.2



How I handled my first week in quarantine:

Store and Forward



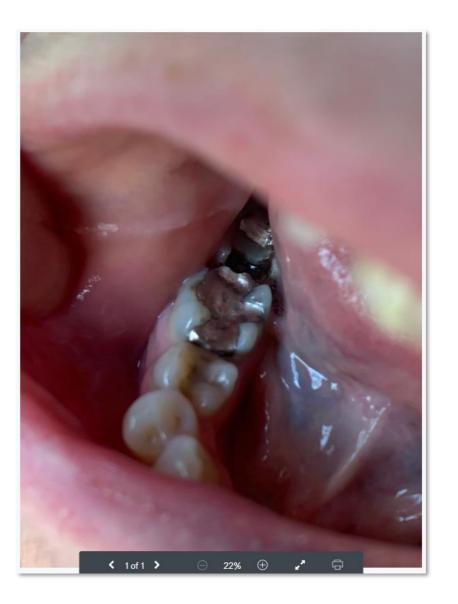
Google Voice



Facebook Messenger

Limited Evaluation Teledentistry

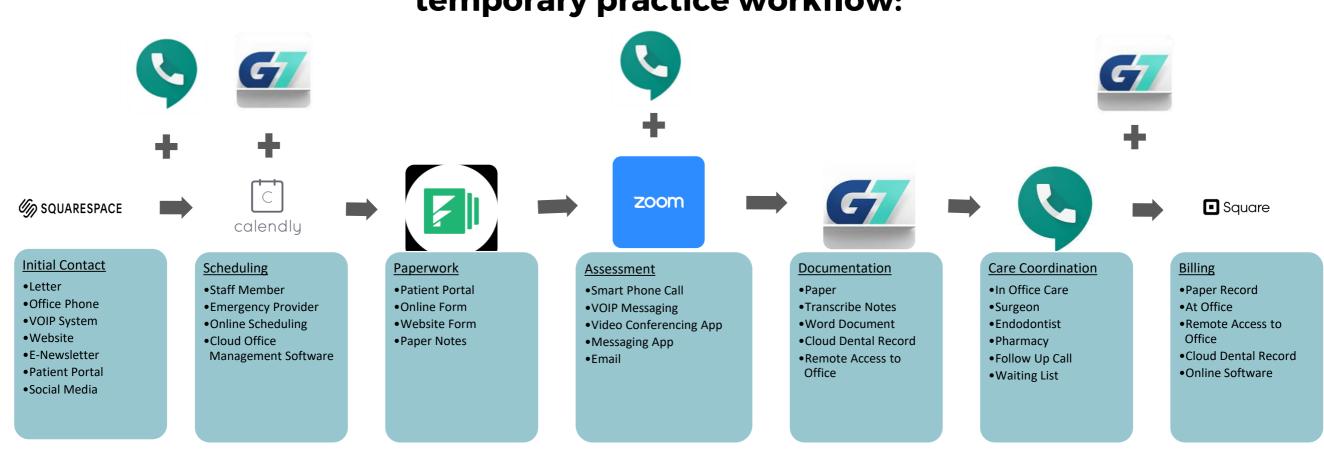
	Do you have dental problems now?:	Yes
	If yes, please describe.:	Lost filling. Pain. Food lodged in cavity
	Upload an image of problem area:	View File
	What best describes you pain?:	3
	Are your teeth sensitive to::	Hot or Cold? = No Sweets? = No Biting or chewing? = No Have you noticed mouth odors or bad taste? = No Have you noticed any swelling, blisters, or any other oral lesions? = No Do your gums bleed or hurt? = No Does your tooth pain keep you up at night? = No Have you noticed any loose teeth or change in your bite? = No



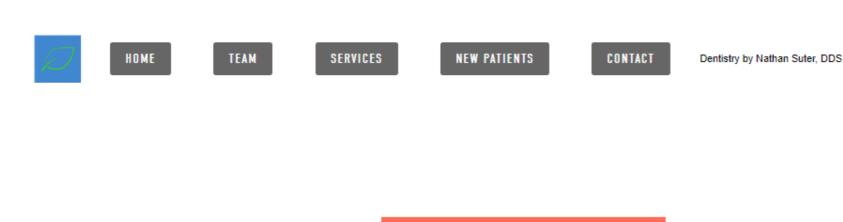


Workflows: Moderate Cost, High Tech

This workflow has evolved quickly. This illustrates my temporary practice workflow:



Website Integration



Green Leaf

Dental Care

SCHEDULE TELEDENTISTRY EXAM

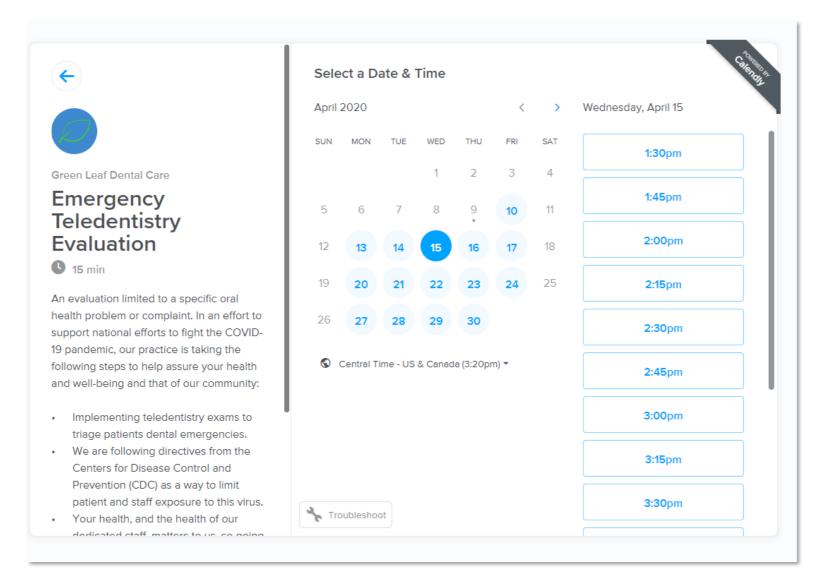
Online Teledentistry Available

SEARCH

We offer online dental visits to help assess your dental emergencies during the coronavirus outbreak. People are urged to stay at home in order to not spread the disease. If you have a dental emergency it is advised that you remain at home until a dentist can assess if it treatment needed now or if it can wait. We can provide triage for any person regardless of your location. Our staff will assist in referring you to the nearest dental office if you do need to be seen during quarantine restrictions.

Online Scheduling

If you don't have online scheduling, you need one.



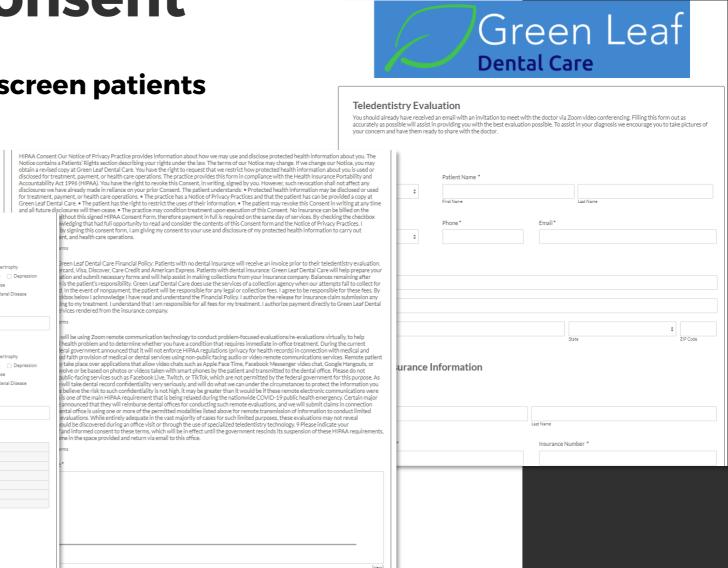
Health History & Consent

Consider an electronic form system to screen patients and gain updated information.

Have you recently traveled to any of the following countries? (China, Iran, Italy, Japan, South Korea) *

Have you been told by a public health official that you may have been exposed to coronavirus (Covid-19)? *

Have you been in contact with someone who has traveled to these countries? (China, Iran, Italy, Japan, South Korea)



		Medical History				obtain a revise disclosed for t Accountability disclosures we for treatment, Green Leaf De	of a Patients Rights securities of thing your rights thinke the late. The terrison of Notice rings (change to Monte) read of only at Creen Late Therita Care. You have the right to request that we restrict how protected health information about you is used or reatment, payment, or health care operations. The practice provides this form in compliance with the Health insurance Portability and Act 1396 (HiPAA). You have the right to revoke this Consent, in writing, signed by you, thoever, such revocation shall not affect any have already made in reliance on your prior Consent. The patient understands: *Protected health information may be disclosed or use payment, or health care operation. *The practice has a Notice of Privacy Practices and that the patient has can be provided a copy at ental Care. *The patient has the right to restrict the uses of their information. *The patient may revoke this Consent in writing at any time disclosures will then case. *The practice may condition treatment upon execution of this Consent. No insurance can be billed on the without this signed HiPAA Consent Form, therefore payment in full is required on the same day of services. By checking the checklong wideling that had full opportunity to read and consider the contents of this Consent form and the Notice of Privacy Practices. I by signing this consent form, I am giving my consent to your use and disclosure of my protected health information to carry out ent, and health care operations.		
pload an image of problem area "		☐ GERD (Reflux) ☐ Hepatitis C ☐ Hyperlipidemia ☐ Hypertension ☐ Irritable Bowel Disease				reen Leaf Dental Care Financial Policy: Patients with no dental insurance will receive an invoice prior to their teledentistry evaluation. recard, Visa, Discover, Care Credit and American Express. Patients with dental insurance: Green Leaf Dental Care will help prepare your ation and submit necessary forms and will help assist in making collections from your insurance company, Balances remaining after is the patient's responsibility. Green Leaf Dental Care does use the services of a collection agency when our attempts fail to collect for in the event of nonpayment the patient will be responsible for any leasl or collection fees. Jares to be responsible for any leasl or collection fees.			
No File Chosen that best describes you pain?* 0			hes Myocardial Infarction Osteoarthritis Osteoporosis Peptic Ulcer Disease Renal Disease see			Disease	a. In the event or nonpayment, the patient will be responsible for any legal or collection fees, largete to be reponsible for these teas. On those looks advantaged that have read and understand the Financial Policy, I subtrict the release for insurance claimsision any ing to my treatment. I understand that I am responsible for all fees for my treatment. I authorize payment directly to Green Leaf Dental strices rendered from the insurance company. Imms		
Being no pain and 10 being very painful	,, 0, 0, 0,								
re your teeth sensitive to: *	Yes	No					will be using Zoom remote communication technology to conduct problem-focused evaluations/re-valuations virtually, to help the alth problem and to determine whether you have a condition that requires immediate in-office treatment. During the current leral government announced that it will not enforce HIPAA regulations (privacy for health records) in connection with medical and		
Hot or Cold?	0		Angina	Anxiety Arthritis Asthma Atrial Fibri	llation 🔲 Benign Prostatic Hypertro	phy	od faith provision of medical or dental services using non-public facing audio or video remote communications services. Remote patient		
Sweets?			GERD (Reflux) Hepatitis C Hyperlipidemia Hypertension Inritable Bowel Disease bubblic-facing: hes Myocardial Infarction Osteoarthritis Osteoporosis Peptic Ulcer-Disease Renal Disease twill take dente to be believe the:			Depression	It take place over applications that allow video chats such as Apple Face Time. Facebook Messenger video chat, Coogle Hangouts, or volve or be based on photos or videos taken with smart phones by the patient and transmitted to the dental office. Please do not sublic-facing services such as Facebook Live, Twitch, or TikTok, which are not permitted by the federal government for this purpose. As vilil take dental record confidentiality very seriously, and will do what we can under the circumstances to protect the invariance you a believe the risk to such confidentiality is not high, it may be greater than it would be if these remote electronic communications were list one of the main HIPMA requirement that is being relaxed during the nationwide COVID-19 public health emergency. Certain major		
Biting or chewing?									
Have you noticed mouth odors or bad taste?						Disease			
Have you noticed any swelling, blisters, or any other oral lesions?									
Do your gums bleed or hurt?			annunced that they will reimburse detail offices for conducting such remote evaluations, and we will sufficie dains in connection entail office is using one or more of the permitted modalities listed above for remote avaluations, and we will sufficie dains in connection entail office is using one or more of the permitted modalities listed above for remote transmission of information to conduct limited evaluations, and they are used to the sufficiency of the control of the permitted modalities listed above for remote shee evaluations may not reveal the valuation that they are used to the vast majority of cases for such limited oursposes, these evaluations may not reveal						
Does your tooth pain keep you up at night?									
Have you noticed any loose teeth or change in your bite?							evaluations. While entirely adequate in the vast majority or cases for such limited purposes, these evaluations may not reveal would be discovered during an office visit or through the use of specialized teledentistry technology. 9 Please indicate your		
o you:*							and informed consent to these terms, which will be in effect until the government rescinds its suspension of these HIPAA requirements me in the space provided and return via email to this office.		
	Yes	No		Yes	No		erms		
Clinch or grind your teeth?			odontic treatment?						
Bite your lips or cheeks regularly?			Oral surgery?				*		
Hold foreign objects with your teeth (pencils, pipe, pins, nails, finzernails)?			odontal treatment?						
Mouth breathe while awake or asleep?			r the bite adjusted?						
A bite plate or mouth guard?			te or mouth guard?						
A serious injury to the mouth?			jury to the mouth?						
Smoke/chew tobacco or use other tobacco products?			its or prescriptio	n medication?*					
there anything you'd like to bring to the doctor's a	attention?		ications.	THEOLOGIC.					
			ental treatment?						
		li di	gies?*				per to draw your signature above		
COVID-19									

Instructions for use

Your health history and patient information form was recieved!

Before your appointment please review these Zoom instructional videos.

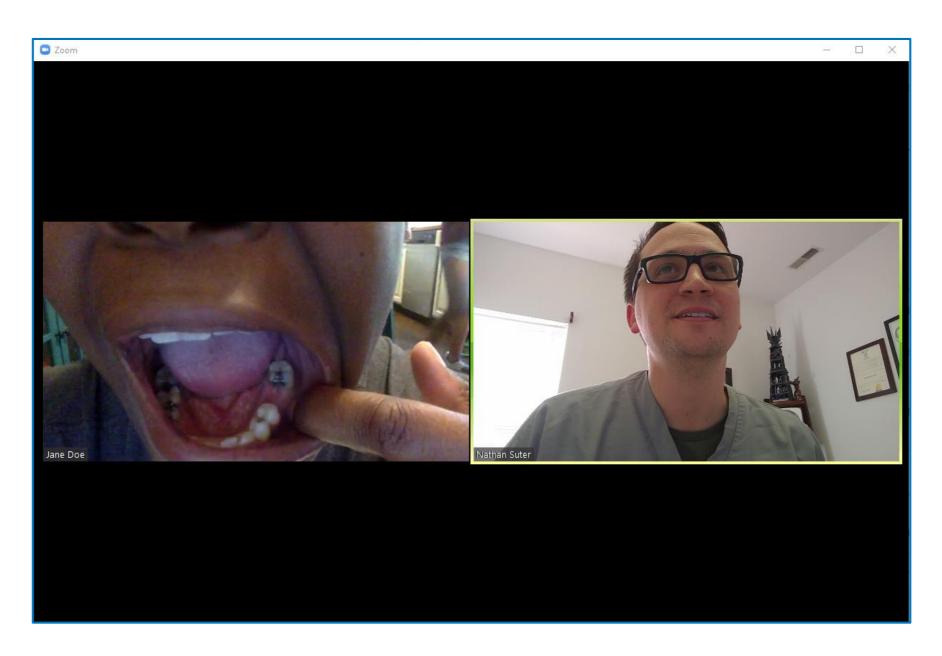
If you are having a medical emergency that cannot wait call 911 immediately.

If you are experiencing any issues connecting or would like to reach us sooner please call the office line and leave a message at 636-671-0102.

Video instructions - How to join a Zoom teledentistry visit from your computer.



Zoom Consultation



Recap for todays technology environment

- 1. Traditional EDR that have teledentistry features
 - This is not an option at the moment
 - Some EDRs have add-ons that can fill some gaps

2. "Optimized" Teledentistry Platforms:

- Teledentistry software platforms that can address multiple steps of a teledentistry evaluation
- 3. Alternatives: Re-purposing available tools
 - Email and text + patient generated photographs
 - Off-the shelf/low-cost/free separate tools:
 - scheduling/video/forms/payment
 - Copy and paste all activity into one record or into EDR

COVID Urgent & Non Urgent Exams

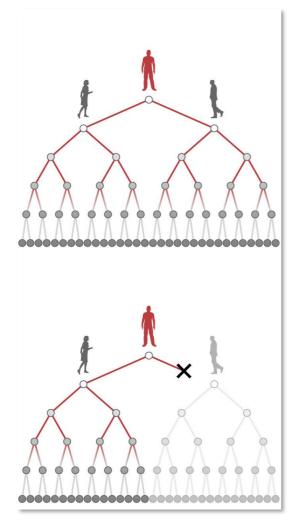
Applications of Teledentistry

App 1	Limited Evaluations and Triage
App 2	COVID Urgent & Non-Urgent Exams
App 3	Hygiene Only Coverage
Арр 4	Satellite Office Coverage
App 5	Specialist Consultations
App 6	Outreach Application
App 7	Medical-Dental Integration
App 8	Patient Monitoring Devices

Using Teledentistry to Mitigate Risk

- Reduce human-human contact
- Have patients stay outside the office
- You may not be able to don/doff your PPE for hygiene checks
- The dentist may be exposed or infected after re-opening
 - This would mean quarantine for an additional 14 days
- Consider separating into teams
 - Diagnostic Team
 - Hygienist and support team
 - Assessments and Radiographs
 - One day COVID on demand testing
 - Treatment Team
 - Dentist and dental assistant
 - Urgent care only initially
 - Prioritize and screen who you treat

OSHA Guidance on Preparing Workplaces



https://www.nytimes.com/2020/03/19/health/coronavirus-distancing-transmission.html

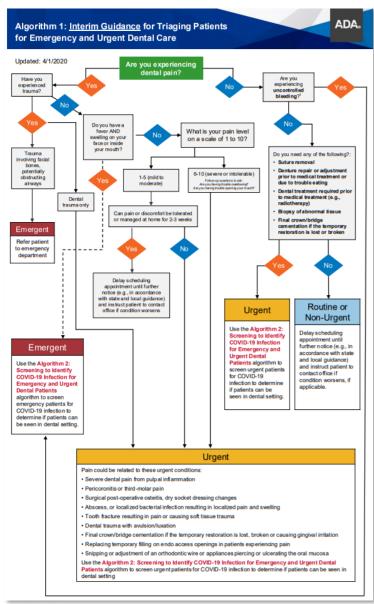
Administrative Controls

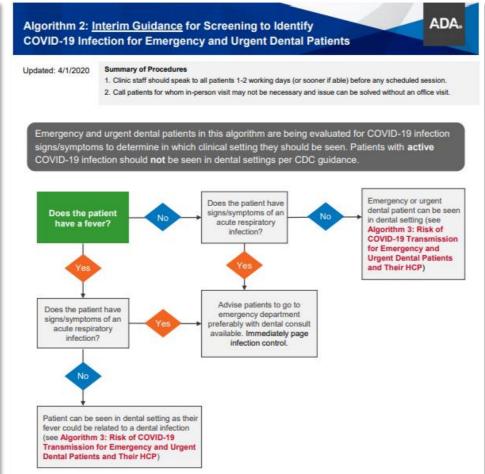
Administrative controls require action by the worker or employer. Typically, administrative controls are changes in work policy or procedures to reduce or minimize exposure to a hazard. Examples of administrative controls for SARS-CoV-2 include:

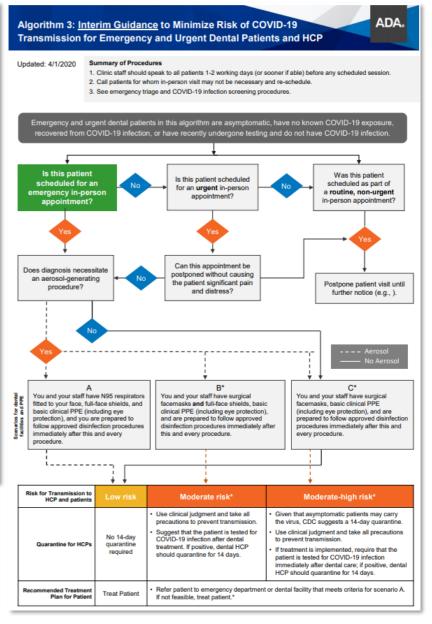
- Encouraging sick workers to stay at home.
- Minimizing contact among workers, clients, and customers by replacing face-to-face meetings with virtual communications and implementing telework if feasible.
- Establishing alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain distance from one another while maintaining a full onsite work week.
- Discontinuing nonessential travel to locations with ongoing COVID-19 outbreaks. Regularly check CDC travel warning levels at: www.cdc.gov/coronavirus/2019-ncov/travelers.
- Developing emergency communications plans, including a forum for answering workers' concerns and internet-based communications, if feasible.
- Providing workers with up-to-date education and training on COVID-19 risk factors and protective behaviors (e.g., cough etiquette and care of PPE).
- Training workers who need to use protecting clothing and equipment how to put it on, use/wear it, and take it off correctly, including in the context of their current and potential duties. Training material should be easy to understand and available in the appropriate language and literacy level for all workers.

https://www.osha.gov/Publications/OSHA3990.pdf

ADA Interim Guidance for Triage

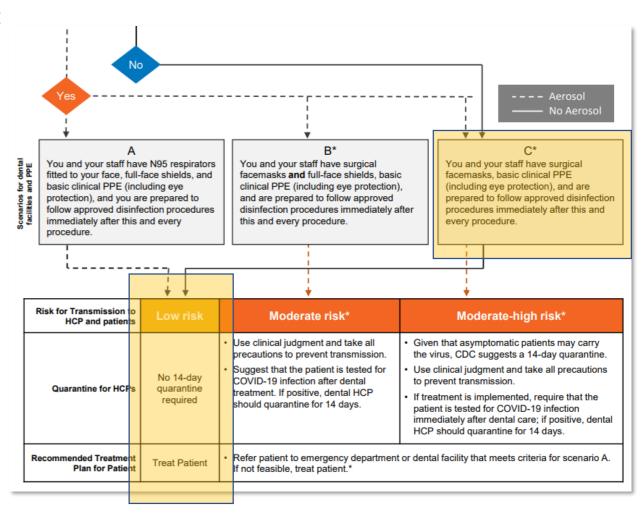






ADA Interim Guidance + Teledentistry

- Safely engage with potential new patients that are not sure that it is safe to come to the dentist
- Emergencies only and delayed treatment.
- Hygiene only days separate from treatment
 - Use teledentistry
 - No ultra-sonic scalers (temporarily)
 - Limits potential risk of exposure
 - Separate staff members
 - Separates treatment patients from hygiene
- Hygiene only days for satellite offices
 - Use teledentistry
 - Opens access when the dentists time will be in short supply



PPE Guidance - "Donning/Doffing"

- CDC has issued PPE guidance
- Aerosols pose the biggest risk
- Putting on and taking off PPE
- Removing PPE for Hygiene may not be feasible
- Teledentistry evaluations by hygienist
- Exams could be done at the end of the day.

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) **EXAMPLE 2**

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist

2. MASK OR RESPIRATOR

- · Secure ties or elastic bands at middle of head and neck
- · Fit flexible band to nose bridge
- . Fit snug to face and below chin
- Fit-check respirator

3. GOGGLES OR FACE SHIELD

· Place over face and eyes and adjust to fit



4. GLOVES

Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

ut contaminating your clothing, skin, or mucous membranes with potentially ing the patient room except a respirator, if worn. Remove the respirator after move PPE in the following sequence:



ased hand

ur body so with gloved

ide-out into

at the and gown

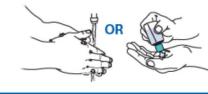












Tucson Medical Center Instructions

ACCESS TELEDENTISTRY'S FOUR PHASES APPROACH





1: Care Coordination



2: Data Collection



3: Examination



4: Follow Up



Traditional Teledentistry Tools









Extra-Oral Camera

Dine Digital

Intra-Oral Camera

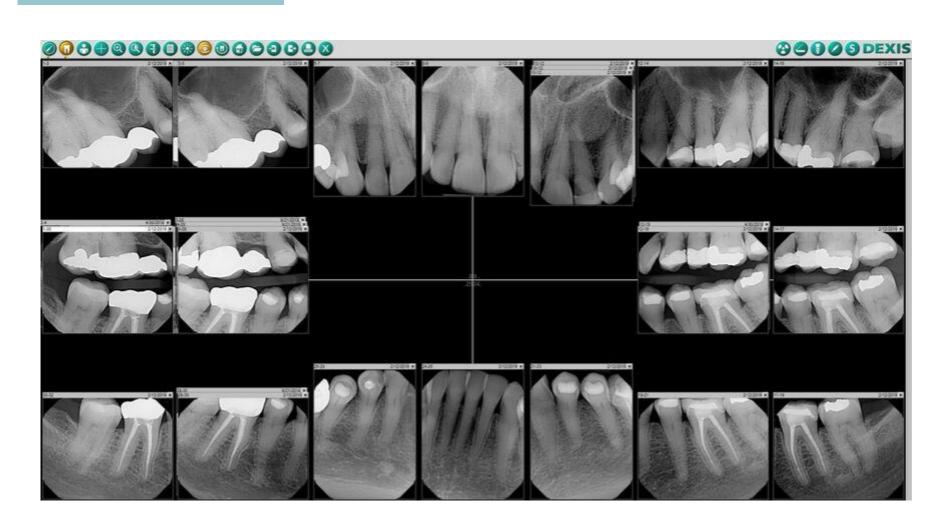
Mouth Watch **Cheek Retractors**

Generic

Intra-oral Mirrors

Generic

Traditional Teledentistry: Radiographs



Traditional Teledentistry: Extra-Oral Photographs



Traditional Teledentistry: Photographs (Intraoral)









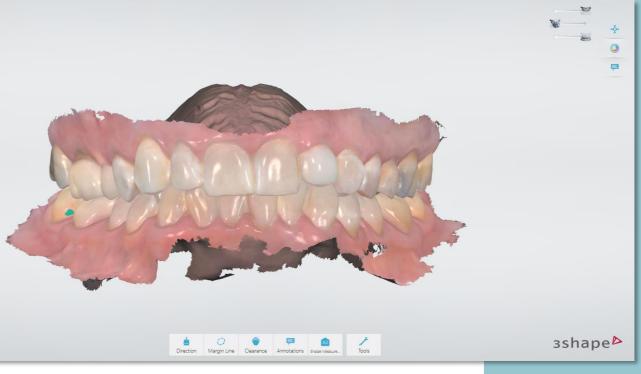
Traditional Teledentistry: Intra-oral Videos

- Quadrant Videos
- Curtesy of
 Dr. Scott Howell
 at ATSU ASDOH

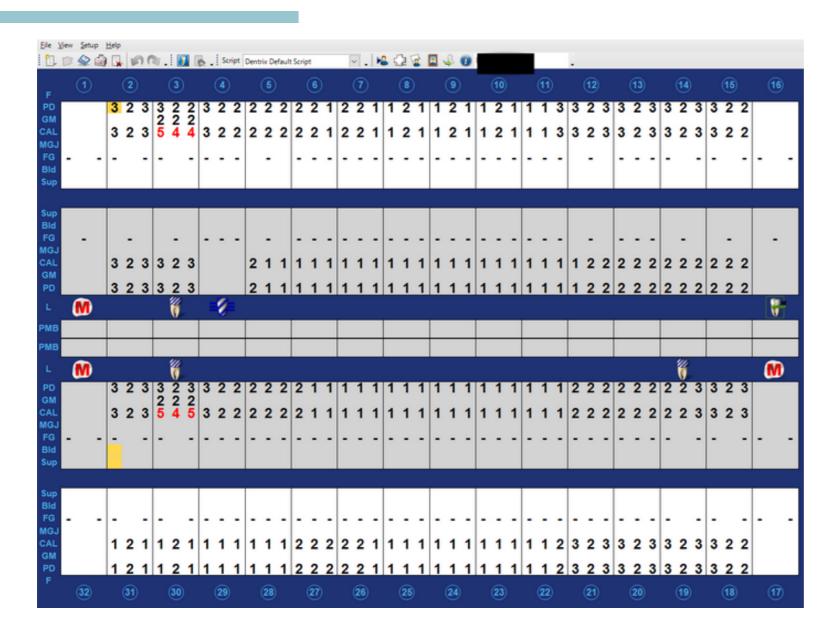


Traditional Teledentistry: Digital Scans

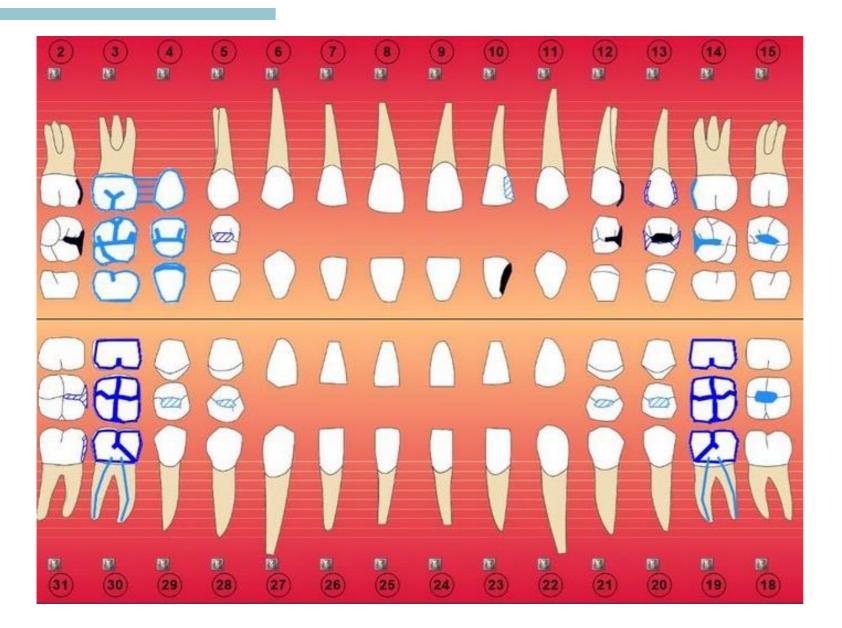




Traditional Teledentistry: Periodontal Chart



Traditional Teledentistry: Tooth Chart



The road ahead



Tangible Financial Impact

- Bill for Limited Evaluations during Stay-at-Home Orders
 - D0140
- Run a hygiene team separate from treatment team
 - Minimizes exposure and risk of infection
 - Periodic ** + Preventive + Radiographs
- Ramp up with extended hygiene hours
 - 2-4 months of recall that is backlogged
 - Keeping the dentist on treatment
 - Minimizes exposure and risk of infection
 - Periodic ** + Preventive + Radiographs

^{**}Some states or payors may not allow/pay for more than limited evaluations

Intangible Financial Impact

- Engage existing patients during Stay-at-Home
- Patients may be scared
- Find new patients
 - I have had more new than existing at my practice
- Limit Exposure and Risk
 - Messaging patients before and after appointments
 - Triage the treatment you choose
 - Fill consent forms before appointments
 - Accept payment before appointments
 - Keep the waiting room empty
- Increased Productivity
 - You can offer convenient hygiene hours
- Technology makes you "cutting edge"

Financial Assistance

- EIDL Small Business Loan Program
- USDA Telehealth Grants
- MTN Free Zoom Licenses
- (NEW) FCC COVID-19 Telehealth Program

FCC COVID-19 Telehealth Program

- Telecommunications Services and Broadband Connectivity Services: Voice services, and Internet connectivity services for health care provider or their patients.
- Information Services: Remote patient monitoring platforms and services; patient reported outcome platforms; store and forward services, such as asynchronous transfer of patient images and data for interpretation by a physician; platforms and services to provide synchronous video consultation.
- Internet Connected Devices/Equipment: tablets, smart phones, or connected devices to receive connected care services at home (e.g, broadband enabled blood pressure Federal Communications Commission DA 20-394 4 monitors; pulse-ox) for patient or health care provider use; telemedicine kiosks/carts for health care provider site.
- Purchases of items above by providers after March 13, 2020 in response to COVID-19 are eligible for this program

FCC COVID-19 Online Application

COVID-19 Telehealth Program

Purpose

The COVID-19 Telehealth Program will provide \$200 million in funding, appropriated by Congress as part of the Coronavirus Aid, Relief, and Economic Security (CARES) Act, to help health care providers provide connected care services to patients at their homes or mobile locations in response to the novel Coronavirus 2019 disease (COVID-19) pandemic. The Program will provide immediate support to eligible health care providers responding to the COVID-19 pandemic by fully funding their telecommunications services, information services, and devices necessary to provide critical connected care services until the program's funds have been expended or the COVID-19 pandemic has ended.

Note that the COVID-19 Telehealth Program is limited to **nonprofit and public eligible health care providers** that fall within the categories of health care providers in section 254(h)(7)(B) of the 1996 Act. For more information, see Question 8 of the FAQs.

Submit an Application

To improve the experience for applicants, an online application portal will make it easier to collect and submit the information necessary to evaluate your request. The Commission will review your request, may ask for additional information, and will issue a funding decision.

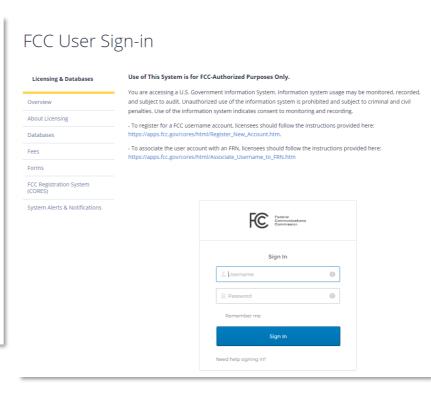
- Submit an Application Online -

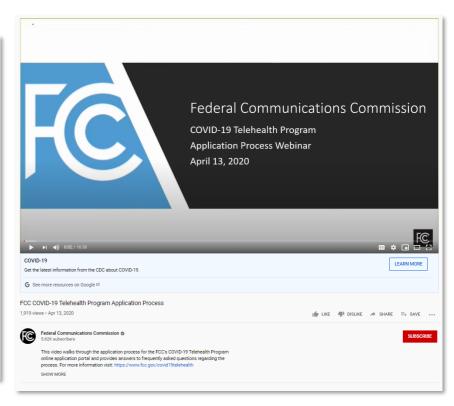
IF YOU HAVE ALREADY SUBMITTED A FILLABLE PDF APPLICATION, you DO NOT need to apply again. Your application is already under consideration and we will contact you if we need any additional information.

IF YOU HAVE ALREADY DOWNLOADED AND STARTED A FILLABLE PDF APPLICATION, you can still complete it and email it to the mailbox at TelehealthApplicationSupport@fcc.gov. We will consider your application and contact you if we need any additional information.

Tips for Navigating the Online Application:

- 1. Fully and accurately complete all fields on the form marked with an asterisk (*). These fields are required and you must answer them for your application to be complete. Required fields are also noted in the instructions.
- To answer questions that require a more detailed response, consider drafting your response in a separate document and then copying and pasting that response into your application.
- 3. Save the form often to preserve your work; we recommend that you fully complete each section and then save that section by clicking "Save Draft" at





FCC COVID-19 Telehealth Program

Are personnel, IT, administrative, and training costs eligible for support? No. The COVID-19 Telehealth Program provides funding for eligible telecommunications services, information services, and connected devices that eligible health care providers need in order to provide connected care services to their patients to address the COVID-19 pandemic.

Funding will not be provided for personnel costs (including but not limited to costs for IT staff, project managers, or medical professionals), marketing costs, administrative expenses, or training costs. Vendors and service providers can elect to provide training and other IT support at no cost to health care providers participating in the program. Eligible health care providers should not include the cost of ineligible items in their funding application.

Prepare for a "new normal"

We will not be returning to business as usual

- We don't know what dentistry will look like as we recover
- Two things are for certain:
 - 1. Infection control will change
 - 2. Telehealth will be more prevalent

"The difference between a problem and an opportunity is what you make of it." - unknown

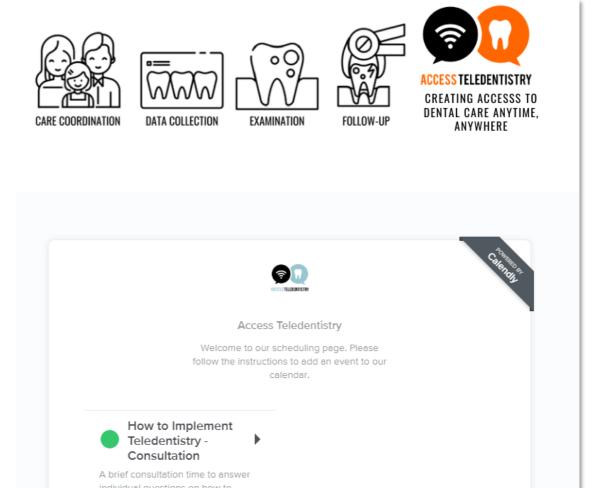
Consultation and Webinar Service Available

Visit our website for more information accessteledentistry.com

I do have some availability but each day there seems to be more people seeking information on teledentistry.

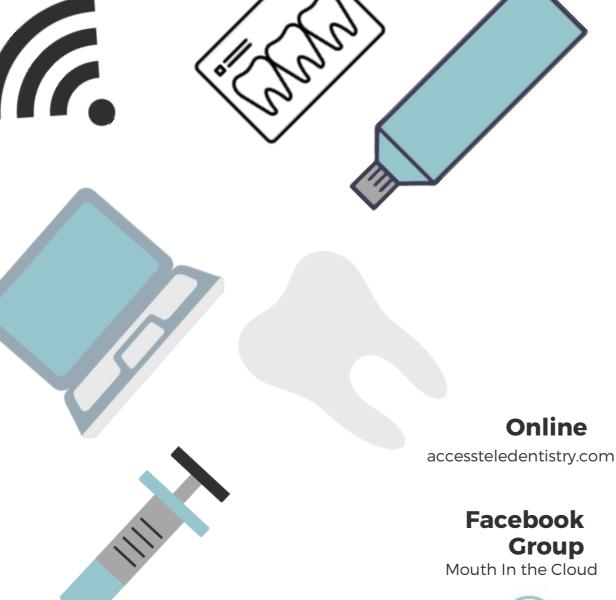


- Teledentistry Planning & FAQs
 - 30 minutes
- Teledentistry Implementation Assistance
 - Varies
- Teledentistry Training Webinars
 - 60 minutes



implement teledentistry into your

practice. A form will be sent to you prior to the meeting by ou...





Reach Out to Us

Mailing address

7214 Executive Parkway House Springs, MO 63051

Email address

nsuter@accessteledent.com

Phone number

(314) 594 - 7170

Thank You!

Have topics you'd like us to cover in next week's webinar on COVID-19 & Dentistry?

- Email: webinars@henryschein.com
- Comment on YouTube Recording and Subscribe!

For more information and a full list of references, please visit the Henry Schein COVID-19 resource center:

www.henryschein.com/COVID19update



