



Senior Dental Advisory Committee Meeting Minutes

Via [Zoom](#)
April 15, 2025
2:00 - 4:00 p.m.

1. Call to Order - 2:05 p.m.

Leighanna Konetski called the meeting to order at 2:05 p.m.

2. Roll Call

There were sufficient members for a quorum.

A. Members Present

Dr. Matt Carlston, Sarah Summers, Dr. Micaela Gibbs, Dr. Karl Kohlgraf, Leighanna Konetski, Dana Turner, Melissa Emery, Katie Stuvell

B. Members Excused

Andrea Nelson, Yvonne Castillo

C. Staff Present

Chandra Vital, Alondra Yanez, Rick Love, Shannon Huska, Taryn Graf joined at 3:00

3. Approval of Minutes

- Dana Turner motioned to approve the minutes from the DAC meeting held on January 21, 2025. Dr. Carlston seconded. The motion passed unanimously.

4. Continued discussion on proposed codes - 2:08 to 2:59 p.m.

- **D2940 - Protective Restoration**
 - Sarah Summers brought out that there are many applications for this procedure code. It has value at \$55 compared to a core buildup at \$135.
 - The frequency of the procedure code according to Medicaid is once per lifetime per tooth.





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- Chandra Vital mentioned that procedure code D2940 under Medicaid stipulates that Registered Dental Hygienists will receive reimbursement when used for telehealth, dentistry, and partnership with treating dentists. There is no background information on this code being utilized since it is not part of the fee schedule.
 - The Committee discussed that this is a new procedure code but has gone through some name changes over the years. Some previous names have included sedative filling, protective restoration and interim therapeutic restoration.
 - Dr. Kohlgraf agrees with the DentaQuest Office Reference Manual having a dentist there providing a second opinion to prove that this is an adequate or appropriate treatment to use.
 - A couple of Committee members raised concerns with using this procedure code as something temporary and having to go back and remove the material and replace it with material that is more permanent. Another concern was not being able to restore a tooth after this code was used. This could also have the potential for abuse of over billing.
 - Chandra Vital stated that there is the ability to stipulate in the description that if code D2940 is used, they cannot do any type of restoration for a certain amount of time.
 - Sarah Summers stated that procedure code D2940 is not meant to be definitive at all. It can be used in emergency situations or when a permanent restoration is planned later.
 - Katie Stuvell asked if there is another code that can be used instead of D2940 in those situations?
 - Dr. Gibbs said there could be a variety of situations that would come up and you would need to have a temporary option if you weren't able to place a definitive restoration. There isn't an option for an interim type of restoration and wouldn't want to be hindered from billing for a clinical session.
 - Dr. Carlston likes to have his procedures completed and nothing left unfinished. Having this temporary option is not something he is accustomed to doing. He stated that this code hasn't come up on the Committee in his time here.
- **D2991 - Application of hydroxyapatite Regeneration Medicament**
 - Leighanna Konetski referred to the robust discussion at the last Committee meeting as recorded in the meeting minutes.





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- Sarah Summers has used this material and wished she had used it sooner to provide more positive results. Dental Hygienists focus on preventative measures. This code would be more cost effective and would keep patients from having to be numbed up for a filling. She appreciates having another proverbial tool in her toolbox to use for preventative measure prior to doing a restoration.
- DentaQuest limitations state that one of (D2991) per 1 Lifetime Per patient per tooth. Cannot be billed on the same day/same tooth as any other D2000's codes or D1351, D1352, D1353, D1354.
- Dr. Carlston and Dr. Gibbs said they did some research and saw the benefits of adding this code to their toolbox.
- Dr. Kohlgraf stated that the studies on this code were inconclusive. The studies were not blind and were paid for by the company. Good oral hygiene at home by patients enrolled in the study could have contributed to the remineralization of the white spots without any effect from the material.
- Dr. Carlston spoke with a periodontist who had good results with this. In his research and speaking with people he feels like this is beneficial.
- Leighanna Konetski shared concerns about the studies related to D2991. There was bias and conflict of interest regarding the review and payment of the studies.
- **D9410 - House/Extended Care Facility Call**
 - Leighanna Konetski spoke with Chandra Vital about this code and there is nobody currently making house calls. There is concern that the Medical Services Board would even approve a house call code since that is not happening now.
 - Sarah Summers asked if there are dentists that provide services in the hospital. What about code D9420?
 - Chandra Vital said the only codes that deal with a hospital setting are D4341 and D4342. D9420 is not on the Senior Dental fee schedule. Since 2015 no grantee has come forward and asked about adding this code for house calls. There are some mobile settings, but the patients are going to a specific location, and it is not a house call. She has a concern about bringing this before the Medical Services Board since nobody is currently providing house calls.
 - Sarah Summers, being a portable dental hygienist herself, said adding this code would be helpful for bed bound patients unable to get out of their





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home. This code would benefit dentists who work out of an office to be able to visit the home of a patient.

- Dr. Kohlgraf said D9420 was used when he went into a hospital setting during after-hours.
- Sarah Summers stated D9410 doesn't say anything about having to be after hours. The definition is a situation where a dental professional visits a patient in their home or extended care facility to provide dental services. This may be necessary for patients who are unable to travel to a dental office due to physical limitations, medical conditions, or other reasons.
- Katie Stuvell said it makes sense to have this code for seniors who are homebound. She doesn't know of another code that would cover dental care for seniors in their home or facility.
- Chandra Vital said that most of the individuals in nursing homes are on Medicaid and not eligible for the grant program. This code hasn't been added to the fee schedule because nobody has requested it in the past.
- Sarah Summers said there are a lot of clients that live in assisted living that are not Medicaid facilities. There are clients that pay privately and are on fixed incomes. 85 to 87% are on Medicaid, but if I can help one person in a nursing home that is on a fixed income, then I would really like to. Every client matters.
- Katie Stuvell asked about the qualifications of eligibility of the Senior Dental Program.
- Chandra Vital stated that this is a Safety net for those that don't qualify for Medicaid. This program goes up to 250% of the federal poverty guidelines. You might have aging population that is below the percentage that qualifies for Medicaid, but because they are 65 or older they don't qualify for Medicaid.
- **The DAC opened the meeting for public comment on codes D2940, D2991 and D9410**
 - Lisa Westhoff Dental Hygienist - Uses code D2940 on a wide variety of patients. She is excited about this code. She can help for the in between moments for seniors where the dentist lives far away. This code fills that gap. This code is underutilized in helping stabilize patients when navigating extensive plans. It helps patients who are unable to pay for the expensive plan to take care of moderate problems now that could grow into larger emergent issues later. This code can also be used by Dental Hygienists which would allow more providers to utilize this code.





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- Melissa Emery made the motion to vote individually for each of the codes D2940, D2991 and D9410. Dr. Carlston seconded the motion.
 - D2940 passed with a vote of 6 to 2.
 - D2991 passed with a vote of 6 to 2.
 - D9410 passed with a vote of 5 to 3.

5. Discussion on New Proposed Codes 3:05 to 3:15 p.m.

- **D5410 - Adjust complete denture - Maxillary; D5411 - Adjust complete denture - Mandibular; D5421 - Adjust partial denture - Maxillary; D5422 - Adjust partial denture - Mandibular**
 - Dr. Kohlgraf said insurance and Medicaid cover denture adjustments once per year after the initial 6-month period of after delivery, and these codes weren't part of the fee schedule. The mouth changes over time and after a couple of years of having a denture, an adjustment is necessary and will help prolong the life of that denture rather than potentially making a new one. Adjustments, repairs and relines aren't covered in the first 6 months after the delivery, but after that they can be billed out. He thinks it's fair to the patients if once a year they can get some adjustment or fine tuning done. Once a year is typically what insurances cover.
 - Dr. Carlston wanted to confirm that these codes can't be billed the same day as a hard reline.
 - Dr. Kohlgraf said typically they wouldn't. You would have the four codes, complete upper, complete lower, upper partial and lower partial.
 - Sarah Summers is in favor of these codes. A small amount of time is needed for the adjustments and will have lasting effects for the patients.
- **The DAC opened the meeting for public comment**
 - Lisa Westhoff Dental Hygienist said she is in favor of denture adjustments. They can be life changing especially with those aging patients. They can help seniors with their confidence and nutrition.
 - Dr. Kohlgraf made a motion to vote on adding codes D5410, D5411, D5421 and D5422 and Melissa Emery seconded.
 - Codes D5410, D5411, D5421 and D5422 were approved with a unanimous vote.





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6. Public Comment

- Public Comment was taken after each section of the proposed codes as noted above.

7. Department Updates

- Alondra Yanez and Chandra Vital let the Committee know that the committee originally moved to change codes for repairs D5511 through D5622 codes for rebases D5710 through D5721 and codes for relines D5730 through D5761 from twice per year to once per year. A grantee brought up the hardship this would cause on patients and the potential of seniors not using their dentures at all due to them not fitting correctly. There hasn't been any misuse of these codes in the past and HCPF decided to go back to the original wording of two times per year. These changes were accepted by the Medical Services Board during the initial adoption of these codes.
- HCPF will keep the Committee informed of the progress of the approved procedure codes with the upcoming Medical Services Board meetings.

8. Board Action 3:22 to 3:23 p.m.

- Dana Turner motioned to adjourn. Dr. Carlston seconded. The motion passed unanimously.

9. Meeting Adjourned at 3:23 p.m.

The next scheduled meeting is at 2:00 p.m. on Tuesday, July 15, 2025, via Zoom.

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

