MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST
(revised 08/02/10)

Agenda Title: **Informational Board Briefing on Electronic Dental Records**

Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.

Requested Meeting Date:	11/17/2011	**Amount of Time Needed:**	**20 minutes**
Department:	**Health**	**Division:**	Integrated Clinical Services
Contact(s):	Susan Kirchoff		
Phone:	(503)988-3663 **Ext**. 25870	**I/O Address:**	**160/9**
Presenter Name(s) & Title(s):	Susan Kirchoff, Health Centers Operations Director		

General Information

1. **What action are you requesting from the Board?**

   Informational board briefing on Electronic Dental Records and the positive impact it will have on dental services in Multnomah County. The Health Department will follow this briefing with a budget modification in early December requesting board approval to use $2 million in beginning working capital to finance this project.

2. **Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.**

   The Health Department has been involved with long-term planning and implementation of IT improvements for over 10 years. Previous Boards of County Commissioners have been supportive of this strategy and approved use of Beginning Working Capital (BWC) to fund implementation of Electronic Medical Records 5 years ago. Nationally and locally all the large health systems are going through this process of moving from paper records to electronic records.

   Multnomah County is Oregon's largest single provider of dental services to poor and vulnerable populations. In 2010, the Health Department served 23,791 dental clients providing 59,369 visits.
   - The Health Department's current paper-based dental record system:

- o Does not support medical-dental collaboration and person-centered health care
  - o Is expensive and labor-intensive to gather/report on population-based data
  - o Does not easily enable evaluation of dental providers' quality performance
  - o Causes treatment delays
- The Health Department's primary care and school based health clinics have seen an 8% increase in the number of clients served in addition to quality improvements since electronic medical record (not electronic dental record) implementation

Oral Health as Part of Overall Health
- Oral disease has been linked to cardiovascular disease, diabetes, respiratory disease, and low birth-weight deliveries
  - o Diabetic patients who receive comprehensive oral health care are better able to control their disease and may have better overall health outcomes
  - o Pregnant women who receive oral health care and education during pregnancy are less likely to pass bacteria that cause tooth decay to their children
- A combined electronic record (dental and medical) is necessary for effective collaboration between all members of the health care team to provide the best possible outcome for the patient

Improved Quality of Care
- Enhances the quality of clinical services that can be delivered to the patient
- Promotes enhanced clinical documentation and improved treatment planning
- Increases our ability to evaluate and report on individual and population-based clinical quality, health outcomes and health disparities
- Digital radiology and EDR integration allows us to share clinical information quickly
- Improves the clinical oversight of more than 40 dentists and dental hygienists practicing at multiple MCHD clinics

Increased Access to Direct Clinical Services
- Improved ability to:
  - o Analyze demand for services and match resources to expand access to care
  - o Communicate clinical information internally and externally, for clients' benefit
  - o Recruit and retain dental providers
  - o Supports collaboration and information sharing with our community partners who rely on MCHD for oral health services (e.g., Central City Concern, Wallace Medical Concern, Outside In)
- EMR implementation experience points to sustainable increase in dental clinic users as a result of EDR implementation

Sustainability
- Elimination of use of heavy metal chemicals (silver and lead) for dental X-ray processing (With EDR, dental X-rays are processed digitally, reducing our use of harmful chemicals)
- Reduction of paper and personnel costs required to maintain paper records

Alignment with Current County, State, and Federal Goals
- Health Department's EDR goals align with Chair Cogen's goals for the county:
  - o Prioritize direct services
  - o Strategically manage county assets
  - o Modernize technology that supports our services
- Aligns with Governor Kitzhaber's goals of high-quality, paperless health care technology
- Federal incentives to modernize health care are an OTO opportunity which aligns well with

use of OTO BWC.

3. **Explain the fiscal impact (current year and ongoing).**

   Beginning Working Capital is requested for procurement and implementation. Ability to apply for Medicaid Meaningful Use incentive payment resulting in approximately $1,200,000 over six (6) years for use of certified electronic technology.
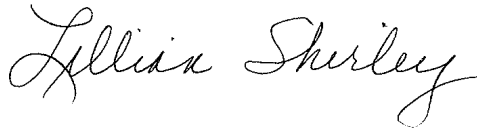
4. **Explain any legal and/or policy issues involved.**

   None identified.

5. **Explain any citizen and/or other government participation that has or will take place.**

   Participation in Centers for Medicare and Medicaid Services (CMS) Electronic Health Record Meaningful Use incentive payment program.

Required Signature

Elected Official or
Department/
Agency Director: *Lillian Shirley*

Date: 10-24-11 KJ/lp