

# Tool- Dentures Policy and Procedure Checklist

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## **Tool: Dentures Policy and Procedure Checklist**

### **§ 483.55(a)(3) (Phase II implementation) (Dental Services SNF, NF and Nursing Services)**

(A facility) Must have a policy identifying those circumstances when the loss or damage of dentures is the facility's responsibility and may not charge a resident for the loss or damage of dentures determined in accordance with facility policy to be the facility's responsibility

### **§ 483.55(a)(4) (Phase I)**

(A facility) Must if necessary or if requested, assist the resident;

(i) In making appointments; and

(ii) By arranging for transportation to and from the dental services location and

### **§ 483.55(a)(5) (Phase II implementation)**

(A facility) Must promptly, within 3 days, refer residents with lost or damaged dentures for dental services. If a referral does not occur within 3 days, the facility must provide documentation of what they did to ensure the resident could still eat and drink adequately while awaiting dental services and the extenuating circumstances that led to the delay.

## **CMS Definitions**

**Chewing Abnormalities** – Many conditions of the mouth, teeth, and gums can affect the resident's ability to chew foods. For example, oral pain, dry mouth, gingivitis, periodontal disease, ill-fitting dentures, and broken, decayed or missing teeth can impair oral intake

**Dental Condition Status** refers to the condition of the teeth, gums, and other structures of the oral cavity that may affect a resident's nutritional status, communication abilities or quality of life.

**Emergency Dental Services** includes services needed to treat an episode of acute pain in teeth, gums, or palate; broken, or otherwise damaged teeth, or any other problem of the oral cavity by a dentist that required immediate attention.

**Oral Hygiene** means maintaining the mouth in a clean and intact condition and treating oral pathology such as ulcers of the mucosa. Services to maintain oral hygiene may include brushing the teeth, cleaning dentures, cleaning the mouth and tongue either by assisting the resident with a mouth wash or by manual cleaning with a gauze sponge; and application of medication as described



**Prompt Referral** means within reason, as soon as the dentures are lost or damaged. Referral does not mean that the resident must see the dentist at that time, but does mean that an appointment (referral) is made, or that the facility is aggressively working at replacing the dentures

**Routine Dental Services** means an annual inspection of the oral cavity for signs of disease, diagnosis of dental disease, dental radiographs as needed, dental cleaning, fillings (new and repairs) minor dental plate adjustments, smoothing of broken teeth, and limited prosthodontic procedures, e.g., taking impressions for dentures and fitting dentures.

### **Purpose and Intent of Dentures**

To ensure that the facility has integrated a system for assisting the resident in obtaining necessary repair or replacement of damaged or lost dentures timely to meet the quality of care of the resident. In addition, the facility will outline the process and circumstances for responsibility for financial replacement of dentures.

To assure that the individual facility has followed all the required steps for the development and implementation of a system for dentures in accordance to the new Requirements of Participation (RoP), the following checklist captures specific action items for successful completion. The far left column represents the actual Requirements of Participation (RoP) language and the right column indicates specific leadership strategies for successful completion and implementation of the revised RoP. When preparing updated policies and procedures, it is recommended to include actual RoP language as applicable. Please note that CMS has not issued its interpretative guidance for the new Requirements of Participation (RoP), therefore additional updates may be necessary once the guidance is released.

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**Suggested Checklist:  
Dentures  
Program and Policy and Procedure**

Regulation	Recommended Actions
<p><b>§ 483.55</b> – Areas highlighted in yellow depict Phase II implementation – all other areas are Phase I</p> <p><b>§ 483.55 (F411) Dental Services</b> The facility must assist residents in obtaining routine and 24-hour emergency dental care.</p> <p><b>§ 483.55(a) Skilled Nursing Facilities</b> A facility-</p> <p><b>§ 483.55(a)(1)</b> Must provide or obtain from an outside resource, in accordance with § 483.70(g) of this part, routine and emergency dental services to meet the needs of each resident</p> <p><b>§ 483.55(a)(2)</b> May charge a Medicare resident an additional amount for routine and emergency dental services;</p> <p><b>§ 483.55(a)(3)</b> (A facility) Must have a policy identifying those circumstances when the loss or damage of dentures is the facility’s responsibility and may not charge a resident for the loss or damage of dentures determined in accordance with facility policy to be the facility’s responsibility</p> <p><b>§ 483.55(b)(4)</b> Must have a policy identifying those circumstances when the loss or damage of dentures is the facility’s responsibility and may not charge a resident for the loss or damage of dentures determined in accordance with the facility policy to be the facility’s responsibility</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Review, revise and implement the Dentures Policy and Procedures in accordance with the new RoP.</li> <li><input type="checkbox"/> Review policy to determine if it contains provision for resident to access routine and emergency dental services.</li> <li><input type="checkbox"/> Review policy to describe instances to charge a Medicare resident an additional amount for routine and emergency serviced. In addition, review the policy for identification of circumstances when the loss or damage of dentures is the facility’s responsibility.</li> </ul>

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Regulation	Recommended Actions
<p><b>§ 483.55(a)(4)</b> (A facility) Must if necessary or if requested, assist the resident;            (i) In making appointments; and            (ii) By arranging for transportation to and from the dental services location and</p>	<p><input type="checkbox"/> Review facility policy and procedure to identify if it includes assistance with transportation arrangements for dental appointments.</p>
<p><b>§ 483.55(a)(5)</b> (A facility) Must promptly, within 3 days, refer residents with lost or damaged dentures for dental services. If a referral does not occur within 3 days, the facility must provide documentation of what they did to ensure the resident could still eat and drink adequately while awaiting dental services and the extenuating circumstances that led to the delay.  <b>§ 483.55(b) (F412)</b>  <b>§ 483.55(b)(3)</b> (A facility) Must promptly, within 3 days, refer residents with lost or damaged dentures for dental services. If a referral does not occur within 3 days, the facility must provide documentation of what they did to ensure the resident could still eat and drink adequately while awaiting dental services and the extenuating circumstances that led to the delay.</p>	<p><input type="checkbox"/> Review and revise, if indicated, policies and procedures to include prompt (within 3 days) referrals for lost or damaged dentures and if referral is not feasible within the 3 days, identification of assessment process and approaches implemented documented to verify resident is able to eat and drink adequately until able to visit the dentist.</p>
<p><b>§ 483.55(b)(5)</b> Must assist residents who are eligible and wish to participate to apply for reimbursement of dental services as an incurred medical expense under the State Plan</p>	<p><input type="checkbox"/> Review and revise facility policy and procedure on dentures to include assistance provided to eligible residents to apply for reimbursement of dental services under the State Plan.</p>
<p><b>§ 483.10(i)(2) (F253)</b> Housekeeping and maintenance services necessary to maintain a sanitary, orderly, and comfortable interior (Interpretive Guidelines)</p>	<p><input type="checkbox"/> Review and revise facility policy and procedure for cleaning and storage of resident dentures.</p>

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Regulation	Recommended Actions
<p>“Sanitary” includes, but is not limited to, preventing the spread of disease-causing organisms by keeping resident care equipment clean and properly stored. Resident care equipment includes toothbrushes, dentures, denture cups, glasses and water pitchers, emesis basins, hair brushes and combs, bed pans, urinals, feeding tubes, leg bags and catheter bags, pads and positioning devices.</p>	
<p><b>§ 483.20(b) Comprehensive Assessments</b> (1) Resident Assessment Instrument. A facility must make a comprehensive assessment of a resident’s needs, strengths, goals, life history and preferences, using the resident assessment instrument (RAI) specific by CMS. The assessment must include as least the following: (xi) Dental and nutritional status “Dental condition status” refers to the condition of the teeth, gums, and other structures of the oral cavity that may affect a resident’s nutritional status, communication abilities, or quality of life. The assessment should include the need for, and use of, dentures or other dental appliances.</p>	<p><input type="checkbox"/> Review and revise, if necessary, the policy and procedure for Comprehensive Assessments to include Dental and Nutritional Status, identifying the need for and use of dentures and oral assessment to determine if dentures are fitting well and in good repair, for inclusion.</p>
<p><b>§ 483.24(a)(2) (F312)</b> A resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming and personal and oral hygiene. “Oral hygiene” means maintaining the mouth in a clean and intact condition and treating oral pathology such as ulcers of the mucosa. Services to maintain oral hygiene may include brushing the teeth, cleaning dentures, cleaning the mouth and tongue either by assisting the resident with a mouth wash or by manual cleaning with a gauze sponge; and application of medication as prescribed.</p>	<p><input type="checkbox"/> Review and revise facility policy and procedure for cleaning and storage of resident dentures to include assessment of resident ability to assist with denture care.</p>

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Regulation	Recommended Actions
<p><b>§ 483.25(g) (F325)</b> Assessment Chewing abnormalities – Many conditions of the mouth, teeth, and gums can affect the resident’s ability to chew foods. For example, oral pain, dry mouth, gingivitis, periodontal disease, ill-fitting dentures, and broken, decayed or missing teeth can impair oral intake. Functional Factors – Based on the comprehensive interdisciplinary assessment the facility provides the necessary assistance to allow the resident to eat and drink adequately. A resident with functional impairment may need help with eating. Examples of such interventions may include, but are not limited to: ensuring that sensory devices such as eyeglasses, dentures and hearing aids are in place;</p>	<p><input type="checkbox"/> Review and revise, if necessary, the policy and procedure for Comprehensive Assessments to include Dental and Nutritional Status, identifying the need for and use of dentures and oral assessment to determine if dentures are fitting well and in good repair, for inclusion.</p>

The below areas serves as a cross reference for facility leaders to conduct addition policy and procedure review across departments to incorporate the changes set forth in **§ 483.55 (Dental Services) Dentures**. This listing is not all encompassing however should serve as a resource for leaders as they update their internal policies, procedures and operational processes.

Cross Reference

- CMS Definitions
- Employee Orientation
- Employee Performance Evaluations
- Dental Services
- Facility Transpiration Services
- Resident Rights
- Admission Process and Readmission Process
- Annual Training Requirements
- Facility Resource Assessment
- Resident comprehensive assessment
- Resident comprehensive care planning
- Sanitation and Infection Control
- Housekeeping
- Quality Assurance and Performance Improvement
- Staff Training and Education

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