

1 **Minutes of the Michigan Dental Association**
2 **Committee on Access to Care**
3 **Friday, February 12, 2021 - 1:00 p.m.**
4 **via Zoom Video Conference**
5

6 **Attended**

7 Michael Campeau, DDS, chair
8 Curt Ralstrom, DDS, MS, vice-chair
9 Prabhjot Singh, DDS, member
10 Lauren Johnson, DDS, member
11 Maria Manautou, DDS, member
12 Deborah Brown, DMD, member
13 Michael O'Brien, student member
14 Christine Farrell, consultant (for a portion)
15 Richard Small, JD, consultant (for a portion)
16 Christopher Gorecki, DDS, liaison trustee
17 April Stopczynski, manager of access and prevention
18 Bill Sullivan, JD, vice president of advocacy and professional relations
19 Josh Kluzak, manager of insurance and governmental affairs
20

21 **Absent**

22 Sarah Tomaka, DDS, member
23 Mert Aksu, DMD, member
24 Nora Katib, student member
25 Jehan Wakeem, DDS, ADA Council liaison
26 Connie Verhagen, DDS, MS, CGIA liaison
27 Karn Cornell, Donated Dental coordinator
28 Domonique Brace, Donated Dental coordinator
29

30 **Call to Order, Introductions and Roll Call**

31 The meeting was called to order by Dr. Campeau at 1:02 p.m. Attendees introduced
32 themselves and staff announced the requirement for a quorum was met.
33

34 **Health Literacy/Public Education/Prevention**
35

36 **Healthy People 2030**

37 The committee reviewed the oral health objectives contained within the Healthy People 2030
38 report. The committee noted that there are several objectives that the MDA is already involved
39 in projects related to such as fluoridation, HPV and the MDA's Sugary Truth public education
40 campaign. Oral health is included on the list of leading health indicators in this report.
41

42 The committee discussed the objective "Reduce the proportion of adults aged 45 years and
43 over with moderate and severe periodontitis" and agreed this is difficult to achieve given the lack
44 of coverage within the Medicaid plans. The committee agreed that this highlights the
45 importance of preventive care, tobacco cessation, interprofessional relationships/referrals, and
46 advocacy for coverage of these benefits. MDA staff will gather information on which Healthy
47 Michigan Plan benefits may include some level of periodontal coverage and on any current
48 projects focused on this item for the committee to review at the next meeting.
49

50 The committee also discussed concerns that MDA's marketing may not reach audiences with
51 lower resources (i.e. less online access), or younger audiences moving to newer social media
52 platforms. Non-traditional marketing and more direct interaction may be needed to be effective.
53

54 **Pregnant Women Campaign**

55 The committee was provided with a written report outlining the strategy and timeline for the
56 pregnant women campaign. The committee is aware that the MDA received a grant of \$8,000
57 from MDA IFG to create the campaign video.
58

59 **ADA Policy on Silver Diamine Fluoride**

60 The committee discussed policy recently updated by the ADA House of Delegates. The
61 committee agreed that the use of silver diamine fluoride has been expanded and widely
62 accepted by patients throughout the pandemic. Committee members relayed personal
63 experiences with parents and even elderly patients interested in this treatment option. The
64 committee believes this is an important tool to reach underserved populations. The committee
65 unanimously approved the following recommendation for consideration by the MDA Board of
66 Trustees:
67

68 **Resolved**, that the Michigan Dental Association adopt the ADA Statement on the Use of Silver
69 Diamine Fluoride to Arrest Carious Lesions
70

71 38% Silver Diamine Fluoride (SDF) is a topical antimicrobial and remineralizing agent which
72 was cleared by the FDA as a Class II medical device to treat tooth sensitivity. In certain
73 circumstances, SDF may be used as a non-restorative treatment to arrest carious lesions on
74 primary and permanent teeth. The use of SDF to arrest carious lesions requires diagnosis and
75 monitoring by a dentist.
76

77 When using SDF for caries management, the following protocols should be followed:
78

- 79 1. Development of a patient-specific treatment plan by the dentist.
- 80 2. Patients or their lawful guardians should be informed of all available treatment
81 options, possible side effects, and the need for follow-up monitoring when giving
82 informed consent.
- 83 3. The application of SDF may be delegated to qualified allied dental personnel with the
84 appropriate training and supervision in accordance with state laws and in conjunction
85 with the above protocols.
86

87 and be it further
88

89 **Resolved**, that the ADA supports SDF as a covered benefit by third-party payers, and be it
90 further
91

92 **Resolved**, if the tooth treated with SDF requires further treatment, that this restorative treatment
93 or extraction of the tooth also remain a covered benefit.
94
95

96
97
98
99
100
101
102
103
104
105
106
107
108
109
110
111
112
113
114
115
116
117
118
119
120
121
122
123
124
125
126
127
128
129
130
131
132
133
134
135
136
137
138
139
140
141
142
143

Medical-Dental Integration/Hospital Dentistry

Hospital Operating Room Access

The committee received a written and verbal update on the variety of activity from different groups across the state.

The West Michigan dentists appear to be nearing a local solution with Spectrum Hospital. No details on this agreement have been received.

The Michigan Oral Health Coalition (MOHC) workgroup has continued to work with the Michigan Department of Health and Human Services (MDHHS) to determine the codes and feasible reimbursement rates for hospital operating room facility fees and anesthesiologists. The workgroup is also preparing background and talking points to begin meeting with legislators when the proposal is finalized. The MDA assisted in conducting a survey of dentists and compiling impact stories from dentists across the state. The committee received these items in its background.

The committee will continue to receive regular updates and be prepared to take action once a final proposal is complete. This is expected to include efforts to lobby on funding within the state budget process.

Legislative/Insurance Update

Mr. Sullivan and Mr. Kluzak provided the committee with an update on several items.

- Dental Specialties Bill – The MDA was successful in getting Rep. Frederick to reintroduce the bill to recognize five additional dental specialties (dental public health, dental anesthesiology, dental radiology, orofacial pain, and oral medicine). The bill passed the House Health Policy Committee in September before dying at the end of the legislative term due to a number of factors. The bill has no opposition to date.
- COVID-19 Vaccinations – The MDA has submitted a letter to Governor Whitmer requesting that dentists be allowed to administer COVID-19 vaccinations under an emergency authorization. The state Oral Health Director has issued a similar request. No response has been received to date. The MDA is still considering whether it should pursue legislation to add vaccinations to the scope of practice for dentists.
- Budget – The Governor issued her budget proposal yesterday. Funding was maintained for Healthy Kids Dental, Healthy Michigan Plan, and Michigan Donated Dental Services. Funding for the kindergarten screening implementation was added at \$1.8 million.
- MDA Legislative Priorities – The MDA Committee on Governmental and Insurance Affairs (CGIA) has passed its legislative priorities which include: hospital dentistry, dental specialty recognition, COVID-19 relief, student debt relief, network leasing, teledentistry, and the RDA shortage.
- COVID-19 Relief – Two bills were recently introduced that would provide tax relief for PPE purchased during a certain time period.
- Student Debt Relief – The MDA is reconvening the CGIA’s student debt relief workgroup to develop a proposal.

ADA Council Liaison Update

144 The ADA Council liaison was not in attendance, however, a written report was emailed to the
145 committee prior to the meeting.

146

147 **Dental Student Updates**

148 Mr. O'Brien provided the committee with an update on activity at the dental school and the
149 continued impact of COVID-19 on accessibility for patients and opportunity for hands-on
150 learning for the dental students. The pandemic and restrictions have reduced the number of
151 patients the dental students are able to treat in the on-site clinic at the school, reduced the
152 number of surgical patients the students are able to treat, reduced the ability to perform aerosol
153 generating procedures, and affected the rotations to the community clinics.

154

****Executive Session Began 2:07 p.m.****

155

(only committee members who are MDA dentist members and MDA staff present)

156

157 **Medicaid Policy Revisions**

158 The committee reviewed suggested revisions to several Medicaid policies and recommended
159 several updates. A report will be provided to the MDA Board of Trustees.

160

161

****End Executive Session 2:29 p.m.****

162

163 **Future Meeting Dates**

164 a. Friday, April 2, 2021 – 9 a.m. – 10:30 a.m., via Zoom video conference

165

166 **Adjournment**

167 The meeting was adjourned by the chair at 2:32 p.m.

168