Study on Operating Rooms for Dental Procedures



Background

- Operating Rooms (ORs) within hospitals and Ambulatory Surgery Centers (ASCs) are utilized by dentists to provide treatment for patients when general anesthesia or moderate sedation are required.
- Dental providers may bring patients to an OR when:
 - The treatment is particularly challenging or frightening
 - A significant degree of treatment is required
 - Local anesthesia will be ineffective, or
 - Behavioral issues preclude treatment
- Many providers in Maryland reported barriers to providing dental care in hospital ORs for pediatric and special needs patients.
 - Credentialing
 - Proof of insurance
 - License verification
 - Additional reviews depending on the policies of the OR facility
 - Lack of OR scheduling minutes and block scheduling opportunities



Background

- During the 2023 session, a cross-stakeholder collaboration was leveraged to try and address the issues.
 - Stakeholders included both hospital and dental representation:
 - Maryland State Agencies
 - Provider Associations
 - Provider Advocacy Organizations
 - Hospital Systems
- FY 2023 and FY 2024 Governor's Budget allocations for Medicaid dental services:
 - \$500,000 for dental education
 - \$20 million to increase dental fees in FY 2023 and FY 2024
 - Ambulatory surgery center (ASC) rate increases for dental procedures
 - Coverage of Silver Diamine Fluoride



House Bill 1146

House Bill 1146 Maryland Department of Health and Maryland Health Care Commission - Dental Services - Survey and Regional Needs Assessment (Chapter 219 of the Acts of 2023) requires MDH to:

- Examine the number of dentists credentialed at each hospital, the average time each hospital takes to credential a dentist, the number of operating room minutes made available to dentists, the utilization rate of operating room minutes by dentists, block scheduling provided to dentists and any stipends hospitals paid for anesthesiology services related to dentists' operating room use;
- Conduct a survey of hospitals to identify the availability of hospital operating resources for dentist use;
- Work with the Maryland Health Care Commission to:
 - Conduct a regional needs assessment for dental procedures that require anesthesia or moderate sedation; and
 - Develop regional plans to ensure the availability of certain operating space for the performance of certain dental procedures and generally relating to dental services.



Partner Organizations

- The surveys, regional needs assessment, and regional plans were assigned to be completed through a collaborative effort between Maryland Department of Health (MDH); Maryland Health Care Commission (MHCC); Maryland Ambulatory Surgery Association (MASA); and Maryland Hospital Association.
- Partners that supported and participated in the weekly calls prior to HB 1146 include:
 - Adventist Health
 - The Children's Oral Health Institute
 - Health and Government Operations Committee, Delegate Peña-Melnyck, Chair
 - Maryland Academy of Pediatric Dentistry
 - Maryland Ambulatory Surgery Association
 - Maryland Dental Action Coalition
 - Maryland Department of Health, Maryland Medical Assistance Program
 - Maryland Department of Health, Office of Oral Health
 - Maryland Community Health Resources Commission
 - Maryland Healthy Smiles
 - Maryland Society of Anesthesiologists
 - Maryland State Dental Association
 - University of Maryland School of Dentistry



Methods

- Maryland Office of Oral Health conducted the survey in consultation with MHA.
- Each agency conducted a survey to gather information about current and future availability of operating rooms and qualified clinical staff to provide needed services, the feasibility of expanding surgical dental services, and other topics to help decipher ways to expand capacity across the State.
- Meetings were held to align the surveys where possible, review survey results, and brainstorm additional solutions.
- Maryland Office of Oral Health and MHCC is conducting the needs assessment in consultation with MHA and MASA.

Next Steps

Within the next two months:

- Work with MHA to clarify the responses provided by the hospitals, including the availability of block scheduling by hospital
- Review and analyze the survey results
- Provide actual utilization numbers from Medicaid
- Map the hospital OR and ASC sites
- Calculate the Medicaid enrollee drive times to receive these dental OR services
- Provide preliminary recommendations

Within the next six months:

 Build out the full needs assessment once we have more data on the delays between authorizations and delivery of service from our Medicaid ASO vendor.

