AAPD 2022 LEGISLATIVE FACT SHEET
ACCESS TO OPERATING ROOMS FOR PEDIATRIC DENTISTS

REQUEST

- Please contact the Centers for Medicare and Medicaid Services (CMS) and ask that the agency move forward this year to address severe oral health disparities affecting certain children and adults, particularly the disabled and those with special health care needs. CMS needs to do two things: set up a new billing code for use by hospitals to improve access to covered dental rehabilitative services and propose in the CY 2024 Hospital Outpatient Proposed Rule (HOPPS) rule that ambulatory surgery centers also be permitted to bill for dental rehabilitative services.

BACKGROUND AND JUSTIFICATION

There is an urgent need for dental rehabilitative services for certain children, disabled, and frail elderly patients who face health disparities and have complex oral disease that was exacerbated by the COVID public health emergency and related hospital backlogs. While the dental services these patients need are usually covered by public or private dental insurance, there is no suitable billing mechanism for hospitals to provide operating room access for these types of dental surgical procedures. Many children and adults with complex dental conditions are facing unfathomable wait times, as long as a year, before receiving treatment. For a disabled or special needs patient who is unable to clearly communicate, dental pain adds to the burden of accommodation and discomfort from the disability.

These complex dental surgeries could be performed in either hospital outpatient departments or ambulatory surgery centers (ASCs) if CMS established an appropriate Medicare hospital billing mechanism. The AAPD, American Dental Association (ADA) and the American Association of Oral and Maxillofacial Surgeons (AAOMS) are in discussions with CMS about establishing a new code for dental cases that would allow hospitals and ASCs to work with dentists to provide these essential services.

In spite of advances in preventive care and reduction in untreated tooth decay, thousands of children under five years of age, many children and adults with special needs and disabilities, and the frail elderly face immense health disparities and disproportionately suffer from significant dental decay (dental caries). If not treated through dental surgical intervention, this disease can result in emergency department visits, life-threatening infection, and hospital admission. Given the time involved for restorative dental surgical procedures, the often-complex equipment, and anesthesia services high-risk patients require, many of whom have unique behavioral challenges, dentists need to provide such surgical services in an operating room utilizing general anesthesia to ensure safe, quality care.

The AAPD has witnessed a major decrease in operating room access over the last decade, a problem which began as hospitals faced hard financial decisions and set different financial priorities. Recent surveys of the pediatric dental community have found that in a majority of states, operating room access for pediatric dentists is a persistent problem, and in some states – particularly rural states – it is a severe problem. Pediatric dentists report that the COVID pandemic resulted in hospitals halting elective procedures, and then were faced with an immense backlogs of medical and dental cases. Too often, pediatric dentists are seeing dental cases fall to the back of the line in terms of prioritization of other routine surgeries. Unfortunately, in most states the problem has continued to worsen even as we remain hopeful that the worst of the COVID pandemic had subsided. For dental patients who await treatment, pain management, antibiotics, and temporary band aid-like approaches to management are the only options—but not fair or equitable ones. Chronic tooth pain and infection affect every aspect of life including the ability to learn, eat and function, and place patients at risk for serious and potentially life-threatening events. AAPD’s pediatric dentist members are unwilling to continue to let this problem persist.

This is a clinical example of a young child facing severe oral disease, illustrating the clinical needs that must be addressed in an operating room setting under general anesthesia, and the complexity of surgical and restorative treatment required.

Dental rehabilitation means achieving the clinical goal or restoring good oral health.

1 Most state Medicaid programs rely on Medicare billing codes for these dental procedures.