

azara

USER CONFERENCE

APR 29–MAY 1

BOSTON, MA

2025

Data Drilling

Revolutionizing Dental Operations, Quality &
Integrated Care Systems



Today's Presenters



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Ohio



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Integration,
Health Partners Western
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DRVS and Dentistry

Let's Level Set



DRVS in Healthcare



Wide acceptance
in many settings



Demonstrated to improve
quality performance



Data driven approach
**What about data in
Dentistry?**

Dentistry in the CHC Setting



Data reporting: Only **one** dental specific **UDS measure** at present

Value Based Performance: A new and growing concept for dental

Integrated Care: **Dentistry is no longer “siloeed”**

Advancements in Dentistry: Patient comfort, infection control, and **technologies**

Key focus on **prevention and tooth loss**



Healthy People 2030



Healthy People 2030 includes 355 core or measurable objectives with 10-year targets

- 15 of these are dedicated to oral health

Leads for tracking the progress of these objectives.

- The Centers for Disease Control and Prevention (CDC)
- National Institute of Dental and Craniofacial Research (NIDCR)
- Indian Health Service (IHS)
- **Health Resources and Services Administration (HRSA)**

Healthy People 2030



“Healthy People was the first national effort to lay out a set of **data-driven** priorities for health improvement”

-- former HHS secretary Alex Azar

[Healthy People 2030 Includes 15 Oral Health Objectives](#)
[- Dentistry Today](#)

Healthy People 2030

Oral Health Objectives DRVS can Impact



REDUCE THE PROPORTION OF

1. Adults with active or untreated tooth decay
2. Children and adolescents with lifetime tooth decay
3. Children and adolescents with active and untreated tooth decay
4. People who can't get the dental care they need when they need it
5. Older adults with untreated root surface decay
6. Adults aged 45 years and older who have lost all their teeth
7. Adults aged 45 years and older with moderate and severe periodontitis

INCREASE THE PROPORTION of

8. Oral and pharyngeal cancers detected at the earliest stage
9. Low-income youth who have a preventive dental visit
10. Children and adolescents who have dental sealants on ≥ 1 molar

Why Are Dental Services Important?



Problems with **eating, speaking, learning** and effects on **social interaction**, and **employment potential**.



By age 8, **over half of children (52%)** have had a cavity in their primary (baby) teeth.



Children from low-income families are **twice** as likely to have cavities.



34 million school hours and over **\$45 billion** in US productivity **lost** each year

Why Is Dental Data Important?

The Power of Prevention



Dental Cleanings

- Covered under an insurance plan
- Standard prophylaxis can cost between \$75 and \$200
- Deep Cleaning (Scaling and Root Planning) \$150-\$350 per Quadrant = \$600-\$1,400 for the entire mouth



Restorative Services

- Fillings covered benefit under Medicaid
- The average filling cost \$150-200.
- Root Canals and Crowns are not
 - \$1,300-1,600 depending on the tooth “type”
 - \$500-2,500 per crown
 - **Extractions - FREE**

DRVS – Connecting PC and Oral Health



Day-to-day utilization, a compliment to dental operations & quality improvement



Using DRVS as a tool to share information



Further bridging relationships in the care team



New focuses on integrated care

DRVS Tools to Support Dental Populations





Core DRVS

Alerts:

- Dental Sealants
- Fluoride 0-20 years

Measures:

- Children who have dental decay or cavities (CMS75v7)
- Dental sealants for children between 6-9 years (CMS 277v0)
- Primary caries prevention (fluoride) (CMS 74v8)

RDEs:

- Child Dental Sealant
- Dental Adjunctive Series
- Dental Assessment (D0191)
- Dental Caries Dx
- Dental Caries Risk
- Dental Diagnostic Imaging
- Dental Diagnostic Services
- Dental Emergency Services
- Dental Encounters (CDT codes)
- Dental Endodontic Services
- Dental Oral Surgery
- Dental Periodontic Services
- Dental Preventive Services
- Dental Prophylaxis - Adult (D1110)
- Dental Prophylaxis - Child (D1120)
- Dental Prosthodontic Services
- Dental Restorative Services
- Dental Services Referral
- Dental Visit
- Fluoride Varnish Application (D1206)
- Fluoride Varnish Application for Children
- Oral Hygiene Instructions (D1330)
- Risk for Dental Caries

New Measure March 2025:

Patients with Dental Visit



New Measure: Patients with Dental Visit

Replacing Prenatal Oral Health and Diabetes Oral Health

Since the new measure allows users to filter by patient diagnosis, the following two measures will be retired on April 18, 2025:

*Prenatal Oral Health

*Diabetes Oral Health

To recreate either of the above measures, select "Add Filter" on the Measure Analyzer, and select "Patient Diagnosis".

For Prenatal Oral Health, select "Actively Pregnant Patient"; for Diabetes Oral Health, select "Diabetes Type I or Type II". Then hit the "Update" button to get the results.

Azara has created a new measure "Patients with a Dental Visit", showing patients with a qualifying encounter in the dental service line in the last 12 months.



Extended Dental module



Alerts:

- Caries Risk Assessment
- Dental Annual Prophylaxis
- Dental Sealant
- Dental Visit
- Dental Visit Established Patient
- Fluoride Varnish

Scorecards:

- Dental Clinical Measures
- Dental Interactions and Procedures
- Dental Primary Care Measures
- Dental Program Management

RDEs:

- Dental Treatment Plan Completed
- Oral Exam

Measures:

- Annual Dental Cleaning Age 0-75
- Caries Diagnosis at an Oral Recall Exam for Established Dental Patients
- Caries Risk Assessment (Primary Care)
- Caries Risk Assessment Age 0-75 (Dental)
- Children Receiving Sealant (6-14yo)
- Dental Interactions
- Dental Patients with an Oral Evaluation
- Dental Patients with Periodontal Disease
- Dental Procedures Performed
- Dental Recall Rates
- Dental Treatment Plan Completion
- Dental Visits: Periodic vs Comprehensive
- Elevated Risk for Caries (Primary Care)
- Elevated Risk for Caries Age 0-75 (Dental)
- New Dental Patients Last 18 Months
- Oral Health Self Management Goal Setting (Dental)
- Oral Health Self-Management Goal (Primary Care)
- Patients with ED Visits for Non-Traumatic Dental Conditions
- Periodontal Evaluation in Adults with Periodontitis
- Referred for Dental Services (Primary Care)

New as of 2024



Child Dental Sealant (CMS 277)

Azara DRVS can now ingest tooth number data from connected Electronic Dental Records (EDR)

Measure criteria will incorporate tooth number to identify first permanent molars

Numerator: Dental sealant procedure recorded on at least one permanent first molar

Exceptions: Records of the following for all permanent first molars

- Dental restoration procedure performed
- Tooth identified as non-sealable
- Dental sealant applied before start of measurement year

Please contact our Support Team if you are interested in learning more.

Integration vs. Co-location



Integrated Care



Improved health outcomes

Capturing pivotal opportunities

- Warm handoffs between providers
- One stop shop for services

Breaking the chain of tooth loss through

- Identifying when a child should first see the dentist
- Educating new parents, vital ways to care for their child's teeth and invoking healthy oral habits into the home

Behavioral Health Considerations

- Depression and the inability to complete hygiene needs

Integration Opportunities (PVP & CMP)

What if your EMR and EDR are not integrated?

Medical Information Vital to the Dental Visit

- BP control
- Current medications
 - Blood thinners - Last INR?
- Last A1c
- Last ED Visit – Oral Health Related?

Operational Considerations

- Improved cross service utilization
- Health outcomes
- UDS Data Collection
- Proper screenings and follow up



Oral Health and Behavioral Health Impacts



Mental Health Impact on Oral Health

Anxiety: Bruxism (teeth grinding) is associated with anxiety.

Bipolar & Obsessive - Compulsive Disorder: Patients with these conditions can be overzealous with brushing, flossing, and mouth washing.

Depression: Patients with depression tend to have high levels of dental caries (decay) due to self-neglect and dry mouth related to anti-depressant use.

Eating Disorders: Patients with self-induced vomiting suffer from tooth erosion.

Trauma: Patients with significant trauma histories associated with habitual bruxism and clenching, and increased risk of periodontal disease.

Medications for Mental Health: Xerostomia (dry mouth) common side effect of anti-depressants, anti-anxiety, and anti-psychotic medications.

Oral Health Impact on Mental Health

Cognitive Functioning: Physical inflammation from periodontitis (gum disease) can be a risk factor in exacerbating cognitive decline.

Dental Phobia: Significant number of individuals suffer from severe anxiety about dental visits.

Quality of Life: Poor oral health can negatively impact employment, school, and relationships.

Self-Esteem: Tooth loss and severe tooth decay negatively impact self-esteem and quality of life.

Vital Functioning: Poor oral health can impair vital functions such as eating, breathing, swallowing, and chewing, which in turn can impact mental health.



DRVS Tools

Supporting Integrated Opportunities



Scorecards | Dental Program Management

Scorecards and Dashboards can be emailed to your providers based on service line using Provider Groups.

Dental Clinical Measures

REPORT

PERIOD
February 2023

CENTERS
All Centers

RENDERING PROVIDERS
Dental Providers Loc...

+ Add Filter

Update

REPORT

CARE GAPS

GROUPING
No Grouping

TARGETS
Primary Secondary Not Met

REPORT FORMAT
Scorecard

MEASURE	RESULT	TARGET	NUMERATOR	DENOMINATOR	
Dental Patients with an Oral Evaluation	31.3%	26.0%	25	80	
Annual Prophylaxis Age 0-75 (Dental)	0.0%	65.0%	0	79	
Caries Risk Assessment Age 0-75 (Dental)	86.1%	78.0%	68	79	
Elevated Risk for Caries Age 0-75 (Dental)	80.9%	43.0%	55	68	
Caries Diagnosis at an Oral Recall Exam for Established Dental Patients	49.0%	74.0%	49	100	
Dental Patients with Periodontal Disease	0.0%	74.0%	0	80	
Children Receiving Sealant (6-11yo)	0.0%	25.0%	0	9	
Oral Health Self Management Goal Setting (Dental)	55.7%	61.0%	44	79	

Dental Registries

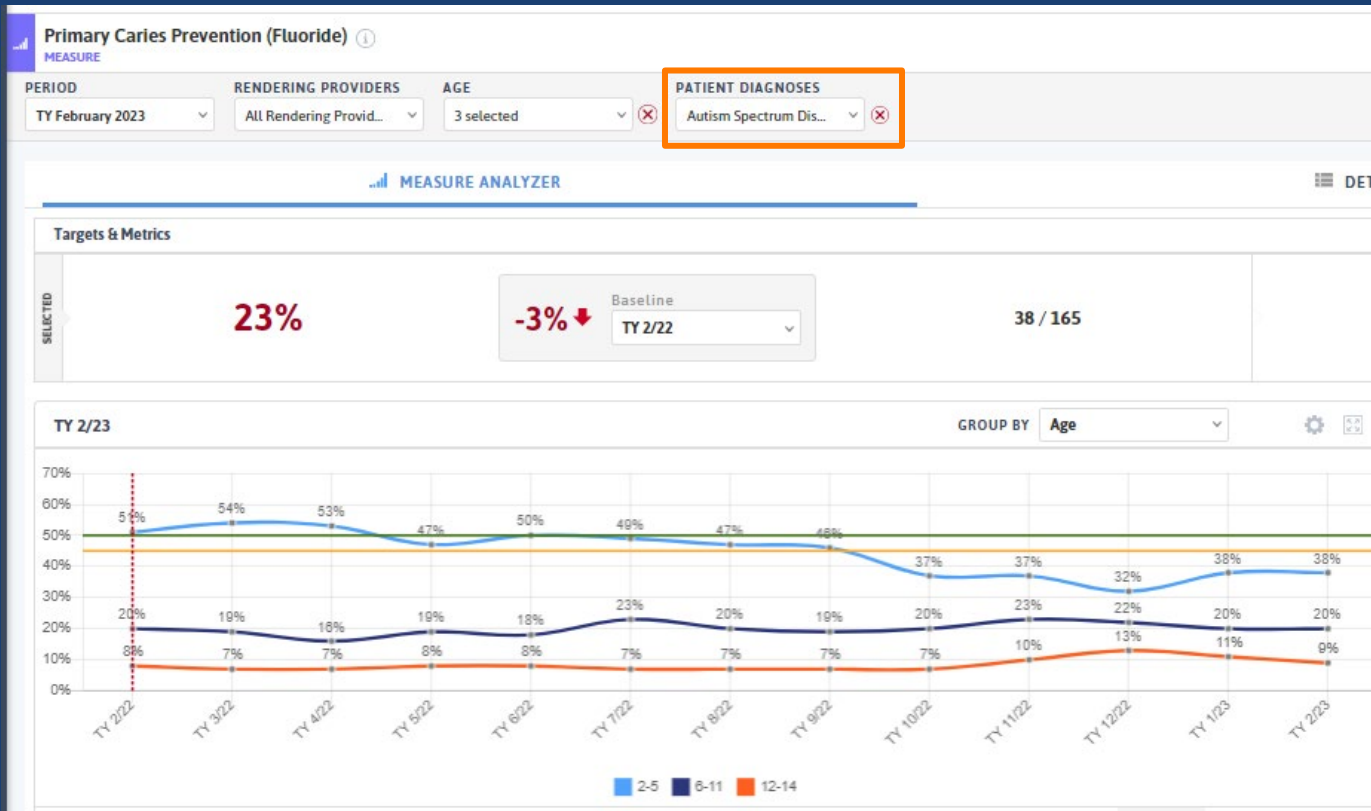
Registry Data Elements Across Service Lines



	DIABETES DX		A1C		BMI				DENTAL PROPHYLAXIS ADULT		CHRONIC PERIODONTITIS DX		
RISK SCORE	DATE	CODE	DATE	RESULT	DATE	VALUE	FOOT EXAM	EYE EXAM DATE	DATE ↓	CODE	DATE	CODE	DENTAL VISIT DATE
14.00	3/24/2023	E11.65	3/24/2023	6.7	3/24/2023	29.4	5/20/2019	12/28/2021	3/16/2023	D1110			3/16/2023
4.00	5/17/2021	E11.65	3/8/2023	8.2	3/8/2023	34.3	9/7/2022	11/2/2019	3/8/2023	D1110			3/8/2023
14.00	7/15/2021	E11.621	5/26/2022	14.3	3/13/2023	52.6	5/26/2022		3/6/2023	D1110	8/9/2021	K05.30	3/6/2023
14.00	6/29/2021	E11.9	2/1/2023	6.7	2/1/2023	37.1			2/3/2023	D1110	7/22/2021	K05.30	2/3/2023
7.00	3/2/2020	E11.9	11/21/2022	6.2	1/9/2023	29.7			1/25/2023	D1110			1/25/2023
22.00	6/29/2018	E11.40	1/10/2023	6.0	1/10/2023	44.5	5/10/2019	1/26/2021	1/25/2023	D1110			2/10/2023
16.00	5/1/2018	E11.65	11/7/2022	8.4	2/9/2023	55.4	2/9/2023		1/19/2023	D1110	4/28/2021	K05.30	1/19/2023
5.00	3/31/2021	111552007							1/17/2023	D1110	12/9/2020	K05.30	1/17/2023
7.00	6/3/2020	E11.49	12/22/2022	7.2	3/30/2023	32.6	8/4/2022	5/9/2022	1/4/2023	D1110			1/17/2023
10.00	3/7/2022	E10.9	10/6/2022	5.9	10/18/2022	30.1	3/7/2022		12/21/2022	D1110			12/21/2022
5.00	3/7/2023	E11.65	3/7/2023	6.7	3/7/2023	43.9			12/20/2022	D1110			12/20/2022
6.00	3/9/2023	E10.65			3/8/2023	26.6			12/14/2022	D1110			12/14/2022
21.00	4/7/2022	E11.65	1/26/2023	6.5	1/26/2023	51.0	10/13/2022	4/11/2022	12/13/2022	D1110	5/3/2022	K05.30	12/13/2022
7.00	9/1/2019	E11.9	12/9/2022	7.0	12/9/2022	31.0	12/9/2022	1/21/2021	12/7/2022	D1110			1/4/2023
9.00	2/15/2019	E11.9	8/3/2021	6.5	8/3/2021	34.5	8/3/2021	5/22/2019	11/30/2022	D1110	5/2/2022	K05.30	11/30/2022
15.00	7/27/2021	E11.65	1/17/2023	6.9	1/17/2023	34.3	1/17/2023		11/30/2022	D1110	5/3/2021	K05.30	11/30/2022
4.00	2/8/2018	E11.40	2/4/2023	7.9	2/4/2023	25.9		7/6/2022	11/30/2022	D1110			11/30/2022
15.00	10/21/2020	E11.43	2/28/2023	10.0	2/28/2023	35.3		10/1/2021	11/29/2022	D1110	1/28/2021	K05.30	11/29/2022
13.00	7/28/2020	E11.65	8/10/2022	13.5	2/22/2023	23.0	11/29/2022	1/10/2023	10/31/2022	D1110			10/31/2022

Measure Use Cases

Pediatric Patients with Special Needs

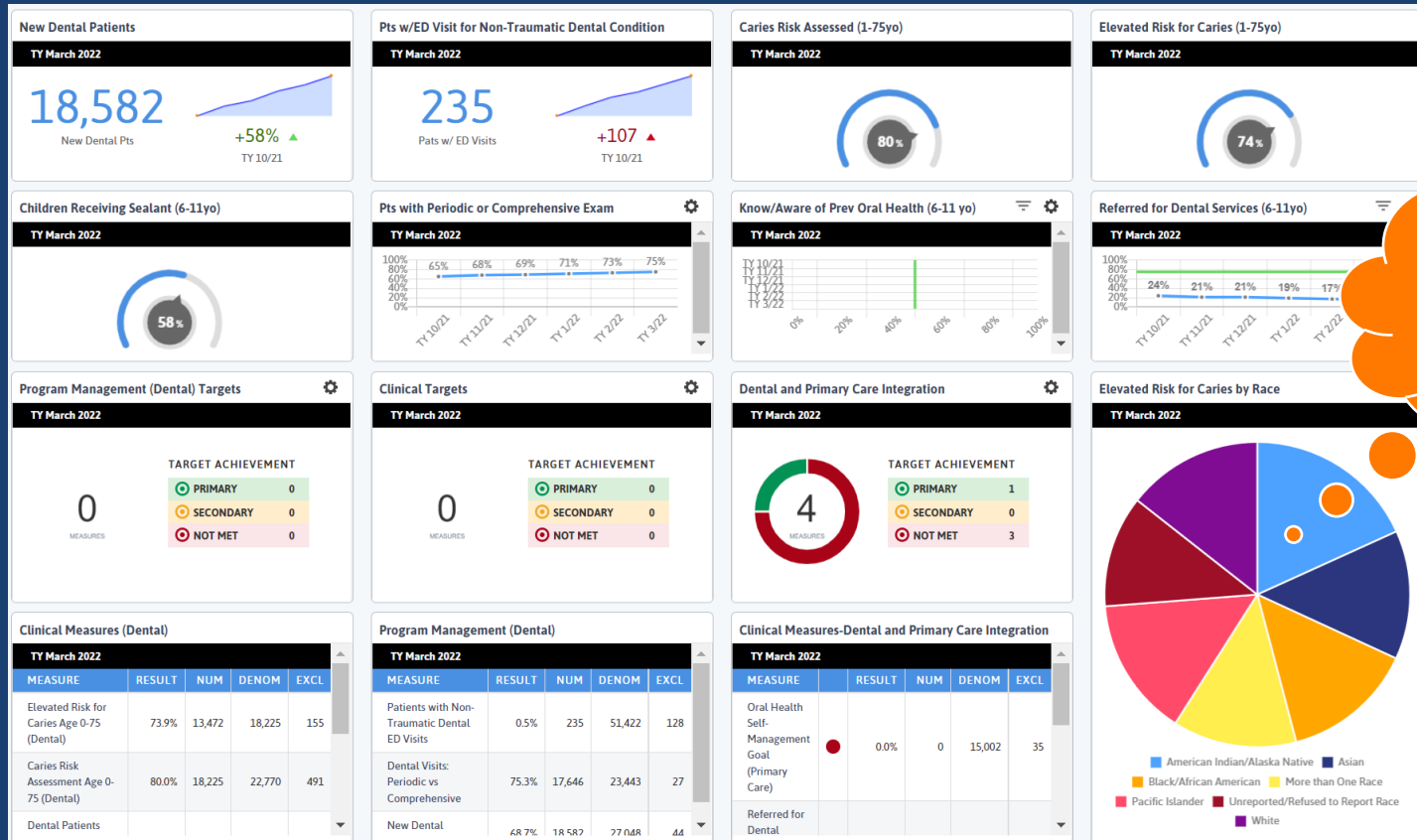


Are your dental staff trained to serve this population?

Do you have appropriate referral sources if needed?

Care disparities?

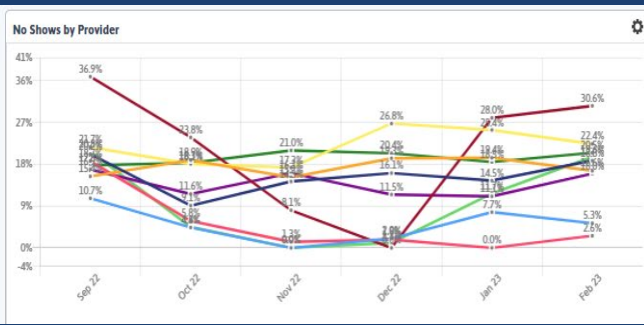
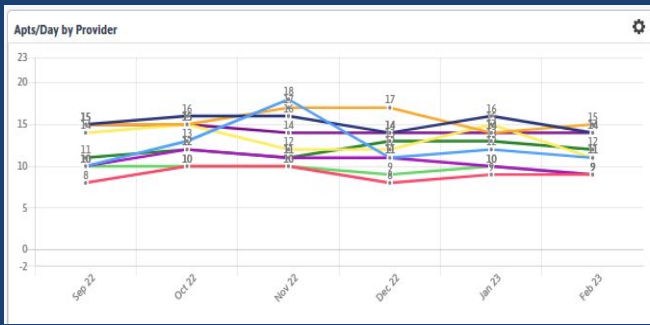
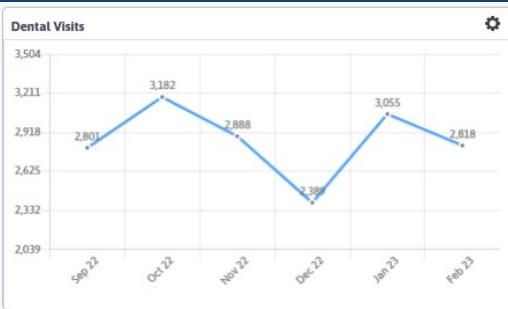
Custom Dashboards



Do you have a way for site managers or dental directors to monitor dental operations?

Custom Dashboards

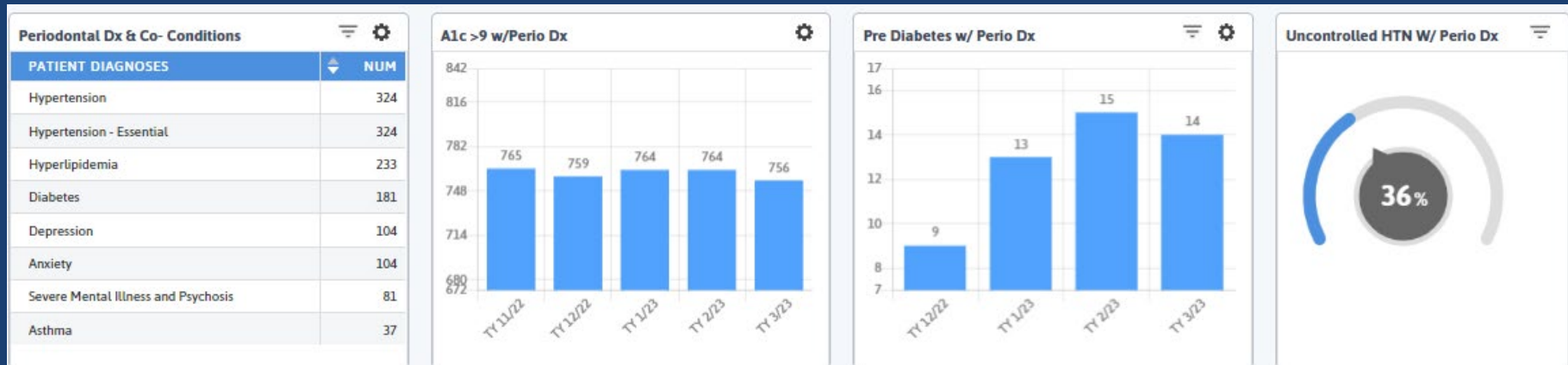
Operations & Trends



- No shows and late cancelations
- Provider schedule capacity
- Access evaluations

Custom Dashboards

Co-Occurring Conditions & Integration

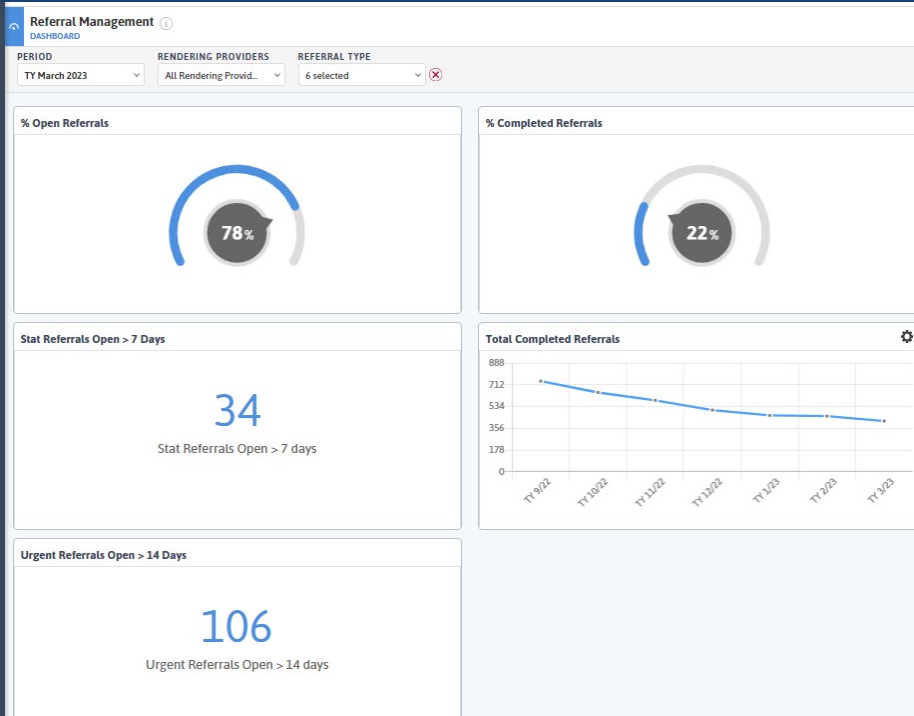


If patients seem to be doing all the right things but are still having difficulty controlling A1c or BP levels, have they been examined for possible periodontal disease?

Dental Referrals



Documentation Vs. The Warm Handoff for Internal Service Lines



Internal Referrals

- Are they documented?
- Who is responsible for managing them?
- Is the workflow different for internal vs external?



DRVS Dental Module

EXPANDED DENTAL REPORTING

The DRVS Dental Module offers an in-depth look at your center's dental patients. These additional measures, scorecards, alerts, and registry data elements provide the opportunity to maximize your patients' dental care—fostering dental integration and promoting quality improvement. The DRVS Dental Module deep dives into oral health specific clinical measures, procedures, program management and referrals, combining data from both your Medical and Dental health records.

The Dental Module includes the following components:

Measures

- Annual Prophylaxis Age 0-75
- Caries Risk Assessment Age 0-75
- Elevated Risk for Caries Age 0-75
- Caries at Recall
- New Dental Patients
- Dental Patients with an Oral Evaluation
- Dental Visits: Periodic vs. Comprehensive
- Dental Patients with Periodontal Disease
- Patients with ED Visits for Non-Traumatic Dental Conditions
- Children Receiving Dental Sealant
- Dental Procedures Performed
- Dental Recall Rates
- Dental Treatment Plan Completion
- Oral Health Self-Management Goal Setting Ages 0-75

Alerts

- Caries Risk Assessment (Dental)
- Dental Annual Prophylaxis (Dental)
- Dental Sealant (Dental/Primary Care)
- Dental Visit (Dental)
- Dental Visit Established Patient (Dental)
- Fluoride Varnish (Dental/Primary Care)

Reports

- Dental Clinical Measures
- Dental Interactions and Procedures Measures
- Dental Primary Care Measures
- Dental Program Management Measures

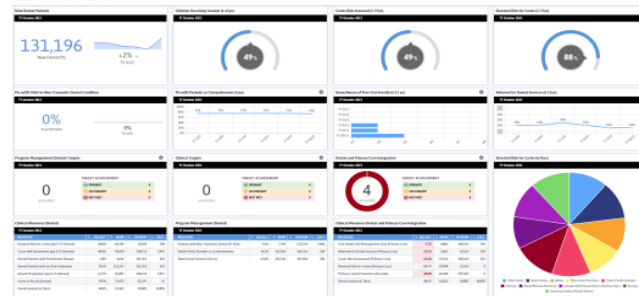
Measures	2024-01-01	2024-01-01	2024-01-01	2024-01-01
Dental Patients with an Oral Evaluation	100%	100%	100%	100%
Dental Annual Prophylaxis (Age 0-75)	100%	100%	100%	100%
Caries Risk Assessment (Age 0-75)	100%	100%	100%	100%
Dental Sealant (Age 0-75)	100%	100%	100%	100%
Dental Visit (Age 0-75)	100%	100%	100%	100%
Dental Visit Established Patient (Age 0-75)	100%	100%	100%	100%
Fluoride Varnish (Age 0-75)	100%	100%	100%	100%
Dental Patients with Periodontal Disease	100%	100%	100%	100%
Patients with ED Visits for Non-Traumatic Dental Conditions	100%	100%	100%	100%
Children Receiving Dental Sealant	100%	100%	100%	100%
Dental Procedures Performed	100%	100%	100%	100%
Dental Recall Rates	100%	100%	100%	100%
Dental Treatment Plan Completion	100%	100%	100%	100%
Oral Health Self-Management Goal Setting (Age 0-75)	100%	100%	100%	100%

Azara Dental Module.pdf

FEATURES & BENEFITS

- Access caries risk data to explore trends, identify patients with outstanding dental treatment or active periodontal disease.
- Create custom registries and cohorts using dental registry data elements to learn more about dental populations or for dental provider panel management.
- Build a deeper understanding of your dental populations and the correlation between their oral and systemic health by comparing oral and chronic health condition status, such as those with uncontrolled diabetes and periodontitis.
- Use Patient Visit Planning Report (PVP) or Care Management Passport (CMP) alerts as part of the dental visit to address oral gaps in care.
- With the full suite of pre-built scorecards, measures and registry data elements, users can save time and resources by running reports with one click.

Custom Dashboard*



*Organizations can use the expanded dental reporting measures to create custom dashboards.

Interested in learning more about the DRVS Dental Module?

The Dental Module for DRVS requires additional mappings and integration. Contact your PCA, HCCN, your Client Success Manager or solutions@azarahealthcare.com.

DRVS to Support Dental Care

Recorded Webinars



[TELL ME THE TOOTH: DENTAL QUALITY
AND INTEGRATION USING DRVS \(9/5/2024\)](#)



[ADVANCING DENTAL CARE USING DRVS
\(9/21/2023\) \(AZARAHEALTHCARE.COM\)](#)

Health Partners of Western Ohio

Dental Quality and Operations



Health Partners of Western Ohio



Health Partners
of Western Ohio



63,676 patients

237,331 visits

Medical

Dental

Behavioral Health

Vision



22 locations, including 11 school-based
health centers



Integrated model of care



HPWO & Azara



PVP-Patient Visit Planning
Alerts (Stock and Custom)

Transitions of Care
Module

UDS Scorecard

Stock and Custom
Registries

Care Effectiveness
Reports

Transitions of Care (TOC) - ED/IP

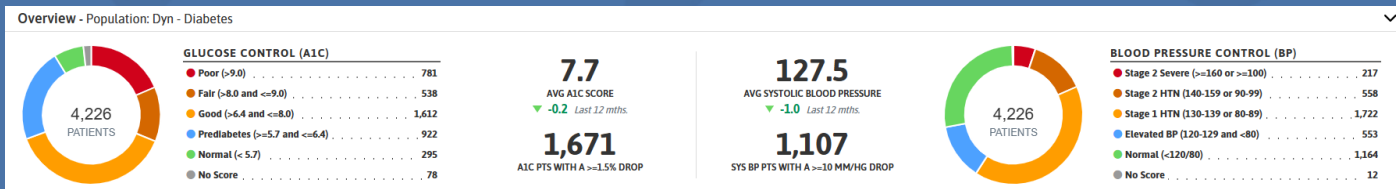
REPORT

DATE RANGE: [] DISCHARGE STATUS: All Discharge Status LAST VISIT: No Required Visit TOC TYPE: All TOC Type TOC STATUS: Discharge

REPORTS

Search ... NEXT APPT: All No Appt Upcoming Appt

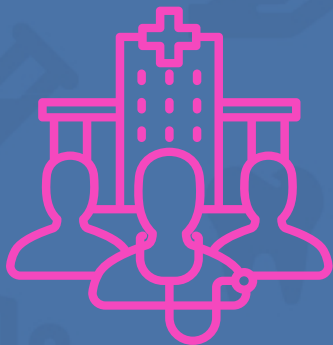
DEMOGRAPHICS	DISCHARGE	DIAGNOSIS
NAME	HS IP READMIT STATUS STATUS CODE	CODE DESCRIPTION
[REDACTED]	0 N/A Home 1	R34 Anuria and oliguria
[REDACTED]	0 N/A Home 01	M25.562 Pain in left knee
[REDACTED]	0 N/A Home 01	Z20.2 Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission
[REDACTED]	2 N/A Home 1	C79.51 Secondary malignant neoplasm of bone
[REDACTED]	0 N/A Unknown or Blank SC	
[REDACTED]	0 N/A Home 1	J02.0 Streptococcal pharyngitis
[REDACTED]	0 N/A Non-hospital Institution ANOTHER INST	



Azara Utilization



Health Partners
of Western Ohio



Primary Care Team

PVP-Alerts
Transitions of Care Report
Gaps in Care List
Performance Reporting-
Scorecards & Targets



Quality Teams

Alert Maintenance and Trouble shooting
UDS Scorecard
Registries
Care Effectiveness
Mapping Admin
Data Hygiene Reports – Flagged values
F2F QE report

Quality of Care: Data Tools in Dentistry



Dental Team

Custom Scorecards and Targets



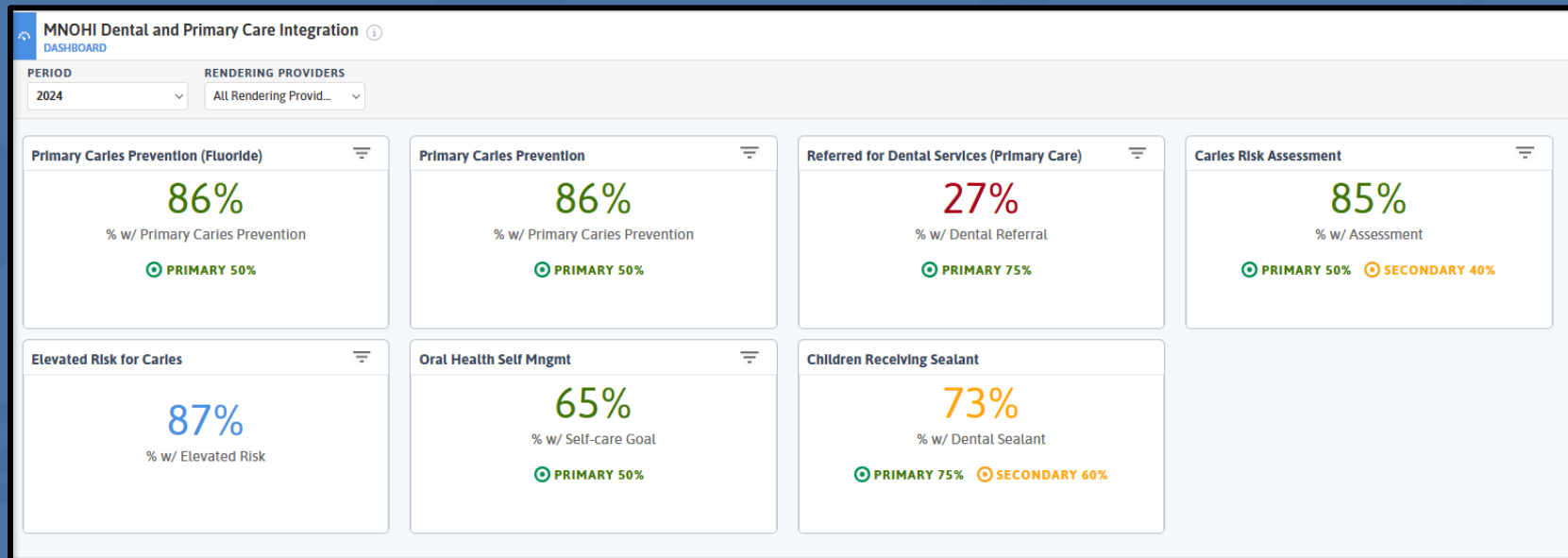
Health Partners
of Western Ohio

PERIOD		RENDERING PROVIDERS	RENDERING LOCATIONS		
January 2025		All Rendering Provid...	8 selected	+ Add Filter	Update
REPORT			CARE GAPS		
GROUPING		TARGETS		REPORT FORMAT	
Location - Rendering		Primary	Secondary	Not Met	CrossTab
LOCATION - RENDERING		CHILD DENTAL SEALANT	DENTAL TREATMENT PLAN COMPLETION	CARIES RISK ASSESSMENT AGE 0-75 (DENTAL)	
Bryan Community Health Center		80.8%	28.0%	82.5%	
Dr.Gene Wright Community Health Center		96.9%	45.6%	91.7%	
Kenton Community Health Center		95.0%	3.9%	54.5%	
New Carlisle Community Health Center		16.7%	27.8%	67.5%	
Old West End		68.2%	13.5%	80.1%	
Tiffin Community Health Center		100.0%	7.8%	54.3%	
Waite Health Center		55.6%	3.6%	81.2%	
Whitmer Health Center		50.0%	4.4%	78.1%	

MNOHI Grant reporting



Health Partners
of Western Ohio





Health Partners
of Western Ohio

Dental Integration Journey

2008 Fluoride
Varnish
applications in
medical -
OACHC

2018 Oral
Health
Integration

2024 SDF
application in
medical

2013 Oral health
clinical
competencies –
National
Network for
Oral Health
Access
(NNOHA)

2020 Midwest
Network for
Oral Health
Integration
(MNOHI)

2025 Medicaid
reimbursement

Why SDF?

According to the World Health Organization, dental caries is the most **prevalent health condition** with **almost half of the world's population** affected.

In 2023, nearly two-thirds (64%) of school-age kids on Medicaid did not have a single dental visit all year.

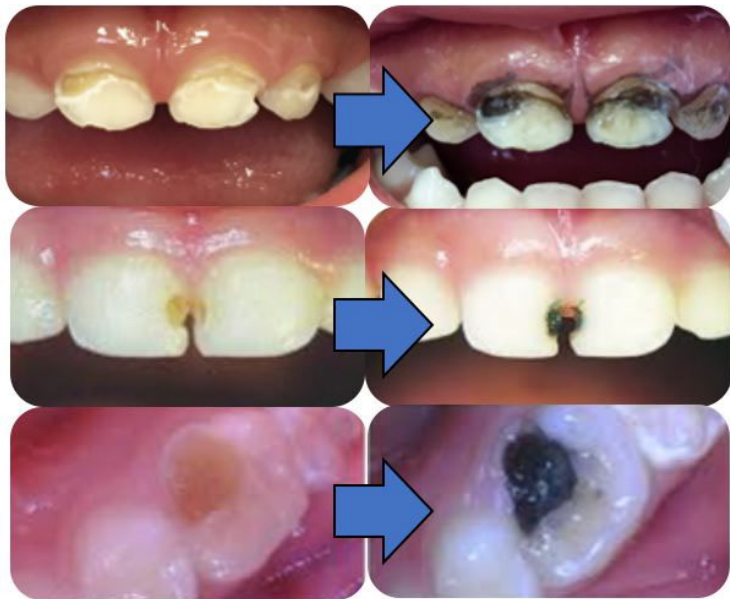
Among all Ohio children last school year, nearly **one in five (19%) had at least one untreated cavity.**

SDF offers a minimally invasive alternative to traditional restorative procedures

Quintuple Aim



Silver Diamine Fluoride (SDF)



Before and After SDF Application

What is SDF?

Silver diamine fluoride (SDF) is a service where we put a liquid on your teeth that helps stop cavities. Usually SDF is put on the cavity 2 times. The cavity will stain black while healthy teeth will not stain.

I should get SDF because:

- It's Fast.
- No shots or needles.
- Does not hurt.
- Can stop some tooth pain.

I should not get SDF if:

- I am allergic to silver.
- There are sores on my gums or mouth.

If I do not get SDF:

- My tooth pain may get worse.
- I may need fillings or crowns.
- My tooth may need pulled.
- I may need to see another dentist.



Benefits of SDF

- It's quick and painless.
- It can give more time to get into the dentist for care.
- It might be the only treatment needed for cavities.
- Stops cavities from getting worse.



Before SDF:



After SDF:

SDF Timeline



2014 FDA approval



2016 Dental CDT code created



2017 AAPD guidelines



2023 AMA code 0792T



2025 Medicaid reimburse

Our Barriers



No state policy/guidance



Staff needed time to do own research as well



Rules put into place minimizing dental usage



Slow spread – staff apprehensive



Change culture with patients – teach them what and why

Our Successes



No cost to patients for one full year



Large outreach presence allows for entry into care



Spread on a large scale with no incidents



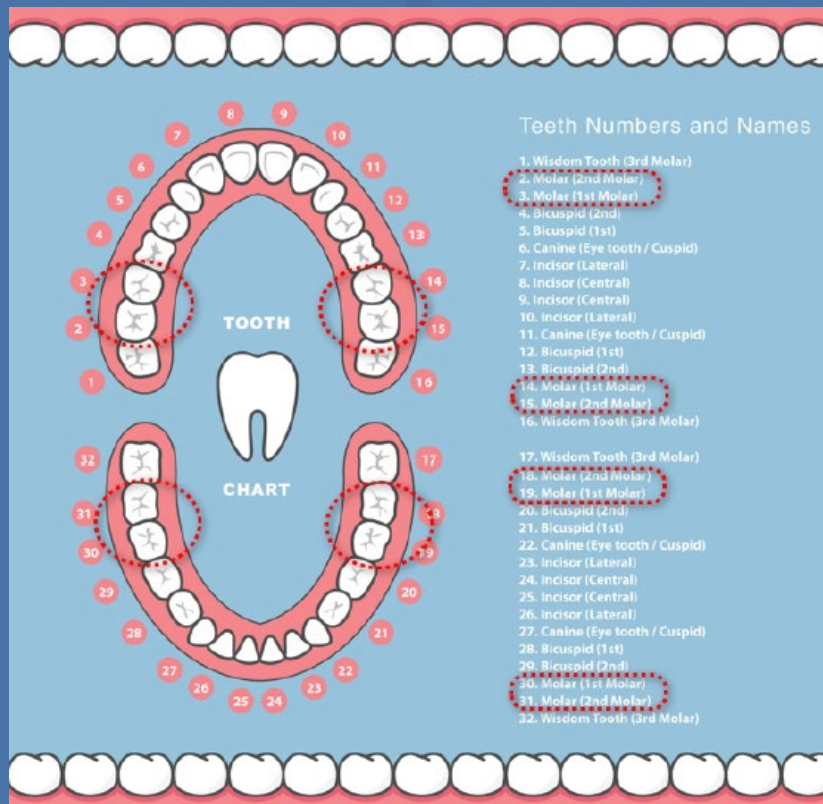
Medicaid reimbursement

Training Medical Staff

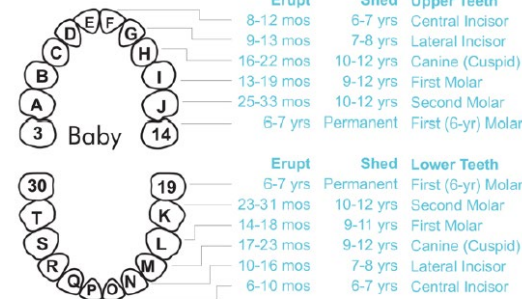
The Art of The Tooth Number



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Baby Tooth Chart



Team Based Approach

Changes to EHR and Billing

Billing

- CPT III Code: 0792T
- Medicaid is reimbursing for 2025

Clinical and IT
considerations

Logistics

Started with
dummy codes

Trialed and
adjusted

Medicaid reimbursement

Started over with
“their” rules

Addition of teeth
numbers

Staff Training

Medical and
dental overlap

Implementation

Billing



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Note Orders/Charges Care Plan OB Chart

PDM Rx Labs Tasks Charges F Codes In House Medications In House Procedures In House Test/Screen Obtain Results Outside Diagn Tests Outside Labs Referrals Others

Procedures from Encounter Note

Select All Description

0792T	Silver diamine fluoride applied by medical
0792T.14	Silver diamine fluoride applied by medical - tooth 14
0792T.15	Silver diamine fluoride applied by medical - tooth 15
0792T.19	Silver diamine fluoride applied by medical - tooth 19

Orders for Reminders Due

Select All

Order	Diagnosis
Diabetic Eye Exam Obtain Results	-
Mammogram Obtain Results	-
Microalbumin Urine Test	-

Current Patient All Patients

Pharmacy: HEALTH PARTNERS OF W OHIO @ 441 E 8th St, Lima, OH (419) 221-3072 (Electronic Transmission)

Orders for Kongseng Bhuddham for CRIES (K02.9)

Rx Drug	Issued	Order	Date	Procedure	Date
No Data Found		No Data Found		0792T.30 - Silver diamine fluoride applied by medical - tooth 30	03/18/25
				0792T.29 - Silver diamine fluoride applied by medical - tooth 29	03/18/25
				0792T.20 - Silver diamine fluoride applied by medical - tooth 20	03/18/25
				0792T.19 - Silver diamine fluoride applied by medical - tooth 19	03/18/25

Orders/Charges Cart Max Diags Insurance Accepts: 30

consent form for procedure on file (From Note)

1) K02.9 - Dental caries, unspecified (From Note)

- 0792T.3 - Silver diamine fluoride applied by medical - tooth 3, Units: 1
- 0792T.4 - Silver diamine fluoride applied by medical - tooth 4, Units: 1
- 0792T.14 - Silver diamine fluoride applied by medical - tooth 14, Units: 1
- 0792T.15 - Silver diamine fluoride applied by medical - tooth 15, Units: 1
- 0792T.19 - Silver diamine fluoride applied by medical - tooth 19, Units: 1
- 0792T.20 - Silver diamine fluoride applied by medical - tooth 20, Units: 1
- 0792T.29 - Silver diamine fluoride applied by medical - tooth 29, Units: 1
- 0792T.30 - Silver diamine fluoride applied by medical - tooth 30, Units: 1

The Cost of Care



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Silver Diamine Fluoride
\$30.00 Per Tooth



Alternative Care
Filling \$200 per tooth
Root Canal \$600 per tooth
ER Visit in Ohio for non-traumatic dental
care \$1,887

Implementation & Healthy Competition



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Site competitions between teams

- Staff incentive to get over 20% of patients seen have SDF placement

- No exclusions – Edentulous patients (Tracking limitations)

- Not applicable to telehealth visits

- Shared results (not blinded)

- Sharing of besting practices

Goal: Normal Workflow

Prizes TBD for 2025





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SDF Performance:

Tracking and Analytics





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Tracking SDF in DRVS

Oral Health QI Goal Determined

1st applications placed with dental via outreach

2nd Medical Applications – How can we identify patients?

Custom Alert Creation

PVP/CMP- Daily Huddles

New workflow/operational changes as a result



CATEGORY	NAME	PVP NAME	ENABLED	CONFIGURABLE	DESCRIPTION
Oral Health	SDF Application Completion	Silver Diamine Fluoride Application (SDF) Application Completion	Y	N	Alert will trigger if patient has received at least one application of silver diamine fluoride (SDF) in the last 365 days and is due to have a second or third application to complete the regimen. Second application is due after seven days from the first application. Third application is due six months after second application. This alert is not configurable

Tracking SDF in DRVS



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Custom Registry Data Element-RDE

DENTAL ENCOUNTER					SILVER DIAMINE FLUORIDE FIRST APPLICATION		SILVER DIAMINE FLUORIDE 2ND APPLICATION		SILVER DIAMINE FLUORIDE LAST APPLICATION	
DATE	PROVIDER	LOCATION	COUNT	AGE	DATE	CODE ↓	DATE	CODE	DATE	CODE
8/22/2024		Bryan Community Health Center	4	18	8/20/2024	D1354			8/20/2024	D1354
2/18/2025		Bryan Community Health Center	4	51	12/12/2024	D1354	12/26/2024	D1354	12/26/2024	D1354
11/8/2024		Dr.Gene Wright Community Health Center	1	9	11/8/2024	D1354			11/8/2024	D1354
3/28/2024		Spartan Dental Outreach	1	8	3/28/2024	D1354	1/14/2025	0792T	1/14/2025	0792T
2/18/2025		Tiffin Community Health Center	4	58	4/23/2024	D1354	9/6/2024	0792T	9/6/2024	0792T
2/19/2025		Spartan Dental Outreach	2	13	2/19/2025	D1354			2/19/2025	D1354
5/13/2024		Spartan Dental Outreach	1	11	5/13/2024	D1354			5/13/2024	D1354
2/19/2025		Dr.Gene Wright Community Health Center	2	81	8/13/2024	D1354	2/19/2025	D1354	2/19/2025	D1354
9/3/2024		Dr.Gene Wright Community Health Center	2	7	4/16/2024	D1354	9/3/2024	0792T	9/3/2024	0792T
4/16/2024		Spartan Dental Outreach	1	7	4/16/2024	D1354			4/16/2024	D1354
10/16/2024		Dr.Gene Wright Community Health Center	2	7	4/2/2024	D1354			4/2/2024	D1354
4/16/2024		Spartan Dental Outreach	1	8	4/16/2024	D1354			4/16/2024	D1354
1/30/2025		Dr.Gene Wright Community Health Center	4	14	3/26/2024	D1354	2/18/2025	0792T	2/18/2025	0792T
2/10/2025		Dr.Gene Wright Community Health Center	4	41	1/17/2025	D1354	2/10/2025	D1354	2/10/2025	D1354
11/11/2024		Spartan Dental Outreach	2	13	11/11/2024	D1354			11/11/2024	D1354
4/16/2024		Spartan Dental Outreach	1	9	4/16/2024	D1354			4/16/2024	D1354
2/19/2025		Spartan Dental Outreach	2	6	2/19/2025	D1354			2/19/2025	D1354
9/19/2024		Dr.Gene Wright Community Health Center	2	16	9/4/2024	D1354	9/19/2024	D1354	9/19/2024	D1354
2/19/2025		Spartan Dental Outreach	2	12	2/19/2025	D1354			2/19/2025	D1354

2025 Dental Focus Measures



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**CARIES RISK
ASSESSMENT**



**SDF INITIAL
APPLICATION**



**SDF SECOND
APPLICATION**



**TREATMENT
PLAN
COMPLETION**



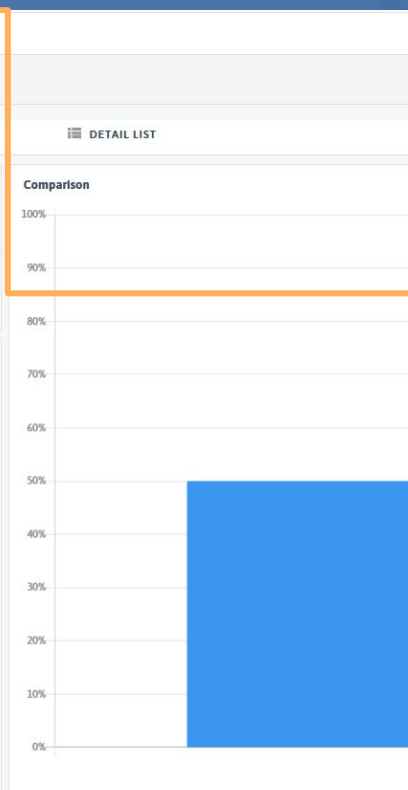
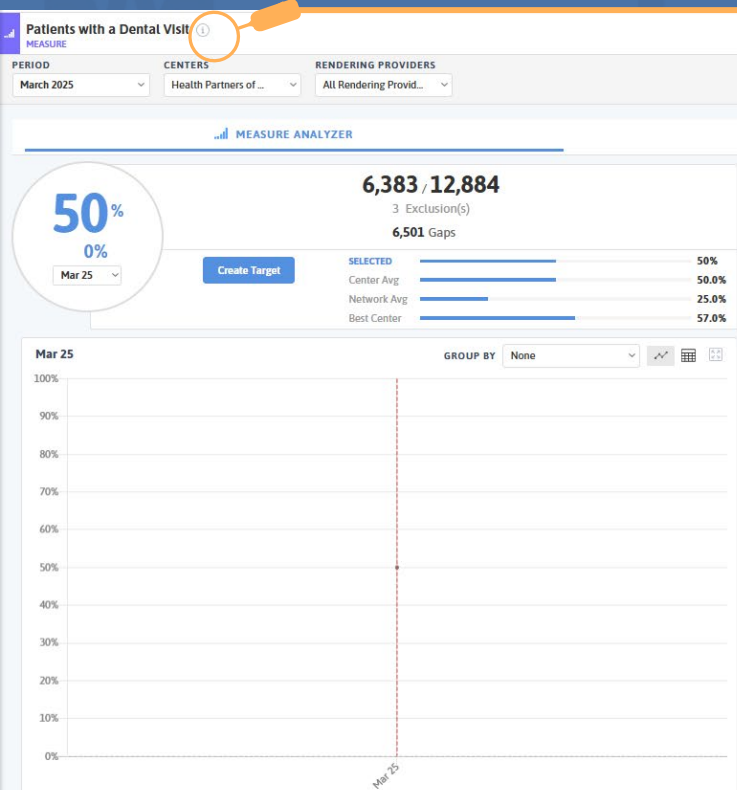
RETENTION

New for 2025

Patients with Dental Visit Measure



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Patients with a Dental Visit

Endorser: Endorser
Steward: Steward

Patients with a qualifying encounter in the dental service line in the last 12 months

Numerator:
Patients with a qualifying encounter in the dental service line in the last 12 months.

Denominator:
Patients with a qualifying encounter in the last 12 months.

- Qualifying encounter (all types) during the last 12 months

Exclusions:

- Patient deceased at any point within the measurement period
- Patient in hospice care at any time during the measurement period

What Lies Ahead?



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Access Teams – Dental Focus

Not just Primary Care

Prevention and Cost

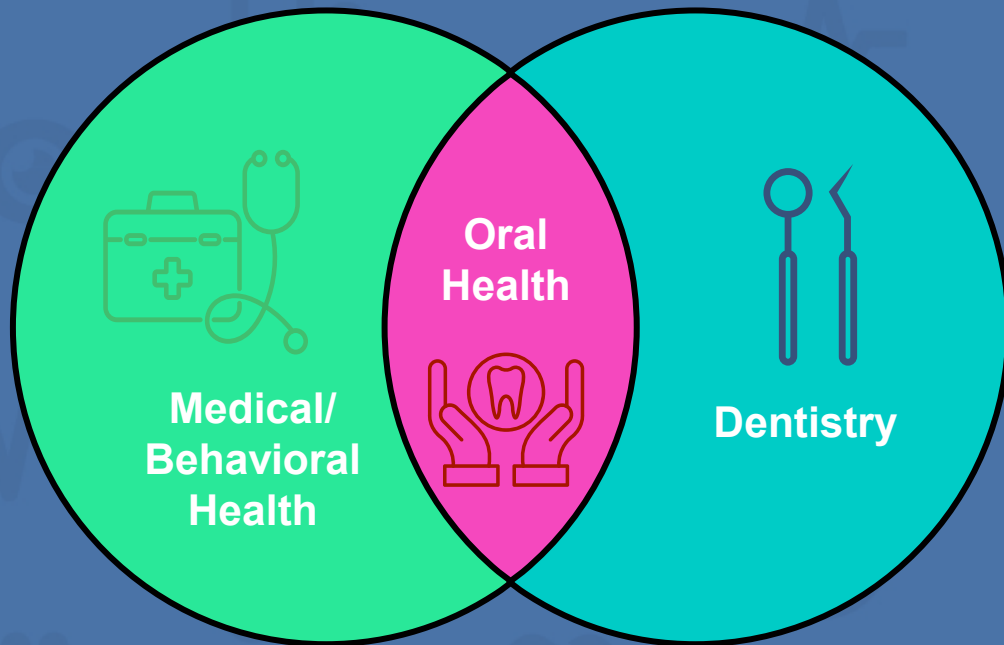
Decrease ED Utilization

Furthered Integration

Primary Care & Behavioral Health

Increase use of Dental Quality Measures

What are our other focus initiatives?



Bringing It All Together



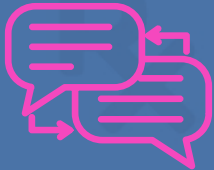
Dental health is essential for comprehensive care and patient wellbeing.



Integrated dental care is more than just “co-location”.



Consider engaging your Dental Director to provide input that encompasses comprehensive patient care.



Does your QI program include dental representation?
Dental focus measures (NOT JUST SEALANTS)

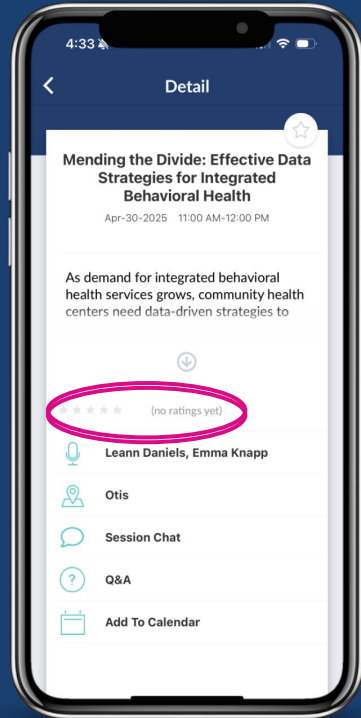
Questions?



We want to hear from you!

Click on the session from your agenda in the conference app.

Click the stars in the center of your screen to rate and provide feedback.



Quick and Easy



Rate the session
and the
speaker(s)



Provide brief
feedback or ideas



Help us continue
to improve

Achieve, Celebrate, Engage!



ACE'd it? Share your DRVS success story and become an Azara ACE!

Show your organization has used DRVS to **A**chieve measurable results, **C**elebrate improvement in patient health outcomes, and effectively **E**ngage care teams and/or patients. Stories should showcase how DRVS helped your organization overcome a challenge, the tools and solutions used to drive improvement and details of the successes that resulted from your initiatives. ACEs should be able to provide examples that quantify quality improvement, cost savings, operational efficiency or patient health improvement.

Benefits:

- Azara will help tell your story and provide a client-branded version for your use
- Potential to create a 2-4 minute video or hour-long Azara-hosted webinar
- Potential to be featured at next year's Azara User Conference
- Win Azara swag!

Submit your success story by completing the form [at this link](#).

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ACE Program



azara2025

USER CONFERENCE

APR 29-MAY 1 | BOSTON, MA

Thanks for attending!

