

**ORAL HEALTH COALITION OF ALABAMA (OHCA)  
MEETING  
February 19, 2009  
10:00A.M.-12:00P.M.**

**Members Present:**

Leigh Ann Hixon, Max Mayer, Charles R. Hall, Sherry Goode, Linda Champion, Jessica Hardy, Christopher Sellers, Lavonya Chapman, Martha Acker, Debbie Robbins, Cathy Caldwell, Mary McIntyre (Chair)

**Medicaid Staff Present:**

Colinder Chappelle, Mattie Jackson, Theresa Richburg, Letrice Ware, Ron Macksoud

**Welcome/Introduction:**

Dr. McIntyre officially called the meeting to order at 10:00am. She then asked the members to introduce themselves giving their organizational affiliation.

**Minutes Review/Acceptance:**

Dr. McIntyre gave a brief overview of the minutes and asked for a motion to accept the minutes as written if there were no corrections. No corrections were noted and a motion was made and seconded. Motion carried with the minutes being accepted as written.

**Medicaid Update:**

Mattie Jackson indicated that with the 1<sup>st</sup> Look Program that the certified physicians are eligible to perform dental risk assessment/varnishing up to age 3 effective January 2009. She also indicated that the providers will be able to bill for the initial oral assessment and the application of fluoride varnish for high caries risk children. She further indicated that dental prior authorizations are now processed by EDS which has streamlined the prior approval process.

Dr. Moon and staff conducted Town Hall meetings throughout the state. The Maternity Care Advisory Committee which is made up of various associations and representatives from 14 districts met to discuss ideas generated from the town hall meetings. A recipient survey is planned for March. The plan is to determine changes and rebid the contract this summer. Their current contract ends December 2009.

The Radiology Management Contract has been awarded to MedSolutions and is effective March 2. This is a radiology prior authorization program. Mattie then gave a brief overview of the LTC Partnership program in conjunction with the Department of Insurance which will become effective March 1<sup>st</sup>. This program will protect assets from our Medicaid spend down as it relates to our nursing home clients. Our Family Planning waiver has received approval from CMS to extend it for 3 years and staff is working on some modifications to that waiver. The coverage age has been extended to age 55. She then gave a brief overview on the Plan First Waiver, Patient 1<sup>st</sup> Waiver, TFQ Initiatives, Medicare Electronic Health records grant and the ongoing CMS negotiations. Mattie indicated that we have been receiving national attention regarding Q-Tool and staff will be presenting an update to the legislature on February 25<sup>th</sup>. She further

indicated that the Medicaid budget is fully funded at current level for FY 2009 also estimation has been submitted for FY 2010 budget. The Governor has implemented the Deficit Reduction Plan that placed a freeze on hiring, purchasing of state vehicles, limited equipment purchases and curtailed travel and placed a freeze on annual merit raises Jan. 1<sup>st</sup> through December 31<sup>st</sup>. She also stated that Medicaid was not held to the 10% but has implemented the limitations on purchases and travel has been limited. The Federal Stimulus bill has been signed by President Obama on Tuesday, and we are in the process of reviewing this and all the federal rules and regulations that go with it with the Governor's office. It will take some time to accurately assess its impact on state agencies and programs but we've already gotten started and should have a clear picture soon. Dr. McIntyre asked if anyone had questions. Dr. Hall shared that the American Academy of Pediatric Dentistry and Head start Initiative will be rolled out on May 8<sup>th</sup> in Montgomery and there are quite a few people at the meeting who will be invited to attend. The purpose of the initiative is to find a dental home for all Head Start children by the age of one. Dr. Hall will be on the OHCA Agenda for the next meeting to give an update.

### **Dental Update:**

Leigh Ann gave an overview of the dental statistics sheet and explained that the numbers have been changed. She explained that one thing that has been done is to review the queries behind the statistical sheets and she learned that some of the new procedures in the CDT have not been added to the queries. She further indicated that the statistics now include children that are under one due to the 1<sup>st</sup> Look Program which focuses on children from age six months through 35 months. The last column on the statistics sheet regarding the number of enrolled providers was originally based upon license numbers. When we switched to NPI's we still had all these providers in our files with an active license number but they did not have an NPI and if they do not have an NPI with us they cannot bill. The numbers have been revised in and those providers without NPIs deleted. Leigh Ann indicated that fifty-four (54) enrolled providers have passed the 1<sup>st</sup> Look certification but as of yesterday we have not received any billing by those providers. They either haven't provided any services or seen children that they can bill for and we are looking into that. Also the mobile clinics are up and running.

### **1<sup>st</sup> Look Update:**

Linda Champion indicated that after a year of collaboration and planning the Alabama Chapter of the American Academy of Pediatrics and the Alabama Academy of Pediatric Dentistry (through our oral health liaison, Ric Simpson, DMD), along with the Alabama Academy of Family Physicians (AAFP), has successfully worked with the Alabama Medicaid Agency to add coverage of oral health risk assessment and fluoride varnishing in the pediatric medical home for children from six months up to three years of age. She further indicated that this approval makes Alabama the 23<sup>rd</sup> state in the United States to have such a program, according to the American Academy of Pediatrics' (AAP) Oral Health Initiative. Effective January 2009, Medicaid now pays primary care providers who have been trained in oral health risk assessment for dental codes D0145 (oral health exam <3 years old, counseling) and D1206 (topical fluoride application) under certain limitations. Pediatric providers, along with clinical staff in their offices who apply the varnishes and perform risk assessments, must complete the AAP's "The Oral Health Risk Assessment Training Program for Pediatricians and Other child Health Professionals" and pass the post-test in the module to meet the Medicaid requirements of being a **1<sup>st</sup> Look Provider**. Linda stated that the training includes oral health risk assessment, education

on performing anticipatory guidance/counseling, demonstration of fluoride varnish application, and information on recommendations for a dental home. She further indicated that the training has already been provided to pediatricians and family physicians at their annual meetings, and additional local trainings will be provided throughout the state by dentists trained through the Alabama Academy of Pediatric Dentistry. Below is a look at the 1<sup>st</sup> Look Program by the numbers:

- Number of projected Medicaid 1<sup>st</sup> Look Provider slots (2008-2010) 250
- Number of pediatricians trained by AL-AAP meeting in September 2008 67
- Number of physicians trained at the AAFP meeting in December 15
- Number of dentists trained in a Train the Trainer module (January 2009) 35
- Number of 1<sup>st</sup> Look Providers approved by Medicaid as of February 2009 54

Linda then gave the date of the upcoming training opportunities:

April 2009 AL Chapter - AAP Spring Meeting and Pediatrics Update

June 2009 Additional Train - the - Trainer session at the Alabama Dental Association annual meeting and the local trainings of primary care providers by trained dentists has no firm date as of yet but will let the members know when one has been provided.

Dr. McIntyre suggested to Linda that they may want to survey a few to find out what is going on and whether or not they treated any patients or if they are having problems with billing. Leigh Ann indicated that she needed to clarify the certification process and not all the people trained were Medicaid providers. Should they decide to enroll in Medicaid at a later date they have the ability to do so. Dr. McIntyre indicated that they are being told at the training that in order to be reimbursed that they have to be enrolled as Medicaid providers. The members then had a discussion on the training being provided and the need to try to find a reason for the lack of billing to the Agency.

### **ALLKids Update:**

Chris Sellers indicated that as far as their statistics sheet that it would be updated next time. He also indicated that their enrollment is steady and they are not at their peak enrollment anymore. There have been a lot of things dealing with reauthorization about dental but they have not received an interpretation from CMS yet. There will be a GAO study about dental access and there will be a national website that will list dental providers for SCHIP and Medicaid together. He further indicated that they have received the PEAK kids grant from the Robert Wood Johnson Foundation. The acronym stands for (Perfecting Enrollment for Alabama Kids). The grant will be for three years. Dr. McIntyre asked if he had some information regarding this and if so that he get it to her so that it can be sent to the other members. Chris indicated that they are going to have a national website that will list the dental providers.

### **Discussion on Dental Tax Incentive Legislation:**

Dr. Mayer indicated that we need the stimulus because the dental rates for the Medicaid providers have not been increased since 2000 and they are inundated with providers saying that the fees are not covering their overheads. We all know that finding money to increase the fees is impossible right now and in the foreseeable future, therefore, a stimulus package is needed. He further indicated that he has found nineteen states with some kind of incentive program that has

enabled them to maintain their current providers and showing an increase in new dentists. This will encourage students to become providers. This should also include a package where student loans can be taken off and where they will have tax credits that will be applied to repaying their student loans. There would also be tax credits on their loan payments and even grants can be applied for as part of this packet where an individual could apply for this grant and actually pay for the building. Also the scholarship money could go toward the grants. He further indicated that when he looked at whom the group would comprise of to draft this it would be basically Rural Health, Alabama Dental Association, Department of Public Health, UAB School of Dentistry, and Alabama Medicaid of course. Alabama Medicaid would be the one facilitating the group and we would need this group or someone from the group to sponsor the legislation for this stimulus package. Dr. McIntyre indicated that he should ask ALDA because they took the information regarding the mobile dental clinics and got it started. Although, we can't lobby to get this legislation started but we can pull the information for those who would be presenting it because there is a difference between education and lobbying. She further indicated that because this group is a coalition with multiple members both public and private that with the people identified and working together we can pull this information and also get a draft together as a group to find a timeframe in order to complete this. Dr. McIntyre indicated that we do have a Representative that is a member of this group and has participated recently. We have not approached him but he has an interest in oral health and that is Representative Ronald Grantland. He may be willing to act as a sponsor if something is developed. She further informed the members that since the legislature had already started for this year we would be unable to get an item on the agenda because we have to get this information to them before the legislature goes into session. She further gave them the time frame to get a bill finalized to give to the legislators to be placed on their agenda for that year. She informed Dr. Mayer that he might want to add the Alabama Primary Health Care Association as part of his group. Dr. Mayer then gave further issues surrounding the stimulus package that would need to be incorporated to get this bill to the legislature. Dr. Hall indicated that he would like to serve on the group once Dr. Mayer gets it together. He feels this would give them a tremendous advantage when he goes out to recruit dentists to see patients and to accept Medicaid. Dr. McIntyre asked what about other populations such as the uninsured, adult population, and the ones in long term care whose families have to pay for their services. She asked them to consider this population when drafting the proposed as part of the legislation. The members talked about the requirements of the law to be covered by the malpractice insurance /TORT reform or the free service that retirees are able to perform. A discussion was then held on the inequities surrounding a person performing free services and the amount of hours needing to be served in order for them to qualify for the malpractice insurance coverage. Dr. McIntyre indicated that the subcommittee Availability & Access might want to look into the state TORT Reform Laws in order to allow retirees to provide free services and the state cover their malpractice insurance. Dr. Hall indicated that the state already has a law in place to assist the providers who volunteer their services. Dr. McIntyre indicated that there is one in place for the federal also but it would not allow her to volunteer because of all of the limitations applied to the statute. The federal tort coverage for Federally Qualified Healthcare Center does not cover persons who want to work a day or two a month. She further indicated that they might want to check the statute to see what is covered and if they can get the malpractice insurance covered under the State TORT Reform laws.

### **Finalize Goals for Subcommittees:**

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Dr. McIntyre indicated that they have asked the chairs and co-chairs to schedule a meeting at least once before our next meeting. It was suggested that it would probably be best to do this about a month before the big meeting to finalize any issues that they had. She also indicated for those members who do not have an 800 conference line available if they would give us some dates and times that we would make the Medicaid 800 Line available for them to use. They would need to contact Colinder with the dates and times by sending an email that they would need the 800 conference line number so that it could be confirmed for the date requested. We will need to send this information to Letrice to make sure that no one else has booked the lines for the time and dates needed and this information is required in advance in order to do this.

**Current goals and issues for each subcommittee were discussed.**

**Availability & Access:**

- They don't have timeframes identified in them.
- They don't start off with percentages stating that this is where we are and we want to be here in calendar year 2010.

**Education and Awareness:**

- We thought that number one and number three could be combined instead of having an individual goal if the same thing applies it is not firm enough. They don't have anything indicating this is where we are and this is where we are going.
- Conducting a possible summit by the group and they need to decide when fall, winter or spring. They also need to determine who will participate in this summit.
- The last goal needs to be revised. It is not clear.

**Surveillance and Monitoring:**

- These are pretty specific Chris has indicated that he can modify that and it can be completed by May.

Sherry indicated that she would be meeting with Sharis LeMay, Director of Alabama Healthy Child Care regarding a summit meeting in 2010.

**Adjourn:**

Dr. McIntyre asked that if there was nothing further to discuss that a motion be made to adjourn. The motion was made then seconded and the meeting was adjourned.

Respectfully submitted by:



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Mary G. McIntyre, MD, MPH  
Chair

April 7, 2009  
Date



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Colinder Chappelle  
Recording Secretary