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Dental Assistance Program for Seniors Annual Report

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Principal Author: Diane Brunson, R.D.H., M.P.H., Director
Oral Health Unit

Contributing Author: Susan Gantt
Oral Health Unit Fiscal Officer

Reviewer: Jillian Jacobellis, Ph.D., M.S., Director
Prevention Services Division

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For additional information or copies of this report:

Jillian Jacobellis, Ph.D., Director
Prevention Services Division
Colorado Department of Public Health and Environment
4300 Cherry Creek Drive South
Denver, CO 80246-1530
(303) 692-2501

Dental Assistance Program for Seniors Executive Summary

Purpose. The Colorado General Assembly authorized the Dental Assistance Program for Seniors in the 2003 legislative session as House Bill 03-1346. This amended the statute, first initiated in 1977, to allow administration of the program through “Award Service Grants” to qualified grantees rather than direct payment of vouchers from dental providers due to implementation of the Health Insurance Privacy and Portability Act (HIPAA). The purpose of the program is to provide dental and oral health services, including relief from pain and infection, oral cancer screening, dentures, denture maintenance and repair, and related dental services to eligible seniors in Colorado. Eligible seniors are those who qualify for Old Age Pension assistance as defined in Section 26-2-111(2), C.R.S. The program is administered by the Oral Health Unit in the Prevention Services Division at the Colorado Department of Public Health and Environment.

Use of funds. A total of \$565,321 from General Fund were appropriated in fiscal year 2006-07 for implementation of the Dental Assistance Program for Seniors. The statute allows for 0.8 full-time equivalent employees (FTE) to administer the program, with the balance going to providing dental care for seniors. The non-grant costs were \$57,040, which included costs related to convening the Dental Advisory Committee, training of grantees, technical assistance, and 0.8 FTE.

In this fiscal year \$506,025 was available to grantees. \$2,256 of this amount was not spent due to challenges in completing the treatment of some seniors by the end of the fiscal year.

Accomplishments. For FY 2006-07, the qualified grantees included 7 senior-related organizations, 5 community health centers, and 4 private providers. During this time, 884 eligible seniors received dental services, compared to 705 in FY 2005-06, an increase of 25%; and 78% of the seniors were able to pay a co-payment. Nearly all seniors received an exam and x-rays, and the majority received services to keep their natural teeth, such as cleanings and fillings, which is a shift from predominantly denture services seen in previous years.

The Dental Advisory Committee has met yearly since it was created in 2003. The committee met most recently on 8/17/07 and recommended revisiting the fee schedule, as 75% of the maximum allowable fees are less than current Medicaid fees. This has resulted in a two-fold challenge, including attracting eligible grantees to apply for funds under the program, particularly private providers, and an inability to expend all of the funds, as dentists are unwilling to accept the reimbursement rate in many instances.

I. Administrative Report

A. Amount of General Fund Monies Received

The Dental Assistance Program for Seniors received \$565,321 from general fund monies for FY 2006-2007.

B. Program Description

The Colorado General Assembly authorized the Dental Assistance Program for Seniors in the 2003 legislative session as House Bill 03-1346. This amended the statute, first initiated in 1977, to allow administration of the program through “Award Service Grants” to qualified grantees rather than direct payment of vouchers from dental providers due to implementation of the Health Insurance Privacy and Portability Act (HIPAA). The purpose of the program is to provide dental and oral health services, including relief for pain and infection, oral cancer screening, dentures, denture maintenance and repair, and related dental services to eligible seniors in Colorado. Eligible seniors are those who are eligible for Old Age Pension assistance as defined in Section 26-2-111(2), C.R.S. The Oral Health Program in the Prevention Services Division at the Colorado Department of Public Health and Environment administers the program.

The Dental Assistance Program for Seniors provides needed dental services to low-income seniors in Colorado who otherwise would not have access to dental care, as Medicaid does not have an adult dental benefit in Colorado except for emergency extractions, and Medicare does not cover dental services. Seniors with good oral health are more likely to enjoy better overall health and quality of life.

In FY 2005-06, there were 22 qualified grantees, including 7 senior related organizations, including Area Agencies on Aging; 6 community health centers, and 9 private providers. Grantees were located in 11 of the 14 state planning management regions. Region 5 (East Central), Region 12 (North Central), and Region 10 (Southern portion of Western Slope) have not had grantees apply for the funding. Local dental advisory committees were replaced by a Governor-appointed statewide Dental Advisory Committee in 2003, which makes recommendations to the department on qualified grantees and funding distribution.

C. Program Goals

The overall goal of the program is to increase access to care for low-income seniors by offering grants to qualified grantees that assure, or provide directly, dental services to seniors in need. The programmatic goals in this year of implementation include

- 1) assure sufficient grantees to ensure maximum expenditure of available funds;
- 2) increase the number of low-income seniors whose dental needs are met.

D. Evaluation of the Operation of the Program

For FY 2006-07, the qualified grantees included 7 senior related organizations, 6 community health centers, and 9 private providers, including:

- Northeast AAA*
- Senior Answers and Services
- Marillac Clinic
- South Central Colorado Seniors
- Lower Arkansas Valley AAA
- Loveland Community Health Center
- Denver Health and Hospitals
- Phillip Pontious, DDS (Cañon City)
- Health District of Larimer County
- Salida Family Dentistry
- Avant Garde Dental
- San Juan Basin AAA
- Prevention Plus, Inc.
- Pikes Peak AAA
- South Central Council of Govt’s
- Shelby Kahl, RDH (Weld County)
- Pueblo Community Health Center
- John Kearney, DDS (Cañon City)
- David Nordstrom, DDS (Larimer Co.)
- Dean Sandoval, DDS (Cañon City)
- Robert Provorse, DDS (Buena Vista)
- Sunrise Community Health Center

(* Area Agency on Aging)

Grantees submit reimbursement forms indicating the number of seniors receiving services, the types of dental procedures provided, and the number of seniors paying up to 20% co-payment. Grantees are allowed to submit for 10% above their dental treatment fees for administration.

In FY 2006-07, 884 eligible seniors received dental services, compared to 705 in FY 2005-06, and 691 in FY 2004-05. 78% were able to pay a co-payment. The number of specific dental procedures provided is illustrated in the table below. Seniors may receive more than one procedure. Nearly all seniors receive an exam and x-rays, and the while the majority of seniors received cleanings and fillings, a significant number still require dentures/partial dentures and related services, consistent with what would be expected for a low-income elderly population.

FY	Seniors Served	Exam/x-rays	Cleanings	Fillings	Dentures/Partials	Denture repairs/relines	Extractions Emergency
2005	691	761	219	392	422	91	427
2006	705	738	230	384	381	78	245
2007	884	926	270	412	377	88	356

E. Dental Advisory Committee

The Dental Advisory Committee has met five times since its was created in 2003. The first meeting of the committee was on November 3, 2003, in which the committee reviewed the Request for Proposal to obtain the eligible grantees. The committee met subsequently on 8/31/ 04 to select the grantees upon review of the proposals, and on 5/25/05 and 6/21/06 to monitor progress of the grantees and make recommendations on funding for each of the grantees based on performance and number of eligible seniors in the region. During the 2006 meeting, the committee recommended identifying private providers in Region 13 as the Upper Arkansas Area Agency on Aging had decided to discontinue participation. Five private providers agreed to participate, three in Cañon City, one in Salida, and one in Buena Vista. The committee met most recently on 8/17/07 and recommended revisiting the fee schedule, as 75% of the maximum allowable fees are less than current Medicaid fees. Minutes of the meetings of the Dental Advisory Committee are available on the Oral Health Program Website <http://www.cdphe.state.co.us/pp/oralhealth/OAP.html>

F. Costs Incurred by the Program

A total of \$565,321 from General Fund were appropriated in fiscal year 2006-07 for implementation of the Dental Assistance Program for Seniors. The statute allows for 0.8 full-time equivalent employees (FTE) to administer the program, with the balance going to providing dental care for seniors. The non-grant costs were \$57,040, which included costs related to convening the Dental Advisory Committee, training of grantees, technical assistance, and 0.8 FTE.

In this fiscal year \$506,025 was available to grantees. \$2,256 of this amount was not spent to due to challenges in completing the treatment of some seniors by the end of the fiscal year.

F. Legislative Recommendations

The Dental Advisory Committee recommended revisiting the fee schedule, as 75% of the maximum allowable fees are less than current Medicaid fees and denture relines and repair fees generally do not cover the dental lab costs. This has resulted in a two-fold challenge, including attracting eligible grantees to apply for funds under the program, particularly private providers, and an inability to expend all of the funds, as dentists are unwilling to accept the reimbursement rate in many instances. The department will be seeking legislation to amend the statute to remove the specific procedure codes and fees, giving the governor-appointed Dental Advisory Committee the ability to recommend the procedures and fees that maximize the number of participating dentists and eligible seniors served. The recommendations will be submitted for approval by the State Board of Health.