



Dedicated to protecting and improving the health and environment of the people of Colorado

To: Members of the State Board of Health

From: Dr. Katya Mauritsen, Oral Health Unit Manager, Prevention Services Division

Through: Dr. Elizabeth Whitley, Division Director, Prevention Services Division

Date: October 1, 2015

Subject: Request for Rulemaking Hearing

Proposed Repeal of 6 CCR 1015-8, Service Grants for the Dental Assistance Program, for the rulemaking hearing to occur in December 2015.

The “Service Grants for the Dental Assistance Program” program was authorized by Colorado Revised Statutes 25-21-101 through 109. Senate Bill 14-180 transferred this program to the Colorado Department of Health Care Policy and Financing. Rulemaking authority was transferred to the Medical Services Board; emergency rules were promulgated on January 9, 2015 and permanent rules were adopted on February 13, 2015.

To ensure a continuity of services, SB 14-180 enabled the Colorado Department of Public Health and Environment (Department) to close its program at the end of FY 2014-15 (June 30, 2015). Colorado Revised Statutes 25-21-101 through 109 were repealed by Senate Bill 14-180. The repeal of Colorado Revised Statutes 25-21-101 through 109 is effective January 1, 2016.

The department recommends the repeal of 6 CCR 1015-8; this program is no longer with the Department. The program has been successfully transferred to the Colorado Department of Health Care Policy and Financing. Board of Health rules are no longer needed and are not authorized after January 1, 2016.

STATEMENT OF BASIS AND PURPOSE
AND SPECIFIC STATUTORY AUTHORITY

for Amendments to
6 CCR 1015-8 Service Grants for the Dental Assistance Program

Basis and Purpose.

The “Service Grants for the Dental Assistance Program” program was authorized by Colorado Revised Statutes 25-21-101 through 109. Senate Bill 14-180 transferred this program to the Colorado Department of Health Care Policy and Financing. Rulemaking authority was transferred to the Medical Services Board; emergency rules were promulgated on January 9, 2015 and permanent rules were adopted on February 13, 2015.

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Specific Statutory Authority.

These rules were promulgated pursuant to CRS 25-21-101 through 109; the statutes are to be repealed and when repealed, there is no statutory authority that authorizes Board of Health rules.

SUPPLEMENTAL QUESTIONS

Is this rulemaking due to a change in state statute?

Yes, the bill number is Senate Bill 14-180; rules are ___ authorized
___ required.
 No

Is this rulemaking due to a federal statutory or regulatory change?

Yes
 No

Does this rule incorporate materials by reference?

Yes
 No

Does this rule create or modify fines or fees?

Yes
 No

REGULATORY ANALYSIS
for Amendments to
6 CCR 1015-8 Service Grants for the Dental Assistance Program

1. A description of the classes of persons who will be affected by the proposed rule, including classes that will bear the costs of the proposed rule and classes that will benefit from the proposed rule.

No persons will be affected by the repeal of this rule, as the program no longer exists at the department. The program continues through the Colorado Department of Health Care Policy and Financing and the Medical Services Board.

2. To the extent practicable, a description of the probable quantitative and qualitative impact of the proposed rule, economic or otherwise, upon affected classes of persons.

There will be no quantitative and qualitative impact or the repeal of this rule, as the program no longer exists at the department but continues through another state agency.

3. The probable costs to the agency and to any other agency of the implementation and enforcement of the proposed rule and any anticipated effect on state revenues.

There will be no costs of implementation and enforcement because this rule is proposed for repeal.

4. A comparison of the probable costs and benefits of the proposed rule to the probable costs and benefits of inaction.

Inaction is not an option as the rules are no longer authorized under statute. The benefit of the repeal is to eliminate obsolete regulations, clarify which state agency has authority and eliminate confusion for citizens.

5. A determination of whether there are less costly methods or less intrusive methods for achieving the purpose of the proposed rule.

There are no less costly or less intrusive methods to repeal of this rule.

6. Alternative Rules or Alternatives to Rulemaking Considered and Why Rejected.

There are no alternatives to repeal, as this program no longer exists at the department.

7. To the extent practicable, a quantification of the data used in the analysis; the analysis must take into account both short-term and long-term consequences.

No data was necessary to determine that repeal is the appropriate course of action for the Board of Health.

STAKEHOLDER COMMENTS
for Amendments to
6 CCR 1015-8 Service Grants for the Dental Assistance Program

The following individuals and/or entities were included in the development of these proposed rules:

Stakeholders were notified of the program transfer when the legislation passed in 2014. This proposed repeal has been coordinated with Colorado Department of Health Care Policy.

The following individuals and/or entities were notified that this rule-making was proposed for consideration by the Board of Health:

Colorado Department of Health Care Policy

Summarize Major Factual and Policy Issues Encountered and the Stakeholder Feedback Received. If there is a lack of consensus regarding the proposed rule, please also identify the Department's efforts to address stakeholder feedback or why the Department was unable to accommodate the request.

Not applicable

Please identify health equity and environmental justice (HEEJ) impacts. Does this proposal impact Coloradoans equally or equitably? Does this proposal provide an opportunity to advance HEEJ? Are there other factors that influenced these rules?

None

~~DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT~~~~Prevention Services Division – Rules promulgated by the Colorado Board of Health~~~~SERVICE GRANTS FOR THE DENTAL ASSISTANCE PROGRAM~~~~6 CCR 1015-8~~~~*[Editor's Notes follow the text of the rules at the end of this CCR Document.]*~~~~1.1 Definitions~~

- ~~1) "Advisory Committee" means the Dental Advisory Committee created in Section 25-21-107.5, C.R.S.~~
- ~~2) "Department" means the Department of Public Health and Environment~~
- ~~3) "Eligible Senior" means an adult who is eligible for old age pension dental assistance Program as defined in section 25-21-103, C.R.S.~~
- ~~4) "Qualified Grantee" means an entity that either provides comprehensive dental and oral health services or that can administer funds for such services through sub-grants, awards, or reimbursement processes that comply with the federal "Health Insurance Portability and Accountability Act of 1996", 42 U.S.C. sec. 1320d to 1320d-8.~~
- ~~5) "Service grant" means a grant awarded by the Department to a qualified grantee pursuant to this article.~~

~~1.2 Application requirements~~

- ~~1) At a minimum, all applications for service grants submitted to the Department shall contain the following information:~~
 - ~~A) Compliance with the definition of "qualified grantee" as defined in Section 1.1(4).~~
 - ~~B) Demonstrates an established relationship with or willingness to coordinate with local community organizations serving eligible seniors. Evidence of this relationship may be demonstrated by, but is not limited to, a Memorandum of Agreement with local community organizations serving eligible seniors or, minutes for regular meetings with local community organizations serving eligible seniors that will be submitted to the Department on a semi-annual basis.~~
 - ~~C) Defined service area.~~
 - ~~D) A plan for outreach to include:
 - ~~i. A plan for marketing the available services to eligible seniors within the defined service area; and~~
 - ~~ii. A plan for meeting needs of eligible seniors in contiguous service areas should they not be served by another qualified grantee.~~~~
 - ~~E) A description of plan for verifying eligibility of seniors.~~

- F) ~~An operating budget that designates a procedure for prioritization of funds to meet the needs of those eligible seniors most in need.~~
 - G) ~~A description of the applicant's ability to comply with and monitor the implementation of the grant requirements, which includes a statement whether the applicant will charge a copayment to eligible seniors and certifying that the copayment shall not exceed twenty percent of the cost of the services provided.~~
 - H) ~~Demonstration of capacity to implement and administer the program specified in Section 2(1).~~
- 2) ~~A successful applicant for participation in the program shall sign a contract with the Department or a Purchase Order with a scope of work that complies with the State's Procurement Rules in 24-101-101 to 24-112-101, C.R.S.. The terms of the service grant contract/purchase order shall be determined by the Department and shall include, but need not be limited to, the following:~~
- A) ~~The total amount of grant to qualified grantee;~~
 - B) ~~The qualified grantee's agreement to provide care to eligible seniors for the length of the grant;~~
 - C) ~~The qualified grantee's agreement to provide the Department with semi-annual reports. At a minimum, the reports shall include:~~
 - i. ~~The number of eligible seniors served;~~
 - ii. ~~The types of dental and oral health services provided; and~~
 - iii. ~~The amount of co-payments charged and received.~~
 - D) ~~Reasonable penalties and other enforcement remedies available to the Department in the event the qualified grantee breaches contract or purchase order;~~
 - E) ~~The qualified grantee's agreement to notify the department if there is a decrease in eligible seniors served; and~~
 - F) ~~The time period of the grant.~~

1.3 Review of Application

- 1) ~~The initial review will be done by the Department to determine whether the application is complete and to ensure the grantee meets the requirements of the definition previously stated in 1.1(4).~~
- 2) ~~After initial review of applications, the dental advisory committee will review applications, and then submit their recommendations to the Department.~~
- 3) ~~The Department will consider the recommendations made by the dental advisory committee, but is not bound by them. In the event the Department disagrees with the committee's findings, it will provide a written statement of its rationale to both the applicant and the committee for their reference.~~

Allowable Procedures and Fees for Dental Services

2.1 ~~Effective April 30, 2013 and through such time that the Board of Health approves a new effective provider procedures and fee schedule, a qualified grantee, as defined in Section 1.1 of these regulations, may charge fees, not to exceed the maximum allowable fee, and perform the procedures for an eligible senior as set forth in Section 2.3.~~

2.2 ~~Nothing in this part shall prohibit a qualified grantee from charging less than the allowable fee or reducing the amount of the patient co-payment set forth in Section 2.3. Any reduction in the amount of the patient co-payment shall be at the discretion of the qualified grantee.~~

2.3 ~~TABLE OF ALLOWABLE PROCEDURES AND FEES~~

CDT 2013	Procedure Description	Maximum Allowable Fee	Program Payment	Maximum Patient Co-pay
0120	Diagnostic Periodic Oral Evaluation – Est. Pt.	\$ 46	\$ 46	\$ 0
0140	Limited Oral Evaluation	\$ 62	\$ 52	\$ 10
0150	Comprehensive Oral Exam	\$ 81	\$ 81	\$ 0
0180	Comprehensive periodontal evaluation – new or est. pt.	\$ 88	\$ 88	\$ 0
0210	Intraoral Complete series of radiographic images	\$ 125	\$ 125	\$ 0
0220	Periapical – 1st radiographic image	\$ 25	\$ 25	\$ 0
0230	Periapical – each additional radiographic image	\$ 23	\$ 23	\$ 0
0270	Bitewing – single film	\$ 26	\$ 26	\$ 0
0272	Bitewings – two films	\$ 42	\$ 42	\$ 0
0273	Bitewings – three	\$ 52	\$ 52	\$ 0

	films			
0274	Bitewings—four films	\$ 60	\$ 60	\$ 0
0330	Panoramic radiographic image	\$ 63	\$ 63	\$ 0
	Preventive			
1110	Prophylaxis (Adult)	\$ 88	\$ 88	\$ 0
1206	Topical Fluoride Varnish	\$ 52	\$ 52	\$ 0
1208	Topical Fluoride	\$ 52	\$ 52	\$ 0
	Restorative			
2140	Amalgam—one surface	\$ 107	\$ 97	\$ 10
2150	Amalgam—two surfaces	\$ 138	\$ 128	\$ 10
2160	Amalgam—three surfaces	\$ 167	\$ 157	\$ 10
2161	Amalgam—four + surfaces	\$ 203	\$ 193	\$ 10
2330	Resin—one surface, anterior	\$ 115	\$ 105	\$ 10
2331	Resin—two surface, anterior	\$ 146	\$ 136	\$ 10
2332	Resin—three surface, anterior	\$ 179	\$ 169	\$ 10
2335	Resin—four surface, incisal angle	\$ 212	\$ 202	\$ 10
2391	Resin—one surface, posterior	\$ 134	\$ 124	\$ 10

2392	Resin—two surface, posterior	\$ 176	\$ 166	— \$ 10
2393	Resin—three surface, posterior	\$ 218	\$ 208	— \$ 10
2394	Resin—four surface, posterior	\$ 268	\$ 258	— \$ 10
2951	Pin retention per tooth	\$ 50	\$ 40	— \$ 10
Periodontics				
4341	Scaling and Root Planing ≥ 4 teeth/quad	\$ 177	\$ 167	— \$ 10
4342	Scaling and Root Planing ≤ 3 teeth/quad	\$ 128	\$ 128	— \$ 0
4910	Periodontal Maintenance	\$ 136	\$ 136	— \$ 0
Prosthetics (Patient co-pay for these services are not to exceed 10%)				
5110	Complete denture— maxillary	\$ 793	\$ 713	— \$ 80
5120	Complete denture, mandibular	\$ 793	\$ 713	— \$ 80
5211	Partial denture, maxillary—resin, inc. clasps, rests, teeth	\$ 700	\$ 640	— \$ 60
5212	Partial denture, mandibular—resin, inc. clasps, rests, teeth	\$ 778	\$ 718	— \$ 60
5510	Repair broken complete denture	\$ 87	\$ 77	— \$ 10

5520	Replace missing or broken teeth— Complete denture/tooth	\$ 73	\$ 63	\$ 10
5610	Repair broken partial base	\$ 95	\$ 85	\$ 10
5630	Replace or repair broken clasp	\$ 123	\$ 113	\$ 10
5640	Replace missing or broken teeth— partial denture/tooth	\$ 80	\$ 70	\$ 10
5650	Add tooth to existing partial	\$ 109	\$ 99	\$ 10
5660	Add clasp to existing partial	\$ 131	\$ 121	\$ 10
5710	Rebase complete denture—maxillary	\$ 322	\$ 297	\$ 25
5711	Rebase complete denture— mandibular	\$ 308	\$ 283	\$ 25
5720	Rebase partial denture—maxillary	\$ 304	\$ 279	\$ 25
5721	Rebase partial denture— mandibular	\$ 304	\$ 279	\$ 25
5730	Reline denture— maxillary—chair- side	\$ 182	\$ 172	\$ 10
5731	Reline denture— mandibular— chairside	\$ 182	\$ 172	\$ 10
5740	Reline partial— maxillary—chair- side	\$ 167	\$ 157	\$ 10

5741	Reline partial- mandibular- chairside	\$ 167	\$ 157	\$ 10
5750	Reline denture- maxillary- laboratory	\$ 243	\$ 218	\$ 25
5751	Reline denture- mandibular- laboratory	\$ 243	\$ 218	\$ 25
5760	Reline partial- maxillary- laboratory	\$ 239	\$ 214	\$ 25
5761	Reline partial- mandibular- laboratory	\$ 239	\$ 214	\$ 25
	Oral Surgery			
7140	Extraction erupted tooth or exposed root	\$ 82	\$ 72	\$ 10
7210	Surgical removal of erupted tooth	\$ 135	\$ 125	\$ 10
7250	Surgical removal of residual tooth roots	\$ 143	\$ 133	\$ 10
7286	Biopsy, soft tissue	\$ 381	\$ 381	\$ 0
7310	Alveoloplasty (w/extractions) (Four or more teeth)	\$ 150	\$ 140	\$ 10
7311	Alveoloplasty (w/extractions) (Three teeth or less)	\$ 138	\$ 128	\$ 10
7320	Alveoloplasty (w/out extractions)(Four or more teeth)	\$ 150	\$ 140	\$ 10

7324	Alveoloplasty (w/out extractions) (Three teeth or less)	\$ 138	\$ 128	\$ 10
7510	Incision and drainage of abscess – intraoral soft tissue	\$ 193	\$ 183	\$ 10
9110	Palliative treatment – ER treatment of dental pain – minor procedure (limited to one exam per year)	\$ 61	\$ 36	\$ 25

Editor's Notes**History**

~~Sections 2.1 – 2.3 eff. 12/30/2008.~~

~~Entire rule eff. 10/30/2012.~~

~~Sections 2.1 – 2.3 emer. rules eff. 01/16/2013.~~

~~Sections 2.1 – 2.3 eff. 05/15/2013~~