

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL



TO <i>Myers</i>	DATE <i>1-6-11</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>1011295</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____		
2. DATE SIGNED BY DIRECTOR <i>Cleaved 1/14/11, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>1-18-11</i> <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action		

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

SOUTH CAROLINA DENTAL ASSOCIATION

Organized 1869 - A Constituent of the American Dental Association

RECEIVED

January 5, 2011

JAN 08 2011

Ms. Emma Forkner
Director, Department of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dear Director Forkner:

When the South Carolina Dental Association (SCDA) learned that the Department of Health and Human Services (DHHS) planned to eliminate the emergency adult dental program February 1, 2011, we became alarmed. Although the SCDA realizes this is not the only proposed cut, it concerns us because this will not save the state any money, in fact, it will cost more money if this program is eliminated.

While it is true that the emergency adult dental program is optional, it serves as the primary vehicle and a basic safety net for emergency dental care among adults with low income. It has been proven that there is a direct correlation between oral health and overall health.

Stated below are three examples why this cut will not save South Carolina money:

1. Oral disease is directly related to overall health.
2. If a pregnant mom cannot access dental care, dental disease could lead to complications during pregnancy. Mounting evidence shows that periodontal (gum) disease, when left untreated during pregnancy, can lead to low birth weight babies and premature births. This will only lead to additional costs during infant care.
3. Untreated dental disease can lead to life threatening infections which require expensive hospitalization.

See an Apples to Apples Comparison:

Emergency Adult Dental Medicaid Program

Patient with abscessed tooth seeks treatment in a dental office.

Problem Focused Exam: \$38.34
X-Ray \$13.65
Extraction of Tooth \$55.24

Total Cost to Medicaid: \$107.23

Result:

1-Problem is solved.

2-No further treatment necessary.

No Emergency Adult Dental Medicaid Program

Patient with abscessed tooth seeks treatment in the emergency room.

Hospital ER Charge \$76
X-Ray \$102
Physician Fee \$33
Radiologists Fee \$25

Total Cost to Medicaid: \$236

Result:

1-Pain and infection medication are prescribed to treat symptoms.

2-Problem is NOT SOLVED and will

likely reoccur.

3-Could result in return visits to ER.

Source: *South Carolina Dental Association*
Department of Health and Human Services Fee Schedule

Source: *Palmetto Health, Columbia, SC*

Thank you for considering our request to keep the adult dental program in place.

Sincerely,


Dr. Ed Wise, SCDA President

Cc: The Honorable Hugh Leatherman
The Honorable Dan Cooper
The Honorable Brian White
Mr. Richard Davis





Log #295

January 14, 2011

Dr. Ed Wise, DDM
South Carolina Dental Association
120 Stonemark Lane
Columbia, SC 29210

Dear Dr. Wise:

I am responding, on behalf of Director Forkner, to your letter dated January 5, 2011 in which you articulate the potential ramifications of the proposed elimination of the Emergency Adult Dental Program.

The decision to eliminate this service was a difficult one to make as we acknowledge the value offered through this service and appreciate that the elimination may impact the health and well-being of our adult recipients. We appreciate the argument presented in your letter and we will certainly be monitoring emergency room utilization related to dental conditions. Should it appear that the state is, in fact, paying more for such services than had been paid for services under our adult dental program, the decision to eliminate this program will be reviewed.

As you know, the agency made the difficult decision to eliminate several optional services because of the large deficit we are facing during this fiscal year. While we have implemented numerous controls over utilization of services in the last several years, our ability to aggressively manage the Medicaid program has been hampered by numerous state and federal constraints.

We do understand that our decision to eliminate these optional services will impact the well-being of our adult recipients and that knowledge grieves us. We will be monitoring the financial impact of these decisions to ensure that they do not contribute to, rather than mitigate, our dire financial situation.

Thank you for your support of the Medicaid program and for advocating for our recipients.

Sincerely,



Beverly G. Hamilton, MHSA
Bureau Chief, Care Management and Medical Support Services

C: The Honorable Hugh Leatherman
The Honorable Dan Cooper
The Honorable Brian White
Mr. Richard Davis

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