



Consortium for Oral Health Systems
Integration and Improvement

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Rocky Mountain Network of Oral Health (RoMoNOH)

Environmental Scan 2023 Chartbook

NOHI Environmental Scan, 2023

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NOHI Environmental Scan, 2023

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Introduction

About NOHI and COHSII

About NOHI

To improve access to and use of comprehensive, high-quality oral health care for pregnant women, infants, and children at high risk for oral disease, the Health Resources and Services Administration's (HRSA's) Maternal and Child Health Bureau (MCHB) funded the *Networks for Oral Health Integration (NOHI) Within the Maternal and Child Health Safety Net*. During the funding cycle, the NOHI projects will develop, implement, and evaluate models of care using these collective strategies:

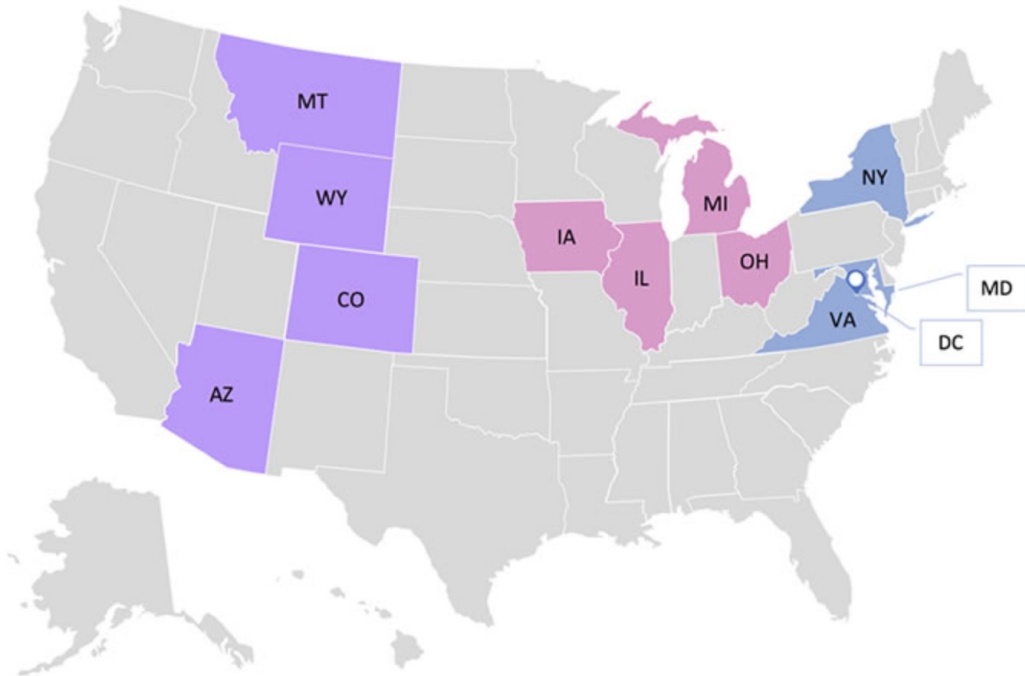
- Enhance integration of oral health care within maternal and child health safety net services (e.g., community health centers [CHCs]).
- Increase knowledge and skills among non-dental providers for delivering optimal oral health services.
- Increase knowledge and awareness of preventive oral health practices among parents and other caregivers to increase adoption of these practices, including use of oral health services.

About COHSII

NOHI projects participate in a learning collaborative supported by the Consortium for Oral Health Systems Integration and Improvement (COHSII). COHSII is led by the National Maternal and Child Oral Health Resource Center working in partnership with the Association of State and Territorial Dental Directors and the Dental Quality Alliance. COHSII is a national partnership serving the public health community. The purpose of COHSII is to expand access to integrated preventive oral health care for the maternal and child health population, particularly in safety net sites, by providing high-quality oral health technical assistance, training, and resources. COHSII is supported by a cooperative agreement from HRSA, MCHB.

About NOHI Projects

Three NOHI projects were awarded funding for a 5-year period, 2019–2024



Midwest Network for Oral Health Integration (MNOHI)

States: Illinois, Iowa, Michigan, and Ohio

Target population: Children ages 6–11 years

Rocky Mountain Network of Oral Health (RoMoNOH)

States: Arizona, Colorado, Montana, and Wyoming

Target population: Children from birth to age 40 months and pregnant women

Transforming Oral Health for Families (TOHF)

States/Jurisdiction: District of Columbia, Maryland, New York, and Virginia

Target population: Children from birth to age 40 months and pregnant women

The Environmental Scan

Development

In 2020, COHSII convened a series of meetings with the three NOHI projects to facilitate the development of an environmental scan tool to gain knowledge about factors that could impact the integration of oral health care into primary care at the state/jurisdiction level with the purpose of informing the work of the NOHI projects. The scan included questions focused on scope of practice of medical and dental providers, Medicaid payment, and policies and regulations that impact the target population's oral health. In 2021 and 2022 COHSII facilitated the NOHI projects' review and revision of the environmental scan tool, and the NOHI projects conducted a second (project years 2–3) and a third (project year 4) environmental scan. The American Academy of Pediatrics, Section on Oral Health staff conducted the environmental scans for the RoMoNOH states, while state/jurisdiction coordinators and/or project partners conducted the scans for MNOHI and TOHF states/jurisdiction. Click [here](#) for the environmental scan tool. This chartbook presents the results of the third environmental scan. COHSII analyzed the environmental scan data and prepared the chartbook with content reviewed by NOHI projects and state dental directors. See *Networks for Oral Health Integration (NOHI) Within the Maternal and Child Health Safety Net: Environmental Scan 2023 Chartbook* for the results of the environmental scan for all 12 NOHI states/jurisdiction. This chartbook was produced to provide the results of the environmental scan for the RoMoNOH states.

Limitations





The individuals who completed the environmental scan did not receive formal and standardized training on using the environmental scan tool. Because of this, questions may have been interpreted differently, and the results may not be directly comparable between states/jurisdiction.

Chartbook Layout

This chartbook is divided into seven sections:

1. Scope of practice
2. Medicaid billing and reimbursement
3. Dental hygienists
4. Dental therapists
5. Community health workers
6. Teledentistry
7. General information

Within each section, pages are color coded based on the type of information presented:

-  Information about medical providers
-  Information about dental providers
-  Other information
-  Section dividers

Chartbook Definitions

- Dental provider*: dentist, dental hygienist, dental therapist, dental assistant
- Medical provider (non-dental provider*): physician, physician assistant, nurse practitioner, advanced practice registered nurse, certified nurse midwife
- Medical team member (non-dental team member*): Registered nurse, licensed practical nurse, certified medical assistant, registered medical assistant

* Definitions used in NOHI environmental scan

Scope of Practice

Scope of practice refers to the procedures and actions that a health provider is permitted to perform in keeping with the terms of their professional license or certification. Scope of practice is limited to what state/jurisdiction law allows based on the provider's education, experience, and/or demonstrated competency.

Oral Health Scope of Practice for Medical Providers

Is the service allowable under the provider's scope of practice?

| State | Physician | | Nurse Practitioner | | Physician Assistant | |
|----------|-----------------|------------------|--------------------|------------------|---------------------|------------------|
| | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish |
| Arizona | Yes | Yes | Yes | Yes | Yes | Yes |
| Colorado | Yes | Yes | Yes | Yes | Yes | Yes |
| Montana | Yes | Yes | Yes | Yes | Yes | Yes |
| Wyoming | Yes | Yes | Yes | Yes | Yes | Yes |

Summary



Physicians, nurse practitioners, and physician assistants can complete oral health risk assessments and apply fluoride varnish in all four RoMoNOH states.

Oral Health Scope of Practice for Medical Providers and Team Members

Is the service allowable under the provider's scope of practice?

| State | Advanced Practice Nurse | | Certified Nurse Midwife | | Registered Nurse or Licensed Practical Nurse | | Certified or Registered Medical Assistant | |
|-----------|-------------------------|------------------|-------------------------|------------------|--|------------------|---|------------------|
| | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish |
| Arizona | Delegation | Delegation | Delegation | Delegation | Delegation | Delegation | No | No |
| Colorado* | No | Delegation | No | Delegation | No | Delegation | No | Delegation |
| Montana | Yes | Yes | No | No | Yes | Yes | Delegation | Delegation |
| Wyoming | Yes | Yes | No | No | Yes | Yes | No | No |

* In Colorado, a caries risk assessment (CRA) can be completed by advanced practice nurses, certified nurse midwives, registered nurses or licensed practical nurses, and certified or registered medical assistants. However, the CRA must be reviewed by the prescriptive authority clinician to diagnose risk.

Summary



Advanced practice nurses and registered nurses or licensed practical nurses can apply fluoride varnish in all four RoMoNOH states either directly or through delegation. Certified nurse midwives can apply fluoride varnish in Colorado through delegation while certified or registered medical assistants can apply fluoride varnish in Colorado and Montana through delegation.

Oral Health Scope of Practice for Dental Providers

Is the service allowable under the provider's scope of practice?

| State | Dentist | | Dental Therapist | |
|----------|-----------------|------------------|------------------|------------------|
| | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish |
| Arizona | Yes | Yes | Yes | Yes |
| Colorado | Yes | Yes | Yes | Yes |
| Montana | Yes | Yes | Yes | Yes |
| Wyoming | Yes | Yes | Not applicable | Not applicable |

Summary



Dentists can complete an oral health risk assessment and apply fluoride varnish in all four RoMoNOH states. In the RoMoNOH states with dental therapists (Arizona, Colorado, and Montana), dental therapists can complete an oral health risk assessment and apply fluoride varnish. In Montana, dental therapists can practice on tribal lands only.

Oral Health Scope of Practice for Dental Providers (Continued)

Is the service allowable under the provider's scope of practice?

| State | Dental Hygienist | | Advanced Practice Hygienist | | Registered Dental Assistant* | | Expanded Function Dental Assistant | |
|----------|------------------|------------------|-----------------------------|------------------|------------------------------|------------------|------------------------------------|------------------|
| | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish | Risk Assessment | Fluoride Varnish |
| Arizona | Yes | Yes | Yes | Yes | No | Yes | No | Yes |
| Colorado | Yes | Yes | Yes | Yes | Yes | Yes | Not applicable | Not applicable |
| Montana | Yes | Yes | Yes | Yes | No | Yes | Not applicable | Not applicable |
| Wyoming | No | Yes | No | Yes | No | Yes | No | Not available |

* In Arizona, the term “registered dental assistant” is not applicable. In the state, dental assistants must hold a current Arizona Board of Dentistry–approved certificate to conduct radiographs.

Summary



Dental hygienists can complete an oral health risk assessment in all RoMoNOH states except Wyoming and can apply fluoride varnish in all RoMoNOH states. Registered dental assistants can apply fluoride varnish in all RoMoNOH states.

Medicaid Billing and Reimbursement

Medicaid Billable Services for Medical Providers

Can a medical provider bill and be reimbursed for the service through Medicaid fee-for-service?

| State | Oral Health Risk Assessment | Fluoride Varnish Application | Oral Health Education | Oral Health Case Management |
|----------|-----------------------------|------------------------------|-----------------------|-----------------------------|
| Arizona | No | Yes | No | No |
| Colorado | Yes | Yes | Yes* | No |
| Montana | No | Yes | No | No |
| Wyoming | Yes | Yes | No | No |

* In Colorado, Medicaid reimburses for “oral evaluation, counseling with primary caregiver” of children from birth to age 36 months using code D0145.

Summary



Only Colorado and Wyoming reimburse medical providers for an oral health risk assessment. In all four RoMoNOH states, medical providers can be reimbursed by Medicaid fee-for-service for applying fluoride varnish.



No RoMoNOH states reimburse medical providers for oral health case management and only Colorado reimburses for oral health education.

Oral Health Services Billable Outside Prospective Payment System (PPS)*

What oral health services performed by medical providers can be billed to Medicaid outside the PPS?

| State | Services | Comment |
|----------|---|---------|
| Arizona | Fluoride varnish | |
| Colorado | Oral evaluation, fluoride varnish, dental screening (age 3-4), assessment | |
| Montana | Fluoride varnish | |
| Wyoming | Oral health assessment, fluoride varnish | |

Summary



Safety-net clinics can bill outside the prospective payment system for oral health services in all four RoMoNOH states.

*PPS is a method of reimbursement in which Medicaid payment is made based on a predetermined, fixed amount.

Medical Providers That Can Directly Bill for Fluoride Varnish Application

Can the medical provider directly bill Medicaid fee-for-service for a fluoride varnish application?

| State | Physician | Nurse Practitioner | Physician Assistant | Advanced Practice Nurse | Certified Nurse Midwife | Registered Nurse | Certified Medical Assistant |
|----------|-----------|--------------------|---------------------|-------------------------|-------------------------|------------------|-----------------------------|
| Arizona | Yes | No | No | No | No | No | No |
| Colorado | Yes | Yes | Yes | No | No | No | No |
| Montana | Yes | Yes | Yes | Yes | Yes | No | No |
| Wyoming | Yes | Yes | Yes | No | No | Yes | No |

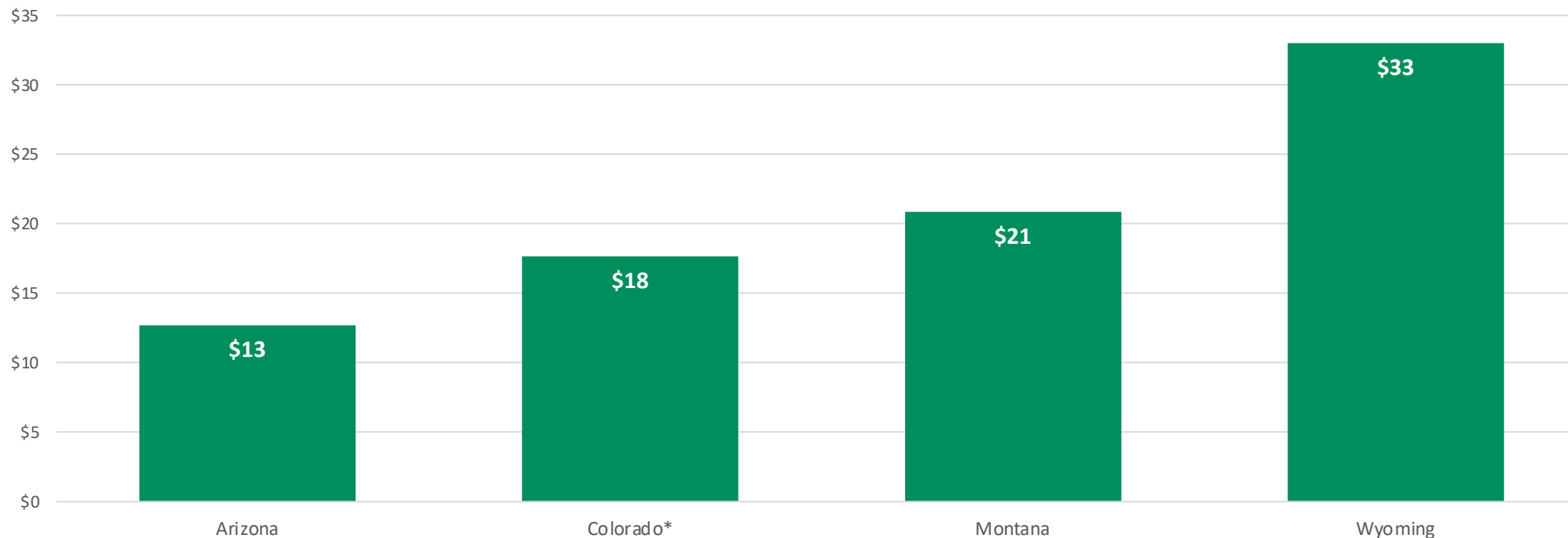
Summary



Physicians can directly bill Medicaid for a fluoride varnish application in all RoMoNOH states. Nurse practitioners and physician assistants can directly bill Medicaid for a fluoride varnish application in all states except Arizona. Registered nurses can directly bill Medicaid for a fluoride varnish application in Wyoming.

Medicaid Reimbursement for Fluoride Varnish Application to Medical Providers

Medicaid Fee-for-Service Reimbursement Rates (Rounded) for Fluoride Varnish Application (CPT Code 99188) Provided by a Physician or Their State-Allowed Designee, 2023



* CPT 99188 is not a covered benefit. Medical providers bill for fluoride varnish application using CDT Code D1206.



Medicaid fee-for-service reimbursement rates for fluoride varnish application provided by physicians or their state-allowed designee vary by state from a low of \$13 in Arizona to a high of \$33 in Wyoming.

Fluoride Varnish Application by Medical Providers

| State | Must Take a Training Course for Medicaid Reimbursement | Number of Applications Per Year | Must Be Combined with Well-Child Visit | Number Reduced if Child Receives from Dentist |
|----------|--|--|--|---|
| Arizona | Yes | 4 | No | No |
| Colorado | Yes | Birth to 5 years of age: 2 (4 for high risk) 5–20 years of age: 2 (3 for high risk) | Yes | Yes |
| Montana | No | 6 | Yes | Not available |
| Wyoming | No | 3 | Yes | No |

Summary



Half of the RoMoNOH states (Arizona and Colorado) require that medical providers take a training course before they can be reimbursed by Medicaid for applying fluoride varnish.



All the RoMoNOH states allow medical providers to apply fluoride varnish to a high-risk child three or more times per year.

Restrictions for Fluoride Varnish Application by Medical Providers

Describe age limits/range for reimbursable fluoride varnish applications by a medical provider for a child.

How many times per year can a medical provider be reimbursed for applying fluoride varnish for a pregnant woman?

| State | Age Limits for Children | Number of Varnish Applications for Pregnant Woman |
|----------|--------------------------|---|
| Arizona | Birth to 5 years of age | 0 |
| Colorado | <21 years of age | <21 years (3/year) |
| Montana | <21 years of age | <21 years (2/year low risk, 6/year high risk) |
| Wyoming | Birth to 14 years of age | 0 |

Summary



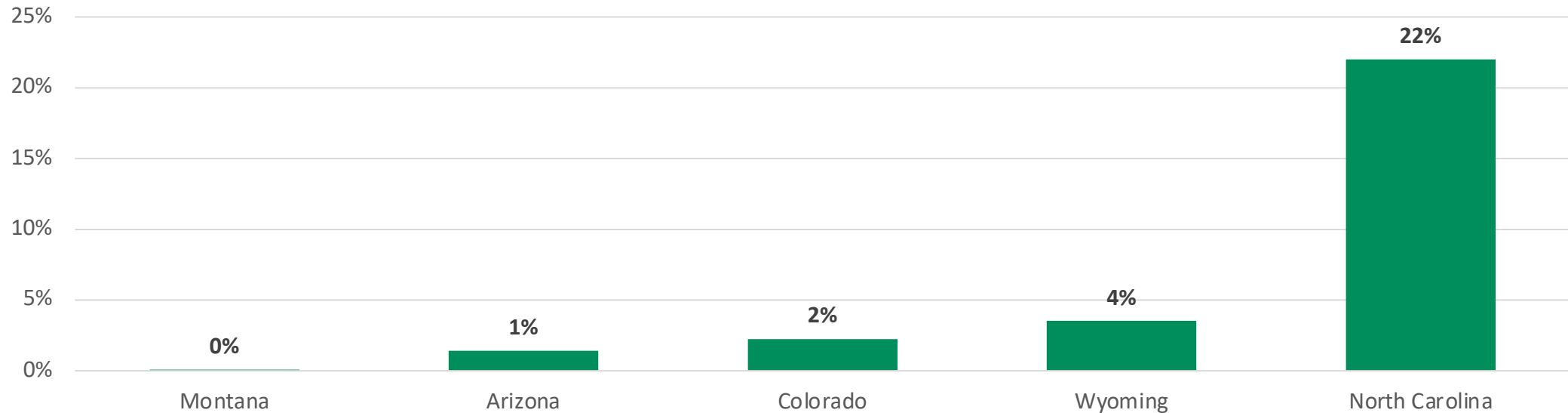
In Arizona, medical providers can be reimbursed for a fluoride varnish application for children from birth to 5 years of age only. The upper limit in Wyoming is 14 years of age. Two states (Colorado and Montana) reimburse medical providers for children <21 years of age.



Colorado and Montana reimburse medical providers for a fluoride varnish applied to a pregnant woman if the woman is <21 years of age. No states reimburse medical providers for a fluoride varnish for individuals ≥ 21 years.

Medicaid Recipients That Received a Topical Fluoride Application

Percentage of Medicaid Recipients Ages 1–2 Years That Received a Topical Fluoride Application From a Medical Provider or a Direct Access Dental Hygienist, 2020



* Data insufficient to display

Summary



In the RoMoNOH states, few young children enrolled in Medicaid are receiving a topical fluoride application from a medical provider or direct access dental hygienist, especially compared to North Carolina, which is the state with the highest percentage of children receiving a topical fluoride application from a medical provider or direct access dental hygienist.

Source: Herndon J, Ojha D, Layman S, Colangelo E, Aravamudhan K. 2022. *Dental Quality Alliance Oral Healthcare Quality State Profiles*. Chicago, IL: American Dental Association; Gainesville, FL: Key Analytics and Consulting. Accessed September 26, 2023.

Note: The Centers for Medicare & Medicaid Services has two provider classifications, “dental,” which includes services provided by or under the supervision of a dentist and “oral health,” which includes services provided by other personnel (e.g., physicians, direct access dental hygienists).

Medicaid Billable Services for Dental Providers

Can a dental provider bill and be reimbursed for oral health services through Medicaid fee-for-service?

| State | Oral Health Risk Assessment (D0601-0603) | Fluoride Varnish (D1206) | Oral Hygiene Instruction (D1330) | Oral Health Case Management (D9992) |
|----------|---|-----------------------------|-------------------------------------|--|
| Arizona | No | Yes | No | No |
| Colorado | No | Yes | No | No |
| Montana | Yes | Yes | Yes | Yes |
| Wyoming | No | Yes | Yes | No |

Summary



Montana is the only RoMoNOH state that reimburses dental providers for an oral health risk assessment, while all states reimburse for a fluoride varnish application.



Only Montana and Wyoming reimburse dental providers for oral hygiene instruction, and only Montana reimburses for oral health case management.

Dental Providers That Can Directly Bill for Fluoride Varnish

Can a dental provider directly bill Medicaid for a fluoride varnish application?

| State | Dentist | Dental Therapist | Dental Hygienist | Advanced Practice Hygienist | Registered Dental Assistant | Expanded Function Dental Assistant |
|----------|---------|------------------|------------------|-----------------------------|-----------------------------|------------------------------------|
| Arizona | Yes | No | No | Yes | No | No |
| Colorado | Yes | No | Yes | Yes | No | No |
| Montana | Yes | No | Yes | Yes | No | No |
| Wyoming | Yes | Not applicable | No | No | No | No |

Summary



Dentists can directly bill Medicaid for a fluoride varnish application in all RoMoNOH states, while dental hygienists can directly bill in two states (Colorado and Montana).

Restrictions on Fluoride Varnish Application by Dental Providers

Describe age limits/range for the number of fluoride varnish applications/year by a dental provider for a child.

How many times per year can a dental provider be reimbursed for fluoride varnish for a pregnant woman ≥ 21 years of age?

| State | Age Limits/Range for Varnish for a Child | Number of Varnish Applications for Pregnant Woman |
|----------|--|---|
| Arizona | Birth to 2 years of age (4/year), 3–20 years of age (2/year) | 0 |
| Colorado | Birth to 4 years of age (2/year low risk, 4/year high risk) 5–20 years of age (2/year low risk, 3/year high risk) | 1 |
| Montana | <21 years of age (6/year) | 0 |
| Wyoming | Birth to 14 years of age (2/year) | 0 |

Summary



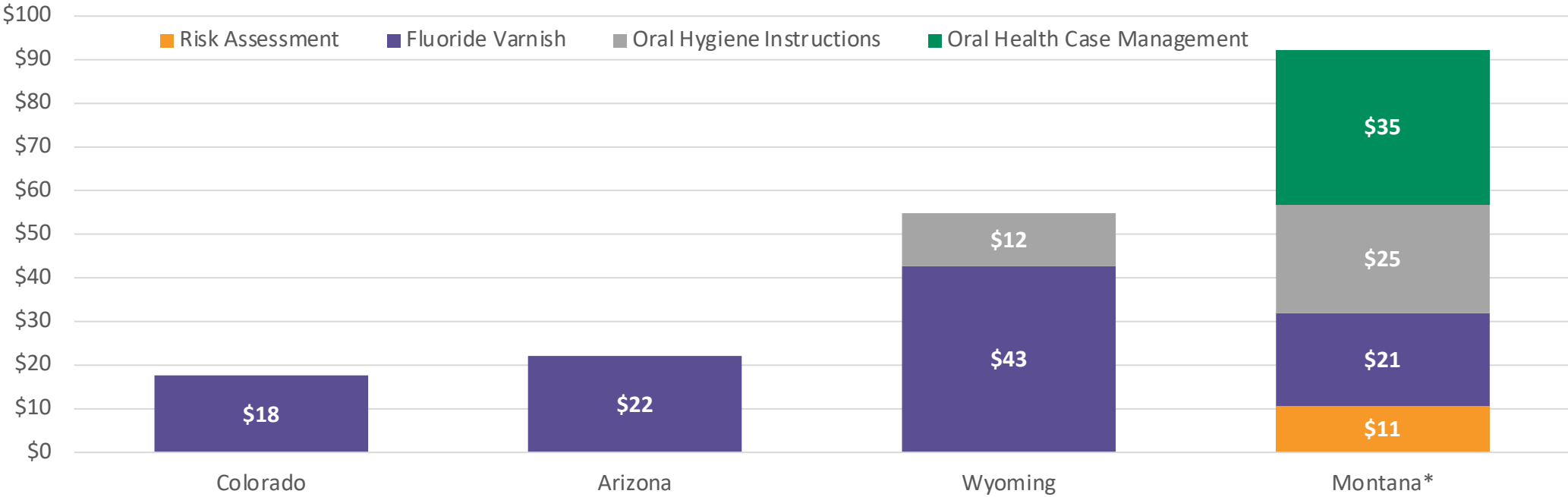
All RoMoNOH states, except Wyoming, reimburse dental providers for a topical fluoride application for children <21 years of age enrolled in Medicaid. Wyoming does not provide reimbursement for children >14 years of age enrolled in Medicaid.



One RoMoNOH state (Colorado) reimburses dental providers for a fluoride varnish application provided to pregnant women ≥ 21 years of age.

Medicaid Reimbursement to Dental Providers

Medicaid Fee-for-Service Reimbursement Rates (Rounded) for Risk Assessment (D0601-0603), Fluoride Varnish (D1206), Oral Hygiene Instruction (D1330), and Case Management (D9992) Provided by a Dentist or Their Designee, 2023



* In Montana, only AbCd providers are eligible to receive reimbursement for oral hygiene instruction.

\$ Medicaid fee-for-service reimbursement rates to dental providers for this bundle of services varies by RoMoNOH state from a low of \$18 in Colorado to a high of \$92 for Access to Baby and Child Dentistry (AbCd) providers in Montana. Montana is the only RoMoNOH state that reimburses for case management.

Dental Hygienists

Dental hygienists are licensed dental providers who focus on preventing and treating oral diseases to protect patients' teeth, gums, and overall health. They are graduates of accredited dental hygiene education programs and must pass a written national board examination and a clinical examination before they are licensed to practice. Hygienists work in a variety of settings such as private dental offices, schools, public health clinics, and nursing facilities.

Dental Hygienists—Advanced Practice Designation

States with dental hygiene designations other than standard dental hygiene practice

| State | Name of Advanced Dental Hygiene Designation |
|----------|--|
| Arizona | Affiliated practice dental hygienist |
| Colorado | Independent practice dental hygienist* |
| Montana | Public health dental hygienist/limited access permit |
| Wyoming | Public health dental hygienist |

* In Colorado, all dental hygienists can practice independently. Independent practice does not require an additional designation or permit.

Summary and Impact



All the RoMoNOH states have an advanced dental hygiene designation, which allows dental hygienists to work outside the traditional private dental practice with general or direct access supervision.



Advanced practice designations expand access to preventive oral health care by allowing dental hygienists to provide care in community-based locations such as schools and other public health settings.

Source: American Dental Hygienists' Association. 2022. *Direct Access States*. Chicago, IL: American Dental Hygienists' Association. www.adha.org/direct-access

Dental Hygienists—Direct Access

Direct access refers to the ability of a dental hygienist to initiate treatment based on their assessment of a patient's needs without the specific authorization of a dentist, treat the patient without the presence of a dentist, and maintain a provider-patient relationship.

Colorado is the only RoMoNOH state that allows direct access dental hygienists to apply fluoride varnish in a community-based setting without a special permit or advanced designation. Direct access to fluoride varnish in a community-based setting is available in Arizona, Montana, and Wyoming if the hygienist has a special permit, has advanced designation, practices in a public health setting, or has a collaborative practice agreement with a dentist.

Source: American Dental Hygienists' Association. 2022. *Direct Access States*. Chicago, IL: American Dental Hygienists' Association. www.adha.org/direct-access

Dental Therapists

Dental therapists are midlevel providers, similar to physician assistants. Dentists hire and supervise therapists to provide high-quality care to more patients, grow their practices, and provide treatment to populations that are underserved and at high risk for oral disease. Therapists can work in traditional dental offices and clinics or in community settings such as schools or nursing homes. They provide preventive and routine restorative care, including filling cavities, placing temporary crowns, and extracting badly diseased or loose teeth.

Dental Therapists—Legislation

States with dental therapist legislation

As of September 2023, three RoMoNOH states have passed dental therapy legislation, but there are no practicing therapists in any of the states—Arizona, Colorado, and Montana (Indian Health Service and tribal programs only).

Note: Montana’s dental therapy legislation removed restorative procedures, including extractions, from the authorized scope of practice for therapists, which limits their ability to meet the oral health needs of Montana’s tribes.

Community Health Workers

A community health worker is a frontline public health worker who is a trusted member of and/or has a close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

Community Health Workers—Examples



One RoMoNOH state (Colorado) has a certification process for community health workers.



Community health workers have been identified by many titles, such as community health advisors, lay health advocates, *promotoras*, outreach educators, community health representatives, peer health promoters, and peer health educators.

Teledentistry

Teledentistry is the use of electronic information, imaging, and communication technologies, including interactive audio, video, and data communications, as well as store and forward technologies, to provide and support oral health care delivery, diagnosis, consultation, treatment, transfer of information, and education.

Teledentistry—Examples

| State | Practiced in State | Which Providers Can Use Teledentistry | Synchronous Reimbursed by Medicaid | Asynchronous Reimbursed by Medicaid | Parity in Payment |
|----------|--------------------|---|------------------------------------|-------------------------------------|-------------------|
| Arizona | Yes | Dentist, therapist, dental hygienist | Yes | No | No |
| Colorado | Yes | Dentist, dental hygienist | Yes | Yes | Yes |
| Montana | Yes | Dentist | Yes | Yes | Yes |
| Wyoming | Yes | Dentist, dental hygienist, dental auxiliary | Yes | No | Yes |

Summary



Teledentistry is permitted and is being practiced in all RoMoNOH states. Dental hygienists can use teledentistry in Arizona, Colorado, and Wyoming.



Medicaid reimburses for synchronous teledentistry in all RoMoNOH states. Medicaid reimburses for asynchronous teledentistry in Colorado and Montana.

General Information

Community Health Centers, Medicaid, and Pregnancy Benefits

| State | CHCs Can Bill Same Day For Medical and Dental | Medicaid Medical Administration | Medicaid Dental Administration | State Has Medicaid Pregnancy Benefit | State Has Auto Enrollment for Pregnant Women | State Has Perinatal Practice Guidelines |
|----------|---|---------------------------------|--------------------------------|--------------------------------------|--|---|
| Arizona | Yes | In house | In house | No | Not applicable | Yes |
| Colorado | Yes | In house | Contracted out | Yes | Yes | No |
| Montana | Yes | Contracted out | Contracted out | Yes | Yes | Not available |
| Wyoming | Yes | In house | In house | Yes | Yes | No |

Programs to Incentivize Dentists and Value-Based Care Payments

| State | State Has Programs to Incentivize Dentists to Participate in Medicaid | State Has Value-Based Care Payment Models for Oral Health |
|----------|---|---|
| Arizona | Yes | Not available |
| Colorado | Yes | Yes |
| Montana | Yes | No |
| Wyoming | No | No |

Incentives for Medicaid Participation—Examples

Examples of how states are incentivizing dentists for participating in Medicaid



Arizona: Dental providers are eligible for a differential adjusted payment increase under the following criteria: (1) A provider that meets the criteria for the dental sealants for children performance measure will qualify for a 1% increase on all claims. (2) A provider that meets the criteria for the provision of dental services on weekends will qualify for a 1% increase on all claims.



Colorado: Dental providers working in designated health professional shortage areas can apply to receive funding to repay qualifying educational loans. Participants must see underserved patients at an approved clinical site for the entire service obligation.



Montana: The AbCd program was established to increase access to dental services for Medicaid eligible children under 6 years of age. Dentists must receive continuing education in early pediatric dental techniques to qualify as an AbCd specialist. This specialty endorsement allows AbCd dentists to be reimbursed for an expanded set of services including an oral evaluation, a caries susceptibility test, nutritional counseling, and oral hygiene instruction.

Surveillance, Performance Indicators, and Education

| State | Percentage with Fluoridated Water, 2020* | Had State Added BRFSS, PRAMS, and YRBSS Oral Health Questions, 2016—2020 | State Has Oral Health Performance Indicators Through Accountable Care Collaborative | Number of Dental Schools | Number of Dental Hygiene Programs |
|----------|--|--|---|--------------------------|-----------------------------------|
| Arizona | 58% | PRAMS | Not available | 2 | 7 |
| Colorado | 75% | BRFSS, PRAMS, YRBSS | Yes | 1 | 4 |
| Montana | 31% | BRFSS, PRAMS | Not available | 0 | 1 |
| Wyoming | 56% | None | No | 0 | 2 |

* Percentage of the state's population on a community water system that had access to fluoridated water.

BRFSS = Behavioral Risk Factor Surveillance System
 PRAMS = Pregnancy Risk Assessment Monitoring System
 YRBSS = Youth Risk Behavior Surveillance System

Non-Dental Services Provided by Dental Providers

| State | Allowable Non-Dental Services | Reimbursed for Non-Dental Services |
|----------|---|---|
| Arizona | Dentists and dental hygienists can provide vaccines during a declared local, state, and national emergency. | No |
| Colorado | Dentists can provide HbA1c in-office point of service testing (A1C), blood glucose level tests, COVID vaccines, hypertension screening, behavioral health screening, and tobacco-cessation education. | Yes, for A1C, blood glucose level tests and COVID vaccines. No, for other services |
| Montana | Dentists and dental hygienists can provide tobacco prevention- and -cessation counseling, and dentists can prescribe tobacco-cessation medication. | Yes, for tobacco counseling |
| Wyoming | None | No |

State Oral Health Program and Oral Health Coalition

| State | Has an Oral Health Program* | The Leader of the Oral Health Program is a Dental Professional* | The Leader of the Oral Health Program has a Master's Degree (degree)* | Has an Oral Health Coalition |
|----------|-----------------------------|---|---|------------------------------|
| Arizona | Yes | Yes | Yes (MSPH) | Yes |
| Colorado | Yes | Yes | Yes (MPH) | No |
| Montana | Yes | Yes | Yes (MS) | No |
| Wyoming | No | Not Applicable | Not Applicable | No |

*Source: Association of State and Territorial Dental Directors Membership Roster as of October 3, 2023

Dentist Participation in Medicaid

| State | Number of Dentists Working in Dentistry (2022) | Percentage of Dentists Participating in Medicaid/CHIP (2019) | Percentage of Dentists that Served 1+ Medicaid Enrollees (2017) | Percentage of Dentists that Served 100+ Medicaid Enrollees (2017) |
|----------|--|--|---|---|
| Arizona | 4,324 | 30% | 22% | 13% |
| Colorado | 3,990 | 60% | 28% | 11% |
| Montana | 637 | 73% | 63% | 27% |
| Wyoming | 310 | 66% | 60% | 18% |

CHIP=Children's Health Insurance Program

Sources: (1) American Dental Association. N.d. *The Dentist Workforce* [webpage]. Accessed September 26, 2023. www.ada.org/resources/research/health-policy-institute/dentist-workforce
 (2) Vujicic M, Nasseh K, Fosse C. 2021. *Dentist Participation in Medicaid: How Should It be Measured? Does It Matter?* Chicago, IL: American Dental Association. Accessed October 3, 2023 . (3) American Dental Association. 2020. Dentist Participation in Medicaid or CHIP. Accessed December 21, 2023. <https://www.ada.org/-/media/project/ada-organization/ada/ada-org>

Appendices

Appendix 1: Medicaid Reimbursement to Dental Hygienists

The following three RoMoNOH states have statutory or regulatory language allowing the state Medicaid agency to reimburse dental hygienists for services rendered.

- **Arizona:** Dental hygienists in affiliated practice with a dentist who is also a Medicaid provider may be reimbursed for certain services included in the practice agreement with the dentist.
- **Colorado:** Unsupervised dental hygienists may bill with the affiliation of a dentist.
- **Montana:** Dental hygienists practicing under public health supervision may provide preventive dental hygiene services.

Source: American Dental Hygienists' Association. N.d. *Reimbursement* [webpage]. Accessed September 26, 2023. www.adha.org/reimbursement

Appendix 2: Community Water Fluoridation

Percentage of population served by a community water system receiving fluoridated water

| State | Number of Persons Receiving Fluoridated Water | Number of Persons Served by CWS | % Population Served by CWS Receiving Fluoridated Water | Rank Out of 51 States/Jurisdiction |
|----------|---|---------------------------------|--|------------------------------------|
| Arizona | 4,011,354 | 6,948,635 | 57.7 | 39 |
| Colorado | 4,123,671 | 5,480,628 | 75.2 | 28 |
| Montana | 240,294 | 765,861 | 31.4 | 48 |
| Wyoming | 255,654 | 459,997 | 55.6 | 42 |

CWS = community water system

Source: Centers for Disease Control and Prevention. 2023. *2020 Fluoridation Statistics* [webpage]. Accessed September 26, 2023. www.cdc.gov/fluoridation/statistics/2020stats.htm

Appendix 3: Dental Workforce and Health Professional Shortage Area Designations

Dentists working in dentistry and dental health professional shortage area (dHPSA) information, 2022

| State | Number of Dentists Working in Dentistry | Number Dentists per 100,000 Population | Total Dental Care HPSA Designations | Population of Designated dHPSAs | Percentage of Need Met | Practitioners Needed to Remove dHPSA Designation |
|-------------------|---|--|-------------------------------------|---------------------------------|------------------------|--|
| Arizona | 4,324 | 58.8 | 242 | 2,849,272 | 33% | 467 |
| Colorado | 3,990 | 68.3 | 104 | 1,137,528 | 49% | 143 |
| Montana | 637 | 56.7 | 134 | 381,453 | 41% | 54 |
| Wyoming | 310 | 53.3 | 29 | 49,361 | 32% | 8 |
| Total U.S. | 202,536 | 60.8 | 7,192 | 69,478,189 | 32% | 11,896 |

Sources: (1) American Dental Association. N.d. *The Dentist Workforce* [webpage]. Accessed September 26, 2023. www.ada.org/resources/research/health-policy-institute/dentist-workforce
 (2) Kaiser Family Foundation. 2022. *Dental Care Health Professional Shortage Areas (HPSA)* [webpage]. Accessed September 26, 2023. www.kff.org/other/state-indicator/dental-care-health-professional-shortage-areas-hpsas

Appendix 4: Acronyms Used in Chartbook

- AbCd: Access to Baby and Child Dentistry program in Montana
- BRFSS: Behavioral Risk Factor Surveillance System
- CDT Code: Code on Dental Procedures and Nomenclature
- CHC: Community health center
- CHIP: Children's Health Insurance Program
- CMS: Centers for Medicare & Medicaid Services
- COHSII: Consortium for Oral Health Systems Integration and Improvement
- CPT Code: Current Procedural Terminology codes
- CWS: Community water system
- dHPSA: Dental health professional shortage area
- EPSDT: Early and Periodic Screening, Diagnostic, and Treatment
- HPSA: Health professional shortage area
- Medicaid FFS: Medicaid fee-for-service
- MNOHI: Midwest Network for Oral Health Integration
- NOHI: Networks for Oral Health Integration Within the Maternal and Child Health Safety Net
- NPI: National Provider Identifier
- PRAMS: Pregnancy Risk Assessment Monitoring System
- RoMoNOH: Rocky Mountain Network of Oral Health
- TOHF: Transforming Oral Health for Families
- YRBSS: Youth Risk Behavior Surveillance System