North Dakota Oral Health Coalition Meeting

Friday, July 11, 2008
North Dakota Department of Health—Bismarck

Proposed Meeting Goals:

- To review and discuss progress made by the three Oral Health Coalition sub-committees;
- To provide an opportunity for sub-committee meeting time and report back to the full Coalition;
- To identify and discuss next steps in planning and implementation.

Members in Attendance:
Becky Bailey, JoAnn Brager, Joe Cichy, Pat Conway, Colleen Ebach, Shelly Gunsch, Hollie Harrington, Marlene Hulm, Janelle Johnson, Carla Kelly, Kathy Mangskau, Sue Matteson, Lana Schlecht, Theresa Schneider, Kimberlie Yineman, and Dave Zentner. Joining us on the phone were Michelle Burgum, Bev Marsh, Jeralyn Peterson, and Debbie Swanson.

Welcome: Janelle Johnson

Each member received a copy of the By-Laws of the North Dakota Oral Health Coalition

Janelle gave a brief update on the completed roster of Coalition officers and directors that were approved during a special executive board meeting held by phone on June 11, 2008.

The vision and mission statement was read aloud.

Subcommittee Reports:

Integration: Kimberlie Yineman

This committee has not met.

Prevention and Access:

They have not met. However, the RFP went out and letters of interest were received. Kathy Keiser is making calls regarding hiring a person for this position. They hope to get going on this by late summer. There is interest in Fargo but the question is whether this would be too big a challenge now. Bismarck Ronald McDonald House is very motivated and wants to move this project forward soon.

Data Advisory: Kimberlie Yineman reported on the 2010 goals and objectives. The CDC grant was submitted-no news yet

Policy: Dave Zentner

There is no new information yet. They want an agreement with the North Dakota Dental Association (NDDA) and the North Dakota Dental Hygiene Association (NDDHA) on policy prior to legislative action.

Sustainability:
This committee has not met.

Lana Schlecht, President of the NDDA, spoke regarding the goals for the dental association for this next legislative session. She announced Dr. Brent Holman, Fargo; is the State Chair for the Head Start Dental Home Initiative. Lana reported that studies show when the funding increases for Medical Assistance, the number of providers increases. They would like to see reimbursement at 75%. Presently it is 52%. The average cost of doing business is presently 60%. Other problems with Medical Assistance include:

- No shows-sometimes 25-35%
- PTAR's-the length of time after submitting a form to wait for a reply
- Eligibility-varies so often
- Recipient Liability-never see the money

The average treatment room in a dental office costs around $50,000 for basic equipment. Dentists have a huge investment in their office and would like to see the MA rates changed.
Jeralyn Peterson asked if it was possible to charge a small fee for no shows ($6.00-migrant health). However, the fee would need to be charged for everyone.
JoAnn Brager said her territory offers to pick up the family and take them to the dentist. A family support coordinator would set this up. Sometimes they still find no one home.
Vermont has a $450.00 cap on coverage for adults. There is no limit in North Dakota.
Debbie Swanson said Eric Elkens reported the number of dentists did not increase when the amount of money was increased. Dave Zentner reiterated that fact from his past experience.
Other problems were reimbursement, billing and the system they presently use. The new system comes online in '09 and will have some changes.
Carla Kelly reported that the dentists that see MA patients get overwhelmed. She passed out an article "WisKids Journal" which described a plan used in Wisconsin. The county is the provider and the dentist does the service. ND counties would need some grant funding for this idea to work. There would be a few time slots left open in the dentist's schedule each week or month for seeing the MA patients. A registered dental hygienist (RDH) would coordinate the services and serve as the case manager.
Kathy Mangskau said a special committee should look into this Wisconsin system with a possible pilot program to follow.
Jeralyn commented on northern MN (Indian Reservation) data that supports preventive services done by a RDH. Their work cuts the number of children needing to be seen by the dentist.
Lana said the NDDA wants to keep the Loan Repayment bill the same or expand it for public health settings. When it comes to the "scope of practice" it is unclear what changes the NDDHA and NDDA and Board of Dental Examiners (BODE) want.
Kathy Mangskau said recent literature is very supportive of school sealant programs-placed in second or third grade. The ideal would be to get children into a dental home. She explained the difference between a school-linked and school-based sealant program. Judy Ryen ran a pilot sealant program in Bismarck. 27% of the teeth were already decayed so sealants could not be placed. Carla Kelly said the sealant program for the second-third

grade is already too late. They should start a Xylitol program earlier. There needs to be more media effort for oral health issues also.
Lana and the NDDA agreed with one time funding for dental clinics
The Ronald McDonald Care Mobile helps bring access problems to the forefront and raises awareness.
Bev Marsh suggested that schools have vision and hearing screenings now, could they include dental screenings also? The problem is with the ND Century Code-Practice Act. Jeralyn said this would be a position for a public health hygienist and collaborative practice. MN has courses that the RDH must take to be certified. That includes CE's on emergency situations and restorative functions. They have direct MA billing and each RDH would have their own liability insurance. The RDH and DDS would need to have a partnership to make this program work. Sue reported Michigan has a collaborative agreement also. There is no liability for the collaborative dentist but the RDH has the MA number and carries the liability insurance for herself. The reimbursement would go to the RDH. Red Lake Indian Reservation, MN has a collaborative agreement. Kathy Jo Gunderson would be the person to talk to about grant funding there. We will try to get her on the agenda for September.
The September meeting should give the legislative committee direction for possible policy changes. Janelle talked about the scope of practice. The NDDA and NDDHA must compromise in order to make changes in the oral health practices of ND.
JoAnn and Carla suggested having public health hygienists. Phase 1 includes a Coordinator with Phase 2 being the Sealant and varnish programs that include prophies and an education component. Possible areas to target are Head Start parents, WIC mothers and OPOP. The program would need approximately $100,000 for the RDH, DDS, start up money and sustainability. Hollie and Carla will check into the Wisconsin program .

Sue Matteson reviewed the minutes of the prior meetings. The minutes of the May 9th meeting were approved as written (Kathy Mangskau/Joe Cichy) Passed. The special meeting minutes were approved as amended (Sue Matteson/Joe Cichy) Passed. The Board of Directors has the ability to add directors. Presently they are Dave Zentner, Mike Goebel, and Carla Kelly.
Debbie Swanson from Grand Forks talked about their dental clinic. They have seen over 2000 patients and will add more staff in July. She would like to see the dental loan repayment strengthened and more state money added. There was an increase in the number of applicants this past year.
Michelle Burgum of the Red River Valley project said they are waiting to hear from Delta Dental of MN. Presently they have about 45 dentists in the Fargo-Moorhead area that donate dental services to their facility. JoAnn reported Delta Dental donated tooth brushes to the West River Head Start for about 500 families. They had an Oral Health/Literacy meeting in cooperation with PBS and Clifford, the Big Red Dog.

Dave said the legislative committee needs ideas and guidance before writing up an amount for the expanding loan repayment plan. Kimberlie commented that the RMCM would need start up money. The one time dental clinic money should be included, along with the school sealant program. The sealant program would include a planning coordinator. She also would like to see another look at the ND Scope of Practice and MA. All committee are to

come to the next meeting with a one page format of their requests. The OH Coalition will meet with the Governor and Dr.Dwelle for support on OH issues.

Debbie Swanson reported on “Give Kids A Smile”. She was looking at private funding or a grant from Sam Harris. You need a creative and innovative idea to get money from them. Sue said the “Give Kids” project is totally volunteer. Dental supply companies will usually donate supplies.

The next meeting will be September 12, 2008

The meeting was adjourned.

Respectfully submitted,

Hollie Harrington, Secretary

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