



New Hampshire Oral Health Coalition

March 16, 2015

Nicholas Toumpas, Commissioner
NH Department of Health and Human Services
Brown Building, 129 Pleasant Street
Concord, New Hampshire 03301

Dear Commissioner Toumpas:

Our thanks to you and your team for all you do for the people of New Hampshire. We understand that you have limited resources for the monumental work that you do and that choosing priorities is not always easy.

Given that, we are writing today to put forth our thoughts and concerns regarding the implementation of payments for fluoride varnish in the medical setting under the auspices of the Medicaid Managed Care contracting process.

In 2010, the New Hampshire Legislature passed, HB1537, an act allowing primary care providers to provide preventive oral health service to children between 0 and 3 years of age under the state Medicaid program. Oral health services were defined “such as dental screenings and fluoride varnish treatments.” The bill was enacted as NH RSA 126-A: 4-g. While the legislature has not provided targeted funding, we understand that the department plans to implement these services into the Medicaid program. This is consistent with the practice in 46 states throughout the U.S.

Almost five years later, and despite the intent of the department, there is still no mechanism for payment to providers. Despite some initial clinical training, required by the bill and provided by the statutorily approved Southern New Hampshire Area Health Education Center and the NH Chapter of the American Academy of Pediatrics, that service has not yet been implemented for the applicable children in the NH Medicaid Program.

With the roll-out and implementation of the Medicaid managed care contracting and transition, we were told that the service would be a requirement within the contract and that we, as the NH Oral Health Coalition, would be invited to participate in conversations with the Medicaid Managed Care Organizations (MCOs) regarding development and provision of training for the affected providers. We remain ready to participate in that process.

It is our understanding that this service is not yet implemented because there are Medicaid-covered children who have opted out of the Medicaid Managed Care program and thus, *until a corresponding fee-for-service payment schedule* can be built to provide the same service for those children, the department cannot require the MCOs to provide the service. We understand that due to high work demand at the department, there is no date for when that fee-for-service payment schedule can be developed.

Again, we understand the tremendous amount of work being done by the department regarding the managed care program and waivers, but our concern is that the application of fluoride varnish, a proven, preventive service and now a B-level recommendation by the US Preventive Services Task Forceⁱ, is currently provided to Medicaid-covered children in 46 states,ⁱⁱ but not to New Hampshire children. We understand that under the Accountable Care Act (ACA) all level A and B recommendations are supposed to be incorporated into the well child visit thereby making fluoride varnish application a routine part of well child careⁱⁱⁱ; and, NH private insurers have begun to provide payment for this service.

In the meantime, there are local, regional and national funders and trainers ready to provide training for NH Medicaid-enrolled medical providers. Our requests for a time-frame for service implementation and for a statutorily-defined list of approved training programs, remains unanswered.

According to the September 2013, Centers for Medicare and Medicaid (CMS) information document “Keep Kids Smiling: Promoting Oral Health Through the Medicaid Benefit for Children and Adolescents,” in their Strategies for Promoting Oral Health for Children section they include the following recommendation in order to improve State Medicaid Performance through Policy Change:

“Reimburse medical providers for preventive oral health services. Primary care providers are well-positioned to offer children enrolled in Medicaid basic oral health education and preventive services at a most critical time in their development. Children are at risk for caries from the moment of first tooth eruption, typically around six months of age. To most effectively prevent caries, parents must establish sound oral health habits at this early age. **Pediatricians**” [and other primary care providers] **“have earlier, more frequent interactions with children and their parents than do dentists, and they participate in Medicaid at higher rates.** A recent study found that a higher frequency of well-child check-ups between ages one and three was associated with an earlier first dental exam.”^{iv}

“Additionally, starting fluoride varnish at 6 months (or at the eruption of first tooth) pays back a larger percentage of program costs by reducing future restorative costs.”^v

“It is about 10 times more expensive to provide inpatient dental care for caries-related conditions than to provide preventive care.”^{vi}

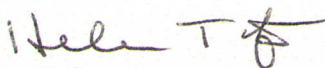
The development and implementation of Medicaid payment for the services defined in the RSA is supported by CMS, provides a pathway to the establishment of a dental home, and is consistent with the purpose and goals of the Medicaid Care Management program.

As Commissioner, we are asking you to prioritize, under applicable statutes, the following:

- Development of a fee-for-service payment schedule, possibly using the newly-developed CPT 99188^{vii}, for the application of fluoride varnish for Medicaid-eligible children who have opted out of Medicaid Managed Care;
- Implement the requirement and related payments that all NH Medicaid-covered children receive fluoride varnish and preventive services as defined in the applicable statute; and
- Develop an approved training list for primary care providers, as outlined in RSA-126-A: 4-g and supported by national provider standards; recognizing that most have limited oral health training.

As always, we remain poised to assist in any way including messaging to the medical and dental communities, supporting funding for training, and providing convening opportunities for medical and dental providers to come together to strengthen and build the referral network. We are eagerly awaiting your response.

Sincerely,



Helen Taft
Chair, NH Oral Health Coalition Steering Committee
Executive Director
Families First Health and Support Center

cc: The Honorable Governor Maggie Hassan, Medicaid Managed Care Commission, NH Commission to Study Pathways to Oral Health in New Hampshire

ⁱ U.S. Preventive Services Task Force Full Recommendation on Dental Caries in Children from Birth to Age 5 Years: Screening.

<http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/dental-caries-in-children-from-birth-through-age-5-years-screening>.

ⁱⁱ Keep Kids Smiling: Promoting Oral Health Through the Medicaid Benefit for Children and Adolescents, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), September 2013, p.11. <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/Keep-Kids-Smiling.pdf>

ⁱⁱⁱ U.S. Preventive Task Force; Recommendation for Primary Care Practice - See Affordable Care Act and USPSTF Recommendations. <http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations>.

^{iv} Keep Kids Smiling: Promoting Oral Health Through the Medicaid Benefit for Children and Adolescents, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), September 2013, p.10-11.

<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/Keep-Kids-Smiling.pdf>

^v Keep Kids Smiling: Promoting Oral Health Through the Medicaid Benefit for Children and Adolescents, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), September 2013, p.11. <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/Keep-Kids-Smiling.pdf>

^{vi} Keep Kids Smiling: Promoting Oral Health Through the Medicaid Benefit for Children and Adolescents, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), September 2013, p.12. <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/Keep-Kids-Smiling.pdf>

^{vii} Federal Register/Vol. 79, No. 219/Thurs., November 13, 2014/rules and Regulations. Page 67670.



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cc: Commission on Medicaid Care Management
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The Honorable Governor Maggie Hassan