
UNIVERSITY OF
WASHINGTON



NORTHWEST CENTER TO REDUCE
ORAL HEALTH DISPARITIES



PREDICT: Delivery System Design & Science to Reduce Oral Health Disparities in Rural Oregon

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Overview



- **Advantage Dental Background**
- **PREDICT Team**
 - EPDH
 - Primary Care Dentist
 - Case Management
- **Care Delivery System Design**
 - Risk based services
 - Take chemotherapeutic approach
 - Community based for prevention & stabilization
 - Seamless care to restorative/surgical services
 - Case management to remove barriers to care



Advantage Dental Background



- Advantage current member enrollment
 - approx. 335,000 lives
 - spread across 35/36 counties
- Advantage strives to serve vulnerable populations through our network providers and community outreach





Transition to Community Based Care



■ Dental Office (traditional)

- Wait in office for patients
- Future focused
- Dental fears



■ Dental Outreach (non-traditional)

- Risk assess
 - Pregnant women and Women, Infant, Children (WIC)
 - Head Start and Schools
 - Medical offices
 - Residential facilities
- Trusted community partnerships
- PREDICT



PREDICT: Team



- Expanded Practice Permit (EPP) **Dental Hygienists** in **community** settings
 - Calibrated risk assessment
 - Provide evidence- and risk-based primary preventive care
 - Provide evidence-based caries arrest and stabilization
 - Refer to dentists
 - Provide evidence-based secondary preventive care to prevent relapse





PREDICT: Team



- **Community liaisons and case managers**
 - Gain access to community settings and clients (MOUs and informed consents)
 - Help clients to navigate the system: Patient Navigator
 - Help EPDH and dentists with seamless community-dental practice communication



Ma, *Arch Intern Med* 2009

Lainscak, *J Am Med Dir Assoc* 2013



PREDICT: Team



- **Dentists and specialists** in dental practices
 - Provide evidence-based restorative, surgical and specialists' care
- **HIT specialists**
 - Implement a fully integrated EHR and case management system





PREDICT: Risk Assessment



Caries Risk Assessments are performed in community settings where algorithms are running in the background to guide treatment and referral decisions based on risk assessment and clinical findings

Low Risk	Moderate Risk	High Risk
<ul style="list-style-type: none">• No previous caries experience AND <ul style="list-style-type: none">• No visual changes in tooth structure AND <ul style="list-style-type: none">• No breakdown or cavitation	<ul style="list-style-type: none">• Previous caries experience OR <ul style="list-style-type: none">• Visual changes in tooth structure (white/brown spots) OR <ul style="list-style-type: none">• Localized enamel breakdown AND <ul style="list-style-type: none">• No cavitation	<ul style="list-style-type: none">• Distinct cavity into dentin OR <ul style="list-style-type: none">• Extensive cavity into dentin
ASTDD 0 and low caries risk	ASTDD 0 and moderate caries risk	ASTDD 1 or 2 and high caries risk





PREDICT: Risk Based Care



- Regardless of Risk
 - Toothbrush & toothpaste
 - Annual screening = re-assess risk / disease.
 - Welcome to access care at dentist.
 - ***Continuity.***



PREDICT: Risk Based Care



LOW RISK

Screen but do not treat children (50%)

- The majority of children have no cavities and already benefit from fluoridated toothpaste.

Additional preventive care is not needed.

- Examples: fluoride treatments or sealants





PREDICT: Risk Based Care



MODERATE RISK

Use evidence-based non invasive treatments to manage most cavities

Example: antimicrobials (silver fluoride 2x a year), fluorides and/or sealants

Arrests most cavities, needs to be repeated 2X year.





PREDICT: Risk Based Care



HIGH RISK

Use evidence-based secondary preventive treatment to reduce relapse (~ 15-25%)

Example: Silver fluoride 2x a year, betadine/fluoride varnish 2x a year, dental sealants, glass ionomer temporary restorations



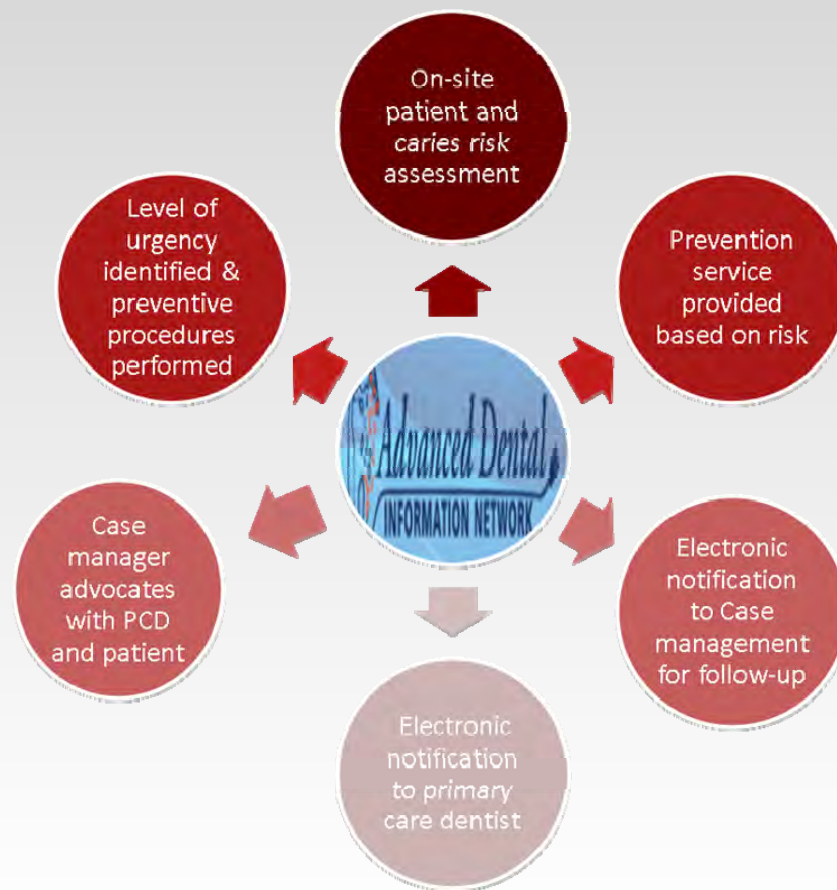
Tut & Milgrom, 2010
Zhan et al., 2006
Simratvir et al., 2010



PREDICT: Referral to Care



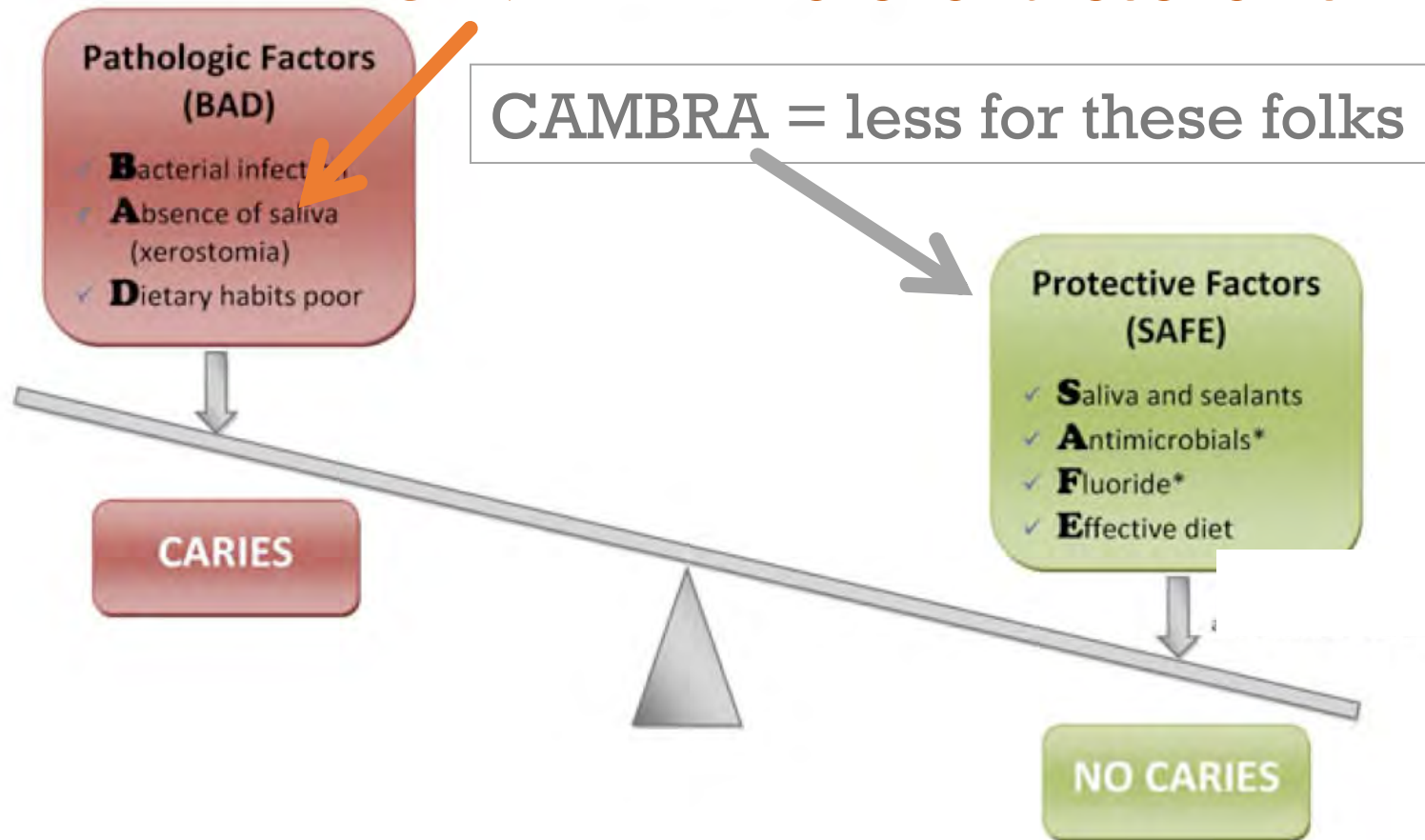
- **High Risk**
 - **Distinct Cavitation**
 - Glass ionomer temporary restorations placed by EPDH
 - **Extensive Cavitation**
 - Refer to PCD
 - **Signs (abscess, pulp exposure)**
 - Refer to PCD
 - Case Management





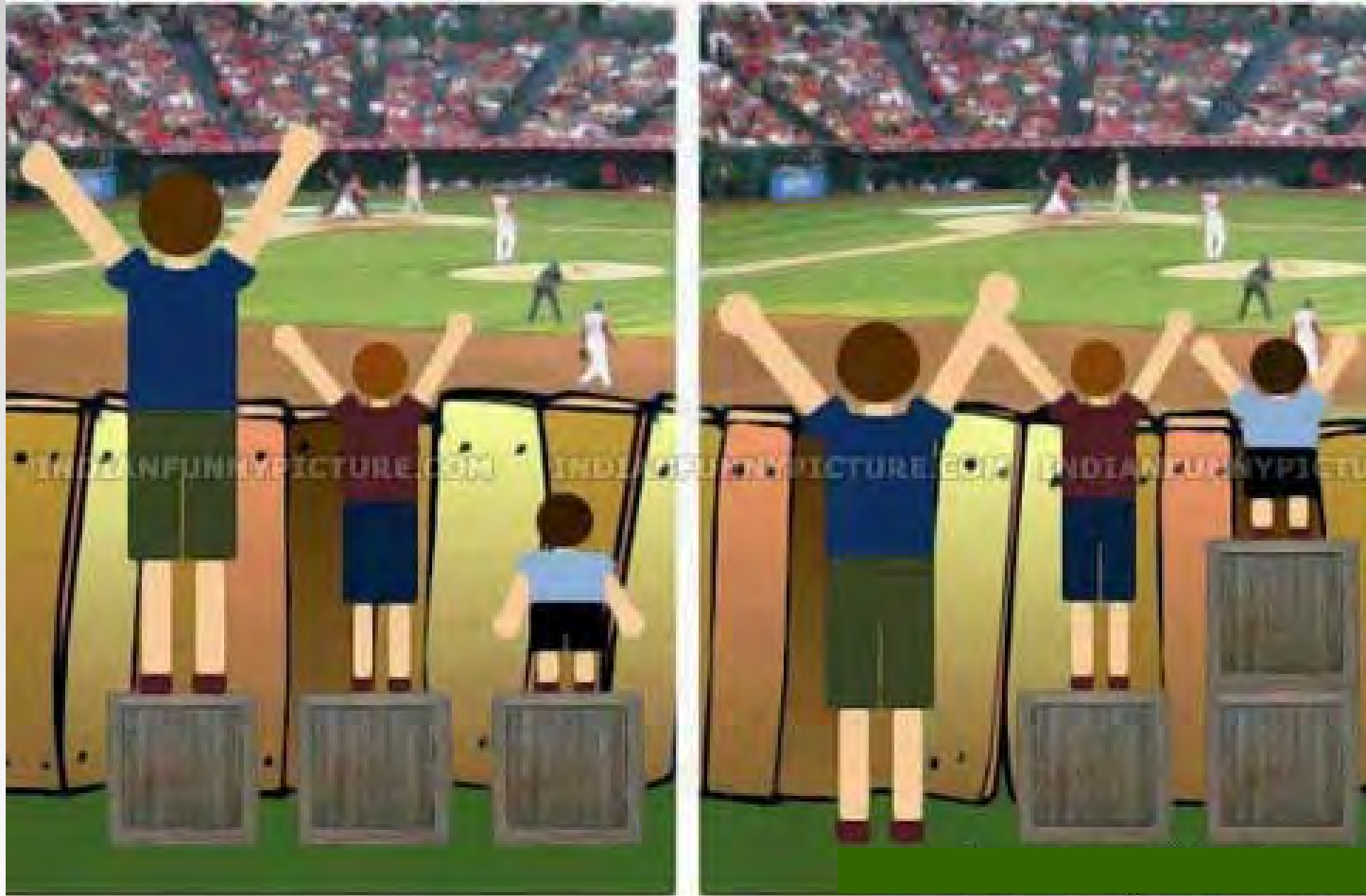
The Caries Balance

CAMBRA = more for these folks





Equality Doesn't Mean Equity



Adapted from *Equality Doesn't Mean Justice*,
<http://indianfunnypicture.com>





Conclusion: PREDICT



- Seamless connection
 - Preventive to curative care
 - Alternative settings to dental clinics
 - EPDH to dentists
- PREDICT
 - Dental team
 - Case management
 - Smart EHR
 - Trusted community partnerships



“If you always do what you’ve always done, you’ll always get what you’ve always got.”

Henry Ford

Thank you

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