

**DENTAL ADVISORY COMMITTEE (DAC) MEETING**  
**May 11, 2017**

**DAC Members Present via Conference Call:**

John Purk, DDS, Chairman  
Alan Stoll, DDS  
Dennis Thousand, DDS  
Matthew Tinnel, DDS  
Nicole White, DDS  
Vicki Wilbers, Missouri Dental Association (MDA)  
Ron Wilkerson, DMD

**Consultants Absent:**

Robert Waxler, DMD

**MO HealthNet Division (MHD) Staff Present:**

John Dane, DDS  
De'Nel Holliday  
Nanci Nikodym  
Julie Phillips  
Melody Webb

**Missouri Medicaid Audit and Compliance (MMAC) Unit Staff Present:**

Toni Sneller

**Guests Present via Conference Call:**

Katie Reichard, MDA  
David Thielemier, Dentaquest  
Aaron Washburn, Dentaquest

**WELCOME/INTRODUCTIONS**

Dr. Dane took roll call and welcomed all to the meeting.

**REVIEW OF MEETING MINUTES**

A motion was made to approve the minutes of the February 9, 2017 meeting. The motion was seconded and approved by all.

**OLD BUSINESS**

**Mobile Dental Services Update**

Dr. Dane reported that he has received two formal complaints since the last meeting and he has forwarded the information to the Dental Board for their review and follow up. The complaints are regarding documentation, access to x-rays, and substandard care. The Dental Board will be following up on the cases with the individuals that submitted the complaints. Dr. Dane will provide an update at the next meeting.

### Silver Diamine Fluoride (SDF) Update

De'Nel reported that she reviewed information and data provided by Dr. Dane regarding SDF coverage in North Carolina. Her review verified that that North Carolina is saving money with the coverage of SDF. De'Nel stated she ran a report for utilization of codes D2330 through D2335 for children ages five (5) and under for FY15. These are the same codes that North Carolina used in projecting they would potentially have a 50% cost savings on these codes with the coverage of SDF. Based on that report, Missouri paid over \$4 million for these codes in FY15. Using the same methodology as North Carolina, the projected savings for Missouri could potentially be \$1 to \$2 million with implementation of SDF. It is also projected that with the implementation of SDF, 10% of kids may not need procedures that require anesthesia which would result in an additional cost savings for Missouri.

The CDT code for this service is D1354 (interim caries arresting medicament application), and is only being recommended for implementation for children ages one (1) through five (5). The service would be limited to one (1) application per six (6) months per provider with a lifetime maximum of four applications prior to age six (6). The recommended reimbursement rate is \$2.67 per tooth.

De'Nel proposed to put all the information she has collected into a document and send to the DAC for a formal review/recommendation by the committee. Dr. Dane recommended an electronic vote on this issue by the DAC.

### CPT Codes 99201 and 99203 Update

Dr. Dane reported that he has a meeting scheduled next week with MMAC to discuss changing the policy regarding the ability to use these codes on the same day of surgery. This issue will be put on the agenda for the next DAC meeting in September.

### Prescription Writing for Medicaid Participants Update

The issue regarding prescription writing for Medicaid patients that was discussed in the previous meeting has now been resolved. MDA sent out a notice clarifying that dentists do have to be a Medicaid provider in order to write a prescription for a Medicaid patient, but do not have to be a Medicare provider as previously thought.

## **NEW BUSINESS**

### Fluoride Varnish Project

Dr. Dane and Dr. Timothy Kling, of MHD, are working on a pilot project to provide fluoride varnish in WIC clinics. They will be doing a demonstration in Adair County on the 17<sup>th</sup> with the intent of getting FQHC clinics involved as well as WIC clinics across the state. The objective of this pilot project is in effort to increase Missouri's HEDIS numbers. The clinics can perform services on Medicaid eligible patients and bill for the services helping to increase the data reported on the CMS 416 report. If the clinics buy in, it may have an effect to move Missouri's percentage up. Right now, Missouri sits at about 39% of eligible receiving services. The national average is about 49%. The national goal is 55%.

### Peer Review Committee

Dr. Dane asked the DAC to consider a peer review committee as part of their process. Providers could send documentation to peer review for education and correction before resulting in an audit. Dr. Dane will put together a protocol and anyone on the DAC can volunteer to be a member of the peer review committee as well. The DAC was in favor of implementing a process.

### Teledentistry

Dr. Dane advised that the Dental Board is in the process of changing the rule to allow the use of Teledentistry. He advised the committee that the Medicaid regulations for use of Teledentistry are also in the process of being reviewed so that Medicaid dental providers can provide this service and bill Medicaid for it once the rule goes into effect.

### Provider Manual Changes

Dr. Dane advised that changes have been made to the Dental Program Manual and the most recent version is available on line. De'Nel recommended reviewing Section 11 of the provider manual as it relates to the Managed Care Health Plan changes that recently went into effect.

### Managed Care Changes

Dr. Dane stated that he had received some concern from providers regarding children scheduled to receive general anesthesia procedures. He stated that providers need to contact the managed care plans to obtain prior authorizations in order to file claims and receive reimbursement for these procedures. The managed care plans do not want the children's scheduled procedures cancelled due to a prior authorization not being on file, but providers do need to contact the plans prior to providing the service.

Dr. Dane advised there are still some prior authorizations coming to the fee-for-service program for participants that are now in managed care. Those prior authorizations are being reviewed and transferred over to the appropriate managed care plan. The managed care plans will honor the approved prior authorizations for 90 days.

Melody Webb advised she will reach out to the managed care plans and invite them to attend future DAC meetings to answer any questions the committee may have as they relate to the managed care plans. She also advised DAC members to contact her with any problems that they encounter with the managed care plans and she will assist with resolving the issues.

### **NEXT MEETING DATE**

The next meeting is scheduled for September 21, 2017.

### **ADJOURNMENT**

A motion was made to adjourn the meeting and all approved.