

**New Haven/Fairfield Counties Ryan White Part A Program  
Oral Health Service Standards**

**ORAL HEALTH SERVICES**

**I. DEFINITION OF SERVICE**

Support for **Oral Health Services** including diagnostic, preventive, and therapeutic dental care that is in compliance with state dental practice laws, includes evidence-based clinical decisions that are informed by the American Dental Association Dental Practice Parameters, is based on an oral health treatment plan, adheres to specified services, and is provided by licensed and certified dental professionals.

**Documentation that:**

- Oral health services are provided by general dental specialists, dental hygienists and auxiliaries and meet current dental care guidelines
- Oral health professionals providing the services have appropriate and valid licensure and certification, based on State and local laws
- Clinical decisions that are supported by the American Dental Association Dental Practice Parameters
- An oral health treatment plan is developed for each eligible client and signed by the oral health professional rendering the services
- Oral Health Services can include but are not limited to, palliative, oral examinations, x-rays, prophylaxis, restorations, and extractions a combination of any of the above as determined by the Planning Council or Grantee under Part A.
  - Eligibility must be updated every six (6) months to include proof of income and proof of residency.

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**II. DESCRIPTION OF SERVICE**

SERVICE	PERFORMANCE MEASURE/METHOD	MONITORING STANDARD	LIMITATIONS
Oral Health Services including diagnostic, preventive, and therapeutic dental care that are in compliance with Connecticut dental practice laws, includes evidence-based clinical decisions informed by the American Dental Association (ADA) Practice Parameters, adheres to specified service, and is provided by licensed and/or certified dental professionals.	<p>Documentation that:</p> <ul style="list-style-type: none"> <li>• Oral Health Services are provided by general dental practitioners, dental specialists, dental hygienists and meet current dental care guidelines</li> <li>• Oral Health professionals providing the services have appropriate and valid licensure and certification, based on Connecticut and local laws</li> <li>• Clinical decisions that are supported by the American Dental Association under Dental Practice Parameters</li> </ul> <p>Oral Health Services can include but are not limited to, palliative, oral examinations, x-rays, prophylaxis, restorations, and extraction or a combination of any of the above as determined by the Planning Council or Grantee under Part A.</p>	<ol style="list-style-type: none"> <li>1. Maintain and provide upon grantee request, copies of current professional licensure and certifications.</li> <li>2. Maintain documentation of clinical decisions that are supported by the American Dental Association and Dental Practice Parameters</li> <li>3. Where applicable, provide policy that defines and specifies the <b>limitations on providing oral health services</b></li> </ol>	
Oral health services are based on an oral health treatment plan.	<p>Documentation of the following:</p> <ul style="list-style-type: none"> <li>• An oral health treatment plan is developed for each eligible client and signed by the oral health professional rendering the services</li> </ul>	<ol style="list-style-type: none"> <li>1. Each client will have a dental chart that is signed by the licensed provider</li> <li>2. Documentation of a treatment plan, with updates as indicated, signed and dated by the licensed provider and in the client dental chart</li> <li>3. Documentation in the client dental chart of</li> </ol>	

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	services provided and <b>any referrals made</b>	
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**IV. ORAL HEALTH CARE SERVICE COMPONENTS**

**Program Outcome:**

- 90% of clients will show improved /maintained oral health during a measurement year

**Indicators:**

- 100% of HIV-infected oral health patients who had a dental and medical health history (initial or updated) at least once in the measurement year.
- 90% of HIV-infected oral health patients who had a dental treatment plan developed and/or updated at least once in the measurement year.
- 100% of HIV-infected oral health patients who received oral health education at least once in the measurement year.
- 90% of HIV-infected oral health patients who had a periodontal screen or examination at least once in the measurement year.
- 75% of HIV-infected oral health patients with a Phase 1 treatment plan that is completed within 12 months.

**Service Unit(s):** Face-to-Face Oral Health Visit

<i>Standard of Care</i>	<i>Outcome Measure</i>	<i>Numerator</i>	<i>Denominator</i>	<i>Data Source</i>	<i>Goal/Benchmark</i>
<b>I. Structure</b>					
Percentage of HIV-infected oral health patients who had a dental and medical health history (initial or updated) at least once in the measurement year.	HIV-infected oral health patients receive a dental and medical health history (initial or updated) at least once in the measurement year.  <b><u>EXCEPTIONS:</u></b> 1. Patients who had only an evaluation or treatment for a dental emergency in the measurement year. 2. Patients who were < 12 months old.	Number of HIV-infected oral health patients who had a dental and medical health history (initial or updated) at least once in the measurement year.	Number of HIV-infected oral health patients that received an oral health service at least once in the measurement year.	<ul style="list-style-type: none"> <li>• Data reports required by HRSA/HAB, such as the Ryan White HIV/AIDS Program Services Report (RSR), may provide useful data regarding the number of patients identified as receiving oral health services.</li> <li>• Electronic Health Record/Electronic Medical Record</li> <li>• Oral health services patient record data abstraction of a sample of records</li> <li>• Provider billing systems may be used; however, this will be dependent on the completeness and accuracy of coding of the procedures of interest.</li> </ul>	100% of HIV-infected oral health patients receive a dental and medical health history (initial or updated) at least once in the measurement year.

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<i>Standard of Care</i>	<i>Outcome Measure</i>	<i>Numerator</i>	<i>Denominator</i>	<i>Data Source</i>	<i>Goal/Benchmark</i>
<b>II. Process</b>					
Percentage of HIV-infected oral health patients who had a dental treatment plan developed and/or updated at least once in the measurement year.	HIV-infected oral health patients receive a dental treatment plan developed and/or updated at least once in the measurement year.  <b><u>EXCEPTIONS:</u></b> 1. Patients who had only an evaluation or treatment for a dental emergency in the measurement year. 2. Patients who were < 12 months old.	Number of HIV-infected oral health patients who had a dental treatment plan developed and/or updated at least once in the measurement year	Number of HIV-infected oral health patients that received a clinical oral evaluation at least once in the measurement year.	<ul style="list-style-type: none"> <li>• Data reports required by HRSA/HAB, such as the Ryan White HIV/AIDS Program Services Report (RSR), may provide useful data regarding the number of patients identified as receiving oral health services.</li> <li>• Electronic Health Record/Electronic Medical Record</li> <li>• Oral health services patient record data abstraction of a sample of records</li> <li>• Provider billing systems may be used; however, this will be dependent on the completeness and accuracy of coding of the procedures of interest.</li> </ul>	100% of HIV-infected oral health patients receive a dental treatment plan developed and/or updated at least once in the measurement year.
Percentage of HIV-infected oral health patients who received oral health education at least once in the measurement year.	HIV-infected oral health patients receive oral health education at least once in the measurement year.  <b><u>EXCEPTIONS:</u></b> 1. Patients who had only an evaluation or treatment for a dental emergency in the measurement year. 2. Patients who were < 12 months old.	Number of HIV-infected oral health patients who received oral health education at least once in the measurement year.	Number of HIV-infected oral health patients that received a clinical oral evaluation at least once in the measurement year.	<ul style="list-style-type: none"> <li>• Data reports required by HRSA/HAB, such as the Ryan White HIV/AIDS Program Services Report (RSR), may provide useful data regarding the number of patients identified as receiving oral health services.</li> <li>• Electronic Health Record/Electronic Medical Record</li> <li>• Oral health services patient record data abstraction of a sample of records</li> <li>• Provider billing systems may be used; however, this will be dependent on the completeness and accuracy of coding of the procedures of interest.</li> </ul>	100% of HIV-infected oral health patients receive oral health education at least once in the measurement year.

Percentage of HIV-infected oral health patients who had a periodontal screen or examination at least once in the measurement year.	HIV-infected oral health patients receive a periodontal screen or examination at least once in the measurement year.  <b>EXCEPTIONS:</b> 1. Patients who had only an evaluation or treatment for a dental emergency in the measurement year. 2. Edentulist patients (complete). 3. Patients who were <13 years.	Number of HIV-infected oral health patients who had a periodontal screen or examination at least once in the measurement year	Number of HIV-infected oral health patients that received a clinical oral evaluation at least once in the measurement year.	<ul style="list-style-type: none"> <li>• Data reports required by HRSA/HAB, such as the Ryan White HIV/AIDS Program Services Report (RSR), may provide useful data regarding the number of patients identified as receiving oral health services.</li> <li>• Electronic Health Record/Electronic Medical Record</li> <li>• Oral health services patient record data abstraction of a sample of records</li> <li>• Provider billing systems may be used; however, this will be dependent on the completeness and accuracy of coding of the procedures of interest.</li> </ul>	100% of HIV-infected oral health patients receive a periodontal screen or examination at least once in the measurement year.
<b>III. Outcome</b>					
Percentage of HIV-infected oral health patients with a Phase 1 treatment plan that is completed within 12 months.	HIV-infected oral health patients receive a Phase 1 treatment plan that is completed within 12 months.  <b>EXCEPTIONS:</b> 1. Patients who had only an evaluation or treatment for a dental emergency in the year prior to the measurement year.	Number of HIV-infected oral health patients that completed Phase 1 treatment within 12 months of establishing a treatment plan.	Number of HIV-infected oral health patients with a Phase 1 treatment plan established in the year prior to the measurement year.	<ul style="list-style-type: none"> <li>• Data reports required by HRSA/HAB, such as the Ryan White HIV/AIDS Program Services Report (RSR), may provide useful data regarding the number of patients identified as receiving oral health services.</li> <li>• Electronic Health Record/Electronic Medical Record</li> <li>• Oral health services patient record data abstraction of a sample of records</li> <li>• Provider billing systems may be used; however, this will be dependent on the completeness and accuracy of coding of the procedures of interest.</li> </ul>	75% of HIV-infected oral health patients receive a Phase 1 treatment plan that is completed within 12 months.

#### **IV. DATA REPORTING**

Part A service providers are responsible for documenting and keeping accurate records of Ryan White Program Data/Client information, units of service, and client health outcomes. Reporting units of service are a component of each agency's approved workplan. Please refer to the most current workplan, including any amendments, for guidance regarding units of service.

Summaries of service statistics by priority will be made available to the Planning Council by the Grantee for priority setting, resource allocation and evaluation purposes.

*The Chart Audit Tool for Dental/Oral Health is attached on the next page*