

# HAB HIV Performance Measures: Oral Health Services

<b>Performance Measure: Oral Health Services: Oral Health Education</b>	
Percentage of HIV-infected oral health patients <sup>1</sup> who received oral health education <sup>2</sup> at least once in the measurement year.	
<b>Numerator:</b>	Number of HIV-infected oral health patients who received oral health education <sup>2</sup> at least once in the measurement year.
<b>Denominator:</b>	Number of HIV-infected oral health patients that received a clinical oral evaluation <sup>3</sup> at least once in the measurement year.
<b>Patient Exclusions:</b>	<ol style="list-style-type: none"> <li>1. Patients who had only an evaluation or treatment for a dental emergency in the measurement year.<sup>4</sup></li> <li>2. Patients who were &lt; 12 months old.</li> </ol>
<b>Data Element:</b>	<ol style="list-style-type: none"> <li>1. Is the patient HIV-infected? (Y/N)               <ol style="list-style-type: none"> <li>a. If yes, did the patient have a clinical oral evaluation<sup>3</sup> at least once in the measurement year? (Y/N)                   <ol style="list-style-type: none"> <li>i. If yes, did the patient receive oral health education<sup>2</sup> at least once in the measurement year? (Y/N)</li> </ol> </li> </ol> </li> </ol>
<b>Data Sources:</b>	<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>
<b>National Goals, Targets, or Benchmarks for Comparison:</b>	None available at this time.
<b>Outcome Measures for Consideration:</b>	<ul style="list-style-type: none"> <li>• Rate of dental disease and oral pathology in the practice population</li> <li>• Rate of tobacco cessation in the practice population</li> </ul>
<b>Basis for Selection:</b>	
<p>A higher risk of dental caries in patients with HIV may be caused by decreased salivary flow, which may occur as a result of salivary gland disease or as a side effect of a number of medications. Also, some topical antifungal medications have high sugar content, possibly resulting in increased caries susceptibility. The adverse effects of using tobacco should be discussed with the patients. If patient is a tobacco user, cessation should also be discussed. For in-office consumer and provider materials on tobacco cessation programs, dentists can access <a href="http://www.surgeongeneral.gov/tobacco/default.htm">http://www.surgeongeneral.gov/tobacco/default.htm</a>.<sup>5</sup></p>	

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### Oral Health Education

The American Dental Association (ADA) Dental Practice Parameters include the provision of patient education: “The dentist should emphasize prevention and oral disease through patient education which may include oral hygiene instructions...Counseling may be provided regarding tobacco use or other behaviors that may compromise oral health.”<sup>6</sup>

#### US Public Health Service Guidelines:

None.

#### References/Notes:

<sup>1</sup> “Patient” includes patients aged 12 months or older.

<sup>2</sup> Oral health education should include: oral hygiene instruction (ADA CDT code D1330) and smoking/tobacco cessation counseling (ADA CDT code D1320) as indicated. Oral health education may be provided and documented by a licensed dentist, dental hygienist, dental assistant and/or dental case manager. For pediatric patients, oral health education should be provided to parents and caregivers and be age appropriate for pediatric patients.

<sup>3</sup> Clinical oral evaluations include evaluation, diagnosis and treatment planning. Pertinent ADA CDT codes may include the following: D0120-Periodic Oral Evaluation-established patient; D0150-Comprehensive oral evaluation, new or established patient; D0160-Detailed and Extensive Oral Evaluation; D0170-Re-evaluation, limited, problem focused (established patient; not post-operative visit); and D0180-Comprehensive Periodontal Evaluation-new or established patient.

<sup>4</sup> Pertinent ADA CDT codes for patient exclusion may include the following: D9110-Palliative (emergency) treatment of dental pain-minor procedure; and D0140-Limited Oral Evaluation-Problem Focused; however, the diagnostic and treatment procedures associated with emergency evaluation and treatment encounters (including those using these or other ADA CDT codes, as well as other procedures which may not be coded) should be considered when identifying excluded patients.

<sup>5</sup> New York State Department of Health. Oral health care for people with HIV infection. New York (NY): New York State Department of Health; 2001 Dec.: 4.

<sup>6</sup> American Dental Association. Dental Practice Parameters. Patient without clinical signs or symptoms of oral disease. Available at: <http://www.ada.org/prof/prac/tools/parameters/disease.asp>. Accessed on May 8, 2009.