

School Sealant Program Gap Analysis Survey (28 programs)

The Oregon Oral Health Coalition K-12 Committee is providing this follow-up to the School Dental Sealant Program Gap Analysis Survey. Please peruse the results listed below and see if another program has found a solution to a challenge you are struggling with. It may also be interesting to see how your program aligns with other programs. We inserted boxes where further information could be found online.

Some common challenges mentioned:

- Producing successful outcomes with hard-to-reach parents
- Finding restorative care
- Accessing insurance information, both Medicaid and private insurance
- Accessing Medicaid Assistors

If you have any of the above concerns and see a survey response below that is of interest to you, please contact Laurie Johnson (laurie.johnson230@gmail.com) and she will facilitate a meeting with the respondent, so you may receive further information.

If you have concerns that were not addressed, please contact Laurie also.

Thank you!

OrOHC K-12 Committee

Survey responses, categorized by themes.

Follow-up after Triage:

- 18 programs provide follow-up with Triage 1
- 28 provide follow-up with Triage 2
- 28 provide parent results forms to go back to the parents
- 28 programs provide most of the follow-up:
 - 22 phone call
 - 2 email
 - 3 text
- 5 utilize school nurses
- 6 utilize school staff
- 6 utilize DCO/FQHC/mobile unit staff
- 3 utilize a resource coordinator

Follow-up with hard-to-reach parents:

- 28 programs provide parent results forms to go back to the parents
- Number of phone calls to parents to follow-up:
 - 11 phone 3 times
 - 5 phone 2 times
 - 4 phone 1 time

- Bring in others in to help
 - 6 consult with school staff
 - 6 consult with school nurse
 - 2 consult with HeadStart (pre-school)
 - 2 consult with teachers
 - 4 consult with their DCO
 - 3 consult with school resource organizations/local dentists
 - 2 consult with home-visiting care coordinators
 - 1 principal makes personal phone calls
 - 2 “use all means of communication”
 - 3 contact child services, when all other means of communication fail
- 1 program mentioned parents complained of the very long wait times to see a dentist

Data Collection:

- 19 programs enter data on paper form
- 18 enter data directly into computer
- 10 enter data on paper form, then transfer to computer
- 2 use iPad entry

Accessing Medicaid and Private Insurance Information:

- 17 programs have difficulties with Medicaid Management Information System (MMIS): Names misspelled; birthdates incorrect; difficult to access information for students that are enrolled in other programs.
- 5 programs have access to both MMIS and to a Clinical Integration Manager (CIM). (CIMs helps providers access information.)
- 3 programs reported using Performance Health Technology (PH Tech).

“PH Tech supports provider sponsored health plans with control over benefits, contracts with providers, medical decisions, care management and population health. We help make personal connections to your members and providers, empathetically and expertly helping to navigate health care systems.” <https://phtech.com/>

- 1 program reported using OneHealthPort

OneHealthPort: “The Single Sign-On offers healthcare professionals an easy and secure way to access the provider portals of major local health plans and hospitals as well as other valuable online services.” <https://www.onehealthport.com/>

- 5 programs report billing private insurance
 - FYI: FQHCs can bill all forms of insurance, including private insurance.
 - La Clinica Happy Smiles (non-profit) has access to some sites and can look up private insurances.
 - Mercy Foundation (non-profit) requests private insurance information from parents.
 - One Community Health (FQHC) can check for insurance online.

- White Bird (non-profit) requests private insurance information on consent forms and accesses the insurance information online.
- Rogue Community Health (non-profit) reported a good experience with Synergy, a software program used by schools.

Synergy: “K-12 Student Data Management Ecosystem Synergy Education Platform (Synergy EP®) unites multiple K-12 data management solutions in one seamless ecosystem, creating systemwide data connections that help improve administrative processes and learning outcomes without the hassle of third-party system integrations.”

<http://www.edupoint.com/Products/Synergy-Education-Platform>

- 2 programs provide free services and do not access insurance or Medicaid
- 10 don’t ask for private insurance information
- 2 reported difficulties with private insurance companies

Medicaid Assisters:

What is an OHP-certified community partner?

An individual (affiliated with a designated organization) who is trained and certified to assist clients for health coverage options, including helping those complete eligibility and enrollment forms. Their services are free to consumers.

Our community partner network

Includes individuals affiliated with a contracted organization (e.g. community-based nonprofit and medical providers) who we train and certify to assist Oregonians with health coverage application and enrollment. Their services are free.

The network includes more than 300 organizations and almost 1,400 application assisters across Oregon. <https://www.oregon.gov/oha/HSD/OHP/Pages/Community-partners.aspx>

- 11 programs said their schools work with Medicaid Assisters
- 14 programs have direct access to Assisters
- All experiences with Assisters have been positive; no bad experiences
- Assisters may only be available to your program if you have an agreement with an organization.

Accessing Restorative Care:

- Challenges
 - 3 programs found parent engagement a challenge
 - 3 heard that parents cannot afford co-pays
 - 3 couldn’t find a provider
 - 5 were unable to follow-up if the student was not a patient of record
 - 4 found specialty care difficult to access (e.g. pediatric, surgical)
 - 6 said the DCO waiting lists were long
- Successes
 - 7 programs use their own network providers

- 7 programs contract with or have written agreements with providers
- 9 programs rely on volunteer dentists or mobile vans
- 3 programs use the ODS Children's Program

Transportation:

- 11 programs have used a transportation service to take children to dental appointments
- 12 have not used a transportation service
- 2 use their own program vehicle
- 2 use local bus services
- 3 were able to use school services for rides
- 3 used CCO services
- 1 used DCO services
- 1 each reported using grant funded services, Dial-A-Ride, RideLine, RideSource, Ride To Care, or RideCare
- Challenges: 1 each reported parents do not understand system, difficulties with coordination, delayed/inconsistent arrival, one parent/one child per ride, multiple children/1 caregiver, or parents required to accompany children.