

Preparing for Post-COVID-19 Operations: Dental Practices

In response to the coronavirus disease 2019 (COVID-19) pandemic, many dentists have temporarily closed their practices or reduced in-office services to emergency treatment only. In the weeks and months to come, as the pandemic begins to recede, dentists will likely have questions about how best to reopen. The unprecedented nature of the COVID-19 outbreak might make navigating this process confusing and stressful.

MLMIC Insurance Company (MLMIC) wishes to offer guidance and important actions to consider as you develop your reopening strategy. Although this checklist is not all-inclusive, and practices vary, the information in this document provides a roadmap that you can use as you progress toward reopening and evaluating lessons learned as a result of the pandemic.

MLMIC remains steadfast in our commitment to supporting insureds through this difficult time. Please contact us at (800) 275-6564 with any questions or concerns.

Preparing to Reopen	
<p>Confirm with local public health officials that permitting patient office visits beyond emergencies is allowable. Visit the New York State Dental Association website for information and updates (nysdental.org).</p>	<input type="checkbox"/>
<p>Verify that you have sufficient supplies and medications, either in the practice or readily available to care for your patients:</p> <ul style="list-style-type: none"> • Be prepared for shortages and delays in supply deliveries. • Begin to create an emergency supplies stockpile and establish a rotation schedule. 	<input type="checkbox"/>
<p>Follow the Centers for Disease Control and Prevention (CDC) guidance for personal protective equipment (PPE) and the use of N95 masks and face shields.</p> <ul style="list-style-type: none"> • Use the highest level of PPE available. • If the minimally acceptable combination of a surgical mask and face shield is not available, refer the patient to a clinician who has appropriate PPE. • Consult the American Dental Association's (ADA's) Interim Mask and Face Shield Guidelines. 	<input type="checkbox"/>
<p>Ensure that you have sufficient clinical and nonclinical employees to properly staff the office.</p>	<input type="checkbox"/>
<p>Check on a daily basis for updated information from the CDC and the Occupational Health and Safety Administration (OSHA).</p>	<input type="checkbox"/>
<p>Update your patient portal, website, email, and other communication modes to alert patients that the practice has reopened. Have patients call for appointments to inform initial staffing needs and hours. Depending on need, consider:</p>	<input type="checkbox"/>

<ul style="list-style-type: none"> • Shorter hours. • Longer appointment times. • Weekend hours. • Evening hours. • Just-in-time appointment arrival/parking lot waiting if the practice cannot accommodate social distancing in the waiting room. • Text messaging patients that you are ready for their appointment. 	
<p>Properly clean/sanitize the office before reopening:</p> <ul style="list-style-type: none"> • Review the cleaning vendor contract for expectations. • Identify the cleaning schedule moving forward. • Consider posting patient information signs explaining your sanitization/disinfection practices. 	<input type="checkbox"/>
<p>Follow up on labs and specialist referrals made prior to the closure, results received while office operations were suspended, or services provided via telehealth:</p> <ul style="list-style-type: none"> • Ensure that patients completed, or are in the process of completing, referral appointments. 	<input type="checkbox"/>
<p>Verify with your answering service that all calls/messages have been communicated to the practice. Ensure outgoing messages reflect that the practice is open again and include any changes to office hours.</p>	<input type="checkbox"/>
<p>Prioritize the backlog of patients based on the nature of their condition or need. For example, consider whether any patients:</p> <ul style="list-style-type: none"> • Unsuccessfully attempted to get appointments for borderline emergency conditions. • Have high-risk conditions that make them a priority. • Had telehealth appointments during the closure that helped address their care needs. 	<input type="checkbox"/>
<p>Determine whether you need to reschedule patients for routine care to help accommodate patients who have more urgent needs.</p>	<input type="checkbox"/>
<p>Determine whether billing procedures for dental insurance plans you accept have changed during your closure. These may be routine changes or changes associated with government mandates during the pandemic. Educate staff as needed.</p>	<input type="checkbox"/>
<p>Check for outdated supplies and medications (including sample medications), and discard as necessary.</p>	<input type="checkbox"/>
<p>Verify that all biomedical equipment inspections are up to date (e.g., automated external defibrillators, diagnostic equipment, radiological equipment, etc.).</p>	<input type="checkbox"/>
<p>Review settings on refrigerators used to store medications and testing supplies. Confirm the temperatures have not registered outside the normal recommended range for proper storage.</p>	<input type="checkbox"/>

<p>Notify your professional liability carrier about changes to practice (e.g., resuming full-time service, returning to original scope of practice, or permanently adding telehealth services).</p>	<input type="checkbox"/>
<p>Reinstate any professional liability, general liability, and other relevant business insurance policies and programs that were suspended during the closure.</p>	<input type="checkbox"/>
<p>Confirm readiness of office support service providers (e.g., regular cleaning crew, laundry service, etc.).</p>	<input type="checkbox"/>
<p>Contact your medical waste management vendor to resume waste disposal services.</p>	<input type="checkbox"/>
<h3>Employee-Specific Considerations</h3>	
<p>Establish employee screening processes for COVID-19. The ADA has indicated that effective April 16, FDA-approved tests for COVID-19 are not available to dentists in the United States. Therefore, dentists should be aware that asymptomatic healthy appearing employees cannot be assumed to be COVID-19 free.</p>	<input type="checkbox"/>
<p>Follow CDC's return-to-work guidelines for healthcare workers, including requiring two negative (subsequent) tests for any returning employees who were infected with COVID-19.</p>	<input type="checkbox"/>
<p>Verify that returning employees are in good health, that they were not recently exposed to COVID-19, or that they have been appropriately quarantined before returning. For employees previously exposed to COVID-19:</p> <ul style="list-style-type: none"> • Take their temperature upon entry to the office each day. No-touch thermometers are ideal. • Have the employees wear masks. 	<input type="checkbox"/>
<p>Contact OSHA authorities for mandatory reporting of employee exposure to COVID-19 that results in a positive test. See OSHA's Enforcement Guidance for Recording Cases of Coronavirus Disease 2019 (COVID-19).</p>	<input type="checkbox"/>
<p>Maintain social distancing as necessary. Do not permit congregating in communal areas.</p>	<input type="checkbox"/>
<p>Re-educate staff on infection control protocols and any other essential practice policies/procedures, including:</p> <ul style="list-style-type: none"> • The use of PPE (e.g., donning and doffing techniques). • Hand hygiene (e.g., washing and avoiding face touching) and respiratory hygiene. • Instrument sterilization processes. 	<input type="checkbox"/>
<p>Keep in mind that otherwise healthy providers and staff members may not yet be available to return to work:</p> <ul style="list-style-type: none"> • Consider the stress (personal and professional) they might be experiencing as a result of the pandemic and trying to return to their normal routines. • Consider their child care obligations, including the reopening of daycare centers and schools. 	<input type="checkbox"/>
<p>Ensure that the office has sufficient PPE to allow staff members to perform their job functions in a safe manner.</p>	<input type="checkbox"/>

Address changes in provider staff due to retirement, death, disability, etc. This may result in modifying your patient roster or reviewing which services you can provide in the practice.	<input type="checkbox"/>
Identify whether any providers have decided to permanently limit their practice to part-time. Determine whether it is feasible to restart a full-time practice.	<input type="checkbox"/>
Assess whether the practice can afford to rehire all employees and review available assistance (e.g., Small Business Administration loans or state loans/grants).	<input type="checkbox"/>
Verify that clinical employees still have active licenses, registrations, and/or certificates.	<input type="checkbox"/>
Perform background and employment history checks for any new employees hired as a result of staff turnover associated with the closure.	<input type="checkbox"/>
Thank your team often, and have ad hoc staff meetings to check on your staff and emphasize the importance of employee safety and self-care.	<input type="checkbox"/>
Patient-Specific Considerations	
Create a telephone triage process to prioritize patients' needs for office visits	<input type="checkbox"/>
<p>Consider a general screening process for patients coming to the office with potentially infectious conditions (e.g., those who have flu-like symptoms):</p> <ul style="list-style-type: none"> • Post signage in appropriate languages at the entrance of the office to instruct patients with respiratory symptoms and/or fever to notify staff immediately via telephone before entering the office. • Consider how the practice will ensure social distancing. • Consider taking the temperature of all patients using a “touchless” thermometer. 	<input type="checkbox"/>
Be aware that asymptomatic healthy appearing patients cannot be assumed to be COVID-19 free. (The ADA has indicated that as of April 16, FDA-approved tests for COVID-19 are not available to dentists in the United States.)	<input type="checkbox"/>
Establish a triage system for patients who require office visits. Prioritize appointments for patients who have the lowest risk of COVID-19 and have the greatest clinical care needs.	<input type="checkbox"/>
Establish patient screening processes for COVID-19. Plan to maintain telehealth appointments for any symptomatic patients until they are well for at least 2 weeks.	<input type="checkbox"/>
<p>Determine how best to handle uninsured/previously insured patients. Create a plan to avoid abandonment:</p> <ul style="list-style-type: none"> • If you plan to see them and bill them, consider at what rate. • If you do not plan to see them, ensure you are not violating any contractual or legal obligations by discharging patients. Consult legal counsel related to applicable federal and state laws. • Consider the patient's clinical status. Terminating a relationship at a critical junction in care is not advisable. • Develop a process for providing written notification to patients regarding discharge from the practice. 	<input type="checkbox"/>

Thoroughly document your pandemic circumstances, decisions, and any actions taken to ensure patient care and patient/staff safety.	<input type="checkbox"/>
Preparing the Office	
Establish one-way ingress/egress routes for office visits, if possible.	<input type="checkbox"/>
Consider modifications to the office practice physical plant (e.g., adding a dirty utility room, second exit, or another restroom; evaluating sterilized vs. disposable tools/supplies; etc.) and develop a plan for updates.	<input type="checkbox"/>
Consider front office changes to reduce exposure to commonly touched/used items, such as clipboards, pens, credit card machines, etc.	<input type="checkbox"/>
<p>If possible, install engineering controls (e.g., plexiglass barriers) to reduce or eliminate exposure to infected individuals. Consider:</p> <ul style="list-style-type: none"> • Verifying adequate ventilation. • Laminating paper signage or placing signage in plastic sleeves for routine cleaning. • Adding automatic door openers and air curtains. • Replacing electrical switches with motion sensors, where practical. • Adding touchless faucets, flushometers, soap dispensers, and paper towel dispensers. 	<input type="checkbox"/>
If your practice does not have individual treatment rooms, consider potential changes to treatment areas, such as physical divisions/barriers between treatment chairs or spacing of treatment areas, to accommodate social distancing requirements.	<input type="checkbox"/>
Ensure sufficient supplies of soap, alcohol-based rub, and paper towels are available for reception, waiting areas, patient care areas, and restrooms.	<input type="checkbox"/>
Remove toys, magazines, etc. from the reception waiting area.	<input type="checkbox"/>

At no additional cost, MLMIC policyholders can access 24/7 legal services from the law firm of Fager Amsler Keller & Schoppmann, LLP by calling (855) FAKS-LAW or emailing hotline@FAKSLAW.com.

This document should not be construed as medical or legal advice. Because the facts applicable to your situation may vary, or the laws applicable in your jurisdiction may differ, please contact your attorney or other professional advisors if you have any questions related to your legal or medical obligations or rights, state or federal laws, contract interpretation, or other legal questions.

All references to MLMIC refer to MLMIC Insurance Company, Two Park Avenue, New York, NY 10016.

© 2020 MLMIC Insurance Company. All rights reserved.