

Division of Public and Behavioral Health Advisory Committee on the State Program for Oral Health MINUTES

DATE: Friday, June 16, 2023 TIME: 9a.m.

Meeting Locations

- This is a virtual meeting and there is no physical location to attend.
- Microsoft Teams meeting
- Click here to join the meeting
- Call in
 - 0 775-321-6111
 - Phone conference ID: 827 451 348#

Note: Agenda items may be taken out of order, combined for consideration, and or removed from the agenda at the chairperson's discretion.

The meeting was called to order at 9:02 A.M.

1.) Call to Order and Roll call – Jannette Gomez, State Public Health Dental Hygienist

Committee Members Present:

Dr. Lisa Collier, DDS, Council Chair

Ms. Terri Chandler RDH

Dr. Bryce Putnam, DMD

Ms. Lynn Short RDH, MPH

Dr. Jose Cucalon Calderon MD, FAAP

Dr. Tara Van Orden, Commander, DMD, MPH

Ms. Jessica Woods RDH, MPH

Ms. Breanna Taylor RN, MSN

Ms. Jennifer Bradley

Excused:

Dr. Whitney Bryant DDS, MBA, Vice Council Chair

Dr. Tina Brandon Abbatangelo DMD

Dr. Catherine McCarthy MD, FAAFP

Mr. Ben Prohaska

Department of Health and Human Services Staff:

Dr. Keith Benson- Dental Health Officer, DHCFP

Tanya Benitez- Social Services Program Specialist 2 DHCFP



Ms. Jannette Gomez, RDH, BSDH, Nevada State Public Health Dental Hygienist, DPBH

2.) PUBLIC COMMENT

Public testimony under this agenda item may be presented by computer, phone or written comment. Due to time considerations, each individual offering public comment will be limited to not more than **three (3)** minutes.

No public comment

3.) Review and possible approval of meeting minutes from February 17, 2023 - Action Item

THERE WAS A MOTION TO APPROVE THE MEETING MINUTES OF FEBUARY 17, 2023, BY DR. VAN ORDEN. THERE WAS A SECOND TO THE MOTION BY MS. JENNIFER BRADLEY. MOTION CARRIED UNANIMOUSLY.

4.) Update of Oral Health Program, including the Nevada Oral Health State Plan Evaluation Plan and current projects. Informational – Jannette Gomez, Nevada Public Health Dental Hygienist, Division of Public and Behavioral Health

We have wrapped up the 3rd grade BSS here in the north. Special thanks to Dr. Putnam for allowing his hygienists to help Dr. Benson and I screen 4 schools in Elko. We had a great return of consent forms thanks to the school nurses. And thank you Bre for connecting us to all the schools to make this a successful BSS so far. Clark County School District has approved the consent form and Dr. Demopolous will be implementing the BSS in the south with UNLV students. The screenings will be complete by December of this year and we will have our report shortly after. The Oral Health Program has collaborated with the Chronic Disease Quality Improvement department. Dr. Pai drafted an evaluation plan for the state plan which I will share with the committee after today's meeting. Dr. Benson and I have decided to address the state plan on a yearly basis, with evaluation occurring quarterly. We will update the committee on the progress we make addressing the state plan objectives at the AC4OH meetings. We will start with the low hanging fruit and as we move forward to some of the more challenging objectives we will lean on the AC4OH for support. One of the objectives as we all know was to develop a surveillance plan. Dr. Benson was able to connect us with the Office of Analytics to start developing an Oral Health Dashboard so that we can keep track of statewide oral health data. We are both very busy with the HRSA Oral Health Workforce grant .For those of you that may not know, Dr. Capurro has left her position. Dr. Benson is now the project director of the grant. Through ARPA funding we hired Lynn Short as sealant coordinator to help develop the RFP for the funding to school based programs- Lynn will provide an update of the program.



- **5.)** Nevada Medicaid Dental Benefits and American Rescue Plan Act (ARPA funding). **Informational Dr. Benson**
- Good morning, everyone. I would like to start off by talking a little bit about what Jannette said with the Office of Analytics. We have yearly reports that give a lot of Medicaid oral health information. We recently talked to the Office of Analytics and what I am really campaigning for is toe get oral health into the DHHS dashboards for the state. For instance, we have dashboards for infectious disease, mortality, and population demographics. I think that would be a great place to stick oral health data from not only Medicaid, but statewide including the BSS, BRFSS etc. on the main page. I will switch gears, and talk about the new program we have through ARPA funding and it is for recipients that reside on our ID waiver that is the intellectual and developmental disability waiver in this state, there is approximately 3,000 recipients on this waiver. On January 1st Medicaid released new dental benefits that are fairly comprehensive, \$2,500. Usually we don't have a limit, but through ARPA funding we had to place one there. These are mostly comprehensive dental benefits and we are able to make the reimbursement for these medical benefits 10% higher than straight Medicaid rates. And so we cover preventative oral surgery, of course, and even endodontics. We did find that we were missing a few dental codes that are commonly kept, so we are adding a few. For instance, 4342 scaling and root planning as able to add full mouth scaling and presence of generalized inflammation for 4346 perio maintenance fluoride varnish sealants and sealant repair. And I'm also excited that we're also going to be adding five dental case management codes. I think most of us are familiar, but these codes include care coordination, patient education and there's a new one that we're trying to develop a rate for which is patient with special health care needs and these what I envision is to be able to add this code onto your procedure in order to make up for some of the time and effort that a lot of these folks need for certain, you know, getting uncomfortable in the chair if you're going to do d visits just to desensitize the patient, to see if you can work with them in a traditional office, things like that. We are having trouble finding providers in Northern Nevada who will see adults who need dental care under dental anesthesia. Please let me know if you know of any providers for Northern Nevada. CMS is likely to approve our 1115 Waiver by fall of 2023. That would 5 dental encounters for qualifying members with a diagnosis of type 1 or type 2 diabetes serviced in the FQHCs. We also had some success in the legislative session with a 5% increase for dentists and 5% increase for physicians. Any questions about that at all?

Dr. Lisa Collier- Is the limitation still in place for care coordination codes or motivational interview codes as they are through Liberty?

Dr. Benson- This program is fee for service so it goes through a different modality. You just have to bill through the fee for service portal and I will say that I don't believe it is



that restrictive. If you wanted to bill two of those case management codes at the same time, our system would let you do that.

Dr. Putnam: I think the data dashboard is really good opportunity for us and if that's something we can all do as a collective group so that we have different accountabilities. So if we put it with them on the dashboard, then it tends to get updated a littler better when you have shared accountability through the state and we will have documentation throughout the years. Where we just did this as far as our comprehensive state plan, if it is 10 years then you will have documentation of all those things that we might want to keep track of for a decade, and then you have a record of trends. So I think it is a fair ask for us to put that on the dashboard so it helps with the upcoming decade when we have to the state plan again or if they change in 5 years, we will make sure that data is being captured. This will help our cause for future funding.

Jessica Woods: Will there be plans in the future to expand the 1115 Waiver outside of FQHCs to offer that coverage?

Dr. Benson: This is a demonstration waiver, so what we are doing is trying to demonstrate that there is a cost neutrality piece to it. So by providing these 5 encounters to folks with diabetes, it will offset costs and be neutral to the state and federal government.

6.) Update on American Rescue Plan Act (ARPA) funding for school based oral health programs. **Informational- Ms. Lynn Short**

The Department of Health care, finance and policy in the Medicaid Dental Division, we're given permission to use \$2.6 million to enhance school based dental sealant and fluoride varnish programs throughout the state as well as to expand to new areas and to new grades. We developed an RFA or request for applications which was sent out around the second week of May. I believe maybe the third week and the deadline for receiving those applications is 2 weeks from today, which would be Friday, June 30th. It's a very simple application, providing information in regards to where the expansion might be or where a new program may be developed. We're trying to focus on rural communities and or Title 1 underserved schools and populations with this particular funding. We do have so each grantee would be receiving up to \$70,500 to expand or initiate a school based sealant program throughout the state or in the state, and supplemental funding can be requested. We don't guarantee that supplemental funding, but we do strongly encourage supplemental funding to to be requested as part of the application. Again, the link that I included includes the RFA. It includes a fact sheet which I had included in all of those emails that I've been sending out. As well as in audio



recording of a PowerPoint presentation that I had given. So I gave two of those about two weeks ago to inform people about this. We already have received some applications already, even though the deadline we have two more weeks, so it's not too late to consider applying for your particular community in any sort of school programs that you might be applying for in the funding is open to be implemented school based sealant programs in the state. Any Medicaid providers, any public health endorsed dental hygienist and they might be able to use the funding community, health centers, nonprofit organizations, county public health departments, tribal organizations, any of them are more than welcome to apply for the funding.

7.) Organized dentistry update from the Nevada Dental Hygienists' Association. Informational – Fei Yu

Well, I would like to use this opportunity to give an update of the Nevada Dental Hygienists Association first. The association we just had our Q3 meeting on June the 12th and just had its first CEO of a series of live webinar on Saturdays. We still wish to host an in person CE but need help finding an affordable venue. I would love suggestions for venues in Reno and Las Vegas. The board of trustees is currently working on two major events. One is the oral cancer walk and the other one is the associations annual session. Both will be hosted in October. Legislative updates the Dental Hygienists Association has worked closely with the Dental Association on the modernization of dentistry bill to improve access to care and modernization of the dental workforce. Oral Health Awareness day was held jointly by the NDA and the NDHA on April 6 in Carson City. Our goals for the future after this legislative session will be focused on 1st is the license portability and the Interstate Compact for Dentists and the Dental Hygienist.

8.) Organized dentistry update and report from the Nevada Dental Association. Nevada Dental Foundation and Tonopah Dental Clinic and legislative update. Informational – Michele Reeder

Michelle Reeder not present to provide update.

9.) Updates on population health, utilization and value-added benefits for adult Medicaid, adult pregnancy. **Informational – Tricia Schares**

As you may or may not know, liberty has put together a population health management program, very structured program so that we can assess and address all the needs of our membership. We look at data on all different levels from highest membership by groups non utilizers by demographics, population needs by age and geographic area and we're trying to use very targeted strategies to kind of close the gap on any health disparities and also provide different incentives for both our provider network and our members. So that we can have increased focus on the importance of oral health and make sure that our members are engaging. Some of the targeted interventions that we've used have been zip code bonuses to our provider network based on the



data and the results of certain zip codes, we found that we have a higher population of people not utilizing their dental benefits. So we definitely targeted those zip codes not only for provider incentives, but also our outreach team to go out and provide education and engage members and at the Community level as well. We have a a long standing first tooth, 1st birthday incentive program to encourage all of our child membership before the age of three to utilize their dental benefits and to have the providers reach out so that we can start them off, you know, with good oral habits immediately. And we've really been targeting our pregnant population. We've got some member incentives for gift cards if they engage and have a dental visit an in person dental visit, and then we also have some text message campaigns that go out to educate our members. Liberty added a comprehensive exam as a payable, service for our adult population and year to date, we've had 8516 adults have comprehensive exams. Rather than just having the limited problem focused exam, you can really see where their overall oral health is.. And then we also have a value-added benefit for our pregnant population and we added root canals because we know that that's the significant need for our membership and year to date we've had 33. Liberty did obtain MOUs for both Clark, Clark County and Washoe County school districts to be able to go in and provide education and support for all of the school age children as well. So we will be doing that both Clark and Washoe County in the upcoming school years.

Dr. Collier: It sounds like you guys are are collecting some some good data on health disparities Is that data you guys publish anywhere or that is accessible in any way?

Trisha Schares: No, it is very much internal, but if there is something specific to your area or something that you would like to see, we can talk about that on our calls. One of the other things we are doing this year is to gather data on missed and cancelled appointments. Our Medicaid population is notorious for not showing up, and we have started tracked any provider that bills a cancelled code. We send out a text campaign to that member and asl them certain questions, was it a transportation issue or a health issue and get our case managers involved. What we have found is that almost 24% of the people that have missed their appointment once we engage them via text, they have found themselves back into their dental home within 60 days.

10.) Discussion and possible action to form a workgroup regarding the application of Silver Diamine Fluoride by dental hygienist who hold public health endorsement, and IDD provider shortage workgroups. **Action Item.**

Jannette Gomez: Do we want to form formal workgroups that will follow public meeting laws for SDF and IDD provider shortage?

Terri Chandler: SDF update, Southern Nevada, Clark County School District states that no school program can apply SDF without a parent being present and giving consent.

THERE WAS A MOTION TO FORM A WORKGROUP TO ADDRESS SILVER DIAMINE FLUORIDE APPLICATION BY A PUBLIC HEALTH ENDORSED DENTAL HYGIENIST



BY DR. TARA VAN ORDEN. THERE WAS A SECOND TO THE MOTION BY TERRI CHANDLER MOTION CARRIED UNANIMOUSLY.

Workgroup participants: Dr. Lisa Collier, Dr. Putnam, Dr. Benson, Jannette Gomez, Terri Chandler, Jessica Woods

11.) Nevada dental, dental hygiene, and dental assisting school updates. Informational.

No updates

12.) Discuss written report to the Administrator summarizing the activities of the Advisory Committee and any recommendations of the Advisory Committee on or before July 1. Action Item.

Dr. Collier: I put together a rough draft of the letter based on our meeting minutes. I was hoping to get some input and finalize the letter. Jannette can you give us an update on what the purpose of the letter is?

Jannette Gomez: From my understanding we provide this letter to the administrator on what the AC4OH has been doing, what progress we have made, and I think it is a really good opportunity to highlight the oral health program and let them know that we exist, that we are important and that we are all very dedicated.

Committee reviews letter together to make some changes. Dr. Collier states she will make the edits and send it to the committee for approval.

13.)Open Discussion about the applicants for the open seats on the committee and possible action to recommend to the Administrator appointment of members for five open positions on the committee. Action Item – Chair Dr. Lisa Collier, Vice Chair Dr. Whitney Bryant, Jannette Gomez

THERE WAS A MOTION TO REAPPOINT DR. TINA BRANDON ABBATANGELO BY DR. TARA VAN ORDEN. THERE WAS A SECOND TO THE MOTION BY LYNN SHORT MOTION CARRIED UNANIMOUSLY.

THERE WAS A MOTION TO REAPPOINT DR. JOSE CUCALON CALDERON BY TERRI CHANDLER. THERE WAS A SECOND TO THE MOTION BY DR. BRYCE PUTNAM MOTION CARRIED UNANIMOUSLY.

THERE WAS A MOTION TO REAPPOINT DR. BRYCE PUTNAM BY DR. TARA VAN ORDEN. THERE WAS A SECOND TO THE MOTION BY TERRI CHANDLER MOTION CARRIED UNANIMOUSLY.



THERE WAS A MOTION TO REAPPOINT TERRI CHANDLER BY DR. BRYCE PUTNAM. THERE WAS A SECOND TO THE MOTION BY DR. JOSE CUCALON CALDERON MOTION CARRIED UNANIMOUSLY.

THERE WAS A MOTION TO REAPPOINT DR. LISA COLLIER BY DR, JOSE CUCALON CALDERON. THERE WAS A SECOND TO THE MOTION BY TERRI CHANDLER MOTION CARRIED UNANIMOUSLY.

Dr. Lisa Collier: I volunteered to be the interim chair at one point and the new never formally elected. I do think it would be great if someone else is willing to chair the committee, but I could serve as the Chair again if nobody else is willing.

THERE WAS A MOTION TO APPOINT DR. LISA COLLIER AS CHAIR OF THE COMMITTEE BY DR, JOSE CUCALON CALDERON. THERE WAS A SECOND TO THE MOTION BY DR. TARA VAN ORDEN MOTION CARRIED UNANIMOUSLY.

14.) Discussion of recommendations for future agenda. Action Item.

Dr. Bryce Putnam: I want to see if we can put at standing agenda item for the recommendations for the NRS to be changed for the oral health positions. I think we have talked about it, but it consistently never gets changed. To see how the AC4OH can support the positions and the growth of the oral health program and to make sure that we as an advisory committee make sure that we can either write letters or do whatever we can to support the both of you.

Dr. Benson suggested that a work group be formed to address IDD access to care.

Work group participants include: Dr. Lisa Collier, Dr. Benson, Jannette Gomez, and Dr. Bryce Putnam.

Dr. Bryce Putnam: Suggested that a standing agenda item address legislative updates.

15.)PUBLIC COMMENT

a. Action may not be taken on any matter brought up under this agenda item until scheduled on an agenda for a later meeting. Public testimony under this agenda item may be online, by phone or written comment. Due to time considerations, each individual offering public comment will be limited to not more than three (3) minutes.

Dr. Jose Cucalon Calderon: I am going to be doing a presentation in August on E-cigarettes and oral effects of E cigarettes, I will share the link if anyone would like to join.



16.) Adjournment Dr. Lisa Collier – Chair

THERE WAS A MOTION TO ADJOURN THE MEETING BY DR. BRYCE PUTNAM AT 10:58AM. THERE WAS A SECOND TO THE MOTION BY DR. JOSE CUCALON CALDERON. MOTION CARRIED UNANIMOUSLY.

AGENDA POSTED AT THE FOLLOWING LOCATIONS:

On the Internet at the Division of Public and Behavioral Health website https://dpbh.nv.gov/Programs/OH/dta/Boards/AC4OH-Home/ and at https://notice.nv.gov/

AGENDA EMAILED FOR POSTING AT THE FOLLOWING LOCATIONS:

Division of Public and Behavioral Health, 4220 S. Maryland Parkway, Bldg. A, Suite 100, Las Vegas, NV Division of Public and Behavioral Health, 4150 Technology Way, Carson City, NV Division of Public and Behavioral Health, 727 Fairview Drive, Suite E, Carson City, NV

We are pleased to make reasonable accommodations for members of the public who are disabled and wish to call into the meeting. In the event of Microsoft Teams application has technical difficulties, the meeting may be conducted by teleconference from the same location. If special arrangements are necessary, please notify Jannette Gomez, Bureau of Child, Family and Community Wellness, Division of Public and Behavioral Health, in writing please send to, 4150 Technology Way, Carson City, NV 89706 or by calling (775) 901-1035 as soon as possible and at least five days in advance of the meeting. Written comments in excess of one typed page on any agenda items which requires a vote are respectfully requested to be submitted to the Oral Health Program at the above address five (5) calendar days prior to the meeting to ensure that adequate consideration is given to the material.

Supporting materials for the agenda can be found on the State Oral Health Website: http://dpbh.nv.gov/Programs/OH/dta/Boards/AC4OH-Home

or you may contact Jannette Gomez, Division of Public and Behavioral Health, Bureau of Child, Family and Community Wellness at 775-901-1035 or by email at jannettegomez@health.nv.gov