

Driving Improved Teen Dental Utilization through Quality Improvement Strategies in Rhode Island

Despite a wide array of covered services under Rlte Smiles, Rhode Island's dental plan for children, oral health utilization is low among the state's teen Medicaid beneficiaries. In 2017, only 48 percent of 15-18 year-old Rlte Smile beneficiaries used dental services. To increase the frequency of preventive dental visits for teens, Sadie DeCourcy of Rhode Island's Department of Health (RIDOH) and Samuel Zwetchkenbaum, DDS, MPH, of RIDOH and the Executive Office of Health and Human Services (EOHHS), sought to identify whether Rlte Smiles quality improvement strategies could encourage youth to visit the dentist. In doing so, they learned important lessons about using collaboration to improve the oral health of Rhode Island residents generally.

Background and Overview

When Dr. Samuel Zwetchkenbaum began as Dental Director for both RIDOH and EOHHS in 2016, there had not been a dental director in the state for more than 20 years. He knew it would be important to find partners within and beyond both agencies who had similar expertise and a passion to advance oral health goals. He found that champion in Sadie DeCourcy, RIDOH Program Manager. Recently the pair participated as fellows in the Center for Health Care Strategies [State Oral Health Leadership Institute](#), in which they collaborated to tackle dental underutilization for Rhode Island's low-income youth.

To increase dental utilization for the youth of Rhode Island, Dr. Zwetchkenbaum and Ms. DeCourcy worked closely with Rlte Smiles' managed care plan, run through UnitedHealthcare, in identifying strategies to encourage beneficiaries to regularly see the dentist. Rlte Smiles covers all youth enrolled in Rlte Care born after May 1, 2000. The Rlte Smiles managed care program is designed to: (1) increase access to dental services; (2) promote the development of good oral health behaviors; (3) decrease the need for restorative and emergency dental care; and (4) decrease Medicaid expenditures for oral health care. Dr. Zwetchkenbaum and Ms. DeCourcy used quality improvement processes within their managed care organization (MCO) contract to test outreach efforts to Rhode Island youth.

Through a collaborative effort with UnitedHealthcare, the fellows:

1. Selected a subset of the Rlte Smiles population with lagging utilization rates;
2. Analyzed current MCO quality improvement methods and tools;

IN BRIEF

This case study is a product of the *State Oral Health Leadership Institute (SOHLI)*, an initiative of the DentaQuest Foundation directed by the Center for Health Care Strategies that brings together state Medicaid dental program directors and state oral health program directors to advance shared goals. *SOHLI* is a professional development program that instills participating state pairs with leadership and policy knowledge with a strong focus on cross-departmental partnership. Samuel Zwetchkenbaum, DDS, MPH, and Sadie DeCourcy, recent fellows of the *SOHLI* program, worked together to introduce a collaborative approach to increasing oral health utilization among teens in Rhode Island.

3. Provided comprehensive training to ensure that all stakeholders from the MCO and state understand available quality improvement tools, resources and best practices; and
4. Partnered with UnitedHealthcare to implement new, improved quality improvement methods to achieve maximum impact for the RlTe Smiles youth population.

Following are steps that the fellows undertook as well as future plans for the Rhode Island’s oral health program:

1. Selecting a Target Population and Tool to Maximize Impact

Dr. Zwetchkenbaum and Ms. DeCourcy first narrowed their focus to RlTe Smiles participants ages 15-18. In targeting this population, they specifically sought to reduce high emergency department (ED) use for dental complaints among those in their early twenties. By targeting this population before this transitional age, they hope to reduce the need for future ED use related to oral health problems.

Because the RlTe Smiles program launched in 2006, this 15-18 age cohort is unique in that it has been among the first that has been covered throughout childhood and into teen years. Dr. Zwetchkenbaum, Ms. DeCourcy, and UnitedHealthcare developed a plan to ensure that as youth age out of the program, they receive regular preventive treatments.

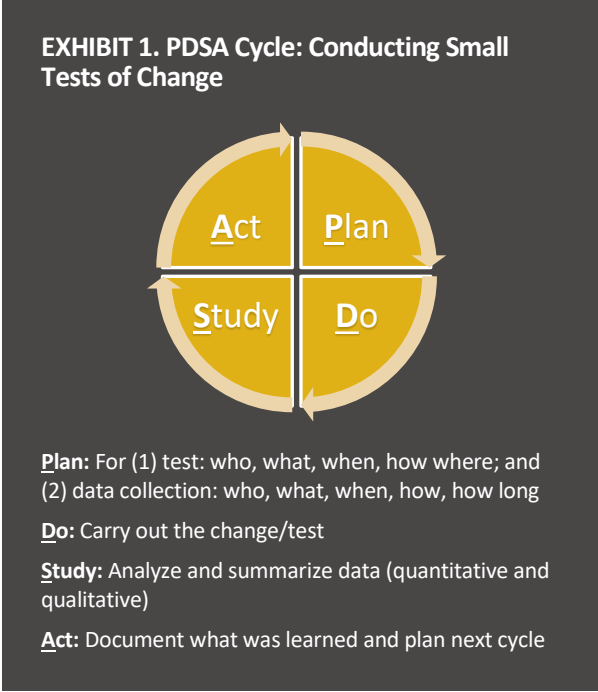
2. Conducting a Training and Development Opportunity for UnitedHealthcare

Through a contract requirement, UnitedHealthcare conducts a variety of quality improvement projects. The fellows sought to use UnitedHealthcare’s plan-do-study-act (PDSA) quality improvement strategy to observe small tests of change (**exhibit 1**) in this population. Small tests of change work best when the population is targeted. By constricting the age range to 15-18, the test has the potential to be more effective. The pair brought the UnitedHealthcare quality improvement team together for a one-day, hands-on training with state staff to collaboratively map out a PDSA quality improvement strategy to identify best practices for effectively reaching the target population.

3. Implementing PDSA Cycles

Following the training, UnitedHealthcare and the fellows developed two strategies to reach the 15-18 year-old age cohort: (1) PawSox Voucher Incentive project; and (2) Community Outreach Events project. PDSA cycles were used to evaluate the effectiveness of each strategy.

The PawSox voucher initiative was designed to support dental providers and Federally Qualified Health Centers (FQHCs) with incentives to bring patients into care. In a four-month initiative, UnitedHealthcare partnered with the Pawtucket Red Sox or “PawSox,” a Triple-A minor league baseball club, to develop an incentive to engage the 15-18 year-old age group to keep a preventive dental appointment. The PawSox provided dental practices with redeemable ticket vouchers to attend home games during the regular season. Patients were given vouchers when they attended regularly scheduled



dental appointments. In addition to the voucher, patients received a certificate indicating that they are now part of the “Power of the Brush Club.” A copy of the voucher was faxed to UnitedHealthcare for documentation. UnitedHealthcare provided participating providers with the current non-compliant gap list of youth age 15-18 who had not visited the dentist in at least 12 to 18 months to target for outreach.

From this initiative, UnitedHealthcare hopes to understand the age, demography, and insurance status of those who received vouchers. They also hope to tally how many vouchers were given out as well as redeemed at PawSox games. Data will be analyzed at the conclusion of the 2018 PawSox season and are not yet available.

The Community Outreach Events strategy sought to determine if increasing communication within the community would assist youth age 15-18 in connecting with a dentist and enhance their knowledge of the value of oral health. Educational materials highlighting diseases of the mouth and how oral health impacts overall health were distributed at community events over a three-month period. Dental kits, including toothbrushes, toothpaste, floss, and relevant materials, were also shared and youth could participate in oral health Q&A sessions.

Seven events were chosen for community oral health outreach, including fairs at parks, schools and PawSox-sponsored events that were likely to include large groups of 15-18 year-olds and their parents. During the events, some community members inquired about which oral health providers accepted their insurance. Patient name and contact information was forwarded to local dental offices, including FQHCs to make a connection. Future data collection will analyze whether patient care was provided and if the community outreach was effective in increasing oral health access.

4. Raising Oral Health Awareness: Rhode Island Lessons

Through their work, Dr. Zwetchkenbaum and Ms. DeCourcy have found valuable partners in each other and UnitedHealthcare. Building on each other’s strengths, the fellows were intentional about making the most of their partnerships to influence a system in which oral health often takes a backseat. “We found a champion in one of our UnitedHealthcare contacts,” Ms. DeCourcy acknowledged. “We needed a champion to take up our cause and help move it forward because we can’t be everywhere. To have [a strong advocate within UnitedHealthcare] and have that line of communication open — and know that she’s as dedicated as we are — that’s been invaluable.” The pair are excited to explore future collaborations with their MCO. Over the past year, it is clear that the relationship between EOHHS, DOH, and UnitedHealthcare has been further cemented. They meet monthly with UnitedHealthcare to discuss what can be done in the community and what partnership opportunities can be leveraged.

Dr. Zwetchkenbaum and Ms. DeCourcy are optimistic that their partnership will continue to be fruitful. They credit their success to understanding how the other person works and leveraging their strengths. In reflecting on his experience working with Ms. DeCourcy, Dr. Zwetchkenbaum stated, “We share the same priorities and that serves as a guide for what to do. Most importantly, we both love Rhode Island.”

ABOUT THE CENTER FOR HEALTH CARE STRATEGIES

The Center for Health Care Strategies (CHCS) is a nonprofit policy center dedicated to improving the health of low-income Americans. It works with state and federal agencies, health plans, providers, and community-based organizations to develop innovative programs that better serve people with complex and high-cost health care needs. To learn more, visit www.chcs.org.

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