

Policies and Procedures for the Hope Medical Outreach Coalition's Dental Program

1. The dental program serves homeless and low-income uninsured individuals who are at 185% or less of poverty for acute dental care (pain relief only at this time) needs.
2. Individuals access the dental program through a referring organization. The referring organization will screen the patient for eligibility and perceived need and will fax a formal referral to the Hope Medical Outreach Coalition Dental Coordinator at (402) 345-2411. Referring organizations with an established relationship with Hope Medical Outreach Coalition for dental services currently include: Charles Drew Health Center, Charles Drew Homeless Clinic, UNMC Family Healthcare and Sharing Clinic, Council Bluffs Community Health Center, Methodist Renaissance Clinic, and Fred LeRoy Health and Wellness Clinic.
3. Upon receipt and review of the referral form, the Hope Medical Outreach Coalition Dental Coordinator will make necessary appointments for the patient at a Hope Medical Outreach Coalition associated dental clinic or in the private office of a participating volunteer dentist.
 - a. If it is determined that the patient does not have an acute problem which falls within the scope of Hope's dental service mission, the referral will be faxed back to the organization with Declined written on it.
 - b. If it is determined that the patient does have an acute problem which falls within the scope of Hope's dental service mission, the Dental Coordinator will then notify the referring organization by fax of the time, date and location of the patient's appointment.
4. It is the responsibility of the referring organization to provide and confirm the appointment information with the patient, to stress the importance of keeping the appointments, to make arrangements for transportation for dental services and to arrange any necessary interpretation needs for the patient.
 - a. A parent or guardian must accompany all children under the age of 18 to their appointments.
5. If the patient is unable to make the appointment, it is the responsibility of the referring organization to call the participating Hope dental clinic or office and the Hope Medical Outreach Coalition Dental Coordinator to cancel the appointment.
6. If the patient misses the first appointment, the patient will not be rescheduled with that volunteer dental provider. The Hope Dental Coordinator will reappoint the patient with another dental provider. If the patient misses a second appointment, the patient will automatically be dropped from the Hope Medical Outreach Coalition Dental Service Program.
7. If the referring organization has any questions about scheduled appointments, they can contact the Hope Medical Outreach Coalition Dental coordinator at (402) 345-2400 ext. 211.

The patient is not to contact Hope Medical Outreach Coalition directly; they should direct their contact through the referring organization.
8. The patient will be required to pay \$10.00 as a co-pay at the time of each dental visit. Co-pays will not be required of homeless patients.
9. Funds are available to pay for prescriptions, but these funds are extremely limited. Participating dental clinics and providers can contact the Hope Medical Outreach Pharmacy for prescription needs at (402) 502-5832
10. It is the responsibility of the participating volunteer dentist to maintain his/her own malpractice insurance in accordance with State law.