



CHW's Work Critical to Urgent Pediatric Dental Surgery

The mission of Black Hills Pediatric Dentistry (BHPD) is to make a significant impact on the dental health of children in the Rapid City community and surrounding areas.

For over 38 years, BHPD has been committed to providing exceptional dental care to children. Additionally, BHPD has extended their commitment beyond teeth and are dedicated to educating families about their overall health and well-being. Through BHPD's Community Health Worker (CHW) program, BHPD is able to create deeper connections with families, providing them with community contacts and a platform to seek assistance.

PATIENT BACKGROUND

A five-year-old child presented at the BHPD clinic with pain and facial swelling. Upon seeing the child, everyone knew they required urgent surgery. The doctor on duty immediately informed the administrator about the situation and signed orders and a referral to request the help of a CHW. The doctor also tasked staff with scheduling emergent surgery for the next day, knowing that if the child did not get immediate surgery, the child would instead need to be transported to the hospital for inpatient infection care.

SERVICES PROVIDED

After the referral and service plan were in place, the CHW met with the child's guardian and discovered what would turn out to be a significant obstacle: the child's Medicaid was inactive. To proceed with surgery, as requested by the doctor, a pre-op health and physical is required. The BHPD CHW attempted to make an appointment at several clinics, and



THROUGH HEALTH SYSTEM NAVIGATION AND RESOURCE COORDINATION, THE BHPD CHW'S WORK PROVIDED SD MEDICAID WITH A \$1 : \$41.60 RETURN ON INVESTMENT.

each time, they refused even to reserve an appointment for the patient without payment or an active Medicaid number.

This child was in extreme pain, crying and holding his head, and telling his mother that his “brain hurt.” The CHW reached out directly to one of their contacts at Medicaid, and she agreed to look into why the patient’s status was inactive. Upon doing some research, she discovered that everything was active except the family’s Medicaid. Because they recently qualified for other public assistance programs, all the necessary, updated information was available in the system, which allowed her to activate the child’s Medicaid. By working together with Medicaid, BHPD was able to help the family avoid a costly visit to the ER and was able to then schedule a pre-op appointment that evening so the child could undergo the emergent surgery the following day.

PATIENT SUCCESSES

Ultimately, because of the collaboration between the CHW and Medicaid, as well as the CHW’s tenacity to find a provider who was willing to conduct an after-hours pre-op health and physical, the doctor was able to complete surgery on the child the next day. While the child was under general anesthesia, he could complete definitive care by extracting the source(s) of infection and providing restorative treatment to all affected areas of concern.

The BHPD CHW program will continue to follow up with the guardian and child to ensure that the child receives continued preventative care, as well as continued education regarding oral health.

RETURN ON INVESTMENT (ROI)

Based on the above success story, the following Return on Investment (ROI) calculations can be estimated for

SD Medicaid’s ROI. Given the two hours of billable time for the CHW providing health system navigation and resource coordination, BHPD was reimbursed \$129.72 for two hours of CHW service provided after the provider referral and service plan were in place ($\$32.43 \text{ per unit} \times 4 \text{ units} = \129.72).

In contrast, had the child not received CHW services (that led to the surgery being able to be performed the following day) SD Medicaid would have faced significant expenses due to an ambulance transport and a hospital stay for the child due to the extent of the infection and continued decline in health. In estimating an ambulance ride and three-day hospital stay alone, SD Medicaid would have had to cover over \$5,000 in care. This low estimate of \$5,396, as outlined below does not include additional tests, labs, medication, or medication administration, all of which would have been likely in this case had the child not received emergency surgery for the infection.

ROI Calculations

$\$129.72 - \text{SD Medicaid Reimbursement vs. } \$5,396 - \text{Ambulance Ride and 3-Day Hospitalization} = \$1 : \$41.60$
ROI. *

ADDITIONAL INFORMATION

BHPD has served the Rapid City and surrounding areas for over 38 years. BHPD’s team of board-certified dentists specializes in complete dental care.

This CHW success story was submitted by Pamm Hoben, Administration for Black Hills Pediatric Dentistry, pamm@bhpdsc.com.

* Hospitalization Rates and Ambulance Rates based on data obtained from Kaiser Permanente and SD Department of Health, Office of Rural Health, March 2023.

