**Federal Office of Rural Health Policy (FORHP)**

**Office for the Advancement of Telehealth (OAT)**

**Telehealth Network Grant Program (TNGP)**

**ORAL HEALTH MODULE**

**This module will be used if the SB-TNGP offers oral health services.**

***The information in this section is collected for each student receiving oral health services via telehealth during the measurement period.***

**Data Element Dictionary**

**The data element dictionary documents definitions, allowable values, sources for information, and instructions for abstraction.**

**The data elements are designed to provide the necessary data to calculate the measures. A data collection tool will be used for data entry.**

**Throughout this document there are references to “the measurement period.” There will be two measurement periods, each six months in duration. These will be January 1 – June 30 and July 1 – December 31.**

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| **Data element number:** | Oral Health - 1 |
| **Variable name:** | Referral source |
| **Variable definition:** | Indicates the referral source for this student receiving telehealth oral health services as part of the SB-TNGP |
| **Data collection level:** | Student |
| **Criteria:** | Students who received telehealth oral health services through the SB-TNGP during the measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:□ *Student self-referred*□ *Student was referred by their parent/guardian*□ *Student was referred by a teacher at the school*□ *Student was referred by a guidance counselor at the school*□ *Student was referred by an administrator at the school*□ *Student was referred by SBHC staff or the school nurse*□ *Student was part of a registry indicating services were needed**□ Other – please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* □ *Unknown:* Unable to determine from telehealth log or student visit record |
| **Note for abstractions:** | * If student had multiple encounters or multiple referral sources, indicate the first referral source for this student for telehealth oral health services.
 |
| **Source for definitions:** | Rural Telehealth Research Center  |

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| **Data element number:** | Oral Health - 2 |
| **Variable name:** | Student received a school-based oral health evaluation/screening  |
| **Variable definition:** | Indicates whether or not the student received a school-based oral health evaluation/screening  |
| **Data collection level:** | Student |
| **Criteria:** | Students who received telehealth oral health services through the SB-TNGP during the measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:□ *Yes:* Indicates the student received a school-based oral health evaluation/screening during the measurement period□ *No:* Indicates the student did NOT receive a school-based oral health evaluation/screening during the measurement period |
| **Note for abstractions:** | * This measure refers only to those evaluation/screening services delivered through the SB-TNGP.
* Oral health evaluation/screening is recommended to take place semi-annually; so date of evaluation/screening should be within last 6 months
 |
| **Source for definitions:** | NQF-endorsed measure.American Academy of Pediatric Dentistry (AAPD). <http://www.aapd.org/media/policies_guidelines/g_periodicity.pdf>An example of a school-based oral health evaluation/screening: <https://www.youtube.com/watch?v=OHO-Wp6dFuM>  |

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| **Data element number:** | Oral Health - 3 |
| **Variable name:** | Student received a school-based dental screening and were diagnosed with tooth decay |
| **Variable definition:** | Indicates whether or not the student was diagnosed with tooth decay during a school-based dental screening  |
| **Data collection level:** | Student |
| **Criteria:** | Students who received telehealth oral health services through the SB-TNGP during the measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:*□ Student had school-based dental screening and did NOT have tooth decay**□ Student had school-based dental screening and was diagnosed with tooth decay**□ Student did NOT have school-based dental screening capable of diagnosing tooth decay* |
| **Note for abstractions:** | * This measure is designed to assess outcomes of dental health services
 |
| **Source for definitions:** | California School-Based Health Alliance (SBHA affiliate). Key Performance Measures for School-Based Health Centers. Oakland, CA. |

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| **Data element number:** | Oral Health - 4 |
| **Variable name:** | Student was referred for follow-up oral health services  |
| **Variable definition:** | Indicates whether or not the student was referred for follow-up oral health services  |
| **Data collection level:** | Student |
| **Criteria:** | Students who received telehealth oral health services as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:□ *Yes:* Indicates the student was referred for follow-up oral health services□ *No:* Indicates the student was NOT referred for follow-up oral health services |
| **Note for abstractions:** | * This measure will only apply to students who were diagnosed with tooth decay from a school-based dental screening
 |
| **Source for definitions:** | California School-Based Health Alliance (SBHA affiliate). Key Performance Measures for School-Based Health Centers. Oakland, CA.CHIPRA (Percentage of eligible patients that receive dental treatment services) |

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| **Data element number:** | Oral Health - 5 |
| **Variable name:** | Eligible students who received a sealant on a permanent molar tooth as a school-based dental service |
| **Variable definition:** | Indicates whether or not the eligible student received a sealant on a permanent molar tooth as a school-based dental service |
| **Data collection level:** | Student |
| **Criteria:** | Students who received telehealth oral health service as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:□ *Yes:* Indicates the eligible student received a sealant on a permanent molar tooth as a school-based dental service□ *No:* Indicates the eligible student did NOT receive a sealant on a permanent molar tooth as a school-based dental service□ *Not eligible:* Indicates that the student was not eligible to receive a sealant |
| **Note for abstractions:** | * Eligibility for sealants is ultimately determined by a dentist
* Indications of eligibility are the student having one of the following CDT codes that indicate elevated risk: D0602, D0603, D2140, D2394, D2630, D2720, D2791, D3110, D2150, D2410, D2642, D2721, D2792, D3120, D2160, D2420, D2643, D2722, D2794, D3220, D2161, D2430, D2644, D2740, D2799, D3221, D2330, D2510, D2650, D2750, D2930, D3222, D2331, D2520, D2651, D2751, D2931, D3230, D2332, D2530, D2652, D2752, D2932, D3240, D2335, D2542, D2662, D2780, D2933 D3310, D2390, D2543, D2663, D2781, D2934, D3320, D2391, D2544, D2664, D2782, D2940, D3330, D2392, D2610, D2710, D2783, D2941, D2393, D2620, D2712, D2790, D2950
* Information about elevated risk is available at <https://www.aap.org/en-us/about-the-aap/Committees-Councils-Sections/Oral-Health/Pages/Risk-Assessment-Tool.aspx>
 |
| **Source for definitions:** | Combination of two NQF endorsed measures: receiving a sealant on a permanent first molar tooth for ages 6 to 9 and receiving a sealant on a permanent second molar tooth for ages 10 to 14. AHRQ National Quality Measures Clearinghouse <https://www.qualitymeasures.ahrq.gov/search?q=molar+sealants>  |

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| **Data element number:** | Oral Health - 6 |
| **Variable name:** | Number of telehealth encounters that the student received for oral health |
| **Variable definition:** | Indicates how many encounters for oral health services that the student received that involved telehealth |
| **Data collection level:** | Student |
| **Criteria:** | Students who received telehealth oral health services as part of the SB-TNGP during this measurement period |
| **Skip logic:** | NOTE that the response to this question will be used to determine the extent of ENCOUNTER level data collection. In particular, a high number of oral health visits will trigger instructions to only complete ENCOUNTER level data collection for the first visit each month. |
| **Valid (allowable) values:** | *Any numeric character* |
| **Note for abstractions:** | * An encounter can be of any duration, and it can be scheduled or impromptu.
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| **Source for definitions:** | SB TNGP FOA |

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| **Data element number:** | Oral Health - 7 |
| **Variable name:** | Number of non-telehealth encounters that the student received for oral health in the school setting |
| **Variable definition:** | Indicates how many encounters for oral health services that the student received in the school setting that did not involve telehealth |
| **Data collection level:** | Student |
| **Criteria:** | Students who received telehealth oral health services as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | *Any numeric character or NA indicating that the data are “Not Available”* |
| **Note for abstractions:** | * We understand that this information will not be available in many schools, in which case enter NA.
* An encounter can be of any duration, and it can be scheduled or impromptu.
* Complete only for students who had telehealth behavioral oral services.
* The school setting means the setting where the SB-TNGP operates.
 |
| **Source for definitions:** | Rural Telehealth Research Center |

**Data elements that are collected at the ENCOUNTER level**

***The information in this section will be collected for SB-TNGP telehealth oral health encounters.***

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| **Instructions** | NOTE the following questions are to be answered for each telehealth oral health ENCOUNTER if the number of telehealth oral health encounters for the student during the measurement period is less than 6. If the number of telehealth oral health encounters during the measurement period is more than 6, then answer the following questions for each ENCOUNTER that was the first encounter of the month. |

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| **Data element number:** | Oral Health - 8 |
| **Variable name:** | Type of oral health provider seen via telehealth |
| **Variable definition:** | Indicates the type of licensed provider the student saw for telehealth oral health services during this encounter |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services via telehealth as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | Check ALL that apply. Options for response are:*□ Dentist**□ Dental hygienist**□ Dental therapist**□ Other – please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* □ *Unknown:* Unable to determine from telehealth log or student visit record |
| **Note for abstractions:**  | *
 |
| **Source for definitions:** | Rural Telehealth Research Center  |

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| **Data element number:** | Oral Health - 9 |
| **Variable name:** | Type of oral health service provided via telehealth |
| **Variable definition:** | Indicates the type of telehealth oral health services the student received during this encounter |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services via telehealth as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | Check ALL that apply. Options for response are:□ *Assessment*□ *Screening* □ *Sealant placement*□ *Service or assessment for crisis or emergent oral health need*□ *Other – please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* □ *Unknown:* Unable to determine from telehealth log or student visit record |
| **Note for abstractions:** | *
 |
| **Source for definitions:** | Rural Telehealth Research Center  |

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| **Data element number:** | Oral Health - 10 |
| **Variable name:** | Telehealth technical success |
| **Variable definition:** | Indicates whether or not telehealth technology was administered successfully |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services via telehealth as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:□ *Successful*: The telehealth encounter was technologically successful□ *Unsuccessful*: The telehealth encounter was technologically NOT successful□ *NA:* Not Applicable□ *Unknown:* Unable to determine from telehealth log or student visit record |
| **Note for abstractions:** | * Successful administration means that voice and video quality were sufficient to complete the consultation. Technical drop-outs of the telemedicine system did not occur.
* Unsuccessful administration means that the voice and/or video quality were not of sufficient quality to complete the consultation (e.g. unreachable network, poor image quality, poor audio signal quality).
* If unable to determine whether the telehealth consultation was technically successful, select ‘*Unknown.’*
 |
| **Source for definitions:** | Modified PIMS; Rural Telehealth Research Center  |

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| **Data element number:** | Oral Health - 11 |
| **Variable name:** | Immediate disposition |
| **Variable definition:** | Indicates the student’s immediate disposition at the conclusion of this encounter |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:*□ Student was released to resume regular school schedule**□ Student was released from school to parent/guardian’s care**□ Student was transferred to other health care*□ *Other – please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* □ *Unknown:* Unable to determine from telehealth log or student visit record |
| **Note for abstractions:** |  |
| **Source for definitions:** | Rural Telehealth Research Center |

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| **Data element number:** | Oral Health - 12 |
| **Variable name:** | Follow-up referral |
| **Variable definition:** | Indicates whether or not the student was referred for follow-up care at the end of the encounter |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services as part of the SB-TNGP during this measurement period |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:*□ Student was determined to NOT need referral for follow-up care**□ Student was referred for follow-up return visit to SB-TNGP WITH telehealth**□ Student was referred for follow-up return visit to SB-TNGP WITHOUT telehealth**□ Student was referred to primary care provider outside of school**□ Student was referred to specialty care outside of school**□ Student was referred for other care outside of school*□ *Other – please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* □ *Unknown:* Unable to determine from telehealth log or student visit record |
| **Note for abstractions:** |  |
| **Source for definitions:** | Rural Telehealth Research Center  |

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| **Data element number:** | Oral Health - 13 |
| **Variable name:** | Avoided travel |
| **Variable definition:** | Indicates whether or not the student avoided travel for care because of this encounter |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services as part of the SB-TNGP during this measurement period |
| **Skip logic:** | NOTE the response to this question will be used for skip logic for the next two questions. |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:□ *Avoided travel for this encounter*: The student received services through the SB-TNGP and if they had not received those services during this visit then the student would have had to see a provider elsewhere□ Did not avoid *travel for this encounter*: The student received services through the SB-TNGP but if they had not received those services during this visit then the student would NOT have had to see and travel to a provider elsewhere□ *NA:* Not Applicable□ *Unknown:* Unable to determine from telehealth log or student visit record |
| **Note for abstractions:**  | *
 |
| **Source for definitions:** | Rural Telehealth Research Center  |

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| **Data element number:** | Oral Health - 14 |
| **Variable name:** | Provider if travel was avoided |
| **Variable definition:** | Indicates the type of provider the student would have seen if travel was avoided because of this encounter |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services as part of the SB-TNGP during this measurement period where travel was avoided |
| **Skip logic:** | NOTE that if the response to the previous question indicates that travel was avoided then this question will follow. |
| **Valid (allowable) values:** | Check only one of the following. Options for response are:□ *Dentist*□ *Dental hygienist*□ *Dental therapist*□ *Emergency Department or Urgent Care*□ *Other – please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* □ *Unknown:* Unable to determine from telehealth log or student visit record□ *NA:* Not Applicable |
| **Note for abstractions:** | *
 |
| **Source for definitions:** | Rural Telehealth Research Center  |

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| **Data element number:** | Oral Health - 15 |
| **Variable name:** | Patient travel miles to likely source of care |
| **Variable definition:** | Indicates the number of miles from the school to the type of provider the student would have likely seen if travel was avoided because of this encounter |
| **Data collection level:** | Encounter |
| **Criteria:** | Students who received oral health services as part of the SB-TNGP during this measurement period |
| **Skip logic:** | NOTE that if the response to the previous question indicates that travel was avoided then this question will follow. |
| **Valid (allowable) values:** | *Any numeric character* |
| **Note for abstractions:** | * Enter miles from the School to student’s likely provider as specified in the previous question.
* Use Google maps or similar program to determine travel miles by car one way.
 |
| **Source for definitions:** | Modified PIMS |