

## Tribal Oral Health Services During COVID-19 Webinar

May 28, 2020

### Frequently Asked Questions

Q.: The first presenter mentioned submitting a code for an initial assessment via tele dentistry and then submitting a separate code for when they are seen, did I hear that correctly and if so could she please clarify?

A: Scenario 1: The initial assessment by the triage agent (dental assistant) or call center would use the screening code D0190 or D0999. The Dentist would use the D9995/D0140.

Scenario 2: The patient completes the virtual and it is determined that the patient must come in to see a dentist that same day. The triage agent would not use a code. The Virtual dentist will use the screening code D0190/D9995. The dentist in the clinic would use the the D0140 code.

Scenario 3: The patient completes the virtual and it is determined that the patient needs a virtual with a specialist. The triage agent would not use a code. The Virtual dentist will use the screening code D0190 only. The specialist would use the D0140/D9995.

Scenario 4: The dentist has patient contact who provides the consultation using audio means only. The dentist would use the screening code D0190.

Only code that is being reimbursed by insurance is D0140. In our experience we have only been reimbursed by UMR for the D9995 code.

*Reference:* Covid -19 Coding and Billing Interim Guidance: Virtual Visits, ADA version May 11.2020.

Q: Do you sterilize tubes after each patient? Or at the end of each shift?

A: We sterilize the nitrous tubing after each patient.

Q: Where is the CDC reference for the 5 uses for N95 masks before discarding?

A: The N95 extended use and limited reuse of N95 mask information that I presented was a combination of the ADA and CDC recommendations. The ADA referenced the 5 uses of N95 mask (PDF) and both the CDC & ADA provided guidance on extended and reuse. This is merely a recommendation while N95 masks continue to be in limited supply. Each dental clinic will have to decide what number they are comfortable with - for one clinic that may be a single use for others it could be 2, 3 up to 5 uses depending on

patient load, patient population and other risk factors. ADA reference:  
[https://success.ada.org/~media/CPS/Files/COVID/ADA\\_Extending\\_Use\\_Of\\_N95\\_Masks.pdf](https://success.ada.org/~media/CPS/Files/COVID/ADA_Extending_Use_Of_N95_Masks.pdf)

CDC reference: Recommended Guidance for Extended Use and Limited Reuse of N95 Filtering Face piece Respirators in Healthcare Settings -  
<https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html#risksextended>

Q: To those presenters who use tele-dentistry/communications/file sharing via work phone, what app are you using? Does it have a firewall already built in to address PHI and HIPAA?

A: We are only sharing patient information through FirstNet. We are having patients text photos only. We do not text patient information to other employees or to patients. At this time we only send a zoom invite via text to dentist and patient. We email everything including photos to share information with other employees. It is secure and has a firewall. We are going to start use MEND(platform) for our virtuals in the next month. Dr. VanBuskirk.

A: We are fortunate that our EHR system, eClinicalWorks (eCW), allows us to do teledentistry and eCW already has the firewall built into the system. We currently are not able to use our phones to access eCW but we may have the capability in the future. Dr. Miller