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**MINUTES OF THE COUNCIL ON DENTAL BENEFIT PROGRAMS
ADA HEADQUARTERS BUILDING, CHICAGO
May 11-12, 2023**

Call to Order: The meeting of the Council on Dental Benefit Programs (CDBP) was called to order by Dr. Jessica Stillely-Mallah, chair, on Thursday, May 11, 2023, at 8:30 a.m. in the Boardroom, ADA Headquarters, Chicago, IL

Roll Call: Drs. Jessica Stillely-Mallah (*chair*), Stacey Gardner (*vice chair*), Roderick Adams, Jr., Drs. Alyson K. Buchalter, Adrian J. Carrington (not present), Andrew Gazerro, III, Hadi Ghazzouli, Drs. Rodney Hill, Mark Johnston, Susan D. Jolliff, Mark A. Moats, Stephen A. Morgan, Drs. Shelley Barker Olson, Vishruti Patel, Eddie Ramirez, Sara E. Stuefen, Scott Trapp, Drs. Scott L. Morrison (*Trustee*), Bryce Alan Larson (*New Dentist Member*) (not present), and Ms. Lauren Ames (*ASDA Consultant*) (not present)

Practice Institute (PI) Staff in attendance (for all or part of the meeting): Drs. Krishna Aravamudhan and Hana Alberti, Ms. Afton Dunsmoor, Ms. Rebekah Fiehn, Mr. Carlos Jones, Mr. Dennis McHugh, Mr. Frank Pokorny, Dr. Neel Shimpi, Ms. Barbara Ferriter, Mr. Sean Layman, Ms. GraceAnn Pastorelli, and Ms. Nicole Tarbor; **Attending via Zoom:** Ms. Erica Colangelo, Ms. Lauren Kirk, and Ms. Sharon Stanford

Association Staff in attendance (for all or part of the meeting): Drs. Raymond A. Cohlmiya and David Preble; Mr. Mike Kendall, Mr. Chad Olson, Mr. Robert Quashie, and Dr. Marko Vujicic; **Attending via Zoom:** Mr. Paul O'Connor and Ms. Roxanne Yaghoubi

Guests Present for Portions of the Meeting: Dr. Linda Edgar, ADA President-Elect; Joanne Fontana, Milliman; **Attending via Zoom:** Ali LaRocco, Milliman; Dr. Leigh Kent, vice chair, Council on Government Affairs (CGA); and Dr. Manny Chopra, chair, Council on Dental Practice (CDP)

Following the roll call, the presence of a quorum was noted.

PRELIMINARY BUSINESS

Conflict of Interest Disclosure Statement: Dr. Stillely referenced the Conflict-of-Interest Disclosure Statement included on the agenda and called for disclosures of potential conflicts of interest. None were received.

Approval of Agenda: Dr. Stillely moved the Report of the New Dentist Committee (NDC) to the consent calendar in absence of the NDC representative.

The Council adopted the agenda as amended by general consent, giving the Chair permission to reorder items as needed.

Approval of Consent Calendar: A consent calendar was prepared to expedite the business of the Council. Members were given the opportunity to remove any item from the consent calendar for consideration during the meeting. As noted in the Approval of Agenda section, one item was added to the consent calendar.

The Council amended and adopted the following resolution:

1 **Resolved**, that the resolutions contained within the following reports be approved by consent.

- 2 • Approval of e-ballot Action Items
3 • Dental Content Committee

4 **Resolved**, that the following reports be filed.

- 5 • 2023 Practice Institute Operating Plan Update
6 • Credentialing
7 • Bento
8 • Template for Dentists to Appeal Provider Rating Scores
9 • Trends in the Dental Benefits Industry
10 • Registry Update
11 • Report of the New Dentist Committee
12 • ASDA Consultant Report
13 • Council Meeting Dates

14 **Approval of E-ballot Action Items:** The Council adopted the following resolution through the
15 consent calendar.

16 **Resolved**, that the actions approved through e-ballots since the November 2022 Council
17 meeting be recorded in the minutes from this meeting.

18 E-ballot 2023-01: **Resolved**, that the 2022 November CDBP Meeting Minutes be
19 approved.

20 E-ballot 2023-02: **Resolved**, that the 2023 March CDBP Meeting Minutes be
21 approved.

22 **CDBP Chair Remarks:** Dr. Stilley informed the Council about the four most important discussion
23 items of focus for the meeting. She strongly encouraged the Council to be engaged, focus their
24 conversation, and ask questions. The dense topics of discussion centered around Medicare,
25 Essential Health Benefit, Enhanced CDT, and Medical Loss Ratio (MLR).

26 **Trustee Liaison Remarks:** Dr. Morrison provided the Council with a brief update on Board activities.
27 He noted the focus on strategic forecasting committee selections. He encouraged the Council to give
28 consideration if asked to serve on an action committee. The Board will meet in June and start to
29 assimilate all the resolutions and work towards moving those forward.

30 **Confidentiality and Anti-trust Issues:** Dr. Aravamudhan, senior vice president, Practice Institute,
31 discussed the importance of confidentiality regarding materials and content discussed at Council
32 meetings. She reminded the Council of the abundance of information available on ADA Connect and
33 stressed the value of keeping states and districts informed about the work of the Council in an
34 appropriate manner.

35 **2023 Practice Institute Operating Plan Update:** The Council accepted, through the Consent
36 Calendar, an informational report detailing the status of the 2023 Practice Institute Operating Plan
37 highlighting ongoing and new programs.

38 **EMERGING ISSUES**

39 **Essential Health Benefits (EHB) – Presentation by Milliman:** Dr. Aravamudhan provided the
40 Council with a brief update on the EHB initiative before Milliman presented their findings. In June 2022,
41 the ADA requested a proposal to provide services on the “Evaluating Essential Health Benefits”
42 project, to assist the Council to better understand implications of advocating for adult benefits to be

1 classified as “Essential Health Benefits” as defined in the Affordable Care Act (ACA). Milliman
2 developed a detailed report and submitted it to the Council. In addition, Milliman presented the
3 highlights and key storyline about the ACA and EHB and how dental benefits fits into it so that the
4 Council could discuss the “what if’s” in terms of potentially looking at adult dental as well. There are ten
5 essential health benefits under the ACA, which includes pediatric oral care. Currently, adult dental
6 benefits are considered “nonessential.”

7 **EHB Discussion – Next Steps:** After the Milliman presentation, the Council had an in-depth
8 discussion and talked about next steps. The Council developed a framework for the discussion to
9 determine if a policy should go before the House of Delegates in October. The Council determined that
10 adult dental benefits should be classified as an “Essential Health Benefit.” Upon vote, the Council
11 approved the following resolution.

12 **Resolved,** that the amendment to the 2021 policy titled “Dental Benefits with Affordable Care
13 Act Marketplace and a Public Option” be transmitted to the 2023 House of Delegates.

14 **Medicare Policy – Next Steps:** Dr. Aravamudhan provided the Council with an update regarding a
15 dental benefit in Medicare for medically compromised individuals. In March 2023, the Council held a
16 special meeting to discuss the 1993 policy on Medicare. As a result, amendments were made to the
17 policy and then feedback was solicited from three other Councils, including the Council on Government
18 Affairs (CGA), Council on Advocacy for Access and Prevention (CAAP), and Council on Dental
19 Practice (CDP). The Council reviewed the feedback and comments from the other Councils.

20 The Council adopted the following resolution:

21 **Resolved,** that the new policy titled “Payment for Services for Medically Compromised
22 Individuals in Publicly Funded Programs” be transmitted to the 2023 House of Delegates.

23 **DENTAL BENEFITS**

24 **Template for Dentists to Appeal Provider Rating Scores:** The Council received an update on
25 DentaQual, a provider rating system, developed by P&R Dental Strategies, LLC, a dental analytic
26 company that is being used by Delta Dental of California. As of April 2023, ADA staff have received
27 no calls or complaints from members regarding this rating system. Despite this, the Dental Benefits
28 Information Subcommittee (DBIS) continues to recommend that a template that could help dentists
29 appeal their P&R rating, be developed. Upon vote, the Council approved the following resolution.

30 **Resolved,** that a draft template for dentists to appeal provider rating scores be
31 provided to the Council for approval at the November council meeting.

32 **National Association of Dental Plans (NADP) Meeting Update:** Drs. Stilley, Gardner and Johnston
33 provided an update on the joint meeting between Council leadership and the National Association of
34 Dental Plans (NADP). They appreciated the open dialogue but noted the disagreement expressed by
35 both sides on MLR.

36 **Report on Payer Conversation – Delta Dental and GEHA:** Drs. Johnston and Stilley provided an
37 update on the DBIS meetings with representatives from Delta Dental Plans Association and GEHA.
38 Topics of discussion included eligibility and benefits verification, industry standardization of
39 explanation of benefits (EOB) statements, value-based payment programs and artificial intelligence
40 and claims adjudication.

1 **Locum Tenens:** The Council discussed how various payers manage locum tenens situations and
2 possible solutions to streamline the process. It was noted that an archived webinar can be found on
3 the ADA's dental insurance hub and that the dental claim form will be revised to include the ability to
4 report care provided by a locum tenens dentist. Upon vote, the Council approved the following
5 resolution.

6 **Resolved,** that an educational guide on locum tenens be drafted for use by
7 member dentists.

8 **Trends in the Dental Benefits Industry:** Through the consent calendar, the Council accepted a
9 report on the trends in the dental benefits industry.

10 **CLINICAL DATA REGISTRY**

11 **ADA Dental Experience & Research Exchange (DERE):** Through the consent calendar, the Council
12 accepted an update on the activities related to DERE.

13 **RELEVANT ADA INITIATIVES**

14 **Presentation by Executive Director:** Dr. Cohlmiya, executive director, spoke to the Council about
15 continuing the ADA's new day and defining the future. He stated that the only thing constant is
16 change. Currently, the ADA has ten councils and three committees, and the councils report up to the
17 House of Delegates. Dr. Cohlmiya focused on changes that need to take place within the ADA and how
18 that will impact the dental industry. Some of these changes include adapting to technology more
19 quickly, strategic forecasting, and the introduction of action groups. He also gave an update on
20 governance activities.

21 **ADMINISTRATIVE EFFICIENCY**

22 **Credentialing:** Through the consent calendar, the Council accepted an update on the activities related
23 to the ADA credentialing service, powered by CAQH ProView®.

24 **Bento:** Through the consent calendar, the Council accepted an update on the activities related to
25 Bento.

26 **Claim Form – Paper & Electronic:** The Council considered a recommendation from the Dental
27 Content Committee (DeCC) concerning the addition of "Last SRP Date," "Locum Tenens Provider" and
28 two "Payer ID" fields to the claim form. This recommendation was prompted by the DeCC's review of
29 feedback from dentists, payers, and other business partners on how these data elements support
30 timely and accurate claim adjudication and reimbursement for dental services. Revisions to the ADA
31 paper form is an ADA action; comparable revisions to the HIPAA standard electronic dental claim are
32 the responsibility of an external standards organization. Parallel maintenance is in accordance with
33 ADA policy concerning harmonization of paper and electronic claim data content.

34 The Council adopted the following resolution:

35 **Resolved,** that the revisions to the ADA Paper Claim Form be approved and the
36 new version be adopted as the 2024 ADA Paper Claim Form release, and be it
37 further

38 **Resolved,** that the Dental Content Committee (DeCC) be encouraged to submit a
39 maintenance request to X12 seeking corresponding modifications to the ANSI X12 837—
40 Dental Transaction.

1 **Eligibility & Benefits Verification:** The Council discussed current activities concerning automated
2 solutions to verification of a patient's available coverage and benefits for dental procedures. Dental
3 practices verify eligibility and most importantly available benefits through a variety of non-standard
4 methods, including proprietary electronic (e.g., the Internet to payer portals) and telephonic (e.g., calls
5 to payer provider services). Several independent entities as well as clearinghouses are creating
6 market solutions to address this issue for the short-term. A standards approach is necessary for a
7 more effective and efficient long-term solution.

8 There are several initiatives that are necessary to achieve this long-term solution. Two are led by the
9 ADA Standards Committee on Dental Informatics: 1) ADA Technical Report No. 1102 for Electronic
10 Dental Benefits Eligibility Verification; and 2) a data content standard for the HIPAA electronic eligibility
11 and verification inquiry and response transactions (270/271). The other initiative is led by the Council
12 for Affordable Quality Healthcare (CAQH), an entity that promulgates HIPAA transaction use rules
13 (CORE Operating Rules).

14 The Council adopted the following resolution:

15 **Resolved,** that CAQH CORE be officially requested to enhance its Operating Rules to allow
16 transmission of eligibility and benefit verification information at the CDT procedure code level.

17 **Dental Content Committee (DeCC):** Through the consent calendar, the Council accepted an update
18 on the activities related to the DeCC committee.

19 The Council adopted the following resolution:

20 **Resolved,** that the revised DeCC Operating Rules be approved.

21 **ADA POLICY REVIEW**

22 **Policies To Be Retained:** The Council approved a recommendation to retain identified policies.

23 The Council adopted the following resolution:

24 **Resolved,** that the identified ADA policy recommendations be retained and included in the
25 Council's annual report to the 2023 House of Delegates.

26 **Policy Amendment – Statement on Preventative Coverage in Dental Benefit Plans:** The Council
27 approved proposed amendments to the policy titled Statement on Preventive Coverage in Dental
28 Benefits Plans.

29 The Council adopted the following resolution:

30 **Resolved,** that the amendments to the policy titled Statement on Preventive Coverage in
31 Dental Benefits Plans (*Trans.* 1992:602; 1994:656; 2013:306; 2018:312) be transmitted to the
32 2023 House of Delegates.

33 **Policy Amendment – Statement on Managed Care and Utilization Management:** The Council
34 approved the proposed consolidation of two current ADA policies on managed care and utilization
35 management and combine them into one policy and to rescind duplicative policies.

1 The Council adopted the following resolutions:

2 **Resolved**, that amendments to the policy titled Statement on Managed Care and Utilization
3 Management (*Trans. 1995:624*) be transmitted to the 2023 ADA House of Delegates; and be
4 it further

5
6 **Resolved**, that the proposal to rescind the policies titled Utilization Management
7 (*Trans. 1990:541*) and Regulation of Utilization Management Organizations (*Trans. 1991:636*)
8 be transmitted to the 2023 ADA House of Delegates.

9 **LEGISLATIVE UPDATE**

10 **Federal Government Affairs Update:** Ms. Yaghoubi, director, Legislative & Regulatory Policy and
11 Dr. Leigh Kent, vice chair, Council on Government Affairs (CGA), provided an update to the Council
12 regarding CGA activities and current federal government affairs. Dr. Kent shared highlights from the
13 four workgroups within the CGA.

14 **State Government Affairs Update:** Mr. Olson, director, and Mr. O'Connor, senior legislative liaison,
15 provided an update to the Council on state government affairs. Since the Massachusetts win on
16 Medical Loss Ratio (MLR), eleven states have introduced legislation on MLR this session. Mr.
17 O'Connor discussed other wins within state government as well.

18 **QUALITY ASSESSMENT AND IMPROVEMENT**

19 **Dental Quality Alliance Update:** A report was submitted to the Council, which included an update on
20 DQA activities such as core set reporting, oral health state dashboard, the DQA conference, ad hoc
21 and practice- and clinician-level workgroup projects. Through the consent calendar, the council
22 accepted this report.

23 **CODING**

24 **Enhanced CDT Code Project Update:** The Council discussed findings received during the five-month
25 public comment period – November 2022 through March 2023 – that was established to solicit dental
26 community feedback on the proposed Enhanced CDT Code's modifier architecture and sample
27 content as posted on [ADA.org/cdt](https://ada.org/cdt). Discussion noted that an overwhelming majority of the comments
28 contained language expressing clear opposition to the Enhanced CDT Code project.

29 Primary reasons for objections are perceived disruptions and anticipated negative financial effects
30 (e.g., staff training, office overhead, and reduced reimbursements) without any clear near- or long-
31 term benefits of a change from the current five-character code number architecture with no modifiers.
32 Very few comments addressed proposed modifier architecture's technical aspects.

33 The Council concluded that the comments received indicate that the "why" for an enhanced CDT was
34 not conveyed clearly or adequately, and that ADA members are not familiar with the current CDT
35 Code maintenance process.

36 The Council adopted the following resolution:

37 **Resolved**, that Enhanced CDT Code Project proceed within the constraints of the
38 current CDT architecture (i.e., Dxxxx codes without further modifiers) to
39 accommodate patient dental record documentation needs, and be it further

1 **Resolved**, that the Council continue to periodically monitor the needs of the dental profession
2 and the need for CDT to include modifiers.

3 **March 2023 CMC Meeting Update / 2024 CDT Changes:** The Council received an oral supplement
4 to the written informational report on the annual Code Maintenance Committee (CMC) meeting
5 activities. This update was a presentation on notable changes to be included in the next CDT Code
6 version effective on January 1, 2024. All CMC approved actions will be in the ADA publication titled,
7 *CDT 2024*.

8 **New Category of Service – Sleep Apnea Services:** The Council, as the body responsible for
9 maintaining the CDT Code's organizational structure discussed creating a new category of service for
10 codes that document sleep apnea treatment procedures. Consensus was that current placement in the
11 Adjunctive category of service is not appropriate as these are stand-alone procedures that are not
12 "adjunctive" as defined in the ADA Glossary of Clinical Dental Terms (*Adjunctive: A secondary*
13 *treatment in addition to the primary therapy.*)

14 The Council approved the following resolution:

15 **Resolved**, that a category of service titled "Sleep Apnea Services" be added to the
16 CDT Code, and be it further

17 **Resolved**, that the current sleep apnea appliance codes – D9947, D9948, D9949,
18 and D9953 – be moved to the "Sleep Apnea Services" category of service, and be it
19 further

20 **Resolved**, that new codes D9954, D9955, D9956, and D9957 be placed in the
21 "Sleep Apnea Services" category of service, and be it further

22 **Resolved**, that the "Sleep Apnea Services" category of service and its contents be published
23 as such in the CDT Manual and all other print and electronic formats prepared for
24 dissemination to the dental community.

25 **SNODENT Update:** Dr. Hill and Ms. Dunsmoor provided the Council with an update on current
26 activities related to the Systematized Nomenclature of Dentistry (SNODENT). The update covered a
27 summary of activities of the SNODENT Maintenance Committee (SMC), explained the reason and
28 purpose of the revised SMC protocol, and planned product development.

29 The Council had an open discussion on the development of dental procedure codes by SNOMED
30 International and the impact it may have on the CDT and how the ADA can continue to be involved in
31 the process.

32 The Council adopted the following resolution:

33 **Resolved**, that the revised protocol document for the SNODENT Maintenance Committee be
34 approved.

35 **LIAISON/CONSULTANT REPORTS**

36 **Report of the New Dentist Committee:** The Council approved, through the Consent Calendar, an
37 informational report on NDC activities.

38 **American Student Dental Association (ASDA) Consultant Report:** The Council approved, through
39 the Consent Calendar, an informational report on ASDA activities.

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COUNCIL OPERATIONS

2 **Council Meeting Dates:** The Council approved, through the Consent Calendar, an informational
3 report on upcoming Council meeting dates.

4 **2023 Council Self-Assessment:** The Council conducted its self-assessment through an open
5 discussion. In summary, the Council determined that it should continue to exist and that it is effective
6 and continues to address the needs and complaints of dentists. The top three annual goals of the
7 Council are to update the CDT manual, maintain relationships with payors, and represent the ADA's
8 position for regulations when decisions need to be made. To process and grasp information, it was
9 recommended to receive information more frequently in smaller doses. The structure of the Council is
10 effective.

11

12 In terms of efficiencies, the decision-making process is efficient. The Council has a collective voice. It
13 allows the opportunity to be heard and decisions are made as a group. Suggestions were made to
14 possibly hold virtual meetings between Council meetings to digest bigger agenda items.

15 **Election of Council Chair:** The Council elected, by acclamation, Dr. Stacey Gardner, fifth district, to
16 serve as CDBP chair until the close of the 2024 meeting of the ADA House of Delegates.

17 **Election of Council Vice Chair:** The Council elected, by acclamation, Dr. Mark Moats, sixth district,
18 to serve as CDBP vice-chair until the close of the 2024 meeting of the ADA House of Delegates.

19 **Guest Council Chair Presentations:** Chairs from the Council on Dental Practice and Council on
20 Government Affairs provided updates on activities and programs. The Council was briefed on
21 resolutions, policies, subcommittee initiatives, and upcoming webinars.

22

NEW BUSINESS

23 **Dental Benefits:** Members of the Council expressed the need for the Council to continue its efforts in
24 solving for everyday pain points of dentists related to reimbursement. They also noted the need to
25 educate members regarding Medicare Advantage plans which appear to be increasing in popularity
26 among seniors.

27 Upon discussion, the Council adopted the following resolutions:

28 **Resolved,** that DBIS explore opportunities to create tools, aside from the contract negotiation
29 toolkit that exists, to assist dentists in better negotiating reimbursement rates with third party
30 payers.

31 **Resolved,** that DBIS pursue an educational plan to educate dentists about Medicare and
32 Medicare Advantage plans including how dentists can effectively navigate Medicare
33 Advantage plans.

34 **Adjournment:** 11:30 a.m. Central Time