Dental Action Plan Template- State of Wyoming

December 2012

BACKGROUND- ORAL HEALTH PROGRAM

- The current Medicaid program in the State of Wyoming is a fee-for-service program with direct payment to providers through a fiscal agent.
- Wyoming provides dental services to children (ages 0-20) and to adults (ages 21 & older).
- For recipients age 21 and older, Medicaid pays for diagnostic and preventive services, basic restorative care and removable prostheses as well as emergency tooth extraction services.
- Wyoming Medicaid also covers orthodontic services for severe malocclusions which impacts function. This program is for ages 12-18.

PROVIDER PARTICIPATION

- Dental provider participation rates in 2012 were at 64% of licensed Wyoming dentists. 325 of the 504 licensed dentists were enrolled with Wyoming Medicaid.
- Of the 325 enrolled dentists with Wyoming Medicaid, the following specialties are represented within Wyoming: Pediatric dentists- 13, Endodontists- 4, Oral Surgeons- 7, Orthodontists- 16
- In SFY 2012, there were 190 dental provider offices in the State of Wyoming providing services, and each county had at least one dental provider office except for Niobrara County. These 190 dental offices provided services to 95 percent of Medicaid recipients who received dental services. Five percent of Medicaid recipients received dental services from out-of-state dental providers.
- In SFY 2012, 80% (152/190) of enrolled dental provider offices submitted more than $10,000.00 in claims.
- In SFY 2012, 19 non-dental providers applied topical fluoride varnishes to high-risk children in a non-dental setting. This includes primary care physicians and pediatricians.
- Dental shortages exist throughout the United States. There is a shortage of dental providers in Wyoming, especially providers who treat Medicaid patients. This shortage is exacerbated by Wyoming’s rural and frontier nature. Fourteen Wyoming counties are designated Dental Health Professional Shortage Areas (HPSA).
- The aging of the professional population may also affect the supply of dental services in the future, as half of Wyoming’s dentists will reach retirement age by 2017.
- Although there are dental providers in most counties in Wyoming, dental specialists exist in only ten of Wyoming’s 23 counties (43 percent).
- Wyoming has two counties that are considered full county geographic dental HPSAs, Converse and Niobrara. Additionally, there are 8 counties within Wyoming that are considered full county low income dental HPSAs. There are only 8 counties in Wyoming that have no dental HPSAs of any kind.
The Dental Advisory Group (DAG) advises Medicaid and other administrators and stakeholders about administration of the Medicaid dental program. The DAG, consisting of two specialists and three general dentists, as well as representatives from Medicaid and its fiscal agent Xerox, meets quarterly. DAG members represent a wide range of interests and experience, as well as various areas of the state and various dental specialties.

Barriers to dental care in Wyoming include limited providers who will accept new Medicaid clients, transportation to appointments (in some cases clients would need to travel 100 miles or more to access a dentist who will accept their Medicaid); clients lack the understanding of the importance of good oral health.

Wyoming has taken steps to improve access to dental care by actively recruiting new providers, offering student loan repayment options and by assisting client’s with transportation arrangements.

To attempt to address dental access issues, in 2007, the Wyoming Legislature passed a measure establishing an educational loan repayment program for students seeking to pursue a degree in dentistry. Dentists who establish a practice in Wyoming for a minimum number of years and accept Medicaid patients may receive repayment for a portion of their dental school tuition.

ACTIVITIES TO ACHIEVE GOALS

- The Department of Health is working with the Wyoming Oral Health Coalition to identify areas in oral health care that are lacking in the state. This effort is an ongoing process to help develop and maintain oral health programs within Wyoming.
- Medicaid will maintain adequate reimbursement rates to dental providers.
- Medicaid has allowed additional provider types to assess the need and provide topical fluoride varnishes to client’s who are at risk for dental caries.
- The Department distributes quarterly publications (Health Check Newsletter) to Medicaid households that have at least one child receiving Medicaid Benefits, which include education and information on the importance of accessing their dental benefits through their Medicaid coverage.
- Medicaid provides free online access for clients and providers to currently enrolled dental providers, including specialists.
- The Department launched the Community Oral Health Coordinator program, a county-based program that employs a dental hygienist to perform oral health screenings for children 6 months to 5 years regardless of eligibility for Medicaid. The Department employees Community Oral Health Coordinators (COHCs) who serve communities that are at highest risk for dental disease. These COHCs screen clients and assist them and their families to access dental care as needed. They also provide fluoride treatments to clients in school and daycare settings.
• The Department uses a State Sealant program to provide reimbursement to providers for sealant applications on children where Medicaid benefits would not otherwise cover sealants.
• Barriers to accessing dental care in Wyoming that will impact the state achieving the new dental goals include long distances to enrolled providers, providers who are not currently taking new Medicaid clients and lack of oral health importance to the clients.
• The Department is encouraging dental providers, who qualify, to sign up and use electronic health records to receive incentive payments.

CURRENT REIMBURSEMENT RATES

• Wyoming Medicaid reimburses for dental services at the lower of Medicaid’s fee schedule or the provider’s usual and customary charge. On September 1, 2004, Medicaid implemented a fee schedule for the most commonly performed dental procedures based on the 75th percentile of the average usual and customary fee for each service at that time. There has not been an increase in fees since 2004; therefore dental procedures are no longer paid at the 75th percentile. Fees for other procedures were similarly calculated.

• D0120- $32.00
• D0140- $45.00
• D0150- $35.00
• D0210- $90.00 Increased in 2010 from $40.00 due to a provider requested rate review
• D0272- $24.00
• D0330- $60.00
• D1120- $35.00
• D1203- $20.00
• D1206- $35.00
• D1351- $28.00

EFFORTS RELATED TO DENTAL SEALANTS

• In 2013, Wyoming Medicaid will have a preventive dental care initiative in progress. This initiative will concentrate on providing more communication to providers regarding the availability of reimbursement for teeth that are not sealed. Teeth that are covered by Medicaid in Wyoming are permanent molars and A, J, K, and T.
• The preventive dental care initiative will also focus on communication and education to parents and guardians about dental sealants. This will be communicated out by paper mailings and web postings.
• Wyoming does not currently have a school-based sealant program.
• Wyoming does not currently have any dental schools.
• Wyoming does not currently have any arrangements made with the dental hygiene programs to treat Medicaid beneficiaries.

ELECTRONIC DENTAL RECORDS
• Electronic dental records have been received well in Wyoming. Approximately half of the dentist’s in Wyoming are using EHRs and are striving to get a certified version.
• It is not known at this time if dental EHRs are being integrated with medical records in Wyoming.
• Wyoming is currently reimbursing dentists with meaningful use incentive payments.