



## Senior Dental Advisory Committee Meeting Minutes

Via [Zoom](#)  
December 17, 2024  
10:00 a.m. - 12:00 p.m.

### 1. Call to Order - 10:02 a.m.

Leighanna Konetski called the meeting to order at 10:02 a.m.

### 2. Roll Call

There were sufficient members for a quorum.

#### A. Members Present

Dr. Matt Carlston, Sarah Summers, Melissa Emery, Dr. Karl Kohlgraf, Leighanna Konetski, Katie Stuvell, Sarah Dirks (Joined at 10:52 a.m.) and Dana Turner (Joined at 11:24 a.m.)

#### B. Members Excused

Yvonne Castillo and Andrea Nelson

#### C. Staff Present

Chandra Vital, Taryn Graf, Alondra Yanez, Rick Love, Mercedes Vieira-Gomes

### 3. Approval of Minutes

- Dr. Kohlgraf motioned to approve the minutes from the DAC meeting held on October 15, 2024, Melissa Emery seconded. The motion passed unanimously.

### 4. Review of DAC conflict of interest 10:05 a.m. to 10:06 a.m.

- Leighanna Konetski reminded the DAC of conflicts of interest to be kept in mind since procedure codes are tied to receiving funds.

### 5. Review of SDP Procedure Codes 10:07 a.m. to 11:48 am

- Chandra Vital reminded the DAC that changes to the procedure codes are not what HCPF is recommending necessarily, but included changes contain verbiage from





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- Medicaid and the ADA Code Book. It is up to the DAC to decide what changes are made.
- Committee Discussion of fee schedule
  - D0120
    - Dr. Matthew Carlston brought up the challenge of patients doubling up on procedures using different providers and being denied payment if it happened.
    - Chandra Vital stated that we do not currently have a database for grantees to verify if a procedure has been completed for a patient by another grantee. HCPF would proceed with payment.
  - D0140 - D0180
    - Committee members said that D0140 and other diagnostic procedures can be challenging because patients have different dental needs and more than two emergencies in a 12-month cycle, which some grantees just write off.
    - Sarah Summers stated that they complete procedure D0180 on an annual basis and don't get compensated for the work they are doing since the program only reimburses every 36 months.
    - Dr. Matthew Carlston stated leaving the wording the same as doctors and providers are familiar with the procedure frequencies and billing.
  - D0210 - D0330
    - Sarah Summers spoke about D0210 and D0330 counting as a full mouth series and being able to bill at different locations.
    - Chandra Vital stated that these procedures were per grantee.
  - D1110
    - D1110 and D4910 were discussed about the frequency.
    - Dr. Carlston said that D4910 should remain four times per year, but D1110 should remain at two times per year.
    - Committee members suggested that the line stating "May be alternated with D4910 for maintenance of periodontally-involved individuals" be taken out. Also to take out "D4910" from row 19 of the Covered Procedures document and accept the rest of the Medicaid suggestion of two per 12 months.





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- The Committee suggested that Line 20 be taken out of code D1110 where it states, “May be billed for routine prophylaxis.”
- D1206 - D1208
  - No changes to discuss
- D1354 - D1355
  - These codes were added to the grant program a few years ago and there was concern about misuse of the codes.
  - No suggested adjustments from the recommended changes.
- Chandra Vital informed the DAC that this meeting was posted to the website for all to attend, however the procedure changes and meeting invitation were not emailed to the stakeholders individually. The DAC decided not to vote on any procedure changes at this time due to not having any public comment. Suggestions during this meeting will be emailed out to stakeholders for review prior to the next meeting. Public comments will be heard later in this meeting, if any join, or during the next meeting prior to voting.
- D2140 - D2794
  - No suggested adjustments from the recommended changes.
- D2910 - D2920
  - No changes.
- D2950 - D2954
  - No suggested adjustments from the recommended changes.
- D3310 - D3330
  - Dr. Matthew Carlston and Dr. Sarah Dirks asked about retreats and possibly adding codes D3346, D3347 and D3348.
  - Chandra Vital asked members requesting procedure code additions for an email and reason why they should be added to present to the Medical Services Board.
  - No suggested adjustments from the recommended changes to D3310 - D3330.
- D4341 - D4342





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- There was discussion about the previous decision the DAC made not allowing four quadrants on a single visit. The question was brought up whether this issue could be revisited by the DAC in the future.
- Chandra Vital reviewed the decision made by the DAC and the fear of seniors' health not being viable to undergo four quadrants being worked on at the same time.
- Leighanna Konetski requested that the DAC stay focused on getting through the procedure changes.
- No suggested adjustments from the recommended changes for D4341 or D4342.
- D4346, D4355 and D4910
  - D4910 was discussed earlier as remaining at the frequency of four times per year.
  - No suggested adjustments from the recommended changes for D4346 or D4355.
- D5110 - D5226
  - DAC members discussed the frequency of denture replacement, wanting 60 months instead of 84 months due to the senior population being served.
  - Dana Turner stated that Medicaid has a form for a replacement denture. Is this something we can do for the Senior Dental Program?
  - Chandra Vital stated the form can be made a requirement if the DAC approves. The complexity of the form will need to be considered due to the population of the Senior Dental Program. HCPF would develop the initial form and present it to the DAC for any specific changes and approval before they are taken before the Medical Services Board.
  - Dana Turner said that before a form gets developed, a decision on the procedure code would need to be approved first. Dana recommends leaving the denture procedure codes the same for the Senior Dental Program currently and waiting for any Medicaid changes before making any program changes.
  - It was discussed to keep original wording and not make changes to codes D5110 - D5226 based on not knowing what Medicaid was going to decide on.
  - Codes D5227 and D5228 were discussed to possibly add to the fee schedule along with the other new codes.





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### **6. Discussion on Proposed Codes D2991, D2940, & D9410**

- The DAC decided to review Codes D2991, D2940 & D9410 and any other proposed codes at a later meeting and focus on reviewing the existing fee schedule.

### **7. Public Comment 11:48 a.m. to 11:55 a.m.**

- Michelle V. commented on the four quadrants being easy on their rural patients who must travel for services. They would not provide services to any compromised individual but would like the option for extenuating circumstances to have four quadrants available to be worked on at one time.
- Chandra Vital stated that the DAC had discussed this at length and voted on this subject previously. It was determined to keep it aligned with Medicaid and not have the ability to have four quadrants at a time.
- Chandra Vital will send out a fee schedule in the next few days to all stakeholders with the discussed procedure codes and changes up to code D5226 as reviewed in today's meeting. This will ensure stakeholders have some time to review and discuss at the next meeting for the codes that were reviewed before any voting.

### **8. Board Action 11:55 a.m. to 11:58 a.m.**

- Dr. Matthew Carlston motioned to adjourn; Dr. Sarah Dirks seconded. Motion passed unanimously.

### **9. Meeting Adjourned at 11:58 a.m.**

The next scheduled meeting is at 2:00 p.m. on Tuesday, January 21, 2025, via Zoom

Reasonable accommodations will be provided upon request for persons with disabilities. Please notify the Board Coordinator at 303-866-6536 or [alondra.yanezsanchez@state.co.us](mailto:alondra.yanezsanchez@state.co.us) or the 504/ADA Coordinator [hcpf504ada@state.co.us](mailto:hcpf504ada@state.co.us) at least one week prior to the meeting to make arrangements.

