



## ODS Community Dental Clinical Guidelines

### I. Policy Statement and Purpose

ODS is committed to providing members with dentally necessary treatment. ODS fulfills this commitment by adopting evidence-based clinical guidelines as company principle for making standard of care decisions. Necessity and appropriateness of dental care and comorbidity conditions are taken into consideration when establishing these guidelines.

### II. Definitions

**Clinical Guidelines-** Systemically developed protocols that are followed to assist in identifying and recommending appropriate courses of dental treatment.

**Dental Necessity-** The procedure should be clinically appropriate for the patient's diagnosed condition. The diagnosis must be consistent with the symptoms and must be delivered within the community standard of care. The treatment shall not be primarily for the convenience of the patient or the provider. Dental necessity can be established by using the appropriate CDT codes defined in the current *Code on Dental Procedures and Nomenclature* and accompanied by documents and supporting evidence when appropriate, such as radiographs, intra-oral photographs, periodontal charting, clearly written chart notes, and reports from physicians or specialists. It is important to note that while a procedure may be dentally necessary, it may not be a covered benefit under the OHP dental plan.

**Poor Prognosis-** The determination of poor prognosis includes the following factors: Radiographic bone height, mobility, pocket depth, crown to root ratio, the presence of active periodontal disease, unresolved periapical pathology, incomplete endodontic therapy, degree of furcation, root proximity, root resorption, short, tapered root anatomy, and presence of fractures or significant caries below the bone.

### III. Procedures

Independent dental consultants are responsible for reviewing chart notes including diagnosis, x-rays, periodontal charting, available photographs, and definitive treatment plans to make clinical determinations for member's dental care/claims.

#### A. Guideline Resources

ODS identifies dental clinical practice guidelines using several widely accepted resources, including the below practice guidelines. These guidelines are applied based on individual circumstances. Nothing in these policies is intended to interfere with a license provider's decision when treating their patients.



Dental Entity	Links to Guidelines
American Dental Association	<a href="https://ada.org/Clinical-Practice-Guidelines-for-Dentistry">Clinical Practice Guidelines for Dentistry (ada.org)</a>
American Dental Hygienists Association	<a href="https://adha.org/016-Revised-Standards-for-Clinical-Dental-Hygiene-Practice.pdf">016-Revised-Standards-for-Clinical-Dental-Hygiene-Practice.pdf (adha.org)</a>
American Academy of Pediatric Dentistry	<a href="https://aapd.org/Oral-Health-Policies-and-Recommendations">Oral Health Policies and Recommendations (aapd.org)</a>
Oregon Administrative Rules (OARs)	<a href="https://data.oregon.gov/Health-Human-Services/Oregon-Medicaid-Covered-and-Non-Covered-Dental-Cod/5t6q-5tkx/data">https://data.oregon.gov/Health-Human-Services/Oregon-Medicaid-Covered-and-Non-Covered-Dental-Cod/5t6q-5tkx/data</a>

**B. Guideline Usage and Approval**

Guidelines are reviewed annually by the ODS Vice President and Chief Dental Officer or it's designee(s), who are licensed dentists.

**C. Dissemination Process**

When the American Dental Association (ADA) updates the Code on Dental Procedures and Nomenclature, or the Oregon Health Authority (OHA) updates the Oregon Administrative Rules (OARs), ODS sends updates to its providers through a variety of communication channels including newsletters, email and letters. ODS also holds annual workshops with its dentists and their staff. Clinical guidelines and CDT code updates are shared with workshop attendees.