



Special Committee on Dental Medicaid
October 15, 2018

OFFICIAL MINUTES (Revised 11/6/18)

Hanlon, Patricia (S), Chair
Cooperman, Kenneth (NY)
Backer, Steven (2)
Sandu, Diana (4)
Wilson, Michael (6)

Frustino, Jennifer (8)
Blonda-Gil, Nora (9)
Kanner, David (N)
Mota Martinez, Mercedes (Q)
Jacobo, Amarilis (B)

The Special Committee on Dental Medicaid met on October 15, 2018 via telephone conference. All members participated with the exception of Drs. Blonda-Gil and Jacobo. Drs. Mark Feldman, executive director, and Judith Shub, assistant executive director, and Ms. Jacquie Donnelly, NYSDA staff, participated on the call as well.

Dr. Hanlon called the meeting to order at 1:06 p.m. She conducted a roll call of the members. The committee adopted the minutes from its previous meeting on April 9, 2018, as written by unanimous consent.

Chair Report

Dr. Hanlon summarized the relevant actions of the NYSDA House of Delegates at its annual meeting that called for NYSDA to seek coverage for silver diamine fluoride and expanded Medicaid coverage for sealants. Dr. Backer expressed his concern that silver diamine fluoride should be used only in limited circumstances. Dr. Shub explained that DOH has not yet developed guidelines for coverage for silver diamine fluoride, reminding the committee that any changes in coverage must be "cost neutral". Dr. Feldman added that the ADA has a policy paper advocating that all third-party payers cover silver diamine fluoride.

The chair informed the committee of the Department of Health's decision to include reduced time limitations for prosthetic replacement and implant dentistry when "medically necessary", presumably in response to a lawsuit brought by the Legal Aid Society. Dr. Feldman asked the members to notify Dr. Shub if they find that these services are denied.

Dr. Frustino expressed concern that Article 28 programs would be subject to post-payment audits because they are not required to obtain prior approvals for treatment.

Component Committee Reports and Member Issues

The chair asked whether there were any reports from the component dental societies. Dr. Cooperman described problems he has had since Liberty Dental replaced HealthPlex. Liberty initially paid his claims in a timely manner but now is denying payment in lieu of the re-credentialing of network members. He will provide documentation to enable NYSDA to refer the matter to DOH. Dr. Cooperman added that, after approving a two-year course of orthodontic treatment, the MCOs would not approve a third year of treatment.

Dr. Sandu described problems at Ellis Hospital since Delta Dental has taken over the CDPHP provider network from DentaQuest. She stated that Delta's fees are insufficient and as a result, there is an insufficient network and a lack of specialists for referrals. Providers no longer participate and the network lacks adequate oral and maxillofacial surgeons. Dr. Sandu added that, as a result, the volume of patients presenting at Ellis has increased in the dental clinic. In addition, Delta requires prior authorizations for all procedures, with the exception of prophylaxis and examinations. This creates an added obstacle for patients with acute treatment needs. Dr. Shub asked if Dr. Sandu could provide her with a copy of Delta's policy regarding prior authorizations.

Dr. Backer pointed out that general practitioners are referring patients to hospital clinics and emergency rooms for extractions. Because they consider some plan reimbursement rates to be too low for dentures, oral surgery, root canal therapy, and crowns, some providers are accepting the plans' fees for routine treatment but refer the more expensive procedures to the hospitals. Dr. Sandu reported that her program receives 20-30 referrals daily and their oral surgery attending is booked into January 2019. Dr. Feldman stated that NYSDA would need to meet with DOH regarding the issues cited by the committee members.

New Business

Dr. Hanlon reviewed issues with DentaQuest down coding restorative treatment. Dr. Shub explained that the ADA, Emblem Health and DentaQuest are looking into this issue. Dr. Backer heard that some practitioners are having a problem being reimbursed for Class V restorations on teeth with cervical sensitivity but no decay.

The committee discussed NYS's Medicaid reimbursement policy for CDT codes D0220 and D0230, as well as Dr. Backer's complaint that the MCOs do not return submitted x-rays. Dr. Backer believes that Medicaid should cover Class V restorations in the absence of decay. He stated that the guidelines were written prior to the adoption of modern bonding techniques. He added that dentists have to treat patients with a complaint of pain or where the pulp is in danger of being exposed. Cosmetics would still not need to be covered, but the guidelines need to be changed to accommodate Class V placement in these instances.

Old Business

Dr. Hanlon reviewed DOH's response to the issues previously referred to them by NYSDA.

There being no additional business before the committee, Dr. Hanlon adjourned the meeting at 1:55 p.m.

Respectfully Submitted,

Patricia M. Hanlon, DMD, Chair