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Teledentistry may greatly improve access to care

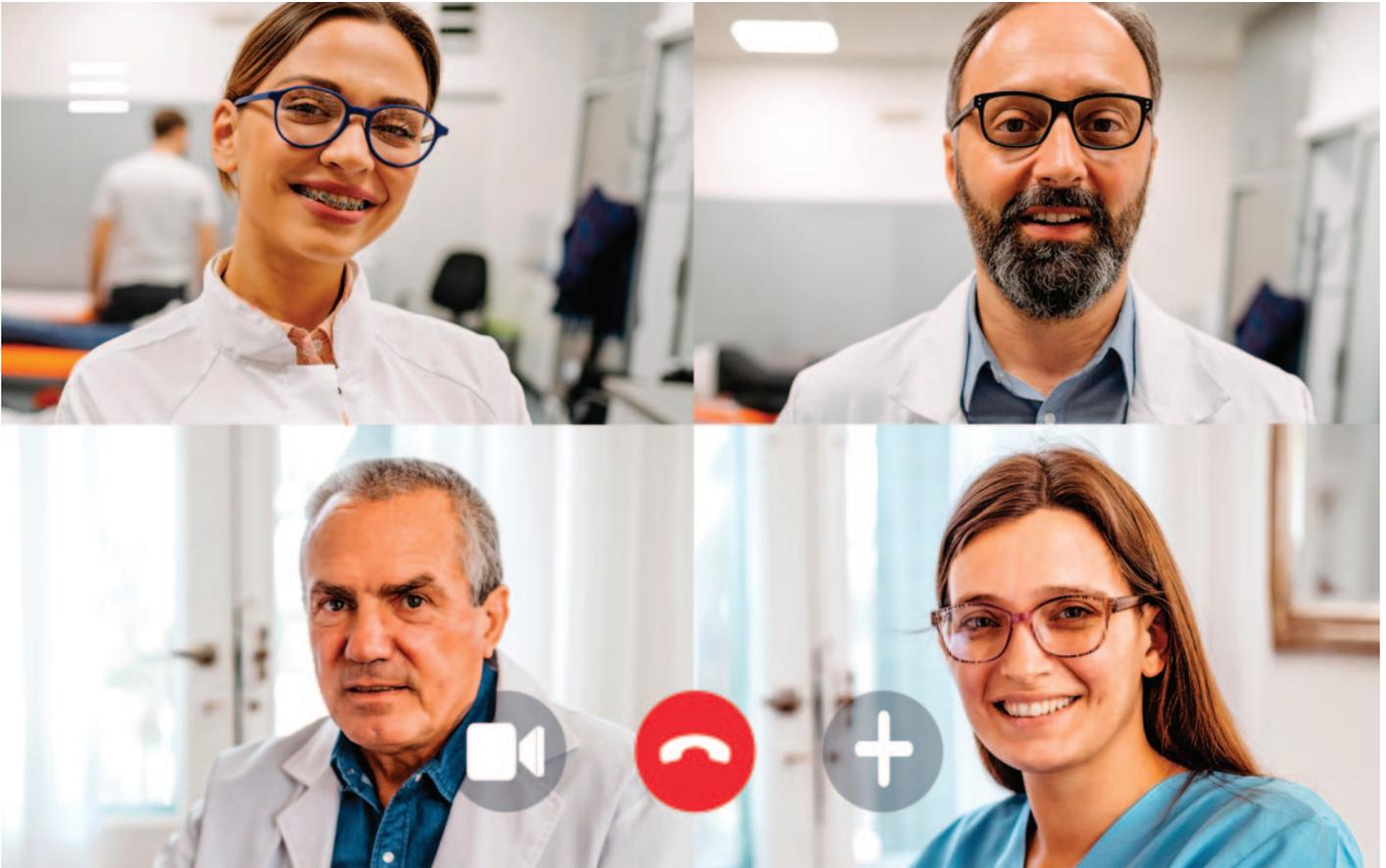


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ILLINOIS GOVERNOR J.B. PRITZKER'S MARCH 19 EXECUTIVE ORDER, found at on.cds.org/pritzker, mandated that health issuers regulated by the Department of Insurance cover the costs of in-network telehealth services at the height of the COVID-19 pandemic.

Some insurers have opted to continue that coverage as the curve has flattened; dentists who employed video chats, phone calls and secure document sharing to keep their patients in good health may choose to permanently incorporate these methods into their regular practice of dentistry.

Under the right circumstances - and with a healthy dose of

patient education - it could greatly improve access to care.

"First, know that a dental provider is always involved. This is not patients doing procedures on themselves or without consultation," Boston dentist Marc Ackerman explained, dispelling the most common misconception about teledentistry. As a practicing dentist and executive director of the American Tele-Dentistry Association (ATDA), he advocates strongly for incorporating these emerging methods into your practice.

Strictly speaking, ATDA defines teledentistry as the use of electronic information, imaging and communication technologies, including interactive audio, video, data communications

as well as storage and forwarding technologies, to provide and support dental care delivery, diagnosis, consultation, treatment, transfer of dental information and education.

It can be done live, in real time, or through the use of the written word or captured images for review at a later time.

“Since the late 1980s, the military has been using these practices between bases when a limited number of doctors were available in combat situations, but really it’s been over the last 10 years that this has become more formalized,” Dr. Ackerman explained.

The applications he describes are wide-reaching. They extend to nursing homes, school-based oral health programs, rural communities, and other vulnerable populations. ATDA estimates that utilization of telehealth services increased from 250,000 patients in 2013 to 3.2 million patients in 2018.

Consider how you triage emergencies with your patients of record Halloween weekend, or the summer softball season.

“If your patient feels like they have cracked a tooth or they have a loose filling, this is a way to discuss what the next step is and route them to the right provider Monday morning,” he said. “You could also prescribe antibiotics or analgesics to control pain over the weekend, until they can get in to see the dentist Monday.”

In other scenarios, a patient of record with cosmetic interests receives a complete exam in office. But a subsequent virtual consultation would allow the dentist to review treatment options and share visuals for the patient to consider. The patient can ask questions of you before you route them to your business manager for information about payment plans.

“Teledentistry provides an encounter to develop the relation-

ship between patient and doctor,” Dr. Ackerman said. “It can be more efficient for the patient who has to juggle work and child care. It comes at a lower cost than a visit to a brick and mortar office in the right circumstances.”

The American Dental Association has several resources online for members considering incorporating teledentistry into their practices, including a *Guide to Understanding and Documenting Teledentistry Events* and an official *Policy on Teledentistry*:

“The treatment of patients who receive services via teledentistry must be properly documented and should include providing the patient with a summary of services. Dentists who deliver services using teledentistry must establish protocols for appropriate referrals when necessary.”

Illinois State Dental Society Director of Government Relations Dave Marsh said SB671, which would have extended Gov. Pritzker’s Executive Order provisions permanently, failed in the May legislative session. It is therefore up to individual carriers whether they cover teledentistry services. Medicaid covers it, but doctors should confirm with their patients’ carriers at the time of service.

For as much effort as the dentist puts into learning about the responsible practice of teledentistry, an equal amount of effort will go into educating patients for this to be successful.

“The most important thing to communicate to your patients is the type of service you will be providing through teledentistry. They can still call your office to ask a question without being charged,” Dr. Ackerman explained. “You’ll be doing a lot of in-office education on the topic of teledentistry to make patients comfortable with it, but the effect for everyone will be a lower cost of care and greater access to care.” ■

The views expressed in this column are those of the writer and not necessarily the opinions of the Chicago Dental Society. CDS presents Practice Smarts, a column addressing practice management issues dentists and staff members experience in the office. Practice Smarts is prepared by Joanna Brown, a freelance journalist. Email suggestions for topics to be covered to joanna@tjbrown.com.

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