

# CONTRACT SUMMARY

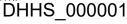
(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

	1. Cont	tract Number:	18058		Ameno Numbo		1		
					Legal Name:		BOARD OF REC NEVADA, LAS V		VERSITY OF
	Ager	ncy Name:	DHHS - PUBLIC A HEALTH	ND BEHAVIORAL	Contra		BOARD OF REG OF NEVADA, LA		VERSITY
	Ager	ncy Code:	406		Addres		UNLV SCHOOL MEDICINE	OF DENTA	AL.
	Appr	opriation Unit:	3220-16				4505 S. Marylar	nd Parkway	
		idget authority able?:	Yes		City/St	tate/Zip	Las Vegas, NV	89154-1055	i
	lf "No	o" please expla	ain: Not Applicable		Contac	ct/Phone:	702-895-3011		
					Vendo	r No.:	D35000824		
					NV Bu	siness ID:	Governmental E	ntity	
	To w	hat State Fisc	al Year(s) will the co	ontract be charged?	2017-2	2018			
	Wha the c	t is the source contractor will b	of funds that will be be paid by multiple f	used to pay the co unding sources.	ntractor? Ind	licate the perc	centage of each f	unding sour	rce if
		General Fu	nds 0.00 %	Fees	0.	00 %			
		Federal Fu	nds 0.00 %	Bonds	0.	00 %			
		Highway Fu	unds 0.00 %	X Other fund	ing <b>100.</b>	00 % Transfe	er from BA 3101		
	Ager	ncy Reference	#: C 15682						
	2. Cont	ract start date:							
			inal approval? No	or b. other effect	ive date	08/15/2016			
		bactive?	No						
		es", please exp							
		Applicable							
	3. Previ	iously Approve	ed 06/30/2017				REC	EIVE	
		ination Date:	4	(0.1					
	Cont	ract term:	1 year and	16 days			JUN 2	2 2 2017	
	•••	of contract:	Interlocal A	greement					
	Cont	ract descriptio	n: State Denta	l Officer			GOVERNOR'S F BUDGET	INANCE OFFICE	
	5. Purp	ose of contract	t:					DIVISION	
	INRS	439.272 and I	nendment to the or legislative intent ir rom June 30, 2017	cluded during the	2015 Legis	lative Sessio	n This amendr	ient exterr	nce with Is the
		TRACT AMEN		<u> </u>		u uoluj ili ili			
	0. CON	INACI AMEN		Tro	no <sup>¢</sup>		аф <u>А</u> -К-		A
	1.	The may em	ount of the original		ns \$	Info Accur		n Accum \$	Agenda
		contract:	ount of the original	\$207,46		\$207,467			Yes - Action
	2.	(#1):	urrent amendment		0.00	\$0	.00	\$0.00	No
	3.	New maximu amount:		\$207,46					
		and/or the te the original c changed to:	rmination date of contract has	09/30/2	2017				
П.	ILISTI	ICATION							

7. What conditions require that this work be done?
 In compliance with NRS 439.272 the Division of Public and Behavioral Health must staff a State Dental Health Officer.

8. Explain why State employees in your agency or other State agencies are not able to do this work:



9.	Were quotes or proposals solicited? No								
	Was the solicitation (RFP) done by the Purchasing No Division?								
	a. List the names of vendors that were solicited to submit proposals (include at least three):								
	Not Applicable								
	b. Soliciation Waiver: Not Applicable								
	c. Why was this contractor chosen in preference to other? The indirect on this contract is 10%.								
	d. Last bid date: Anticipated re-bid date:								
10.	Does the contract contain any IT components? No								
C	THER INFORMATION								
11.	a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?								
	Νο								
	b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services b performed by someone formerly employed by the State of Nevada within the last 24 months?								
	No								
	c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?								
	c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?								
2.	c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?           No         If "Yes", please explain           Not Applicable         In the second seco								
2.	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> </ul>								
2.	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?         <ul> <li>No</li> <li>If "Yes", please explain</li> </ul> </li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?         <ul> <li>Yes</li> <li>If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified</li> </ul> </li> </ul>								
	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?         <ul> <li>No</li> <li>If "Yes", please explain</li> </ul> </li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?         <ul> <li>Yes</li> <li>If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> </ul> </li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> </ul>								
	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?</li> <li>Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> <li>Is the contractor currently involved in litigation with the State of Nevada?</li> </ul>								
	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?</li> <li>Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> <li>Is the contractor currently involved in litigation with the State of Nevada?</li> </ul>								
3.	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?</li> <li>Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> <li>Is the contractor currently involved in litigation with the State of Nevada?</li> <li>No If "Yes", please provide details of the litigation and facts supporting approval of the contract:</li> </ul>								
3.	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?</li> <li>Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> <li>Is the contractor currently involved in litigation with the State of Nevada?</li> <li>No If "Yes", please provide details of the litigation and facts supporting approval of the contract:</li> <li>Not Applicable</li> </ul>								
3.	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?</li> <li>Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> <li>Is the contractor currently involved in litigation with the State of Nevada?</li> <li>No If "Yes", please provide details of the litigation and facts supporting approval of the contract:</li> </ul>								
3.   4.	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?</li> <li>Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> <li>Is the contractor currently involved in litigation with the State of Nevada?</li> <li>No If "Yes", please provide details of the litigation and facts supporting approval of the contract:</li> <li>Not Applicable</li> </ul>								
3.   4.   5.	<ul> <li>c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?</li> <li>No If "Yes", please explain</li> <li>Not Applicable</li> <li>Has the contractor ever been engaged under contract by any State agency?</li> <li>Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:</li> <li>The state and NSHE provide services to each other on a continuous basis - satisfactory</li> <li>Is the contractor currently involved in litigation with the State of Nevada?</li> <li>No If "Yes", please provide details of the litigation and facts supporting approval of the contract:</li> <li>Not Applicable</li> <li>The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:</li> <li>Governmental Entity</li> </ul>								

- 18. Agency Field Contract Monitor:
- 19. Contract Status:
  - Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	chadwic1	06/20/2017 12:11:19 PM
Division Approval	chadwic1	06/20/2017 12:11:21 PM
Department Approval	jkolenut	06/22/2017 08:32:32 AM
Contract Manager Approval	rmorse	06/22/2017 15:09:28 PM

# AMENDMENT #1 TO INTERLOCAL CONTRACT

A Contract Between the State of Nevada Acting By and Through Its Department of Health and Human Services Division of Public and Behavioral Health

# Bureau of Child, Family & Community Wellness Oral Health Program

4150 Technology Way, Suite 200 Carson City, NV 89706 Ph: (775) 684-2213 Contact: John M. DiMuro, DO

and

# Board of Regents, NSHE obo

University of Nevada, Las Vegas School of Dental Medicine 4505 S. Maryland Parkway Las Vegas, NV 89154-1055 Ph: (702) 895-3011

1. <u>AMENDMENTS</u>. For and in consideration of mutual promises and/or their valuable consideration, all provisions of the original contract and dated <u>September 14, 2016</u> attached hereto as Exhibit A, remain in full force and effect with the exception of the following:

A. The Contract term is being amended to reflect an extended end date due to delay in hiring position.

#### **Current Contract Language:**

<u>CONTRACT TERM.</u> This Contract shall be effective August 15, 2016 to June 30, 2017, unless sooner terminated by either party as set forth in this Contract

## Amended Contract Language:

<u>CONTRACT TERM.</u> This Contract shall be effective August 15, 2016 to **September 30, 2017**, unless sooner terminated by either party as set forth in this Contract

2. <u>INCORPORATED DOCUMENTS</u>. Exhibit A (Original Contract) is attached hereto, incorporated by reference herein and made a part of this amended contract.

3. <u>REQUIRED APPROVAL</u>. This amendment to the original contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

R. David Paul

Date

Executive Director, Office of Sponsored Programs

Christian Carlink 6/20/17 for Cody L. Phinney, MPH Date

for Richard Whitley, MS Date

for James R. Wells

Signature - Board of Examiners

Approved as to form by:

Deputy Attorney General for Attorney General

Administrator, <u>Division of Public and Behavioral Health</u> Title

Director, Department of Health and Human Services Title

#### APPROVED BY BOARD OF EXAMINERS

On (Date)

On (Date)

Approved 10/11 BOE Revised 8/25/15

Agency Reference # C 15682

Page 2 of 2

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

# I. DESCRIPTION OF CONTRACT

1 Contract Number: 18512

١.	Contract Number:	10012			Legal Entity Name:	BOARD OF REGENTS-UNLV	
	Agency Name:	DHHS - PUBLIC HEALTH	AND BEHAVIO		Contractor Name:	BOARD OF REGENTS-UNLV	
	Agency Code:	406			Address:	4505 S. Maryland Parkway	
	Appropriation Unit:						
	Is budget authority available?:	Yes			City/State/Zip	Las Vegas, NV 89154-1055	
	If "No" please expla	ain: Not Applicable	9		Contact/Phone:	702-895-3011	
				,	Vendor No.:	D35000824	
					NV Business ID:	Governmental Entity	
	To what State Fisca	al Year(s) will the o	contract be charg	jed?	2017		
		of funds that will b	e used to pay th	e contracto	or? Indicate the pe	rcentage of each funding source if	
	General Fu		X Fees		100.00 % Radio	logical Fees	
	Federal Fur	nds 0.00 %	Bonds	;	0.00 %		
	Highway Fu	unds 0.00 %	Other	funding	0.00 %		
	Agency Reference			0			
~	0 1			•			
	Contract start date: a. Effective upon E	Board of No	or b. other e	ffective da	ote 01/09/2017	,	
	Examiner's app Anticipated B0	DE meeting date	04/2017				
	Retroactive?	Yes					
	If "Yes", please exp	olain					
	School of Dental I	Medicine's currer al healthcare nee etroactive start d	itly operational ds. Due to the m ate of January 9	Special C	are Dental Clinic ate holidays in the	NSHE will provide funds for the UNLV which provides dental treatment for e fall, the signing of this agreement ha SDM Special Care Dental Clinic	
3.	Termination Date:	06/30/201	7				
	Contract term:	171 days					
4.	Type of contract:	Interlocal	Agreement				
	Contract descriptio	n: Dental Se	rvices				
5	Purpose of contrac	+•					
0.			unding for UNL	V School	of Dental Medicin	e, Special Care Dental Clinic for adults	;;
	with disabilities. F	Provides oral hyg	iene education	and servi	ces throughout C	lark County.	
6.	NEW CONTRACT						
	The maximum amo	ount of the contrac	t for the term of t	he contrac	et is: \$47,036.00		
J	USTIFICATION						
7.	What conditions re						
	This agreement wil	Il provide resource	s to expand the	dental wor	kforce to serve adu	Its with special healthcare needs.	
8.	Explain why State	employees in your	agency or other	State age	ncies are not able	to do this work:	
	State employees a				•		
9	Were quotes or pro	posals solicited?			No		
	Was the solicitation		e Purchasing		No		
	a. List the names of	of vendors that we	e solicited to sub	omit propo	sals (include at lea	st three):	
						DHHS 000005	
	+ #+ 10510			Page 1 of	· · ·		

II.

	Not Applicable			
	b. Soliciation Waiver: Not Applicate	le		
	c. Why was this contractor chosen		er?	<u></u>
	Governmental Entity - There is no i			- -
	d. Last bid date:	Anticipated	re-bid date:	
10.	. Does the contract contain any IT co	mponents?	No	
III. (	OTHER INFORMATION			
11.	. a. Is the contractor a current emplo employee of the State of Nevada? No	yee of the State of N	levada or will the contracte	d services be performed by a current
	b. Was the contractor formerly emp performed by someone formerly en <b>No</b>	loyed by the State of ployed by the State	f Nevada within the last 24 of Nevada within the last 2	months or will the contracted services be 24 months?
	c. Is the contractor employed by an	v of Novada's politic	al subdivisions or by any o	ther government?
	No If "Yes", please explai			
	Not Applicable			
12	. Has the contractor ever been engage	ged under contract b	y any State agency?	
	Yes If "Yes", specify when agency has been veri	and for which agenc	cy and indicate if the quality	y of service provided to the identified
	State agencies perform services for	<u>r one another on a ro</u>	outine basis - satisfactory	
13.	. Is the contractor currently involved			
		e details of the litiga	tion and facts supporting	approval of the contract:
	Not Applicable			
14	. The contractor is not registered with Governmental Entity	ו the Nevada Secret	ary of State's Office becau	se the legal entity is a:
15	. Not Applicable			
16	. Not Applicable			
17	. Not Applicable			
× 18	. Agency Field Contract Monitor:			
19	. Contract Status: Contract Approvals: Approval Level Budget Account Approval Division Approval Department Approval Contract Manager Approval	User chadwic1 chadwic1 jkolenut rmorse	Signature Date 03/17/2017 10:56 03/17/2017 10:56 03/22/2017 15:49 03/23/2017 12:30	:55 AM :19 PM
	Budget Analyst Approval	bwooldri	03/27/2017 10:31	:23 AM

## INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

A Contract Between the State of Nevada Acting By and Through Its Department of Health and Human Services Division of Public and Behavioral Health

Bureau of Child, Family & Community Wellness Oral Health Program 4150 Technology Way, Suite 200 Carson City, NV 89706 Ph: (775) 684-2213 Contact: John M. DiMuro, DO

and

Board of Regents, Nevada System of Higher Education on behalf of University of Nevada, Las Vegas School of Dental Medicine ("SDM") 4505 S. Maryland Parkway Las Vegas, NV 89154-1055 Ph: (702) 895-3011

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services of Board of Regents, Nevada System of Higher Education on behalf of University of Nevada, Las Vegas, School of Dental Medicine ("SDM") hereinafter set forth are both necessary to the Division of Public and Behavioral Health, Bureau of Child, Family & Community Wellness, Oral Health Program and in the best interests of the State of Nevada;

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. <u>REOUIRED APPROVAL</u>. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. <u>DEFINITIONS</u>. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.

3. <u>CONTRACT TERM</u>. This Contract shall be effective January 9, 2017 to June 30, 2017, unless sooner terminated by either party as set forth in this Contract.

4. <u>TERMINATION</u>. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party

Page 1 of 5

Agency Ref. # C 15867

DHHS 000007.

without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason federal and/or State Legislature funding ability to satisfy this Contract is withdrawn, limited, or impaired.

5. <u>NOTICE</u>. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.

6. <u>INCORPORATED DOCUMENTS</u>. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence: ATTACHMENT A: SCOPE OF WORK

7. <u>CONSIDERATION</u>. SDM agrees to provide the services set forth in paragraph (6) at a total contract cost of \$47,036.00 (Total Contract Amount) with the total Contract or installments payable: monthly, not exceeding the Total Contract Amount. Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of legislative appropriation may require.

8. <u>ASSENT</u>. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

a. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with all state and federal regulations and statutes.

b. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.

c. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained a minimum three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

10. <u>BREACH: REMEDIES</u>. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages

11. <u>LIMITED LIABILITY</u>. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. Actual damages for any State breach shall never exceed the amount of funds, which have been appropriated for payment under this Contract, but not yet paid, for the fiscal year budget in existence at the time of the breach.

Page 2 of 5

Rev. 12/15

Agency Ref. # C 15867

12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, act of public enemy, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.

#### 13. INDEMNIFICATION.

a. To the fullest extent of limited liability as set forth in paragraph (11) of this Contract, each party shall indemnify, hold harmless and defend, not excluding the other's right to participate, the other from and against all liability, claims, actions, damages, losses, and expenses, and costs, arising out of any alleged negligent or willful acts or omissions of the party, its officers, employees and agents. Such obligation shall not be construed to negate, abridge, or otherwise reduce any other right or obligation of indemnity which would otherwise exist as to any party or person described in this paragraph.

b. The indemnification obligation under this paragraph is conditioned upon receipt of written notice by the indemnifying party within 30 days of the indemnified party's actual notice of any actual or pending claim or cause of action.

14. <u>INDEPENDENT PUBLIC AGENCIES</u>. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.

15. <u>WAIVER OF BREACH</u>. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.

16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.

17. <u>ASSIGNMENT</u>. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.

18. <u>OWNERSHIP OF PROPRIETARY INFORMATION</u>. Unless otherwise provided by law any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.

19. <u>PUBLIC RECORDS</u>. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.

20. <u>CONFIDENTIALITY</u>. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.

Page 3 of 5

Agency Ref. # C 15867 Rev. 12/15

21. <u>PROPER AUTHORITY</u>. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).

22. <u>GOVERNING LAW: JURISDICTION</u>. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the jurisdiction of the Nevada district courts for enforcement of this Contract.

23. <u>ENTIRE AGREEMENT AND MODIFICATION</u>. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Attorney General.

Agency Ref. # C 15867 Page 4 of 5

Rev. 12/15

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

BOARD OF REGENTS OF THE NEVADA SYSTEM OF HIGHER EDUCATION, ON BEHALF OF THE UNIVERSITY OF NEVADA, LAS VEGAS – SCHOOL OF DENTAL MEDICINE

3/10/17

Date

Recommended by:

Karen P. Wesl, DØS

Dean, UNLV School of Dental Medicine

Approved by:

R. David Paul

**Division of Public and Behavioral Health** Public Agency #2

3/17/ Date for Cody L. Phinney, MPH

2/17 3 Date for Richard Whitley, MS

James R. Wells - Nevada State Board of Examiners Signature

Approved as to form and compliance with law by:

Deputy Attomey General for Attomey General, Sone of Nevada

Executive Director, Office of Sponsored Programs

Administrator Division of Public and Behavioral Health\_\_\_\_\_\_ Title

Director,

Department of Health and Human Services Title

APPROVED BY BOARD OF EXAMINERS

On (Date) (Date)

Agency Ref. # C 15867 Page 5 of 5

Rev. 12/15

DHHS 000011

# ATTACHMENT AA: Scope of Work Contract Number: C 15867

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada Las Vegas, School of Dental Medicine (SDM), agrees to the following:

Objective	Activities	Outputs	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
1.1: By January 13, 2017 hire two staff to provide oral health services	1.1.1 Hire staff with education and experience to provide oral hygiene education, routine dental prophylaxis, and community dental services. Hygienist should devote at least half of his/her time to provide examinations, cleanings, fluoride varnish application, and sealants to patients in adult day activity centers, community	A hired staff to provide oral hygiene education and regular cleanings to patients	By January 13, 2017	N/A	Date and # of staff hired	Outcomes report
	residencies, and vocational training centers throughout Clark County.					
	1.1.2 Hire staff to schedule patient appointments for screenings, comprehensive exams, clinical treatments, hygiene recalls, and hospital cases, and support the efforts of the SDM Special Care Dental Clinic Director	A hired staff to schedule patient appointments for screenings, exams, treatments, recalls, and hospital cases and support the efforts of the SDM Special Care Dental Clinic Director	By January 13, 2017	N/A	Date and # of staff hired	Outcomes report

DHHS\_000012

Page 1 of 9

Goal 1: Program Managen	ent: Enhance program infrastructure an	nd capacity to provide compr	ehensive dental s	ervices.		
Objective	Activities	Outputs	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
1.2: Identify opportunities and prepare paperwork necessary to apply for grants that will provide program sustainability	1.2.1 Explore and apply for all funding options available to your organization that will ensure program sustainability.	Application for grants	Through June 30, 2017 with a final report due July 21, 2017	N/A	# of opportunity identified # of application	Outcomes report
1.3: By July 21, 2017 provide one outcomes report to the Nevada Oral Health Program.	1.3.1 Develop and submit one outcomes report that includes expense data, number and type of patient cases, outreach activities, and ability to meet expected deliverables to the NOPH.	One outcomes report	Through June 30, 2017 with a final report due July 21, 2017	N/A	# of report submitted in a timely manner	Program record

Page 2 of 9

Objective	Activities	Outputs	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
2.1: Through June 30, 2017, provide comprehensive dental treatment (emergency services,	2.1.1 Collect, track, and evaluate completed screenings and dental treatments into UNLV SDM's Axium system	Treatment services entered into Axium system	Through June 30, 2017	Adult patients with special healthcare needs	<ul> <li># of clinical sessions conducted</li> <li># of patients served in the SDM clinic</li> </ul>	Program record and outcomes report
preventative care, restorative care, and limited specialty services) to 80 non- hospital patient encounters with adult men and women who have special healthcare needs in the SDM Special Care Dental Clinic and schedule 20 hospital dentistry cases for adult patients with special healthcare needs at University Medical Center (UMC) of Southern Nevada.	2.1.2 Schedule hospital dentistry cases for 20 patients at UMC.	Comprehensive dental treatment	Through June 30, 2017	Adult patients with special healthcare needs	# of patients served at UMC	Program record and outcomes report
2.2: Through June 30,	2.2.1 Provide at a	Community	Through June	Patients	# of patients	Program record
2017 provide community dental	minimum 96 hours of community dental	based dental services	30, 2017	throughout Clark County	served	and outcomes report

DHHS\_000014

Page 3 of 9

	ices – Provide comprehensivent of the UNLV School of Dentation of the UNLV School of Dentation of the text of					care needs in the
Objective	Activities	Outputs	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
services and routine dental prophylaxis	screening services which may include dental examinations, cleaning, fluoride varnish application, and sealants	t.				

Page 4 of 9

Objective	ure for special need patients, o Activities	Outputs	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
3.1: Through June 30, 2017 expand the dental workforce to serve adults with special healthcare needs throughout Nevada	3.1.1 Conduct at least 1 workshop/resource fair that provides legal and social services to current and potential patients and family members of the SDM Special Care Dental Clinic.	Community based education. Conduct at least 1 workshop/resour ce fair.	Through June 30, 2017	Potential patients and family members of the clinic	# of outreach activities conducted	Outcomes report
	3.1.2 Build partnerships that expand the opportunity for dental professionals to volunteer their services with adults with special healthcare needs. This may include involvement in the Special Olympic Special Smiles program throughout Nevada.	Community based treatment and education. Conduct at least 1 event.	Through June 30, 2017	Adult patients with special healthcare needs	# of outreach activities conducted	Outcomes report
	3.1.3 Provide education to members of the dental profession by building a two hour continuing education curriculum on adult patients with	Dental Professional education. Build a two hour CE course.	Through June 30, 2017	Dental Professionals	# of education activities conducted	Outcomes report

DHHS\_000016

Page 5 of 9

Objective	Activities	Outputs	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
	special healthcare needs and petition the Nevada State Board of Dental Examiners to include two hours of continuing education in a topic area related to providing care for special need patients within the 40 hour continuing education requirement for renewal of licensure.					
	3.1.4 Increasing exposure to dental cases involving adult patients with special healthcare needs by providing the opportunity for UNLV SDM students to rotate through the clinic each week and observe patient cases, by arranging for CSN/TMCC hygiene students to participate in community outreach	Educate the dental workforce	Through June 30, 2017	Licensed Dental Professionals, hygiene students, and dental students	# of education activities conducted	Outcomes repor

DHHS\_000017

Page 6 of 9

Objective	Activities	Outputs =	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
	activities, and by facilitating SDM General Practice Residents in completing two hospital dentistry cases					
	3.1.5 The SDM Special Care Dental Clinic hygienist will through motivational interviewing set oral health goals and train patients and their caregiver on oral hygiene techniques including tooth brushing, flossing, and routine oral health examination. Hygienist should devote at least half of his/her time to provide examinations, cleanings, fluoride varnish application, and sealants to patients in adult day activity centers, community residencies, and vocational training centers throughout Clark County. The hygienist	Community based education	Through June 30, 2017	Patients in adult date activity centers, community residences, and vocational training centers in Clark County	# of education activities conducted	Outcomes report

DHHS\_000018

Page 7 of 9

Objective	Activities	Outputs	Timeline	Target Population	Evaluation Measure (indicator)	Evaluation Tool
	will refer patients to the SDM Special Care Dental Clinic for comprehensive dental treatment.					

Page 8 of 9

# **Budget and Financial Reporting Requirements**

Subgrantee agrees to adhere to the following budget:

PERSONNEL:	Hourly Cost	Hours	Weeks	Fringe	Amount Requested
Dental Hygienist Assistant	\$35	20	25	3.15%	\$18,051
Job Description: This employee will provide oral hygiene education Dental Clinic in Clark County. Hygienist will wo community setting such as adult day activity cente	rk approximat	ely 12 hou	irs in the clir	f the SDM Specia nic and 8 hours in	al Care 1 a
<u>Assistant (Student Work)</u>	\$10	20	25	3.15%	\$5,158
Job Description: This employee will schedule patient appointments	for screening	, exams, tr	eatments, re	calls, and hospit	al cases.
		TOTA	L PERSON	INEL COSTS:	\$23,209
EQUIPMENT:					
Mobile Dental Unit: Aseptico AMC-20					\$9,490
AseptiChair Portable Dental Chair					\$1,52
AseptiChair Portable Dental Operator's Stool					\$61
High speed hand piece					\$1,61
Slow speed hand piece					\$520
LED curing light					\$1,580
Cavitron					\$3,100
Amalgamator					\$1,48
		ΤΟΤΑ	L EQUIPM	IENT COSTS:	\$19,92
SUPPLIES					
Oral Hygiene Charts and Instructional Aids					\$200
Puppets					\$200
Screening supplies(gloves, mask, patient bibs, flue for 200 patients	oride varnish,	sealant ma	terials, disp	osable mirrors)	\$1,000
Resource Fair: funds support materials, booth fee activity.	s, all costs ass	ociated wi	th participat	ing in outreach	\$500
		то	TAL SUPP	LIES COSTS:	\$1,900
OTHER					<b>\$0.00</b>
Patient Scholarship			OTALOT	HER COSTS	\$2,000
			OTAL OI	HERCOS15	\$2,000

Agency Ref. # C 15867 Page 9 of 10

DHHS\_000020

Contractor agrees to request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the contract period.

- Reimbursement may be requested monthly for expenses incurred in the implementation of the Scope of Work, and no later than 15 days of the end of the fiscal period. Fiscal period ends June 30, 2017.
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred.
- Final invoices will not be approved for payment until Outcomes Report is received by the Nevada State Oral Health Program.
- Additional expenditure detail will be provided upon request from the Division.

This agreement may be TERMINATED by either party prior to the date set forth on the Notice of Award, provided the termination shall not be effective until <u>30 days</u> after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

Agency Ref. # C 15867 Page 10 of 10

Rev. 12/15

# **CONTRACT SUMMARY**

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

# I. DESCRIPTION OF CONTRACT

1. Contract Number: 19237

							Legal Entity Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas
		Agency Name:	DHHS - I HEALTH		ND BEI	HAVIORAL	Contractor Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas
		Agency Code:	406				Address:	School of Dental Medicine
		Appropriation Unit:	3220-16					4505 S. Maryland Parkway
		Is budget authority available?:		Yes			City/State/Zip	Las Vegas, NV 89154
		lf "No" please expla	ain: Not A	Applicable			Contact/Phone:	702-895-3011
							Vendor No.:	D35000824
							NV Business ID:	Governmental Entity
		To what State Fisca	• • •			0	2018-2019	
		What is the source the contractor will b	of funds t be paid by	hat will be multiple fu	used to Inding s	pay the cont ources.	ractor? Indicate the pe	rcentage of each funding source if
		General Fu		0.00 %	Х	Fees	100.00 % Radio	logical
		Federal Fur		0.00 %		Bonds	0.00 %	
		Highway Fu		0.00 %		Other fundin	ig 0.00 %	
		Agency Reference	#: C	16188				
	2.	Contract start date:						
		a. Effective upon B Examiner's appr		No	or b.	other effectiv	e date 10/01/2017	,
		Anticipated BC	DE meetin	ng date	10/20	017		
		Retroactive?		Yes				
		If "Yes", please exp	lain					
		services of the Sta	ate of Nev	vada Denta	al Healt	th Officer. If t	this contract was not	egents. This contract provides for the allowed to be retroactive, the State will
		Health Officer for t	the Divisi	ion of Pub	lic and	Behavioral I	Health.	ber to act and serve as the State Dental
	3.	Health Officer for to Termination Date:	the Divisi	ion of Pub /30/2019	lic and	Behavioral I	cademic faculty mem Health.	ber to act and serve as the State Dental
	3.	Health Officer for I	the Divisi 06	ion of Pub	lic and	Behavioral I	Lademic faculty mem Health.	ber to act and serve as the State Dental
		Health Officer for t Termination Date:	<u>the Divisi</u> 06 1 y	ion of Pub /30/2019 year and 2	T2 day	<u>Behavioral I</u> s	Cademic faculty mem Health.	ber to act and serve as the State Dental
		Health Officer for t Termination Date: Contract term:	<u>the Divisi</u> 06 1 y Int	ion of Pub 5/30/2019	reeme	<u>Behavioral I</u> s nt	Health.	ber to act and serve as the State Dental
	4.	Health Officer for the Termination Date: Contract term: Type of contract: Contract description	the Divisi 06 1 y Int n: Sta	ion of Pub //30/2019 year and 2 terlocal Aç	reeme	<u>Behavioral I</u> s nt	Cademic faculty mem Health.	ber to act and serve as the State Dental
	4.	Health Officer for t Termination Date: Contract term: Type of contract: Contract description Purpose of contract	the Divisi 06. 1 y Int n: Sta :: :	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to	72 day: greeme Office	Behavioral I s nt r	Health. Inding for an academ	ber to act and serve as the State Dental ic faculty member to act and serve as
	4. 5.	Health Officer for the second	the Divisi 06. 1 y Int n: Sta :: :	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to	72 day: greeme Office	Behavioral I s nt r	Health. Inding for an academ	
	4. 5.	Health Officer for the state Dentation Date: Contract term: Type of contract: Contract description Purpose of contract This is a new inter the State Dental He NEW CONTRACT	the Divisi 06 1 y Int n: Sta :: tocal agro ealth Offi	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to cer as set	72 day: greeme Officei provid	Behavioral I s nt r e ongoing fu n NRS 439.27	Health. Inding for an academ	
	4. 5.	Health Officer for the second	the Divisi 06 1 y Int n: Sta :: local agre ealth Offi	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to icer as set	72 days greeme Office provid forth in	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con	Health. Inding for an academ 72. tract is: \$430,033.00	
١٤.	4 <i>.</i> 5. 6.	Health Officer for fTermination Date:Contract term:Type of contract:Contract descriptionPurpose of contractThis is a new interthe State Dental HeNEW CONTRACTThe maximum amorOther basis for payr	the Divisi 06 1 y Int n: Sta :: local agre ealth Offi	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to icer as set	72 days greeme Office provid forth in	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con	Health. Inding for an academ 72. tract is: \$430,033.00	ic faculty member to act and serve as
П.	4. 5. 6.	Health Officer for the second	the Divisi 06 1 y Int n: Sta :: local agre ealth Offi unt of the ment: Sala	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to cer as set contract fo ary plus frir	<b>Transforme</b> <b>Transforme</b> <b>Officent</b> <b>provid</b> <b>forth</b> in or the tende or the tende or the tende <b>e</b> done?	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con efits for 21 m	Health. Inding for an academ 72. tract is: \$430,033.00 onths totaling \$390,93	<b>ic faculty member to act and serve as</b> 9 and indirect costs at 10% totaling
١١.	4. 5. 6. JI 7.	Health Officer for the second	the Divisi 06, 1 y Int n: Sta : local agre ealth Offi unt of the ment: Sala quire that t nd the pos	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to icer as set contract for ary plus frir this work be sition of Sta	272 days greeme Office or the tenge ben e done?	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con efits for 21 m	Health. Inding for an academ 72. tract is: \$430,033.00 onths totaling \$390,93 Health Officer in acco	<b>ic faculty member to act and serve as</b> 9 and indirect costs at 10% totaling rdance with NRS 439.272.
П.	4. 5. 6. JI 7.	Health Officer for the optimization Date:         Contract term:         Type of contract:         Contract description         Purpose of contract         This is a new inter         the State Dental Her         NEW CONTRACT         The maximum amout         Other basis for payr         \$39,094.         JSTIFICATION         What conditions requires         This contract will fur         Explain why State e	the Divisi 06 1 y Int n: Sta : clocal agre ealth Offi unt of the ment: Sala quire that t nd the pos employees	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to cer as set contract for ary plus frir this work bu- sition of Sta s in your ag	<b>Transformed attending</b>	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con efits for 21 m	Health. Inding for an academ 72. tract is: \$430,033.00 onths totaling \$390,93	<b>ic faculty member to act and serve as</b> 9 and indirect costs at 10% totaling rdance with NRS 439.272.
П.	4. 5. 6. <b>JI</b> 7. 8.	Health Officer for the Termination Date: Contract term: Type of contract: Contract description Purpose of contract This is a new inter the State Dental Ha NEW CONTRACT The maximum amou Other basis for payr \$39,094. JSTIFICATION What conditions req This contract will fur Explain why State e State employees are	the Divisi 06, 1 y Int 1 sta :: : : : : : : : : : : : : : : : : :	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to cer as set contract for ary plus frir this work be sition of Sta in your ag ing this wo	<b>Transformed attending</b>	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con efits for 21 m	Health. Inding for an academ 72. tract is: \$430,033.00 onths totaling \$390,93 Health Officer in acco	<b>ic faculty member to act and serve as</b> 9 and indirect costs at 10% totaling rdance with NRS 439.272.
II.	4. 5. 6. <b>JI</b> 7. 8.	I Health Officer for the Termination Date: Contract term: Type of contract: Contract description Purpose of contract This is a new inter the State Dental He NEW CONTRACT The maximum amound Other basis for payr \$39,094. JSTIFICATION What conditions req This contract will fur Explain why State end State employees are Were quotes or prop	the Divisi 06 1 y Int Sta : : : : : : : : : : : : : : : : : : :	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to icer as set contract for ary plus frir this work by sition of Sta in your ag ing this wo licited?	<b>Transformed Service</b>	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con efits for 21 m evada Dental c other State a	Health. Inding for an academ 72. tract is: \$430,033.00 onths totaling \$390,93 Health Officer in acco agencies are not able to No	<b>ic faculty member to act and serve as</b> 9 and indirect costs at 10% totaling rdance with NRS 439.272.
II.	4. 5. 6. <b>JI</b> 7. 8.	Health Officer for the Termination Date: Contract term: Type of contract: Contract description Purpose of contract This is a new inter the State Dental Ha NEW CONTRACT The maximum amou Other basis for payr \$39,094. JSTIFICATION What conditions req This contract will fur Explain why State e State employees are	the Divisi 06 1 y Int Sta : : : : : : : : : : : : : : : : : : :	ion of Pub /30/2019 year and 2 terlocal Ag ate Dental eement to icer as set contract for ary plus frir this work by sition of Sta in your ag ing this wo licited?	<b>Transformed Service</b>	Behavioral I s nt r e ongoing fu n NRS 439.27 rm of the con efits for 21 m evada Dental c other State a	Health. Inding for an academ 72. tract is: \$430,033.00 onths totaling \$390,93 Health Officer in acco agencies are not able t	<b>ic faculty member to act and serve as</b> 9 and indirect costs at 10% totaling rdance with NRS 439.272.

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

# b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

# **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

10%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State agencies routinely perform services for other agencies - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

- 15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity
- 16. Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:

#### 20. Contract Status:

#### Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	chadwic1	09/13/2017 11:44:17 AM
Division Approval	chadwic1	09/13/2017 11:44:19 AM
Department Approval	jkolenut	09/14/2017 08:28:27 AM
Contract Manager Approval	rmorse	09/18/2017 14:17:51 PM
Budget Analyst Approval	bwooldri	09/19/2017 08:55:13 AM
BOE Agenda Approval	nhovden	09/19/2017 09:29:28 AM
BOE Final Approval	mdoya1	10/10/2017 14:40:07 PM

# INTRASTATE INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

A Contract Between the State of Nevada Acting By and Through Its Department of Health and Human Services Division of Public and Behavioral Health

# Bureau of Child, Family & Community Wellness Oral Health Program

4150 Technology Way, Suite 200 Carson City, NV 89706 Ph: (775) 684-2213 Contact: John M. DiMuro, DO

And

Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine 4505 S. Maryland Parkway Las Vegas, NV 89154 Ph: (702) 895-3011

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services of hereinafter set forth are both necessary to and in the best interests of the State of Nevada;

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. <u>REQUIRED APPROVAL</u>. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. <u>DEFINITIONS</u>. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.

3. <u>CONTRACT TERM</u>. This Contract shall be effective October 1, 2017 to June 30, 2019, unless sooner terminated by either party as set forth in this Contract.

4. <u>TERMINATION</u>. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause.

Page 1 of 5

Agency Ref. # C 16188

DHHS 000024

The parties expressly agree that this Contract shall be terminated immediately if for any reason federal and/or State Legislature funding ability to satisfy this Contract is withdrawn, limited, or impaired.

5. <u>NOTICE</u>. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.

6. <u>INCORPORATED DOCUMENTS</u>. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

#### ATTACHMENT AA: SCOPE OF WORK

7. <u>CONSIDERATION</u>. University of Nevada, Las Vegas, School of Dental Medicine ("SDM") agrees to provide the services set forth in paragraph (6) at a total contract cost of \$430,033.00 ("Total Contract Amount"), exclusive of travel or per diem expenses, with the total Contract amount payable: in equal monthly installments, not to exceed the Total Contract Amount. Any intervening end to an annual or biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of legislative appropriation may require.

8. <u>ASSENT</u>. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

a. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the other party, the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with all state and federal regulations and statutes.

b. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the other party, the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.

c. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained by each party for a minimum of three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

10. <u>BREACH: REMEDIES</u>. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs.

Page 2 of 5

Agency Ref. # C 16188

11. <u>LIMITED LIABILITY</u>. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. To the extent applicable, actual contract damages for any breach shall be limited by NRS 353.260 and NRS 354.626.

12. <u>FORCE MAJEURE</u>. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, act of public enemy, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.

13. <u>INDEMNIFICATION</u>. Neither party waives any rights or defense to indemnification that may exist in law or equity.

14. <u>INDEPENDENT PUBLIC AGENCIES</u>. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.

15. <u>WAIVER OF BREACH</u>. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.

16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.

17. <u>ASSIGNMENT</u>. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.

18. <u>OWNERSHIP OF PROPRIETARY INFORMATION</u>. Unless otherwise provided by law or this Contract, any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.

19. <u>PUBLIC RECORDS</u>. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.

20. <u>CONFIDENTIALITY</u>. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.

Agency Ref. # C 16188 Page 3 of 5

21. <u>PROPER AUTHORITY</u>. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).

22. <u>GOVERNING LAW; JURISDICTION</u>. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the jurisdiction of the Nevada district courts for enforcement of this Contract.

23. <u>ENTIRE AGREEMENT AND MODIFICATION</u>. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Attorney General.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

BOARD OF REGENTS OF THE NEVADA SYSTEM OF HIGHER EDUCATION, ON BEHALF OF THE UNIVERSITY OF NEVADA, LAS VEGAS – SCHOOL OF DENTAL MEDICINE

Recommended by:

Karen P. West, DDS

Dean, UNLV School of Dental Medicine

Approved by:

170il Lori Olafson

Associate Vice President for Research

Division of Public and Behavioral Health Public Agency #2

for

for Richard Whitley, MS

Signature - Nevada State Board of Examiners

Approved as to form and compliance with law by:

Deputy Attorney General for Attorney General, State of Nevada

Administrator <u>Division of Public and Behavioral Health</u> Title

Director, Department of Health and Human Services Title

#### APPROVED BY BOARD OF EXAMINERS

On (Datc)

(Date)

Agency Ref. # C 16188 Page 5 of 5

On

DHHS 000028

# Attachment AA: Scope of Work Intrastate Interlocal Contract Number: C16188

#### **Description of Services, Scope of Work and Deliverables**

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada Las Vegas, School of Dental Medicine ("SDM"), agrees to the following:

- 1. To provide an academic faculty member, to act and serve as a State Dental Health Officer to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from October 1, 2017 to June 30, 2019. As set forth in NRS 439.272, the State Dental Health Officer must:
  - a. Be a resident of this State;
  - b. Hold a current license to practice dentistry issued pursuant to chapter 631 of NRS; and
  - c. Devote all of his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- 2. In accordance with NRS 439.272, the State Dental Health Officer shall:
  - a. Provide monthly detailed time and effort reports to develop sufficient data to justify continuation of position and weigh feasibility of creating a formal State position.
  - b. Report directly to the Division's Chief Medical Officer and under his/her general guidance and in collaboration with the State Public Health Dental Hygienist, as well as the advice, support, and collaboration of the State Oral Health Program Manager and staff:
    - i. Assess and track disease rates and improvements in oral health to determine the oral health needs of the residents of Nevada;
    - ii. Collect and analyze detailed oral health expenditure data for Nevada that can be readily available to inform program and policy development;
    - iii. Performs additional duties as assigned by Chief Medical Officer;
    - iv. Attend meetings and provide the Advisory Committee on the State Program for Oral Health with advice regarding public dental health;
    - v. Make recommendations to the Advisory Committee, the Division, and the Legislature regarding programs in Nevada for public dental health;
    - vi. Seek such information and advice from the Advisory Committee or from any Nevada dental or medical education program, including any such programs of the Nevada System of Higher Education, as necessary to carry out his or her duties.
    - vii. Increase public and health care providers' knowledge and raise awareness of the importance of oral health and on matters relating to oral health, including, without limitation:
      - 1. Proper oral hygiene;
      - 2. The factors that increase the risk of a person developing oral diseases;
      - 3. The prevention and treatment of oral diseases;

- 4. The relationship between oral health and systemic health;
- 5. Pediatric dental care, including disease prevention; and
- 6. Other topics as determined
- viii. Promote and improve access to high-quality dental care and oral disease prevention services:
  - 1. Work closely with the Division of Health Care Financing and Policy to promote utilization of Medicaid and Nevada Check Up covered services;
  - 2. Support community-based programs in identifying funding opportunities, providing preventive care options and promoting continuous quality improvement.
  - Recognize and reduce oral health disparities by promoting services and advocating for underserved populations (including individuals with disabilities, elderly, pregnant women, etc.) while respecting diversity and promoting cultural competency; and
  - 4. Develop and implement inter-discipline training on oral health, targeting family physicians, pediatricians, nurses, midwifes, nursing assistance, long-term care providers, etc.
- ix. Further cultivate Nevada's oral health stakeholder network:
  - 1. Attend internal and external meetings and events representing the Division, as time, budget and program priorities support:
  - Integrate oral health into other Division and DHHS programs, such as Chronic Disease; Maternal, Child, and Adolescent Health; WIC; Substance Abuse Prevention and Treatment; Home Visiting; HIV/AID; Aging and Disabilities; Mental Health; Early Intervention; etc.;
  - 3. Facilitate active public/private partnerships, such as educational institutions, the Nevada State Board of Dental Examiners, professional associations, chronic disease coalitions, non-profits organizations, philanthropic organizations, etc. to promote and support good oral health.
  - 4. Attend Nevada's regional and state wide oral health coalition meetings and provide advice, technical assistance, and priority alignment guidelines when needed.
  - x. Promote sustainability:
    - 1. Pursue additional funding sources, collaborating with other agencies and organization as necessary;
    - 2. Leverage funding opportunities and resources with other Divisions programs;
    - 3. Promote medical providers utilization of oral health screenings, providing prevention services and offering dental care provider referrals into their day-to-day operations;
    - Systemically integrate oral health education and resources into chronic disease programs and disease self-management programs;
    - 5. Ensure evaluation of programs and activities

- 6. May attend training sessions that will expand the leadership potential at the State level.
- 3. The Division of Public and Behavioral Health will reimburse SDM for cost of salary, plus fringe benefits as follows

Category	Total Cost	Detailed Cost	Details of Expected Expenses
1. Personnel	\$390,939.00		
	<u> </u>	\$293,939.00	Wages:         SFY18: $10/1/17 - 6/30/18$ \$165,134 per year / 12 months x 9 months = \$123,851         SFY19: $7/1/18 - 6/30/19$ \$170,088 per year / 12 months x 12 months = \$170,088
		\$97,000.00	Fringe Benefits: \$293,939 x 33%
2. Indirect	\$39,094.00	\$39,094.00	Indirect @10% of direct costs (\$390,939 x 10%)
Total Cost	\$430,033.00	and an	

Further, the Division of Public and Behavioral Health will pay for the State Dental Health Officer's travel Expenditures.

SDM will provide the State Dental Health Officer with a furnished office at no cost.

BRIAN SANDOVAL Governor

RICHARD WHITLEY, MS Director

## STATE OF NEVADA



AMY ROUKIE, MBA Administrator

JOHN DIMURO, D.O., MBA Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH 4150 Technology Way, Suite 300 Carson City, NV 89706 Telephone: (775) 684-4200 · Fax: (775) 684-4211

September 11, 2017

#### **MEMORANDUM**

- TO: Bessie Wooldridge Budget Analyst Budget Division
- THROUGH: Mark Winebarger Administrative Services Officer IV Division of Public and Behavioral Health
- FROM: Antonina Capurro, DMD, MPH State Dental Health Officer Oral Health Program

# SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – <u>16188</u> (CETS)

This interlocal contract with the School of Dental Medicine is to provide a State Dental Health Officer for the Division of Public and Behavioral Health, and is necessary to comply with NRS 439.272. The interlocal contract was sent to the University of Nevada, Las Vegas (UNLV) School of Dental Medicine on July, 21, 2017 requesting signature for approval. Status of the contract was requested multiple times. Bureau fiscal staff was informed the contract was with the UNLV Office of Sponsored Programs for signature on August 14, 2017. The signed contract was received by fiscal staff on August 25, 2017.

We therefore request this contract be accepted with a retroactive start date of October 1, 2017. If the contract is not approved the State will not be able to comply with NRS 439.272, to provide an academic faculty member to act and serve as a State Dental Health Officer for the Division of Public and Behavioral Health.

Thank you for your consideration in this matter.

If you have any questions, please contact Eric Fortenbury at (775) 684-5929 or efortenbury@health.nv.gov.

CC: Contract Unit

Division of Public and Behavioral Health

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

## I. DESCRIPTION OF CONTRACT

1. Coi	ntract Number:	19237	7			Amendment Number:	1
						Legal Entity Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas
Age	ency Name:	DHHS HEAL	6 - PUBLIC A .TH	ND BEH	AVIORAL	Contractor Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas
Age	ency Code:	406				Address:	School of Dental Medicine
Арр	propriation Unit:	3220-	16				4505 South Maryland Parkway
ls b ava	oudget authority ailable?:		Yes			City/State/Zip	Las Vegas, NV 89154
lf "N	No" please expla	ain: No	ot Applicable			Contact/Phone:	Antonina Capurro 702-774-2573
						Vendor No.:	D35000813
						NV Business ID:	Governmental Entity
То	what State Fisca	al Year	(s) will the co	ontract be	charged?	2018-2019	
Wh the	at is the source contractor will b	of fund e paid	ls that will be by multiple fu	used to p unding sc	pay the contracources.	ctor? Indicate the pe	rcentage of each funding source if
	General Fu	nds	0.00 %	X	Fees	100.00 % Radio	logical fees
	Federal Fur	nds	0.00 %	I	Bonds	0.00 %	
	Highway Fu	Inds	0.00 %	(	Other funding	0.00 %	
			C 16188				
Age	ency Reference	#:	0 10100				
2. Cor	ntract start date:						
2. Cor a. I	•	}oard o oval?	f No	or b. o 04/20	other effective o	date 10/01/2017	,
2. Cor a. I	ntract start date: Effective upon E Examiner's appr	}oard o oval?	f No			date 10/01/2017	,
2. Cor a. I Ret	ntract start date: Effective upon E Examiner's appr Anticipated BC	3oard o ⁻oval? ⊃E mee	f <b>No</b> eting date			date 10/01/2017	,
2. Cor a. I I Reti	ntract start date: Effective upon E Examiner's appr Anticipated BC roactive?	3oard o ⁻oval? ⊃E mee	f <b>No</b> eting date			date 10/01/2017	,
2. Cor a. I Ret If "Y <u>Not</u> 3. Pre	ntract start date: Effective upon E Examiner's appr Anticipated BC roactive? ⁄es'', please exp	Board o Foval? DE mee	f <b>No</b> eting date			date 10/01/2017	,
2. Cor a. I Retu If "Y <u>Not</u> 3. Prev	ntract start date: Effective upon E Examiner's appr Anticipated BC roactive? <u>Yes'', please exp</u> <u>Applicable</u> viously Approve	Board o roval? DE mee olain 	f No eting date No	04/20	19	date 10/01/2017	
2. Cor a. I If "Y <u>Not</u> 3. Prev Con	ntract start date: Effective upon E Examiner's appr Anticipated BC roactive? Yes", please exp (es", please exp (es", please exp viously Approve mination Date: htract term:	Board o roval? DE mee <u>elain</u> d	f No eting date No 06/30/2019 1 year and 2	04/20	19	date 10/01/2017	<b>,</b>
2. Cor a. I If "Y Not 3. Prev Terr Con 4. Typ	ntract start date: Effective upon E Examiner's appr Anticipated BC roactive? <u>Yes'', please exp</u> <b>Applicable</b> viously Approve mination Date: ntract term: e of contract:	Board o roval? DE mee olain	f No eting date No 06/30/2019 1 year and 2 Interlocal Ag	04/20 272 days greemen	19	date 10/01/2017	<b>,</b>
2. Cor a. I If "Y Not 3. Prev Con 4. Typ Con	htract start date: Effective upon E Examiner's appr Anticipated BC roactive? Yes", please exp Yes", please exp Yously Approve mination Date: htract term: e of contract:	Board o roval? DE mee <u>elain</u> d	f No eting date No 06/30/2019 1 year and 2	04/20 272 days greemen	19	date 10/01/2017	, 
2. Cor a. I If "Y Not 3. Prev Con 4. Typ Con 5. <u>Pur</u>	htract start date: Effective upon E Examiner's appr Anticipated BC roactive? Yes", please exp Yes", please exp Yously Approve mination Date: htract term: e of contract: htract description	Board o roval? DE mee <u>elain</u> d	f No eting date No 06/30/2019 1 year and 2 Interlocal Ag State Dental	04/20 272 days greemen I Officer	19 		
2. Cor a. I Reti If "Y Not 3. Prev Con 4. Typ Con 5. Pur This mer	htract start date: Effective upon E Examiner's appr Anticipated BC roactive? Yes", please exp Yes", please e	Board o roval? DE mee elain d d	f No eting date No 06/30/2019 1 year and 2 Interlocal Ag State Dental ent to the ori as the State	04/20 272 days greemen I Officer iginal co e Dental	19 t ntract which Health Office	provides ongoing f r as set forth in NR	unding for an academic faculty S 439.272. This amendment increases
2. Cor a. I Reti If "Y Not 3. Prev Con 4. Typ Con 4. Typ Con 5. Purp This mer the	htract start date: Effective upon E Examiner's appr Anticipated BC roactive? Yes'', please exp Yously Approve mination Date: htract term: e of contract: htract description pose of contract s is the first am mber to act and maximum amo	Board o roval? DE mee olain d d n: c <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b>	f No eting date No 06/30/2019 1 year and 2 Interlocal Ag State Dental ent to the ori as the State om \$430,033	04/20 272 days greemen I Officer iginal co e Dental	19 t ntract which Health Office	provides ongoing f r as set forth in NR	unding for an academic faculty
2. Cor a. I Reti If "Y Not 3. Prev Con 4. Typ Con 4. Typ Con 5. Purp This mer the	htract start date: Effective upon E Examiner's appr Anticipated BC roactive? Yes", please exp Yes", please exp Yes", please exp Yously Approve mination Date: htract term: e of contract: htract description pose of contract s is the first am mber to act and	Board o roval? DE mee olain d d n: c <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b> <b>n</b>	f No eting date No 06/30/2019 1 year and 2 Interlocal Ag State Dental ent to the ori as the State om \$430,033	04/20 272 days greemen I Officer iginal co e Dental	19 t ntract which Health Office 195 due to the	provides ongoing f r as set forth in NR e addition of travel	unding for an academic faculty S 439.272. This amendment increases costs associated with this position
2. Cor a. I Reti If "Y Not 3. Prev Con 4. Typ Con 4. Typ Con 5. Purp This mer the	htract start date: Effective upon E Examiner's appr Anticipated BC roactive? Yes'', please exp Yously Approve mination Date: htract term: e of contract: htract description pose of contract s is the first am mber to act and maximum amo	Board o roval? DE mee olain d d n: :: nendme d serve ount fro DMEN	f No eting date No 06/30/2019 1 year and 2 Interlocal Ag State Dental ent to the ori as the State om \$430,033 T	04/20 272 days greemen I Officer iginal co e Dental	19 t ntract which Health Office	provides ongoing f r as set forth in NR e addition of travel	unding for an academic faculty S 439.272. This amendment increases costs associated with this position um \$ Action Accum \$ Agenda
2. Cor a. I Reti If "Y Not 3. Prev Con 4. Typ Con 5. Pur This mer the 6. COf	htract start date: Effective upon E Examiner's appr Anticipated BC roactive? <u>Yes'', please exp</u> <u>Yes'', please exp</u> <u>Yes''', </u>	Board o roval? DE mee olain d d n: c d n: c d n: c d n: c d n: c d n: c d n: c d n: c d n: c d d d d d d d d d d d d d d d d d d	f No eting date No 06/30/2019 1 year and 2 Interlocal Ag State Dental ent to the ori as the State om \$430,033 T	04/20 272 days greemen I Officer iginal co e Dental	19 t ntract which Health Office 195 due to the Trans \$	provides ongoing f r as set forth in NR e addition of travel 5 Info Accu 0 \$430,03	unding for an academic faculty S 439.272. This amendment increases costs associated with this position um \$ Action Accum \$ Agenda 3.00 \$430,033.00 Yes - Action

# 7. What conditions require that this work be done? This contract will fund the position of State of Nevada Dental Health Officer in accordance with NRS 439.272.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

	The NRS requires that the State en meets the requirements necessary	mploy a State Dental / for this position.	I Health Officer and the division does not have an employee that							
9	. Were quotes or proposals solicited	?	No							
	Was the solicitation (RFP) done by the Purchasing No Division?									
	a. List the names of vendors that were solicited to submit proposals (include at least three):									
	Not Applicable									
	b. Soliciation Waiver: Not Applica									
	c. Why was this contractor chosen	in preference to othe	er?							
	d. Last bid date:	•	re-bid date:							
10.	. Does the contract contain any IT co	omponents?	No							
III. (	OTHER INFORMATION									
11.	. Is there an Indirect Cost Rate or Pe	ercentage Paid to the	e Contractor?							
		de the Indirect Cost F	Rate or Percentage Paid to the Contractor							
40	10%									
12.	employee of the State of Nevada?	oyee of the State of N	Nevada or will the contracted services be performed by a current							
	No									
	b. Was the contractor formerly employed by someone formerly en	ployed by the State of nployed by the State	of Nevada within the last 24 months or will the contracted services be of Nevada within the last 24 months?							
	No									
		•	al subdivisions or by any other government?							
	No If "Yes", please explai	in								
	Not Applicable									
13.	Has the contractor ever been enga									
	agency has been veri	fied as satisfactory:	cy and indicate if the quality of service provided to the identified							
	State agencies routinely perform se	ervices for other ager	ncies - satisfactory							
14.	Is the contractor currently involved	•								
		le details of the litigat	tion and facts supporting approval of the contract:							
	Not Applicable									
15.	The contractor is not registered with Governmental Entity	h the Nevada Secreta	ary of State's Office because the legal entity is a:							
16.	Not Applicable									
17.	Not Applicable									
18.	Not Applicable									
19.	Agency Field Contract Monitor:									
20.	Contract Status:									
	Contract Approvals:									
	Approval Level	User	Signature Date							
	Budget Account Approval	rmorse	04/09/2019 15:56:29 PM							
	Division Approval	rmorse	04/09/2019 15:56:31 PM							
	Department Approval	mwinebar	04/25/2019 08:16:00 AM							
	Contract Manager Approval	rmorse	04/26/2019 08:13:32 AM							
	Budget Analyst Approval	afrantz	05/10/2019 11:44:22 AM							

CETS# 19237

AGENCY REF# C 16188

# AMENDMENT #1

to

# INTRASTATE INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

Between the State of Nevada Acting by and Through its Department of Health and Human Services Division of Public and Behavioral Health

Agency #1 Name:	Bureau of Child, Family & Community Wellness Oral Health Program
Address:	4150 Technology Way, Suite 300
City, State, Zip Code:	Carson City, Nevada 89706
Contact:	Beth Handler, MPH
Phone:	775-684-5902
Email:	bhandler@health.nv.gov

Agency #2 Name:	Board of Regents, NSHE öbo University of Nevada, Las Vegas School of Dental Medicine
Address:	4505 South Maryland Parkway
City, State, Zip Code:	Las Vegas, Nevada 89154
Contact:	Antonina Capurro, D.M.D, M.P.H, M.B.A, State Dentist
Phone:	702-774-2573
Email:	702-774-2521
	acapurro@health.nv.gov

- 1. <u>AMENDMENTS</u>. For and in consideration of mutual promises and/or their valuable considerations, all provisions of the original contract dated <u>October 10, 2017</u>, attached hereto as Exhibit A, remain in full force and effect with the exception of the following:
  - A. The purpose of this amendment is to add travel costs in the amount of \$12,875.00 plus indirect of \$1,287.00 for a new total contract not to exceed amount of \$444,195.00.

#### Current Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

# ATTACHMENT AA: SCOPE OF WORK

7, CONSIDERATION. University of Nevada, Las Vegas, School of Dental Medicine ("SDM") agrees to provide the services set forth in paragraph (6) at a total contract cost of \$430,033.00 ("Total Contract Amount"), exclusive of travel or per diem expenses, with the total Contract amount payable: in equal monthly installments, not to exceed the Total Contract Amount. Any infervening end to an annual or biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of the legislative appropriation may require.

CETS# 19237 AGENCY REF# C 16188

24

#### Amended Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence;

#### ATTACHMENT AA: SCOPE OF WORK revised on 2/21/19

7. CONSIDERATION. University of Nevada, Las Vegas, School of Dental Medicine ("SDM") agrees to provide the services set forth in paragraph (6) at a total contract cost of \$444,195,00 with the total Contract amount payable: in equal monthly installments, not to exceed the Total Contract Amount. Any intervening end to an annual or biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of the legislative appropriation may require.

2. <u>INCORPORATED DOCUMENTS</u>. The following are attached hereto, incorporated by reference herein and made a part of this amended contract:

ATTACHMENT AA:	SCOPE OF WORK revised on 2/21/19
EXHIBIT A:	Original contract

3. <u>**REQUIRED APPROVAL.</u>** This amendment to the original contract shall not become effective until and unless approved by the Nevada State Board of Examiners.</u>

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

Dean, UNLV School of Medicine Datė Contracted Government Entity's Title Karen P. West Executive Director, UNLV Office of Sponsored Projects Contracted Government Entity's Title Lori M. Ciccone Date Administrator, Division of Public and Behavioral Health Date otchevar Title

Page 2 of 4

al	110
for Richard Whitley, MS	4-35-19 Date

Director, Department of Health and Human Services Title

CETS# 19237

AGENCY REF# C 16188

for Susan Brown APPROVED BY BOARD OF EXAMINERS

Signature Board of Examiners

5

On: C

Date

Approved as to form by:

Deputy Attorney General for Attorney General

4/20 On: Date

Revised: 10/18

Page 3 of 4

CETS# 19237 AGENCY REF# C 16188

#### ATTACHMENT AA: SCOPE OF WORK. Revised on 2/21/19

Items #1 and #2 remain unchanged.

#### Item #3 is revised as follows:

1

¢

5

3. The Division of Public and Behavioral Health will reimburse SDM for cost of salary, fringe benefits, and travel as follows:

<u>Category</u>		Total cost	Def	alled cost	Details of expected expenses
1. Personnel	<u>5</u>	390,939.00		alesta de la composición de la composi Na composición de la c	
	<u>1                                    </u>		\$	293,939.00	Wages: <u>SFY 18:</u> 10/1/17 – 6/30/18 \$165,134 per year / 12 months x 9 months = \$123,851 <u>SFY 19:</u> 7/1/18 – 6/30/19
			\$	97,000.00	\$170,088 per year Fringe Benefits: \$293,939 x 33%
2. Travel	\$	12,875.00	1997-1997 1997-1997		
			*****	1,600.00 100.00 690.00 1,800.00 200.00 140.00 70.00 1,655.00 2,000.00 660.00 640.00 145.00 140.00 350.00 487.00	Out-of-State Travel:Airfare: \$800 r/t x 2 tripsBaggage fee: \$50 r/t per person x 2 tripsPer Diem: \$69/day x 5 days x 2 tripsLodging: \$166/day + \$14 Tax = \$180 x 5 nights x 2 tripsGround Transportation: \$100 per r/t x 2 tripsParking: \$14/day x 5 days x 2 tripsMileage: (\$0.58/mile x 60 miles per r/trips) x 2 tripsSymposium Registration (NOHC-600, MSDA-455)In-State Travel:Trips to Esmeralda, Lincoln, Nye, and White PineCounties/SubtotalAirfare: \$400 r/trips air from Las Vegas to Reno x 5 tripsPer Diem: \$66/day x 2 days x 5 tripsMileage: (\$0.58/mile x 66.85 miles per r/trips) x 5 tripsParking: \$14/day x 2 days x 5 tripsSymposium Registration (NPHA-175)Local Mileage: \$0.58/mile x 840 miles
Total Direct Cost	\$	403,814.00			
3. Indirect Cost	\$	40, <u>3</u> 81.00	nego	tiated indirect	Il allow for the administration of program activities, based on rate of 10% of total direct costs excluding capital expenditures, ow-through funds.
Total Approved Budget	\$	444,195.00			

SDM will provide the State Dental Health Officer with a furnished office at no cost.

Page 4 of 4

DHHS\_000038

# CONTRACT FOR SERVICES OF INDEPENDENT CONTRACTOR FOR LESS THAN \$2,000

# A Contract Between the State of Nevada Acting by and Through its Department of Health and Human Services Division of Public and Behavioral Health

Agency Name:	Oral Health Program (OHP)	
Address:	3811 W. Charleston Blvd. Suite 205	
City, State, Zip Code:	Las Vegas, Nevada 89102	
Contact:	Antonina Capurro, DMD, MPH, MBA	
Phone:	(702) 774-2573	
Fax:	(702) 774-2521	
Email:	acapurro@health.nv.gov	

Contractor Name:	Association of State and Territorial Dental Directors (ASTDD)
Address:	3858 Cashill Blvd.
City, State, Zip Code:	Reno, NV 89509
Contact:	Chris Wood, Executive Director
Phone:	775-626-5008
Fax:	
Email:	cwood@astdd.org

WHEREAS, NRS 333.700 authorizes officers, departments, institutions, boards, commissions, and other agencies in the Executive Branch of the State Government which derive their support from public money in whole or in part to engage services of persons as independent contractors; and

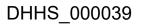
WHEREAS, it is deemed that the service of Contractor is both necessary and in the best interests of the State of Nevada.

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. **CONTRACT TERM.** This Contract shall be effective as noted below, unless sooner terminated by either party as specified in *Section 7, Contract Termination*. Contracts requiring approval of the Nevada Board of Examiners or the Clerk of the Board are not effective until such approval has occurred, however, after such approval, the effective date will be the date noted below.

Effective from:	July 1, 2017	То:	June 30, 2018
-----------------	--------------	-----	---------------

2. NOTICE. All communications, including notices, required or permitted to be given under this Contract shall be in writing and directed to the parties at the addresses stated above. Notices may be given: (i) by delivery in person; (ii) by a nationally recognized next day courier service, return receipt requested; or (iii) by certified mail, return receipt requested. If specifically requested by the party to be notified, valid notice may be given by facsimile transmission or electronic mail to the address(es) such party has specified in writing.



#### 3. SCOPE OF WORK. The scope of work is described below, which is incorporated herein by reference:

Development of survey design, data analysis, data tables and revisions, completion of data set, completion of a data dictionary,
report on the data.
ATTACHMENT AA: SCOPE OF WORK AND DELIVERABLES
ATTACHMENT BB: CONFIDENTIALITY ADDENDUM

An Attachment must be limited to the scope of work to be performed by Contractor. Any provision, term or condition of an Attachment that contradicts the terms of this Contract, or that would change the obligations of the State under this Contract, shall be void and unenforceable.

4. **CONSIDERATION**. The parties agree that Contractor will provide the services specified in *Section 3, Scope of Work* at a cost as noted below:

1	per	Invoice	
Upon rec	ceipt o	f invoice	
-	·	Upon receipt o	per     Invoice       Upon receipt of invoice

The State does not agree to reimburse Contractor for expenses unless otherwise specified in the Scope of Work or incorporated attachments (if any). Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the result of legislative appropriation may require.

\$ 1,900

- 5. BILLING SUBMISSION: TIMELINESS. The parties agree that timeliness of billing is of the essence to the Contract and recognize that the State is on a Fiscal Year. All billings for dates of service prior to July 1 must be submitted to the State no later than the first Friday in August of the same calendar year. A billing submitted after the first Friday in August, which forces the State to process the billing as a stale claim pursuant to NRS 353.097, will subject Contractor to an administrative fee not to exceed one hundred dollars (\$100.00). The parties hereby agree this is a reasonable estimate of the additional costs to the State of processing the billing as a stale claim and that this amount will be deducted from the stale claim payment due to Contractor.
- 6. INSPECTION & AUDIT. Contractor agrees to keep and maintain under generally accepted accounting principles (GAAP) and as required by State and federal law, complete and accurate records as are necessary to fully disclose to the State or United States Government, sufficient information to determine compliance with all State and federal regulations and statutes, and compliance with the terms of this contract, and agrees that such documents will be made available for inspection upon reasonable notice from authorized representatives of the State or Federal Government.

#### 7. CONTRACT TERMINATION.

Total Contract Not to Exceed:

- A. <u>Termination Without Cause</u>. Regardless of any terms to the contrary, this Contract may be terminated upon written notice by mutual consent of both parties. The State unilaterally may terminate this contract without cause by giving not less than thirty (30) days' notice in the manner specified in *Section 2, Notice*. If this Contract is unilaterally terminated by the State, Contractor shall use its best efforts to minimize cost to the State and Contractor will not be paid for any cost that Contractor could have avoided.
- B. <u>State Termination for Non-Appropriation</u>. The continuation of this Contract beyond the current biennium is subject to and contingent upon sufficient funds being appropriated, budgeted, and otherwise made available by the State Legislature and/or federal sources. The State may terminate this Contract, and Contractor waives any and all claims(s) for damages, effective immediately upon receipt of written notice (or any date specified therein) if

DHHS 000040



for any reason the Contracting Agency's funding from State and/or federal sources is not appropriated or is withdrawn, limited, or impaired.

- C. <u>Termination with Cause for Breach</u>. A breach may be declared with or without termination. A notice of breach and termination shall specify the date of termination of the Contract, which shall not be sooner than the expiration of the Time to Correct, if applicable, allowed under subsection 7D. This Contract may be terminated by either party upon written notice of breach to the other party on the following grounds:
  - 1) If Contractor fails to provide or satisfactorily perform any of the conditions, work, deliverables, goods, or services called for by this Contract within the time requirements specified in this Contract or within any granted extension of those time requirements; or
  - 2) If any state, county, city, or federal license, authorization, waiver, permit, qualification or certification required by statute, ordinance, law, or regulation to be held by Contractor to provide the goods or services required by this Contract is for any reason denied, revoked, debarred, excluded, terminated, suspended, lapsed, or not renewed; or
  - 3) If Contractor becomes insolvent, subject to receivership, or becomes voluntarily or involuntarily subject to the jurisdiction of the Bankruptcy Court; or
  - 4) If the State materially breaches any material duty under this Contract and any such breach impairs Contractor's ability to perform; or
  - 5) If it is found by the State that any quid pro quo or gratuities in the form of money, services, entertainment, gifts, or otherwise were offered or given by Contractor, or any agent or representative of Contractor, to any officer or employee of the State of Nevada with a view toward securing a contract or securing favorable treatment with respect to awarding, extending, amending, or making any determination with respect to the performing of such contract; or
  - 6) If it is found by the State that Contractor has failed to disclose any material conflict of interest relative to the performance of this Contract.
- D. <u>Time to Correct</u>. Unless the breach is not curable, or unless circumstances do not permit an opportunity to cure, termination upon declared breach may be exercised only after service of formal written notice as specified in *Section 2, Notice*, and the subsequent failure of the breaching party within fifteen (15) calendar days of receipt of that notice to provide evidence, satisfactory to the aggrieved party, showing that the declared breach has been corrected. Upon a notice of breach, the time to correct and the time for termination of the contract upon breach under subsection 7C, above, shall run concurrently, unless the notice expressly states otherwise.
- 8. REMEDIES. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including, without limitation, actual damages, and to a prevailing party reasonable attorneys' fees and costs. For purposes of an award of attorneys' fees to either party, the parties stipulate and agree that a reasonable hourly rate of attorneys' fees shall be one hundred and fifty dollars (\$150.00) per hour. The State may set off consideration against any unpaid obligation of Contractor to any State agency in accordance with NRS 353C.190. In the event, that Contractor voluntarily or involuntarily becomes subject to the jurisdiction of the Bankruptcy Court, the State may set off consideration against any unpaid obligation of Contractor to the State or its agencies, to the extent allowed by bankruptcy law, without regard to whether the procedures of NRS 353C.190 have been utilized.
- 9. LIMITED LIABILITY. The State will not waive and intends to assert available NRS Chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. Damages for any State breach shall never exceed the amount of funds appropriated for payment under this Contract, but not yet paid to Contractor, for the Fiscal Year budget in existence at the time of the breach. Contractor's tort liability shall not be limited.

Effective 02/2017

DHHS 000041



- 10. INDEMNIFICATION AND DEFENSE. To the fullest extent permitted by law, Contractor shall indemnify, hold harmless and defend, not excluding the State's right to participate, the State from and against all liability, claims, actions, damages, losses, and expenses, including, without limitation, reasonable attorneys' fees and costs, arising out of any breach of the obligations of Contractor under this Contract, or any alleged negligent or willful acts or omissions of Contractor, its officers, employees and agents. Contractor's obligation to indemnify the State shall apply in all cases except for claims arising solely from the State's own negligence or willful misconduct. Contractor waives any rights of subrogation against the State. Contractor's duty to defend begins when the State requests defense of any claim arising from this Contract.
- 11. **REPRESENTATIONS REGARDING INDEPENDENT CONTRACTOR STATUS.** Contractor represents that it is an independent contractor, as defined in NRS 333.700(2) and 616A.255, warrants that it will perform all work under this contract as an independent contractor, and warrants that the State of Nevada will not incur any employment liability by reason of this Contract or the work to be performed under this Contract. To the extent the State incurs any employment liability for the work under this Contract; Contractor will reimburse the State for that liability.
- 12. INSURANCE SCHEDULE. Unless expressly waived in writing by the Contracting Agency, Contractor must procure, maintain and keep in force for the duration of the Contract insurance conforming to the minimum requirements specified below. Each insurance policy shall provide for a waiver of subrogation against the State of Nevada, its officers, employees and immune contractors as defined in NRS 41.0307, for losses arising from work/materials/equipment performed or provided by or on behalf of Contractor. By endorsement to Contractor's automobile and general liability policies, the State of Nevada shall be named as an additional insured with respect to liability arising out of the activities performed by, or on behalf of Contractor. Contractor shall not commence work before Contractor has provided evidence of the required insurance in the form of a certificate of insurance and endorsement to the Contracting Agency of the State.
  - A. Workers' Compensation and Employer's Liability Insurance.
    - 1) Contractor shall provide proof of worker's compensation insurance as required per Nevada Revised Statutes Chapters 616A through 616D inclusive.
    - 2) If Contractor qualifies as a sole proprietor as defined in NRS Chapter 616A.310, and has elected to not purchase industrial insurance for himself/herself, the sole proprietor must submit to the contracting State agency a fully executed "Affidavit of Rejection of Coverage" form under NRS 616B.627 and NRS 617.210.
  - B. <u>Commercial General Liability Occurrence Form</u>. The Policy shall include bodily injury, property damage and broad form contractual liability coverage.
    - 1)General Aggregate\$2,000,0002)Products Completed Operations Aggregate\$1,000,0003)Personal and Advertising Injury\$1,000,0004)Each Occurrence\$1,000,000

Mail all required insurance documents to the following address:

Division of Public and Behavioral Health Attn: Contract Unit 4150 Technology Way, Suite 300 Carson City, NV 89706

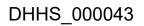
- 13. WAIVER OF BREACH. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.
- 14. **SEVERABILITY.** If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the non-enforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.

DHHS 000042



- 15. STATE OWNERSHIP OF PROPRIETARY INFORMATION. Any data or information provided by the State to Contractor and any documents or materials provided by the State to Contractor in the course of this Contract ("State Materials") shall be and remain the exclusive property of the State and all such State Materials shall be delivered into State possession by Contractor upon completion, termination, or cancellation of this Contract.
- 16. **PUBLIC RECORDS.** Pursuant to NRS 239.010, information or documents received from Contractor may be open to public inspection and copying. The State may have the duty to disclose unless a particular record is made confidential by law or a common-law balance of interests.
- 17. FEDERAL FUNDING. In the event, federal funds are used for payment of all or part of this Contract, Contractor agrees to comply with all applicable federal laws, regulations and executive orders, including, without limitation the following:
  - A. Contractor certifies, by signing this Contract, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to Executive Orders 12549 and 12689 and Federal Acquisition Regulation subpart 9.4, and any relevant program-specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.
  - B. Contractor and its subcontracts shall comply with all terms, conditions, and requirements of the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder, including 28 C.F.R. Section 35, inclusive, and any relevant program-specific regulations.
  - C. Contractor and it subcontractors shall comply with the requirements of the Civil Rights Act of 1964 (P.L. 88-352), as amended, the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions.)
- 18. GENERAL WARRANTY. Contractor warrants that all services, deliverables, and/or work products under this Contract shall be completed in a workmanlike manner consistent with standards in the trade, profession, or industry; shall conform to or exceed the specifications set forth in the incorporated attachments; and shall be fit for ordinary use, of good quality, with no material defects.
- 19. **DISCLOSURES REGARDING CURRENT OR FORMER STATE EMPLOYEES.** For the purpose of State compliance with NRS 333.705, Contractor represents and warrants that if Contractor, or any employee of Contractor who will be performing services under this Contract, is a current employee of the State or was employed by the State within the preceding 24 months, Contractor has disclosed the identity of such persons, and the services that each such person will perform, to the Contracting Agency.
- 20. GOVERNING LAW: JURISDICTION. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada, without giving effect to any principle of conflict-of-law that would require the application of the law of any other jurisdiction. The parties consent to the exclusive jurisdiction of and venue in the First Judicial District Court, Carson City, Nevada for enforcement of this Contract, and consent to personal jurisdiction in such court for any action or proceeding arising out of this Contract.
- 21. ENTIRE CONTRACT AND MODIFICATION. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and as such are intended to be the complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing

Effective 02/2017



and signed by the respective parties hereto and approved by the Office of the Attorney General and the State Board of Examiners. This Contract, and any amendments, may be executed in counterparts.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

Christine Wood **Executive Director** Independent Contractor's Signature Date Independent Contractor's Title Administrator, Division of Public and Behavioral Health Date Title Kotchevar. PhD. alie Approved as to form by: On: 6 Deputy Attorney General for Attorney General Date

#### ATTACHMENT AA: Scope of Work Contract Number: C 16594

Association of State and Territorial Dental Directors (ASTDD) hereinafter referred to as Vendor, agrees to provide the following services and reports according to the identified timeframes.

Purpose. In 2017 the State Dental Health Officer and the State Public Health Dental Hygienist conducted dental screenings on children at 16 Head Start Clinics across Northern Nevada.

The purpose of this screening was to collect information on this population's current oral health status, and to compare results to the last dental screening conducted at Head Starts (2007). This would give the State Oral Health Program (OHP) and its partners information on progress made or needed in oral health status for preschool children at Head Starts in rural Nevada. ASTDD offers the services (at a greatly reduced cost) of Doctorate in Public Health epidemiologists/statisticians (who are also dental providers) to analyze, interpret, compare, and report on data from large/statewide dental screenings, in a manner consistent with other states.

The purpose of this contract is to complete analysis, interpretation, and reporting on the Nevada Head Start data collected in 2017.

#### Goal 1: Provide guidance in the planning stages on the nuances of designing and conducting an "open mouth" survey.

Objective	Activities	Due Date	Documentation Needed
<ol> <li>Planning and forms completed; ready to conduct survey.</li> </ol>	<ol> <li>Provide technical assistance (TA) on development of a survey and accompanying forms.</li> </ol>	N/A	1. All questions answered, and forms created.

#### Goal 2: Analyze the data and provide assistance in its interpretation.

Objective	Activities	Due Date	Documentation Needed
1. Analysis of data completed.	<ol> <li>Analyze the data using Access, SPSS, or SAS.</li> <li>Draft data tables, which provide a summary of the data analysis (e.g., numbers and ages of children with untreated decay, treated decay, urgency of need, etc.)</li> <li>Review analysis for any anomalies in the process; send analysis to OHP for review and comment.</li> </ol>	NA	1. Analysis provided to OPH.

#### Goal 3: Complete a report on the findings.

<u>Objective</u>	Activities	Due Date	Documentation Needed
1. Complete report on findings.	<ol> <li>Send OHP the completed data set and a data dictionary.</li> <li>Write and provide summary report on interpretation of findings, including comparisons to 2007 data.</li> </ol>	06/30/18	1. Survey Report

### ATTACHMENT DD

## STATE OF NEVADA DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

# **CONFIDENTIALITY ADDENDUM**

#### BETWEEN

#### Nevada Division of Public and Behavioral Health Oral Health Program (OHP)

Hereinafter referred to as "Division"

and

#### Association of State and Territorial Dental Directors (ASTDD)

hereinafter referred to as "Contractor"

This CONFIDENTIALITY ADDENDUM (the Addendum) is hereby entered into between Division and Contractor.

WHEREAS, Contractor may have access, view or be provided information, in conjunction with goods or services provided by Contractor to Division that is confidential and must be treated and protected as such.

NOW, THEREFORE, Division and Contractor agree as follows:

#### I. <u>DEFINITIONS</u>

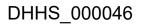
The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning ascribed to them in the context in which they first appear.

- 1. **Agreement** shall refer to this document and that particular inter-local or other agreement to which this addendum is made a part.
- 2. **Confidential Information** shall mean any individually identifiable information, health information or other information in any form or media.
- 3. **Contractor** shall mean the name of the organization described above.
- 4. **Required by Law** shall mean a mandate contained in law that compels a use or disclosure of information.
- II. <u>TERM</u>

The term of this Addendum shall commence as of the effective date of the primary inter-local or other agreement and shall expire when all information provided by Division or created by Contractor from that confidential information is destroyed or returned, if feasible, to Division pursuant to Clause VI (4).

III. <u>LIMITS ON USE AND DISCLOSURE ESTABLISHED BY TERMS OF CONTRACT OR LAW</u> Contractor hereby agrees it shall not use or disclose the confidential information provided, viewed or made available by Division for any purpose other than as permitted by Agreement or required by law.

Revised 6/18



#### IV. PERMITTED USES AND DISCLOSURES OF INFORMATION BY CONTRACTOR

Contractor shall be permitted to use and/or disclose information accessed, viewed or provided from Division for the purpose(s) required in fulfilling its responsibilities under the primary inter-local or other agreement.

#### V. USE OR DISCLOSURE OF INFORMATION

Contractor may use information as stipulated in the primary inter-local or other agreement if necessary for the proper management and administration of Contractor; to carry out legal responsibilities of Contractor; and to provide data aggregation services relating to the health care operations of Division. Contractor may disclose information if:

- 1. The disclosure is required by law; or
- 2. The disclosure is allowed by the inter-local or other agreement to which this Addendum is made a part; or
- 3. The Contractor has obtained written approval from the Division.

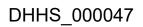
#### VI. OBLIGATIONS OF CONTRACTOR

- 1. Agents and Subcontractors. Contractor shall ensure by subcontract that any agents or subcontractors to whom it provides or makes available information, will be bound by the same restrictions and conditions on the access, view or use of confidential information that apply to Contractor and are contained in Agreement.
- 2. Appropriate Safeguards. Contractor will use appropriate safeguards to prevent use or disclosure of confidential information other than as provided for by Agreement.
- 3. **Reporting Improper Use or Disclosure.** Contractor will immediately report in writing to Division any use or disclosure of confidential information not provided for by Agreement of which it becomes aware.
- 4. **Return or Destruction of Confidential Information**. Upon termination of Agreement, Contractor will return or destroy all confidential information created or received by Contractor on behalf of Division. If returning or destroying confidential information at termination of Agreement is not feasible, Contractor will extend the protections of Agreement to that confidential information as long as the return or destruction is infeasible. All confidential information of which the Contractor maintains will not be used or disclosed.

**IN WITNESS WHEREOF,** Contractor and the Division have agreed to the terms of the above written Addendum as of the effective date of the inter-local or other agreement to which this Addendum is made a part.

# Compliance with this section is acknowledged by signing the contract signature page of this packet.

Revised 6/18



### STATE OF NEVADA

BRIAN SANDOVAL Governor

RICHARD WHITLEY, MS Director



JULIE KOTCHEVAR, PhD. Administrator

IHSAN AZZAM, PhD., MD Chief Medical Officer

# DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

4150 Technology Way, Suite 300 Carson City, NV 89706 Telephone: (775) 684-4220 · Fax: (775) 684-4211

### June 18, 2018

# **MEMORANDUM**

**TO:** Mark Winebarger Administrative Services Officer IV Division of Public and Behavioral Health

**FROM:** Antonina Capurro, DMD, MPH, MBA State Dental Health Officer Division of Public and Behavioral Health

# SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT: Association of State and Territorial Dental Directors (ASTDD)

This memorandum requests that the following contract be approved for a retroactive start.

#### The following information is required:

- Name of Vendor: Association of State and Territorial Dental Directors (ASTDD)
- Services to be provided: Development of an oral health survey design, data analysis, provision of data set and reports on the findings in the data.
- Funding Source: Transfer from Radiation Control (BA 3101) CAT 16
- Requested Start Date of Work: July 1, 2017
- Expected execution date of agreement (including BOE): June 22, 2018
- Detailed explanation as to why a retroactive agreement is necessary, including:
- Reason(s) why the agreement was not submitted timely:
  - The project was approved and overseen by the previous Oral Health Program Manager. When they left the program in May 2017, we were not given any information about the formal relationship that was in place with ASTDD. The arrival of an invoice for services performed sparked the need for a retroactive contract.
  - **Outline when the contractual negotiation process began and what factor(s) led to the delay:** The previous Oral Health Program Manager dated the original request to ASTDD as July 29, 2016. The MOU with ASTDD is dated October 18, 2016. We assume that negotiations with ASTDD started prior to July 29, 2016.
  - Describe the impact to the program/services if this work is not started prior to the execution of the agreement:

The work has already been performed in good faith by ASTDD based on the technical assistance request and MOU that they received from the previous Oral Health Program Manager.

• Explain how the program/bureau will prevent future retroactive requests: The State Dental Health Officer and Hygienist will work closely with the contract unit and fiscal to alleviate future retroactive requests.

If you have any questions, please contact Antonina Capurro at (702) 774-2573 or acapurro@health.nv.gov.

cc: Contract Unit

Division of Public and Behavioral Health

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

# I. DESCRIPTION OF CONTRACT

1. Contract Number: 21714

١.	Contract Number.	21714			
				Legal Entity Name:	BOARD OF REGENTS-UNLV
	Agency Name:	DHHS - PUBLIC A HEALTH	ND BEHAVIORAL	Contractor Name:	BOARD OF REGENTS-UNLV
	Agency Code:	406		Address:	School of Dental Medicine
	Appropriation Unit:	3220-16			4505 South Maryland Parkway
	Is budget authority available?:	Yes		City/State/Zip	Las Vegas, NV 89154
	If "No" please expla	ain: Not Applicable		Contact/Phone:	Antonina Capurro, D.M.D., M.P.H., M.B.A., State Dentist 702-774-2573
				Vendor No.:	D35000813
				NV Business ID:	Governmenatl Entity
	To what State Fisca	al Year(s) will the co	ntract be charged?	2019	
	What is the source	of funds that will be	used to pay the contra	ctor? Indicate the pe	rcentage of each funding source if
		e paid by multiple fu	-		Invioal
	General Fu		X Fees	100.00 % Radio	logical
	Federal Fur		Bonds	0.00 %	
	Highway Fu Agency Reference		Other funding	0.00 %	
	0,	#: C 17058			
	Contract start date:				
	<ul> <li>a. Effective upon E Examiner's appr</li> </ul>	Board of <b>No</b> Toval?	or b. other effective	date 02/01/2019	
		DE meeting date	05/2019		
	Retroactive?	Yes			
	If "Yes", please exp	lain			
	Provide a State De NRS 439.272. If thi	ental Hygienist for is is not retroactive	the Division of Public the division will not	and Behavioral He be in compliance w	alth and is necessary to comply with ith NRS and NAC.
3.	Termination Date:	06/30/2019			
	Contract term:	148 days			
4.	Type of contract:	Interlocal A	greement		
	Contract description	n: State Denta	- I Hygieni		
5	Purpose of contract	<b>.</b>			
0.			provide ongoing fun	ding for an academ	ic faculty member to act and serve as
	the State Dental H	ygienist as set for	h in NRS 439.272.		,
6.	NEW CONTRACT				
			or the term of the contr	act is: <b>\$75,140.00</b>	
	Other basis for pay	ment: Upon receipt	of monthly invoice.		
Jl	JSTIFICATION				
7.	What conditions rec	quire that this work t	e done?		
	This contract will fu	nd the position of St	ate of Nevada Dental ł	Hygienist in accordan	ce with NRS 439.272.
8.	Explain why State e	employees in your a	gency or other State ag	<u>gencies are n</u> ot able t	o do this work:
	State employees ar				
9.	Were quotes or pro	posals solicited?		No	
	Was the solicitation Division?	(RFP) done by the	Purchasing	No	
- 1		f vendors that were	solicited to submit prop	osals (include at leas	st three):
	Not Applicable				
tract	#: 21714		Page 1	of 2	DHHS_000049

II.

b. Soliciation Waiver: Not Applicable
c. Why was this contractor chosen in preference to other?
d. Last bid date: Anticipated re-bid date:
10. Does the contract contain any IT components? No
III. OTHER INFORMATION
11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?
Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor
10%
12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

		No	lf	''Yes	", please	explair	า		 								
	Not	Арр	ble						 								
~										_		_					

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State agencies routinely perform services for other agencies - satisfactory

### 14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

- 15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity
- 16. Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:		
Approval Level	User	Signature Date
Budget Account Approval	rmorse	04/09/2019 16:19:58 PM
Division Approval	rmorse	04/09/2019 16:20:01 PM
Department Approval	mwinebar	04/11/2019 10:17:38 AM
Contract Manager Approval	rmorse	04/11/2019 11:33:54 AM
Budget Analyst Approval	afrantz	04/12/2019 07:50:22 AM
BOE Agenda Approval	bwooldri	04/12/2019 11:21:57 AM
BOE Final Approval	mdoya1	05/14/2019 11:46:38 AM

# INTRASTATE INTERLOCAL CONTRACT BETWEEN STATE AGENCIES

A Contract Between the State of Nevada Acting by and Through Its Department of Health and Human Services Division of Public and Behavioral Health

Agency #1 Name:	Bureau of Child, Family & Community Wellness Oral Health Program
Address:	4150 Technology Way, Suite 300
City, State, Zip Code:	Carson City, Nevada 89706
Contact:	Beth Handler, MPH
Phone:	775-684-5902
Email:	bhandler@health.nv.gov

Agency #2 Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine
Address:	4505 South Maryland Parkway
City, State, Zip Code:	Las Vegas, Nevada 89154
Contact:	Antonina Capurro, D.M.D, M.P.H, M.B.A, State Dentist
Phone:	702-774-2573
Email:	702-774-2521
	acapurro@health.nv.gov

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of the State of Nevada; NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

- 1. REQUIRED APPROVAL. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party,
- 2. DEFINITIONS. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.
- 3. CONTRACT TERM. This Contract shall be effective as noted below, unless sooner terminated by either party as specified in *Section 4, Termination.* Contract is subject to Board of Examiners' approval (anticipated to be April 9, 2019).

Effective from:	February 1, 2019	To:	June 30, 2019	
-----------------	------------------	-----	---------------	--

Page 1 of 8

Intrastate Interlocal Template

DHHS 000051

- 4. TERMINATION. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason State and/or federal funding ability to satisfy this Contract is withdrawn, limited, or impaired.
- 5. NOTICE. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.
- 6. INCORPORATED DOCUMENTS. The parties agree that this Contract, inclusive of the following attachments, specifically describes the scope of work. This Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT A: SCOPE OF WORK AND DELIVERABLES
--

7. CONSIDERATION. The parties agree that Contractor will provide the services specified in *Section 6, Incorporated Documents* at a cost as noted below:

\$ 75,140.00		per	Attachment A	
Total Contract or installments paya	ble at:	Monthly		
Total Contract Not to Exceed:	\$ 75,1	40.00		

8. ASSENT. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

- A. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the other party, the State or Umited States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with any applicable regulations and statutes.
- B. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the other party, the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.
- a. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained by each party for a minimum of three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

Page 2 of 8

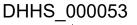
Intrastate Interlocal Template

DHHS 000052

- 10. BREACH; REMEDIES. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs.
- 11. LIMITED LIABILITY. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. To the extent applicable, actual contract damages for any breach shall be limited by NRS 353.260 and NRS 354.626.
- 12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, act of public enemy, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.
- 13. INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.
- 14. INDEPENDENT PUBLIC AGENCIES. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.
- 15. WAIVER OF BREACH. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.
- 16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.
- 17. ASSIGNMENT. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.
- 18. OWNERSHIP OF PROPRIETARY INFORMATION. Unless otherwise provided by law or this Contract, any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.
- 19. PUBLIC RECORDS. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.
- 20. CONFIDENTIALITY. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.
- 21. FEDERAL FUNDING. In the event, federal funds are used for payment of all or part of this Contract, Contractor agrees to comply with all applicable federal laws, regulations and executive orders, including, without limitation the following:

Page 3 of 8

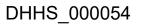
Intrastate Interlocal Template



- A. Contractor certifies, by signing this Contract, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to Executive Orders 12549 and 12689 and Federal Acquisition Regulation subpart 9.4, and any relevant program-specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.
- B. Contractor and its subcontracts shall comply with all terms, conditions, and requirements of the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder, including 28 C.F.R. Section 35, inclusive, and any relevant program-specific regulations.
- C. Contractor and it subcontractors shall comply with the requirements of the Civil Rights Act of 1964 (P.L. 88-352), as amended, the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions.)
- D. Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended—Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
- 22. PROPER AUTHORITY. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).
- 23. GOVERNING LAW; JURISDICTION. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the jurisdiction of the Nevada district courts for enforcement of this Contract.
- 24. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the State of Nevada Office of the Attorney General.

Intrastate Interlocal Template

Page 4 of 8



IN WITNESS WILLREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

Bonrd of Regents, NSEIE also University of Navada, Las Yagas, School of Dagtal Madicing Public Agency #1

Dann, UNLY School of Medicine Knren P. West 0605C

Excentive Director, UNLY Office of Suchsored Projects

Division of Public and Behavioral Health Public Agency #2

Date

Administrator, Division of Public and Behavlored Health Title

for Richard Wildlay, MS

5 .

ï,

-1/-1 Dalo

Signature - Pleyadu Biele Board of Examiner

Approved as to form by:

Allamey Denemi, Sinto of Nevoria Denuly Attainey General Ì

Department of Health and Human Services

Direotor,

Do

Paga S of 8

APPROVED BY BOARD OF EXAMINERS

10 (Dala)

(Uale)

Intrastato Interlocal Templan

Revisud 10/18

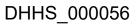
1

# ATTACHMENT A

SCOPE OF WORK AND DELIVERABLES

Intrastate Interlocal Template

Page 6 of 8



# ATTACHMENT A Scope of Work and Deliverables -

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada, Las Vegas, School of Dental Medicine ("SDM"), agrees to the following:

- To provide an academic faculty member, to act and serve as the State Public Health Dental Hygienist to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from February 1, 2019 to June 30, 2019. As set forth in NRS 439.279, the State Public Health Dental Hygienist shall:
  - Work collaboratively with the State Dental Health Officer in carrying out his or her duties.
  - Provide advice and make recommendations to the Advisory Committee and the Division regarding programs in this State for public health dental hygiene.
  - Perform any acts authorized pursuant to NRS 631.287.
  - Will be responsible for coordinating and overseeing Nevada's open-mouth Basic Screening Surveillance Projects.
  - Will be engaged in quality assurance and evaluation activities for the Oral Health Program.
  - Devote all his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- The State Public Health Dental Hygienist will work with the State Dental Health Officer for/to:
  - Oversight and Management of the Advisory Committee on the State Program for Oral Health, including adherence to NRS and open meeting law.
  - Planning, managing, and directing oral health program activities for the benefit of MCAH populations: women of childbearing age, infants, children, and adolescents, including children and youth with special healthcare needs (CYSHCN).
  - Timely and accurate completion and submission of pertinent reports and documents; monitoring program expenditures; and performing other program management activities as required.
  - Maintain and expand liaison roles with agencies and organizations (e.g., Department of Education Office of Early Childhood Learning, NV Home Visiting, child care facilities) throughout Nevada with the purpose of expanding the reach of oral health messaging on decay prevention and good oral health practices to children, CYSHCN, adolescents, and women of childbearing age.
  - Facilitate active public/private partnerships, such as educational institutions, Nevada State Board of Dental Examiners, professional associations, chronic disease coalitions, non-profit organizations, philanthropic organizations, etc. to promote and support good oral health.
  - Collaborate with community partners, dental and medical providers, and the public to increase utilization of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) oral health screenings, prevention services, and deutal treatment.
  - Update the Dental Services Directory of free, reduced cost, and sliding fee dental services throughout Nevada.
  - Provide support to Special Olympics, Special Smiles dental screening/fluoride varnish application at Special Olympics events in Las Vegas and Reno.

Intrastate Interlocal Template

Page 7 of 8

DHHS 000057

• The Division of Public and Behavioral Health will reimburse SDM for cost of salary, fringe benefits, travel, and operating costs as follows:

<u>Category</u>		<u> Total cost</u>	Detailed cost	Details of expected expenses
1. Personnel	\$	57,345.00		
			\$ 43,117.00	State Public Health Dental Hygienist - 100% salary x 5 mo.; \$103,480/12 = \$8,623.33 x 5 mo. = \$43,117
	는 상태가 같다. 4일 및 소송 가격	2017년 1월 11일 - 1933년 일본 1933년 1월 1933년 1월 1933년 1월 1933년 1월	\$ 14,228.00	Fringe Benefits: \$43,117 x 33%
2. Travel	\$	10,383.00		
			\$ 1,600.00 \$ 100.00 \$ 690.00 \$ 1,800.00 \$ 200.00 \$ 140.00 \$ 70.00 \$ 2,178.00 \$ 2,000.00 \$ 660.00 \$ 640.00 \$ 165.00 \$ 140.00	Out-of-State Travel:Airfare: \$800 r/t x 2 tripsBaggage fee: \$50 r/t per person x 2 tripsPer Diem: \$69/day x 5 days x 2 tripsLodging: \$166/day + \$14 Tax = \$180 x 5 nights x 2 tripsGround Transportation: \$100 per r/t x 2 tripsParking: \$14/day x 5 days x 2 tripsMileage: (\$0.58/mile x 60 miles per r/trips) x 2 tripsIn-State Travel:Trips to Esmeralda, Lincoln, Nye, and White PineCounties/SubtotalAirfare: \$400 r/trips air from Las Vegas to Reno x 5 tripsPer Diem: \$66/day x 2 days x 5 tripsLodging: \$114/day + \$14 Tax = \$128 x 1-night x 5 tripsMileage: (\$0.58/mile x 56.85 miles per r/trips) x 5 tripsParking: \$14/day x 2 days x 5 trips
3. Other	\$	581.00		
			\$ 260.00 \$ 12.00 \$ 52.00 \$ 73.00 \$ 184.00	Cell Phone: \$52/mo. x 5 months Long Distance: \$2.50/mo. x 5 months State Phone Line & Voicemail: \$10.39/mo. x 5 months Email: \$14.57/mo. x 5 months Office 365 license: \$184 annual subscription
Total Direct Cost	\$	68,309.00		
4. Indirect Cost	\$	6,831.00		allow for the administration of program activities, based on ate of 10% of total direct costs excluding capital expenditures, w-through funds.
Total Approved Budget	\$	75,140.00		

Intrastate Interlocal Template

Revised 10/18

#### STATE OF NEVADA

STEVE SISOLAK Governor

RICHARD WHITLEY, MS Director



JULIE KOTCHEVAR Administrator

IHSAN AZZAM, PhD., MD Chief Medical Officer

# DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH 4150 Technology Way, Suite 300 Carson City, NV 89706 Telephone: (775) 684-4220 · Fax: (775) 684-4211

April 3, 2019

#### MEMORANDUM

- TO: Aaron Frantz Budget Officer Governor's Finance Office
- THROUGH: Christina Hadwick Administrative Services Officer IV Division of Public and Behavioral Health
- FROM: Rick Morse Division Contract Manager Division of Public and Behavioral Health

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – UNLV-School of Dental Medicine (CETS #21714)

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: University of Nevada Las Vegas School of Dental Medicine
- Services to be provided: Describe services in detail: Provide a State Dental Hygienist for the Division of Public and Behavioral Health and is necessary to comply with NRS 439.272.
- Funding source and expenditure category: BA 3220 CAT 16; Radiological Fees
- Requested start date of work: February 1, 2019
- Expected execution date of agreement (IFC approvals): May 14, 2019
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - o Reason(s) why the agreement was not submitted timely:
    - This contract was delayed due to negotiations between the two State agencies and the type of agreement that would accommodate the unique nature of the project.
  - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: The division would not be in compliance with NRS and NAC to provide dental services to the State.
  - Explain how the program/bureau will prevent future retroactive requests: The division will endeavor to allow more time for negotiations in the future to prevent the need for retroactive requests.

If you have any questions, please contact Rick Morse at (775) 684-5932 or ramorse@health.nv,gov.

- cc: Contract Unit
- Division of Public and Behavioral Health

Revised 4/19

Public Health: Working for a Safer and Healthier Nevada

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

# I. DESCRIPTION OF CONTRACT

1. Contract Number: 21714

١.	Contract Number.	21714			
				Legal Entity Name:	BOARD OF REGENTS-UNLV
	Agency Name:	DHHS - PUBLIC A HEALTH	ND BEHAVIORAL	Contractor Name:	BOARD OF REGENTS-UNLV
	Agency Code:	406		Address:	School of Dental Medicine
	Appropriation Unit:	3220-16			4505 South Maryland Parkway
	Is budget authority available?:	Yes		City/State/Zip	Las Vegas, NV 89154
	If "No" please expla	ain: Not Applicable		Contact/Phone:	Antonina Capurro, D.M.D., M.P.H., M.B.A., State Dentist 702-774-2573
				Vendor No.:	D35000813
				NV Business ID:	Governmenatl Entity
	To what State Fisca	al Year(s) will the co	ntract be charged?	2019	
	What is the source	of funds that will be	used to pay the contra	ctor? Indicate the pe	rcentage of each funding source if
		e paid by multiple fu	-		
	General Fu		X Fees	100.00 % Radio	logical
	Federal Fur	nds 0.00 %	Bonds	0.00 %	
	Highway Fu	inds 0.00 %	Other funding	0.00 %	
	Agency Reference	#: C 17058			
2.	Contract start date:				
	a. Effective upon E Examiner's appr	Soard of <b>No</b> oval?	or b. other effective	date 02/01/2019	)
	Anticipated BC	DE meeting date	05/2019		
	Retroactive?	Yes			
	lf "Yes", please exp	lain			
	Provide a State De	ental Hygienist for t	the Division of Public the division will not	and Behavioral He	alth and is necessary to comply with ith NRS and NAC.
3.	Termination Date:	06/30/2019			
	Contract term:	148 days			
4.	Type of contract:	interlocal Ag	greement		
	Contract description				
F			<b>J J L L</b>		
5.	Purpose of contract		nyovido ongoing fur	ding for an acadom	is faculty member to get and converge
		ygienist as set fort			ic faculty member to act and serve as
6.	NEW CONTRACT				
	The maximum amo	unt of the contract fo	or the term of the contr	act is: \$75,140.00	
	Other basis for pay	ment: Upon receipt o	of monthly invoice.		
J	USTIFICATION				
7	What conditions rec	uire that this work b	e done?		
		-		Hygienist in accordar	ce with NRS 439.272.
8.	Explain why State e	employees in your ag	gency or other State ag	gencies are not able	to do this work:
	State employees ar	e performing this wo	ork.		
9.	Were quotes or pro	posals solicited?		No	
	Was the solicitation Division?	(RFP) done by the	Purchasing	No	
	a. List the names of	f vendors that were s	solicited to submit prop	oosals (include at lea	st three):
	Not Applicable				
trac	t #: 21714		Page 1	of 2	DHHS_000060

II.

b. Soliciation Waiver: Not Applicable
c. Why was this contractor chosen in preference to other?
d. Last bid date: Anticipated re-bid date:
10. Does the contract contain any IT components? No
III. OTHER INFORMATION
11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor? Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor
10%
12 a Is the contractor a current employee of the State of Nevada or will the contracted services he performed by a current

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No	If "Yes"	ain				
Not Applica	able					
			 _	_		

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State agencies routinely perform services for other agencies - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

- 15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity
- 16. Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:		
Approval Level	User	Signature Date
Budget Account Approval	rmorse	04/09/2019 16:19:58 PM
Division Approval	rmorse	04/09/2019 16:20:01 PM
Department Approval	mwinebar	04/11/2019 10:17:38 AM
Contract Manager Approval	rmorse	04/11/2019 11:33:54 AM
Budget Analyst Approval	afrantz	04/12/2019 07:50:22 AM
BOE Agenda Approval	bwooldri	04/12/2019 11:21:57 AM
BOE Final Approval	mdoya1	05/14/2019 11:46:38 AM

# INTRASTATE INTERLOCAL CONTRACT BETWEEN STATE AGENCIES

A Contract Between the State of Nevada Acting by and Through Its Department of Health and Human Services Division of Public and Behavioral Health

Agency #1 Name:	Bureau of Child, Family & Community Wellness Oral Health Program
Address:	4150 Technology Way, Suite 300
City, State, Zip Code:	Carson City, Nevada 89706
Contact:	Beth Handler, MPH
Phone:	775-684-5902
Email:	bhandler@health.nv.gov

Agency #2 Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine
Address:	4505 South Maryland Parkway
City, State, Zip Code:	Las Vegas, Nevada 89154
Contact:	Antonina Capurro, D.M.D, M.P.H, M.B.A, State Dentist
Phone:	702-774-2573
Email:	702-774-2521
	acapurro@health.nv.gov

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of the State of Nevada; NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

- 1. REQUIRED APPROVAL. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party,
- 2. DEFINITIONS. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.
- 3. CONTRACT TERM. This Contract shall be effective as noted below, unless sooner terminated by either party as specified in *Section 4, Termination.* Contract is subject to Board of Examiners' approval (anticipated to be April 9, 2019).

Effective from:February 1, 2019To:June 30, 2019
---

Page 1 of 8

Intrastate Interlocal Template

DHHS 000062

- 4. TERMINATION. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason State and/or federal funding ability to satisfy this Contract is withdrawn, limited, or impaired.
- 5. NOTICE. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.
- 6. INCORPORATED DOCUMENTS. The parties agree that this Contract, inclusive of the following attachments, specifically describes the scope of work. This Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT A: SCOPE OF WORK AND DELIVERABLES
--

7. CONSIDERATION. The parties agree that Contractor will provide the services specified in *Section 6, Incorporated Documents* at a cost as noted below:

\$ 75,140.00			per	Attachment A
Total Contract or installments payable at: Monthly				
Total Contract Not to Exceed: \$75,140.00				

8. ASSENT. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

- A. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the other party, the State or Umited States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with any applicable regulations and statutes.
- B. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the other party, the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.
- a. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained by each party for a minimum of three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

Page 2 of 8

Intrastate Interlocal Template

DHHS 000063

- 10. BREACH; REMEDIES. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs.
- 11. LIMITED LIABILITY. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. To the extent applicable, actual contract damages for any breach shall be limited by NRS 353.260 and NRS 354.626.
- 12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, act of public enemy, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.
- 13. INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.
- 14. INDEPENDENT PUBLIC AGENCIES. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.
- 15. WAIVER OF BREACH. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.
- 16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.
- 17. ASSIGNMENT. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.
- 18. OWNERSHIP OF PROPRIETARY INFORMATION. Unless otherwise provided by law or this Contract, any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.
- 19. PUBLIC RECORDS. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.
- 20. CONFIDENTIALITY. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.
- 21. FEDERAL FUNDING. In the event, federal funds are used for payment of all or part of this Contract, Contractor agrees to comply with all applicable federal laws, regulations and executive orders, including, without limitation the following:

Page 3 of 8

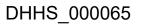
Intrastate Interlocal Template

DHHS 000064

- A. Contractor certifies, by signing this Contract, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to Executive Orders 12549 and 12689 and Federal Acquisition Regulation subpart 9.4, and any relevant program-specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.
- B. Contractor and its subcontracts shall comply with all terms, conditions, and requirements of the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder, including 28 C.F.R. Section 35, inclusive, and any relevant program-specific regulations.
- C. Contractor and it subcontractors shall comply with the requirements of the Civil Rights Act of 1964 (P.L. 88-352), as amended, the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions.)
- D. Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended—Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
- 22. PROPER AUTHORITY. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).
- 23. GOVERNING LAW; JURISDICTION. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the jurisdiction of the Nevada district courts for enforcement of this Contract.
- 24. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the State of Nevada Office of the Attorney General.

Intrastate Interlocal Template

Page 4 of 8



IN WITNESS WILLREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

Bonrd of Regents, NSEIE also University of Navada, Las Yagas, School of Dagtal Madicing Public Agency #1

Dann, UNLY School of Medicine Knren P. West 0605C

Excentive Director, UNLY Office of Suchsored Projects

Division of Public and Behavioral Health Public Agency #2

Date

Administrator, Division of Public and Behavlored Health Title

for Richard Wildlay, MS

5 .

ï,

-1/-1 Dalo

Signature - Pleyadu Biele Board of Examiner

Approved as to form by:

Allamey Denemi, Sinto of Nevoria Denuly Attainey General 0

Department of Health and Human Services

APPROVED BY BOARD OF EXAMINERS

Direotor,

Do

Paga S of 8

10 (Dala)

(Uale)

Intrastato Interlocal Templan

Revisud 10/18

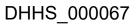
1

# ATTACHMENT A

SCOPE OF WORK AND DELIVERABLES

Intrastate Interlocal Template

Page 6 of 8



# ATTACHMENT A Scope of Work and Deliverables -

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada, Las Vegas, School of Dental Medicine ("SDM"), agrees to the following:

- To provide an academic faculty member, to act and serve as the State Public Health Dental Hygienist to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from February 1, 2019 to June 30, 2019. As set forth in NRS 439.279, the State Public Health Dental Hygienist shall:
  - Work collaboratively with the State Dental Health Officer in carrying out his or her duties.
  - Provide advice and make recommendations to the Advisory Committee and the Division regarding programs in this State for public health dental hygiene.
  - Perform any acts authorized pursuant to NRS 631.287.
  - Will be responsible for coordinating and overseeing Nevada's open-mouth Basic Screening Surveillance Projects.
  - Will be engaged in quality assurance and evaluation activities for the Oral Health Program.
  - Devote all his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- The State Public Health Dental Hygienist will work with the State Dental Health Officer for/to:
  - Oversight and Management of the Advisory Committee on the State Program for Oral Health, including adherence to NRS and open meeting law.
  - Planning, managing, and directing oral health program activities for the benefit of MCAH populations: women of childbearing age, infants, children, and adolescents, including children and youth with special healthcare needs (CYSHCN).
  - Timely and accurate completion and submission of pertinent reports and documents; monitoring program expenditures; and performing other program management activities as required.
  - Maintain and expand liaison roles with agencies and organizations (e.g., Department of Education Office of Early Childhood Learning, NV Home Visiting, child care facilities) throughout Nevada with the purpose of expanding the reach of oral health messaging on decay prevention and good oral health practices to children, CYSHCN, adolescents, and women of childbearing age.
  - Facilitate active public/private partnerships, such as educational institutions, Nevada State Board of Dental Examiners, professional associations, chronic disease coalitions, non-profit organizations, philanthropic organizations, etc. to promote and support good oral health.
  - Collaborate with community partners, dental and medical providers, and the public to increase utilization of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) oral health screenings, prevention services, and deutal treatment.
  - Update the Dental Services Directory of free, reduced cost, and sliding fee dental services throughout Nevada.
  - Provide support to Special Olympics, Special Smiles dental screening/fluoride varnish application at Special Olympics events in Las Vegas and Reno.

Intrastate Interlocal Template

Page 7 of 8

Revised 10/18

• The Division of Public and Behavioral Health will reimburse SDM for cost of salary, fringe benefits, travel, and operating costs as follows:

<u>Category</u>	<u> Total cost</u>	Detailed cost	Details of expected expenses	
1. Personnel	\$ 57,345.00			
		\$ 43,117.00	State Public Health Dental Hygienist - 100% salary x 5 mo.; \$103,480/12 = \$8,623.33 x 5 mo. = \$43,117	
	2017년 1월 11일 - 1934년 일본 1931년 1월 1931년 1월 1931년 1월 1931년 1월	\$ 14,228.00	Fringe Benefits: \$43,117 x 33%	
2. Travel	\$ 10,383.00			
		\$ 1,600.00 \$ 100.00 \$ 690.00 \$ 1,800.00 \$ 200.00 \$ 140.00 \$ 70.00 \$ 2,178.00 \$ 2,000.00 \$ 660.00 \$ 640.00 \$ 165.00 \$ 140.00	Out-of-State Travel:Airfare: \$800 r/t x 2 tripsBaggage fee: \$50 r/t per person x 2 tripsPer Diem: \$69/day x 5 days x 2 tripsLodging: \$166/day + \$14 Tax = \$180 x 5 nights x 2 tripsGround Transportation: \$100 per r/t x 2 tripsParking: \$14/day x 5 days x 2 tripsMileage: (\$0.58/mile x 60 miles per r/trips) x 2 tripsIn-State Travel:Trips to Esmeralda, Lincoln, Nye, and White PineCounties/SubtotalAirfare: \$400 r/trips air from Las Vegas to Reno x 5 tripsPer Diem: \$66/day x 2 days x 5 tripsLodging: \$114/day + \$14 Tax = \$128 x 1-night x 5 tripsMileage: (\$0.58/mile x 56.85 miles per r/trips) x 5 tripsParking: \$14/day x 2 days x 5 trips	
3. Other	\$ 581.00			
		\$ 260.00 \$ 12.00 \$ 52.00 \$ 73.00 \$ 184.00	Cell Phone: \$52/mo. x 5 months Long Distance: \$2.50/mo. x 5 months State Phone Line & Voicemail: \$10.39/mo. x 5 months Email: \$14.57/mo. x 5 months Office 365 license: \$184 annual subscription	
Total Direct Cost	\$ 68,309.00			
4. Indirect Cost	\$ 6,831.00	Indirect charges will allow for the administration of program activities, based on negotiated indirect rate of 10% of total direct costs excluding capital expenditures, sub-awards, and flow-through funds.		
Total Approved Budget	\$ 75,140.00			

Intrastate Interlocal Template

Revised 10/18

#### STATE OF NEVADA

STEVE SISOLAK Governor

RICHARD WHITLEY, MS Director



JULIE KOTCHEVAR Administrator

IHSAN AZZAM, PhD., MD Chief Medical Officer

# DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH 4150 Technology Way, Suite 300 Carson City, NV 89706 Telephone: (775) 684-4220 · Fax: (775) 684-4211

April 3, 2019

#### MEMORANDUM

- TO: Aaron Frantz Budget Officer Governor's Finance Office
- THROUGH: Christina Hadwick Administrative Services Officer IV Division of Public and Behavioral Health
- FROM: Rick Morse Division Contract Manager Division of Public and Behavioral Health

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – UNLV-School of Dental Medicine (CETS #21714)

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: University of Nevada Las Vegas School of Dental Medicine
- Services to be provided: Describe services in detail: Provide a State Dental Hygienist for the Division of Public and Behavioral Health and is necessary to comply with NRS 439.272.
- Funding source and expenditure category: BA 3220 CAT 16; Radiological Fees
- Requested start date of work: February 1, 2019
- Expected execution date of agreement (IFC approvals): May 14, 2019
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - o Reason(s) why the agreement was not submitted timely:
    - This contract was delayed due to negotiations between the two State agencies and the type of agreement that would accommodate the unique nature of the project.
  - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: The division would not be in compliance with NRS and NAC to provide dental services to the State.
  - Explain how the program/bureau will prevent future retroactive requests: The division will endeavor to allow more time for negotiations in the future to prevent the need for retroactive requests.

If you have any questions, please contact Rick Morse at (775) 684-5932 or ramorse@health.nv,gov.

- cc: Contract Unit
- Division of Public and Behavioral Health

Revised 4/19

Public Health: Working for a Safer and Healthier Nevada

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

# I. DESCRIPTION OF CONTRACT

BOE

			Legal Entity Name:	Board of Regents-UNLV
Agency Name:	ncy Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH			Board of Regents-UNLV
Agency Code:	406		Address:	School of Dental Medicine
Appropriation Unit:	3220-16			4505 South Maryland Parkway
Is budget authority available?:	Yes		City/State/Zip	Las Vegas, NV 89154
If "No" please expla	in: Not Applical	ble	Contact/Phone: Vendor No.:	Antonino Capurro, D.M.D 702-774-2573 D35000813
			NV Business ID:	Governmental Entity
To what State Fisca	al Year(s) will the	contract be charged?	2020	and the second
What is the source the contractor will b	of funds that will e paid by multip	be used to pay the cont e funding sources.	ractor? Indicate the pe	rcentage of each funding source if
General Fu		X Fees	100.00 % Radio	logical
Federal Fur	nds 0.00 %	Bonds	0.00 %	5 A 20 A 200
Highway Fu	inds 0.00 %	Other fundin	g 0.00 %	
Agency Reference				
. Contract start date:				
a. Effective upon E Examiner's appl	oard of N	o or b. other effectiv	e date 07/01/2019	)
	DE meeting date	06/2019		
Retroactive?	No			
If "Yes", please exp				
Not Applicable	nam			
		10/		
. Termination Date:	06/30/20	20		
Contract term:	1 year			
. Type of contract:	Interloca	l Agreement		
Contract description	n: Oral Hea	Ith Program		
. Purpose of contract				
This is a new inter faculty member to faculty member to	local agreemer act and serve a act and serve a	t to provide ongoing fu as the State Dental Hea as a State Public Health	unding for the Oral Ho Ith Officer as set fort n Dental Hygienist as	ealth Program, to include an academic h in NRS 439.272 and an academic set forth in NRS 439.279.
NEW CONTRACT				
The maximum amo	unt of the contra	ct for the term of the con	tract is: \$406,272.00	
Payment for service	es will be made a	t the rate of \$406,272.00	0 per Attachment A	
USTIFICATION				
. What conditions red	uire that this wo	rk be done?		
	the state of the s	the local distribution of the second state of	I Health Officer/Hygien	ist in accordance with NRS 439.272 and
Explain why State e	mplovees in vou	r agency or other State :	agencies are not able t	to do this work:
The NRS requires t	hat the State em	the second s	Ith Officer and Hygienis	st; the division does not have employees
Were quotes or pro			No	
Was the solicitation	(RFP) done by	he Purchasing	No	
Division? a. List the names of	vendors that we	re solicited to submit pro	oposals (include at leas	st three):

11.

	Not Applicable		
	b. Soliciation Waiver: Not Applica	ble	
	c. Why was this contractor choser		er?
	d. Last bid date:	Anticipated	d re-bid date:
10	. Does the contract contain any IT o	components?	No
11. (	OTHER INFORMATION		
11	. Is there an Indirect Cost Rate or P	ercentage Paid to th	e Contractor?
		de the Indirect Cost	Rate or Percentage Paid to the Contractor
10	5%		
12	<ul> <li>a. Is the contractor a current empl employee of the State of Nevada?</li> <li>No</li> </ul>	oyee of the State of I	Nevada or will the contracted services be performed by a current
	b. Was the contractor formerly em	ployed by the State of mployed by the State	of Nevada within the last 24 months or will the contracted services be a of Nevada within the last 24 months?
	c. Is the contractor employed by a <b>No</b> If "Yes", please expla	•	cal subdivisions or by any other government?
	Not Applicable		
13.	. Has the contractor ever been enga	-	
	Yes If "Yes", specify when agency has been ver	n and for which agen ified as satisfactory:	icy and indicate if the quality of service provided to the identified
	State agencies routinely perform s	ervices for other age	encies - satisfactory
14.	. Is the contractor currently involved	-	
		de details of the litiga	ation and facts supporting approval of the contract:
	Not Applicable		
15.	. The contractor is not registered wi Governmental Entity	th the Nevada Secre	tary of State's Office because the legal entity is a:
16.	. Not Applicable		
17.	. Not Applicable		
18.	Not Applicable		
19.	Agency Field Contract Monitor:		
20.	Contract Status: Contract Approvals:		
	Approval Level	User	Signature Date
	Budget Account Approval	rmorse	05/03/2019 11:28:21 AM
	Division Approval Department Approval	rmorse mwinebar	05/03/2019 11:28:24 AM 05/03/2019 15:49:38 PM
	Contract Manager Approval	rmorse	05/06/2019 13:17:28 PM
	Budget Analyst Approval	afrantz	05/14/2019 12:10:10 PM

BOE Agenda Approval **BOE** Final Approval

afrantz bwooldri mdoya1

05/14/2019 12:10:10 PM 05/14/2019 14:23:12 PM 06/13/2019 11:50:57 AM

CETS# 21894

RFP# N/A

AGENCY REF# C 17117

### INTRASTATE INTERLOCAL CONTRACT BETWEEN STATE AGENCIES

A Contract Between the State of Nevada Acting by and Through Its Department of Health and Human Services Division of Public and Behavioral Health

Agency #1 Name:	Bureau of Child, Family & Community Wellness Oral Health Program
Address:	4150 Technology Way, Suite 300
City, State, Zip Code:	Carson City, Nevada 89706
Contact:	Beth Handler, MPH
Phone:	775-684-5902
Email:	bhandler@health.nv.gov

Agency #2 Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine
Address:	4505 South Maryland Parkway
City, State, Zip Code:	Las Vegas, Nevada 89154
Contact:	Antonina Capurro, D.M.D, M.P.H, M.B.A, State Dentist
Phone:	702-774-2573
Email:	acapurro@health.nv.gov

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of the State of Nevada; NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. REQUIRED APPROVAL. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. DEFINITIONS. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.

3. CONTRACT TERM. This Contract shall be effective as noted below, unless sooner terminated by either party as specified in *Section 4, Termination*. Contract is subject to Board of Examiners' approval (anticipated to be June 11, 2019).

Effective from:	July 1, 2019	To:	June 30, 2020	
the second se	Comment of the second se			

Page 1 of 10

Intrastate Interlocal Template

DHHS 000073

CETS# 21894	
RFP# N/A	
AGENCY REF# C 17117	

4. TERMINATION. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason State and/or federal funding ability to satisfy this Contract is withdrawn, limited, or impaired.

5. NOTICE. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.

**6. INCORPORATED DOCUMENTS.** The parties agree that this Contract, inclusive of the following attachments, specifically describes the scope of work. This Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT A:	SCOPE OF WORK AND DELIVERABLES	

7. CONSIDERATION. The parties agree that Contractor will provide the services specified in *Section 6, Incorporated Documents* at a cost as noted below:

\$ 406,272			per	Attachment A	
Total Contract or installments paya	ble at:	Monthly			
Total Contract Not to Exceed:	\$ 406	,272			

8. ASSENT. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

A. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the other party, the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with any applicable regulations and statutes.

B.Inspection & Audit. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the other party, the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.

Page 2 of 10

Revised 4/19

Intrastate Interlocal Template

DHHS 000074

CETS# 21894	
RFP# N/A	
AGENCY REF# C 17117	

a. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained by each party for a minimum of three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

- 10. BREACH; REMEDIES. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs.
- 11. LIMITED LIABILITY. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. To the extent applicable, actual contract damages for any breach shall be limited by NRS 353.260 and NRS 354.626.
- 12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, act of public enemy, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.
- 13.INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.
- 14. INDEPENDENT PUBLIC AGENCIES. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.
- 15. WAIVER OF BREACH. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.
- 16. SEVERABILITY. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.
- 17. ASSIGNMENT. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.
- 18. OWNERSHIP OF PROPRIETARY INFORMATION. Unless otherwise provided by law or this Contract, any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.
- **19. PUBLIC RECORDS.** Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.

Page 3 of 10

Intrastate Interlocal Template

DHHS 000075

CETS# 21894
RFP# N/A
AGENCY REF# C 17117

20. CONFIDENTIALITY. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.

21. FEDERAL FUNDING. In the event, federal funds are used for payment of all or part of this Contract, Contractor agrees to comply with all applicable federal laws, regulations and executive orders, including, without limitation the following:

A. Contractor certifies, by signing this Contract, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to Executive Orders 12549 and 12689 and Federal Acquisition Regulation subpart 9.4, and any relevant program-specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.

B. Contractor and its subcontracts shall comply with all terms, conditions, and requirements of the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder, including 28 C.F.R. Section 35, inclusive, and any relevant program-specific regulations.

C.Contractor and it subcontractors shall comply with the requirements of the Civil Rights Act of 1964 (P.L. 88-352), as amended, the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions.)

D. Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended—Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).

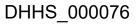
22. PROPER AUTHORITY. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).

23. GOVERNING LAW; JURISDICTION. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the jurisdiction of the Nevada district courts for enforcement of this Contract.

24. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the State of Nevada Office of the Attorney General.

Page 4 of 10

Intrastate Interlocal Template



CETS#	21894	
RFP# N	i/A	-
AGEN	CY REF# C 17117	-

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

Title

Board of Regents, NSHE obo University of Nevada, Las Vegas, School of Dental Medicine

Public Agency 5/2/19 L'ori C L 30.2019 Dr. David Cappelli Date

Division of Public and Behavioral Health Public Agency #1

for Lisa Sherych Date

for Richard Whitley, MS Date

Signature - Nevada State Board of Examiners

Approved as to foon by:

Deputy Momey General for Attomey General, State of Nevada

Interim Administrator, <u>Division of Public and Behavioral Health</u> Title

Executive Director, Office of Spionsbred Programs

Authorized Principal Investigator

Director, <u>Department of Health and Human Services</u> Title

APPROVED BY BOARD OF EXAMINERS

(Date)

(Date)

Page 5 of 10

Intrastate Interlocal Template

DHHS\_000077

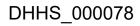
CETS# 21894
RFP# N/A
AGENCY REF# C 17117

# ATTACHMENT A

SCOPE OF WORK AND DELIVERABLES

Page 6 of 10

Intrastate Interlocal Template



CETS# 21894	
RFP# N/A	
AGENCY REF# C 17117	

## ATTACHMENT A Scope of Work and Deliverables

The purpose of the Oral Health Program is to increase public knowledge and raise public awareness of the importance of oral health and to educate the residents of this State on matters relating to oral health, including, without limitation:

- Proper oral hygiene;
- The factors that increase the risk of a person developing oral diseases; and
- The prevention and treatment of oral diseases.

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada, Las Vegas, School of Dental Medicine ("SDM"), agrees to the following:

- 1. To provide an academic faculty member, to act and serve as a State Dental Health Officer to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from July 1, 2019 to June 30, 2020. As set forth in NRS 439. 272, the State Dental Health Officer shall:
  - Provide the Chief Medical Officer with a monthly report on the program's activities no later than the 15<sup>th</sup> of each month;
  - Determine the needs of the residents of this State for public dental health;
  - Provide the Advisory Committee and the Division with advice regarding public dental health;
  - Make recommendations to the Advisory Committee, the Division and the Legislature regarding programs in this State for public dental health;
  - Work collaboratively with the State Public Health Dental Hygienist; and,
  - Seek such information and advice from the Advisory Committee or from any dental education program in this State, including any such programs of the Nevada System of Higher Education, as necessary to carry out his or her duties.
  - Work closely with the Division of Health Care Financing and Policy to promote utilization of Medicaid and Nevada Check Up covered services
  - Devote all of his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- 2. To provide an academic faculty member, to act and serve as a State Public Health Dental Hygienist to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from July 1, 2019 to June 30, 2020. As set forth in NRS 439. 279, the State Public Health Dental Hygienist shall:
  - Work collaboratively with the State Dental Health Officer in carrying out his or her duties;
  - Provide advice and make recommendations to the Advisory Committee and the Division regarding programs in this State for public health dental hygiene;
  - Perform any acts authorized pursuant to NRS 631.287
  - Will be responsible for coordinating and overseeing Nevada's Open-Mouth Basic Screening Surveillance Projects and creating the Oral Health Program Surveillance Plan.
  - Will be engaged in quality assurance and evaluation activities for the Oral Health Program
  - Devote all of his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.

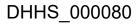
Page 7 of 10

Intrastate Interlocal Template

DHHS 000079

- 3. The State Public Dental Health Officer and the State Public Dental Hygienist will work together to/for:
  - Oversight and Management of the *Advisory Committee on the State Program for Oral Health*, including adherence to NRS and open meeting law.
  - Timely and accurate completion and submission of pertinent reports and documents; monitoring program expenditures; and performing other program management activities as required.
  - Maintain and expand liaison roles with agencies and organizations throughout Nevada with the purpose of expanding the reach of oral health messaging on decay prevention and good oral health practices to rural, underserved, and vulnerable populations.
  - Facilitate active public/private partnerships, such as educational institutions, Nevada State Board of Dental Examiners, professional associations, chronic disease coalitions, non-profit organizations, philanthropic organizations, etc. to promote and support good oral health.
  - Collaborate with community partners, dental and medical providers, and the public to increase utilization of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) oral health screenings, prevention services, and dental treatment.
  - Update the Dental Services Directory of free, reduced cost, and sliding fee dental services throughout Nevada.
  - Provide support to Special Olympics, Special Smiles dental screening/fluoride varnish application at Special Olympics events in Las Vegas and Reno.
- 4. The Division of Public and Behavioral Health will continue to reimburse SDM for the cost of salary, plus fringe benefits for the State Dental Health Officer and the State Public Health Dental Hygienist. Furthermore, the Division of Public and Behavioral Health has provided funding within this contract for the State Dental Health Officer and State Public Health Dental Hygienist travel expenditures and Oral Health Program equipment and supplies. A Division of Public and Behavioral Health Dental Hygienist. SDM will provide programmatic storage space and separate furnished offices for both the State Dental Health Officer and State Public Health Dental Hygienist.

Page 8 of 10



CETS# 21894	_
RFP# N/A	
AGENCY REF# C 17117	

The Division of Public and Behavioral Health will reimburse SDM for cost of salary, fringe benefits, travel, and operating costs as follows:

Personnel and Fringe	by particular			Total:	\$363,845
	<u>Annual</u> Salary	Fringe at 33%	<u>% of</u> Time	<u>Months</u>	Amount Requested
State Dental Health Officer	\$170,088	\$56,129	100%	12	\$226,217
State Public Health Dental Hygienist	\$103,480	\$34,148	100%	12	\$137,628
				<u>Total Personnel</u>	\$273,568
				Total Fringe	\$90,277
Travel		And and a	-	Total:	\$13,538
Out-of- State Travel	a transmission	\$9,103			
Airfare: \$800 r/t x 3 trip x 1 staff	\$2,400				
Baggage fee: \$50 r/t per person x 3 trip x 1 staff	\$150				
Per Diem: \$69/day x 5 days x 3 trip x 1 staff	\$1,035				
Lodging: $166/day + 14 Tax = 180 x 5$ nights x 3 trip x 1 staff	\$2,700			-	
Ground Transportation: \$100 per r/trip x 3 trip x 1 staff	\$300				
Parking: \$14/day x 5 days x 3 trip x 1 staff	\$210				
Mileage: (\$0.58/mile x 56.5 miles per r/trip) x 3 trip x 1 staff	\$98				
Symposium Registration (NOHC-600, MSDA-455, AIDPH-100)	\$2,210				
In-State Travel					
Reno to Las Vegas/ Las Vegas to Reno		\$4,435			
Airfare: \$400 r/trip air from Las Vegas to Reno x 3 trips x 2 staff	\$2,400				
Per Diem: \$55/day x 2 days x 3 trips x 2 staff	\$660				
Lodging: $94/day + 14 Tax = 108 x 1$ nights x 3 trips x 2 staff	\$648				
Mileage: (\$0.58/mile x 60 miles per r/trip) x 3 trips x 2 staff	\$209				
Parking: \$14/day x 2 days x 3 trips x 2 staff	\$168				
Symposium Registration (NPHA- \$175 x 2)	\$350				

Page 9 of 10

Intrastate Interlocal Template

Revised 4/19

DHHS\_000081

CETS# 21894
RFP# N/A
AGENCY REF# C 17117

Travel Justification: These funds will be used to cover the costs of in-state travel for the purposes of program oversight and management, including provider/sub-grantee visits, technical assistance sessions, professional and public education, and for travel expenses incurred for these visits. In-state travel also includes attendance at the Nevada Public Health Association Annual Conference, Annual state-wide Special Olympics, Special Smiles annual event, TMCC and CSN graduation ceremony and standing OHP presentations, bi-annual water fluoridation meetings, annual RAM event, and two trips to Carson City for the NDHA and NDA Legislative Days. Out-of-state travel includes participation in the annual National Oral Health Conference, and Medicaid State Dental Association.

Materials and Supplies		Total:	\$2,863
General office supplies: \$50/FTE/mo x 2 FTE x 12 months	\$1,200		
Oral Hygiene supplies and material for outreach events including oral hygiene kits	\$1,080		
Oral health educational handouts and patient materials	\$583		
Justification: General office supply costs inclu- tape, pens, folders, etc., as well as toner cartric kits (patient hygiene bags) are \$1.80 each. Other			ous outreach projects, oral hygien
	# 200	Total:	\$6,680
Printing Services: \$50/mo. x 12 months	\$600		
Postage: \$50/mo. x 12 months	\$600		
Conference Calls: \$50/mo. x 12 months	\$600	 	
Long Distance: \$2.50/mo. x 12 months	\$30		
Email: \$15/mo. x 12 months x 2 FTE	\$360		
Office 365 license: \$500 annual subscription x 2 FTE	\$1,000		
Professional National and State Memberships (NPHA, MSDA, ASTDD,	\$3,490		
NDA, NDHA, AAPHD) TOTAL DIRECT CHARGES for SFY 20			\$386,926

TOTAL BUDGET	 Total:	\$406,272
	and the second se	

Page 10 of 10

DHHS 000082

## CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT 1 Amendment 1. Contract Number: 21894 Number: Board of Regents-UNLV Legal Entity Name: **DHHS - PUBLIC AND BEHAVIORAL Board of Regents-UNLV** Contractor Name: Agency Name: HEALTH School of Dental Medicine 406 Address: Agency Code: 4505 South Maryland Parkway Appropriation Unit: 3220-16 Las Vegas, NV 89154 City/State/Zip Is budget authority Yes available?: Contact/Phone: Antonino Capurro, D.M.D 702-774-2573 If "No" please explain: Not Applicable D35000813 Vendor No.: NV Business ID: **Governmental Entity** To what State Fiscal Year(s) will the contract be charged? 2020 What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources. 93.10 % Radiation Control Fees **General Funds** 0.00 % x Fees 6.90 % Bonds 0.00 % X Federal Funds 0.00 % **Highway Funds** 0.00 % Other funding C 17117 Agency Reference #: 2. Contract start date: a. Effective upon Board of or b. other effective date 07/01/2019 No Examiner's approval? 05/2020 Anticipated BOE meeting date **Retroactive?** No If "Yes", please explain Not Applicable 06/30/2020 3. Previously Approved **Termination Date:** Contract term: 1 year Interlocal Agreement Type of contract: Contract description: **Oral Health Program** 5. Purpose of contract: This is the first amendment to the original interlocal agreement which provides funding for the Oral Health Program, the State Dental Health Officer as set forth in NRS 439.272 and the State Public Health Dental Hygienist as set forth in NRS 439.279. This amendment decreases the maximum amount from \$406,272 to \$393,489 due to revising the detailed budget. This amendment also revises Attachment A -Scope of Work and Deliverable's to provide administrative and technical support to the Oral Health Program. 6. CONTRACT AMENDMENT Action Accum \$ Trans \$ Info Accum \$ Agenda \$406,272.00 \$406,272.00 \$406,272.00 Yes - Action 1. The max amount of the original contract: -\$12,783.00 Yes - Info 2. Amount of current amendment -\$12,783.00 -\$12,783.00 (#1): 3. \$393,489,00 New maximum contract

## II. JUSTIFICATION

amount:

7. What conditions require that this work be done?

This contract will fund the positions of the State of Nevada Dental Heal	th Officer and State Public Health Dental Hygienist in
accordance with NRS 439.272 and NRS 439.279.	DHHS 000083

8.		employ a State Dental H	ate agencies are not able to do this work: lealth Officer and Hygienist; the division does not have employees ns.
q	Were quotes or proposals solicite	a second s	No
5.	Was the solicitation (RFP) done b Division?		No
		were solicited to submit	proposals (include at least three):
	Not Applicable		
	b. Soliciation Waiver: Not Applic	able	
	c. Why was this contractor chose	n in preference to other	?
	d. Last bid date:	Anticipated re	e-bid date:
0.	Does the contract contain any IT	components?	No
1.	Is there an Indirect Cost Rate or I		Contractor? ate or Percentage Paid to the Contractor
	Not Applicable		
2.	a. Is the contractor a current emp employee of the State of Nevada	loyee of the State of Ne ?	evada or will the contracted services be performed by a current
	No		
	c. Is the contractor employed by a		I subdivisions or by any other government?
	Not Applicable		
3.	Has the contractor ever been eng	aged under contract by	any State agency?
	Yes If "Yes", specify whe	한 가슴은 동안에서 잘 위해 앉아서 집에 걸음을 했다.	and indicate if the quality of service provided to the identified
	These services have been provid	ed since 2016. State ag	encies routinely perform services for other agencies - satisfactory
4.	Is the contractor currently involve	d in litigation with the St	ate of Nevada?
	이 이렇게 가지 않는 것 같아요. 이는 생활은 것 같은 것 가지 않는 것 같아요. 가지 않는 것 같아요. 가		on and facts supporting approval of the contract:
	Not Applicable		
5.	The contractor is not registered w	vith the Nevada Secreta	ry of State's Office because the legal entity is a:
6.	Not Applicable		
7.	Not Applicable		
	Not Applicable		
	Agency Field Contract Monitor:		
	Contract Status:		
	Contract Approvals:		
	Approval Level	User	Signature Date
	Budget Account Approval	ttilto1	03/04/2020 14:57:01 PM

**Division Approval** 04/07/2020 16:32:39 PM ttilto1 04/08/2020 16:21:54 PM Department Approval mwinebar

## AMENDMENT #1

to

## INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

Between the State of Nevada Acting by and Through its Department of Health and Human Services Division of Public and Behavioral Health

Agency #1 Name:	Oral Health Program; Chronic Disease Prevention and Health Promotion Section (CDPHP); Bureau of Child, Family and Community Wellness (CFCW)
Address:	4150 Technology Way, Suite 300
City, State, Zip Code:	Carson City, NV 89706-2009
Contact:	Julia Peek
Phone:	775-684-5902
Email:	jpeek@health.nv.gov

Agency #2 Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine
Address:	4505 South Maryland Parkway
City, State, Zip Code:	Las Vegas, Nevada 89154
Contact:	Antonina Capurro, D.M.D, M.P.H, M.B.A, State Dentist
Phone:	702-774-2573
Email:	acapurro@health.nv.gov

- <u>AMENDMENTS</u>. For and in consideration of mutual promises and/or their valuable considerations, all
  provisions of the original contract dated <u>June 13, 2019</u> attached hereto as Exhibit A, remain in full force and
  effect with the exception of the following:
  - A. This amendment revises funding allocation; moving funding from personnel savings and distributing it into materials/supplies and other. Funding into other will be used to hire specialized contract staff to support the needs and duties for the Oral Health Program. This amendment also revises the scope of work and decreases the maximum amount from \$406,272 to \$393,489 due to the continued need for these services.

#### Current Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that this Contract, inclusive of the following attachments, specifically describes the scope of work. This Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT A:	SCOPE OF WORK AND DELIVERABLES
---------------	--------------------------------

7. **CONSIDERATION.** The parties agree that Contractor will provide the services specified in *Section 6, Incorporated Documents* at a cost as noted below:

\$ 406,272		per	Attachment A		
Total Contract or installments pay	able at:	Monthly			
Total Contract Not to Exceed:	\$ 406	,272			

#### Amended Contract Language:

 INCORPORATED DOCUMENTS. The following are attached hereto, incorporated by reference herein and made a part of this amended contract:

ATTACHMENT A:	SCOPE OF WORK AND DELIVERABLES revised on 1/21/2020
EXHIBIT A:	Original contract and all previous amendments

7. CONSIDERATION. The parties agree that Contractor will provide the services specified in *Section 6*, *Incorporated Documents* at a cost as noted below:

\$393,489		per	Attachment A		
Total Contract or installments pay	able at:	Monthly			
Total Contract Not to Exceed:	\$393,	489			

2. **REQUIRED APPROVAL**. This amendment to the original contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

THIS SECTION INTENTIONALLY LEFT BLANK

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

> 02/20/2020 Date

Board of Regents, NSHE obo University of Nevada, Las Vegas, School of Dental Medicine Public Agency #2

ccone

Dr. David Cappelli

đ

02/14/2020 Date

Principal Investigator Title

Title

**Division of Public and Behavioral Health** 

Public Agency #1

Administrator, Division of Public and Bchavioral Health for Lisa Sherych Date Title

for Richard Whitley, MS Date

Director, Department of Health and Human Services Title

Executive Director, Office of Sponsored Programs

for Susan Brown

APPROVED BY BOARD OF EXAMINERS

Signature - Board of Examiners

On:

Date

Approved as to form by:

On: Date

Deputy Attorney General for Attorney General

# ATTACHMENT A

## SCOPE OF WORK AND DELIVERABLES

## ATTACHMENT A Scope of Work and Deliverables Revised on 1/21/2020

The purpose of the Oral Health Program is to increase public knowledge and raise public awareness of the importance of oral health and to educate the residents of this State on matters relating to oral health, including, without limitation:

- · Proper oral hygiene;
- · The factors that increase the risk of a person developing oral diseases; and
- · The prevention and treatment of oral diseases.

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada, Las Vegas, School of Dental Medicine ("SDM"), agrees to the following:

- To provide an academic faculty member, to act and serve as a State Dental Health Officer to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from July I, 2019 to June 30, 2020. As set forth in NRS 439. 272, the State Dental Health Officer shall:
  - Provide the Chief Medical Officer with a monthly report on the program's activities no later than the 15<sup>th</sup> of each month;
  - Determine the needs of the residents of this State for public dental health;
  - Provide the Advisory Committee and the Division with advice regarding public dental health;
  - Make recommendations to the Advisory Committee, the Division and the Legislature regarding programs in this State for public dental health;
  - · Work collaboratively with the State Public Health Dental Hygienist; and,
  - Seek such information and advice from the Advisory Committee or from any dental education program in this State, including any such programs of the Nevada System of Higher Education, as necessary to carry out his or her duties.
  - Work closely with the Division of Health Care Financing and Policy to promote utilization of Medicaid and Nevada Check Up covered services
  - Devote all of his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- 2. To provide contract staff to fulfill the duties and responsibilities previously assigned to the State Public Health Dental Hygienist to

#### AGENCY REF# C 17117

## the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from January 1, 2020 to June 30, 2020. As set forth in NRS 439. 279, the State Public Health Dental Hygienist shall:

- Work collaboratively with the State Dental Health Officer in carrying out his or her duties;
- Provide advice and make recommendations to the Advisory Committee and the Division regarding programs in this State for public health dental hygiene;
- Provide administrative and technical support to the Oral Health Program
- Perform clinical dental services as authorized by NRS to fulfil projects and contract deliverables of the Oral Health Program.
- Will be responsible for coordinating and overseeing Nevada's Open-Mouth Basic Screening Surveillance Projects and creating the Oral Health Program Surveillance Plan.
- Will be engaged in quality assurance and evaluation activities for the Oral Health Program
- Devote all his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- 3. The State Public Dental Health Officer and the contract staff employed to fulfill the responsibilities of the State Public Dental Hygienist will work together to/for:
  - Oversight and Management of the Advisory Committee on the State Program for Oral Health, including adherence to NRS and open meeting law.
  - Timely and accurate completion and submission of pertinent reports and documents; monitoring program expenditures; and performing other program management activities as required.
  - Facilitate active public/private partnerships, such as educational institutions, Nevada State Board of Dental Examiners, professional associations, chronic disease coalitions, non-profit organizations, philanthropic organizations, etc. to promote and support good oral health.
  - Maintain and expand liaison roles with agencies and organizations throughout Nevada with the purpose of expanding the reach of oral health messaging on decay prevention and good oral health practices to rural, underserved, and vulnerable populations
  - Collaborate with community partners, dental and medical providers, and the public to increase utilization of Early and Periodic Screening,

Diagnosis, and Treatment (EPSDT) oral health screenings, prevention services, and dental treatment.

- Update the Dental Services Directory of free, reduced cost, and sliding fee dental services throughout Nevada.
- Provide support to Special Olympics, Special Smiles dental screening/fluoride varnish application at Special Olympics events in Las Vegas and Reno.
- Support the Oral Health Program in identifying opportunities for policy changes to improve MCAH and ID/DD population access to oral health care.
- Identify and pursue funding mechanism for sustainability of the Nevada Oral Health Program.
- 4. The Division of Public and Behavioral Health will continue to reimburse SDM for the cost of salary, plus fringe benefits for the State Dental Health Officer and the hourly and administrative cost of contract staff to fulfill the role of the State Public Health Dental Hygienist. Furthermore, the Division of Public and Behavioral Health has provided funding within this contract for the State Dental Health Officer and State Public Health Dental Hygienist contract staff travel expenditures and Oral Health Program equipment and supplies. A Division of Public and Behavioral Health laptop will be provided for use by the State Dental Health Officer. SDM will provide programmatic storage space and separate furnished offices for both the State Dental Health Officer and the contract staff employed to fulfill the responsibilities of the State Public Health Dental Hygienist at no cost.

The Division of Public and Behavioral Health will reimburse SDM for cost of salary, fringe benefits, travel, and operating costs as follows:

			1		<b>Original Amount</b>	Amendment#1	<b>Revised Amount</b>
Personnel and Fringe				Total:	\$363,845	\$ (137,689)	\$226,156
	<u>Annual</u> <u>Salary</u>	Fringe at 33%	<u>% of</u> <u>Time</u>	Months			_
State Dental Health Officer	\$170,088	\$56,129	100%	12	\$226,217	(\$5,443)	\$220,774
State Public Health Dental Hygienist	\$103,480	\$34,148	100%	12	\$137,628	(\$132,246)	\$5,382
				Total Personnel	\$273,568	(\$70,295)	\$203,273
*Fringe amended to 29.8%				Total Fringe	\$90,277	(\$67,394)	\$22,883
					Original Amount	Amendment#1	Revised Amount
Travel				Total:	\$13,538	\$8,194	\$21,732
Out-of- State Travel		\$9,103					
Airfare: \$800 r/t x 3 trip x 1 staff	\$2,400						
Baggage fee: \$50 r/t per person x 3 trip x 1 staff	\$150						
Per Diem: \$69/day x 5 days x 3 trip x 1 staff	\$1,035						
Lodging: \$166/day + \$14 Tax = \$180 x 5 nights x 3 trip x 1 staff	\$2,700						
Ground Transportation: \$100 per r/trip x 3 trip x 1 staff	\$300						
Parking: \$14/day x 5 days x 3 trip x 1 staff	\$210						
Mileage: (\$0.58/mile x 56.5 miles per r/trip) x 3 trip x 1 staff	\$98						
Symposium Registration (NOHC-600, MSDA-455, AIDPH-100)	\$2,210						
In-State Travel							
Reno to Las Vegas/ Las Vegas to Reno		\$4,435					4. i
Airfare: \$400 r/trip air from Las Vegas to Reno x 3 trips x 2 staff	\$2,400						
Per Diem: \$55/day x 2 days x 3 trips x 2 staff	\$660						1
Lodging: \$94/day + \$14 Tax = \$108 x 1-night x 3 trips x 2 staff	\$648						
Mileage: (\$0.58/mile x 60 miles per r/trip) x 3 trips x 2 staff	\$209						
Parking: \$14/day x 2 days x 3 trips x 2 staff	\$168						
Symposium Registration (NPHA- \$175 x 2)	\$350			117	1.1		

#### AGENCY REF# C 17117

In-State Travel for Contractors	
Reno to Las Vegas/ Las Vegas to Reno and Rural Nevada	
Airfare: \$400 r/trip air from Las Vegas to Reno x 6 trips x 2 staff	\$4,800
Per Diem: \$55/day x 2 days x 6 trips x 2 staff	\$1,320
Lodging: \$96/day + \$14 Tax = \$108 x 1 night's x 6 trips x 2 staff	\$1,320
Mileage: (\$0.57.5/mile x 60 miles per r/trip) x 6 trips x 2 staff	\$418
Parking: \$14/day x 2 days x 6 trips x 2 staff	\$336

Travel Justification: These funds will be used to cover the costs of in-state travel for the purposes of program oversight and management, including provider/sub-grantee visits, technical assistance sessions, professional and public education, and for travel expenses incurred for these visits. In-state travel also includes attendance at the Nevada Public Health Association Annual Conference, Annual state-wide Special Olympics, Special Smiles annual event, TMCC and CSN graduation ceremony and standing OHP presentations, bi-annual water fluoridation meetings, annual RAM event, and two trips to Carson City for the NDHA and NDA Legislative Days. Out-of-state travel includes participation in the annual National Oral Health Conference, and Medicaid State Dental Association.

			Original Amount	Amendment#1	<b>Revised Amount</b>
Materials and Supplies		Total:	\$2,863	\$19,104	\$21,967
General office supplies: \$50/FTE/mo x 2 FTE x 12 months	\$1,200				
Oral Hygiene supplies and material for outreach events including oral hygiene kits	\$1,080			\$1,791	
Oral health educational handouts and patient materials	\$583			\$17,313	

Justification: General office supply costs include standard office essentials: (e.g., binders, file folders, business card paper, package tape, pens, folders, etc., as well as toner cartridges for printers). Based on experience with previous outreach projects, oral hygiene kits (patient hygiene bags) are \$1.80 each.

2				Original Amount	Amendment#1	<b>Revised Amount</b>
	Other		Total:	\$6,680	\$98,216	\$104,896
)	Printing Services: \$50/mo. x 12 months	\$600				
3	Postage: \$50/mo. x 12 months	\$600				
3	Conference Calls: \$50/mo. x 12 months	\$600				
3	Long Distance: \$2.50/mo. x 12 months	\$30				
	Email: \$15/mo. x 12 months x 2 FTE	\$360				
	Office 365 license: \$500 annual subscription x 2 FTE	\$1,000				

ETS#	21894		
		_	

AGENCY REF# C 17117

(

Professional National and State Memberships (NPHA, MSDA, ASTDD, NDA, NDHA, AAPHD)	\$3,490	
Contract Staff: administrative assistant at \$26/hour x 40hour/week x 22 weeks		\$22,880
Contract Staff: licensed dental hygienists at no more than \$60/hour + 37% administrative fee x 40hour/week x 22 weeks		\$72,336
Contract staff: professional specialist ie biostatistician, epidemiologist, and/or medical/dental consultant at no more than \$50/hour x 60 hours		\$3,000

Justification: Contract staff has been included to provide general and specialized support for the Oral Health Program. Personnel may include contract dental hygienists to fill the vacant State Public Health Dental Hygiene position, administrative staff, and others with professional specialties that are necessary to complete Oral Health Program projects and contractual deliverables. Note: Two contracted staff at six months equals one FTE for the year.

			Original Amount	Amendment#1	<b>Revised Amount</b>
TOTAL DIRECT CHARGES for SFY 20	Total	:	\$386,926	(\$12,175)	\$374,751
Indirect Charges			\$19,346	(\$609)	\$18,738

CETS# 21894 RFP# N/A AGENCY REF# C 17117

#### INTRASTATE INTERLOCAL CONTRACT BETWEEN STATE AGENCIES

A Contract Between the State of Nevada Acting by and Through Its Department of Health and Human Services Division of Public and Behavioral Health

Agency #1 Name:	Bureau of Child, Family & Community Wellness Oral Health Program	
Address:	4150 Technology Way, Suite 300	
City, State, Zip Code:	Carson City, Nevada 89706	
Contact:	Beth Handler, MPH	
Phone:	775-684-5902	
Email:	bhandler@health.nv.gov	

Agency #2 Name:	Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine
Address:	4505 South Maryland Parkway
City, State, Zip Code:	Las Vegas, Nevada 89154
Contact:	Antonina Capurro, D.M.D, M.P.H, M.B.A, State Dentist
Phone:	702-774-2573
Email:	acapurro@health.nv.gov

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of the State of Nevada; NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. REQUIRED APPROVAL. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. DEFINITIONS. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.

3. CONTRACT TERM. This Contract shall be effective as noted below, unless sooner terminated by either party as specified in Section 4, Termination. Contract is subject to Board of Examiners' approval (anticipated to be June 11, 2019).

Effective from:   July 1, 2019   To:   June 30, 2020	Effective from:	July 1, 2019	To: June 30, 2020
--	-----------------	--------------	-------------------

Page 1 of 10

Intrastate Interlocal Template

Revised 4/19

DHHS\_000095

CETS# 21894	
RFP# N/A	-
AGENCY REF# C 17117	

4. TERMINATION. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason State and/or federal funding ability to satisfy this Contract is withdrawn, limited, or impaired.

5. NOTICE. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.

6. INCORPORATED DOCUMENTS. The parties agree that this Contract, inclusive of the following attachments, specifically describes the scope of work. This Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT A:	SCOPE OF WORK AND DELIVERABLES
The second se	

7. CONSIDERATION. The parties agree that Contractor will provide the services specified in Section 6, Incorporated Documents at a cost as noted below:

\$ 406,272			per	Attachment A	
Total Contract or installments pay	able at:	Monthly			
Total Contract Not to Exceed:	\$ 406	,272			

8. ASSENT. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

A. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the other party, the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with any applicable regulations and statutes.

B.<u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the other party, the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.

Page 2 of 10

Intrastate Interlocal Template

DHHS 000096

CETS# 21894	
RFP# N/A	-
AGENCY REF# C 17117	

a. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained by each party for a minimum of three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

- 10. BREACH; REMEDIES. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs.
- 11.LIMITED LIABILITY. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. To the extent applicable, actual contract damages for any breach shall be limited by NRS 353.260 and NRS 354.626.
- 12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, act of public enemy, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.

13.INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.

- 14. INDEPENDENT PUBLIC AGENCIES. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.
- 15. WAIVER OF BREACH. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.
- 16. SEVERABILITY. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.
- 17. ASSIGNMENT. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.
- 18. OWNERSHIP OF PROPRIETARY INFORMATION. Unless otherwise provided by law or this Contract, any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.
- 19. PUBLIC RECORDS. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.

Page 3 of 10

Intrastate Interlocal Template

DHHS 000097

CETS# 21894	
RFP# N/A	
AGENCY REF# C 17117	

20. CONFIDENTIALITY. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.

21. FEDERAL FUNDING. In the event, federal funds are used for payment of all or part of this Contract, Contractor agrees to comply with all applicable federal laws, regulations and executive orders, including, without limitation the following:

A. Contractor certifies, by signing this Contract, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to Executive Orders 12549 and 12689 and Federal Acquisition Regulation subpart 9.4, and any relevant program-specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.

B. Contractor and its subcontracts shall comply with all terms, conditions, and requirements of the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder, including 28 C.F.R. Section 35, inclusive, and any relevant program-specific regulations.

C.Contractor and it subcontractors shall comply with the requirements of the Civil Rights Act of 1964 (P.L. 88-352), as amended, the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions.)

D. Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended—Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).

22. **PROPER AUTHORITY.** The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).

23. GOVERNING LAW; JURISDICTION. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the jurisdiction of the Nevada district courts for enforcement of this Contract.

24. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the State of Nevada Office of the Attorney General.

Page 4 of 10

Intrastate Interlocal Template

DHHS 000098

CETS#	21894	
RFP# N	I/A	
AGENO	CY REF# C 17117	-

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

Board of Regents, NSHE obo University of Nevada, Las Vegas, School of Dental Medicine Public Agency 22 Lot Citeone Lot Citeone

Public Ager 5/2/19 Lori Cit ue 30. 2019 Date Dr. David Cappelli

Date Authorized Principal Investigator Title

Division of Public and Behavioral Health Public Agency #1

3 Date for Lisa Sherych

for B Whitley, MS

Signature - Nevada State Board of Examinut

Approved as to foph by

Deputy Anomey General for Attomey General, State of Nevada

Interim Administrator, Division of Public and Behavioral Health Title

Director, <u>Department of Health and Human Services</u> Title

APPROVED BY BOARD OF EXAMINERS

Or (Date)

(Date)

Intrastate Interlocal Template

Page 5 of 10

Revised 4/19

DHHS\_000099

CETS# 21894	
RFP# N/A	
AGENCY REF# C 17117	

# ATTACHMENT A

SCOPE OF WORK AND DELIVERABLES

Page 6 of 10

Intrastate Interlocal Template

Revised 4/19

DHHS\_000100

CETS# 21894	
RFP# N/A	-
AGENCY REF# C 17117	

#### ATTACHMENT A Scope of Work and Deliverables

The purpose of the Oral Health Program is to increase public knowledge and raise public awareness of the importance of oral health and to educate the residents of this State on matters relating to oral health, including, without limitation:

- Proper oral hygiene;
- The factors that increase the risk of a person developing oral diseases; and
- The prevention and treatment of oral diseases.

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada, Las Vegas, School of Dental Medicine ("SDM"), agrees to the following:

- 1. To provide an academic faculty member, to act and serve as a State Dental Health Officer to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from July 1, 2019 to June 30, 2020. As set forth in NRS 439. 272, the State Dental Health Officer shall:
  - Provide the Chief Medical Officer with a monthly report on the program's activities no later than the 15<sup>th</sup> of each month;
  - Determine the needs of the residents of this State for public dental health;
  - Provide the Advisory Committee and the Division with advice regarding public dental health;
  - Make recommendations to the Advisory Committee, the Division and the Legislature regarding
    programs in this State for public dental health;
  - Work collaboratively with the State Public Health Dental Hygienist; and,
  - Seek such information and advice from the Advisory Committee or from any dental education program in this State, including any such programs of the Nevada System of Higher Education, as necessary to carry out his or her duties.
  - Work closely with the Division of Health Care Financing and Policy to promote utilization of Medicaid and Nevada Check Up covered services
  - Devote all of his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- 2. To provide an academic faculty member, to act and serve as a State Public Health Dental Hygienist to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from July 1, 2019 to June 30, 2020. As set forth in NRS 439. 279, the State Public Health Dental Hygienist shall:
  - Work collaboratively with the State Dental Health Officer in carrying out his or her duties;
  - Provide advice and make recommendations to the Advisory Committee and the Division regarding programs in this State for public health dental hygiene;
  - Perform any acts authorized pursuant to NRS 631.287
  - Will be responsible for coordinating and overseeing Nevada's Open-Mouth Basic Screening Surveillance Projects and creating the Oral Health Program Surveillance Plan.
  - Will be engaged in quality assurance and evaluation activities for the Oral Health Program
  - Devote all of his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.

Page 7 of 10

Intrastate Interlocal Template

DHHS 000101

CETS# 21894	
RFP# N/A	
AGENCY REF# C 171	17

- 3. The State Public Dental Health Officer and the State Public Dental Hygienist will work together to/for:
  - Oversight and Management of the *Advisory Committee on the State Program for Oral Health*, including adherence to NRS and open meeting law.
  - Timely and accurate completion and submission of pertinent reports and documents; monitoring program expenditures; and performing other program management activities as required.
  - Maintain and expand liaison roles with agencies and organizations throughout Nevada with the purpose of expanding the reach of oral health messaging on decay prevention and good oral health practices to rural, underserved, and vulnerable populations.
  - Facilitate active public/private partnerships, such as educational institutions, Nevada State Board of Dental Examiners, professional associations, chronic disease coalitions, non-profit organizations, philanthropic organizations, etc. to promote and support good oral health.
  - Collaborate with community partners, dental and medical providers, and the public to increase utilization of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) oral health screenings, prevention services, and dental treatment.
  - Update the Dental Services Directory of free, reduced cost, and sliding fee dental services throughout Nevada.
  - Provide support to Special Olympics, Special Smiles dental screening/fluoride varnish application at Special Olympics events in Las Vegas and Reno.
- 4. The Division of Public and Behavioral Health will continue to reimburse SDM for the cost of salary, plus fringe benefits for the State Dental Health Officer and the State Public Health Dental Hygienist. Furthermore, the Division of Public and Behavioral Health has provided funding within this contract for the State Dental Health Officer and State Public Health Dental Hygienist travel expenditures and Oral Health Program equipment and supplies. A Division of Public and Behavioral Health Dental Halth laptop will be provided for use by the State Dental Health Officer and State Public Health Dental Hygienist. SDM will provide programmatic storage space and separate furnished offices for both the State Dental Health Officer and State Public Health Dental Hygienist at no cost.

Page 8 of 10

Intrastate Interlocal Template

Revised 4/19

DHHS\_000102

CETS# 2189	4	
RFP# N/A		
AGENCY R	EF# C 171	17

The Division of Public and Behavioral Health will reimburse SDM for cost of salary, fringe benefits, travel, and operating costs as follows:

Personnel and Fringe		1		Total:	\$363,845
	<u>Annual</u> Salary	Fringe at 33%	<u>% of</u> Time	Months	Amount Requested
State Dental Health Officer	\$170,088	\$56,129	100%	12	\$226,217
State Public Health Dental Hygienist	\$103,480	\$34,148	100%	12	\$137,628
				Total Personnel	\$273,568
				Total Fringe	\$90,277
Travel	-			Total:	\$13,538
Out-of- State Travel		\$9,103			
Airfare: \$800 r/t x 3 trip x 1 staff	\$2,400				
Baggage fee: \$50 r/t per person x 3 trip x 1 staff	\$150				
Per Diem: \$69/day x 5 days x 3 trip x 1 staff	\$1,035				
Lodging: $166/day + 14 Tax = 180 x 5$ nights x 3 trip x 1 staff	\$2,700				
Ground Transportation: \$100 per r/trip x 3 trip x 1 staff	\$300				1
Parking: \$14/day x 5 days x 3 trip x 1 staff	\$210				1
Mileage: (\$0.58/mile x 56.5 miles per r/trip) x 3 trip x 1 staff	\$98				
Symposium Registration (NOHC-600, MSDA-455, AIDPH-100)	\$2,210				
In-State Travel					
Reno to Las Vegas/ Las Vegas to Reno		\$4,435			
Airfare: \$400 r/trip air from Las Vegas to Reno x 3 trips x 2 staff	\$2,400				
Per Diem: \$55/day x 2 days x 3 trips x 2 staff	\$660				
Lodging: $94/day + 14 Tax = 108 x 1$ nights x 3 trips x 2 staff	\$648				
Mileage: (\$0.58/mile x 60 miles per r/trip) x 3 trips x 2 staff	\$209				
Parking: \$14/day x 2 days x 3 trips x 2 staff	\$168				
Symposium Registration (NPHA- \$175 x 2)	\$350				

Page 9 of 10

Intrastate Interlocal Template

Revised 4/19

DHHS\_000103

CETS#	21894	

RFP# N/A AGENCY REF# C 17117

Travel Justification: These funds will be used to cover the costs of in-state travel for the purposes of program oversight and management, including provider/sub-grantee visits, technical assistance sessions, professional and public education, and for travel expenses incurred for these visits. In-state travel also includes attendance at the Nevada Public Health Association Annual Conference, Annual state-wide Special Olympics, Special Smiles annual event, TMCC and CSN graduation ceremony and standing OHP presentations, bi-annual water fluoridation meetings, annual RAM event, and two trips to Carson City for the NDHA and NDA Legislative Days. Out-of-state travel includes participation in the annual National Oral Health Conference, and Medicaid State Dental Association.

Materials and Supplies		Total:	\$2,863
General office supplies: \$50/FTE/mo x 2 FTE x 12 months	\$1,200		
Oral Hygiene supplies and material for outreach events including oral hygiene kits	\$1,080		
Oral health educational handouts and patient materials Justification: General office supply costs include	\$583		
tape, pens, folders, etc., as well as toner cartrid kits (patient hygiene bags) are \$1.80 each.	ges for printers). Di	ased on experience with p	retrone carrener broloon, orar of Bron
Other		Total	\$6,680
Other 10	<b>P</b> (00	Total:	\$6,680
Other Printing Services: \$50/mo. x 12 months	\$600	Total:	\$6,680
	\$600 \$600	Total:	\$6,680
Printing Services: \$50/mo. x 12 months		Total:	\$6,680
Printing Services: \$50/mo. x 12 months Postage: \$50/mo. x 12 months	\$600	Total:	\$6,680
Printing Services: \$50/mo. x 12 months Postage: \$50/mo. x 12 months Conference Calls: \$50/mo. x 12 months	\$600 \$600	Total:	\$6,680
Printing Services: \$50/mo. x 12 months Postage: \$50/mo. x 12 months Conference Calls: \$50/mo. x 12 months Long Distance: \$2.50/mo. x 12 months	\$600 \$600 \$30	Total:	\$6,680

TOTAL DIRECT CHARGES for SFY 20\$386,926Indirect Charges\$19,346Indirect charges will allow for the administration of program activities, based on negotiated indirect rate of 10%--cut to 5%-- of total direct costs excluding capital expenditures, sub-awards, and flow-through funds.

TOTAL BUDGET	Total:	\$406,272
--------------	--------	-----------

Intrastate Interlocal Template

LETS 20

## CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

## I. DESCRIPTION OF CONTRACT

1. Contract Number: 23271

	r. Conu	act number.	23211					
							Legal Entity Name:	Board of Regents- UNLV
	Agen	cy Name:	DHHS -	PUBLIC AN	D BE	HAVIORAL	Contractor Name:	Board of Regents- UNLV
	Agen	cy Code:	406	°			Address:	School of Medicine
	10.0	priation Unit:						4505 South Maryland Parkway
		iget authority		Yes			City/State/Zip	Las Vegas, NV 89154
	If "No	" please expla	ain: Not A	Applicable			Contact/Phone:	Antonia Capurro, D.M.D. 702 774-2573
							Vendor No.:	D35000813
							NV Business ID:	Government Entity
	To wh	at State Fisca	al Year(s)	will the cont	tract l	be charged?	2021	
	What the co	is the source intractor will b	of funds t be paid by	that will be u multiple fun	sed to	o pay the contra sources.	ctor? Indicate the pe	rcentage of each funding source if
		General Fu	nds	0.00 %		Fees	0.00 %	
	х	Federal Fur	nds 1	9.00 %		Bonds	0.00 %	
		Highway Fu	unds (	0.00 %	х	Other funding	81.00 % Health	ny Nevada Funds
	Agend	y Reference	#: C	17647				No. Contraction
2	. Contra	act start date:						
	a. Eff	ective upon E aminer's appr	Board of	No	or b.	other effective	date 07/01/2020	
		Anticipated BC		ng date	08/2	020		
		active?		Yes		and a		
			tata.	res	La	ad)		
		s", please exp		U <del>D</del>	TUEN		a hua Chata ananala	a and staffing shortsman due to COV
	19. Th	e division w	vill endeav	vor to allow	mor	e time for neao	tiations in the futur	es and staffing shortages due to COV e to prevent the need for retroactive
	reque							
3	. Termi	nation Date:	06	5/30/2021				
	Contra	act term:	36	4 days				APPROVED BY THE
1	Type	of contract:	Int	terlocal Agr	oome	ant		BOARD OF EXAMINERS
4		act description		ral Health Pi				AT AUG 1 1 2020
2				arnealthri	logia	in .		THEIR ACO TT 2020
5		se of contract						MEETING
	This is facult	s a new inter y member to	local agr	eement to p serve as the	orovia Stat	te ongoing fun e Dental Health	ding for the Oral He n Officer.	alth Program, to include, the academi
6	. NEW	CONTRACT						
			unt of the	contract for	the te	erm of the contra	act is: \$336,035.91	
							per Attachment A	
J		CATION						
					1.00	2		
1		conditions req						
		RS 439.279.	nd the pos	sition of State	e of N	levada Dental H	lealth Officer and Hy	gienist in accordance with NRS 439.272
8	. Explain	n why State e	mployees	s in your age	ncy o	r other State ag	encies are not able to	o do this work:
	The NI		hat the Sta	ate employ a	a Stat	e Dental Health		t; the division does not have employees
9.	. Were d	uotes or prop	posals sol	licited?			No	
	Was th	e solicitation			ircha	sing	No	
	Divisio	n?						
								DHHS 000105
tran	+ #. 2227	21.1				Dogo 1 -	F 7	

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: Not Applicable

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date;

10. Does the contract contain any IT components?

## **III. OTHER INFORMATION**

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

5	%	1

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

Yes

13. Has the contractor ever been engaged under contract by any State agency?

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State agencies routinely perform services for other agencies - satisfactory

### 14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

- 15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity
- 16. Not Applicable
- 17. Not Applicable
- 18. Not Applicable
- 19. Agency Field Contract Monitor:
- 20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ttilto1	05/28/2020 14:21:01 PM
Division Approval	ttilto1	06/30/2020 17:17:32 PM
Department Approval	mwinebar	07/01/2020 15:57:52 PM
Contract Manager Approval	ttilto1	07/01/2020 16:17:21 PM
Budget Analyst Approval	Pending	
BOE Agenda Approval	Pending	
BOE Final Approval	Pending	



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Division of Public and Behavioral Health Helping people. It's who we are and what we do.



DATE: June 25, 2020

## MEMORANDUM

- TO: Aaron Frantz, Executive Branch Budget Officer Governor's Finance Office
- THROUGH: Mark Winebarger, CPA, Chief Financial Officer Director's Office
- FROM: Kelli Quintero, ASO III Division of Public and Behavioral Health

## SUBJECT: REQUEST FOR RETROACTIVE APPROVAL CETS# 23271 C-17647

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: University of Nevada Las Vegas School of Dental Medicine
- Services to be provided: Describe services in detail: Provide a State Dental Hygienist for the Division of Public and Behavioral Health and is necessary to comply with NRS 439.272.
- Funding source and expenditure category: BA 3220 CAT 16; Radiological Fees
- Requested start date of work: July 1, 2020
- Expected execution date of agreement (IFC approvals): August 11, 2020
- Detailed explanation as to why a retroactive agreement is necessary, including:
  - Reason(s) why the agreement was not submitted timely:
  - This contract was delayed due to negotiations between the two State agencies and staffing shortages due to COVID-19.
  - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: The division would not be in compliance with NRS and NAC to provide dental services to the State.
  - Explain how the program/bureau will prevent future retroactive requests: The division will endeavor to allow more time for negotiations in the future to prevent the need for retroactive requests.

If you have any questions, please contact Kelli Quintero at (775) 684-4207 or kquintero@health.nv.gov.

cc: Contract Unit

Division of Public and Behavioral Health

CETS #:	23271
Agency Reference #:	C17647

## INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

A Contract Between the State of Nevada Acting by and through its Department of Health and Human Services Division of Public and Behavioral Health

Public Entity #1:	Bureau of Child, Family & Community Wellness Oral Health Program
Address:	4150 Technology Way, Suite 300
City, State, Zip Code:	Carson City, NV 89706
Contact:	Julia Peek, MHA, CPM
Phone:	775-684-5902
Fax:	
Email:	jpeek@health.nv.gov

Public Entity #2:	Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine	
Address:	4505 South Maryland Parkway	
City, State, Zip Code:	Las Vegas, NV 89154	
Contact:	Antonia Capurro, DMD, MPH, MBA, State Dentist	
Phone:	702-774-2573	
Fax:		
Email:	acapurro@health.nv.gov	

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services hereinafter set forth are both necessary and in the best interests of the State of Nevada.

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

 REQUIRED APPROVAL. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

#### 2. **DEFINITIONS**

TERM	DEFINITION			
State	The State of Nevada and any State agency identified herein, its officers, employees and immune contractors.			
Contracting Entity	The public entities identified above.			
Fiscal Year	The period beginning July 1st and ending June 30th of the following year.			

Interlocal Contract - Revised: February 2020

Page 1 of 13

## DHHS\_000108

CETS #:	23271
Agency Reference #:	C17647

TERM	DEFINITION	
Contract	Unless the context otherwise requires, 'Contract' means this document titled Interlocal Contract Between Public Agencies and all Attachments or Incorporated Documents.	

# 3. CONTRACT TERM. This Contract shall be effective as noted below, unless sooner terminated by either party as specified in Section 4, Termination.

Effective From:	July 1, 2020	To:	June 30, 2021	
-----------------	--------------	-----	---------------	--

- 4. TERMINATION. This Contract may be terminated by either party prior to the date set forth in Section 3, Contract Term, provided that a termination shall not be effective until <u>30</u> days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason State and/or federal funding ability to satisfy this Contract is withdrawn, limited, or impaired.
- 5. NOTICE. All communications, including notices, required or permitted to be given under this Contract shall be in writing and directed to the parties at the addresses stated above. Notices may be given: (a) by delivery in person; (b) by a nationally recognized next day courier service, return receipt requested; or (c) by certified mail, return receipt requested. If specifically requested by the party to be notified, valid notice may be given by facsimile transmission or email to the address(es) such party has specified in writing.
- INCORPORATED DOCUMENTS. The parties agree that this Contract, inclusive of the following Attachments, specifically describes the Scope of Work. This Contract incorporates the following Attachments in descending order of constructive precedence:

ATTACHMENT A:	SCOPE OF WORK AND DELIVERABLES
---------------	--------------------------------

Any provision, term or condition of an Attachment that contradicts the terms of this Contract, or that would change the obligations of the State under this Contract, shall be void and unenforceable.

7. CONSIDERATION. The parties agree that the services specified in *Section 6, Incorporated Documents* at a cost as noted below:

\$336,035.91	per		per	Attachment A
Total Contract or installments paya	ible at:	Monthly	,	
Total Contract Not to Exceed:	\$336,	,035.91		

Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the result of legislative appropriation may require.

 ASSENT. The parties agree that the terms and conditions listed in the incorporated Attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

Interlocal Contract - Revised: February 2020

Page 2 of 13

CETS #:	23271
Agency Reference #:	C17647

#### 9. INSPECTION & AUDIT

- A. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and document as are necessary to fully disclose to the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with all State and federal regulations and statutes.
- B. Inspection & Audit. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.
- C. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained a minimum three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.
- BREACH REMEDIES. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except
  as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in
  addition to any other rights and remedies provided by law or equity.
- 11. LIMITED LIABILITY. The parties will not waive and intend to assert available NRS Chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. Actual damages for any State breach shall never exceed the amount of funds which have been appropriated for payment under this Contract, but not yet paid, for the fiscal year budget in existence at the time of the breach.
- 12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, acts of public enemy, acts of terrorism, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, storms, or pandemics. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.
- 13. INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.
- 14. INDEPENDENT PUBLIC AGENCIES. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or constructed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.
- 15. WAIVER OF BREACH. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.

Interlocal Contract - Revised: February 2020

Page 3 of 13

DHHS 000110

CETS #:	23271
Agency Reference #:	C17647

- 16. SEVERABILITY. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the non-enforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.
- ASSIGNMENT. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.
- 18. OWNERSHIP OF PROPRIETARY INFORMATION. Unless otherwise provided by law any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.
- PUBLIC RECORDS. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.
- CONFIDENTIALITY. Each party shall keep confidential all information, in whatever form, produced, prepared, observed
  or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.
- FEDERAL FUNDING. In the event, federal funds are used for payment of all or part of this Contract, the parties agree to comply with all applicable federal laws, regulations and executive orders, including, without limitation the following:
  - A. The parties certify, by signing this Contract, that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any federal department or agency. This certification is made pursuant to Executive Orders 12549 and 12689 and Federal Acquisition Regulation Subpart 9.4, and any relevant program-specific regulations. This provision shall be required of every subcontractor receiving any payment in whole or in part from federal funds.
  - B. The parties and its subcontractors shall comply with all terms, conditions, and requirements of the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted thereunder, including 28 C.F.R. Section 35, inclusive, and any relevant program-specific regulations.
  - C. The parties and its subcontractors shall comply with the requirements of the Civil Rights Act of 1964 (P.L. 88-352), as amended, the Rehabilitation Act of 1973 (P.L. 93-112), as amended, and any relevant program-specific regulations, and shall not discriminate against any employee or offeror for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions.)
  - D. Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended. Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal award to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
- 22. **PROPER AUTHORITY**. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in *Section 6, Incorporated Documents*.
- 23. GOVERNING LAW JURISDICTION. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties' consent to the exclusive jurisdiction of and venue in the First Judicial District Court, Carson City, Nevada for enforcement of this Contract.

Page 4 of 13

CETS #:	23271
Agency Reference #:	C17647

24. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated Attachment(s) constitute the entire agreement of the parties and as such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated Attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such Attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Attorney General.

Interlocal Contract - Revised: February 2020

Page 5 of 13

 $\frac{(1+5)^{1}}{\text{Vgenev Reference 4}} = \frac{232^{\frac{1}{2}}1}{(1^{\frac{1}{2}}647)}$ 

a March Same

thead of Ballin and State

LORI CICCONE

I and Chyperen 6/7/ . ..

DR. DAVID CAPEUI

- statistications

## EXECUTIVE DIRECTOR, OFFICE OF SPON SOM PROJECTS

AUTHORIZED PRENCEPAL INVESTIGATOR

'S U. A. ITS, 1'S of gune 2020 I way, UNLY school of Dental 13 DEAN GARCIA Medicine

6/29/2020

FOR LISA SHERVCH

7-1-20

ADMENLIST MATOR DIV. PUBLICIAND BEHAVIOLAL HEALTH

FOR RICHARD WHITLEY

INERS

DIRECTOR, DEPT OF HEALTH AND HUN IN SERVICES

COLUMN AND BURN

8-11-2020

6/13/20

1.2

CETS #:	23271
Agency Reference #:	C17647

## ATTACHMENT A

## SCOPE OF WORK AND DELIVERABLES

Interlocal Contract - Revised: February 2020

Page 7 of 13

DHHS\_000114

CETS #:	23271
Agency Reference #:	C17647

## ATTACHMENT A Scope of Work and Deliverables

The purpose of the Oral Health Program is to increase public knowledge and raise public awareness of the importance of oral health and to educate the residents of this State on matters relating to oral health, including, without limitation:

- Proper oral hygiene;
- · The factors that increase the risk of a person developing oral diseases; and
- The prevention and treatment of oral diseases.

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Nevada, Las Vegas, School of Dental Medicine ("SDM"), agrees to the following:

- To provide an academic faculty member, to act and serve as a State Dental Health Officer to the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from July 1, 2020 to June 30, 2021. As set forth in NRS 439. 272, the State Dental Health Officer shall:
  - Provide the Chief Medical Officer with a monthly report on the program's activities no later than the 15th of each month;
  - · Determine the needs of the residents of this State for public dental health;
  - Provide the Advisory Committee and the Division with advice regarding public dental health;
  - Make recommendations to the Advisory Committee, the Division and the Legislature regarding programs in this State for public dental health;
  - · Work collaboratively with the State Public Health Dental Hygienist; and,
  - Seek such information and advice from the Advisory Committee or from any dental education program in this State, including any such programs of the Nevada System of Higher Education, as necessary to carry out his or her duties.
  - Work closely with the Division of Health Care Financing and Policy to promote utilization of Medicaid and Nevada Check Up covered services
  - Devote all his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- 2. To provide contract staff to fulfill the duties and responsibilities previously assigned to the State Public Health Dental Hygienist of

Interlocal Contract - Revised: February 2020

Page 8 of 13

CETS #:	23271
Agency Reference #:	C17647

the State of Nevada, Department of Health and Human Services, Division of Public and Behavioral Health from July 1, 2020 to June 30, 2021. As set forth in NRS 439. 279, the State Public Health Dental Hygienist shall:

- Work collaboratively with the State Dental Health Officer in carrying out his or her duties;
- Provide advice and make recommendations to the Advisory Committee and the Division regarding programs in this State for public health dental hygiene;
- Provide administrative and technical support to the Oral Health Program
- Perform clinical dental services as authorized by NRS to fulfil projects and contract deliverables of the Oral Health Program.
- Will be responsible for coordinating and overseeing Nevada's Open-Mouth Basic Screening Surveillance Projects and creating the Oral Health Program Surveillance Plan.
- Will be engaged in quality assurance and evaluation activities for the Oral Health Program
- Devote all his or her time to the business of his or her office and shall not pursue any other business or vocation or hold any other office of profit.
- 3. The State Public Dental Health Officer and the contract staff employed to fulfill the responsibilities of the State Public Dental Hygienist will work together to/for:
  - Oversight and Management of the Advisory Committee on the State Program for Oral Health, including adherence to NRS and open meeting law.
  - Timely and accurate completion and submission of pertinent reports and documents; monitoring program expenditures; and performing other program management activities as required.
  - Facilitate active public/private partnerships, such as educational institutions, Nevada State Board of Dental Examiners, professional associations, chronic disease coalitions, non-profit organizations, philanthropic organizations, etc. to promote and support good oral health.
  - Maintain and expand liaison roles with agencies and organizations throughout Nevada with the purpose of expanding the reach of oral health messaging on decay prevention and good oral health practices to rural, underserved, and vulnerable populations
  - Collaborate with community partners, dental and medical providers, and the public to increase utilization of Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) oral health screenings, prevention services, and dental treatment.

Interlocal Contract - Revised: February 2020

Page 9 of 13

CETS #:	23271
Agency Reference #:	C17647

- Update the Dental Services Directory of free, reduced cost, and sliding fee dental services throughout Nevada.
- Provide support to Special Olympics, Special Smiles dental screening/fluoride varnish application at Special Olympics events in Las Vegas and Reno.
- Support the Oral Health Program in identifying opportunities for policy changes to improve MCAH and ID/DD population access to oral health care.
- Identify and pursue funding mechanism for sustainability of the Nevada Oral Health Program.
- 4. The Division of Public and Behavioral Health will continue to reimburse SDM for the cost of salary, plus fringe benefits for the State Dental Health Officer and the hourly and administrative cost of contract staff to fulfill the role of the State Public Health Dental Hygienist. Furthermore, the Division of Public and Behavioral Health has provided funding within this contract for the State Dental Health Officer and contract staff travel expenditures and Oral Health Program equipment and supplies. A Division of Public and Behavioral Health laptop will be provided for use by the State Dental Health Officer. SDM will provide programmatic storage space and separate furnished offices for both the State Dental Health Officer and the contract staff employed to fulfill the responsibilities of the State Public Health Dental Hygienist at no cost.

Page 10 of 13

CETS #:	23271
Agency Reference #:	C17647

Personnel and Fringe without COLA			1	Total:	\$220,774
	<u>Annual</u> <u>Salary</u>	Fringe at 29.80%	% of Time	Months	Amount Requested
State Dental Health Officer- Dr. Antonina Capurro	\$170,088	\$50,686	100%	12	\$220,774
Travel				Total:	\$14,160
Out-of- State Travel	\$6,360				
Airfare: \$800 r/t x 2 trip x 1 staff	\$1,600				
Baggage fee: \$50 r/t per person x 2 trip x 1 staff	\$100				
Per Diem: \$69/day x 5 days x 2 trip x 1 staff	\$690				
Lodging: \$166/day + \$14 Tax = \$180 x 5 nights x 2 trip x 1 staff	\$1,800				
Ground Transportation: \$100 per r/trip x 2 trip x 1 staff	\$200				
Parking: \$14/day x 5 days x 2 trip x 1 staff	\$140				
Mileage: (\$0.575/mile x 56.5 miles per r/trip) x 2 trip x 1 staff	\$66				
Symposium Registration (NOHC- 900, MSDA-864)	\$1,764				
In-State Travel for Dental Health Officer					
Reno to Las Vegas/ Las Vegas to Reno and Rural Nevada	\$3,900			-	
Airfare: \$400 r/trip air from Las Vegas to Reno x 5 trips x 1 staff	\$2,000				
Per Diem: \$55/day x 2 days x 5 trips x 1 staff	\$550				
Lodging: \$96/day + \$14 Tax = \$110 x 1-night x 5 trips x 1 staff	\$550				
Mileage: (\$0.575/mile x 60 miles per r/trip) x 10 trips x 1 staff	\$345				
Parking: \$14/day x 2 days x 10 trips x 1 staff	\$280				
Symposium Registration (NPHA- \$175)	\$175				

Page 11 of 13

CETS #:	23271
Agency Reference #:	C17647

			1
Reno to Las Vegas/ Las Vegas to Reno and Rural Nevada	\$3,900		
Airfare: \$400 r/trip air from Las Vegas to Reno x 5 trips x 1 staff	\$2,000		
Per Diem: \$55/day x 2 days x 5 trips x 1 staff	\$550		
Lodging: \$96/day + \$14 Tax = \$110 x 1-night x 5 trips x 1 staff	\$550		
Mileage: (\$0.575/mile x 60 miles per r/trip) x 10 trips x 1 staff	\$345		
Parking: \$14/day x 2 days x 10 trips x 1 staff	\$280		
Symposium Registration (NPHA- \$175)	\$175		
meetings, annual RAM event, and two to	rips to Carson City fo	the NDHA and NDA Legislative Days.	esentations, bi- annual water fluoridation Out-of-state travel includes participation Illy, contract travel funds will be used to
cover the costs of in-state travel for the assistance sessions, professional and pu	e purposes of program	n oversight and management, includi	ng provider/sub-grantee visits, technical
cover the costs of in-state travel for the assistance sessions, professional and pu	e purposes of program	n oversight and management, includi	ng provider/sub-grantee visits, technical visits. GSA rates will be used for all travel. I
cover the costs of in-state travel for the assistance sessions, professional and pu Materials and Supplies General office supplies:	e purposes of program blic education, and f	n oversight and management, includi or travel expenses incurred for these v	ng provider/sub-grantee visits, technical visits. GSA rates will be used for all travel. I
cover the costs of in-state travel for the assistance sessions, professional and pu Materials and Supplies General office supplies: \$50/FTE/mo. x 2 FTE x 12 months Oral Hygiene supplies and material for outreach events including oral	e purposes of progra blic education, and f \$2,500	n oversight and management, includi or travel expenses incurred for these v	ng provider/sub-grantee visits, technical visits. GSA rates will be used for all travel. I
cover the costs of in-state travel for the	e purposes of progra blic education, and f \$2,500 \$1,200	n oversight and management, includi or travel expenses incurred for these v	rig provider/sub-grantee visits, technical visits. GSA rates will be used for all travel. \$2,500

Page 12 of 13

CETS #:	23271
Agency Reference #:	C17647

Other		\$6,680	Total:	\$82,600
Printing Services: \$50/mo. x 12 months	\$600			
Postage: \$50/mo. x 12 months	\$600			
Conference Calls: \$50/mo. x 12 months	\$600			
Long Distance: \$2.50/mo. x 12 months	\$30			
Email: \$15/mo. x 12 months x 2 FTE	\$360			
Office 365 license: \$500 annual subscription x 2 FTE	\$1,000			
Professional National and State Memberships (NPHA, MSDA, ASTDD, NDA, NDHA, AAPHD)	\$3,490			
Contract Staff: administrative assistant at \$26/hour x 10hour/week x 52 weeks		\$13,520		
Dental Hygienist or Professional Contractor: licensed dental hygienists or professional specialist at no more than \$60/hour x 20hour/week x 52 weeks		\$62,400		
Justification: Contract staff has been included to provide general and specialized support for the Oral Health Program. Personnel may include contract dental hygienists to fill the vacant State Public Health Dental Hygiene position, administrative staff, and others with professional specialties that are necessary to complete Oral Health Program projects and contractual deliverables. Note: Two contracted staff at twelve months equals one FTE for the year.				
TOTAL DIRECT CHARGES for SFY	\$320,034			\$320,034
ndirect Charges	\$16,001.71	-	5.00%	\$16,001.71
ndirect charges will allow for the administration of program activities, based on negotiated ndirect rate of 10%cut to 5% of total direct costs excluding capital expenditures, sub- awards, and flow-through funds.				
TOTAL BUDGET	\$336,035.91		Total:	\$336,035.91

Page 13 of 13



State of Nevada	
Department of Health and Human Services	

Division of Public & Behavioral

 Agency Ref. #:
 HD 17057

 Budget
 3220/3222

 Account:
 3220/3222

 Category:
 16/29

 GL:
 8648

 Job Number:
 3605XRA/9399418

# (hereinafter referred to as the Division)

#### NOTICE OF SUBAWARD **Program Name:** Subrecipient's Name: Board of Regents, NSHE obo Oral Health Program; Chronic Disease Prevention and Health Promotion Section (CDPHP); Bureau of Child, Family University of Nevada, Las Vegas and Community Wellness (CFCW) School of Dental Medicine Address: Address: 4505 South Maryland Parkway 4150 Technology Way, Suite 300 Carson City, NV 89706-2009 Las Vegas, Nevada 89154 **Subaward Period:** Subrecipient's: October 1, 2018 through June 30, 2019 EIN: 86-6000024 Vendor #: D35000824 Dun & Bradstreet: 831422626 Purpose of Award: This award will support the Nevada Oral Health Program and support the Rural Nevada Expectant Mother Medicaid Dental Access Program. Region(s) to be served: Statewide Specific county or counties: FEDERAL AWARD COMPUTATION: Approved Budget Categories: Total Obligated by this Action: 13.006.00 \$ \$45,876.00 1. Personnel Cumulative Prior Awards this Budget Period: \$ 0.00 Total Federal Funds Awarded to Date: \$ 13,006.00 2. Travel \$0.00 3. Operating \$875.00 Match Required □ Y ⊠ N 0.00 \$ 4. Supplies \$7,386.00 Amount Required this Action: \$ 0.00 Amount Required Prior Awards: \$ 0.00 5. Contractual/Consultant \$7.944.00 Total Match Amount Required: Research and Development (R&D) □ Y ⊠ N 6. Training \$0.00 Budget Period: 7. Other \$8,511.00 October 1, 2017 through September 30, 2019 TOTAL DIRECT COSTS \$70,592.00 **Project Period:** October 1, 2017 through September 30, 2019 \$7,059.00 8. Indirect Costs TOTAL APPROVED BUDGET \$77,651.00 FOR AGENCY USE ONLY % Funds: CFDA: FAIN: Federal Grant #: Source of Funds: B04MC31501 B04MC31501 16.75% 93.994 Maternal and Child Health Block Grant 1 83.25% N/A N/A N/A 3605XRA Fees 2. Federal Grant Award Date by Federal Agency: July 19, 2018 Terms and Conditions: In accepting these grant funds, it is understood that: 1. This award is subject to the availability of appropriated funds. Expenditures must comply with any statutory guidelines, the DHHS Grant Instructions and Requirements, and the State 2. Administrative Manual, 3. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented Subrecipient must comply with all applicable Federal regulations 4. Quarterly progress reports are due by the 30th of each month following the end of the quarter, unless specific exceptions are 5. provided in writing by the grant administrator. Financial Status Reports and Requests for Funds must be submitted monthly, unless specific exceptions are provided in writing by 6. the grant administrator. Incorporated Documents: Section A: Grant Conditions and Assurances: Description of Services, Scope of Work and Deliverables; Section B: Section C: Budget and Financial Reporting Requirements;

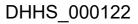
Subaward Packet (NSHE Only) Revised 1/19 Page 1 of 13

Karen P. West, DDS Dean, UNLV School of Dental Medicine	tas the signature	V Date
Lori M. Ciccone Executive Director, UNLV Office of Sponsored Projects	Lin Cicol	unir
Beth Handler Deputy Administrator, Community Health Services	attandoor	U/21P
Julie Kotchevar Administrator, Division of Public & Behavioral Health	Julu Katetin	4-3-1

Subaward Packet (NSHE Only) Revised 1/19

Page 2 of 13

Agency Ref.#: HD 17057



#### SECTION A

#### **GRANT CONDITIONS AND ASSURANCES**

#### **General Conditions**

- Nothing contained in this Agreement is intended to, or shall be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. The Recipient shall at all times remain an "independent contractor" with respect to the services to be performed under this Agreement. The Division of Public and Behavioral Health (hereafter referred to as "Division") shall be exempt from payment of all Unemployment Compensation, FICA, retirement, life and/or medical insurance and Workers' Compensation Insurance as the Recipient is an independent entity.
- The Department or Recipient may amend this Agreement at any time provided that such amendments make specific reference to this Agreement, and are executed in writing, and signed by a duly authorized representative of both organizations. Such amendments shall not invalidate this Agreement, nor relieve or release the Division or Recipient from its obligations under this Agreement.
  - The Division may, in its discretion, amend this Agreement to conform with federal, state or local governmental guidelines, policies and available funding amounts, or for other reasons. If such amendments result in a change in the funding, the scope of services, or schedule of the activities to be undertaken as part of this Agreement, such modifications will be incorporated only by written amendment signed by both the Division and Recipient.
- 3. Either party may terminate this Agreement at any time by giving written notice to the other party of such termination and specifying the effective date thereof at least 30 days before the effective date of such termination. Partial terminations of the Scope of Work in Section B may only be undertaken with the prior approval of the Division. In the event of any termination for convenience, all finished or unfinished documents, data, studies, surveys, reports, or other materials prepared by the Recipient under this Agreement shall, at the option of the Division, become the property of the Division, and the Recipient shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents or materials prior to the termination.
  - The Division may also suspend or terminate this Agreement, in whole or in part, if the Recipient materially fails to comply with any term of this Agreement, or with any of the rules, regulations or provisions referred to herein; and the Division may declare the Recipient ineligible for any further participation in the Division's grant agreements, in addition to other remedies as provided by law. In the event there is probable cause to believe the Recipient is in noncompliance with any applicable rules or regulations, the Division may withhold funding.

#### **Grant Assurances**

A signature on the cover page of this packet indicates that the applicant is capable of and agrees to meet the following requirements, and that all information contained in this proposal is true and correct.

- 1. Adopt and maintain a system of internal controls which results in the fiscal integrity and stability of the organization, including the use of Generally Accepted Accounting Principles (GAAP).
- 2. Compliance with state insurance requirements for general, professional, and automobile liability; workers' compensation and employer's liability; and, if advance funds are required, commercial crime insurance.
- 3. These grant funds will not be used to supplant existing financial support for current programs.
- 4. No portion of these grant funds will be subcontracted without prior written approval unless expressly identified in the grant agreement.
- Compliance with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any employee for employment because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
- Compliance with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.

Subaward Packet (NSHE Only) Revised 1/19

Page 3 of 13

Agency Ref.#: HD 17057

7. Compliance with Title 2 of the Code of Federal Regulations (CFR) and any guidance in effect from the Office of Management and Budget (OMB) related (but not limited to) audit requirements for grantees that expend \$750,000 or more in Federal awards during the grantee's fiscal year must have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. A COPY OF THE FINAL AUDIT REPORT MUST BE SENT TO:

Nevada State Division of Public and Behavioral Health Attn: Contract Unit 4150 Technology Way, Suite 300 Carson City, NV 89706-2009 <u>contractunit@health.nv.gov</u>

This copy of the final audit must be sent to the Division within nine (9) months of the close of the Subrecipient's fiscal year. To acknowledge this requirement, Section E of this notice of subaward must be completed.

- Certification that neither the Recipient nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp. 19150-19211).
- 9. No funding associated with this grant will be used for lobbying.
- 10. Disclosure of any existing or potential conflicts of interest relative to the performance of services resulting from this grant award.
- 11. Provision of a work environment in which the use of tobacco products, alcohol, and illegal drugs will not be allowed.
- An organization receiving grant funds through the Division of Public and Behavioral Health of the Nevada Department
  of Health and Human Services shall not use grant funds for any activity related to the following:
  - 1. Any attempt to influence the outcome of any federal, state or local election, referendum, initiative or similar procedure, through in-kind or cash contributions, endorsements, publicity or a similar activity.
  - 2. Establishing, administering, contributing to or paying the expenses of a political party, campaign, political action committee or other organization established for the purpose of influencing the outcome of an election, referendum, initiative or similar procedure.
  - 3. Any attempt to influence:
    - (a) The introduction or formulation of federal, state or local legislation; or
    - (b) The enactment or modification of any pending federal, state or local legislation, through communication with any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation, including, without limitation, efforts to influence State or local officials to engage in a similar lobbying activity, or through communication with any governmental official or employee in connection with a decision to sign or veto enrolled legislation.
  - 4. Any attempt to influence the introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity through communication with any officer or employee of the United States Government, the State of Nevada or a local governmental entity, including, without limitation, efforts to influence state or local officials to engage in a similar lobbying activity.
  - 5. Any attempt to influence:
    - (a) The introduction or formulation of federal, state or local legislation;
    - (b) The enactment or modification of any pending federal, state or local legislation; or
    - (c) The introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity, by preparing, distributing or using publicity or propaganda, or by urging members of the general public or any segment thereof to contribute to or participate in any mass demonstration, march, rally, fundraising drive, lobbying campaign or letter writing or telephone campaign.
  - 6. Legislative liaison activities, including, without limitation, attendance at legislative sessions or committee hearings, gathering information regarding legislation and analyzing the effect of legislation, when such activities are carried

Subaward Packet (NSHE Only) Revised 1/19 Page 4 of 13

Agency Ref.#: HD 17057

on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.

- 7. Executive branch liaison activities, including, without limitation, attendance at hearings, gathering information regarding a rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity and analyzing the effect of the rule, regulation, executive order, program, policy or position, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
- An organization receiving grant funds through the Division of Public and Behavioral Health of the Nevada Department of Health and Human Services <u>may</u>, to the extent and in the manner authorized in its grant, use grant funds for any activity directly related to educating persons in a nonpartisan manner by providing factual information in a manner that is:
  - 1. Made in a speech, article, publication, or other material that is distributed and made available to the public, or through radio, television, cable television or other medium of mass communication; and
  - 2. Not specifically directed at:
    - (a) Any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation;
    - (b) Any governmental official or employee who is or could be involved in a decision to sign or veto enrolled legislation; or
    - (c) Any officer or employee of the United States Government, the State of Nevada or a local governmental entity who is involved in introducing, formulating, modifying or enacting a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity.

This provision does not prohibit a recipient or an applicant for a grant from providing information that is directly related to the grant or the application for the grant to the granting agency.

Compliance with this section is acknowledged by signing the subaward cover page of this packet.

Agency Ref.#: HD 17057

#### SECTION B

#### Description of Services, Scope of Work and Deliverables

The purpose of the Oral Health Program is to increase public knowledge and raise public awareness of the importance of oral health and to educate the residents of this State on matters relating to oral health, including, without limitation:

- i. Proper oral hygiene;
- ii. The factors that increase the risk of a person developing oral diseases; and
- iii. The prevention and treatment of oral diseases.

The Board of Regents of the Nevada System of Higher Education, on behalf of the University of Las Vegas, School of Dental Medicine ("SDM"), agrees to provide the following services effective October 1, 2018:

- 1. Provide administrative support for the Nevada Oral Health Program.
- 2. Support the Oral Health Program in identifying opportunities for policy changes to improve Maternal Child and Adolescent Health population access to oral health care.
- 3. Prepare to launch the proposed Rural Nevada Expectant Mother Medicaid Dental Access Program for dental health professional shortage areas in Esmeralda, Lincoln, Nye, and White Pine Counties. The program will have the following foci:
  - i. To create an innovative method to educate patients on the importance of oral health while also providing medical clearance for dental treatment.
  - ii. To provide case management to connect patients to a dental home.
  - iii. To develop healthcare networks in the community to promote better access to and understanding of oral health care needs of rural patients.
  - To develop dental educational modules targeting the engagement of interdisciplinary groups of health professionals.

#### SECTION C

#### **Budget and Financial Reporting Requirements**

Identify the source of funding on all printed documents purchased or produced within the scope of this subaward, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Division of Public and Behavioral Health through Grant Number B04MC31501 from Health Resources and Services Administration (HRSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Division nor HRSA."

Any activities performed under this subaward shall acknowledge the funding was provided through the Division by Grant Number B04MC31501 from HRSA.

Subrecipient agrees to adhere to the following budget:

Category	1	otal cost	De	tailed cost	Details of expected expenses
1. Personnel	\$	45,876.00	and the second		
			\$	34,493.00	Oral Health Program Support (October 1, 2018 – January 31, 2019) \$103,480/12 = \$8,623.33 x 4 mo. = \$34,493
			\$	11,383.00	Fringe Benefits: \$34,493 x 33%
2. Travel	\$	0.00			
	2. 14 E. M. R.	and the superstand	\$	0.00	
3. Operating	\$	875.00	The second		
			\$	375.00 500.00	Educational materials on oral health in pregnancy and infant oral health brochures Mailing of educational information and oral hygiene supplies to clinics in rural Nevada
4. Supplies	\$	7,386.00	Charles les		
			\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$	3,066.00 1,200.00 36.00 200.00 1,621.00 1,200.00 63.00	Inventory barcode system for portable dental equipment Barcode scanner cloud system: \$100/mo. X 12 months Memory card for OHP camera Lockboxes for Nomads required by NV Radiation Control Oral hygiene supplies and materials 2-sided Prescription Referral Pad for Oral Health Services Patient Survey Supplies Justification: Inventory system needed for organization of portable dental equipment library. Equipment cannot be used by other entities/state agencies/non-profits until a complete inventory is completed. Nomad handheld x-ray unit lockboxes will be installed into OHP trailers per NV Radiation Control guidelines.
5. Contractual Consultant	\$	7,944.00			
			\$ \$	1,560.00 6,384.00	Biostatistician: \$26/hour *60 hours Community Health Worker: \$12/hour x 20 hours x 20 weeks+ 33% fringe
6. Training	\$	0.00	A State Law		
	San States	a start at the	\$	0.00	

Agency Ref.#: HD 17057

7. Other	\$ 8,511.00	Same and	
		\$ 208.00 10.00 42.00 58.00 184.00 900.00 675.00 900.00 450.00 700.00 125.00 4,259.00	Cell Phone: \$52/mo. x 4 months Long Distance: \$2.50/mo. x 4 months State Phone Line & Voicemail: \$10.39/mo. x 4 months Email: \$14.57/mo. x 4 months Office 365 license: \$184 annual subscription Printing Services: \$100/mo. x 9 months Copier/Printer Lease: \$75/mo. x 9 months Postage: \$100/mo. x 9 months Conference Calls: \$50/mo. x 9 months Room rental for medical staff and hospitals for oral health training in rural Nevada: ~\$140 per training Misc. presentation handouts and office supplies Professional National and State Memberships (NPHA, MSDA, ASTDD, NDA, NDHA, AAPHD)
Total Direct Cost	\$ 70,592.00		
8. Indirect Cost	\$ 7,059.00		ow for the administration of program activities, based on negotiated otal direct costs excluding capital expenditures, sub-awards, and flow-
Total Approved Budget	\$ 77,651.00		

- Division of Public and Behavioral Health policy allows no more than 10% flexibility of the total not to exceed amount of the subaward, within the approved Scope of Work/Budget. Subrecipient will obtain written permission to redistribute funds within categories. Note: the redistribution cannot alter the total not to exceed amount of the subaward. Modifications in excess of 10% require a formal amendment.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/ Subrecipients to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

#### The Subrecipient agrees:

To request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subaward period.

- Total reimbursement through this subaward will not exceed \$77,651.00
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred;
- Additional expenditure detail will be provided upon request from the Division.

Additionally, the Subrecipient agrees to provide:

- A complete financial accounting of all expenditures to the Division within 30 days of the <u>CLOSE OF THE</u> <u>SUBAWARD PERIOD</u>. Any un-obligated funds shall be returned to the Division at that time, or if not already requested, shall be deducted from the final award.
- Any work performed after the BUDGET PERIOD will not be reimbursed.
- If a Request for Reimbursement (RFR) is received after the 45-day closing period, the Division may not be able to provide reimbursement.
- If a credit is owed to the Division after the 45-day closing period, the funds must be returned to the Division within 30 days of identification.

Subaward Packet (NSHE Only) Revised 1/19 Page 8 of 13

Agency Ref.#: HD 17057

DHHS 000128

#### The Division agrees:

- To ensure successful completion of this project, such as:
  - Providing technical assistance, upon request from the Subrecipient;
  - Providing prior approval of reports or documents to be developed;
  - Forwarding a report to another party.
- The Division reserves the right to hold reimbursement under this subaward until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Division.

#### Both parties agree:

- The Subrecipient will, in the performance of the Scope of Work specified in this subaward, perform functions and/or activities that could involve confidential information; therefore, the Subrecipient is requested to fill out Section G, which is specific to this subaward, and will be in effect for the term of this subaward.
- All reports of expenditures and requests for reimbursement processed by the Division are SUBJECT TO AUDIT.
- This subaward agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subaward, provided the termination shall not be effective until <u>30 days</u> after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

#### **Financial Reporting Requirements**

- A Request for Reimbursement is due on a <u>monthly</u> basis, based on the terms of the subaward agreement, no later than the 15<sup>th</sup> of the month.
- Reimbursement is based on actual expenditures incurred during the period being reported.
- · Payment will not be processed without all reporting being current.
- Reimbursement may only be claimed for expenditures approved within the Notice of Subaward.

STATE OF NEVADA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
NOTICE OF SUBAWARD
SECTION D
Request for Reimbursement

Agency Ref. #:	HD 17057		
Budget Account:	3220/3222		

GL: <u>3220/3222</u> 648

Draw #:

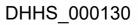
#### Program Name: Subrecipient Name: Oral Health Program; Chronic Disease Prevention and Board of Regents, NSHE obo Health Promotion Section (CDPHP); Bureau of Child, Family University of Nevada, Las Vegas and Community Wellness (CFCW) School of Dental Medicine Address: Address: 4150 Technology Way, Suite #300 4505 South Maryland Parkway Carson City, NV 89706-2009 Las Vegas, Nevada 89154 **Subaward Period:** Subrecipient's: October 1, 2018 through June 30, 2019 EIN: 86-6000024 Vendor #: D35000824 FINANCIAL REPORT AND REQUEST FOR FUNDS (must be accompanied by expenditure report/back-up) Calendar year Month(s) D в С E A

Approved Budget Category	Approved Budget	Total Prior Requests	Current Request	Year to Date Total	Budget Balance	Percent Expended
1. Personnel	\$45,876.00	\$0.00	\$0.00	\$0.00	\$45,876.00	0.0%
2. Travel	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
3. Operating	\$875.00	\$0.00	\$0.00	\$0.00	\$875.00	0.0%
4. Supplies	\$7,386.00	\$0.00	\$0.00	\$0.00	\$7,386.00	0.0%
5. Contractual/Consultant	\$7,944.00	\$0.00	\$0.00	\$0.00	\$7,944.00	0.0%
6. Training	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
7. Other	\$8,511.00	\$0.00	\$0.00	\$0.00	\$8,511.00	0.0%
8. Indirect	\$7,059.00	\$0.00	\$0.00	\$0.00	\$7,059.00	0.0%
Total	\$77,651.00	\$0.00	\$0.00	\$0.00	\$77,651.00	0.0%

I, a duty authorized signatory for the applicant, certify to the best of my knowledge and belief that this report is true, complete and accurate; that the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the grant award; and that the amount of this request is not in excess of current needs or, cumulatively for the grant term, in excess of the total approved grant award. I am aware that any false, fictitious or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims, or otherwise. I verify that the cost allocation and backup documentation attached is correct.

Authorized Signature	FOR	Title DIVISION USE ONLY		Date	
Is program contact required?Ye	s No	Contact Person:			
Reason for contact:			ii		
Fiscal review/approval date:					
Scope of Work review/approval date:					
ASO or Bureau Chief (as required):					
				Date	

Subaward Packet (NSHE Only) Revised 1/19 Agency Ref.#: HD 17057



#### Audit Information Request

 Non-Federal entities that <u>expend</u> \$750,000.00 or more in total federal awards are required to have a single or program-specific audit conducted for that year, in accordance with 2 CFR § 200.501(a). Within nine (9) months of the close of your organization's fiscal year, you <u>must</u> submit a copy of the final audit report to the division. <u>Electronic copies are preferred</u> and can be sent to <u>contractunit@health.nv.gov</u>. Mail hard copies to the following address:

Nevada State Division of Public and Behavioral Health Attn: Contract Unit 4150 Technology Way, Suite 300 Carson City, NV 89706-2009

- 2. Did your organization expend \$750,000 or more in all federal awards during your organization's most recent fiscal year?
- 3. When does your organization's fiscal year end?
- 4. What is the official name of your organization?
- 5. How often is your organization audited?
- 6. When was your last audit performed?
- 7. What time-period did your last audit cover?
- 8. Which accounting firm conducted your last audit?

Compliance with this section is acknowledged by signing the subaward cover page of this packet.

Agency Ref.#: HD 17057

## DHHS\_000131

June 30, 2019 Board of Regents, Nevada System of Higher Education (NSHE) on behalf of the University of Nevada, Las Vegas

X YES

**NO** 

annually

November 13, 2018

July 1, 2017 to June 30, 2018

GrantThornton LLP

#### SECTION F

#### **Confidentiality Addendum**

#### BETWEEN

#### Nevada Division of Public and Behavioral Health

Hereinafter referred to as "Division"

#### And

#### Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine

Hereinafter referred to as "Contractor"

This CONFIDENTIALITY ADDENDUM (the Addendum) is hereby entered into between Division and Subrecipient.

WHEREAS, Subrecipient may have access, view or be provided information, in conjunction with goods or services provided by Subrecipient to Division that is confidential and must be treated and protected as such.

NOW, THEREFORE, Division and Subrecipient agree as follows:

#### I. DEFINITIONS

The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning ascribed to them in the context in which they first appear.

- 1. Agreement shall refer to this document and that particular inter-local or other agreement to which this addendum is made a part.
- 2. Confidential Information shall mean any individually identifiable information or health information in any form or media.
- 3. Subrecipient shall mean the name of the organization described above.
- 4. Required by Law shall mean a mandate contained in law that compels a use or disclosure of information.
- II. TERM

The term of this Addendum shall commence as of the effective date of the primary inter-local or other agreement and shall expire when all information provided by Division or created by Subrecipient from that confidential information is destroyed or returned, if feasible, to Division pursuant to Clause VI (4).

III. <u>LIMITS ON USE AND DISCLOSURE ESTABLISHED BY TERMS OF CONTRACT OR LAW</u> Subrecipient hereby agrees it shall not use or disclose the confidential information provided, viewed or made available by Division for any purpose other than as permitted by Agreement or required by law.

#### IV. PERMITTED USES AND DISCLOSURES OF INFORMATION BY CONTRACTOR

Subrecipient shall be permitted to use and/or disclose information accessed, viewed or provided from Division for the purpose(s) required in fulfilling its responsibilities under the primary inter-local or other agreement.

#### V. USE OR DISCLOSURE OF INFORMATION

Subaward Packet (NSHE Only) Revised 1/19 Agency Ref.#: HD 17057

Subrecipient may use information as stipulated in the primary inter-local or other agreement if necessary for the proper management and administration of Subrecipient; to carry out legal responsibilities of Subrecipient; and to provide data aggregation services relating to the health care operations of Division. Subrecipient may disclose information if:

- 1. The disclosure is required by law; or
- 2. The disclosure is allowed by the inter-local or other agreement to which this Addendum is made a part; or
- 3. The Subrecipient has obtained written approval from the Division.

#### VI. OBLIGATIONS OF CONTRACTOR

- 1. Agents and Subcontractors. Subrecipient shall ensure by subcontract that any agents or subcontractors to whom it provides or makes available information, will be bound by the same restrictions and conditions on the access, view or use of confidential information that apply to Subrecipient and are contained in Agreement.
- 2. Appropriate Safeguards. Subrecipient will use appropriate safeguards to prevent use or disclosure of confidential information other than as provided for by Agreement.
- 3. **Reporting Improper Use or Disclosure.** Subrecipient will immediately report in writing to Division any use or disclosure of confidential information not provided for by Agreement of which it becomes aware.
- 4. Return or Destruction of Confidential Information. Upon termination of Agreement, Subrecipient will return or destroy all confidential information created or received by Subrecipient on behalf of Division. If returning or destroying confidential information at termination of Agreement is not feasible, Subrecipient will extend the protections of Agreement to that confidential information as long as the return or destruction is infeasible. All confidential information of which the Subrecipient maintains will not be used or disclosed.

**IN WITNESS WHEREOF,** Subrecipient and the Division have agreed to the terms of the above written Addendum as of the effective date of the inter-local or other agreement to which this Addendum is made a part.

Compliance with this section is acknowledged by signing the subaward cover page of this packet.

Agency Ref.#: HD 17057

Depa Division (he

State of Nevada	Agency Ref. #:	HD 17057-1
Department of Health and Human Services	Budget Account:	3220/3222
ion of Public & Behavioral Health	Category:	16/29
(hereinafter referred to as the Department)	GL:	8648
	Job Number:	3605XRA/9399418
	JOB Multibel.	5005ATA/95399410

## SUBAWARD AMENDMENT #\_\_1

Program Name: Oral Health Program; Chronic Di Health Promotion Section (CDPH Family and Community Wellness	HP); Bureau of Child,	Subrecipient's Name: Board of Regents, NSHE obo University of Nevada, Las Vegas				
Address: 4150 Technology Way, Suite 300		School of Dental Medicine <u>Address</u> : 4505 South Maryland Parkway				
Carson City, NV 89706-2009		Las Vegas, Nevada 89154				
Subaward Period: October 1, 2018 through June 30	), 2019	Amendment Effective Date: Upon approval by all parties.				
This amendment reflects a cha	inge to:					
Scope of Work	www.	Term	⊠ Budget			
Reason for Amendment: This a of \$68,913.	imendment de-obligates \$8	,738 from the current award for a	new not to exceed amount			
of th Amended Language: Tota	ne original subaward.	iis subaward will not exceed \$77,0 iis subaward will not exceed <b>\$68,</b> 1				
Approved Budget Categories	Current Budget	Amended Adjustments	Revised Budget			
I. Personnel	\$45,876.00	\$0.00	\$45,876.00			
2. Travel	\$0.00	\$0.00	\$0.00			
3. Operating	\$875.00	\$0.00	\$875.00			
4. Supplies	\$7,386.00	\$0.00	\$7,386.00			
5. Contractual/Consultant	\$7,944.00	(\$7,944.00)	\$0.00			
5. Training	\$0.00	\$0.00	\$0.00			
7. Other	\$8,511.00	\$0.00	\$8,511.00			
TOTAL DIRECT COSTS	\$70,592.00	(\$7,944.00)	\$62,648.00			
3. Indirect Costs	\$7,059.00	(\$794.00)	\$6,265.00			
TOTAL APPROVED BUDGET	\$77,651,00	(\$8,738.00)	-\$68,913.00			
Incorporated Documents:						

uru	<i>ier</i> , <i>i</i>	une i	unuer	signeu	undersid	and uns	amenum	ent uves	not aller,	m
conte	ents	of t	he ori	ainal s	ubaward	and all	of its atta	chments.	And Contra	

Lori M. Ciccone	Signature	Date
Executive Director UNLV Office of Sponsored Projects	Rai M. Ciccone	06/24/2019
Beth Handler Deputy Administrator, Community Health Services	Newhon for	612518
for Lisa Sherych Interim Administrator, DPBH	Kullepoin	6/25/19

#### SECTION C Budget and Financial Reporting Requirements revised on 6/19/19

Identify the source of funding on all printed documents purchased or produced within the scope of this subaward, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Division of Public and Behavioral Health through Grant Number B04MC31501 from Health Resources and Services Administration (HRSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Division nor HRSA."

Any activities performed under this subaward shall acknowledge the funding was provided through the Division by Grant Number B04MC31501 from HRSA.

Subrecipient agrees to adhere to the following budget:

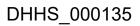
Total Personnel Costs		inc	cluding fringe	Total:		\$45,876
- Oral Health Program Suppor	t <u>Annual</u> <u>Salary</u> \$103,480.00	<u>Fringe</u> <u>Rate</u> 33.000%	<u>% of Time</u> 100.000%	Months 4	Percent of <u>Months</u> worked <u>Annual</u> 33.33%	<u>Amount</u> <u>Requested</u> \$45,876
	tal Fringe Cost Budgeted FTE	<b>\$11,383</b> 1.00000	antan <u>r</u> aka lika	Tota	Il Salary Cost:	\$34,493
Travel Operating				Total: Total:		\$0 \$875
Educational materials on oral health in pregnancy and infant oral health brochures			\$375.00			
Mailing of educational information and oral hygiene supplies to clinics in rural Nevada			\$500.00			
Supplies Inventory barcode system for portable			• •	Total:		\$7,386
dental equipment			\$3,066			
Barcode scanner cloud system: \$100/mo. X 12 months			\$1,200			
Memory card for OHP camera			\$36			
Lockboxes for Nomads required by NV Radiation Control			\$200			
Oral hygiene supplies and materials			\$200 \$1,621			
2-sided Prescription Referral Pad for Oral Health Services			\$1,200			

Patient Survey

\$63

Supplies Justification: Inventory system needed for organization of portable dental equipment library. Equipment cannot be used by other entities/state agencies/non-profits until a complete inventory is completed. Nomad handheld x-ray unit lockboxes will be installed into OHP trailers per NV Radiation Control guidelines.

Agency Ref#: HD 17057-1



	NOTICE OF	JUBAWARD		
Equipment			Total:	\$0
N/A		\$0,00		
Contractual		φ0,00		\$0
N/A		Total	\$0	
Training		10101	Total:	\$0
N/A		\$0.00	(oturi)	Ψŭ
<u>Other</u>			Total:	\$8,511
Cell Phone: \$52/mo. x 4 months	\$208			
Long Distance: \$2.50/mo. x 4 months	\$10			
State Phone Line & Voicemail:				
\$10.39/mo. x 4 months	\$42			
Email: \$14.57/mo. x 4 months	\$58			
Office 365 license: \$184 annual				
subscription	\$184			
Printing Services: \$100/mo. x 9				
months	\$900			
Copier/Printer Lease: \$75/mo. x 9	<b>A</b> A75			
months	\$675			
Postage: \$100/mo. x 9 months	\$900			
Conference Calls: \$50/mo. x 9 months				
	\$450			
Room rental for medical staff and	<b>φ</b> +00			
hospitals for oral health training in rural				
Nevada: ~\$140 per training	\$700			
	ψιου			
Misc. presentation handouts and office				
supplies	¢105			
	\$125			
Professional National and State				
Memberships (NPHA, MSDA, ASTDD,	ф <b>4</b> ОСО			
NDA, NDHA, AAPHD)	\$4,259			

Indirect Charges Indirect Rate: 10.000% \$6,265
Indirect Methodology: Federally approved indirect rate x modified total direct costs (MTDC). If the subrecipient has never
received a negotiated rate, a de minimis rate of 10% of MTDC may be used per 2 CFR § 200.414 Indirect (F&A) costs.

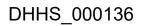
TOTAL BUDGET	Total:	\$68,913

- Division of Public and Behavioral Health policy allows no more than 10% flexibility of the total not to exceed amount of the subaward, within the approved Scope of Work/Budget. Subrecipient will obtain written permission to redistribute funds within categories. Note: the redistribution cannot alter the total not to exceed amount of the subaward. Modifications in excess of 10% require a formal amendment.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It is the Policy of the Board of Examiners to restrict contractors/ Subrecipients to the same rates and procedures allowed State Employees. The State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions (State Administrative Manual 0200.0 and 0320.0).

**TOTAL DIRECT CHARGES** 

Agency Ref#: HD 17057-1

\$62,648



#### The Subrecipient agrees:

To request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subaward period.

- Total reimbursement through this subaward will not exceed \$68,913;
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred;
- Additional expenditure detail will be provided upon request from the Division.

Additionally, the Subrecipient agrees to provide:

- A complete financial accounting of all expenditures to the Division within 30 days of the <u>CLOSE OF THE</u> <u>SUBAWARD PERIOD</u>. Any un-obligated funds shall be returned to the Division at that time, or if not already requested, shall be deducted from the final award.
- Any work performed after the BUDGET PERIOD will not be reimbursed.
- If a Request for Reimbursement (RFR) is received after the 45-day closing period, the Division may not be able to provide reimbursement.
- If a credit is owed to the Division after the 45-day closing period, the funds must be returned to the Division within 30 days of identification.

#### The Division agrees:

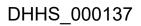
- To ensure successful completion of this project, such as:
  - Providing technical assistance, upon request from the Subrecipient;
  - Providing prior approval of reports or documents to be developed;
  - Forwarding a report to another party.
- The Division reserves the right to hold reimbursement under this subaward until any delinquent forms, reports, and expenditure documentation are submitted to and accepted by the Division.

#### Both parties agree:

- The Subrecipient will, in the performance of the Scope of Work specified in this subaward, perform functions and/or activities that could involve confidential information; therefore, the Subrecipient is requested to fill out Section G, which is specific to this subaward, and will be in effect for the term of this subaward.
- All reports of expenditures and requests for reimbursement processed by the Division are SUBJECT TO AUDIT.
- This subaward agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subaward, provided the termination shall not be effective until <u>30 days</u> after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Division, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

#### Financial Reporting Requirements

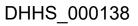
- A Request for Reimbursement is due on a <u>monthly</u> basis, based on the terms of the subaward agreement, no later than the 15<sup>th</sup> of the month.
- Reimbursement is based on actual expenditures incurred during the period being reported.
- Payment will not be processed without all reporting being current.
- Reimbursement may only be claimed for expenditures approved within the Notice of Subaward.



# STATE OF NEVADADEPARTMENT OF HEALTH AND HUMAN SERVICESAgency Ref #:HD 17057-1DIVISION OF PUBLIC AND BEHAVIORAL HEALTHBudget Account:3220/3222NOTICE OF SUBAWARDGL:8648SECTION DDraw #:-----Request for Reimbursementrevised on 6/19/19-----

<b>Program Name</b> : Oral Health Prevention and Health Prom Child, Family and Communit	otion Section (CDF	PHP); Bureau of	<u>Subrecipient Name</u> : Board of Regents, NSHE obo University of Nevada, Las Vegas School of Dental Medicine					
Address: 4150 Technology Way, Suite Carson City, NV 89706-2009 Subaward Baried			<u>Address</u> : 4505 South Maryland Parkway Las Vegas, Nevada 89154					
Subaward Period: October 1, 2018 through Jun	e 30, 2019			<b>\:</b> 86-6000024 #: D35000824				
D.			D REQUEST FOI expenditure repor	t/back-up)				
1. Personnel	\$45,876.00	\$0.00	\$0.00	Calendar \$0.00		0.0%		
2. Travel	\$0.00	\$0.00	\$0.00	\$0.00	\$45,876.00 \$0.00	-		
3. Operating	\$875.00	\$0.00	\$0.00	\$0.00	\$875.00	0.0%		
4. Supplies	\$7,386.00	\$0.00	\$0.00	\$0.00	\$7,386.00	0.0%		
5. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	_		
6. Contractual/Consultant	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-		
7. Training	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-		
8. Other	\$8,511.00	\$0.00	\$0.00	\$0.00	\$8,511.00	0.0%		
9. Indirect	\$6,265.00	\$0.00	\$0.00	\$0.00	\$6,265.00	0.0%		
Total	\$68,913.00	\$0.00	\$0.00	\$0.00	\$68,913.00	0.0%		
I, a duty authorized signatory for the applicant, certify to the best of my knowledge and belief that this report is true, complete and accurate; that the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the grant award; and that the amount of this request is not in excess of current needs or, cumulatively for the grant term, in excess of the total approved grant award. I am aware that any false, fictitious or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims, or otherwise. I verify that the cost allocation and backup documentation attached is correct.								
Authorized Signature		Title FOR DIVISION	USE ONLY		Date			
Is program contact required?	Yes							
Reason for contact:		-						
Fiscal review/approval date:	<u></u>							
Scope of Work review/approv	al date:							
Scope of Work review/approval date:ASO or Bureau Chief (as required):Date								

Agency Ref#: HD 17057-1



## **CERTIFICATE OF CUSTODIAN OF RECORDS**

I, Debi Reynolds, swear and state under penalty of perjury the assertions of this affidavit are true.

1. I am the Custodian of Records or other person authorized to make this certification and have knowledge of the records and documents of the Nevada Department of Health and Human Services.

2. On or about February 24, 2021, the Nevada Department of Health and Human Services received a subpoena requesting the production of records pertaining to Antonina Capurro, DMD.

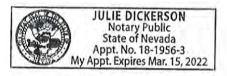
3. I have examined the original of those records and have made or caused to be made a true and exact copy of them and the reproduction of them attached is true and complete as of March 3,2021.

Debi Reynolds

STATE OF NEVADA ) COUNTY OF Carson ) ss Signed and Sworn to before me this 3<sup>rd</sup> day of <u>Morch</u>, 2021

110

NOTARY PUBLIC



## **Martha Framsted**

From:	Tawny Chapman <tawny.chapman@dhhs.nv.gov></tawny.chapman@dhhs.nv.gov>
Sent:	Friday, November 20, 2020 4:48 PM
To:	Antonina Capurro
Subject:	RE: Here's what I will send today

Of course, have a great weekend!

Thank you,

Tawny Chapman Executive Assistant to Director Richard Whitley Nevada Department of Health and Human Services Director's Office 4126 Technology Way, Suite 100 | Carson City, NV 89706 T: (775) 684-4003 | F: (775) 684-4010 | E: <u>tawny.chapman@dhhs.nv.gov</u> www.dhhs.nv.gov

Helping People. It's who we are and what we do. Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Friday, November 20, 2020 4:47 PM To: Tawny Chapman <tawny.chapman@dhhs.nv.gov> Subject: Re: Here's what I will send today

Thank you for your help, Tawny.

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Richard Whitley <<u>rwhitley@dhhs.nv.gov</u>> Sent: Friday, November 20, 2020 4:37 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Cc: Tawny Chapman <<u>tawny.chapman@dhhs.nv.gov</u>> Subject: RE: Here's what I will send today

Whew...so I'm good to send?



Richard Whitley, Director Nevada Department of Health and Human Services 4126 Technology Way, Suite 100, Carson City, NV 89706 T: (775) 684-4008 E: <u>rwhitley@dhhs.nv.gov</u> www.dhhs.nv.gov

Latest Nevada COVID-19 information: <u>https://nvhealthresponse.nv.gov/</u>

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>>\_\_\_\_\_ Sent: Friday, November 20, 2020 4:37 PM To: Richard Whitley <<u>rwhitley@dhhs.nv.gov</u>> Subject: Re: Here's what I will send today

Nevermind it is. Thank you!

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Friday, November 20, 2020 4:35 PM To: Richard Whitley <<u>rwhitley@dhhs.nv.gov</u>> Subject: Re: Here's what I will send today

Did you get this version?

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Richard Whitley <<u>rwhitley@dhhs.nv.gov</u>> Sent: Friday, November 20, 2020 4:34 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: Here's what I will send today

Sleve Sisolak Governor



# Department of Health and Human Services

Director's Office Helping people, It's who we are and what we do.



Richard Whilley, MS Director

November 20, 2020

Frank DiMaggio Executive Director, Nevada State Board of Dental Examiners 6010 S. Rainbow Blvd. Bldg. A, Ste 1 Las Vegas, NV 89118

Dear Mr. DiMaggio:

This letter is to verify Antonina Capurro, DMD, MPH, MBA has entered into a contract with the Nevada System of Higher Education to provide instruction and dental education to the citizens of Nevada and currently holds the title of Visiting Assistant Professor within the University of Nevada, Las Vegas.

Dr. Capurro's employment is through the University of Nevada, Las Vegas School of Dental Medicine (UNLV, SDM) in fulfillment of a contract with the Nevada Department of Health and Human Services, Division of Public and Behavioral Health. In this role, Dr. Capurro is expected to provide instruction and dental education to both dental and dental hygiene students, medical professionals, legislators, and Division staff.

Additionally, Dr. Capurro has been approved and was accepted into a Dental Public Health Residency Program through A.T. Still University. She has been appointed to a position within the Nevada Oral Health Program currently housed within UNLV, SDM to complete the dental public health residency internship, practicum, and research project. Verification of active enrollment and appointment to the position as a dental public health resident in a program of study through A.T. Still University which will be completed within the Nevada Oral Health Program been completed. She is working as both an intern and a resident through her current position at the University of Nevada, Las Vegas School of Dental Medicine in the Nevada Oral Health Program. Dr. Capurro's UNLV SDM faculty advisors for this residency program include: Dr. David Cappelli, Associate Dean of Community Engagement, and Dr. Christina Demopoulos, Associate Professor of Biomedical Sciences. Per the program's CODA accreditation requirements, Dr. Capurro's internship with the DPBH Oral Health Program, and subsequent completion of the Dental Public Health Residency Program, will end on July 31,2021.

I request the immediate reactivation of Dr. Capurro's limited license to fulfill her obligations with the Department of Health and Human Services, Division of Public and Behavioral Health and in completion of her internship and residency status.

Sincerely,

Ridw

Richard Whitley, MS Director

Cc: Phil Su, Dental Board General Counsel

DHHS 000143 of 2

## **Martha Framsted**

Tawny Chapman <tawny.chapman@dhhs.nv.gov></tawny.chapman@dhhs.nv.gov>
Friday, December 11, 2020 4:22 PM
Antonina Capurro
RE: Request for Letter for UNLV [no encryption]
DHHS_OHP_ATSTIII.pdf

Hi Dr. Capurro,

Please see attached letter. Have a great rest of your day!

Thank you,

Tawny Chapman Executive Assistant to Director Richard Whitley Nevada Department of Health and Human Services Director's Office 4126 Technology Way, Suite 100 | Carson City, NV 89706 T: (775) 684-4003 | F: (775) 684-4010 | E: <u>tawny.chapman@dhhs.nv.gov</u> www.dhhs.nv.gov

Helping People. It's who we are and what we do. Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Friday, December 11, 2020 2:58 PM To: Tawny Chapman <tawny.chapman@dhhs.nv.gov> Subject: Re: Request for Letter for UNLV [no encryption]

Hi Tawny,

Thank you for your help with this request. Would you please email me a copy of the signed document? Best regards, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Richard Whitley <<u>rwhitley@dhhs.nv.gov</u>>
Sent: Friday, December 11, 2020 2:49 PM
To: Antonina Capurro <<u>acapurro@health.nv.gov</u>>
Cc: Ihsan Azzam <<u>iazzam@health.nv.gov</u>>; Shannon Litz <<u>sdlitz@dhhs.nv.gov</u>>; Tawny Chapman
<<u>tawny.chapman@dhhs.nv.gov</u>>
Subject: Re: Request for Letter for UNLV [no encryption]

Absolutely! Tawny will get it out today.

Thank you, Richard

On Dec 11, 2020, at 1:30 PM, Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote:

Good Afternoon Director Whitley,

I hope this email finds you well.

UNLV's Compliance Officer, Mr. Ron Blaze, has requested written approval from you that references my completion of the residency requirements within the State Oral Health Program.

While I have been working with the UNLV Associate Dean of Community Engagement, the compliance officer would like something official so that they can verify your acknowledgment of my work.

To streamline this request, attached is a draft letter. This language mirrors the letter that was submitted to the dental board. If you would please send me a signed and revised version, I would appreciate it.

Thank you, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do. Sleve Sisolak Governor



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Director's Office Helping people. It's who we are and what we do.



Richard Whilley, MS Director

December 11, 2020

Ron Blaze Director of Compliance University of Nevada, Las Vegas 1001 Shadow Lane Las Vegas, NV 89106

Dear Mr. Blaze:

This letter is to verify Antonina Capurro, DMD, MPH, MBA has been approved and was accepted into the Dental Public Health Residency Program through A.T. Still University. Dr. Capurro received Department support for her application into this program of study. Confirmation of active enrollment and appointment to the position as a dental public health resident in a program of study through the university, which will be completed within the Nevada Oral Health Program, has been completed. Within her appointment as the State Dental Health Officer, Dr. Capurro is completing the dental public health residency internship, practicum, and research project requirements. Her residency internship has been funded through a grant with the Nevada Department of Education and focuses on oral health surveillance and education for children in licensed child care facilities in rural Nevada.

Dr. Capurro's work as both an intern and a resident through her current position at the University of Nevada, Las Vegas, School of Dental Medicine in the Nevada Oral Health Program will increase the knowledge base of the State program and enhance the profile of the program. Dr. Azzam, Nevada's Chief Medical Officer, provides supervision of the Nevada Oral Health Program and receives updates on the program and this residency work by Dr. Capurro.

Dr. Capurro's UNLV SDM faculty advisors for this residency program include: Dr. David Cappelli, Associate Dean of Community Engagement, and Dr. Christina Demopoulos, Associate Professor of Biomedical Sciences. Per the residency program's

Commission on Dental Accreditation (CODA) requirements, Dr. Capurro's internship with the Division of Public and Behavioral Health Oral Health Program, and subsequent graduation from the Dental Public Health Residency Program, will occur at the end of July 2021.

Dr. Capurro has Department support to complete this dental public health residency course of study and internship and residency requirements through her role as the State Dental Health Officer.

Sincerely,

Lawner

Richard Whitley, MS Director

DHHS 000146 of 1

# **Martha Framsted**

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Filday, December 11, 2020 S.01 PM
To:	Ron Blaze
Cc:	Lily Garcia
Subject:	Re: Termination of Remote Activity [no encryption]
Attachments:	JREAA_Capurro_ATSU.pdf; CGHS MOA - Board of Regents of NV System of Higher
	Ed.pdf; IRBNetDocument.Decision.Letter.pdf; Exempt Research Form -
	NDE.OHP.UNLV.REVIEW.pdf; APE Learning Agreement, CAD 09242020 final.Signed4.pdf; DHHS_OHP_ATSTIII.pdf

# Good Afternoon Mr. Blaze,

Yes, the residency internship and research requirements were approved by Dr. Ihsan, Nevada Chief Medical Officer, to be part of my official duties and were discussed and reviewed with Dr. Cappelli. This arrangement has allowed the projects completed in the Oral Health Program as part of the residency program to gain additional support and guidance. Attached are several documents including a letter from the Director of the Department of Health and Human Services (DHHS). What is not included is the grant I was awarded for the oral health surveillance project which is part of the residency research. I don't have a copy of the contract between the Department of Education and UNLV readily available, but the contract number is 22479.

I must note how personally thankful I am to UNLV for their support of my residency work. For many years, I have been a member of Dr. Demopolous' workgroup to establish a dental public health residency program here at SDM, but there have been many obstacles to implementation. Thankfully in June, the Oral Health Program was able to grant SDM the funding needed to proceed with a CODA application. That program will be key to increasing the dental public health workforce in our state. Since the program is not yet available, I have appreciated the opportunity to complete my residency requirements here at SDM with support from Drs. Cappelli and Demopolous and DHHS.

If additional details or information are needed, do not hesitate to contact me. Best regards, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 [F: (702)774-2521 [E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Ron Blaze <ron.blaze@unlv.edu> Sent: Friday, December 11, 2020 11:40 AM To: Antonina Capurro <acapurro@health.nv.gov> Cc: Lily Garcia <lily.t.garcia@unlv.edu> Subject: Re: Termination of Remote Activity

Dr. Capurro,

Greetings.

Thank you for the information. Do you have official correspondence from the Board that explains this "anomaly"? If so, please forward it to me.

I am not familiar with your participation in the dental health public residency program participation at A.T. Still University. Please forward me the MOU between A.T. Still and UNLV that you reference, as I have not seen that document.

Please forward me the written approval from Director Whitley that you reference regarding your use of State Oral Health Program resources to support completion of the residency requirements.

I am not clear on how this residency program interacts with your position as State Dental Health Officer and the State Oral Health Program. Is this residency now a part of your official duties? Apart from the above-referenced MOU, are there any other documents that define the scope of your participation in this program with regards to your position at UNLV? If yes, then please forward to me the applicable documents. Thank you. – RB

On Thu, Dec 10, 2020 at 11:04 AM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Greetings Mr. Blaze,

I am writing to provide you with additional information as requested. This situation is an anomaly as the expiration did not come as a result of disciplinary action or any Board proceedings. As such, my license will continue as it has since 2014 to be limited to the duties and tasks associated with my position at UNLV SDM. Dean Garcia's October memo limits my scope of practice to dental public health research to complete open mouth screenings. My current position is administrative, focused on education and research. I am not in the clinic and do not treat patients. This situation and my job duties have been recently reviewed with Dr. Cappelli.

As you may know, I am completing a dental public health residency program at A.T. Still University with onsite requirements and the residency internship under the supervision of Drs. Cappelli and Demopolous as outlined in an MOU between A.T Still University and UNLV. Director Whitley, Director of DHHS, has additionally approved the use of State Oral Health Program resources to support completion of the residency requirements. Currently, my license is active and in good standing with an expiration date of June 2021. The dental public health residency program will qualify me for a specialty license in the summer of 2021.

Should you need any further information, please do not hesitate to contact me. Best regards, Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Ron Blaze <<u>ron.blaze@unlv.edu</u>> Sent: Thursday, November 26, 2020 7:19 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Cc: David Cappelli <<u>david.cappelli@unlv.edu</u>>; Lily.Garcia <<u>lily.t.garcia@unlv.edu</u>> Subject: Re: Termination of Remote Activity

Dr. Capurro,

Greetings. This situation involving your license is quite uncommon and requires more information than what is posted on the website. At your earliest convenience, please provide the notification from the Board outlining terms of license reinstatement, i.e. unconditional or pending further requirements and/or Board proceedings . Thank you. --RB

On Wed, Nov 25, 2020 at 4:01 PM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Good Afternoon,

I am writing to inform you that my license was reactivated effective today. The website changes may not go into effect until tomorrow, and I would be happy to provide a screen shot, if needed.

I appreciate your support and patience as this issue was addressed. As planned, I look forward to meeting with you next week.

Have a wonderful Thanksgiving, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: David Cappelli <<u>david.cappelli@unlv.edu</u>> Sent: Friday, November 20, 2020 2:51 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Cc: Lily Garcia <<u>lily.t.garcia@unlv.edu</u>>; RON BLAZE <<u>ron.blaze@unlv.edu</u>> Subject: Termination of Remote Activity

Hello Dr. Capurro:

I became aware earlier this afternoon that your license to practice dentistry in the State of Nevada has expired. Effective immediately, you are not to provide dental screenings or provide any dental preventive services to children in the completion of the DOE grant or the State Department of Oral Health Program. I am asking that you cease the practice of dentistry immediately and until further notice.

You should return from your travels as soon as possible. There is no longer a need for you to be in Northern Nevada for grant purposes. I hope that the issue will be straightened out soon, but until then, I am asking that you stop any and all practice of dentistry.

Regards,

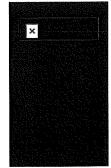
David Cappelli



David P. Cappelli DMD MPH PhD Associate Dean for Community Engagement University of Nevada, Las Vegas School of Dental Medicine

david.cappelli@unlv.edu Office: 702-774-2622

<u>unlv.edu</u>



Ron M. Blaze, Esq. Chief Compliance Officer Title IX Deputy Coordinator School of Dental Medicine University of Nevada, Las Vegas Email: <u>ron.blaze@unlv.edu</u> Office: 702-774-2510 Web • <u>Twitter</u> • <u>Facebook</u> • <u>Instagram</u> • <u>YouTube</u>



Ron M. Blaze, Esq. Chief Compliance Officer

# Department of Public Health Applied Practice Experience Learning Agreement

- The student should complete this document in consultation with the Site Preceptor and the Practicum Coordinator.
- -Do-not-sign or upload into Canvas until the agreement is approved (via email) by the Practicum Coordinator.
- Please complete

# Student Name: Dr. Antonina Capurro

Preceptor Name: Dr. Christina Demopoulos

Site/Organization Name: NV Oral Health Program housed within the UNLV School of

**Dental Medicine** 

# Overview of Project

Provide a brief description here of your project. Summarize what you will be doing, including the purpose of your project and the expected outcomes of your specific work (roughly 500 words or so).

The Nevada Oral Health Program is concerned about the increase in dental decay amongst young children and has entered into a contract with the Nevada Department of Education to promote oral health and prevent tooth decay amongst 3-5 year olds in licensed childcare programs in rural Nevada. As the PI for this project, I will oversee the deliverables for this project which include completion of a non-invasive open-mouth basic screening survey, delivery of educational webinars for licensed childcare educators, and establishment of classroom toothbrush stations and protocols for licensed childcare centers throughout rural Nevada. As part of the practicum course, I will be responsible to create the protocol design, design all paperwork, collect and analyze data, oversee the budget, complete the open mouth screenings, and write the final report.

The virtual educational presentation will be a Nevada Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS) approved webinar. The goal of the webinar will be to educate child care workers to understand dental disease in Nevada children, what causes tooth decay and how it can be prevented, an overview of a tooth brushing program, and what an open mouth non-invasive basic screening survey is and how it is conducted.

The oral health data gathered during this project will be compared to the 2017 Head Start BSS that was completed by the Nevada Oral Health Program. The final report will highlight how income, insurance levels, and access to care impact decay levels in children enrolled in Head Start Centers compared to licensed childcare facilities in equally remote areas of rural Nevada which are also classified as dental HPSAs.

# Deliverables, Tasks, and Competencies

For your practice experience you must create a minimum of two high quality products that are useful to the host organization, which together address at least five competencies in total (minimum of 3 must be foundational).

List the products you will create for the Applied Practice Experience, the tasks that will lead to the creation of those products, and the competencies that will be demonstrated. The list of competencies is at the end of this document.

A product should be a thing rather than an activity. For example, you might list a PowerPoint presentation or an educational curriculum rather than saying you will educate some group. Also, certain types of things might be hard to submit (for example an event) but if you are helping develop an event, then what product(s) will be created as part of that process that can demonstrate the work you did in that process?

Next, the "tasks" should be steps necessary to achieve the product/thing. List some major steps required to create this product. The tasks should help you identify the competencies that you will demonstrate.

Lastly, identify the competencies that clearly connect with the tasks and the product. Think of each competency as a type of specific skill or activity that your product (and tasks) must demonstrate that you have applied or engaged in. The tasks you list can help us judge if the competency is likely to be used to make the product.

Product Created	Primary Tasks Necessary to Create Product	Competencies Demonstrated (please list competency and its number from the list below)
Product #1: Develop four, comparable, webinars to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Nevada Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.	<ul> <li>Identify information and state data of interest to this audience</li> <li>Create a powerpoint presentation</li> <li>Develop pre and post electronic presentation survey</li> <li>Apply to QRIS for webinar approval</li> <li>Schedule webinar dates with interested facilities</li> <li>Present health equity, oral health education, and project overview information through</li> </ul>	<ol> <li>Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels.</li> <li>Select communication strategies for different audiences and sectors.</li> <li>Communicate audience- appropriate public health content, both in writing and through oral presentation.</li> <li>Lead collaborations on</li> </ol>

# A.T. STILL UNIVERSITY COLLEGE OF GRADUATE HEALTH STUDIES ATSU

	webinar.	oral and public health issues.
Product #2: Create a database of oral health data from 3-5 year old children from licensed childcare facilities in rural Nevada.	<ul> <li>Call licensed childcare facilities and gather rough data on number of children in facility.</li> <li>Meet with ASTDD for technical assistance to design sample size.</li> <li>Review budget</li> <li>Design travel schedule and make all travel arrangements within budgetary constraints</li> <li>For sites included in the study, create and mail packet of information to sites ahead of the screening. This will include letters to parents and the screening consent forms.</li> </ul>	<ol> <li>Select quantitative and qualitative data collection methods appropriate for a given public health context.</li> <li>Assess population needs, assets and capacities that affect communities' health</li> <li>Design a population-based policy, program, project or intervention</li> <li>Explain basic principles and tools of budget and resource management</li> <li>Select methods to evaluate public health programs</li> </ol>
	<ul> <li>Have all materials vetted by the Nevada DOE</li> <li>Design screening form, take-home finds form, and dental resource sheet.</li> <li>Schedule visits and screen children with positive consent forms.</li> <li>Provide OHI education and hygiene kits to all children</li> </ul>	
Product #3: Create a formal report that can live on the Nevada Oral Health Program webpage and inform the public of the results of the rural Nevada licensed childcare oral health survey.	<ul> <li>in the classroom.</li> <li>Complete data analysis</li> <li>Organize survey results from webinars</li> <li>Write formal report based on format from 2017 Nevada Head Start Oral Health Survey document.</li> <li>Design dissemination plan</li> </ul>	<ol> <li>Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.</li> <li>Interpret results of data analysis for public health research, policy or practice.</li> <li>Apply and evaluate evidence to address oral health issues for individuals and populations</li> <li>Evaluate systems of care that impact oral health</li> </ol>

Product #4:Present a powerpoint presentation of project results for the Advisory Committee on the State Program for Oral Health(AC4OH).	<ul> <li>Identify highlights of formal report</li> <li>Develop powerpoint presentation</li> <li>Schedule presentation for June 2021 AC4OH meeting.</li> </ul>	<ol> <li>Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.</li> <li>Advocate for political, social or economic policies and programs that will improve health in diverse populations.</li> </ol>

A.T. STILL UNIVERSITY ATSU

\*\* Please add rows to this chart if you intend to deliver more than 4 products

Signatures Undownter Provent Student: Date: Preceptor Date:

te: 9-24-2020

9.22.2020

MPH Competencies

This list contains 22 Foundational Competencies (mandated by CEPH) followed by 5 MPH General Concentration Competencies and 5 MPH Dental Concentration Competencies.

- For the APE students must produce a minimum of two products (you can produce more) that demonstrate a minimum of five competencies in total (not five for each product). At least three of the five competencies demonstrated must be Foundational (rather than General or Dental Concentration).
- MPH students in the General Concentration (all those not in the Dental Concentration) can use up to two General Concentration Competencies if desired.
- MPH students in the Dental Concentration can use up to two Dental Concentration Competencies if desired.

# A.T. STILL UNIVERSITY COLLEGE OF GRADUATE HEALTH STUDIES ATSU

# **Evidence-based Approaches to Public Health (Foundational)**

- 5. Apply epidemiological methods to the breadth of settings and situations in public health practice.
- 6. Select quantitative and qualitative data collection methods appropriate for a given public health context.
- 7. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate.
- 8. Interpret results of data analysis for public health research, policy or practice.

# Public Health & Health Care Systems (Foundational)

- 9. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings.
- 10. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels.

# Planning & Management to Promote Health (Foundational)

- 11. Assess population needs, assets and capacities that affect communities' health
- 12. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs.
- 13. Design a population-based policy, program, project or intervention
- 14. Explain basic principles and tools of budget and resource management
- 15. Select methods to evaluate public health programs

# **Policy in Public Health (Foundational)**

- 16. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence.
- 17. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes.
- 18. Advocate for political, social or economic policies and programs that will improve health in diverse populations.
- 19. Evaluate policies for their impact on public health and health equity.

# Leadership (Foundational)

- 20. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision-making.
- 21. Apply negotiation and mediation skills to address organizational or community challenges.

# **Communication (Foundational)**

# A.T. STILL UNIVERSITY COLLEGE OF GRADUATE HEALTH STUDIES ATSU

- 22. Select communication strategies for different audiences and sectors.
- 23. Communicate audience-appropriate public health content, both in writing and through oral presentation.
- 24. Describe the importance of cultural competence in communicating public health content.

# **Interprofessional Practice (Foundational)**

25. Perform effectively on interprofessional teams.

# Systems Thinking (Foundational)

26. Apply systems thinking tools to a public health issue.

# General MPH Concentration Competencies (not Foundational) \* These can only be used by students not in the dental track.

- 27. Analyze the significance of public health journal articles
- 28. Use theory, principles and perspectives to analyze the ethical dimensions of public health problems.
- 29. Apply health behavior models to address needs in a priority population.
- 30. Demonstrate approaches to assess, prevent, and control environmental and/or occupational health hazards.
- 31. Evaluate organizational structures, culture, and political factors, to initiate and sustain organizational change

# Dental Concentration Competencies (Not Foundational) \* These can only be used by students in the dental track.

- 32. Integrate the social determinants of health into dental public health practice.
- 33. Demonstrate ethical decision-making in the practice of dental public health
- 34. Apply and evaluate evidence to address oral health issues for individuals and populations
- 35. Lead collaborations on oral and public health issues
- 36. Evaluate systems of care that impact oral health

# UNIV

# UNLV Biomedical IRB - Administrative Review Notice of Excluded Activity

	DATE:	October 12, 2020
	TO: FROM:	Antonina Capurro, DMD,MPH,MBA UNLV Biomedical IRB
· · · · · · · · · · · · · · · · · · ·	PROTOCOL TITLE: SUBMISSION TYPE:	[1641798-1] Oral Health Surveillance and Dental Education for Licensed Child Care Centers in Rural Nevada New Project
	ACTION: REVIEW DATE: REVIEW TYPE:	EXCLUDED - NOT HUMAN SUBJECTS RESEARCH October 12, 2020 Administrative Review

Thank you for your submission of New Project materials for this protocol. This memorandum is notification that the protocol referenced above has been reviewed as indicated in Federal regulatory statutes 45CFR46.

The UNLV Biomedical IRB has determined this protocol does not meet the definition of human subjects research under the purview of the IRB according to federal regulations. It is not in need of further review or approval by the IRB.

We will retain a copy of this correspondence with our records.

*Any* changes to the excluded activity may cause this protocol to require a different level of IRB review. Should any changes need to be made, please submit a Modification Form.

If you have questions, please contact the Office of Research Integrity - Human Subjects at <u>IRB@unlv.edu</u> or call 702-895-2794. Please include your protocol title and IRBNet ID in all correspondence.

Office of Research Integrity - Human Subjects 4505 Maryland Parkway . Box 451047 . Las Vegas, Nevada 89154-1047 (702) 895-2794 . FAX: (702) 895-0805 . IRB@unlv.edu

# HUMAN RESOURCES

UNLV

Date: January 27, 2021

RE: Verification of Employment for Antonina Capurro

To Whom It May Concern:

Please accept this letter as confirmation that Antonina Capurro has been employed with the University of Nevada, Las Vegas from 07/01/2004 to Present.

Currently, She holds the position title of State Dental Health Officer/Visiting Assistant Professor for UNLV School of Dental Medicine and works on a full time basis of 40hrs per week.

If you have any questions or require further information, please do not hesitate to contact me.

Sincerely,

Pamela Torres

Pamela Torres Administrative Assistant II Office of Human Resources University of Nevada, Las Vegas 4505 Maryland Parkway Las Vegas, NV 89154-1026 (702) 895-3504 - Main (702) 895-1545 - Fax pamela.torres@unlv.edu Steve Sisolak Governor



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Director's Office Helping people. It's who we are and what we do.



Richard Whilley, MS Director

December 11, 2020

Ron Blaze Director of Compliance University of Nevada, Las Vegas 1001 Shadow Lane Las Vegas, NV-89106

Dear Mr. Blaze:

This letter is to verify Antonina Capurro, DMD, MPH, MBA has been approved and was accepted into the Dental Public Health Residency Program through A.T. Still University. Dr. Capurro received Department support for her application into this program of study. Confirmation of active enrollment and appointment to the position as a dental public health resident in a program of study through the university, which will be completed within the Nevada Oral Health Program, has been completed. Within her appointment as the State Dental Health Officer, Dr. Capurro is completing the dental public health residency internship, practicum, and research project requirements. Her residency internship has been funded through a grant with the Nevada Department of Education and focuses on oral health surveillance and education for children in licensed child care facilities in rural Nevada.

Dr. Capurro's work as both an intern and a resident through her current position at the University of Nevada, Las Vegas, School of Dental Medicine in the Nevada Oral Health Program will increase the knowledge base of the State program and enhance the profile of the program. Dr. Azzam, Nevada's Chief Medical Officer, provides supervision of the Nevada Oral Health Program and receives updates on the program and this residency work by Dr. Capurro.

Dr. Capurro's UNLV SDM faculty advisors for this residency program include: Dr. David Cappelli, Associate Dean of Community Engagement, and Dr. Christina Demopoulos, Associate Professor of Biomedical Sciences. Per the residency program's

Commission on Dental Accreditation (CODA) requirements, Dr. Capurro's internship with the Division of Public and Behavioral Health Oral Health Program, and subsequent graduation from the Dental Public Health Residency Program, will occur at the end of July 2021.

Dr. Capurro has Department support to complete this dental public health residency course of study and internship and residency requirements through her role as the State Dental Health Officer.

Sincerely,

Ridwha

Richard Whitley, MS Director

# Exempt Research Application Form

### **Instructions:**

- 1. CITI certification (www.citiprogram.org) must be current at the time of protocol submission.
- Complete this application if you believe your study qualifies as exempt research based on the categories below. The ORI-HS/IRB will make the final determination of exempt research projects. The exempt determination must be granted in writing before research can begin on the project.
- 3. Exempt research must adhere to the same ethical principles governing all research.
- 4- Exempt applications must include copies of informed consent/information sheets, questionnaires/surveys, advertisements, etc.
- 5. If the IRB determines the research to be non-exempt, the project must be resubmitted with the completed Research Protocol Proposal Form to again proceed through the IRB review process.

### Note:

Ċ.

2. INCOMPLETE FORMS WILL BE RETURNED.

### 1. Duration of Study

Anticipated Time to Complete the Study: 1 year

2. Rese	earch Protocol Ti Dental Screening	tle g and Oral Health Education f	or Child Care Ce	nters in Ru	ural Ne	vada
	· · · · · · · · · · · · · · · · · · ·					
3. Inve	stigator(s) Conta	ct Information				

(The PI must be a UNLV faculty member in all cases involving studies carried out by students or fellows.)

A. Principal Investigator (Name and Credentials): ANTONINA CAPURRO (ADD YOUR CREDENTIALS HERE)

Faculty Faculty Advisor Department: Dental School

Phone Number:	<u>7027742573</u>	E-Mail Address:	antonina.capurro@unlv.edu
---------------	-------------------	-----------------	---------------------------

**B.** Student/Fellow Investigator (Name and Credentials): \_\_\_\_

Masters	

Department: \_\_\_\_\_ Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_

Protocol/Research Coordinator (Name and Credentials): Christina Demopoulos, DDS, MPH

Phone Number: 702-774-2545 E-Mail Address: christina.demopoulos@unlv.edu

Co-Principal Investigator (Name and Credentials): Jessica Woods, RDH, MPH

Faculty Department: Dental School

Phone Number: 714-292-32921 E-Mail Address: jessica.woods@unlv.edu

4. Risk Assessmen	t
-------------------	---

4.1 In order for your study to qualify as exempt, it may only involve minimal risk. By Federal Regulations at 45CFR46.102(i), "Minimal risk means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests."

Fellow

Does your study meet the definition of minimal risk as defined above? X Yes No

Exempt Research Form - NDE.OHP.UNLV.REVIEW

Please complete (if applicable)

Describe the risks to project participants (e.g., breach of confidentiality) and explain how they will be minimized, this should include a description regarding how participants' confidentiality will be protected (e.g., data collected for the study will be kept on a password protected desktop computer in a locked office). Risk to participants is minimal. This is a surveillance project and the screenings that will be conducted are very similar to dental screenings conducted in a dental office. A disposable mirror will be used along with a flashlight. The consent form has a few sensitive questions related to going to a dentist or having insurance that may be uncomfortable for some participants to answer, but are routine questions asked during similar surveillance projects or for new patients in a dental office. The data collected from the screenings will be entered into a spreadsheet on a password protected desktop computer in the PIs office at the UNLV School of Dental Medicine. The data collection instrument will not record the name of the child. A randomized number will be used as a record ID.

5. Category of Exemption: Please indicate your exemption category choice by completing the relevant categories from the list below. Please note: The Federal regulations do not permit any new categories and only the IRB may determine which research activities qualify for an exempt review.

	-KEA	ζ:		Solid box: All items in the box must be true Dotted box: One item in the box must be true	
		Cate	gory	7 1 (All of the following are true):	
-			The educ	earch conducted in established or commonly accepted educational settings research involves normal educational practices, such as (i) research on regular and special cation instructional strategies, or (ii) research on the effectiveness of or the comparison among ructional techniques, curricula, or classroom management methods	
		- <u> </u>	The	research is <b>NOT</b> subject to FDA regulation (e.g.; drug, devices, or biologics) research does <b>NOT</b> involve prisoners as participants	
		Cate	gory	<b>2</b> (All of the following are true):	
			The	research involves the use of one or more of the following: Educational tests (cognitive, diagnostic, aptitude, achievement) Survey procedures Interview procedures Observation of public behavior	
				en the research involves children as participants, the procedures are limited to: Educational tests (cognitive, diagnostic, aptitude, achievement) Observation of public behavior where the investigator(s) will <b>NOT</b> participate in the ivities being observed	
-			⊠	Participants <b>CANNOT</b> be identified, directly or through identifiers linked to the ticipants. Both of the following are true:	-
*				<ul> <li>Participants CAN be identified, directly or through identifiers linked to the participants.</li> <li>Any disclosure of the participants' responses outside the research could NOT reasonably place them at risk of criminal or civil liability or be damaging to their financial standing, employability, or reputation.</li> </ul>	
		$\boxtimes$		e research is <b>NOT</b> subject to FDA regulation (e.g.; drug, devices, or biologics) e research does <b>NOT</b> involve prisoners as participants	

	The research is <b>NOT</b> exempt under Category 2 above The research involves the use of one or more of the following	
	Educational tests (cognitive, diagnostic, aptitude, achievement)	
	Survey procedures	
	Interview procedures	
	Observation of public behavior	
	Either of the following is true	
	The participants are elected or appointed public officials or candidates for public office	
	Federal statute(s) require(s) without exception that the confidentiality of the personally	
	<ul> <li>The research is NOT subject to FDA regulation (e.g.; drug, devices, or biologics)</li> <li>The research does NOT involve prisoners as participants</li> </ul>	
	<ul> <li>prospectively collected). Indicate in protocol the data collection date range.</li> <li>At least one of the following is true:</li> <li>These sources are publicly available</li> <li>Information<sup>1</sup> is recorded in such a manner that both of the following are true:</li> <li>Participants cannot be directly identified</li> <li>Participants cannot be identified through identifiers linked to them</li> <li><sup>1</sup>Protocol must contain what information is recorded and how it is recorded.</li> </ul>	
-	The research is <b>NOT</b> subject to FDA regulation (e.g.; drug, devices, or biologics) The research does <b>NOT</b> involve prisoners as participants	
	<b>Category 5</b> $^{2}$ (All of the following are true):	
•	Category 5 (111 of the following are true).	

	<ul> <li>The project is a research or demonstration project</li> <li>The project is conducted by or subject to the approval of Department or Agency heads</li> <li>The project is designed to study, evaluate, or otherwise examine: (i) Public benefit or service</li> <li>programs; (ii) procedures for obtaining benefits or services under those programs; (iii) possible changes</li> <li>in or alternatives to those programs or procedures; or (iv) possible changes in methods or levels of</li> <li>payment for benefits or services under those programs</li> <li>The program under study delivers a public benefit (e.g., financial or medical benefits as provided under the Social Security Act) or service (e.g., social, supportive, or nutrition services as provided under the Older Americans Act)</li> <li>The project is conducted pursuant to specific federal statutory authority</li> <li>The project does not involve significant physical invasions or intrusions upon the privacy of participants.</li> <li>The research is NOT subject to FDA regulation (e.g.; drug, devices, or biologics)</li> <li>The research does NOT involve prisoners as participants</li> </ul>	
•	Category 6 (All of the following are true): The research involves a taste and food quality evaluation and consumer acceptance studies One of the following is true: Wholesome foods without additives will be consumed A food will be consumed that contains a food ingredient and both of the following are true:	-
	<ul> <li>The food ingredient is at or below the level to be safe</li> <li>The food ingredient is for a use found to be safe</li> <li>A food will be consumed that contains an agricultural chemical or environmental contaminant and one of the following is true:</li> <li>The agricultural chemical or environmental contaminant is at or below the level found to be safe by the Food and Drug Administration</li> <li>The agricultural chemical or environmental contaminant is at or below the level approved by the Environmental Protection Agency</li> <li>The agricultural chemical or environmental contaminant is at or below the level approved by the Food Safety and Inspection Service of the U.S. Department of Agriculture</li> </ul>	
-	The research is <b>NOT</b> subject to FDA regulation (e.g.; drug, devices, or biologics) The research does <b>NOT</b> involve prisoners as participants	

6. Research Team Members: List all research team members (including PI) who will have contact with subjects, have contact with subjects' data or biological samples, or use subjects' personal information. If needed, see the Additional Research Team Member Form. If you are collaborating with non-UNLV researchers, complete Supplement B: Collaborative Research with External Sites

NAME, DEPARTMENT, and INSTITUTION	ROLE IN PROTOCOL	SPECIFIC EXPERIENCE WITH ROLE IN PROTOCOL	ROLE IN CONSENT PROCESS
EXAMPLE:	EXAMPLE:	EXAMPLE:	EXAMPLE:
Dr. Chris Researcher,	Developed protocol,	Has had 7 years of conducting	Recruiting subjects, writing the
Research Department,	collecting data, analyzing	and publishing human subjects	consent form, consenting
UNLV	data, writing report	research at a university	subjects, answering questions
Dr. Antonina Capurro	PI, developed protocol,	Several years conducting	Responsible for consenting
	analyzing data and	research.Completed a similar	participants, screening
	writing report	project in 2017 which involved	patients, and storage of data

Exempt Research Form - NDE.OHP.UNLV.REVIEW

4 of 9

		a basic screening survey of children in rural Head Start sites.	
Dr. Christina Demopoulos	Research advisor	Several years conducting research, specifically survey research. Have assisted faculty and students in research projects. In this project, reviewed protocol and survey instrument. Also will assist in data collection and analysis of the data.	Review and edit consent form.Has over 30 years of experience in conducting survey research.
Jessica Woods	Co-PI	Several research projects conducted.	Responsible for screening partitcipants and entering dat -into a password protected spreadsheet.

# 7. Project Details

A. Describe the purpose of the project and how you will conduct it. *Clearly describe any procedures to be used during the conduct of the study. In addition, describe the recruitment process and include copies of all recruitment materials to be used for this study.* <u>The Nevada Division of Public and Behavioral Health (DPBH), Oral Health Program</u> <u>currently housed through contract (C 23271) at the UNLV School of Dental Medicine has received a grant from the</u> <u>Department of Education's Office of Early Learning and Development (C22479) to conduct a dental surveillance</u> <u>prroject in Nevada's rural licensed childcare centers. This will be accomplished through a written questionnaire given</u> <u>to the parents (part of the consent form) and through an "open-mouth" screening conducted with parental consent on</u> <u>children in licensed childcare facilities.</u>

The purpose of this study is to evaluate the oral health status of children receiving care from licensed childcare centers in rural Nevada. A similar project was completed by the Nevada Oral Health Program in 2017 and 2018 when the oral health status of children in rural Head Start programs was assessed. Aggregate results of this study will be compared to the reports from the 2018 Head Start oral health assessment.

In Nevada, licensed childcare facilities fall into three categories based on their size: center, group care home, or family care homes. For this study, 91 licensed childcare facilities were identified within the target geographic location of rural Nevada. Facilities that are categorized as either a center or group care home and having a minimum of 10 children enrolled will be included in the study. A biostatistician from the Association of State and Territorial Dental Directors has been contracted to assist in the project design. Facilities will be called to determine the number of children in their facility and their willingness to participate. For sites that meet the project criteria and are interested in participating, a welcome letter will be mailed to them. The letter will include information on the project and an oral health webinar. The webinar is offered as an educational component and will be approved by the Nevada registry to allow teachers to receive continuing education credits.

<u>A controlled statewide assessment of this magnitude has not been performed previously and will provide healthcare</u> policy makers with unprecedented information on the extend and severity of dental disease of children in licensed childcare facilitates in both rural and urban areas throughout our State. The project goal is to gather aggregate data

5 of 9

that will focus programs and State funds to improve oral health care by increasing the number of young children with dental "homes" and in turn decrease the number of children with untreated tooth decay.

To reach this goal, the DPBH will be offering free dental screenings to all children in licensed childcare centers in the identified geographic areas (three to five years of age) with signed parental consent. Parents may also indicate on the consent form if they wish for their child to receive a free fluoride varnish application. The screening will be conducted by a licensed dental professional and should take about five minutes per child. Following the screening, children will receive a dental hygiene bag with a toothbrush, toothpaste, floss, written take-home findings for the parents, and a local dental clinic directory for treatment of dental issues identified during the screening.

All consent forms will be mailed in advance to the childcare facility for distribution to parents. While the name of screened children may be shared with the childcare facility center administrator for follow-up, no individual child will be identified in any reports. Only aggregate results will be reported (e.g., from centers, counties, or regions). Participating childcare centers will be the first to receive such reports.

This study involves only minimal risk as it meets the definition set by the Federal Regulations at 45CFR46.102, "Minimal risk means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests."

This study involves the placement of fluoride varnish. Fluoride varnish application will be applied as a secondary goal of the study. The parental questionnaire will collect information that will assist the licensed dentist or hygienist in determining the child's risk of dental disease, allergy status, and will include separate parental consent for participation in either the oral health screening participation and/or fluoride varnish application. If a parent indicates that the child has asthma, an allergy to pine nut or any nut allergy, and/or takes fluoride tablets at home, the child will not be given a fluoride application as part of this project regardless of consent status. A fluoride brochure, oral health tips pamphlet and take-home findings sheet with each child's need for treatment will be disseminated to the child's guardian at the conclusion of the oral health screening. The take home paperwork will also include the phone number of the State Dental Health Officer who will be available to answer additional questions should they arise after the conclusion of the study.

Furthermore, this study requires only nominal participant involvement as the parental consent form will take less than five minutes to complete and the screening performed on children in licensed childcare facilities will take approximately 5 minutes to complete. The parental consent form includes a brief questionnaire and a parental permission section that allows the parent to either accept or withhold their child's participation in the study. Participation in the study is voluntary and a parent may withdraw consent at any time. Administrators, site coordinators, parents, and teachers are encouraged to ask questions about this study at the beginning or any time during the research period. In addition, risks to study participants are minimized as data collected as part of the study will be kept in password protected State issued computer within the Division of Public and Behavioral Health, Oral Health Program. The de-identified data will be sent to the Association of State and Territorial Dental Directors for analysis via an encoded file. Only aggregate data will be reported and used. Data will be maintained for 3 years and subsequently destroyed.

The parental consent form includes the statement "I understand that the results of this screening may be shared with the Nevada Department of Health and Human Services, licensed childcare facility, Nevada Department of Education, and with dental providers for my child." (see attached). Lists of children with dental needs will be shared with site coordinators at licensed childcare facilities to facilitate parents in finding local dental care for their child. Care coordinator will also be provided.

While screening out in the field, consent and screening forms for the rural sites will be placed in a locked compartment of the suitcase used for this project's supplies. Data will be kept in a locked file cabinet at State Offices in Carson City and/or Reno until data entry and analysis is complete. Names of children will be struck from the consent forms before the data is analyzed. No home addresses will be collected; only licensed childcare center codes to help us identify greatest areas of decay and consequent need. Data collected as part of the study will be kept in password protected State issued computer within the Division of Public and Behavioral Health, Oral Health Program. De-identified data will be sent to the Association of State and Territorial Dental Directors for analysis via an encoded file. State protocol for electronic transfer will be followed. Only aggregate data will be reported and used. Data will be maintained for 3 years and subsequently destroyed.

Compensation to subjects consists of a free screening, a free fluoride varnish application, and free patient care bag with a toothbrush, toothpaste, floss, timer, and sticker.

The administrators and teachers within the identified licensed childcare facilities are vital to encouraging completion of parental consent forms and ensuring that forms are returned in a timely manner. It is the goal of the Oral Health Program to improve return rates of consent forms by offering school incentives in the form of a \$100 gift card to Lakeshore Learning for those sites reaching a 70% response rate. The percentage of completed consent forms will be associated with forms that have a parental signature regardless of whether or not the parent accepts or denies the child's participation in the study.

<u>Gift cards will be tracked and kept in a locked area within the Division of Public and Behavioral Health, Oral Health</u> <u>Program. Gift cards will either be distributed on the day of the screening or will be mailed to qualifying site coordinators</u> <u>after the screening day.</u>

- B. Maximum number of subjects: 1500
- C. Describe study population/specimens/data to be studied (e.g., healthy adults age 18-45). Please note that research involving prisoners is not eligible for exemption; and research involving children has more restrictive exemption criteria (see letter F below for additional details). <u>3-5 year old children in licensed childcare facilities in rural</u>

<u>Nevada.</u>

- D. Describe the consent process for enrolling subjects into this study including whether an oral or written consent process will be used. <u>parerental consent is required</u>
  - D.1. If you are not obtaining consent, please provide your rationale: <u>n/a</u>
- E. Describe how the data will be protected (include location, length of time and disposition of data).
- F. If you will be using a questionnaire, survey or interview procedure, please indicate the setting where the research will take place (**NOTE**: Interview or survey research involving children cannot be exempt from IRB review.):
  - Classroom
  - 🗌 UNLV

Exempt Research Form - NDE.OHP.UNLV.REVIEW

	Subjects' home (e.g., mailed survey)
	Electronic/internet forum
	Other, please specify: licensed childcare facilities in rural Nevada
Categ	gory 4 Details (Complete if you selected category #4 in section 5 above)
	If you selected category 4 in section 5 above and your project involves the collection of data (e.g., medical records/chart review/academic records/database research), answer the following:
	Note: If you are recording identifiable information from medical records, charts, academic records, or recording the medical record number or code linking information to the medical/academic record number, the project cannot be exempted under the federal regulations. A Protocol Proposal Form must be submitted for such studies.
	a) Identify the source of the data:
	b) Provide the date range of the data to be collected. Include specific dates and state whether the data will be in existence at the time you submit this application to the IRB:
	c) Provide the estimated number of subjects whose data will be collected for the study:
:	d) Indicate how the study data will be recorded so that it is not identifiable (e.g. study data will not include direct identifiers or a code linking data to subjects' identity):
	e) Indicate who will access the medical records and how they have valid clinical access to these records (e.g., involved in the patients' care). Valid clinical access is defined as individual normally having access to the records as part of their usual clinical activities):
	f) Attach a copy of the data collection sheet that details the data that will be collected for this project. If a data collection sheet is not being attached to this application, please explain why:
Finan	icial Information
9.1	Will subjects be paid or otherwise compensated for research participation? Xes No
	If yes, please respond to the following questions:
parer	a) Describe the nature of any compensation to subjects. Include cash, gifts, research credit, etc. with positive ntal consent, subjects will receive a dental screening, fluoride varnish application, and oral hygiene kit.
<u>Licen</u>	sed childcare centers will receive a \$100 gift card to an educational store ie. Lakeshore Learning if they have
	<u>% rate of return on consent forms. The form simply needs to be returned and signed but does not need to</u> ent to treattment to be considered for the rate of return.
001100	b) Provide a dollar amount, if applicable, and indicate method of payment. <u>\$100</u>
	Cash Check Research Credit Other: <u>educational store gift card</u> c) When and how is the compensation provided to the subject? <u>to licensed childcare sites</u>
	d) What is the effect on compensation if a subject does not complete the study? <u>none</u>
9.2 I	s there any internal or external funding (e.g., grants, contracts, gifts, etc.) X Yes No If yes:
	a) Name of Sponsor or UNLV Grant Program: <u>GR10252</u> , Nevada Department of Education
	b) Attach a copy of the proposal and/or award document.

Sleve Sisolak Governor



# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Director's Office Helping people. It's who we are and what we do.



Richard Whilley, MS Director

November 20, 2020

Frank DiMaggio Executive Director, Nevada State Board of Dental Examiners 6010 S. Rainbow Blvd. Bldg. A, Ste 1 Las Vegas, NV 89118

Dear Mr. DiMaggio:

This letter is to verify Antonina Capurro, DMD, MPH, MBA has entered into a contract with the Nevada System of Higher Education to provide instruction and dental education to the citizens of Nevada and currently holds the title of Visiting Assistant Professor within the University of Nevada, Las Vegas.

Dr. Capurro's employment is through the University of Nevada, Las Vegas School of Dental Medicine (UNLV, SDM) in fulfillment of a contract with the Nevada Department of Health and Human Services, Division of Public and Behavioral Health. In this role, Dr. Capurro is expected to provide instruction and dental education to both dental and dental hygiene students, medical professionals, legislators, and Division staff.

Additionally, Dr. Capurro has been approved and was accepted into a Dental Public Health Residency Program through A.T. Still University. She has been appointed to a position within the Nevada Oral Health Program currently housed within UNLV, SDM to complete the dental public health residency internship, practicum, and research project. Verification of active enrollment and appointment to the position as a dental public health resident in a program of study through A.T. Still University which will be completed within the Nevada Oral Health Program been completed. She is working as both an intern and a resident through her current position at the University of Nevada, Las Vegas School of Dental Medicine in the Nevada Oral Health Program. Dr. Capurro's UNLV SDM faculty advisors for this residency program include: Dr. David Cappelli, Associate Dean of Community Engagement, and Dr. Christina Demopoulos, Associate Professor of Biomedical Sciences. Per the program's CODA accreditation requirements, Dr. Capurro's internship with the DPBH Oral Health Program, and subsequent completion of the Dental Public Health Residency Program, will end on July 31,2021.

I request the immediate reactivation of Dr. Capurro's limited license to fulfill her obligations with the Department of Health and Human Services, Division of Public and Behavioral Health and in completion of her internship and residency status.

Sincerely,

Thow

Richard Whitley, MS Director

Cc: Phil Su, Dental Board General Counsel

DHHS 000168 12

Notify the Nevada State Board of Dental Examiners of incorrect Nevada State Board of Dental Examiners information (702) 486-7044 or FAX (702) 486-7046 6010 S. Rainbow Blvd., Bldg. A, Ste, 1 Las Vegas, NV 89118 Nevada State Board of Dental Examiners (702) 486-7044 6010 S. Rainbow Blvd, Bldg, A, Ste, 1. Las Vegas, NV 89118 FAX (702) 486-7046 (702) 486-7044 Fax (702) 486-7046 LL-384-14 This is to Certify that Antonina Capurro Limited License Dental is entitled to Practice as a licensed Limited License Dentist

Amount Paid : \$ 200.00 Date Paid : 07/31/2020 Invoice Number : 7797

NAC 631.150 Filing of licensee's addresses; display of licenses.

1. Each licensee shall file with the Board the addresses of his permanent residece and the office or office where he conducts his practice.

2. Within 30 days after any changes occurs in any of there addresses, the licensee shall give the Board a written notice of the change. The Board will impose a fine of \$50 if a licensee does not report such a change within 30 days after it occurs.

PLEASE READ CAREFULLY

License Number: LL-384-14 Status: Active Valid from July 01, 2020 through June 30, 2021

Cut along the dotted line

3. The licensee shall display his license and any permit issues by the Board, or a copy thereof, at each place where he practices.

# Education Affiliation Agreement – Routing Coversheet Office of the Executive Vice President and Provost University of Nevada, Las Vegas

To ensure timely and efficient processing of your Educational Affiliation Agreement ("EAA"), please include this coversheet/internal routing sheet with each EAA.

A.T. Still University			na presidente antica de la construcción de la construcción de la construcción de la construcción de la constru La construcción de la construcción d		
🗆 Master Agreement 👘 🗖 Intra-Institutio	mal Agreeme	nt 🛛 Single Colleg	e/School Agreement		
College/School:	Departm				
UNLY School of Dental Medicine	Biomedic	cal Sciences			
Name of UNLV Point of Contact: Dr. David Cappelli	-	<b>Felephone Number of UNLV Point of Contact:</b> 702-774-2622			
E-mail of UNLV Point of Contact: david.cappelli@unlv.edu		SHE ID number of UNLV Point of Contact: 000030199			
Associated UNLV Units or NSHE Institutions: NA	Term of 5 years	Agreement:			
Name of Point of Contact at Affiliating Entity: Dr. Norman Gevitz		ng Entity: 6-2 <del>12</del> 1	ne Number of Point of Contact		
Names	· · · · · · · · ·	Date In:	Date Out:		
Recommending Party:	1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 -	07/22/2020	07[]		
DAVID P. CAPPELLI		- 122 1 2020	07/23/2020		
Dean of College/School: LILY T. BARCIA		27. July 2020	23 July 2020		
Ot.ice of General Counsel:		7/22/220	7/22/22-		
Vice Provost for Academic Programs:					
Javier A. Rodríguez		9/18/20 9/21/20			

Revised: November 2019

۰

-----

# A.T. Still University College of Graduate Health Studies Master of Public Health

# **Practicum Memorandum of Agreement**

This Practicum Memorandum of Agreement ("Agreement") made on this \_21st\_\_ day of \_\_July\_, 2020\_, by and between the Masters in Public Health Program, College of Graduate Health Studies, A.T. Still University ("ATSU") and \_the Board of Regents of the Nevada System of Higher Education, on Behalf of the University of Nevada, Las Vegas, School of Dental Medicine\_("Agency"); ATSU and Agency are sometimes referred to herein individually as "Party" or collectively as "Parties."

- 1. <u>Purpose of Agreement</u>. The purpose of this Agreement is to establish a practice placement site at Agency in order to offer Master of Public Health (MPH) students at ATSU the opportunity to engage in service-learning experiences. These practice experiences are meant to facilitate the application of the MPH students' knowledge, attitudes, perceptions, skills, and academic learning. In return, Agency may utilize the services of students to assist the Agency with projects and tasks that require workforce assistance.
- 2. ATSU Responsibilities. ATSU shall have the following responsibilities:
  - a. The ATSU College of Graduate Health Studies will provide the faculty member who serves as the MPH student's Practicum Faculty Advisor. The student's Faculty Practicum Advisor will be responsible for monitoring the student's academic progress and maintaining the liaison between the College of Graduate Health Studies and Agency.
  - b. The Faculty Practicum Advisor of the practicum student is responsible for assigning the final grade for the student enrolled in the Public Health Practicum course, once the practicum is completed based on the evaluation input from the practicum preceptor and the student.
  - c. The student's MPH Practicum Coordinator (and/or the Faculty Practicum Advisor) will be available for communication in order to monitor and receive updates on the practicum student's progress.
  - d. It is the responsibility of the student's Practicum Coordinator to resolve any problems or answer any questions that arise between ATSU and Agency.
- 3. <u>Responsibilities of Agency</u>. Agency shall have the following responsibilities:

Memorandum of Agreement: UNLV School of Dental Medicine Las Vegas, NV

Page 1 of 4

- a. The Agency will provide a Preceptor who will assist in establishing the learning objectives of the student and ensure that in-the-field training is given to the practicum student.
- b. The Preceptor at Agency will provide orientation for the practicum student about the Agency, its employees, how the Agency operates, and its relationships in the community.
- c. The Agency will provide ample learning opportunities for the practicum student especially those occasions that help the student meet the learning objectives that are contained in the Practicum course syllabus.
- d. The Preceptor will be available to meet regularly (weekly and/or every other week) with the practicum student throughout the practicum experience and will take time to observe the student's work and progress. The Preceptor will complete an online "Practicum Preceptor Evaluation Form".
- e. The Preceptor will help the student complete the APE Learning Agreement and will sign the APE Learning Agreement to initially approve the student project.
- 4. <u>Joint Responsibilities of the Parties</u>. The following responsibilities shall be shared by both Parties:
  - a. While this Agreement primarily concerns the practicum logistics, the Parties agree that MPH students at ATSU and the Agency will work and collaborate together as partners in advancing public health practice, education, research, and service through means such as service learning with trainings, presentations, research collaborations, and the sharing of knowledge, skills and technical assistance.
- 5. <u>Term</u>. The initial term of this Agreement shall be for one year commencing on the effective date of this Agreement and shall thereafter be automatically renewed for successive one-year terms unless either Party provides the other Party with written notice of termination at least thirty days (30) in advance.
- 6. <u>Non-Discrimination</u>. Neither party shall in connection with any aspect of this Agreement, discriminate against any person by reason of race, color, gender, religion, sexual preference/orientation, disability, national, and/or ethnic origin.
  - -
- 7. <u>Amendments</u>. This Agreement may not be altered, amended or modified except by a written document executed by both Parties.

Memorandum of Agreement: UNLV School of Dental Medicine Las Vegas, NV

Page 2 of 4

8. <u>Notices</u>. All notices given pursuant to this Agreement shall be in writing and personally delivered or sent by certified mail, postage fully paid, to:

ATSU	Agency
210A S. Osteopathy	<b>UNLV School of Dental Medicine</b>
Kirksville, MO 63501	1001 Shadow Lane
Attn: Dr. Norman Gevitz	Las Vegas, NV 89106
Thin. Dr. Horman Oevitz	Attn: Dr. Christina Demopoulos

- Severability. Should any clause or provision of this Agreement be held or ruled unenforceable or ineffective by a court of law, such a ruling will in no way affect the validity or the enforceability of any other clause or provision contained herein.
- 10. <u>No Waiver</u>. No waiver by ATSU or Agency of any breach of any term, provision or condition contained in this Agreement, or the failure to insist upon strict performance thereof shall be deemed to be a waiver of such term, provision or condition as to any subsequent breach thereof or a waiver of any other term, provision or condition contained in this Agreement. The exercise of any right or remedy hereunder shall not be deemed to preclude or affect the exercise of any other right or remedy provided herein.
- 11. Governing Law and Venue. This Agreement shall be governed by, construed and enforced in accordance with the substantive laws of the State of Missouri (but not including its conflict of laws rules if and to the extent such rules would apply the substantive laws of another jurisdiction). Venue for litigation of any dispute arising under this Agreement or any lawsuit to enforce or interpret this Agreement shall be in an appropriate court in Adair County, Missouri.
- 12. <u>Entire Agreement</u>. This Agreement constitutes the entire agreement between the Parties and supersedes any and all prior and contemporaneous oral or written understandings.

EFFECTIVE the date set forth above. Executed as of the dates below, by and between ATSU and Agency through their duly authorized officers, thereby binding themselves, their successors and assigns and representatives for the faithful and full performance of the terms and provisions of this Agreement.

APPROVED BY FOLLOWING SIGNATURES:

Dr. Norman Gevitz Senior Vice President, A.T. Still University

Recommended by: monoulos, L Associate Professor, Biomedical Sciences

Date

Memorandum of Agreement: UNLV School of Dental Medicine Las Vegas, NV

Page 3 of 4

DHHS 000173

Recommended by: Sily T. Jania Dr. Lily T. Garcia, Dean, UNLV School of Dental Medicine University of Nevada, Las Vegas Approved by: BOARD OF REGENTS OF THE NEVADA SYSTEM OF HIGHER EDUCATION, ON BEHALF OF THE UNIVERSITY OF NEVADA, LAS VEGAS -9/21/20-Rodliguag and 172 Javier Rodriguez, Ph.D. Date Vice Provost of Academic Programs-University of Nevada, Las Vegas (A copy of this signed document must be on file with ATSU-CGHS. Please email to Greg Loeben at gloeben(a.atsu.edu) Memorandum of Agreement: UNLV School of Dental Medicine Las Vegas, NV Page 4 of 4

# **Martha Framsted**

From:	judwhite@health.nv.gov
Sent:	Thursday, February 2, 2017 1:49 PM
То:	jpeek@health.nv.gov; acapurro@health.nv.gov; kmorgan@health.nv.gov
Subject:	RE: Oral Health Data Report
Attachments:	Nevada Non-Traumatic Oral Surgery Hospitalizations.pdf

Hi Julia,

Here is the report that was prepared for Cody. I have more! Could you call me when it's convenient?

Thanks,



# Judy A. White RDH, MPH

State Public Health Dental Hygienist Nevada Department of Health and Human Services Division of Public and Behavioral Health | Oral Health Program 500 Damonte Ranch Pkwy. Suite 657 |Reno, NV 89521 T: (775)350-5275 |F: (775)850-1144 |E: judwhite@health.nv.gov

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Julia Peek

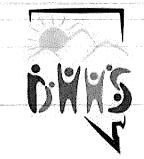
Sent: Thursday, February 2, 2017 12:47 PM

To: Antonina Capurro <acapurro@health.nv.gov>; Kyra E. Morgan <kmorgan@health.nv.gov>; Judy White <judwhite@health.nv.gov> Subject: Oral Health Data Report

Hi Ladies,

Can you shoot me a copy of the oral health report that Kyra had the had the hospital discharge billing data? Also, any other data you may have readily available. Trying to pull some info together for John Packham with the School of Medicine.

Thanks, J



# Julia Peek, MHA

Deputy Administrator, Community Services Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 | Carson City, Nevada 89706 T: (775) 684-5280 | C: (775) 250-2913 | E: jpeek@health.nv.gov www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

-Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

Non-Traumatic Oral Health Visits, Emergency Department and Inpatient Visits Nevada Residents, 2010-2014

October 2016



Office of Public Health Informatics and Epidemiology Division of Public and Behavioral Health Department of Health and Human Services

Brian Sandoval Governor State of Nevada

Richard Whitley, MS Director Department of Health and Human Services Cody L. Phinney, MPH Administrator Division of Public and Behavioral Health

John M. DiMuro, DO Chief Medical Officer Division of Public and Behavioral Health

## **Non-Traumatic Dental Health Problems**

# Purpose

The purpose of this report is to provide an overview of non-traumatic oral health related hospital visits for Nevada residents through emergency department visits and inpatient hospitalizations.

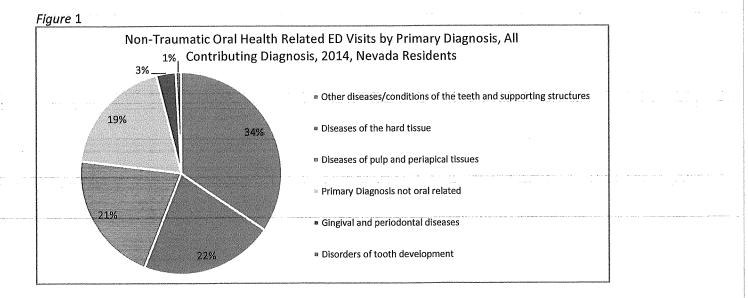
# Background Information

The Center for Health Information Analysis (CHIA) collects billing records from all emergency department and inpatient hospital admissions. The codes given in Table 1 were used to identify non-traumatic oral health hospital visits. "Primary diagnosis" refers to the single diagnosis that explains the principal reason for the hospital visit. "All contributing diagnoses" refers to all diagnoses indicated anywhere on the claim, including the primary diagnosis.

ICD-9 Discharge Code for Non-	Traumatic Oral Health Visits
520.0-520.9	Disorders of tooth development and eruption
521.0-521.9	Disease of the hard tissue of teeth
522.0-522.9	Diseases of pulp and periapical tissues
523.0-523.9	Gingival and periodontal diseases
525.0-525.9 excluding 525.11	Other disease/conditions of the teeth and supporting structures

# **Emergency Department**

There were 850,629 emergency department (ED) visits in 2014 among Nevada residents, of these, 13,720 (1.6%) were for non-traumatic dental problems. These visits are most common among young adults (age 20-29) and represent the 15<sup>th</sup> most common primary diagnosis in Nevada, for 2014. The primary diagnosis for ED visits where dental condition was a primary or contributing factor was "Other disease/condition of the teeth and supporting structures." This may be due to a lack of precision in diagnosis and may reflect emergency physicians' inability to definitively diagnose many dental conditions.



Division of Public and Behavioral Health October | 2016

### Non-Traumatic Dental Health Problems

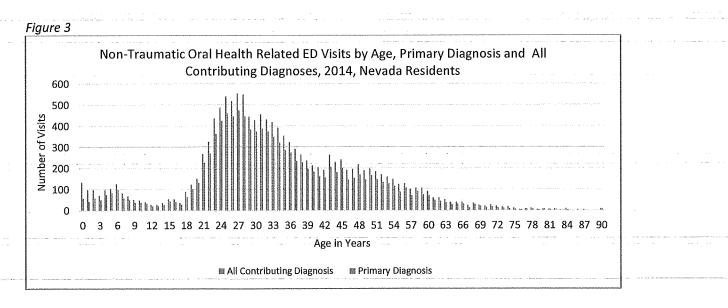
# Demographics

From 2010 to 2014, visits to the emergency department have increased 24.5%. During 2010, there were 11,016 visits for non-traumatic oral health, and increased to 13,720 visits in 2014. The age adjusted rates increased from 410.2 to 497.1 per 100,000 population. This may be due to increased hospital reporting, and not necessarily an indication of an increase in poor oral health.

Non-Traumatic Oral Contribu		ated ED Visits b ses*, 2010 - 20			d All
16,000			,		
14,000					
12,000					
10,000					
8,000	Contraction Contraction	e de la carde de la construcción d	segment of the second second second second	energi e processo o com	
6,000		o o construir e anna searchadh a			ang mananan ang mang mang mang mang mang
4,000					·····
2,000				A	
0		1			
	2010	-2011	2012	2013	2014
		1 44 540	11 070	12,155	13,720
	11,016	11,540	11,879	12,133	13,720

\*"All contributing diagnoses" refers to all diagnoses indicated anywhere on the claim, including the primary diagnosis.

Non-traumatic oral health related visits to the emergency departments is highest among those aged 20 to 28. Of the 13,720 ED visits related to non-traumatic oral health conditions, 4,291 visits (31.3%) were for those between the ages of 20 to 29.

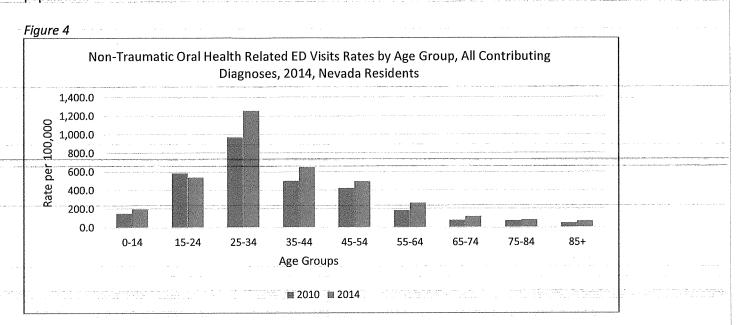


Division of Public and Behavioral Health October | 2016

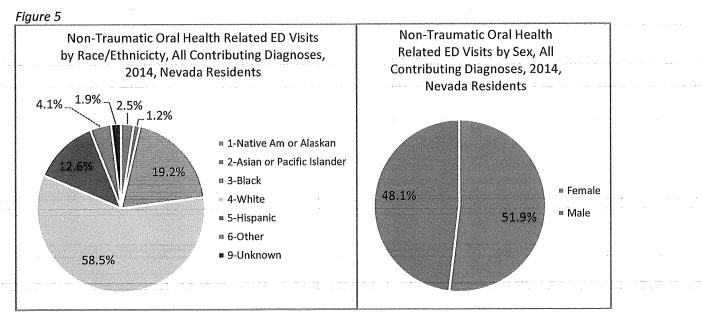
Page **3** of **8** 

### Non-Traumatic Dental Health Problems

The age specific rate increased from 2010 to 2014 from 407.1 to 485.0 per 100,000. The age group with most increase in rate was in young adults 25-34 from 973.1 to 1,257.4 per 100,000 age specific population.



The racial breakdown of ED visits for 2014 found whites visited the most at 58.5% of non-trauma related oral health visits, followed by black/African Americans at 19.2% of the visits.



Note: The distributions remain the same with the primary diagnosis.

Division of Public and Behavioral Health October | 2016

Medicaid was the primary payer on 43.5% of all claims related to non-traumatic oral health in the ED, and 43.1% of claims with a primary diagnosis related to non-traumatic oral health in the ED. The second most frequent means of payment was self-pay, which was indicated on 24.2% of all claims related to non-traumatic oral health in the ED, and 25.2% of claims with a primary diagnosis related to non-traumatic oral health in the ED.

This could indicate a relationship between uninsured or under-insured individuals having higher risk for non-traumatic oral health conditions.

<u> </u>	igure	6												
			Non-T	raumati Jiagnosis	c Oral and A	Health Re All Contrib	lated ED Vi uting Diagn	sits by Sour oses <del>, 2</del> 014,	ce of Payı Nevada f	ment, Pri Residents	mary	· · · · · · · · · ·		
	50.0% 40.0% 30.0% 20.0% 10.0% 0.0%													
		Missing	Medicaid	self pay	Medica Comm	re hercial Insurer	HMO Miscella Negotiated C	heous Iscounts e.B. PPC	Charity Charity HAMPUS OR Co All	HAMPVA Unty Indigent Workers Com	Referral pensation e.e. (	<u>,115)</u>		
					I	All Contribu	ting Diagnosis	翻 Primary Dia					an an tao	
<b>.</b>														
· · · · · · · · · · · · · · · ·				· · · · · · ·		· · · · ·			·····	· · · · · ·				
• • • • • • • • •				-								. <del>.</del> 		
										اه			· · · · · · · · · · · · · · · · · · ·	

Division of Public and Behavioral Health October | 2016

Page 5 of 8

DHHS\_000181

# Inpatient

In 2014, there were 283,446 inpatient admissions to Nevada residents, of these 974 were for nontraumatic oral health issues (0.4%). Inpatient admissions related to non-traumatic oral health issues are uncommon but can be associated with potentially serious medical complications. The primary diagnosis for inpatient visits was mental disorders (13%), where non-traumatic oral health was a contributing diagnosis.

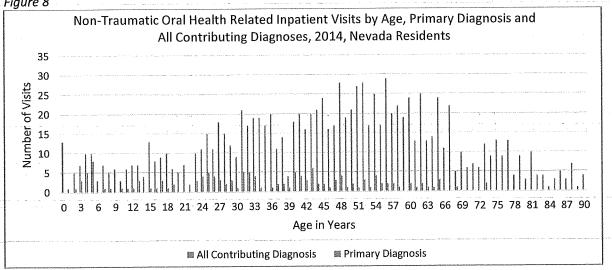
## Demographics

From 2010 to 2014, inpatient admissions have increased 21.3% for non-traumatic oral health related admissions. From 2010 to 2014 non-traumatic oral health visits increased from 919 to 1,115. The age adjusted rates increased from 34.1 to 38.5 per 100,000 population.

#### Figure 7 Non-Traumatic Oral Health Related Inpatient Visits by Year, Primary Diagnosis and All Contributing Diagnoses, 2010 - 2014, Nevada Residents 1.200 Inpatient Visits 1,000 800 600 400 200 0 2014 2011 2012 2013 2010 1,034 1,132 1,115 919 856 All Contributing Diagnosis 120 141 97 105 122 Primary Diagnosis

Non-traumatic oral health related visits for inpatient admissions is highest among 55-64 age group.

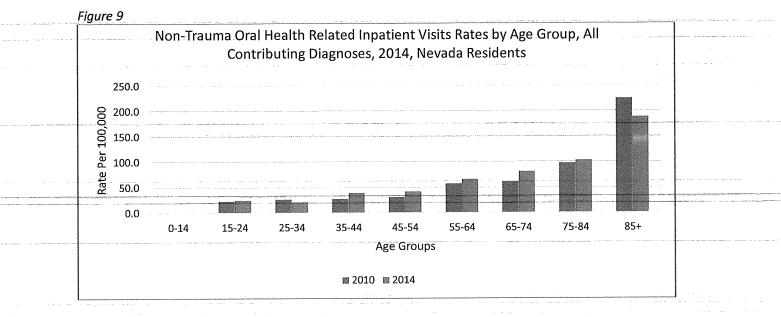
Figure 8



The crude rate decreased from 2010 to 2014 overall 1.4 to 0.8 per 100,000 population. The age group with the highest rate is 85 and older, at 189.1 per age specific population for 2014.

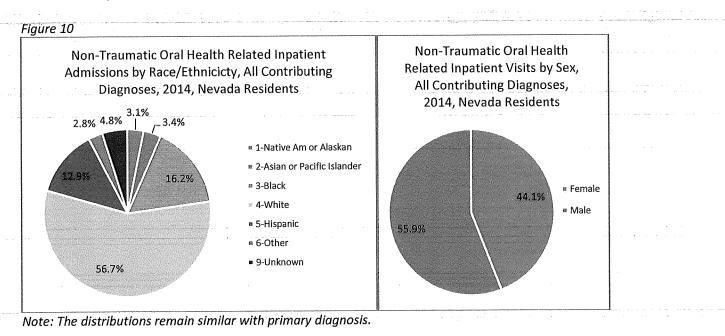
Division of Public and Behavioral Health October | 2016

Page 6 of 8

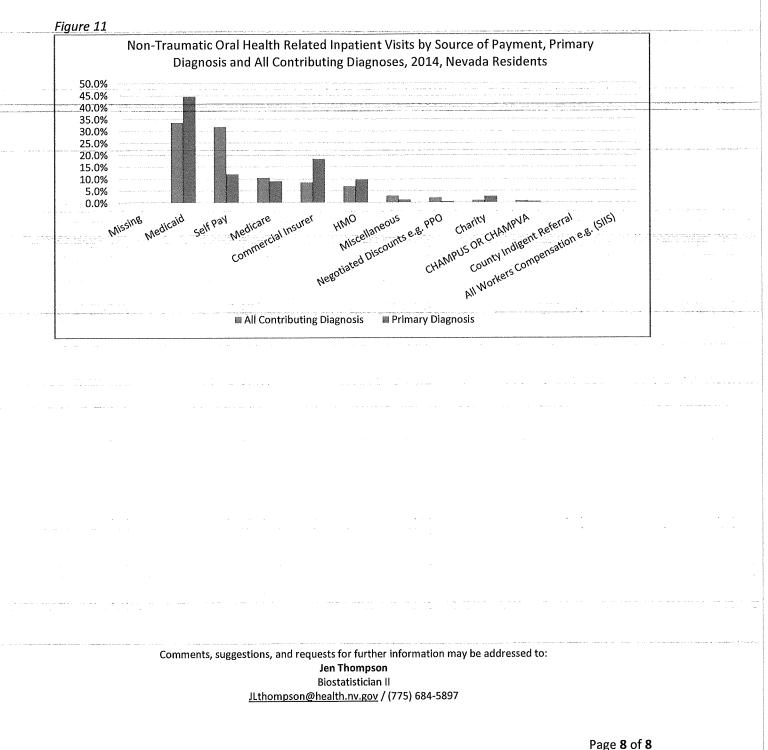


The racial breakdown of inpatient admissions for 2014 found whites visited the most at 56.7% of nontrauma related oral health visits, followed by black/African Americans at 16.2% of the visits.

Unlike ED visits, males were admitted more than females, accounting for 55.9% of visits.



Medicaid was the primary payer on 33.7% of all claims related to non-traumatic oral health, and 44.7% of claims with a primary diagnosis related to non-traumatic oral health in the inpatient setting. The second most frequent means of payment of all claims related to non-traumatic oral health was self-pay, which was indicated on 31.9% of all claims related to non-traumatic oral health in the ED. Whereas the second most frequent means of payment of claims with a primary diagnosis related to non-traumatic oral health in the ED. Whereas the second most frequent means of payment of claims with a primary diagnosis related to non-traumatic oral health in the ED. Whereas the second most frequent means of payment of claims with a primary diagnosis related to non-traumatic oral health in the inpatient setting was commercial insurer, which was indicated on 18.4%.



Division of Public and Behavioral Health October | 2016

DHHS\_000184

From:	jpeek@health.nv.gov
	Monday, February 6, 2017 3:37 PM
То:	jpackham@med.unr.edu
Cc:	acapurro@health.nv.gov
Subject:	FW: Oral Health Data Report
Attachments:	Community Water Fluoridation Nevada Fact Sheet.docx; Fluoride Map.docx; Copy of
	FluoridationStatusReport.xls

Hi John, see attached. Please let Dr. Capurro know if you have any questions. Thanks, J



## Julia Peek, MHA

Deputy Administrator, Community Services Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 |Carson City, Nevada 89706 T: (775) 684-5280 |C: (775) 250-2913 |E: jpeek@health.nv.gov www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

## From: Antonina Capurro

Sent: Thursday, February 2, 2017 4:08 PM To: Julia Peek <jpeek@health.nv.gov> Cc: Judy White <judwhite@health.nv.gov>; Kyra E. Morgan <kmorgan@health.nv.gov> Subject: RE: Oral Health Data Report

Hello Julia,

I do not yet have an oral health report that demonstrates a correlation between caries control and water fluoridation in Southern Nevada. What I have included is a map I put together of the water fluoridation levels in Nevada as well as a water fluoridation fact sheet. I am still searching for information related to water fluoridation in Nevada and if I find anything else, I will email you.

Best,

Antonina

From: Julia Peek
Sent: Thursday, February 2, 2017 1:53 PM
To: 'John F Packham'
Cc: Judy White; Antonina Capurro; Kyra E. Morgan
Subject: FW: Oral Health Data Report

John, here is what I mentioned, but won't get you what you need. Ladies, do we have data to compare counties with fluoridation and without? Thanks



## Julia Peek, MHA

Deputy Administrator, Community Services Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 | Carson City, Nevada 89706 T: (775) 684-5280 | C: (775) 250-2913 | E: jpeek@health.nv.gov www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

## From: Judy White

Sent: Thursday, February 2, 2017 1:49 PM To: Julia Peek <<u>ipeek@health.nv.gov</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>>; Kyra E. Morgan <<u>kmorgan@health.nv.gov</u>> Subject: RE: Oral Health Data Report

Hi Julia,

Here is the report that was prepared for Cody. I have more! Could you call me when it's convenient?

Thanks,



## Judy A. White RDH, MPH

State Public Health Dental Hygienist Nevada Department of Health and Human Services Division of Public and Behavioral Health | Oral Health Program 500 Damonte Ranch Pkwy. Suite 657 |Reno, NV 89521 T: (775)350-5275 |F: (775)850-1144 |E: judwhite@health.nv.gov

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review,

dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

## From: Julia Peek

Sent: Thursday, February 2, 2017 12:47 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>>; Kyra E. Morgan <<u>kmorgan@health.nv.gov</u>>; Judy White <<u>judwhite@health.nv.gov</u>> Subject: Oral Health Data Report

Hi Ladies,

Can you shoot me a copy of the oral health report that Kyra had the had the hospital discharge billing data? Also, any other data you may have readily available. Trying to pull some info together for John Packham with the School of Medicine.

Thanks,

J CONTRACTORY STATES

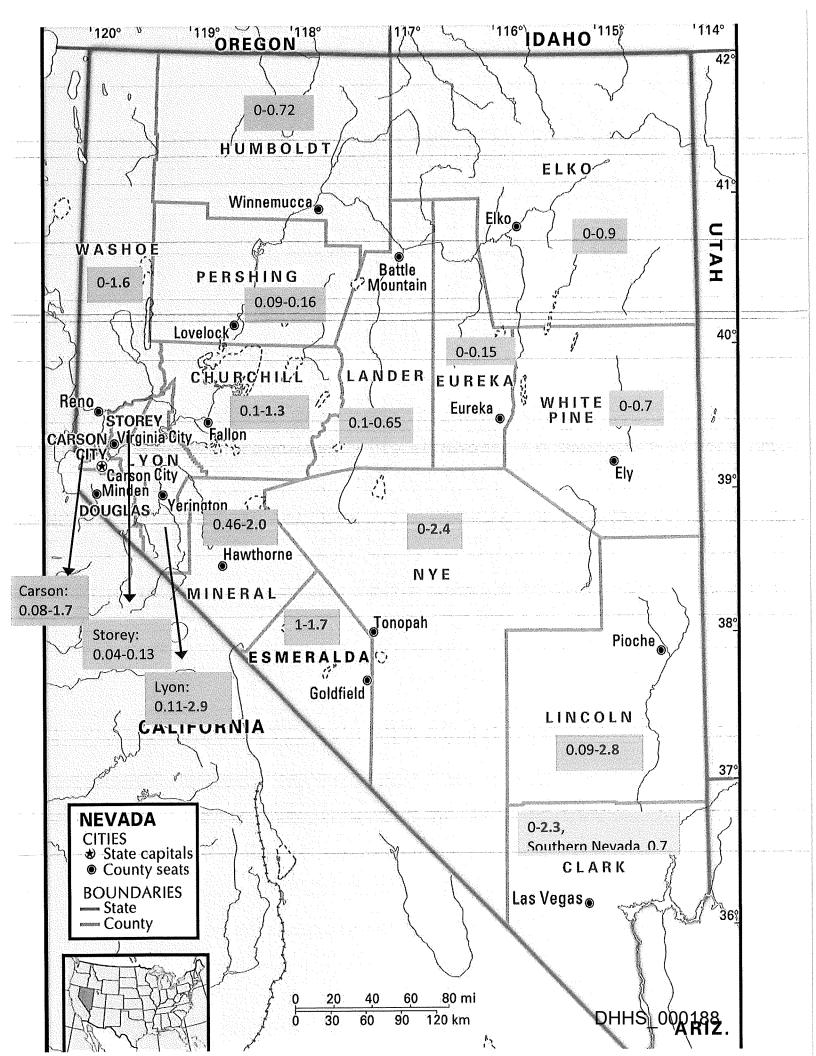


Julia Peek, MHA Deputy Administrator, Community Services Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 | Carson City, Nevada 89706 T: (775) 684-5280 | C: (775) 250-2913 | E: jpeek@health.nv.gov www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.



# **Community Water Fluoridation**



"...one of the 10 great public health achievements of the twentleth century."<sup>1</sup>

Oral Health in Nevada: A Fact Sheet

In the U.S., tooth decay affects<sup>7</sup>:

 $\checkmark$  1 in 3 preschool children

 $\checkmark$  1 in 2 school age children

 $\checkmark$  2 in 3 adolescents

 $\checkmark$  9 out of 10 adults

# **Tooth Decay is a Problem!**

Oral health is integral to general health. Although preventable, tooth decay is a chronic disease affecting all age groups. In fact, it is the most common chronic disease of childhood. The burden of disease is far worse for those who have limited access to prevention and treatment services. Left untreated, tooth decay can cause pain, tooth

loss, and even death. Among children, untreated decay

has been associated with difficulty in eating, sleeping, learning and proper nutrition. Among adults, untreated decay and tooth loss can also have negative effects on an individual's self-esteem and employability.<sup>2</sup>

# **Community Water Fluoridation Prevents Tooth Decay**

Fluoride in community drinking water, adjusted to a concentration of 0.7 parts per million<sup>3</sup>, continues to be a safe, inexpensive and extremely effective method of preventing tooth decay.<sup>4</sup>

- Community water fluoridation benefits everyone in the community, regardless of age and socioeconomic status.
- Fluoridation provides protection against tooth decay in populations with limited access to prevention services.
- Water fluoridation costs, on average, 72 cents per person per year. <sup>5</sup>
- For every dollar spent on community water fluoridation, up to \$38 is saved in dental treatment cost.<sup>5</sup>

The Task Force on Community Preventive Services, a national independent, nonfederal, multidisciplinary task force appointed by the director of the Centers for Disease Control and Prevention (CDC), recently reviewed their systematic review of studies of community water fluoridation. They reconfirmed, in communities initiating fluoridation, the decrease in childhood decay was almost 30 percent over 3–12 years of follow-up.<sup>6</sup> Communities have fluoridated the water since 1945. In Southern Nevada, fluoride has been added and maintained at optimal levels in the municipal water supply of since 2000.

# Nevada<sup>8,9,10</sup> and National Healthy People 2020 Objectives<sup>9</sup>



Increase percentage of persons on public water receiving fluoridated water National HP Goal = 79.6% Nevada's Goal = 79.6% Nevada's Current Status = 74%

Reduce by 10% tooth decay experience in children age 6-9 yrs National HP Goal = 49.0% Nevada's Goal = 49.0% Nevada's Current Status = 64.9%

Reduce by 10% adults 65-74 who have lost all their teeth National HP Goal = 21.0% Nevada's Goal = 21.0% Nevada's Current Status = 22%

# What is Nevada doing to meet the goals?

The Nevada Oral Health Program works with partners at the City of Henderson and the Southern Nevada Water Systems to monitor fluoridation quality. Data such as daily water testing, laboratory results, and average water fluoride concentrations are collected and reported to the Center for Disease Control's national Water Fluoridation Reporting System. The public is able to view reported fluoride information related to their community water system from the CDC's MyWaterFluoride page. Due to the quality of data reported and successful maintenance of optimal water fluoridation levels in over 90% of the adjusted water systems, states are issued the CDC Water Fluoridation Quality Award. Nevada has received this award for 2015 and 2016.

# **Strategies for Nevada's Future**

- ✓ Encourage fluoride supplements and/or fluoride treatments for those at increased risk for decay who are not receiving fluoridated drinking water, along with daily brushing with fluoride toothpaste morning and night.
- ✓ Promote accurate, scientific information about fluoride.
- ✓ Encourage the use of dental sealants and school-based dental disease prevention programs.

## References

- 1. Centers for Disease Control and Prevention, Community Water Fluoridation. Accessed Oct. 28.2013.
- U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research. <u>Oral Health in America: A</u> <u>Report of the Surgeon General</u>. Rockville, MD: U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research, 2000. Accessed Oct. 28.2013.
- 3. U.S. Department of Health and Human Services, <u>Proposed HHS Recommendation for Fluoride Concentration in Drinking Water for</u> <u>Prevention of Dental Caries</u>, Federal Register Volume 76, Number 9. January 13, 2011. Accessed Oct. 28.2013.
- 4. Kumar JV. Is water fluoridation still necessary? Adv Dent Res. 2008 Jul 1; 20(1):8-12. Accessed Oct. 28.2013
- 5. Centers for Disease Control and Prevention, Cost Savings of Community Water Fluoridation, July 2013. Accessed Jan. 2017.
- 6. Department of Health and Human Services, <u>The Community Preventive Services Task Force</u>, <u>The Guide to Community Preventive Services</u>, Community Water Fluoridation, 28.2013. Accessed Oct. 28.2013.
- 7. Dye BA, Tan S, Smith V, Lewis BG, Barker LK, Thornton-Evans G, Eke PI, Beltrán-Aguilar ED, Horowitz AM, Li CH. Trends in oral health status: United States, 1988-1994 and 1999-2004. Vital Health Stat 11. 2007 Apr; (248):1-92 Accessed Oct. 28.2013 U.S.
- Oral Health Program, Bureau of Child, Family and Community Wellness, Nevada State Health Division. (2013). <u>Dental Public Health Activity Descriptive Summary</u> (Rep. No. 31002). NV: ASTDD. doi:http://www.astdd.org/statepractices/SUM31002NVfluoridationbill\_2013.pdf
- Department of Health and Human Services, Division of Public and Behavioral Health, Oral Health Program. (2009). <u>2008-2009 Third</u> <u>Grade Oral Health Survey</u> (Rep.). NV. http://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Programs/OH/Oral\_Health\_Program\_Reports/2008-2009\_Third-GradeOralHealthSurvey.pdf
- 10. Bureau of Family Health Services, Nevada State Health Division Department of Health and Human Services. (2005). <u>Healthy Smiles</u> for Healthy Living, Senior Oral Health Survey Nevada 2005.
- http://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Programs/OH/Oral\_Health\_Program\_Reports/Seniororalhealthsurvey2005.pdf
   U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. <u>Healthy People 2020</u>.
   Washington, DC: U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion, 2010.
   Accessed Oct. 28.2013.

For more information, contact: Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way Carson City, Nevada 89076 775-684-4285

# http://dpbh.nv.gov/Programs/OH/OH-Home/

Adapted from a fact sheet developed by the Oral Health Program, Bureau of Health, Maine Department of Human Services, 2004, in cooperation with the Association of State and Territorial Dental Directors. Produced with support from CDC cooperative agreement #1058DP004919-01, #1058DP004919-01 and Maternal and Child Health Bureau, Health Resources and Services Administration cooperative agreement # U44MC00177-04-02. The contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention. Photo credits: Mother and son at left, Andrea Schroll, RDH, BS, CHES, Illinois Department of Public Health; grandmother, mother, and daughter, Getty Images; water, Comstock Images.

DHHS 000190

PWS ID	PWS Name	County	Population Se I	Fluoridated	Fluoride Conc	
NV-0000015	CARSON CITY PUBLIC WOI	Carson City (Prima	56500	No	1.7	
NV-0000020	FRONTIER VILLAGE MHP	Carson City (Prima	280	No	0.13	
NV-0000028	TERRACE GARDEN APARTI	Carson City (Prima	60	No	0.08	
NV-0000017	COTTONWOOD MHP	Carson City (Prima	250	No	0	
NV-0004002	EMBER MOBILE MANOR	Churchill (Primary)	36 \	Yes	1.3	
NV-0000045	FALLON CITY OF	Churchill (Primary)	8500 \	Yes	0.7	
 NV-0000350	FALLON NAVAL AIR STATI	Churchill (Primary)	3000	Yes	0.7	
NV-0000055	SOUTH MAINE MHP (CHU	Churchill (Primary)	100 \	Yes	0.6	
NV-0000061	TOLAS PARK MHP	Churchill (Primary)	54 `	Yes	0.6	
 NV-0002023	SAGE VALLEY MHP	Churchill (Primary)	158	No		
 NV-0003068	CARSON RIVER ESTATES	Churchill (Primary)	90	No	0.5	
NV-0000058	WILDES MANOR	Churchill (Primary)	70	No	0.4	
NV-0000047	DELUXE MHP	Churchill (Primary)	37	No	0.36	
NV-0000054	R AND M MOBILE HOME F	Churchill (Primary)	130	No	0.34	
NV-0000303	OLD RIVER WATER COMP	Churchill (Primary)	300	No	0.33	
NV-0000052	OK MOBILE HOME PARK (	Churchill (Primary)	90	No	0.22	
NV-0002034	NDOT TRINITY ROADSIDE	Churchill (Primary)	100	No	0.1	
NV-0000160	MOAPA VALLEY WATER D		8000	No	2.3	
NV-0000819	PALM GARDENS WATER C	Clark (Primary)	60	No	2.1	
NV-0002501	COTTONWOOD COVE	Clark (Primary)	1354	Yes	1.6	
NV-0000147	FRONTIER VILLAGE LLC (CI	Clark (Primary)	60	Yes	1.5	
NV-0000167	VIRGIN VALLEY WATER DI	Clark (Primary)	17000	No	1.4	
NV-0000219	SEARCHLIGHT WATER COI	Clark (Primary)	760	Yes	1.1	
NV-0000182	VANS TRAILER OASIS (CLA	Clark (Primary)	75	Yes	0.96	
NV-0000140	OAKRIDGE APARTMENTS	Clark (Primary)	60	Yes	0.92	
NV-0000146	HITCHIN POST MOTEL AN	Clark (Primary)	350	Yes	0.92	
NV-0000319	ROARK ESTATES WATER A	Clark (Primary)	62	Yes	0.88	
NV-0001073	WHISKEY PETES	Clark (Primary)	3000	Yes	0.86	
NV-0000221	SPIRIT MOUNTAIN UTILITY	Clark (Primary)	350	Yes	0.84	
NV-0000123	SUNRISE MOUNTAIN TP	Clark (Primary)	100	Yes	0.76	
NV-0000011	BOULDER CITY	Clark (Primary)	15000	Yes	0.7	
NV-0000076	HENDERSON CITY OF	Clark (Primary)	246000	Yes	0.7	
NV-0000090	LAS VEGAS VALLEY WATER	Clark (Primary)	1276091	Yes	0.7	
NV-0000175	NORTH LAS VEGAS UTILIT	Clark (Primary)	282600	Yes	0.7	
NV-0000289	SOUTHERN NEVADA WAT	Clark (Primary)	200	Yes	0.7	
NV-0001059	<b>TROPICANA RESORT AND</b>	Clark (Primary)	5950	Yes	0.7	
NV-0001083	HOOVER DAM LODGE DBA	Clark (Primary)	220	Yes	0.7	
NV-0003004	NPS LAS VEGAS BAY	Clark (Primary)	25	Yes	0.7	
NV-0003028	NELLIS AIR FORCE BASE	Clark (Primary)	6288	Yes	0.7	
NV-0000109	EQUESTRIAN ESTATES CO	Clark (Primary)	108	Yes	0.68	
NV-0000149	DESERT PARADISE MHP	Clark (Primary)	70	Yes	0.64	
NV-0000089	JEAN UTILITY SERVICES IN	Clark (Primary)	600	No	0.49	
NV-0004001	SANDY VALLEY ELEMENTA	Clark (Primary)	165	No	0.4	

NV-0004092	BIG BEND WATER DISTRIC	Clark (Primary)	8300	No	0.33	
NV-0000124	SUNRISE ACRES WATER A	Clark (Primary)	231	No		
NV-0000287-	KINGS ROW TP	-Clark (Primary)	525	No	0.3	
NV-0002503	NPS ECHO BAY	Clark (Primary)	237	No	0.3	
NV-0002506	NPS CALLVILLE BAY	Clark (Primary)	250	No	0.3	
NV-0003003	NPS OVERTON BEACH	Clark (Primary)	250	No	0.3	
NV-0004031	SKY RANCH ESTATES	Clark (Primary)	160	No	0.3	
 NV-0000082	INDIAN SPRINGS WATER	Clark (Primary)	900	No	0.26	
NV-0000126	SHETLAND WATER DISTRI	(Clark (Primary)	45	No	0.24	
NV-0000132	PAINTED DESERT WTR US	Clark (Primary)	52	No	0.21	
NV-0000314	TORREY PINES TINA LN W	Clark (Primary)		No	0.2	
 NV-0000370	RAINBOW GARDENS WAT	Clark (Primary)	45	No	0.2	
NV-0000010	BLUE DIAMOND WATER O	• • • •	500	No	0.18	
NV-0000364	CERTAIN TEED GYPSUM	Clark (Primary)	85	No	0.18	
NV-0000142	KYLE CANYON WATER DIS	Clark (Primary)	1040	No	0.17	
NV-0000106	EASTLAND HEIGHTS WAT		400	No	0.16	
NV-0001015	MT CHARLESTON WATER		535	No	0.16	
NV-0000145	HILLCREST MANOR WATE		450	No	0.13	
NV-0004090	LALLYS	Clark (Primary)	51	No	0.13	
NV-0001080	HARRIS SPRINGS RANCH	• • • •	40	No	0.1	
NV-0002508	MCWILLIAMS WATER SYS		2500	No	0.1	
NV-0005062	1	• • •	4142	No	0.1	
NV-0000129	RANCHO COOPERATIVE V	• •	110		0.06	
NV-0000292	SPRING MOUNTAIN YOUT			No	0.05	
NV-0000092	BLUE DIAMOND WATER (			No	0	
NV-0004000	COLD CREEK CANYON HO		180		0	
NV-0000355	INDIAN HILLS GID	Douglas (Primary)	5800		1.7	
NV-0000271		0 1 11		Yes	0.6	
NV-0002054	SIERRA SHADOWS GENOA		663		0.57	
NV-0000030			160		0.49	
	HOLBROOK STATION RV	• • •	180		0.2	
NV-0000070	TOPAZ LAKE WATER CO I			No	0.19	
NV-0000067	PINION PINES COMMUNI			No	0.17	
NV-0000065	GARDNERVILLE TOWN W		4500		0.16	
NV-0000066	GARDNERVILLE RANCHOS		11500		0.16	
NV-0000239	TOPAZ RANCH ESTATES	<b>e</b>	2100		0.16	
NV-0000259	CAVE ROCK SKYLAND	Douglas (Primary)	1245		0.14	
NV-0000168	TOWN OF MINDEN	Douglas (Primary)	3200		0.12	
NV-0002216	EAST VALLEY WATER-SYS		-3845			
NV-0000817	UPPAWAY WATER SYSTE	• • •		No	0.1	
NV-0003081	MOUNTAIN VIEW MHP	Douglas (Primary)		No	0.09	
NV-0000258	ZEPHYR COVE WATER UT		1875		0.08	
NV-0000258	ROUND HILL GID	Douglas (Primary)			0.08	
NV-0000356	GLENBROOK HOMEOWN				0.08	
110 0000000	CENDROOK NOMEOWN		2000		-100	

		LOGAN CREEK ESTATES GI			No	0.07	
			Douglas (Primary)	3839			n Vinlan ni <sup>na</sup> 2015 -
		RIVERVIEW MOBILE HOM	<b>-</b> · · · ·		No		
	NV-0000170	MOUNTAIN CITY WATER S	Elko (Primary)		Yes	0.9	
	NV-0000245	WELLS MUNICIPAL WATEI	Elko (Primary)	1346		0.9	
	NV-0005027	SPRING CREEK MHP	Elko (Primary)	3645		0.8	
	NV-0000351	SOUTH CRESTVIEW HOME	Elko (Primary)	60	No	0.7	
	NV-000036	SPRING CREEK UTILITIES (I	Elko (Primary)	6708	No	0.57	
	NV-0003071	MIDAS WATER COOPERAT	Elko (Primary)	92	No	0.5	
	NV-0000014	CARLIN UTILITIES	Elko (Primary)	2450	No	0.49	
-	NV-0000246	WEST WENDOVER WATER	Elko (Primary)	4200	No	0.43	
	NV-000088	JACKPOT WATER SYSTEM	Elko (Primary)	1240	No	0.4	
	NV-0000272	ELKO CITY OF	Elko (Primary)	18000	No	0.3	
	NV-0000037	NEVADA YOUTH TRAINING	Elko (Primary)	100	No	0.23	
	NV-0000805	VALLEY VIEW RV PARK	Elko (Primary)	250	No	0.2	
	NV-0004017	OASIS INT MHP (ELKO)	Elko (Primary)	46	No	0.2	
	NV-0000189	TUSCARORA WATER SYST	Elko (Primary)	72	No	0.13	
	NV-0002070	JARBIDGE WATER SYSTEM	Elko (Primary)	200	No		
	NV-0000169	MONTELLO WATER SYSTE	Elko (Primary)	287	No	0.08	
	NV-0000273	LAMOILLE WATER ASSOCI	Elko (Primary)	200	No	0	
	NV-0000363	SILVERPEAK WATER SYSTE	Esmeralda (Primar	138	Yes	1.7	· ·
	NV-0000072	GOLDFIELD TOWN WATEF	Esmeralda (Primar	-350	No		
	NV-0000044	EUREKA WATER ASSOCIAT	Eureka (Primary)	450	No	0.15	
	NV-0000043	CRESCENT VALLEY WATER	Eureka (Primary)	350	No	0.1	
	NV-0002574	DEVILS GATE GID DISTRIC	Eureka (Primary)	25	No	0.1	
	NV-0002573	DEVILS GATE WATER SYST	Eureka (Primary)	70	No	0	'
	NV-0000162	MC DERMITT WATER SYST	Humboldt (Primary	200	No	0.72	
	NV-0000248	WINNEMUCCA CITY OF	Humboldt (Primary	9143	No	0.4	
	NV-0005069	HUMBOLDT CONSERVATIO	Humboldt (Primary	64	No	0.38	
	NV-0003079	GOLD COUNTRY ESTATES	Humboldt (Primary	950	No	0.29	
	NV-0000249	F AND H TP	Humboldt (Primary	66	No	0.27	
		OROVADA WATER DISTRIC	Humboldt (Primary	200	No	0.21	
	NV-0000252	STAR CITY PROPERTIES	Humboldt (Primary	363	No	0.2	
	NV-0005029	GOLCONDA GID	Humboldt (Primary	300	No	0.13	
	NV-0003016	VALMY STATION MOBILE	Humboldt (Primary	30	No	0	
	NV-0000008	LANDER COUNTY SEWER		3026	Yes	0.65	
	NV-0000265	KINGSTON TOWN WATER	Lander (Primary)	275	No		
	NV-0000006	LANDER COUNTY SEWER		350	No	0.1	
		-GALIENTE PUBLIC UTILITIE		1500	Yes		
	NV-0000185	PANACA FARMSTEAD WA		800	Yes	1.7	
	NV-0000005	ALAMO SEWER AND WAT	• • •		Yes	0.9	
	NV-0000186	PIOCHE PUBLIC UTILITIES			No	0.7	
	NV-0000187	PIOCHE PUBLIC UTILITIES			No	0.09	
	NV-0000361				Yes	2.9	
			/ -··· (/				

	NV-0002569	SMITH VALLEY WATER SYSL	.yon (Primary)	25	Yes	2.7
		DAYTON VALLEY WATER S L		12035	No	<u></u>
		YERINGTON CITY OF		2900	No	0.62
		WEED HEIGHTS DEVELOPIL	• • •	340	No	0.49
		SILVER SPRINGS MUTUAL L		3000	No	0.4
			.yon (Primary)	18000	No	0.3
		FOOTHILL WATER SYSTEN L		346	No	0.3
	NV-0002564	MOUNTAIN MEADOW ESTL	and a second	30	No	0.3
		FIVE STAR MHP (LYON CC L	•	90	No	0.28
	NV-0000224	•	yon (Primary)	1479	No	0.2
			yon (Primary)		No	0.18
1			yon (Primary)	70	No	0.11
		HAWTHORNE ARMY AMN	• • •		Yes	2
	NV-0000073		Vineral (Primary)	3013		1.5
	NV-0000268		Vineral (Primary)		Yes	1.1
		WALKER LAKE APARTMEN	• •		Yes	1.1
	NV-0000074	MINA LUNING WATER SYS I	• • • •		No	0.46
	NV-0000063				Yes	
	NV-0000009	BEATTY WATER AND SANI I		1100		1.7
	NV-0002558	AMARGOSA VALLEY WATER	• • •		Yes	1.6
	NV-0002338	TONOPAH PUBLIC UTILITII	• • •	2600		0.8
		TONOPAH CONSERVATION	and a construction of the second s		Yes	0.8
	NV-0000823	DESERT MIRAGE HOMEOVI			No	0.37
	NV-0005067	MOUNTAIN VIEW MHP UI			No	0.33
	NV-0005033		Nye (Primary)		No	0.31
	NV-0000165	MANHATTAN TOWN WAT			No	0.3
	NV-0002552	ESCAPEE CO OP OF NEVAL			No	0.26
	NV-0000362		Nye (Primary)		No	0.21
	NV-0000369	•	Nye (Primary)		) No	0.2
		C VALLEY MHP (PAHRUM	1 1 1		No	0.2
	NV-0002558	ROUND MOUNTAIN PUC		1200		0.2
	NV-0005066		Nye (Primary)		) No	0.2
	NV-0000270	UTILITIES OF CENTRAL NE	•	7110		0.14
		MOUNTAIN FALLS WATER			) No	0.12
	NV-0000218	CARVERS SMOKEY VALLEY			) No	0.11
	NV-0000218		Nye (Primary)	1086		0.1
		SHOSHONE ESTATES WAT			) No	0.1
	NV-0005028	COUNTRY VIEW ESTATES I	•	1059		0.1
	NV-0005032	-MOUNTAIN FALLS WATER	• • •		)-No -	0
	NV-0000920				) No	0
	NV-0000926		Nye (Primary) Pershing (Primary)		l No	0.16
	NV-0000809	DUTCHMAN ACRES		3900		0.1
	NV-0000161			1550		0.1
	NV-0000861	LOVELOCK CORRECTIONA	Pershing (Primary) Pershing (Primary)		) No	0.09
	NV-0000226	IMLAY WATER SYSTEM	reisining (rinnary)	200		0.05

NV-0005056	CANYON GID (STOREY CO	Storey (P	rimary)	2370	No	0.13	
NV-0000240	STOREY COUNTY WATER [	Storey (P	rimary)	1420	No		and the second
 NV-0002526 -	OLD WASHOE ESTATES W	Washoe (	Primary)	135	No	- <u>1.6</u>	
NV-0000193	CRYSTAL TP	Washoe (	Primary)	80	Yes	0.8	
NV-0000231	SAGE TRAILER PARK	Washoe (	(Primary)	32	No	0.54	
NV-0000042	EMPIRE WATER COMPAN'	Washoe (	(Primary)	350	No	0.32	
NV-0000207	UTILITIES INC OF NEVADA	Washoe (	(Primary)	7962	No	0.3	
 NV-0000280	WEBB MOBILE HOME PAR	Washoe (	(Primary)	30	No	0.3	
NV-0002525	SUNRISE ESTATES WATER	Washoe (	(Primary)	87	No	0.3	
NV-0004021	SILVER KNOLLS MUTUAL V	Washoe (	(Primary)	120	No	0.3	
 NV-0000200	FOOTHILL TRAILER PARK	Washoe (	(Primary)	35	No	0.24	
 NV-0000718		Washoe		30	No	0.24	
	SUTCLIFFE MOBILE PARK			60	No	0.22	
 NV-0000190	TRUCKEE MEADOWS WAT			311932	No	0.2	
NV-0000198		Washoe	• • • •	4312	No	0.2	
NV-0000202				2950	No	0.2	
	SUN VALLEY WATER AND		• •	17000	No	0.2	
	SOUTH TRUCKEE MEADO			9180		0.2	
NV-0000729	HORIZON HILLS GID WCUI			405		0.2	
NV-0000800	SPRING CREEK EAST COUN			2600		0.2	
NV-0000832		Washoe	• • •	14407		0.2	
 NV-0001085			• • • •	9710		0.2	· ·
NV-0004082		Washoe		1850		0.2	
NV-0000701	RENO SAHARA MOBILE HO		• • • •		No	0.19	
NV-0000191		Washoe	• • • •		No	0.14	
NV-0000802		Washoe	•	115		0.11	
NV-0000214					No	0.1	·
NV-0000214 NV-0000281			• • • •		No	0.1	
NV-0000281			•	998		0.1	
	MOUNT ROSE BOWL HOM				No	0.1	
		Washoe	• • • •		No	0.1	
NV-0000754	SKY RANCH WATER SERVI			2030		0.1	
NV-0001086 NV-0000158	INCLINE VILLAGE GID		(Primary)	9313		0.08	
	DAVIS CREEK PARK		(Primary)		No	0.08	
NV-0000719	THOMAS CREEK ESTATES				No	0.08	
NV-0000792			· · · ·		No	0.07	
NV-0000199	KE TA MOBILE HOME PAR				No	0.07	
	CONESTOGA MHP (WADS					0.07	
NV-0000865	LIGHTNING W WCUD		(Primary)		No		
					No	0.06	
NV-0000801	STAMPMILL		(Primary)		No	0.06	
NV-0003030	MOUNT ROSE WATER CO			2080		0.05	
NV-0000900	ST JAMES		(Primary)		No	0.03	
NV-0000767	ROSEMONT WATER CO		(Primary)		No	0.02	
NV-0000901	ARROWCREEK	Washoe	(Primary)	2208	No	0.02	

NV-00003	5 GRAND VIEW TERRACE W. Washoe (Primary)	328 No	0	
NV-00007	1 GERLACH GID Washoe (Primary)	180 No.		en en son son se se se
NV-000024	4 RIVERBELLE PROPERTIES L Washoe (Primary)	150 No	·····	
NV-000300	5 NPS BOULDER BEACH White Pine (Prima	722 Yes	0.7	
NV-000093	1 SIERRA COUNTRY ESTATE! White Pine (Primar	38 No	0.5	
NV-00003	8 ELY MUNICIPAL WATER DI White Pine (Primai	6000 No	0.28	
NV-000016	3 MCGILL WATER AND SEW White Pine (Prima	1200 No	0.14	
NV-000016	4 RUTH WATER DISTRICT White Pine (Primai	700 No	0.13	
NV-000507	1 ELY MAXIMUM SECURITY White Pine (Prima	1030 No	0.11	
NV-0218	CARVERS SMOKEY VALLEY White Pine (Prima	180 No	0.11	
NV-000505	7COLD_CREEK_MHP_(ELKO)White_Pine_(Primai_	35 No	0.1	
NV-000086	3 BAKER WATER & SEWER (White Pine (Prima)	85 No	0	
NV-000217	4 KOA OF ELY CAMPGROUN White Pine (Prima	80 No	0	

Region_Numk ContactName Co	ntactPhone
----------------------------	------------

Region_NC	aumi contactivame contacti none	
None	DARREN L SCF 775-283-7391	na pangan kutu na mangan kutu na mangan kutu na
None	John Uhart	
None	LINDA MUELLI 775-721-0678	
None	KATHY WILLIA 775-882-6028	
None	ROGER BAYLO 775-813-8232	
None	JAMES SOUBA 775-423-5107	
None	STEPHEN MCk 775-426-3186	
None	JIM VANDIVIE 530-305-0861	
None	ELAINE VANDI 916-271-2699	
None	BAL GOSAL 775-829-4611	
None	CHRIS HANSE! 775-427-4336	
None	WENDELL RICI 775-233-0122	
None	ATTEN HUBER 530-885-7252	
None	VERONICA ML 775-745-2935	
None	JEFF HANSON 775-217-3361	
None	JAY MOON 208-689-9483	
None	JOHN SCHWEI 775-834-8370	
None	JOSEPH F DAV 702-397-6893	
None	GREG CAMPBI 702-299-0565	
None	RICHARD ROS, 702-293-8984	
None	MONICA KOPI 323-851-2000	
None	AARON BUNKI 702-346-5731	
None	KENNETH ALB 702-862-3776	
None	LEROY DAINES 702-556-8069	
None	RANDI IGGULI 714-222-9767	
None	BRENT W CHII 702-644-1043	
None	KATIE HAISAN 702-942-2500	
None	MICHAEL NEC 702-679-6767	
None	NANCY KIDWE 775-297-1094	
None	RON MICHAE' 702-237-5372	
None	SCOTT HANSE 702-293-9291	
None	JEREMY LUSTI 702-267-2574	
None	KENNETH ALB 702-862-3776	
None	RANDALL E DE 702-633-1275	
None	KENNETH ALB 702-862-3776	
None	GREG STILES 702-797-1000	· · · · · · · · · · · · · · · · · · ·
None	ROBERT DOU2 702-340-0183	
None	RICHARD ROS, 702-293-8984	
None	ISSAM SEBAIH 702-653-3449	
None	ELLEN CRAWF 702-262-9091	
None	SHANNON DA 702-203-7771	
None	KENNETH ALB 702-258-3109	
None	ALAN DOTY 702-799-5204	

•				
None	KENNETH ALB 702-862-3776			
None	LINDA JOHNS( 702-384-3354	en e	and a second	
None	BILL STEELE 702-457-3606			 
None	RICHARD ROS, 702-293-8984			
None	RICHARD ROS: 702-293-8984			
None	STEVEN N SPE 702-293-8984			
None	SHANON KEEN 702-872-5516			 
None	GARY OLIVER 702-879-3728			
None	DAVID BALDW 702-528-3121			
None	MEL DAINES 702-872-5743			
None	RANDY_BRADS_702=240=9129			 
None	LEROY DAINES 702-556-8069			
None	KENNETH ALB 702-862-3776			
None	KARL KOSEY 702-875-4111			
None	KENNETH ALB 702-862-3776			
None	DARREL FULLI 702-604-9041			5-64 000000000000
None	SHANON KEEN 702-872-5516			
None	RICHARD AVIL 702-332-7181			· · · · · · · · · · · · · · · · · · ·
None	MEL DAINES 702-872-5743			
None	KEVIN MORSS 702-385-3360			
None	DEL ORME 702-515-5401			
None	KENT A LEFEV 775-486-9928			 
None	LEROY DAINE\$ 702-556-8069			
None	LEIGH ANN AN 702-556-8069			
None	LEROY DAINES 702-556-8069			
None	RICHARD LEW 702-531-3392			
None	JOHN LUFRAN 775-267-2805			
None	FRED HANKER 209-478-3949			
None	TIM DETURK 775-782-9989			
None	LAWRENCE B   775-885-7955			
None	CLARENCE PRI 775-266-3434			
None	RICK ROSS 775-266-3338			
None	TOM OBRIEN 775-266-9212			
None	MARK GONZA 775-782-2339			
None	ROBERT SPELL 775-265-2048			
None	JOE POMERO\ 775-266-3000			
None	TIM DETURK 775-782-9989		and the second	 
None	DAN KISTLER 775-783-8223			
None	TIM DETURK - 775-782-9989			 
None	CARL RUSCHN 775-782-6227			
None	RICHARD GRA 775-265-3222			
None	TIM DETURK 775-782-9989			u uma tradición de Mander
None	A GREGORY RI 775-588-2571			Yest Law over the
None	DIANE ROGER 775-883-2312			4 Antonio Maria Maria Antonio A

None	CAMERON M( 775-790-0711	
None	CAMERON M( 775-588-3548	
None	RONDA CROCI 775-450-2353	 
None	LOUISE BASAN 775-763-6629	
None	JOLENE SUPP 775-752-3355	
None	TIM SCHEIDT 775-753-4452	
None	ΑΝΤΟΝΙΟ ΜΕΙ	
None	TIM SCHEIDT 775-753-4452	
None	BRIAN ELMOR 775-428-5855	
None	CARLOS ESPAI 775-754-6515	
None	CHRIS J MELVI 775-664-3081	
None	ED ELLIS 775-755-2448	
None	RYAN LIMBER: 775-777-7212	
None	TIM ELLIOTT 775-738-7182	
None	BLAKE LAMBE 775-623-4089	
None	Ms. Hailey Ro؛ 801-231-6788	
None	JIM KERR 775-738-6816	
None	JIM KERR 775-738-6816	
None	JIM KERR 775-738-6816	
None	JUSTIN B MILL 406-529-5787	
None	GEORGE HOL( 775-937-2245	
None	MICHAEL J AN 775-485-3483	 · · · · · · · · · · · · · · · · · · ·
None	RON DAMELE 775-237-5372	
None	NATE JOHNSO 775-237-5372	
None	RON DAMELE 775-237-5372	
None	RON DAMELE 775-237-5372	
None	BARBARA FER: 775-532-8780	······································
None	ROGER SUTTC 775-623-6381	
None	KENT A LEFEV 702-486-9928	
None	MARK FOREE 800-706-6531	
None	RON FRY 775-623-6914	
None	JACQUE PETEI 775-304-3073	
None	TOM SWANGE	
None	BURTON J WH	
None	GAYLE MORRI 775-635-5511	-
None	BERT RAMOS 775-635-2190	
None	SHANNON TH 775-964-2120	
None	LOUIS LANI 775-964-2676	
None	JO WHITLOCK 775-726-3131	
None	LARENE ROGE 775-728-4282	
None	JAMES POULS 775-725-3377	
None	NATHAN ADAI 775-962-5840	
None	NATHAN ADAI 775-962-5840	
None	Michael Work 775-246-6220	

None	MARK WORK 775-246-6220
None	MICHAEL WOI 775-246-6220
None	DAN NEWELL 775-463-3511
None	SARA TISCARE 775-463-3351
None	MATHEW MA 775-577-2223
None	DAVE WHALEI 775-784-9910
None	TIM DETURK 775-782-9989
None	TIM DETURK 775-782-9989
None	VICKI JACKSOI 702-433-3939
None	JOE SENG 775-629-0849
None	KIM_THORENF_925-932-0689
None	Mr. Mike Fog <sub>£</sub> 775-577-2775
None	HUGH QUALL\$775-945-7743
None	LARRY GRANT 775-945-2486
None	LARRY GRANT 775-945-2486
None	Terry Dzvonicl 818-716-8772
None	LARRY GRANT 775-945-2486
None	DAVE FANNIN 775-751-6269
None	ROB SHIRLEY 775-553-2931
None	SHANON KEEN 702-872-5516
None	JOE WESTERLI 775-482-6336
None	KENT A LEFEV 702-486-9928
None	LEROY DAINES 702-556-8069
None	JOSE NUNEZ 775-727-5575
None	GEORGE SAUS 775-513-4469
None	DAVID FANNII 775-751-8117
None	THOMAS VEHI 775-209-5079
None	KATHY MASOI 916-434-7143
None	ROZITA SAME' 310-275-4700
None	JOSE GARCIA 702-289-6564
None	JOSHUA CHRI\$ 775-377-2508
None	CURT SCHEPP 702-769-8040
None	JOSE NUNEZ 775-727-5575
None	MRS JOSE NUI 775-727-7877
None	DON MEIGHA 775-482-4441
None	ERIKA LYONS 775-751-1368
None	DALE RODRIG 775-377-2331
None	JOSE NUNEZ 775-727-5575
None	JOSE NUNEZ 775-727-5575
None	GREG HAFEN 775-727-1629
None	JAKE VAN DIE: 775-625-2052
None	KRISTA SOUZA 775-273-2387
None	KENT A LEFEV 702-486-9928
None	JAMES EVANS 775-273-2700

Nono	MITCH ANDRE 775-342-2850
None None	MICHAEL NEV 775-847-0958
None	KELLI BURGES 775-834-8117
None	GLEN HIGHFIE 775-303-5557
None	PATRICK T MY 775-342-0262
None	DAVE CARTER 775-557-2341
None	ALBERT R VAN 775-337-1001
None	ANGELA K WA 775-225-1801
None	KELLI BURGES 775-834-8117
None	TINA POPE 775-972-3975
_None	DON HINKEL 775-825-9070
None	JENNIFER BUC 775-328-2181
None	FRED CROSBY 775-476-0400
None	KELLI BURGES 775-834-8117
None	KELLI BURGES 775-834-8117
None	KELLI BURGES 775-834-8117
None	DARRIN R PRI( 775-673-7700
None	KELLI BURGES 775-834-8117
None	RICK LAMAY 775-742-3098
None	SHARI JENNIN 916-772-4919
None	KELLI BURGES 775-834-8117
None	STEVE T TIMK(775-530-8621
None	SCOTT LEFTW 775-721-7955
None	REBECCA WILI 775-853-5500
None	JOHN K WILLI/ 775-971-8017
None	ROB FITZGER 775-825-9180
None	ALBERT R VAN 775-337-1001
None	ROBERT R LOC 775-832-1269
None	JENNIFER BUC 775-328-2181
None	KELLI BURGES 775-834-8117
None	CINDY HEDRIC 775-825-3355
None	MARK MACHII 530-836-1620
None	KELLI BURGES 775-834-8117
None	TIM HOLT 775-849-1928
None	KELLI BURGES 775-834-8117
None	KELLI BURGES 775-834-8117
None	KELLI BURGES 775-834-8117
None	SCOTT SCHOE 775-687-9559
None	KELLI BURGES 775-834-8117

None	ROY MOORE
None	JONATHAN FA 775-557-2601
None	JAMES R HARI 775-348-8700
None	RICHARD ROS, 702-293-8984
None	TIM DETURK 775-78-9989
None	ROBERT SWIT: 775-289-2430
None	KURT CARSON 775-235-7701
None	KURT CARSON 775-235-7701
None	KENT A LEFEV 702-486-9928
None	
 None	Dave MCClure 775-237-7100
 None	KELLI EICHLER 775-234-7211
None	JOHNNIE HUG 775-289-3413

From:	judwhite@health.nv.gov
Sent:	Friday, February 3, 2017 12:22 PM
То:	acapurro@health.nv.gov; jpeek@health.nv.gov
Subject:	RE: Oral Health Data Report

Hi Nina and Julia!

Here is another take, for your consideration, on the request for data that demonstrates a correlation between caries control and water fluoridation.

We don't have any data demonstrating a correlation between caries control and water FL in southern Nevada, and we won't have it in the future. It would be unnecessary to collect this. Julia and I very briefly discussed this yesterday.

There are a WEALTH of controlled, random studies that were done by large federal agencies and universities across the country, over the many decades that water FL has been in place, that proves the correlation between water fluoridation and caries control (actually, caries reduction is a better phrase). Therefore, there is no need to re-prove water fluoridation's efficacy specifically for Southern Nevada; it would not be a good use of resources. It would be like saying that we need to prove the correlation between smoking and lung cancer specifically for Southern Nevada. After so much proof over the years, the point is a given.

Let me know if you have any questions or comments.

Julia, would it be appropriate for Nina and/or I to reach out to Dr. Packham to provide some FL ed (no bias; just facts, e.g., the CDC), and see if he needs anything else?



## Judy A. White RDH, MPH

State Public Health Dental Hygienist Nevada Department of Health and Human Services Division of Public and Behavioral Health | Oral Health Program

500 Damonte Ranch Pkwy. Suite 657 |Reno, NV 89521 T: (775)350-5275 |F: (775)850-1144|E: judwhite@health.nv.gov

#### Helping People. It's who we are and what we do.

#### Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message. From: Antonina Capurro
Sent: Thursday, February 2, 2017 4:08 PM
To: Julia Peek <jpeek@health.nv.gov>
Cc: Judy White <judwhite@health.nv.gov>; Kyra E. Morgan <kmorgan@health.nv.gov>
Subject: RE: Oral Health Data Report

### Hello Julia,

I do not yet have an oral health report that demonstrates a correlation between caries control and water fluoridation in Southern Nevada. What I have included is a map I put together of the water fluoridation levels in Nevada as well as a water fluoridation fact sheet. I am still searching for information related to water fluoridation in Nevada and if I find anything else, I will email you. Best,

Antonina

From: Julia Peek Sent: Thursday, February 2, 2017 1:53 PM To: 'John F Packham' Cc: Judy White; Antonina Capurro; Kyra E. Morgan Subject: FW: Oral Health Data Report

John, here is what I mentioned, but won't get you what you need. Ladies, do we have data to compare counties with fluoridation and without? Thanks



## Julia Peek, MHA

Deputy Administrator, Community Services Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 |Carson City, Nevada 89706 T: (775) 684-5280 |C: (775) 250-2913 |E: jpeek@health.nv.gov www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Judy White
Sent: Thursday, February 2, 2017 1:49 PM
To: Julia Peek <<u>ipeek@health.nv.gov</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>>; Kyra E. Morgan
<<u>kmorgan@health.nv.gov</u>>
Subject: RE: Oral Health Data Report

Hi Julia,

Here is the report that was prepared for Cody.

I have more! Could you call me when it's convenient?

## Thanks,



# Judy A. White RDH, MPH

State Public Health Dental Hygienist Nevada Department of Health and Human Services Division of Public and Behavioral Health | Oral Health Program 500 Damonte Ranch Pkwy. Suite 657 |Reno, NV 89521 T: (775)350-5275 |F: (775)850-1144|E: judwhite@health.nv.gov

Helping People. It's who we are and what we do.

#### Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Julia Peek

Sent: Thursday, February 2, 2017 12:47 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>>; Kyra E. Morgan <<u>kmorgan@health.nv.gov</u>>; Judy White <<u>judwhite@health.nv.gov</u>> Subject: Oral Health Data Report

Hi Ladies,

Can you shoot me a copy of the oral health report that Kyra had the had the hospital discharge billing data? Also, any other data you may have readily available. Trying to pull some info together for John Packham with the School of Medicine.

Thanks,				
1				



# Julia Peek, MHA

Deputy Administrator, Community Services Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 | Carson City, Nevada 89706 T: (775) 684-5280 | C: (775) 250-2913 | E: jpeek@health.nv.gov www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document-in error and that any review, dissemination, copying, or the taking of any-action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Sent:	Antonina Capurro <antonina.capurro@unlv.edu> Friday, February 24, 2017 4:33 PM</antonina.capurro@unlv.edu>
To:	Cody Phinney; John DiMuro; Linda C. Anderson; Julia Peek; kmorgan@health.nv.gov;
Subject:	Martha Framsted; Judy White Inquiry Regarding IRB Approval for the Oral Health Program

Good Afternoon,

While evaluating the planned Oral Health Program projects, a question has arisen regarding the appropriate approval process for our two planned surveys - the Head Start basic screening survey and the 2017 workforce survey. While the exact documents associated with each project have been reviewed by the Public Information Officer, we have not applied for protocol review to determine if our dissemination process, data collection and storage method, and compensation frameworks are appropriate. The Head Start survey involves direct patient care and the collection of identifiable private health information. The workforce survey is completely anonymous and involves collection of information from licensed dentists and hygienists across the state.

I discussed this issue with Ms. Judy White today and we both reread the Association of State & Territorial Dental Directors' IRB Review, HIPAA, and Oral Health Surveys, Guidance and Resources for State and Territorial Dental Programs.

This brochure guides oral health programs to seek the following before implementing an oral health survey:

1. A waiver from the agency director.

2. A waiver from the IRB. Submit a letter to the agency's IRB outlining the survey as public health practice; reiterate the fact that public health practice is outside the scope of the IRB, and ask the IRB to consider waiving the survey.

3. Approval from the IRB.

Would you please provide me with further information regarding the Division of Public and Behavioral Health's policies on institution review board/human subjects review? Also where can I access the Division's HIPPA guidelines?

It is my goal to ensure that as we revitalize the Oral Health Program, our activities and public health research are compliant with Division requirements.

From: Sent:	Antonina Capurro <antonina.capurro@unlv.edu> Monday, February 27, 2017 2:03 PM</antonina.capurro@unlv.edu>
То:	Andrea R. Rivers
Cc:	Julia Peek; Kyra E. Morgan; Adel Mburia-Mwalili; Antonina Capurro
Subject:	Re: Inquiry Regarding IRB Approval for the Oral Health Program

I appreciate your help with this inquiry. I did ask Deb Aquino and Beth Handler and neither were aware of an internal review process. Deb explained that she was not involved with the last oral health screening that was conducted by the state. Our study this year is slightly different as we will be providing direct patient care and our patient intake forms include the patients name, birth date, and medical information.

Thank you for your assistance.

Best,

	Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov www.dhhs.nv.gov   www.division website.nv.gov Helping People. It's who we are and what we do.	
Find help	24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>	
18 U.S.C. §§ 2510-25 1996 and may conta individual(s) only. If recipient, you are here copying, or the taking result in administrative	e and accompanying documents are covered by the electronic Communications Privacy Act, 21, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of in confidential information or Protected Health Information intended for the specified you are not the intended recipient or an agent responsible for delivering it to the intended by notified that you have received this document in error and that any review, dissemination, of any action based on the contents of this information is strictly prohibited. Violations may e, civil, or criminal penalties. If you have received this communication in error, please notify v e-mail, and delete the message.	

On Mon, Feb 27, 2017 at 12:17 PM, Andrea R. Rivers <<u>ARRivers@health.nv.gov</u>> wrote:

Hi Julia,

I'm not sure, but I would think Deb Aquino would know as she was initially hired as an evaluator for the screenings years ago under the Oral Health funding .

Not sure if they have checked in with Beth and her team on this. We could maybe ask Wei?

## Andrea R. Rivers

Health Program Manager II

Nevada Department of Health and Human Services

Division of Public and Behavioral Health | Office of Public Informatics and Epidemiology

500 Damonte Ranch Pkwy, Ste 657 |Reno, NV 89521 T: <u>(775) 684-5281</u> |E: <u>arrivers@health.nv.gov</u>

www.dhhs.nv.gov | http://dpbh.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Julia Peek

Sent: Monday, February 27, 2017 10:29 AM

**To:** Kyra E. Morgan <<u>kmorgan@health.nv.gov</u>>; Andrea R. Rivers <<u>ARRivers@health.nv.gov</u>>; Adel Mburia-Mwalili <amburia@health.nv.gov>

**Cc:** Antonina Capurro <a column block colum

Subject: FW: Inquiry Regarding IRB Approval for the Oral Health Program

This is not my area of expertise, can you please help? What have we done in the past for the screenings? Thanks



# Julia Peek, MHA, CPM

Deputy Administrator, Community Services

Nevada Department of Health and Human Services

Division of Public and Behavioral Health

4150 Technology Way, Suite 300 | Carson City, Nevada 89706 T: <u>(775) 684-5280</u> | C: <u>(775) 250-2913</u> | E: <u>jpeek@health.nv.gov</u> It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

#### Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

#### From: Antonina Capurro [mailto:antonina.capurro@unlv.edu]

Sent: Friday, February 24, 2017 4:33 PM

To: Cody Phinney <<u>cphinney@health.nv.gov</u>>; John DiMuro <<u>idimuro@health.nv.gov</u>>; Linda C. Anderson <<u>LAnderson@ag.nv.gov</u>>; Julia Peek <<u>ipeek@health.nv.gov</u>>; Kyra E. Morgan <<u>kmorgan@health.nv.gov</u>>; Martha Framsted <<u>mframsted@health.nv.gov</u>>; Judy White <<u>iudwhite@health.nv.gov</u>> Subject: Inquiry Regarding IRB Approval for the Oral Health Program

Good Afternoon,

While evaluating the planned Oral Health Program projects, a question has arisen regarding the appropriate approval process for our two planned surveys - the Head Start basic screening survey and the 2017 workforce survey. While the exact documents associated with each project have been reviewed by the Public Information Officer, we have not applied for protocol review to determine if our dissemination process, data collection and storage method, and compensation frameworks are appropriate. The Head Start survey involves direct patient care and the collection of identifiable private health information. The workforce survey is completely anonymous and involves collection of information from licensed dentists and hygienists across the state.

I discussed this issue with Ms. Judy White today and we both reread the Association of State & Territorial Dental Directors' IRB Review, HIPAA, and Oral Health Surveys, Guidance and Resources for State and Territorial Dental Programs.

This brochure guides oral health programs to seek the following before implementing an oral health survey:

1. A waiver from the agency director.

2. A waiver from the IRB. Submit a letter to the agency's IRB outlining the survey as public health practice; reiterate the fact that public health practice is outside the scope of the IRB, and ask the IRB to consider waiving the survey.

3. Approval from the IRB.

Would you please provide me with further information regarding the Division of Public and Behavioral Health's policies on institution review board/human subjects review? Also where can I access the Division's HIPPA guidelines?

It is my goal to ensure that as we revitalize the Oral Health Program, our activities and public health research are compliant with Division requirements.

Any information that you may be able to provide would be greatly appreciated.

Best regards,

Dr. Capurro

Reference:

Phipps, Kathy. IRB Review, HIPAA, and Oral Health Surveys, Guidance and Resources for State and Territorial Dental Programs. Association of State & Territorial Dental Directors, June 2015. Accessible at: <u>http://www.astdd.org/docs/irb-hippa-bss-june-2015.pdf</u>

	Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov www.dhhs.nv.gov   www.division website.nv.gov
	Helping People. It's who we are and what we do.
Find help	24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>
18 U.S.C. §§ 2510-25 1996 and may conta individual(s) only. If recipient, you are here copying, or the taking result in administrativ	te and accompanying documents are covered by the electronic Communications Privacy Act, (21, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of ain confidential information or Protected Health Information intended for the specified you are not the intended recipient or an agent responsible for delivering it to the intended aby notified that you have received this document in error and that any review, dissemination, of any action based on the contents of this information is strictly prohibited. Violations may e, civil, or criminal penalties. If you have received this communication in error, please notify y e-mail, and delete the message.

From: Sent: To: Cc:	Cody Phinney Beth Handler; Andrea R. Rivers; Deborah S. Aquino; Judy White; Julia Peek
Subject:	Re: Dental Program Progress- Thank You
Subject:	Re: Dental Program Progress- Thank You

Thank you all for your assistance and guidance. We truly appreciate all you have done to support the Oral Health program and our new positions.

		Antonina-Capurro, D.M.D, M.P.H, M.B.A		
		Nevada State Dental Health Officer		
		Nevada Department of Health and Human Services		
		Division Public and Behavioral Health - Oral Health Program		
		1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106		
		T: (702) 774-2573  F: (702)774-2521  E: acapurro@ <u>health.nv.gov</u>		
		www.dhhs.nv.gov   www.division website.nv.gov		
		Helping People. It's who we are and what we do.	na man Tanàna E	
-	Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>			
	<b>NOTICE:</b> This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of -1996 and -may contain -confidential information or -Protected Health Information -intended for the specified			
	individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination,			
	copying, or the taking result in administrative	of any action based on the contents of this information is strictly prohibited. Violations may e, civil, or criminal penalties. If you have received this communication in error, please notify v e-mail, and delete the message.		
• On V		at 7:17 PM, Cody Phinney < <u>cphinney@health.nv.gov</u> > wrote:	· · · · · · ·	· · · · · · ·

I wanted to thank the two of you for all the support you are providing to the Dental Health Program. There is clear progress being made. I very much appreciate that you are making this work. Please don't hesitate to let me know how I can support you.

Cody

From: Sent:	Antonina Capurro <antonina.capurro@unlv.edu> Monday, May 22, 2017 1:37 PM</antonina.capurro@unlv.edu>
	Julia Peek Cody Phinney; John DiMuro; Darren Squillante; Judy White
Subject:	Re: Oral Health Program

Julia,

Is it possible to tour the facility tomorrow afternoon while Judy is in town? Please let me know.

Thank-you,

# ★ Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do. Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

On Fri, May 19, 2017 at 1:33 PM, Julia Peek <<u>ipeek@health.nv.gov</u>> wrote:

We were accounting for a space for you as well so you are able to supervise the staff onsite.

Sent from my iPhone

On May 19, 2017, at 1:20 PM, Antonina Capurro <<u>antonina.capurro@unlv.edu</u><mailto:<u>antonina.capurro@unlv.edu</u>>> wrote:

Good Afternoon,

Judy White will be in Las Vegas next Tuesday afternoon. Would it be possible to schedule a tour of the OPHIE facility while she is in town?

Also, are we in need of offices for the Program Manger and AA position only?

Thank you,

On Friday, May 19, 2017, Julia Peek <<u>jpeek@health.nv.gov</u><mailto:<u>jpeek@health.nv.gov</u>>> wrote: Good afternoon,

The only location we have 3 spaces in Las Vegas is our OPHIE office. The address is: 3811 West Charleston BLVD, Suite 205. Dr. Capurro, please let me know when you would like a tour of the space.

Thanks

## Sent from my iPhone

On May 19, 2017, at 11:49 AM, Cody Phinney <<u>cphinney@health.nv.gov</u><javascript:;><mailto:<u>cphinney@health.nv.gov</u><javascript:;>>> wrote:

Dr. Capurro,

After attending this morning AC4OH meeting and other discussions, it is clear to me that the current structure of the program is not stable or sustainable. In order to, create a stable structure, I believe it is necessary have the Program Manager, the hygienist and the AA report to you. Further, the AA and the Program Manager Positions will be relocated to Las Vegas to better facilitate communication and the work that is being done. Julia Peek and Darren Squillante will be implementing the state processes for making these changes. Staff will be notified on Monday.

Per our discussion, I share your concerns regarding the completion of the fiscal year. I will ask fiscal staff to assist you and Judy with following up on all needed documents and issues. As I stated, please text or phone me at any time to address concerns.

<image002.jpg><<u>http://dhhs.nv.gov/</u>>

Cody L. Phinney Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 |Carson City, NV 89706 T: (775) 684-4224 |C: (775) 742-9963 |E: cphinney@health.nv.gov<javascript:;><mailto:cphinney@health.nv.gov<javascript:;>> www.dhhs.nv.gov<http://www.dhhs.nv.gov><http://www.dhhs.nv.gov/> | www.dpbh.nv.gov<http://www.dpbh.nv.gov><http://www.dpbh.nv.gov/>

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <a href="http://www.nevada211.org">www.nevada211.org</a>

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby

notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

[https://docs.google.com/uc?export=download&id=0B37QrejLgGFtV1ZaUVV0TFJTQWM&revid=0B37QrejLgGFta1JBcW p0eWV1ak0rYnpYUEo3VTBIdTRzOXEwPQ]

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov<http://health.nv.gov> www.dhhs.nv.gov<http://www.dhhs.nv.gov/> | www.division website.nv.gov<http://www.division%20website.nv.gov/>

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org<http://www.nevada211.org/></u>

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From:	Antonina Capurro <antonina.capurro@unlv.edu> Monday, May 22, 2017 4:18 PM</antonina.capurro@unlv.edu>		
Sent:			
То:	Andrea R. Rivers		
Cc:	Judy White		
Subject:	Re: Las Vegas OPHIE Office		

Thank you, Andrea. Judy and I are looking forward to touring the space. We will follow the directions as outlined and meet with Amberley and Adrian tomorrow afternoon.

Regards,

	Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov www.dhhs.nv.gov   www.division website.nv.gov	
 	Helping People. It's who we are and what we do.	
Find help	24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org	
 <b>NOTICE:</b> This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.		

On Mon, May 22, 2017 at 3:21 PM, Andrea R. Rivers <<u>ARRivers@health.nv.gov</u>> wrote:

Good afternoon,

Hope this finds you both having a good day.

Julia mentioned you would like to stop by and look at our OPHIE Las Vegas office location tomorrow. We would be happy to have you!

Our space is similar to Reno in size and number of people. There is surface lot parking available and our suite is on the second floor. Building access is permitted, but when you reach the OPHIE suite you will ring the doorbell. Amberlee Baxa and Adrian Forero will be expecting you between 2:00-5:00. We have three cubicle spaces available. Any questions about the space etc....I'd be happy to help, so please let me know.

DHHS 000216

Office of Public Health Informatics and Epidemiology

## 3811-West Charleston BLVD, Suite 205

Ms. Amberlee Baxa

702.486.3567

abaxa@health.nv.gov

Mr. Adrian Forero

702.486.0482

aforero@health.nv.gov

Andrea R. Rivers

Health Program Manager II



Division of Public and Behavioral Health | Office of Public Informatics and Epidemiology

500 Damonte Ranch Pkwy, Ste 657 |Reno, NV 89521 T: (775) 684-5281 |E: arrivers@health.nv.gov

Nevada Department of Health and Human Services

www.dhhs.nv.gov | http://dpbh.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

# Martha Framsted

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
	Tuesday, May 23, 2017 8:07 PM
То:	Julia Peek
Cc:	Cody Phinney; John DiMuro; Darren Squillante; Judy White; Andrea R. Rivers
Subject:	Re: Oral Health Program

#### Good Evening Julia,

×

Thank you for having Andrea schedule the tour of the OPHIE office for Judy and me. The facility is very nice and the staff were warm and welcoming. The office is three blocks from my current location and would be easily accessible for OHP meetings and staff oversight. We may still need three offices if Judy decides to move to Las Vegas along with the Program Manager and AA, but for the moment two should suffice.

Please let me know if I can be of any assistance during this transition. Regards, Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A
 Nevada State Dental Health Officer
Nevada Department of Health and Human Services
Division Public and Behavioral Health - Oral Health Program
1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106
T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov
www.dhhs.nv.gov www.division website.nv.gov

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

On Fri, May 19, 2017 at 1:33 PM, Julia Peek <<u>ipeek@health.nv.gov</u>> wrote:

We were accounting for a space for you as well so you are able to supervise the staff onsite.

Sent from my iPhone

On May 19, 2017, at 1:20 PM, Antonina Capurro <<u>antonina.capurro@unlv.edu</u><mailto:<u>antonina.capurro@unlv.edu</u>>> wrote:

Good Afternoon,

Judy White will be in Las Vegas next Tuesday afternoon. Would it be possible to schedule a tour of the OPHIE facility while she is in town?

DHHS\_000218

Also, are we in need of offices for the Program Manger and AA position only?

### Thank you,

On Friday, May 19, 2017, Julia Peek <<u>jpeek@health.nv.gov</u><mailto:<u>jpeek@health.nv.gov</u>>> wrote: Good afternoon,

The only location we have 3 spaces in Las Vegas is our OPHIE office. The address is: 3811 West Charleston BLVD, Suite 205. Dr. Capurro, please let me know when you would like a tour of the space.

Thanks

Sent from my iPhone

On May 19, 2017, at 11:49 AM, Cody Phinney <<u>cphinney@health.nv.gov</u><javascript:;><mailto:<u>cphinney@health.nv.gov</u><javascript:;>>> wrote:

Dr. Capurro,

After attending this morning AC4OH meeting and other discussions, it is clear to me that the current structure of the program is not stable or sustainable. In order to, create a stable structure, I believe it is necessary have the Program Manager, the hygienist and the AA report to you. Further, the AA and the Program Manager Positions will be relocated to Las Vegas to better facilitate communication and the work that is being done. Julia Peek and Darren Squillante will be implementing the state processes for making these changes. Staff will be notified on Monday.

Per our discussion, I share your concerns regarding the completion of the fiscal year. I will ask fiscal staff to assist you and Judy with following up on all needed documents and issues. As I stated, please text or phone me at any time to address concerns.

<image002.jpg><<u>http://dhhs.nv.gov/</u>>

Cody L. Phinney Nevada Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Suite 300 | Carson City, NV 89706 T: (775) 684-4224 | C: (775) 742-9963 | E: cphinney@health.nv.gov<javascript:;><mailto:cphinney@health.nv.gov<javascript:;>> www.dhhs.nv.gov<http://www.dhhs.nv.gov><http://www.dhhs.nv.gov/> | www.dpbh.nv.gov<http://www.dpbh.nv.gov><http://www.dpbh.nv.gov/>

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting

#### www.nevada211.org<http://www.nevada211.org><http://www.nevada211.org/>

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

[https://docsigoogle.com/uc?export=download&id=0B37QrejLgGFtV1ZaUVV0TFJTQWM&revid=0B37QrejLgGFta1JBcW p0eWV1ak0rYnpYUEo3VTBIdTRzOXEwPQ]

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov<http://health.nv.gov> www.dhhs.nv.gov<http://www.dhhs.nv.gov/> | www.division website.nv.gov<http://www.division%20website.nv.gov/>

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org<http://www.nevada211.org/>

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

DHHS\_000220

3

## **Martha Framsted**

From:	ARRivers@health.nv.gov
Sent:	Thursday, June 22, 2017 4:21 PM
To:	antonina.capurro@unlv.edu
Cc:	judwhite@health.nv.gov; SLarson@health.nv.gov
Subject:	RE: Office Re: OHP Program Specialist

Great, thanks for confirming. We are happy to help.

Andrea R. Rivers



Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health | Office of Public Informatics and Epidemiology 500 Damonte Ranch Pkwy, Ste 657 |Reno, NV 89521 T: (775) 684-5281 |E: <u>arrivers@health.nv.gov</u> www.dhhs.nv.gov | http://dpbh.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Antonina Capurro [mailto:antonina.capurro@unlv.edu] Sent: Thursday, June 22, 2017 4:13 PM To: Andrea R. Rivers <ARRivers@health.nv.gov> Cc: Judy White <judwhite@health.nv.gov>; Sandra Larson <SLarson@health.nv.gov> Subject: Re: Office Re: OHP Program Specialist

Good Afternoon,

Yes, that is correct. We would like to request the space adjacent to the conference room that has glass on the upper third and houses two cubicles which are accessible by an office door.

Thank you for allowing our program to use this office space. We look forward to this new period of transition and growth.

Best,

Antonina

		Antonina Capurro, D.M.D, M.P.H, M.B.A		
		Nevada State Dental Health Officer		
	Subject and the part of the pa	Nevada Department of Health and Human Services		
		Division Public and Behavioral Health - Oral Health Program		
		1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106	ter en en trata esta de la mante antica a contra trata de la contra de la contra de la contra de la contra de l	. 1971 Star Will and a first star and a second star and a second star and a second star and a second star and a
		F: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov	a second and a s	
		www.dhhs.nv.gov   www.division website.nv.gov		
	·	www.dimbiniti.gov		
		Isluing Describe. It's when we are and what wo do		
		Helping People. It's who we are and what we do.	_	
	· ·	4/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>		
	NOTICE: This message a	nd accompanying documents are covered by the electronic Communications Privacy Act	t,	
	18 U.S.C. §§ 2510-2521	, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) or confidential information or Protected Health Information intended for the specified	d l	
	individual(s) only. If yo	u are not the intended recipient or an agent responsible for delivering it to the intended	d	
	recipient, you are hereby	notified that you have received this document in error and that any review, dissemination	1,	
	copying, or the taking of	any action based on the contents of this information is strictly prohibited. Violations may	у	
	-result-in-administrative,	sivil, or criminal penalties. If you have received this communication in error, please notif	у — — — — — — — — — — — — — — — — — — —	
	sender immediately by e	mail, and delete the message.	]	
		2.22 DAA Andree D. Divers (ADDivers @health my gov) weater		
On	Thu, Jun 22, 2017 a	: 3:33 PM, Andrea R. Rivers < <u>ARRivers@health.nv.gov</u> > wrote:		
Go	ood afternoon,			
		r 11		
Ho	ope this finds you l	ooth well.		
				· _
	e wanted to confir ealth staff?	n that you would like the office with two cubicles within it as	the space for the two	Oral
110	cardii otair.			
ጥኔ	ant way for latting	us know and we will prepare accordingly.	anta anta de la sec	
11	ank you for letting	us know and we win prepare accordingly.		
	hanks,			
Τŀ				
Tŀ				
Τŀ				
Tł	,			
Τŀ		and a state of the	 . <u>.</u> .	
Τŀ		Andrea R. Rivers	· · · ·	 
Τŀ	• • •		 . <u>.</u>	
Th		<b>Andrea R. Rivers</b> Health Program Manager II	 . <del>.</del>	
Th		Health Program Manager II	 . <u>.</u>	
Th			· · · · ·	
Th		Health Program Manager II Nevada Department of Health and Human Services	and Enidemiology	
Th		Health Program Manager II	rs and Epidemiology	· · · · ·
Th	S. 19/10-7	Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic	s and Epidemiology	· · · ·
Tł		Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic 500 Damonte Ranch Pkwy, Ste 657  Reno, NV 89521	rs and Epidemiology	
Th	DWWS	Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic	es and Epidemiology	
Th	DWWS	Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic 500 Damonte Ranch Pkwy, Ste 657  Reno, NV 89521	es and Epidemiology	· · · · ·
Th	DWKS	Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic 500 Damonte Ranch Pkwy, Ste 657  Reno, NV 89521	s and Epidemiology	
Th	DWKS	Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic 500 Damonte Ranch Pkwy, Ste 657  Reno, NV 89521 T: (775) 684-5281  E: arrivers@health.nv.gov	es and Epidemiology	
Th	DWWS	Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic 500 Damonte Ranch Pkwy, Ste 657  Reno, NV 89521 T: (775) 684-5281  E: arrivers@health.nv.gov	rs and Epidemiology	
Th	DWWS V	Health Program Manager II Nevada Department of Health and Human Services Division of Public and Behavioral Health   Office of Public Informatic 500 Damonte Ranch Pkwy, Ste 657  Reno, NV 89521 T: (775) 684-5281  E: arrivers@health.nv.gov	rs and Epidemiology	

## **Martha Framsted**

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
Sent:	Monday, July 3, 2017-2:54 PM
То:	Sandra Larson
Cc:	Andrea R. Rivers
Subject:	Re: Oral Health Program ~ Las Vegas Office

#### Good Afternoon Sandra,

Thank you for clearing a space for our new manager and AA, Alexis Craven. Alexis is still completing HR paperwork at the moment and I am out of the office this week. If you are planning a cleaning day for next Tuesday the 11th, I will plan to come by the office with Alexis to assist you.

Hope you have a wonderful Fourth of July. Best, Antonina

ſ		Antonina Capurro, D.M.D, M.P.H, M.B.A
		Nevada State Dental Health Officer
	×	Nevada Department of Health and Human Services
		Division Public and Behavioral Health - Oral Health Program
		1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106
		T: (702) 774-2573  F: (702)774-2521  E: acapurro@ <u>health.nv.gov</u>
		www.dhhs.nv.gov www.division website.nv.gov
		Helping People. It's who we are and what we do.
	Find help	24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org
	<b>NOTICE:</b> This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify	

On Fri, Jun 30, 2017 at 3:14 PM, Sandra Larson <<u>SLarson@health.nv.gov</u>> wrote:

Hello. I've set aside time next week Tuesday to clean and organize that office and mine. There is a staff in there until I can clear out my office next week for her. If they can use ajacent space for a few days that would be great. We'll work with her get it all done. Thanks for your patience!

Happy Connecting. Sent from my Sprint Samsung Galaxy S<sup>®</sup> 5

------From: "Andrea R. Rivers" <<u>ARRivers@health.nv.gov</u>> Date: 6/30/17 2:00 PM (GMT-08:00)

sender immediately by e-mail, and delete the message.

To: Antonina Capurro <<u>antonina.capurro@unlv.edu</u>>, Sandra Larson <<u>SLarson@health.nv.gov</u>> Subject: Oral Health Program ~ Las Vegas Office

Hello Dr. Capurro,

Thanks for your email. Sandi Larson was working on clearing the space and some storage area, so I'll let her provide an update, but I don't see a problem with the AA assisting and or getting things set. Sandi, let us know your thoughts.

I will be out of the office until July 17th, so if anything comes up Sandi please feel free to text me.

Thanks,

[cid:image004.png@01D25C76.A9261FB0]

Andrea R. Rivers

Health Program Manager II

Nevada Department of Health and Human Services

Division of Public and Behavioral Health | Office of Public Informatics and Epidemiology 500 Damonte Ranch Pkwy, Ste 657 |Reno, NV 89521

T: (775) 684-5281 E: arrivers@health.nv.gov<mailto:arrivers@health.nv.gov>

www.dhhs.nv.gov<http://www.dhhs.nv.gov/> | http://dpbh.nv.gov<http://dpbh.nv.gov/>

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org<<u>http://www.nevada211.org/</u>>

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Antonina Capurro [mailto:<u>antonina.capurro@unlv.edu]</u> Sent: Friday, June 30, 2017 11:20 AM To: Andrea R. Rivers <<u>ARRivers@health.nv.gov</u>> Subject: Inquiry

Good Morning Andrea,

Hope this email finds you well. I wanted to touch base with you concerning the OPHIE office on Charleston and Valley View. We have an administrative assistant, Alexis Craven, who will be starting with our program next week. I realize we only recently requested that the office space in the OHPIE office be cleared. Would it be helpful if our new AA was to assist in the cleaning process or would it be possible for her to sit in an adjacent space while the area is reorganized?

Also, there are several boxes of supplies that we would like to send down from Carson City. Is this a good time for us to

DHHS 000224

Best, Antonina				
https://docs.google.com/ p0eWV1ak0rYnpYUEo3VTI		d&id=0B3/QrejLgGFtV	/1ZaUVV0TFJTQWM&revid=(	JB3/QrejlgGFta1JBCW
	<u> </u>		an a	1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 -
Antonina Capurro, D.M.D, Nevada State Dental Healt	h Officer			
Nevada Department of He Division Public and Behavio 1001 Shadow Lane, MS 74	oral Health - Oral He	alth Program		
T: <u>(702) 774-2573</u>  F: <u>(702</u>				
				· · · · · · · · · · · · · · · · · · ·
an a				
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · ·	· · · · · · · · · · · · · · · · · · ·	
			<u>.</u>	i da la composition de la composition d
and the second				
		• • •		 
		<u> </u>		

## Nevada Chronic Disease Prevention and Health Promotion, Oral Health Program (OHP) Quarterly Report to the Nevada Maternal, Child and Adolescent Health Section April – July 2017

#### **Program Changes**

In mid-May the administration announced that the Oral Health Program would move to Las Vegas. The OHP Manager, Deborah Aquino, was given the option of moving with the program or taking another position in Carson City. She opted to start in a new position in Carson City on June 5.

State Dental Officer Dr. Antonina Capurro DMD, MPH, MBA and State Public Health Dental Hygienist Judy White RDH, MPH are currently working to fill the position, which is expected to be filled by late December.

In her role as OHP Manager, Ms. Aquino shared minimal information with Dr. Capurro and Ms. White regarding the OHP budgets, grants and/or-grant deliverables, and her activities with various partners. The following report on her activities therefore reflects the best information that we can assemble.

#### **Oral Health Program Manager Collaborations and Activities**

Ms. Aquino participated in the following:

- Children's Day at the Comstock shared oral health materials and brochures
- Virginia City Health Fair shared oral health materials and brochures
- Quarterly meetings on workforce recruitment and retention
- Meetings on strengthening state systems to improve diabetes management and outcomes
- iDO Improving Diabetes and Obesity Outcomes Group
- Oral Health and Safe Drinking Water Group
- Heart and Stroke Task Force
- PRAMS Committee
- Advisory Committee for Oral Health (AC4OH)
- Community Coalition for Oral Health

Ms. Aquino also kept in contact with Nevada water plants, entered water fluoridation data for CDC's website, and ensured that Nevada was compliant and eligible for CDC water fluoridation awards. She provided support for oral health to community health nurses, and for the tobacco cessation program.

Since April 1, Ms. Aquino provided the following for distribution:

- WIC Program Health Fair: 11,155 brochures in English and Spanish, 2200 infant, child, and adult toothbrushes, and over 1700 units of toothpaste, dental floss, and brushing timers.
- **Carson City Health & Human Services:** 58 copies of oral health literature and 167 assorted oral health care products including infant, child, and adult toothbrushes, toothpaste, and dental floss.
- Rural Mental Health Program: 20 toothbrushes.
- Virginia City Annual Kids Community Connection Event: 51 copies of oral health literature and almost 400 oral healthcare products including infant, child, and adult toothbrushes, toothpaste, and dental floss.
- Oral Health/Women, Infants, and Children Program (WIC) Collaboration: approximately 450 oral healthcare kits were assembled for infants and pregnant women at WIC centers. We will distribute these to the smaller rural WIC centers first, and then continue with the larger metropolitan area WICs in Nevada. Total dispersal will be ~1800 oral healthcare kits.
- **Oral Health/Community Health Nursing:** oral health literature, oral health care products, and fluoride varnish was given for dispersal at three Lyon County locations.

### **Other Oral Health Program Activities**

Although we are not funded by this MCAH grant, the following section outlines some activities conducted by Dr. Capurro and Ms. White from April to July 2017, also as part of the Oral Health Program:

- Disseminated a Workforce Survey to all ~3200 Nevada-licensed dentists and dental hygienists. This survey will help to define gaps, distribution of services for vulnerable populations (e.g. Medicaid recipients, Special Needs patients, small children, etc.), and trends in providing dental services to Nevada's residents.
- Collaborated with the Nevada Department of Education's Office of Early Learning and Development (Head Start) to screen over 400 Head Start children at 16 centers across rural Northern Nevada. Fluoride varnish applications, toothbrushes, and a list of low-cost community dental clinics were provided. This brought attention to the need for care to several children; Dr. Capurro called parents of children with urgent dental needs to reinforce the importance of immediate dental care.
- Met with WIC and Head Start to discuss expansion of oral health materials and education to licensed child care centers.
- Developed database/oversaw entry of over 400 Head Start Screening forms in preparation for analysis and comparison to prior years' data.
- Regularly acted as a liaison between Medicaid and Nevada's licensed providers in smoothing the transition of Dental Plan Administrators, which will take place later this year. Provided content expertise to Medicaid and DPBH leadership.
- Volunteered at Special Olympics, Special Smiles in Reno and Las Vegas.
- Participated in quarterly meetings of regional oral health coalitions (Community Coalition for Oral Health and Oral Health Nevada).
- Participated in the annual inspection of two water treatment plants in Southern Nevada.
- Researched and ordered equipment and supplies to outfit three mobile dental units for loan and use in the rural areas of Nevada, beginning in early 2018.
- Supervised two temporary administrative assistants in carrying out work for OHP.
- Provided technical expertise to a community nurse from Incline Village to start a dental sealant program in the elementary school.
- Submitted abstracts (which were accepted) to Nevada Public Health Association.
- Supported UNLV School of Dental Medicine's Special Care Dental Clinic application to become a public health-recognized clinic.
- Visited four long term care centers in Carson City with oral health supplies for their residents.
- Met with WIC and MCAH leadership to determine grant deliverables to be met for the previous agreement, and to initially discuss potential projects and funding for the coming year.
- Wrote job descriptions for an administrative assistant and a new oral health program manager; interviewed administrative assistant applicants.
- Represented Nevada at two national conferences (Medicaid Dental Director's Conference, and the National Oral Health Conference).
- Attended Patient-Centered Medical Home Subcommittee meetings.
- Wrote policy for health assessment (dental exam) before entry in school.
- Collaborated with the Southern Nevada Health District to begin offering mobile dental services.

#### Next Steps

Thank you most sincerely for your support. We look forward to continued collaboration with Nevada's Maternal, Child and Adolescent Health to increase meaningful, sustained impact of the Nevada's Oral Health Program, and consequently improved oral health in Nevada.

Respectfully submitted by Judy A. White RDH, MPH, July 14, 2017

## **Martha Framsted**

From:	dashaffer@nsbde.nv.gov
Sent:	Wednesday, August 16, 2017 12:40 PM
То:	acapurro@health.nv.gov
Subject:	RE: Inquiry

#### Good Afternoon-

Yes, I will be available on Monday or Tuesday the 18th or 19<sup>th</sup> of September to meet with you and Dr DiMuro. As for the program with the Southern Nevada Health District. They would need to provide the program and services that will be provided by the Public Health Dental Hygienist to the Board for approval. The next meeting of the Board is Friday September 29, 2017. Please provide the information on orbefore September 21, 2017

As for the fluoride treatments. Fluoride treatments may only be provided by a dental assistant under the supervision, authorization and employment by a dentist. A dental hygienist may apply fluoride under the employment and authorization of the licensed dentists unless the dental hygienist holds a valid public health endorsement then they may apply fluoride through the Board approved program.

I hope this addresses your inquiry. Should you need further information, please do not hesitate to contact me.

## Debra Shaffer-Kugel

Debra Shaffer-Kugel, Executive Director Nevada State Board of Dental Examiners 6010 S Rainbow Blvd, Ste A-1 Las Vegas, Nevada 89118 (702) 486-7044 ext 23 (702) 486-7046 (Fax) dashaffer@nsbde.nv.gov

From: Antonina Capurro Sent: Friday, August 11, 2017 11:35 AM To: Debra Shaffer Subject: Inquiry

Good Morning Ms. Shaffer-Kugel,

I hope this email finds you well. I would like arrange a meeting with you to introduce you to Dr. DiMuro, DPBH Chief Medical Officer. He is an advocate for improvements in oral health, and we would like to speak with you about ways to enhance dental services in the state and support dental professionals. He should be in coming into Vegas sometime in mid-September. Please let me know if you might have any availability the week of the 18<sup>th</sup>.

On a slightly separate note, there are a few projects proposed by the Oral Health Program (OHP) on which I would appreciate your opinion.

First, OHP is exploring avenues to expand access to oral health education and preventative services for those living in rural Nevada. Community health workers are a growing new member of the workforce who are trained to provide a basic level of healthcare and education. I cannot seem to find legal guidelines that will provide us with information on who can apply fluoride varnish in the state. It can only be purchased by a licensed dental professional but seems as though it can be used by any member of the dental team (assistant to dentist). If community health workers received

DHHS 000228

training through the Oral Health Program and followed a strict application protocol, would NSBDE permit them to apply fluoride varnish to Nevadans living in remote and rural areas?

Lastly, we are working with Dr. Iser, Director of the Southern Nevada Health District, to place a Public Health Endorsed Dental Hygienist on their medical van which will travel throughout rural areas of Southern Nevada providing healthcare services. In order for the hygienist to be able to work in this capacity, should we request that the mobile clinic be identified by the Board as a public health clinic?

I look forward to hearing from you. Regards,

	Antonina Capurro, D.M.D, M.P.H, M.B.A	
	Nevada State Dental Health Officer	
	Nevada Department of Health and Human Services	
	Division Public and Behavioral Health - Oral Health Program	
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106	
	T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov	
	www.dhhs.nv.gov  www.division.website.nv.gov	
······································	Helping People. It's who we are and what we do.	
Find help 24	4/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>	
	nge and accompanying documents are covered by the electronic Communications Privacy Act, 21 may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of	

18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

# **Martha Framsted**

	From: Sent: To: Subject:	acapurro@health.nv.gov Wednesday, November 1, 2017 3:13 PM SLarson@health.nv.gov; sbennett@health RE: 3811 W Charleston #205	n.nv.gov; jpeek@health.nv.gov
	Good Afternoon Sandra,		
		office. Neither of these positions is current	r Grade Step 37 and Administrative Assistant tly filled, but we hope to have someone in
-		office in 205 and are interested in using eit an area in the office that could be used to	her a locked closet or a cubicle area for display brochures or to place an extra filling
-		onference room at least once a quarter. To ion and are planning to hold our Decembe	
	Thank you for considering our ne Best, Antonina	eeds. If any other information is needed, fe	el free to contact me.

	Antonina Capurro, D.M.D, M.P.H, M.B.A
	Nevada State Dental Health Officer
	Nevada Department of Health and Human Services
	Division Public and Behavioral Health - Oral Health Program
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106
	T: (702) 774-2573  F: (702)774-2521  E: <u>acapurro@health.nv.gov</u>
	www.dhhs.nv.gov www.division.website.nv.gov
	Helping People. It's who we are and what we do.
Find help 2	24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>
OTICE: This mess	age and accompanying documents are covered by the electronic Communications Privacy A

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

**From:** Sandra Larson **Sent:** Wednesday, November 01, 2017 12:36 PM **To:** Shannon Bennett; Antonina Capurro; Julia Peek **Subject:** FW: 3811 W Charleston #205

Hello-

I am working on the renewal of the lease agreement for our office. The current space at 3811 W Charleston Blvd suite 205 (OPHIE) and 207 (WebIZ) is a total of 2409 sq feet. OPHIE suite 2015 occupies 1515 sq feet and Web IZ (207) 894 sq feet. In order to work to complete form we need to update the staff and their space requirements.

Shannon- would you be able to provide me the number of staff you have in 207 office and grades (i.e. 35,37). Addionally what needs for space for conference room.

Julia/Antonia- can you please let me know how many staff for Oral Health you plan to keep in this office and their grades. Also, if you need any extra cubicles for continued storage.

I will work on the copier/fax, etc space for both offices. However, if there is additional items needed for secure files, IT, or equipment please let me know and the require space in sq ft.

Thank you!



## Sandi Larson, MPH

State Epidemiologst Nevada Department of Health and Human Services Division of Public and Behavioral Health 3811 W. Charleston Blvd, Suite 205 |Las Vegas, Nevada 89102 T: (702) 486-0068 |C: (702) 904-3923 |E: <u>slarson@health.nv.gov</u> www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Sophia M. LaBranch Sent: Wednesday, October 25, 2017 11:18 AM To: Sandra Larson <<u>SLarson@health.nv.gov</u>> Subject: 3811 W Charleston #205

Hi Sandra,

The lease for this location is set to expire in early March. The landlord has asked that we start the renewal process.

Please fill out a space request for renewal. It is located here: https://dpbh.sharepoint.com/sites/administration/Fiscal/Contracts/Shared%20Documents/Lease%20Toolbox/Space%2 ORequest%20and%20Justification.xls?d=we5579b0841a544f5b22df9b57424667c&csf=1

Please fill out the Space Request tab and the Space Justification tab and email me the excel spreadsheet. Once I receive it, I'll put it through review.

Let me know if you have any questions!

Thanks!



## Sophia LaBranch

Division Lease Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Admin Services 4150 Technology Way, Suite 300 |Carson City, NV 89706 T: (775) 684-5915 |F: (775) 684-4211|E: <u>smlabranch@health.nv.gov</u> www.dhhs.nv.gov | http://dpbh.nv.gov/

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

# **Martha Framsted**

From:	acapurro@health.nv.gov
Sent:	Tuesday, November 7, 2017 3:01 PM
То:	BrBarlow@health.nv.gov
Cc:	DReynolds@health.nv.gov
Subject:	Oral Health Program
Attachments:	Annual Project Progress Update.pdf; Dental Dashboards FY17 to date_Q3.pdf

Good Afternoon Ms. Barlow,

It was very helpful to clarify the type of information that is needed for your evaluation. As I mentioned, the Oral Health Program provides consultation on dental public health topics on an as needed basis to the Division of Health Care Financing and Policy (DHCFP). Attached is the annual report that was created to highlight the accomplishments of the Oral Health Program. There is a separate section on Medicaid. Over the past year, we have had a very close working relationship with DHCFP. For many providers, our office is seen as a resource and advocate on Medicaid topics. It is not uncommon for billing mangers and dentists to turn to the Oral Health Program for assistance in understanding the changes in the managed care organizations, explain billing code errors, or provide instructions on the state's fair hearing process.

In addition to the listed activities, I have also recently submitted reviews for the Liberty Member Handbook, a complete review of PT22 CDT codes, and the Liberty Dental Clinical Criteria Guidelines. I will also be attending the State Oral Health Leadership Institute next week with Jack Zenteno of DHCFP. Nevada was awarded this grant opportunity through the Center for Health Care Strategies and we will be working on an medical-dental integration program focused on providing oral health education and dental assessments to pregnant women receiving obstetric care in one of four clinics--an FQHC, a private office, a midwifery clinic, and a hospital setting (UMC's Wellness Clinic).

While there are have been set projects within DHCFP such as rewriting Medicaid Chapter 1000 and attending dentally related public workshops, we are also asked to research topics of interest. I am currently researching the clinical necessity of providing Medicaid payments for blood tests performed on children prior to receiving dental treatment in an ambulatory surgery center. We are also investigating the possibility of adding adult dental benefits to the Governor's budget.

If after reviewing the attached report, you would like further information about a specific project or collaboration, please feel free to contact me.

Thank you,

······	Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: <u>acapurro@health.nv.gov</u> <u>www.dhhs.nv.gov</u>  www.division.website.nv.gov
	Helping People. It's who we are and what we do.
Find he	elp 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>
NOTICE: This	message and accompanying documents are covered by the electronic Communications Privacy Act,

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified

individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

## From: Brooke Barlow Sent: Friday, September 22, 2017 9:47 AM To: Judy White <<u>judwhite@health.nv.gov</u>> Cc: David Lenzner <<u>dlenzner@health.nv.gov</u>> Subject: PCG Requests for Feedback - Oral Health

#### Good morning Judy,

I'd like to thank you for participating in the brief discussion on the Oral Health program with our Public Consulting Group -(PCG) reps-last-week. Our PCG-reps-are-requesting additional-feedback from your-area-outlined below:-----------

- Can you please provide more information on your unit and the projects and work for which you are all responsible (pamphlet, etc.)?
- Do you have a statistic that represents the work/population your area is serving?
- Reminder: If Oral Health under DPBH would like to bill Medicaid in the future, an MOU with DHCFP would most likely be needed before that can happen, so as to extend DPBH the permission to provide those specific services on behalf of Medicaid.

If possible, would you be able to provide us the requested information on the first two bullet points by Tuesday, October 3<sup>rd</sup>? Please let me know if that deadline is feasible and if you have any questions. Thank you.



Brooke E. Barlow Budget Analyst III Nevada Department of Health and Human Services Division of Public and Behavioral Health | Revenue Management 4150 Technology Way, Suite 300 | Carson City, NV 89706 T: (775) 684.5989 | E: <u>brbarlow@health.nv.gov</u> www.dhhs.nv.gov | www.dpbh.nv.gov

Helping People. It's who we are and what we do. Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u> Division of Public and Behavioral Health Nevada Oral Health Program

# Contact Information:

Antonina Capurro DMD, MPH, MBA State Dental Health Officer

<u>acapurro@health.nv.gov</u> (702) 774-2573

Judy A. White RDH, MPH State Public Health Dental Hygienist judwhite@health.nv.gov

(775) 350-5275



# **Activities Report**

Nevada Division of Public and Behavioral Health

Oral Health Program

State Dental Health Officer and State Public Health Dental Hygienist

> Prepared by: Dr. Antonina Capurro



DHHS\_000235

#### ORAL HEALTH PROGRAM

This is an annual report on the progress of Dr. Capurro, State Dental Health Officer, and Ms. White, State Public Health Dental Hygienist and their roles within the Nevada Oral Health Program. We are grateful for the array of collaborative partnerships and extensive DPBH support that has contributed to our success.

#### Mission

The mission of the Nevada Oral Health Program is to protect, promote, and improve the oral health of the people of Nevada. The Oral Health Program and its partners collaborate to promote optimal oral health for Nevadans across the lifespan.

#### **Priority Areas**

Access to Care, Collaborative Partnerships. Medicaid Dental Benefits, Oral Health Promotion, Data Acquisition, Dental Education, and Oral Health Workforce are the priority areas for the 2016-2017 activity cycle.

#### Access to Care

**Objective 1.1- Dental Services for Adults with Special Healthcare Needs** Interlocal agreement has been created between Division of Public and Behavioral Health (DPBH) Oral Health Program and UNLV School of Dental Medicine (UNLV SDM) Special Care Dental Clinic to expand hospital and non-hospital services for adult patients with special healthcare needs, provide dental services to patients in adult day activity and vocational training centers, and increase dental educational through clinical rotations and continuing education courses.

#### **Objective 1.2- Community Dental Resource Inventory**

A comprehensive inventory of statewide dental clinics offering free, sliding scale, or Medicaid dental services to adults and children has been created. This handout which is categorized by location and services offered was distributed to OHP partners, to the public through Nevada 211, and to children screened at Head Start sites and in WIC centers.

#### **Objective 1.3- Dental Access for Rural Communities**

Portable dental equipment and supplies were purchased to provide dental services throughout rural Nevada. Proposed methods of utilization include a lending library approach to licensed dental volunteers with equipment housed in rural communities. Currently, OHP is in negotiation with the Southern Nevada Health District to station a contracted dental hygienists aboard their mobile medical clinic who will provide preventive services including sealants, fluoride varnish application, and cleanings throughout rural Southern Nevada.

> 2 2

#### TABLE OF PROGRESS

Strategy	Lead	Progress	Comments
Dental Education			
Objective 6.4- CDC Water Fluoridation	Capurro	Met- Continuous	
Objective 6.4- Conference Presentations	Capurro/White	Met- Continuous	
Objective 6.5- Reports and Proposals	Capurro/White	Met- Continuous	
Oral Health Workforce			
Objective 7.1-Support Nevada's Graduating Dental and Dental Hygiene Students	Саригто	Met	
Objective 7.2-Oral Health Program Staff	Capurro/White	Met- Continuous	
Objective 7.3-Oral Health Program Relocation	Capurro/White	Evolving	



#### TABLE OF PROGRESS

Strategy	Lead	Progress	Comments
Oral Health Promotion			
Objective 4.1- Health Assessment Before School Entrance Policy	Саригто	Evolving	
Objective 4.2- Grant Support	Capurro/White	Met- Continuous	Actively searching for grant support
Data Acquisition			
Objective 5.1- Head Start Basic Screening Survey 2017	White	Met- Continuous	Data analysis Fall 2017
Objective 5.2–2017 Dental Workforce Survey	Саригго	Met- Continuous	Data analysis Fall 2017
Objective 5.3- ASTDD Synopsis Questionnaire for FY 15-16	Capurro	Met	
Objective 5.4 Non-Traumatic Dental Visits to Nevada Emergency Departments	White	Evolving	Report in Early Sum- mer
Objective 5.5– Oral Health Surveillance System	White	Evolving	Report in Late Summer
Dental Education			
Objective 6.1- Oral Health Manifestations and Diabetes	Саритто	Met	· . :
Objective 6.2- Continuing Education on Basic Screening Survey Protocol	Capurro/White	Evolving	Course scheduled for Fall 2017
Objective 6.3 A- 79 <sup>th</sup> Legislative Session-Assembly Bill 193	Саритто	Met	
Objective 6.3 B- 79 <sup>th</sup> Legislative Session-Legislative Days	Capurro/White	Met	

DHHS\_000237

#### **Collaborative Partnerships**

**Objective 2.1– Nevada Women, Infants, and Children (WIC) Program** Partnership to strengthen the infrastructure of the WIC programs. FY17 project included providing oral health education and dental hygiene supplies to over 5,000 WIC recipients in Nevada through 16 local WIC agencies which operate 45 clinical locations. WIC funded a part-time administrative assistant to support the project goals.

#### Objective 2.2- Maternal, Child, and Adolescent Health (MCAH)

MCAH supports the Oral Health Program Manager position. FY18 Memorandum of Understanding has been finalized.

#### **Objective 2.3-Chronic Disease Programs**

Diabetes Prevention and Control: State Action Plan member. The interactive strategic planning sessions addresses the burden of diabetes in Nevada. State action plan in progress.

# Objective 2.4-Department of Education, Office of Early Learning and Development (Head Start)

Oral health education and support provided to rural Health Start sites throughout the State.

#### **Objective 2.5-Clinical Community Outreach**

- Special Olympics Special Smiles (4 events)—provided oral health screenings, fluoride varnish application, and mouth guards to Nevada Special Olympics Healthy Athletes. These are the first Special Smiles events to have ever been held in Nevada.
- Give Kids a Smile—national American Dental Association event. Member of the Southern Nevada Dental Society planning committee, part of the screening team to triage patients, and volunteer at February 2017 event.
- Lighthouse Charities Humanitarian—coordinator for pre-doctoral student involvement and volunteer in providing oral screenings and fluoride varnish application to refugee patients attending the event
- Seal Nevada South (6 events)—provided oral screenings, fluoride varnish applications, and supervised CSN hygiene students while providing treatment to school-age children in Clark County.
- Senior Resource Fair with Carson City Senior Center and Orvis School of Nursing—provided oral health education and dental hygiene supplies.
- UNLV—Preschool Oral Health Presentation, Chinese Baptist Church Community Health Fair, Doolittle Community Center Choose and Move, and UNLV Wellness Expo.

3.0.

#### **Objective 2.6– Organizations/Committees**

- \* Advisory Committee on the State Program for Oral Health (AC4OH)
- \* Association of State and Territorial Dental Directors Member
- \* ASTDD Dental Public Health Resource Committee
- ASTDD Healthy Aging Committee Member

#### **Objective 2.6- Organizations/Committees**

- \* ASTDD State Dental Director Mentorship Program Member
- \* Community Coalition on Oral Health
- \* Heart Disease and Stroke Task Force
- \* Latin Chamber of Commerce Guest- October 21<sup>st</sup> spoke with Mayor Goodman on oral health and healthcare in Nevada; December 9<sup>th</sup> spoke with Lt. Governor Mark Hutchinson and thanked him for state support for the oral health program.
- \* Nevada Public Health Association Board Member-at-Large
- \* Nevada Statewide Maternal and Child Health Coalition
- \* Patient Centered Medical Home Subcommittee for Chronic Disease Council
- \* Risk Assessment Monitoring System (PRAMS) Steering Committee
- \* Rural Health Network Member
- \* Southern Nevada Mobile Health Services Collaborative
- \* Strengthen State Systems to Improve Diabetes Management and Outcomes

#### **Medicaid Dental Benefits**

#### Objective 3.1-RFP 3290

RFP was reviewed and revisions submitted. Six applications (~3,000 pages) were thoroughly studied and scored.

#### Objective 3.2-RFP 3425

RFP 3425 replaced RFP 3290 after its retraction. Verbiage of 200+ page RFP again reviewed and amended.

#### **Objective 3.3-Medicaid Chapter 1000-Dental**

Medicaid Chapter 1000 was revised and rewritten in collaboration with Medicaid office designee to increase preventative dental services while identifying options to reduce orthodontic costs. Feedback/complaints were individually addressed in writing or via telephone calls.

#### **Objective 3.4-State Oral Health Leadership Institute**

The Center for Health Care Strategies' accepted Nevada's application for professional developmental and technical assistance to strengthen Nevada's Medicaid program. The Institute will assist in producing a joint oral health transformational state project. Dr. Capurro and Mr. Zenteno will attend the Institute in October 2017.

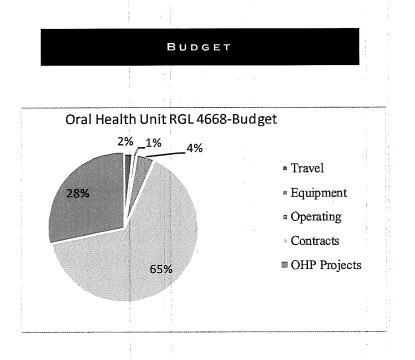
# bjective 3.5-Orthodontic Claims Research

Dverseeing Nevada's participation in a orthodontic research project being conducted by Pr. Greg Oppenhuizen of the American Association of Orthodontists (AAO) in conjunction with the Angle Society-Midwest and the University of Detroit/Mercy. This is a unique opportunity to be part of a research study that may solidify or alter the AAO Committee on Medically Necessary Orthodontic Care's decision. In addition, participation allows Medicaid to assure providers that Nevada is associated with an investigation to otherwise the necessity of auto-qualifiers and whether the criteria is onerous to access to orthodontic care for medically necessary patient cases.

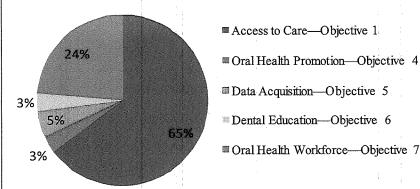
# TABLE OF PROGRESS

Strategy	Lead	Progress	Comments
Access to Care			
Objective 1.1- Dental Services for Adults with Special Healthcare Needs	Саритто	Met	
Objective 1.2- Community Dental Resource Inventory	White	Met	
Objective 1.3- Dental Access for Rural Communities	Capurro	Evolving	
Collaborative Partnerships			
Objective 2.1– Nevada Women, Infants and Children (WIC) Program	Capurro/White	Met- Continuous	
Objective 2.2– Maternal, Child, and Adolescent Health (MCAH)	Capurro/White	Met- Continuous	
Objective 2.3– Chronic Disease Program	Capurro/White	Met- Continuous	
Objective 2.4-Dept. of Education, Office of Early Learning and Development (Head Start)	White	Met- Continuous	<ul> <li>A second database in the second se Second second sec</li></ul>
Objective 2.5– Clinical Community Outreach	Capurro/White	Met- Continuous	• •
Objective 2.6– Organizations/ Committees	Capurro/White	Met- Continuous	: !
Medicaid Dental Benefits			
Objective 3.1-RFP 3290	Capurro/White	Met	
Objective 3.2-RFP 3425	Capurro/White	Met	i a Tiva
Objective 3.3-Medicaid Chapter 1000-Dental	Саригго	Met	
Objective 3.4-State Oral Health Leadership Institute	Capurro	Met- Continuous	Institute wil begin October'17
Objective 3.5-Orthodontic Claims Research	Саригго	Met- Continuous	

<u>202</u> 4



# Oral Health Program Projects : (28% of RGL 4668-Budget)



#### **Oral Health Promotion**

# Objective 4.1- Health Assessment Before School Entrance Policy (1<sup>st</sup>,4<sup>th</sup>, 7<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> grade)

Regulation adoption in progress. The overall goal of the policy is to: 1) determine the dental status on Nevada school children, 2) identify those in need and refer them to services, 3) connect families with a dental and medical home, 4) increase population based services, 5) develop targeted interventions, and 6) build the connection between overall health, dental health, and education.

#### **Objective 4.2- Grant Support**

1. Applied for a Henry Schein Cares Foundation grant to support the Head Start Basic Screening Survey 2017 project. Application was not accepted.

**2.** Letter of support written to support a grant application submitted by Future Smiles to allow the organization to expand dental services to Northern Nevada.

3. HRSA 17-068. Contributed to grant narrative and provided state support for this grant which will provide funding to train pre-doctoral dental students to provide oral health services to vulnerable, underserved, rural children ages 0 to 5 in Nevada. Grant if awarded will be awarded to UNLV School of Dental Medicine.

**3**. Evaluating a Patterson Foundation grant to financially support partnership with Southern Nevada Health District's mobile medical clinic; on track for October submission.

**4.** Regularly assess grant opportunities to thoughtfully position the Program and prepare for future competitive applications.

#### **Data Acquisition**

### **Objective 5.1- Head Start Basic Screening Survey 2017**

Conducted an open mouth basic screening survey of 400 Head Start (HS) children in 16 rural Head Start sites throughout Nevada. HS children received fluoride varnish applications and oral hygiene instructions and supplies while parents received a Community Dental Resource Inventory. Parents of children with urgent dental issues received additional information and a follow-up phone call. <u>Partners include</u>: Nevada Department of Education, Office of Early Learning and Development, Community Health Alliance, and State and Territorial Dental Directors (ASTDD).

## Objective 5.2-2017 Dental Workforce Survey

Designed and distributed an electronic survey to all licensed Nevada dentists and dental hygienists(~3,000) to determine at-risk populations served and identify workforce gaps. Results will be compared to the 2007 dental workforce survey. <u>Partners include</u>: Primary Care Office, Medical Education Council of Nevada, and UNLV SDM Special Care Dental Clinic.

### Objective 5.3- ASTDD Synopsis Questionnaire for FY 15-16

Association of State and Territorial Dental Director's Annual synopsis of 50 states, and territories. OHP compiled information on Nevada's oral health program infrastructure, programming, and demographics on at-risk populations in the state. The information gathered from the questionnaire was compiled into a comprehensive report and shared on the ASTDD and CDC website.

> <u>२</u>०२ 5





#### **Data Acquisition**

**Objective 5.4– Non-Traumatic Dental Visits to Nevada Emergency Departments** Working with the Office of Public Health Informatics and Epidemiology (OPHIE) to evaluate and report primary dental diagnoses, payer source, and geographic distribution of non-traumatic dental visits in emergency departments in Nevada.

#### Objective 5.5– Oral Health Surveillance System

Developing a plan to aggregate oral health data and track trends for several population groups and ages, from several different sources (e.g, the Behavioral Risk Factor Surveillance System, oral health surveys, etc.). Data will be regularly updated and available in user friendly fact sheets and on the Oral Health Program web page.

#### **Dental Education**

**Objective 6.1- Oral Health Manifestations and Diabetes-Overview and Strategies** Lecture presented to medical practitioners as part of Improving Diabetes and Obesity Outcomes Council meeting.

#### **Objective 6.2- Continuing Education on Basic Screening Survey Protocol**

Continuing education course on basic screening survey protocol is being developed for any licensed dental professional providing dental screenings in Nevada. Protocol training allows for results to be collected, recorded, and compared using a standardized method. Course is offered by the Division of Public and Behavioral Health, Oral Health Program through UNLV School of Dental Medicine.

#### Objective 6.3 A- 79th Legislative Session-Assembly Bill 193

Memorandum on the dental effects of water fluoridation written, provided to Assemblywoman Joiner, and archived as an exhibit on NELIS. Also, Agency Legislative Status Report for AB 193 completed for DPBH.

### Objective 6.3 B- 79<sup>th</sup> Legislative Session-Legislative Days

Attended the Nevada Dental Association Legislative Day on March 1<sup>st</sup>, the Community Coalition for Oral Health Legislative Day on March 23<sup>rd</sup>, and spoke to those in attendance on the Nevada Oral Health Program.

#### **Objective 6.4- CDC Water Fluoridation**

Attended CDC sponsored course on community water fluoridation including engineering and administrative guidance. Monthly water fluoridation information for Southern Nevada entered into the CDC Water Fluoridation Reporting System which entitles Nevada to consideration for the annual CDC Water Fluoridation Award.

#### Dbjective 6.5- Conference Presentations

UNLV SDM Advisory Committee-September 2016

•House of Delegates for Nevada Hygiene Association's Annual Meeting-October 2016

Southern Nevada Hygiene Association Meeting- February 2017

Nevada Public Health Association Annual Conference—Dr. Capurro and Dr. Gewelber, Director of UNLV SDM Special Care Dental Clinic, will present a lecture on adults with special healthcare needs in Nevada with emphasis on the work done through the interlocal agreement between OHP and UNLV SDM and preliminary results on provider attitudes and level of care available to this population from the 2017 workforce survey.

### **Dental Education**

**Objective 6.6– Reports and Proposals** 

*DHHS Fact Book	*Policy: Urgent Dental Issues Identified During Community/School Screenings
*Fluoride Varnish Application Policy	*Medicaid Proposal to Extend Periodontal Benefits to Adult Patients with Diabetes
*Maternal Child Health Annual Report	*Medicaid Proposal to Include Public Health Endorsed Hygienists as Recognized/ Reimbursable Provider Type
*WIC Annual Report	*Nassir Sealant Report
*Legislative Brief: Oral Health Program	*Oral Health Recommendations: Men's Health Month Screening Tool
*ASTDD Synopsis	*Proposal: Health Assessment Before School Entrance

### **Oral Health Workforce**

# Objective 7.1-Support Nevada's Graduating Dental and Dental Hygiene Students

The 2017 dental/hygiene graduates of UNLV School of Dental Medicine, Truckee Meadows Community College, and College of Southern Nevada received a certificate of achievement and letter from the Nevada Oral Health Program. Formal presentation provided to the UNLV SDM Class of 2017 during their senior gala.

#### **Objective 7.2-Oral Health Program Staff**

•Successful hiring and contract completion for Health and Human Services Professional Trainee, Ms. Kristen deBraga

•Successful hiring of Administrative Assistant under WIC grant, Ms. Alexis Craven

- •Hiring of Oral Health Program Manager in progress
- •Hiring of Oral Health Program Administrative Assistant in progress

•Hiring of Public Health Endorsed Dental Hygienist for Southern Nevada Health District Mobile Clinic in progress

#### **Objective 7.3-Oral Health Program Relocation**

Physical transfer of all Oral Health Program related materials and dental equipment from Carson City to Las Vegas. The new Oral Health Program office will be shared with the Office of Public Health Informatics and Epidemiology (OPHIE) and located at 3811 W. Charleston Blvd. Suite 205, Las Vegas, Nevada 89102.

# Dental Dashboard Reports Nevada Division of Health Care Financing and Policy SFY17 to date

- 1. Active Providers DXC
- 2. Active Providers DSS
- 3. Provider Count FFS/HMO
- 4. Patients
- 5. Service Count and Costs Fee for Service (FFS)
- 6. Service Count and Costs Amerigroup (AGP)
- 7. Service Count and Costs Health Plan of Nevada (HPN)
- 8. Members
- 9. % of Enrollees receiving services

#### **Active Dental Providers**

As reported by DXC Technology - fiscal agent

#### Summary

The Fiscal Agent's definition of "active provider" is any provider who has provided at least one service within the last two years.

			:			· · · · · · · · · · · · · · · · · · ·
Date	Providers	1	DXC	Active Dental Provider (	Count	
Jul-16	994					
Aug-16	982	1,050				
Sep-16	987					
Oct-16	960	1,000				
Nov-16	972	950 —				
Dec-16	982					
Jan-17	980	900 +				
Feb-17	985	850				· · ·
Mar-17	992					
Apr-17		800				
May-17		750				
Jun-17						
		700				
		650 —				
		600				
		550				
		500				
		JUI-26 A	10-16 p-16 ct-16	Nov-16 Dec-16 120-17	Feb-17 Mar-17 Ar	pr-17 May-17 Jun-17
		70. A	ub set ou	No. De- 10.	ter Nic Ai	, Mai Jo
			·	· · · · · · · · · · · · · · · · · · ·		
			n in in			
			· · · ·			
						1 Active Dental Providers - HPES

#### **Active FFS Dental Providers**

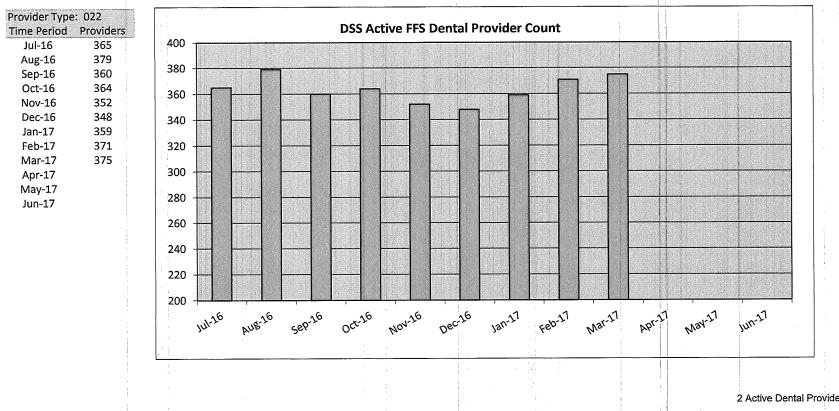
As reported in the DHCFP database - Decision Support System (DSS)

Providers is the unique count of providers who performed any facility, professional, or pharmacy services.

#### Summary

DHHS\_000243

This data is gathered from DSS and is a simple count of providers currently shown in the system as Provider Type 22 - Dentist, who have provided at least one service within the month reported. It is another way of measuring DHCFP's monthly Dental Provider count; however consideration should be given to the differences between this report and the monthly report of Active Providers from the Fiscal Agent (DXC) and the two should not be compared side by side as their methodologies and definitions are different. While the Fiscal Agent's Active Provider report (DXC) has been unduplicated to the best of their ability, the possibility still remains that some providers could be counted more than once. It also considers all providers who have provided at least one service within the past two years - meaning that if a provider rendered his/her final service to a Medicaid recipient one year and eleven months ago, and then decided to stop accepting Medicaid, he/she would still show up in the count of "Active" providers as reported by the Fiscal Agent.



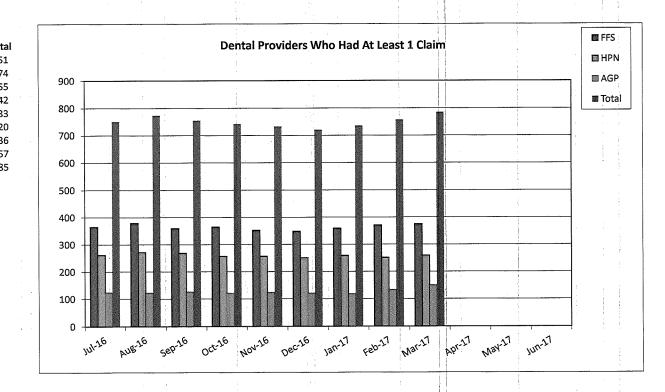
2 Active Dental Providers - DSS

## Provider Count

#### Reported Data, Totals and Graphs

Dental Providers Who Had At Least 1 Claim Provider Type Claim NV Code 022, Incurred

Time				
Period	FFS	HPN	AGP	Tota
Jul-16	365	262	124	751
Aug-16	379	272	123	774
Sep-16	360	269	126	755
Oct-16	364	257	121	742
Nov-16	352	257	124	733
Dec-16	348	251	121	720
Jan-17	359	259	118	736
Feb-17	371	252	134	757
Mar-17	375	260	150	785
Apr-17				
May-17				
Jun-17				



#### Summary

This report identifies a monthly count of providers who provided at least one dental service. The "Total" is a duplicated count as a provider may serve FFS and HMO enrollees.

3 Provider Count - FFS and HMOs

Dental Patients													
 Fee-for-Service					an a				·				an tha an
Age in Years	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	
Ages 0 thru 20	6,426	7,634	6,505	6,594	6,230	5,464	6,132	6,008	7,232				
Ages 21 and Over	2,051	2,416	2,227	2,248	2,132	1,903	2,210	2,133	2,349				
FFS Total	8,477	10,050	8,732	8,842	8,362	7,367	8,342	8,141	9,581	0	0	0	
Dental Patients													
 AGP													
Age In Years	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	
Ages 0 thru 20	6,274	6,673	5,779	5,623	5,881	5,617	6,524	6,050	7,811				
Ages 21 and Over	1,156	955	926	1,045	1,055	963	1,168	1,146	1,803				
AGP Total	7,430	7,628	6,705	6,668	6,936	6,580	7,692	7,196	9,614	0	0	0	
 HPN													
Age In Years	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	
Ages 0 thru 20	10,363	11,993	10,015	10,322	10,171	9,708	10,412	10,355	11,199				
 Ages 21 and Over	1,883	- 2,065 -	-1,904	1,949		1,648	1,864		2,111 -				
HPN Total	12,246	14,058	11,919	12,271	11,957	11,356	12,276	12,221	13,310	0	0	0	
Dental Patients													
Totals and Graphs		-											· · · ·
· · · · ·													یاد بانده میلی ورد این
Total Dental Patients -						D 40		5-4-7	May 17	Amr 17	May-17	Jun-17	· · · · · ·
(All Ages Combined)	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17 0	0	0	
FFS	8,477	10,050	8,732	8,842	8,362	7,367	8,342	8,141	9,581	0	0	0	
AGP	7,430	7,628	6,705	6,668	6,936	6,580	7,692	7,196	9,614	-			
HPN Total	12,246 28,153	14,058 31,736	11,919 27,356	12,271 27,781	11,957 27,255	11,356 25,303	12,276 28,310	12,221 27,558	13,310 <b>32,505</b>	0	0	0	
	20,200											.,	
Total Dental Patients -		-		0.1.40	Neudo	D 10	Jan-17	Feb-17	Mar-17	Apr 17	May-17	Jun-17	
(Both FFS and HMO)	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16				Api-17 0	0	0	
Children	23,063	26,300	22,299	22,539	22,282	20,789	23,068	22,413 5,145	26,242 6,263	0	- 0		
 Adults <b>Total</b>	-5,090 28,153	5,436 <b>31,736</b>	5,057 27,356	5,242 27,781	4,973 27,255	4,514 25,303	5,242 28,310	27,558	32,505	0	0	0	
 	<i></i> ,										• • • •	·····	
			Tota	l Dental	Patients	- by FFS	or HMC	D					
36,000													
34,000								10727A					
32,000													
30,000													
28,000													
26,000				-	88				•			EC	
 24,000											I I F	г <b>э</b>	
22,000												AGP	
20,000													
18,000		<b> </b>									──┤ ᄤ	IPN	

Note: Total Dental Patients may include duplication as a patient may have received services from a FFS and HMO provider during the same month.

Jan-17

Dec-16

Nov-16

0ct-16

sep-16

AUE-16

Jul-26

Feb-17

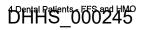
Mar-17

Apr-17

May-17

Jun-17

16,000 14,000 12,000 8,000 6,000 4,000 2,000 0



🛿 Total

#### Fee For Service Service Count and Costs Report

Medicald Incurred Claims

Subset	FFS Claims and Dental Procedure Codes																	
Sharee	115 CHIMS and Dental Procedure Codes	July 2016	Aug 2016	Sep 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2	2017	Feb 2	817	March 2017	April 2017		May 2017		June 2017	
Age in Years	Procedure Code		tent Service Count Net Payme	nt Service Count Net Payment	Service Count Not Paymont	Service Count Net Payment S	ervice Count Net Payment	Service Count	Net Payment	Service Count		Service Count Net Payment	Service Count Net Payr	ant Service C	Count Net Pr	ayment Servi	ICe Count Net	t Payment
Ages 0 thru 20	D0100 thru D0999 Diagnostic	14,247 \$331,66			14.716 5342.749.91	13,066 \$304,504.30	11,508 \$268,170.25	13,659	\$317,769,73	13,674	\$317,888.99	15,762 \$394,139.04						
Alling of main 50	D1000 thru D1999 Preventive	9,180 \$361,88			9,314 \$359,930.65	8,350 \$325,419.33	6,876 \$275,918.92	8,165	\$324,149.27	8,383	\$328,575.72	9,949 \$404,366.80						
	D2000 thru D2999 Restorative	3.903 \$310.35			4,144 \$330,715.79	3,379 \$278,622.96	3,026 \$244,136.08	3,323	\$256,399,23	3,329	\$269,884.10	4,084 \$340,322.24						
	D3000 thru D3999 Endodontics	619 \$37.58			801 \$46,801.71	700 \$39,668.16	605 \$36,797,80	539	\$33,435.47	602	\$37,986.70	818 \$57,228.72						
	D4000 thru D4999 Periodontics	369 532.55			494 \$41,704.24	338 \$29,518,51	353 \$30,455.33	391	\$33,083,36	353	\$29,622.47	385 \$33,952.07						
	DS000 thru DS899 Prosthodontics Removable	4 \$1.64	0.00 4 5789	24 1 \$203.57	3 \$840,50	1 \$399.75	3 \$1,025,00	2	\$820,00	1	\$62,50	1 \$615.00						
	D5900 thru D5999 Maxillofacial Prosthetics		0.00 0 \$0	.00 0 \$0.00	0 \$0.00	0 \$0.00	0 \$0,00	0	\$0,00	0	\$0.00	0 \$0.00						
	D6000 thru D6199 Implant Services	0	0.00 0 50	.00 0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0	\$0.00	0	\$0.00	0 \$0.00						
	D6200 thru D6999 Prosthadontics fixed	0 5	0.00 0 \$0	.00 0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0	\$0.00	0	\$0.00	0 \$0.00						
	D7000 thru D7999 Oral and Madilofacial Surgery	918 576.95	4.30 1,224 \$99,793	.49 975 \$75,485.07	1,057 \$85,318.74	922 \$76,693.07	868 \$68,183.98	993	\$84,728.30	883	\$55,851.76	1,099 \$95,031.37						
	D8000 thru D8999 Orthodontics	1,688 \$1,420,93	2,089 \$1,487,821	.31 1,811 \$1,478,919.81	1,657 \$1,337,260.51	1,801 \$1,095,647.41	1,496 \$732,498.25	1,777	\$670,513.89	1,582	\$748,541.55	1,979 \$778,645.00						
	D9000 thru D9999 Adjunctive General Services	1,475 540,98	1,783 \$50,555	28 1,498 \$42,765.31	1,564 \$43,973.72	1,490 \$41,862.91	1,268 \$36,323.52	1,463	\$41,866.52	1,389	\$37,838.79	1,777 \$51,624.19						\$0.00
	Tota	32,404 \$2,614,60	10.72 40,599 \$2,962,481	.04 32,809 \$2,672,390.68	33,750 \$2,589,295.77	30,047 \$2,192,336.40	26,003 \$1,693,509.13	30,313	\$1,762,765.77	30,196	\$1,837,252.59	35,854 \$2,155,924.43	a	0.00	٥	\$0.00	0	\$0.00
Ages 21 and Ove	r D0100 thru D0999 Diagnostic	5,339 \$129,52	7.99 6,466 \$152,959	.18 5,845 \$147,321.71	5,618 \$142,864.69	5,311 \$132,856.23	4,695 \$116,039.09	5,521	\$137,050.44	5,454	\$136,939.01	6,181 \$153,022.77						
•	D1000 thru D1999 Preventive	17 \$10	13.11 5 \$209	.71 4 \$0.00	25 \$49.81	14 \$0.00	1 \$0.00	4	\$53.30	5	\$49.81	19 \$0.00						
	D2000 thru D2999 Restorative	70 \$9,20	8.24 56 \$9,185	.63 81 \$14,947,19	99 \$17,043,50	59 \$10,122,78	54 \$7,609,43	81	\$13,229.74	108	\$13,277,14	66 \$7,920.18						
	D3000 thru D3999 Endodontics	0 1	30.00 0 \$0	.00 0 \$0.00	0 \$0.00	0 \$9.00	0 \$0.00	0	\$0.00	0	\$0.00	0 \$0.00						
	D4000 thru D4999 Periodontics	414 \$30,93	13.67 455 \$34,036	.73 462 \$34,560.36	427 \$31,976.44	384 \$28,725.44	368 \$27,383.84	426	\$31,811,72	401	\$30,183.12	405 \$30,269.27						
	D5000 thru D5899 Prosthodontics Removable	1,635 \$464,95	1,788 \$512,970	L50 1,868 \$504,704.87	1,873 \$507,370.11	1,776 \$477,554.84	1,782 \$437,579.47	1,860	\$480,801,50	1,943	\$460,205.38	2,102 \$552,467.54						
	05900 thru 05999 Mexillofacial Prosthetics	0	50.00 D \$0	.00 0 \$0.00	0 \$0,00	0 \$0.00	0 \$0.00	۵	\$0.00	D	\$0.00	0 \$0,00						
	D6000 thru D6199 Implant Services	0 :	50.00 ¢ \$0	.00 0 \$0.00	0 \$0.00	0 \$0,00	0 \$0.00	۵	\$0.00	D	\$0.00	a \$0.00						
	D6200 thru D6999 Prosthodontics fixed	0	\$0.00 0 \$0	.00 0 \$0.00	a \$0.00	0 \$0.00	0 \$0.00	0	\$0.00	٥	\$0.00	2 \$153.74						
	D7000 thru D7999 Orai and Maxillofacial Surgery	4,147 \$372,43	19.58 4,799 \$419,552		4,323 \$389,704.82	4,001 \$355,311,39	3,780 \$343,212.63	4,166	\$382,207,79	4,509	\$388,219.21	4,360 \$393,925.95						
	DB000 thru DB999 Orthodontics	0 5	50.00 0 50		0 \$0.00	0 \$0.00	0 \$0.00	٥	\$0.00	0	\$0.00	0 \$0.00						
	D9000 thru D9999 Adjunctive General Services	893 \$36,S			1,188 \$55,877.36	1,027 \$49,593.56	1,059 \$50,594.52	1,043	\$49,450,99	1,058	\$50,084.29	1,229 \$59,090.03		0.00	0	50.00	0	\$0.00
	Tota	12,515 \$1,043,83	22.71 14,858 \$1,189,821	.95 13,979 \$1,171,336.89	13,553 \$1,144,886.73	12,572 \$1,054,174,24	11,739 \$982,418.98	13,101	\$1,094,605.58	13,475	\$1,078,957,96	14,364 \$1,196,849.48		3.00	U	30.00	v	30200
										40.430	\$454.828.00	22,943 \$547,161.8	•	0.00	0	\$0.00		\$0.00
Total	D0100 thru D0999 Diagnostic	19,586 \$461,1			20,334 \$485,614,60	18,377 \$437,350.53	16,203 \$384,209.34	19,180	\$4\$4,820.17 \$324,202.57	19,128 8.388	\$328.625.53	9,968 \$404,365.80		0.00	0	50.00		\$0.00
	D1000 thru D1999 Preventive	9,197 \$361,9			9,339 \$359,980.46	8,364 \$325,419.33	6,877 \$275,918.92	8,170	5324,202.57 5269,628,97	3,437	\$283.161.24	4,150 \$348,242,42		0.00	ő	50.00		50.00
	D2000 thru D2999 Restarative	3,973 \$319,6			4,243 \$347,759.29	3,438 \$288,745.74	3,080 \$251,745,51	3,404 539	\$33,435,47	602	\$37,986.70	818 \$57,228,77		0.00	õ	50.00		\$0.00
	D3000 thru D3999 Endodontics	519 <b>\$37.5</b>			801 \$46,801.71	700 \$39,668.16	605 \$36,797.80 721 \$57,839.17	817	\$33,435.08 \$64,895,08	754	\$59,805,59	790 \$64,221,34		0.00	ő	50.00	0	\$0.00
	D4000 thru D4999 Periodontics	783 \$63,5			921 \$73,680.6B	722 \$58,243,95	1.785 5438.604.47	1.852	\$481.621.60	1.944	\$460,267.88	2,103 \$553,082.54		0.00	0	\$0.00	ů.	\$0.00
	D5000 thru D5899 Prosthodontics Removable	1,639 \$466,5			1,876 \$508,210.61	1,777 \$477,964.59 0 \$0.00	1,785 5438,004,47	1,802	\$0.00	1,544	\$0.00	D \$0.00		0.00	0	\$0.00		\$0.00
	D5900 thru D5999 Madilofacial Prosthetics			.00 0 \$0.00			0 50.00	0	\$0.00	ő	\$0.00	0 50.00		0.00	0	\$0.00		\$0.00
	D6000 thru D6199 implant Services			.00 0 \$0.00		0 \$0.00	0 50.00	0	50.00	0	\$0.00	2 \$153.74		6.00	ñ	\$0.00	a	\$0.00
	D6200 thru D6999 Prosthodontics fixed			.00 0 \$0.00		4.923 \$432.004.45	4,548 \$411,395.51	5,159	\$466,936.09	5,392	\$455.070.97	5,459 \$488,957,33		0.00	ů.	\$0.00	ů.	\$0.00
	D7000 thru D7999 Oral and Maxilofacial Surgery	5,065 \$449,3			5,380 \$475,023.56		1,496 \$732,498.25	1,777	\$670,513,89	1,582	\$748,541,56	1,979 \$778,645.0		0.00	0	50.00	0	\$0.00
	D8000 thru D8999 Orthodontics	1,688 \$1,420,9			1,657 \$1,337,260.51	1,801 \$1,095,647.41	2.327 \$86.918.04	2,506	\$91,317,51	2,447	\$87.923.08	3.006 \$110.714.23		0.00	0	50.00	0	\$0.00
	09000 thru D9999 Adjunctive General Services	2,369 \$77,5			2,752 \$99,851.08	2,517 \$91,456.47		43,414	\$2,857,371.35	43,674	\$2,916,210.55	51,218 \$3,352,773.9		0.00		\$0.00	0	\$0.00
	Tata	44,919 \$3,658,4	33.43 55,457 \$4,152,303	45,788 \$3,843,727.57	47,303 \$3,734,182.50	42,619 \$3,246,510.64	37,742 \$2,675,928.11	43,414	2482/13/1122	43,874	32,910,210.55				•	30100	•	
Check Up																		
Subsat	FFS Claims and Dental Procedure Codes																	
GL Program	Check-Up	tube 2016	Aug 2016	Sep 2016	Oct 2016	Nov 2016	Dec 2016	lac	2017	Feb 2	017	March 2017	April 2017		May 2017		June 201	7

GL PTOETBIN	Check-up	July 2	016	Aug 2	016	Sep 2	016	Oct	016	Nov 2	016	Dec 2	2016	Jac	2017	Fi	eb 2017	March		April 2		May		June 201	
Age in Years	Propedure w Coda Se			Service Count				Service Count	Net Payment	Service Count	Not Payment	Service Count	Net Payment	Service Count	Net Payment	Service Count	Net Payment	Service Count			Net Payment	Service Count	Net Payment	Service Count Ne	et Payment
Ages 0 thru 18	D0100 thru D0999 Diagnostic	1,170	\$30,019.43		\$31,873.57		\$27,751.34		\$32,039.04	1,039	\$26,892,02		\$27,454.80		\$26,444,35		\$32,306.54	1,369							
	D1000 thru D1999 Preventive	555	\$23,228.19	789	\$31,886.40	620	\$25,209.85		\$29,153.51		\$25,650.62		\$22,914.07		\$25,168,51		\$28,353.90		\$29,776.25						
	D2000 thru D2999 Restorative	188	\$12,933.10	322	\$22,799.85	155	\$12,149.10		\$14,411.91		\$13,753.79		\$15,436.49		\$15,073.00				\$18,570.28 \$2,639.19						
	D3000 thru D3999 Endodontics	37	\$1,475.87	62		37			\$1,793.09		\$1,652.66		\$2,224.00		\$1,617.50		\$1,602,48 \$1,462,91		\$1,677,72						
	D4000 thru D4999 Periodontics	20	\$1,883.96	20		13			\$3,049.81	40	\$4,004.08	23	\$2,060.50		\$1,122.60 \$0.00		\$1,462.93		\$1,877.72						
	D5000 thru D5899 Prosthodontics Removable	0	\$0.00	1	\$205.00	0	\$0.00		\$0.00	0	\$0.00 \$0.00	1	\$205.00 \$0.00		50.04 S0.04		\$0.00		\$0.00						
	D5900 thru D5999 Maxillofacial Prosthetics	0	\$0.00	0	\$0.00	0	\$0.00		\$0.00 \$0.00	0	\$0.00	0	\$0.00		50.00		\$0.00		\$0.00						
	D6000 thru D6199 Implant Services	D	\$0.00	0	\$0.00 \$0.00	U	\$0.00 \$0.00		50.00		\$0.00		50.00		50.00		50.00		\$0.00						
	D6200 thru D6999 Prosthodontics fixed	62	\$0.00 \$4,848.10	-	\$4,222,68	29	\$3,574,29			73		59	\$3,670,58		\$8.055.80		\$9,189.27		\$7,899.13	,					
	D7000 thru D7999 Oral and Madilofacial Surgery D8000 thru D8999 Orthodontics		\$198,259.65		5743,621,22	30	5224,384,20		\$198,950.35		\$172,638,61		\$133,313.86		\$109,167.0	6 309	\$127,923.49	290	\$109,313.68	<i>i</i>					
	D9000 thru D9999 Adjunctive General Services	111			\$3,268.10	97				169	\$3,694.83		\$2,079.37		\$3,485.85	5 162	\$4,334.68	174	\$3,393.62						
	Total				\$342,711.71	2,283	\$298,582.61	2,812	\$288,754.83	2,558	\$254,946.64	2,375	\$209,358.67	2,452	\$190,134.83	3 2,540	\$219,655.83	2,539	\$208,325.18	. 0	\$0.00	. 0	\$0.00	, 0	\$0.00

5 SC&C - FFS

Service Count and a	Costs - FEE For SERVICE													1.1	
Totals and Graphs															
	Service Count Totaix		Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	
	Medicaid Ares 0-20		32,404		32,809		30,047	26.003	30,313	30,196	36,854	. 0	0	· 0	
	Medicaid Ages 21+		12,515				12,572	11,739	13,101	13,478	14,364	0	0	° 0	
	Check Up 0-18		2,417		2,283		2,558	2,375	2,452	2,840	2,939	0	0	0	
		Total	47,335	\$8,425	49,071	50,115	45,177	40,117	45,886	46,514	54,157	0	. 0	0.	
												1.1			
			i.								1			1.1	
	Net Payment Totals		Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	
	Medicald Ages 0-20					\$2,589,295,77	52,192,336.40		\$1,762,765,77		\$2,155,924.43	\$0.00	\$0,00	\$0.00	
	Medicaid Ages 21+			\$1,189,821.95				\$982,418.98				\$0.00	\$0.00	\$0.00	
	Check Up 0-18		\$274,852,02		\$298,582,61			\$209,358.67	\$190,134,83	\$219,655,83	\$208,325,18	\$0.00	\$0.00	\$0,00	
	check up 0-16	Total		\$4,495,014.70					\$3,047,506.18	\$3,135,866,38	\$3,561,099.09	\$0.00	\$0.00	\$0.00	
		Fee For Service -	Service Coun	its						Fee Fo	or Service - Net	Payment			
45,000					-		\$3,500,000.0	°							
						ald Ages 0-20								E Medicald A	ges 0-20
40,000	Ø			······	- B Wedge	ald Ages 0-20								# Medicald A	ges 21+
			_		T Medica	ald Ages 21+	\$3,000,000.0							∞ Check Up 0	-18
35,000			- i		: St Check	140.10								1	<u> </u>
			- M		2 CLINECK	000-08								1	

	Fee For Service - Service Cou	unts			Fee For Service - Net Pay	m	
000 - 000 -		B Medicald Ages 0-20	\$3,500,000.00 -				
000 ·		Wedicald Ages 21+	\$3,000,000.00 -				-
000 -			\$2,500,000.00 -				
000 ·			\$2,000,000.00 -				
.000			\$1 500 000 00 -				L

DHHS\_000247

200 -				8						1			8								
200						-				\$2,000,000.00 -				H			. 8				
200 -		Н		_						\$1,500,000.00 -								$\square$			Ì
. 00			Ļ		Ļ		L			\$1,000,000.00 -	-			Ч			÷	$\mathbb{H}$	ļ		
xoo - xoo -		П		<u> </u>						\$500,000.00 -				-	H		Н	H		·	
0 -1 Y	drab pub	16 5ep	<sup>16</sup> 00	16 HQ4	<sup>,16</sup> Des	2 <sup>16</sup> 180	NT Felt	1 <sup>27</sup> 1430	T NOR LAND NORT	\$0.00 - Y	W <sup>10</sup> NUE	<sup>36</sup> 500	<sup>26</sup> 00	1 <sup>26</sup> Nov	<sup>16</sup> Dec.1	6 1917-I	reto"	17 May	L MENT MENT	unil	

5 SCAC - FFS

#### AMERIGROUP - Service Count and Costs Report Reported Data 00170 thru 41899; 63180, 63182 Restorative \* (Paid Under Medical)

neported onth																						
		hube	2016	Aug 2	016	Sep 2	116	Oct 2	16	Nov 2016	Dec 2016	Jan 2017	Feb 2017	7	March 2	2017	April 2017	r	May 201	7	June 2017	
	Dental Procedure Code	Service Count			Net Payment						Service Count Net Payment		Service Count Ne	et Payment S	iervice Count	Net Payment	Service Count Net	Payment 5	Service Count Ne	t Payment Ser	vice Count Net	Payment
Medicald		14,190			\$229,318.49	12,596	\$188,410,81	11.950	\$172,961.01	11,994 5184,226.54	11,185 \$174,179.16	15.043 5224.126.		\$197,556.59		\$298,589.00						
Ages 0 thru 20	D0100 thru D0999 Diagnostic					9,740	\$255,006.10	9.037	\$242,350,39	9.358 5241.341.37	9.154 \$241.804.33	11,023 5291,246.		\$254,401.62	16,777	\$416,163.09						
	D1000 thru D1999 Preventive	11,053			\$304,622.60						3,628 \$209,604.93	4,196 5236,098		\$209,741.60	5.084	\$324,909,20						
	D2000 thru D2999 Restorative	3,519			\$236,295.30	3,767	\$197,545.22	3,967	\$192,276.53													
	D3000 thru D3999 Endodontics	618			\$33,133.64	668	\$28,102.05	757	\$26,321.05	757 \$34,832,43	647 \$32,583.66	787 \$38,562.		\$32,744.34	1,038	\$50,145.79						
	04000 thru D4999 Periodontics	278	\$11,365.07	165	\$3,323,24	61	\$1,975.29	77	\$3,214.62	60 \$2,495.62	95 \$4,201.78	137 \$5,867.		\$4,661.58	120	\$5,484.14						
	D5000 thru D5899 Prosthodontics Removable	0	\$0.00	0	\$0.00	D	\$0.00	1	\$164.00	p \$0.00	2 \$297.25	D \$0.	10 C	\$0.00	1	\$102.50						
	D5900 thru D5999 Maxillofacial Prosthetics	1	\$0.00		\$0.00	0	\$0.00	1	50.00	1 \$0.00	0 \$0.00	0 \$0.	0 0	\$0.00	D	\$0.00						
	D6000 thru D6199 Implant Services	-	50.00		50.00		\$0.00		50.00	0 \$0.00	0 \$0.00	0 SO.	ю p	\$0.00	0	\$0.00						
			\$0.00		\$0.00	1	\$0.00	1	\$0.00		0 \$0.00	0 \$0.		\$0.00	1	\$49.97						
	D6200 thru D6999 Prostbodontics fixed				\$67,802.29	996	\$44,054,91	997	\$48,240.40			1.094 557.545.		\$59,634.51	1,459	\$76,619.85						
	D7000 thru D7999 Oral and Maxillofacial Surgery	1,036					\$0.00	47	548,240.40		37 \$0.00	24 \$0.		\$0.00	72	\$0.00						
	DB0CO thru D8999 Orthodontics	19			\$0.00	51								\$55,237.77	2,855	\$66,324,75						
	D9000 thru D9999 Adjunctive General Services	1,976			\$49,806.49	2,119	\$45,968,17	2,150	\$43,019.65	2,121 \$49,035.71	2,076 551,147.74	2,403 \$54,518		\$55,237.77 813,978.01		1.238.388.29	ä	\$0.00	٥	\$0.00		\$0.00
		Total 32,690	\$822,506.04	35,369	\$924,102.05	29,999	\$761,062.55	28,985	\$728,547,65	29,217 \$785,718.38	27,797 \$763,182.04	34,707 \$907,966.5	8 31,374 51	813,978,01	46,424 5	1,238,388.29	4	20.00		20.00		20,00
Ages 21 and Over	D0100 thru D0999 Diagnostic	2,353	\$38,773.21	1,692	\$29,580.89	1,663	\$28,077.17	1,878	\$31,420,72	1,823 \$31,172.77	1,649 \$27,374.65	1,976 \$31,070.		\$30,674.84	4,040	\$79,207.10						
	D1000 thru D1999 Preventive	16	\$97.14	15	\$167.65	34	\$171.43	36	\$131,79	28 \$236.20		39 \$163.		\$79.49	28	\$179.16						
	D2000 thru D2999 Restorative	168	\$3,422.04	162	\$5,297,78	141	\$2,901.8Z	199	\$3,787,98	174 \$3,218.40	143 \$5,662,35	152 \$3,207.	181	\$5,255,54	250	\$7,121.58						
	D3000 thru D3999 Endodontics		50.00		\$0.00	5	\$0.00	12	\$0.00	13 \$0.00	8 \$0.00	9 \$159.	0 14	\$0.00	8	\$0.00						
	D4000 thru D4999 Periodontics	231			\$5,488,30	146	\$5,459,14	191	\$5,944.11		126 \$4,553.62	162 \$4,864.	16 180	56,230,46	395	\$18,589,42						
		367			\$31,192,58	105	S18,438,24	144	\$30,930.67			156 \$35,836.		\$40,589,17	361	\$83,160.09						
	D5000 thru D5899 Prosthodontics Removable	36/			50.00	100	\$0.00		\$0.00		0 \$0.00	0 50		\$0.00	0	\$0.00						
	D5900 thru D5999 Maxiliofacial Prosthetics	C	50.00			0		0		0 \$0.00	1 \$0.00	1 50		\$0.00	ň	\$0.00						
	D6000 thru D6199 Implant Services	c	\$0.00		\$0.00	ย	\$0.00	0	\$0.00					\$0.00		\$0.00						
	D6200 thru D6999 Prosthodontics fixed	c	\$0.00		\$0.00	0	\$0.00	0	\$0,00		0 \$0.00	0 \$0.			0							
	D7000 thru D7999 Oral and Maxillofacial Surgery	1,447	\$92,821.07	1,277	\$84,950.92	980	\$66,459,91	1,314	\$92,331.00			1,886 \$134,511,		\$102,568.42	2,532	\$209,526,54						
	D8000 thru D8999 Orthodontics	0	\$0.00	0	\$0.00	2	\$0.00	0	\$0.00	0 \$0.00		1 \$0.		\$0.00	9	\$0.00						
	09000 thru 09999 Adjunctive General Services	\$23	\$20,414.48	550	\$22,857.74	493	\$18,857.68	\$59	\$23,115.77	643 \$26,730.69	444 \$16,086.95	776 \$24,647		\$18,494.56	845	\$26,381.68						
		Total 5,114	\$199,772.05	3,987	\$179,535,86	3,570	\$140,365.39	4,283	\$187,662.04	4,593 \$209,204.39	3,963 \$178,858.15	5,158 \$234,461.3	3 4,599 5	203,892.48	8,468	\$424,165.57	۵	\$0,00	0	\$0.00	0	\$0.00
Total	D0100 thru D0999 Diagnostic	16,543	\$248,395.47	16,890	\$258,899,38	14 759	\$216,487.98	13,778	\$204,381,73	13.617 \$215.399.31	12,834 \$201,553,81	17,019 \$255,197.3	3 15,307 \$	228,231.43	21,997	\$377,796.10	0	\$0.00	0	\$0.00	0	\$0.00
10(9)		11,065			\$304,790.25		\$255,177.53		5242,482,18	9,386 5241,577.57	9,178 \$241,501.12	11.062 \$291,409.		254,481.11		\$416,342,25	ō	\$0.00	. 8	\$0.00	٥	\$0.00
	D1000 thru D1999 Preventive	11,065			\$241.593.08		\$200,447,04		\$196,064.51	3,977 \$716,366,58	3,771 \$215,267.28	4,348 \$239,306.		214,997,14		5332,030,78	ō	50.00	n.	50.00	ā	\$0.00
	D2000 thru D2999 Restorative							769	S26.321.05		655 \$32,583.66	796 \$38,722.5		\$32,744,34	1,106	\$50,145,79		50.00		\$0.00		\$0.00
	D3008 thru D3999 Endodontics	627			\$33,133.64	673	\$28,102.05			770 \$34,832.43				\$10,892.04				\$0.00		\$0.00	0	\$0.00
	D4000 thru D4999 Periodontics	S05			\$8,811.54	207	57,434.43	268	\$9,158.73	220 \$7,608.10	221 \$8,755.40	299 \$10,731.1			515	\$24,073.56	0			\$0.00	0	\$0.00
	DS000 thru DS899 Prosthodontics Removable	367			\$31,192.58	106	\$18,438.24	145	\$31,094.67	148 \$31,065.29	147 \$28,970.69	156 \$35,836.		\$40,589,17	362	\$83,262.59	0	\$0.00	. 0			
	D5900 thru D5999 Maxillofacial Prosthetics	1	L \$0.00	. 0	\$0.00	0	\$0.00	1	\$0.00	2 \$0.00	0 \$0.00	0 \$0.4		\$0.00	0	\$0.00	0	\$0.00	0	\$0.00	C	\$0.00
	D6000 thru D6199 Implant Services		50.00	. 0	\$0.00	0	\$0.00	Q	\$0.00	G \$0.00	1 \$0.00	1 \$0.		\$0.00	0	\$0.00	0	\$0,00	. 0	\$0.00	0	\$0.00
	D6200 thru D6999 Prosthodontics fired		50.00	9	\$0.00	1	\$0.00	1	\$0.00	1 \$49.97	0 \$0.00	0 \$0.	o 0	\$0.00	1	\$49.97	0	\$0.00	. 0	\$0.00	0	\$0.00
	D7000 thru D7999 Oral and Maxillofacial Surgery	2,483	\$147,344.67	2,501	\$152,753,21	1.976	\$110,514,82	2,311	\$140,571,40	2,692 \$172,257,12	2,396 \$145,773.54	2,980 \$192,057,	1 2,635 \$	162,202.93	3,991	\$285,145.39	0	\$0.00	D	\$0,00	0	\$0.00
	D8000 thru D8999 Orthodontics	19			\$0.00	53	\$0.00	47	\$0.00	33 \$0.00	37 \$0.00	25 \$0.1	0 52	\$0.00	81	\$0.00	0	\$0.00	0	\$0.00	0	\$0.00
		2.499			\$77.554.73	2.612	\$54,825,85	2,709	\$56,135,42	2,764 \$75,766.40	2,520 \$67,234.69	3,179 579,166.		573,732.33	3,700	\$92,706,43	a	\$0.00	0	\$0.00	D	\$0.00
	D9000 thru D9999 Adjunctive General Services		\$1.022,278.09		\$1,103,837,91		\$901,427,94		\$916,209.69	33,810 \$994,922,77	31,760 5942,040,19	39,865 \$1,142,428.				1,662,553.06	ń	\$0.00	0	\$0.00	0	50.00
		Total 37,804	\$1,022,278.05	33'320	\$1,103,837,91	33,569	2301.411.34	33,605	2370'503'02	33,810 3394,922.77	11,100 1944,040,05	39,000 41,242,420		,0,0,0,0,0,0,0			-		-			
										11-11-204.0	D-+ 1016	Jan 2017	Feb 201	7	March 2	2017	April 201	7	May 201	7	June 201	,
			y 2016		2016	Sep 2		0012		Nov 2016	Dec 2016						Service Count Ne					
Check Up	Dental Procedure Code		Net Payment							Service Count Net Payment		Service Count Net Payme					Service Counce inte	r sexanent	PRIAIDS COULT 14	errayment sei	AILS COUNT INS	C Payment
Ages 0 thru 18	D0100 thru D0999 Diagnostic	2,056	5 \$30,389.23		\$33,401.06	1,502	\$23,700.08	1,649	\$23,073.80	1,664 \$25,247.95	1,563 \$24,434.05	1,804 \$26,841		\$26,632.59	2,105	\$34,307.81						
	D1000 thru D1999 Preventive	1,605	5 \$39,048.18	1,782	\$45,601.87	1,345	\$37,780.62	1,593	\$38,715.81	1,375 \$35,457.75		1,491 \$38,909		\$38,639.23	2,062	\$52,109.64						
	02000 thru D2999 Restorative	416	523,821,92	508	\$28,471.19	366	\$19,109.58	469	\$20,415.79	356 \$18,498.45	296 \$16,313.45	332 \$17,082	91. 435	\$23,374.95	557	\$31,547.59						
	D3000 thru D3999 Endodontics	56	5 \$2,790,70	) 84	\$4,079,43	36	51,229,46	72	\$2,500.17	48 \$1,965,71	41 \$1,676,16	36 \$1,407	18 59	\$2,905,29	94	\$4,015.04						
	D4000 thru D4999 Periodontics	8			\$505.11	5	\$194,56	9	\$389.12	14 5680,96	12 \$523.62	8 \$389	12 14	\$680.96	13	\$576.41						
			2 33,430.30 3 S0.00		\$0.00	š	\$0.00	, ,	\$0.00			1 \$133		\$0.00		\$0.00						
	DS000 thru D5899 Prosthodontics Removable								50.00			0 50		50.00		\$0.00						
	D5900 thru D5999 Maxillofacial Prosthetics	1	3 \$0.00		\$0.00	0	\$0,00	0							U O	\$0,00						
	D6000 thru D6199 Implant Services	(	D \$0.00		\$0.00	0	\$0.00	0	\$0.00			0 50		\$0.00	0							
	D6200 thru D6999 Prosthodontics fixed	1	0 \$0.00		\$0,00	0	\$0.00	0	\$0,00			0 \$0		\$0.00	D	\$0.00						
	D7000 thru D7999 Oral and Muxillofacial Surgery	105	5 \$4,942.63	169	\$10,235.35	141	\$9,820.76	233	\$9,025.22			93 \$5,091		\$9,572.10	158	\$9,203.65						
	D8000 thru D8999 Orthodontics		4 \$0.00	) 6	\$0,00	12	\$0.00	2	\$0,00	4 \$0.00		6 \$0		\$0.00	4	\$0.00						
	D9000 thru D9999 Adjunctive General Services	27			\$7,508.11	278	\$5,337.58	297	56,381.04	315 \$6,528.58	277 \$5,696.03	217 \$4,188	04 319	\$7,247.42	376	\$8,021.36						
		Total 4.610			\$129,802.12	3,686	\$97,172.64	4,374	\$100,500,95	3,976 \$99,377.97	3,711 \$94,182,13	3,988 \$94,042.	1 4,209 \$	109,052,54	5,369	\$139,781.50	0	\$0.00	0	\$0.00	0	\$0.00
			وهند اغرضعت ا	3,104		2,020		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*****							1.1						

\_

5 SCAC - AMERIGROUP

DHHS\_000248

.

stais and Graphs													
AGP Service Count		Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
Medicald Ages 0-20		32,690	35,369	29,999	28,985	29,217	27,797	34,707	31,374	46,424	D	: 0	
Medicald Ages 21+		5,114	3,987	3,570	4,283	4,593	3,963	5,158	4,599	8,468	0	D	
Check Up 0-18		4,510	5,104	3.685	4,324	3,976	3,711	3,988	4,209	S,369	0	0	
	Total	42,414	44,460	37,255	37,592	37,786	35,471	43,853	40,182	60,261	c	0	
AGP Service Cost		Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
Medicaid Ages 0-20		\$822,505.04	\$924,302,05	\$761,062,55	\$728,547.65	\$785,718.38	\$763,182.04	\$907,966.98	5813,978.01	\$1,238,388.29	\$0.00	\$0.00	\$0
Medicaid Ages 21+		\$199,772.05	\$179,535.86	\$140,365.39	\$187,662.04	\$209,204.39	\$178,858.15	\$234,461.73	\$203,892,48	\$424,165.57	\$0.00	\$0.00	50
Check Up 0-18		\$110,271.55	\$129,802.12	\$97,172.64	\$100,500.95	\$99,377.97	\$94,182.13	\$94,042.81	\$109,052.54	\$139,781.50	\$0.00	\$0.00	50
	Total	\$1,132,549.64	\$1,233,640.03	\$998,600.58	\$1,016,710.64	\$1,094,300.74	\$1,036,222.32	\$1,236,471.52	\$1,126,923.03	\$1,802,335.36	\$0.00	\$0.00	50

50,000	AGP Service Counts	\$1,400,000.00
45,000 -	Medicaid Ages 0-20	\$1,200,000.00
40,000 - 35,000 -		\$1,000,000.00
30,000 -		\$800,000.00
25,007 - 20,000 -		\$600,000.00
15,000 -		\$400,000.00
10,000 - 5,000 -		\$200,000.00
0	لتحمد التجعيد التعيد التعيد التعيد فانص فانص فانص فانص فانص	\$0.00 July 10

1,400,000.00					A	GP Se	rvice	Costs		
1,200,000.00								8		≋ Medicald Ages 0-2 ≌ Medicald Ages 21+
3,000,000.00								-		30 Check Up 0-18
\$800,000.00			B			-	1			
\$600,000.00 +		-		<u> </u>	<u> </u>	-		-	i	
\$400,000.00		_	<b> </b>		-	<u> </u>	·	-h	!	
\$200,000.00 -	I. I.	-		<b>.</b>		h.,				
50.00 H	<sup>16</sup> NUR <sup>16</sup> S	,		<sup>-16</sup> D	c.16 11	م <sup>ي</sup> 14		x-12 101-12 115	ril parti	

DHHS\_000249

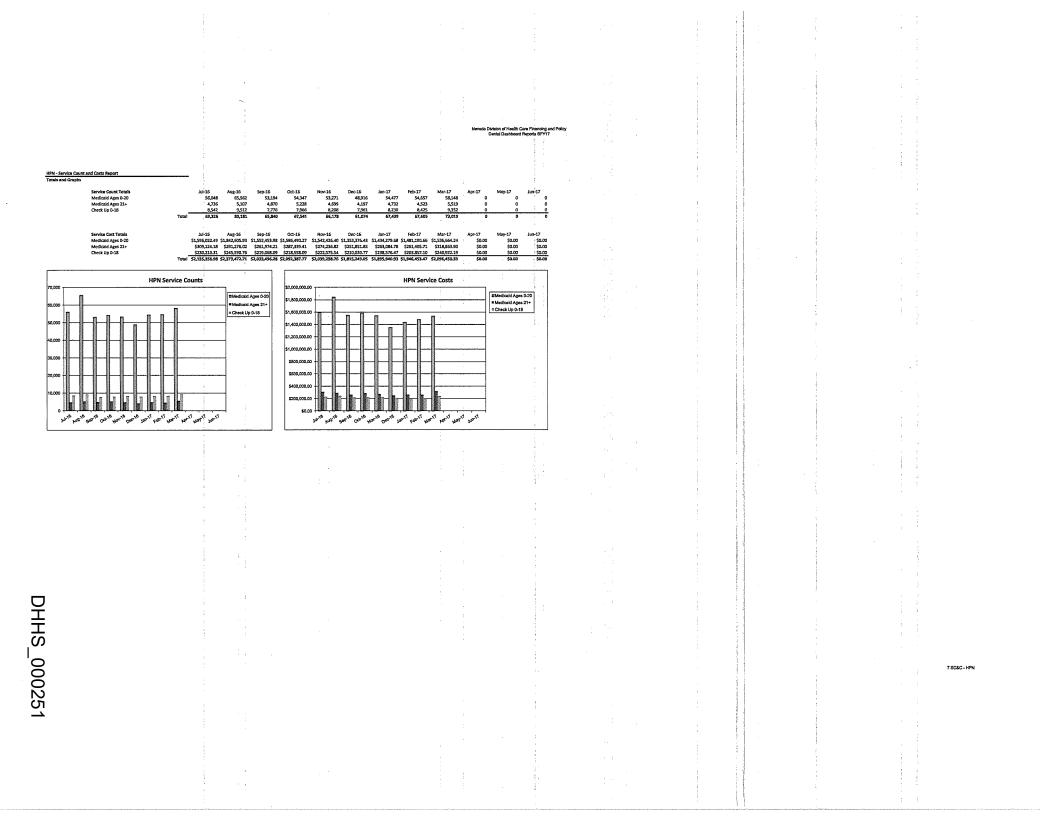
6 SC&C - AMERIGROUP

Nevada Division of Health Care Financing and P

MON - Sandra Court	t and Costs Report
HIT I SELVICE COOL	

Reported Data	00170 thru 41899 Restorative * (Paid Under Medical	9								1			
		July 2016	Aug 2016	Sep 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	March 2017	April 2017	May 2017	June 2017
Medicald	Dental Procedure Code	Service Count Net Payment S	ervice Count Net Payment Se	rvice Count Net Payment	Service Count Net Payment Ser	rvice Count Net Payment Si	arvice Count Net Payment S	ervice Count Net Payment Se	vice Count Net Payment Se	ervice Count Net Payment		rvice Count Net Payment Service Co	ount Net Payment
Ages 0 thru 20	D0100 thru D0999 Diagnostic	24,323 \$379,414,70	28,407 \$440,543.11	22,966 \$358,398.87	23,077 \$363,173.36	22,678 \$358,225.41	21,438 \$327,243.12	24,200 \$358,315.80	23,633 \$348,692.99	25,629 \$374,548,35	1		
	D1000 thru D1999 Preventive	19,512 \$458,455.54	23,237 \$535,503.97	18,051 \$435,171.86	18,864 \$448,187.97	18,598 \$447,686.50	16,900 \$405,620.28	19,086 \$440,197,02	19,103 \$441,300.00	20,138 \$460,323.07		1	
	D2000 thru D2999 Restorative	8,024 \$552,017.01	9,387 \$638,823.87	7,809 \$542,845.09	8,061 \$563,468.61 845 \$77,813,38	7,701 \$529,970.27 839 \$72,780.65	6,742 \$450,340.18 629 \$44,433,70	7,223 \$459,889.93 726 \$51,281,27	7,723 \$500,451.95 926 \$65,962.76	8,002 \$503,364.75 764 \$55,256.60		1	
	D3000 thru D3999 Endodontics	853 \$75,242.89	788 \$83,648,69	892 \$78,254,44			629 \$44,433.70 2 \$87.99	726 \$51,281.27 6 \$193.13	926 \$65,962.76 14 \$1,427.00	764 \$55,256.60 14 \$575.36	11		
	D4000 thru D4999 Periodontics D5000 thru D5899 Prosthodontics Removable	5 \$1,972.40 2 \$1,195.00	7 \$686.00 3 \$450.00	12 \$3,034.98 4 \$436.98	15 \$2,534.98 1 \$75.00	12 5779.17 2 \$410.00	2 \$87.99	0 \$0.00	0 \$0.00	2 \$355.00			
	DS000 thru DS999 Prosthodontics Removable D5900 thru DS999 Maxillofacial Prosthetics	2 51,195,00	3 \$450.00 D \$0.00	4 \$436.96 0 \$0.00	0 \$0.00	2 5418.00 0 \$0.00	0 50.00	0 \$0.00 '	0 \$0.00	D \$0,00			
	D5900 thru D5999 Materialiai Prostnerics D6000 thru D6199 Implant Services	0 \$0.00	0 50.00	0 50.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00 :	0 \$0.00	0 \$0.00			
	D6200 thru D6999 Prosthodontics fixed	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 50.00	0 \$0.00	0 50.00	0 \$0.00			
	b7000 thru 07999 Oral and Maxillofadal Surgery	1,254 \$68,819,49	1,464 \$77,142.16	1,389 \$72,506.30	1,308 \$68,489.27	1,278 \$67,739.81	1,163 \$64,339.81	1,242 \$66,387.08	1,220 \$60,493.39	1,347 \$72,015,73			
	DBDDI thru D8999 Orthodontics	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$8.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00			
	09000 thru 09999 Adjunctive General Services	2,075 \$58,905.46	2,269 \$65,808.13	2,071 \$61,805.46	2,176 \$62,747.70	2,163 \$64,834.59	2,042 \$61,311.35	1,994 \$58,015.45	2,038 \$62,862.57	2,252 \$70,225.38	1.1	1	
	Total	56,048 \$1,595,022.49	65,562 \$1,842,605.93	53,194 \$1,552,453.98	54,347 \$1,586,490.27	53,271 \$1,542,426.40	48,915 \$1,353,375.43	54,477 \$1,434,279.68	54,657 \$1,481,190.66	58,148 \$1,536,664.24	0 \$0.00	0 \$0.00	0 \$0.00
		2.924 \$47.052.43	3.445 \$56.538.68	3,227 \$52,038,85	3.350 \$54,988.38	2,963 \$49,524.90	2,718 \$44,071.58	3,160 \$51,330.76	3,110 \$50,828.58	3,552 \$58,082.55			
Ages 21 and Over	D0100 thru D0999 Diagnostic D1000 thru D1999 Preventive	2,924 \$47,051.43 5 \$126.29	3,445 \$56,538.68 5 \$142.10	3,727 \$52,938.85	3,350 554,988.38 1 \$10.24	2,963 \$49,524.90	2,718 \$44,071.58 4 \$42.72	3,160 \$51,330.76 7 \$148.53	3,110 \$50,828.58	3,552 \$58,082.55	- 1 J		
	D2000 thru D2999 Restorative	31 \$2,698.27	34 \$2,244.70	2 535.00	26 \$1,843.89	31 \$2,219.64	31 \$1,777.28	55 \$4,417.04	37 \$2,501.44	37 \$2,648,91	: [	-	
	D3000 thru D3999 Endedentics	0 \$0.00	0 \$0.00	D \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	1 \$16.00	0 \$0.00			
	D4000 thru D4999 Periodontics	. 8 \$704.00	4 \$411.64	7 \$520.83	20 \$1.819.64	15 \$1,424.37	10 \$913.55	6 \$557,82	4 \$352.00	12 \$999.62			:
	D5000 thru D5899 Prosthodontics Removable	349 \$171,135.94	342 \$155,723.85	299 \$129,535,12	296 \$136,257,51	289 \$139,757,49	287 \$136,050,94	281 \$133,447,97	352 \$150.082.14	367 \$167,996.20			
	D5900 thru D5999 Maxillofacial Prosthetics	0 50.00	0 \$0.00	0 \$0.00	D \$0.00	0 \$0.00	0 50.00	0 \$0.00	0 \$0.00	0 \$0.00			
	D6000 thru D6199 Implant Services	0 50.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00			
	D6200 the D6999 Prostbadantics fixed	0 50.00	1 \$76.87	0 \$0.00	1 561.50	0 \$0,00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00			
	D7000 thru D7999 Oral and Maxillofacial Surgery	1,108 \$75,627.11	1,018 \$67,007.09	1,085 \$69,415.82	1,153 \$78,220.94	1,078 \$69,929,65	857 \$58,479.09	944 \$62,441,34	816 \$50,682.35	1,244 \$78,849.43			
	D8000 thru D8999 Orthodontics	0 \$0,00	0 \$0.00	0 \$0.00	0 50.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00			
	D9000 thru D9999 Adjunctive General Services	311 \$11,781.14	257 \$9,131.09	229 \$8,151.13	381 \$14,137.31	319 \$11,324.35	290 \$10,506.69	279 \$10,741.32	200 \$6,911.64	304 \$10,236.16	11		
	Total	4,736 \$309,124.18	5,107 \$291,276.02	4,870 \$261,974.21	5,228 \$287,339.41	4,699 \$274,236.82	4,197 \$251,851.85	4,732 \$263,084.78	4,523 \$261,405.71	5,519 \$318,863,90	0 \$0,00	8 \$0.00	a \$0.0
Total	D0100 thru D0999 Diagnostic	27,247 \$426,466.13	31,853 \$497,081.79	26,193 \$411,337,72	26,427 \$418,161.74	25.641 \$407,750.31	24,156 \$371,314.70	27,350 \$409,646,56	26,743 \$399,521,57	29.181 \$432.630.90	0 \$000	0 50.00	n 50.00
( VIA)	D1000 thru D1999 Preventive	2/24/ 5426,466.13 19,517 5458,581.83	23,242 \$535,646.07	18,053 \$435,227.86	18,865 \$448,198.21	18,602 \$447,742.92	16,904 \$405,663.00	19,093 \$440,345.55	19,105 \$441,331.56	20.141 \$460.374.10	0 \$0.00	0 50.00	0 50.00
	D2000 thru D2999 Restorative	8,055 \$554,715.28	9,421 \$641,068.57	7,830 \$544,200.55	8,087 \$565,312,50	7,732 \$532,189.91	6,773 \$4\$2,117.46	7,278 \$464,306.97	7,760 \$502,953.39	8,039 \$506,013,66	0 \$0.00	0 \$0.00	0 \$0.00
	D3000 thru D3999 Endedontics	853 \$75,242,89	788 \$83,648,69	892 \$78,254,44	845 \$77,813,38	839 \$72,780.65	629 544,433.70	726 \$51,281,27	927 \$65,978,76	764 \$55,256,60	0 \$0.00	0 \$0.00	0 \$0.00
	D4000 thru D4999 Periodontics	13 52,676.40	11 \$1,097.64	19 \$3,555,B1	35 \$4,354.62	27 \$2,203.54	12 \$1,001.54	12 \$750.95	18 \$1,779.00	26 \$1,574.98	0 \$0.00	0 \$0,00	0 \$0.00
	D5000 thru D5899 Prosthodontics Removable	351 \$172,330.94	345 \$156,173.85	303 \$129,972,10	297 \$136,332.51	291 \$140,167.49	287 \$136,060,94	281 \$133,447.97	352 \$150,082.14	369 \$168,351.20	0 \$0.00	0 \$0.00	0 \$0.0
	D5900 thru D5999 Maxillofacial Prosthetics	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.0
	D6000 thru D6199 Implant Services	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.0
	D6200 thru D6999 Prosthodontics fixed	D \$0.00	1 \$76.87	0 \$0.00	1 \$61.50	D \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.00	0 \$0.0
	D7000 thru D7999 Oral and Madillofadal Surgery	2,362 \$144,446.60	2,482 \$144,149.25	2,474 \$141,923.12	2,461 5146,710.21	2,356 \$137,669,46	2,020 \$122,818.90 0 \$0.00	2,186 \$128,828.42 0 \$0.00	2,036 \$111,175.74 0 \$0.00	2,591 \$150,865.16 0 \$0.00	0 \$0.00 0 \$0.00	0 \$0.00 0 \$0.00	0 \$0.00 0 \$0.00
	D8000 thru D8999 Orthodontics D9000 thru D9999 Adjunctive General Services	0 \$0.00	0 \$0.00 2.526 \$74,939,22	0 \$0.00	0 \$0.00 2.557 \$76.885.01	0 \$0.00 2,482 \$76,158,94	0 \$0.00 2.332 \$71,818.04	2,273 \$68,756.77	2,238 \$69,774.21	2.556 \$80,461.54	0 \$0.00	0 50.00	0 \$0.00
	Total	60,784 \$1,905,146.67	70,669 \$2,133,881.95	58,064 \$1,814,428,19	59.575 S1.873.829.68	57,970 \$1,816,663.22	53,113 \$1,605,228.28	59,209 51,697,364,45	59,180 \$1,742,596.37	63,667 \$1,855,528.14	0 \$0.00	:0 \$0.00	0 \$0.00
										1 A A A A A A A A A A A A A A A A A A A			
		July 2016	Aug 2016	Sep 2016	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	March 2017	April 2017	May 2017	June 2017
Check Up		July 2016 Service Count Net Payment	Aug 2016 Service Count Net Payment Se	Sep 2016 rvice Count Net Payment	Oct 2016 Service Count Net Payment Se	Nav 2016 rvice Count Net Payment S	Dec 2016 ervice Count Net Payment 5	Jan 2017 ervice Count Net Payment Se	Feb 2017 rvice Count Net Payment Se	March 2017 ervice Count Net Payment			
Check Up Ages 0 thru 18	p0100 thru p0999 plagnostic	July 2016 Service Count Net Payment 5 3,660 \$\$7,589.07	Aug 2016 Sarvice Count Net Payment Sa 4,256 \$66,555,74	Sep 2016 rvice Count Net Payment : 3,462 \$53,603,54	Oct 2016 Service Count Nat Payment Se 3,465 \$56,259,41	Nav 2016 rvice Count Net Payment S 3,629 \$58,198.50	Dec 2016 ervice Count Net Payment S 3,679 \$57,643.36	Jan 2017 ervice Count Net Payment Se 3,779 \$56,480,43	Feb 2017 rvice Count Net Payment Se 3,854 \$56,484,19	March 2017 Frvice Count Net Payment 4,214 \$62,898,51		May 2017	
Check Up Ages 0 thru 18		July 2016 Service Count Net Psymeint 5 3,660 \$57,589.07 3,255 \$77,569.54	Aug 2016 Service Count Net Payment Se	Sep 2016 rvice Count Net Payment	Oct 2016 Service Count Net Payment Se	Nav 2016 rvice Count Net Payment S	Dec 2016 ervice Count Net Payment 5	Jan 2017 ervice Count Net Payment Se	Feb 2017 rvice Count Net Payment Se	March 2017 ervice Count Net Payment		May 2017	
Check Up Ages 0 thru 18	D0100 thru D0999 Diagnostic D1000 thru D1999 Preventive D2000 thru D2999 Restarative D3000 thru D2999 Restarative	July 2016 Service Count Net Payment 5 3,660 \$57,589.07 3,255 \$77,569.54 975 \$62,526.81 73 \$7,098.97	Aug 2016 Sarvice Count Net Payment Se 4,256 \$66,555,74 3,677 \$87,285,54 1,046 \$66,712,96 47 \$7,377,55	Sep 2016 rrice Count Net Payment 3,462 \$53,603.54 2,801 \$70,705,04 926 \$65,642.91 91 \$77,715.59	Oct 2016 Service Count Net Payment Se 3,455 \$56,259,41 2,958 \$575,184,02 958 \$62,619,81 73 \$5,922,67	Nov 2016 rvice Count Net Payment S 3,629 558,198,50 3,047 574,508,79 927 562,365,85 54 \$6,034,02	Dec 2016 ervice Count Net Payment 5 3,679 \$57,643.36 2,889 \$73,740.07 852 \$55,965.11 82 \$5,350.89	Jan 2017 ervice Count Net Payment Sc 3,779 \$56,480,43 3,213 \$77,117.65 739 \$44,118,83 40 \$2,527.49	Feb 2017 rvice Count Net Payment Se 3,854 \$56,484.19 3,199 \$75,010,28 864 \$52,163,92 53 \$3,170.99	March 2017 rvice Count Net Payment 4,214 S62,898,51 3,416 S84,349,54 1,073 S65,235,19 79 S65,598,43		May 2017	
Check Up Ages 0 thru 18	D0100 thru D0999 Diagnostic D1000 thru D1999 Preventive D2000 thru D2999 Restorative D3000 thru D2999 Endodontics D4000 thru D4999 Periodontics	July 2016 Service Count Net Payment 5 3,660 \$57,589.07 3,255 \$77,569.54 975 \$62,526.81 73 \$7,098.97 0 \$0.00	Aug 2016 Sarvice Count Net Payment Sr 4,255 \$66,555,74 3,677 \$87,285,54 1,046 \$66,712,96 47 \$7,377,55 0 \$2,00	Sep 2016 rvice Count Net Payment : 3,462 \$53,603.54 2,801 \$70,705,04 916 \$65,642.91 91 \$77,715.59 0 \$0.00	Oct 2016 Service Count Net Payment Se 3,465 \$56,259,41 2,968 \$75,184.02 958 \$52,619.81 73 \$5,922.67 0 \$0.00	Nov 2016 rvice Count Net Payment S 3,629 \$58,198.50 3,047 \$74,508.79 927 \$62,365.85 54 \$6,034.02 0 \$0.00	Dec 2016 ervice Count Met Payment 5 3,679 \$57,643.36 2,889 \$73,740.07 852 \$55,965.11 82 \$5,350.89 0 \$0.00	Jan 2017 ervice Count Net Payment Se 3,779 \$56,480.43 3,213 \$77,117.66 739 \$44,118.83 40 \$2,527.49 2 \$246.00	Feb 2017 vvice Count Net Payment Sr 3,854 \$55,484,19 3,199 \$75,010,28 864 \$52,163,92 \$3 \$3,170,99 2 \$81,98	March 2017 rrice Count Net Payment 4,214 \$62,898,51 3,416 \$84,349,54 1,073 \$66,235,19 79 \$6,598,43 2 \$81,98		May 2017	
Check Up Ages 0 thru 18	D0100 thru D0999 Diagnostic D1000 thru D1999 Praventive D2000 thru D1999 Praventive D3000 thru D3999 Reidodontics D4000 thru D3999 Preidodontics D4000 thru D5899 Prasthodontics Removable	July 2016 Service Count Net Payment 5 3,660 557,589.07 3,255 577,569.54 975 562,526.81 73 57,098.97 0 \$0.00	Aug 2016 Sarvice Count Net Payment S 4,255 566,555,74 3,677 587,285,54 1,046 \$66,712,96 47 \$7,377,55 0 \$0,00 0 \$0,00	Sep 2016           crvice Count         Net Payment           3,462         \$53,603,54           2,801         \$70,705,04           915         \$565,642,91           91         \$77,715,59           0         \$0,00	Oct 2016 Service Count Nett Payment Se 3,455 \$56,259,41 2,568 \$56,259,41 958 \$56,2619,81 73 \$5,922,67 0 \$0.00 0 \$0.00	Nav 2016 rvice Count Net Payment S 3,629 558,158,50 3,047 574,508,79 927 562,365,85 54 56,034,02 0 \$0.00	Dec 2016 crvice Count Net Payment S 3,679 \$57,643.36 2,889 \$73,740.07 852 \$55,965.11 82 \$53,956.51 82 \$53,956.51 1 \$10,00	Jan 2017 ervice Count Net Payment 5e 3,779 SS6,480.43 3,213 S77,117.66 779 S44,118.83 40 \$2,527.49 2 \$246.00 0 \$0.00	Feb 2017 rvice Count Net Payment Sc 3,854 \$56,484.19 3,199 \$75,010.28 864 \$52,163.92 \$3 \$3,170.99 2 \$81.98 0 \$0.00	March 2017 rr/cc Count Net Payment 4,214 \$62,398,51 3,416 \$84,349,54 1,073 \$65,225,19 79 \$66,98,43 2 \$61,98 0 \$0.00		May 2017	
Check Up Ages 0 thru 18	D0100 thru D0990 Diagnostic D1000 thru U1999 Preventive D2000 thru D2999 Restorative D1000 thru D3999 Endodontics D4000 thru D5999 Peridodontics D5000 thru D5899 Preshodontics Removable D5000 thru D5899 Maxillofacelli Prosthetics	July 2015 Service Count: Net Payment 9 3,660 557598,07 3,255 577,563,54 975 562,526,81 73 57,098,97 0 \$0,00 0 \$0,00 0 \$0,00	Aug 2016 Sarvice Count Net Payment Sc 4,255 566,555,74 1,046 566,712,96 47 \$7,377,55 0 \$0,00 0 \$0,00 0 \$0,00	Sep 2016 rrvice Count Net Payment : 3,462 \$53,603,54 2,801 \$70,705,04 925 \$65,642,91 91 \$7,715,59 0 \$0.00 0 \$0.00 0 \$0.00	Oct 2016 Service Count Net Payment Se 3,465 S56,259,41 2,968 S75,184.02 958 S25,619,81 73 S5,922.67 0 S0.00 0 S0.00 0 S0.00	Nov 2016 rvice Count Net Payment S 3,629 558,198.50 3,047 574,508.79 927 562,365.85 54 56,034.02 0 \$0.00 0 \$0.00 0 \$0.00	Dec 2016 ervice Count Net Payment 5 3,679 \$57,643.36 2,889 \$73,740.07 852 \$55,965.11 82 \$55,350.89 0 \$0.00 1 \$0.00 0 \$50.00	Jan 2017 ervice Count Net Payment Sc 3,779 S56,480.43 3,213 S77,117.66 739 S44,118.83 40 S2,527.49 2 S246.00 0 S0.00	Feb 2017 rvice Count Net Payment Sr 3,854 \$55,484,19 3,199 \$75,010,28 864 \$52,163,92 53 \$53,170,99 2 \$81,98 0 \$0.00 0 \$0.00	March 2017 srvice Count Net Payment 4,214 \$62,898,51 3,416 \$84,349,54 1,073 \$65,295,15 79 \$6,598,43 2 \$81,98 0 \$0.00 0 \$0.00		May 2017	
Check Up Ages 0 thru 18	D0100 thru D0999 Diagnostic D1000 thru D1999 Praventive D2000 thru D1999 Praventive D3000 thru D3999 Reidodontics D4000 thru D3999 Preidodontics D4000 thru D5899 Prasthodontics Removable	July 2015 Service Count: Net Payment 9 3,660 \$57,589,07 3,255 \$77,569,54 975 \$62,526,81 73 \$70,88,97 0 \$0,00 0 \$0,00 0 \$0,00 0 \$0,00	Aug 2015 Sarvice Count Net Payment Sr 4,256 \$66,555,74 3,677 \$87,285,54 1,046 \$65,712,96 47 \$7,377,55 0 \$0,00 0 \$0,00 0 \$0,00 0 \$0,00 0 \$0,00	Sep 2016 srvice Count Net Payment : 3,462 \$53,603,54 2,801 \$77,705,50 91 \$77,715,59 0 \$50,642,91 91 \$77,715,59 0 \$50,00 0 \$50,00 0 \$50,00 0 \$50,00	Oct 2016 Service Count Nett Payment Se 3,455 \$56,259,41 2,568 \$56,259,41 958 \$56,2619,81 73 \$5,922,67 0 \$0.00 0 \$0.00	Nav 2016 rvice Count Net Payment S 3,629 558,158,50 3,047 574,508,79 927 562,365,85 54 56,034,02 0 \$0.00	Dec 2016 crvice Count Net Payment S 3,679 \$57,643.36 2,889 \$73,740.07 852 \$55,965.11 82 \$53,956.51 82 \$53,956.51 1 \$10,00	Jan 2017 ervice Count Net Payment 5e 3,779 SS6,480.43 3,213 S77,117.66 779 S44,118.83 40 \$2,527.49 2 \$246.00 0 \$0.00	Feb 2017 rvice Count Net Payment Sc 3,854 \$56,484.19 3,199 \$75,010.28 864 \$52,163.92 \$3 \$3,170.99 2 \$81.98 0 \$0.00	March 2017 rr/cc Count Net Payment 4,214 \$62,398,51 3,416 \$84,349,54 1,073 \$65,225,19 79 \$66,98,43 2 \$61,98 0 \$0.00		May 2017	
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic D1000 thts: 00999 Preventive 2000 thts: 00999 Restorative D2000 thts: 00999 Restorative D4000 thts: 00999 PerioScottics D4000 thts: 00999 PerioScottics Removable 05900 thts: 00999 Prestbadontics Removable D6000 thts: 00999 Prestbadontics (Iwed D6000 thts: 00999 Prestbadontics (Iwed D6000 thts: 00999 Prestbadontics (Iwed	July 2016 Service Count: Net Payment 3,660 S57,593.07 3,255 S77,593.07 975 S62,563.1 73 S7,098.97 0 S0.00 0 S0.00 0 S0.00 0 S0.00 0 S0.00 0 S0.00 0 S0.00 215 S14,690.59	Aug 2016 Sarvice Count. Net Payment 5: 4,256 565,557 3,677 567,285,54 1,046 566,712,96 47 57,377,55 0 \$0,00 0 \$0,00 0 \$0,00 0 \$0,00 0 \$0,00 0 \$0,00 0 \$0,00 156 \$8,974.92	Sep 2016 srvice Count Net Payment : 3,462 \$33,603.54 2,801 \$70,705.04 916 \$565,642.91 91 \$77,715.59 0 \$50,00 0 \$50,00 0 \$50,00 0 \$50,00 0 \$50,00 0 \$50,00 1278 \$12,415.96	Oct.2015 Service Count Net Payment So 3,455 S56,259,41 2,958 S75,184,02 958 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05	Nov 2016 rvice Count Net Payment S 3,629 \$58,198.50 3,047 \$74,508,70 927 \$62,165,85 54 \$6,034,02 0 \$0.00 0 \$0.00	Dec 2016 crvdcc Count Met Payment 5 3,677 \$57,643.07 852 \$55,865.11 82 \$55,353.69 0 \$0.00 1 \$5150.00 0 \$50.00 0 \$50.00 0 \$50.00 1351 \$5,673.89	Jan 2017 ervice Count Net Payment So 3,213 S57,117,66 739 S44,118,83 40 S2,527,49 2 S245,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 171 S10,231,04	Feb 2017 wice Count Net Payment St 3,854 \$55,480.128 3,199 \$75,010,28 864 \$32,163.92 \$3 \$31,370.99 0 \$31,370.99 0 \$0.00 0 \$0.00 0 \$0.00 0 \$0.00 0 \$0.00 0 \$0.00 159 \$8,509.07	March 2017 styles Count Net Payment 4,214 552,398,51 3,416 584,349,54 1,073 565,235,19 79 56,598,43 2 581,98 0 50,00 0 50,000 0 50,00		May 2017	
Check Up Ages û thru 18	0000 http://www.com/org/10/aproxit/ 2000 http://2009 Preventive 2000 http://2009 Restorative 2000 http://2009 Fendormics 20000 http://2009 Pendormics 20000 http://2009 Pendormics 20000 http://2009 Pendormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Ortland.mics/	July 2016 Service Count Net Payment 5 3,660 557,589,07 3,225 577,589,26 0 550,00 0 50,00 0 50,000 0 50,0000 0 50,0000 0 50,0000 0 50,0000000000	Aug 2016 Sarvice Count Net Payment S 4,256 565,553,74 1,046 566,571,206 1,046 566,712,06 0 50,00 0 50,00	Sep 2016 Invice Count Net Payment 1 3,462 \$33,603.44 2,4801 \$77,025.04 926 \$65,642.91 91 \$77,715.59 0 \$50.00 0 \$50.00 0 \$50.00 0 \$50.00 1,78 \$32,415.96 0 \$50.00 1,78 \$51,2415.96 0 \$50.00 1,78 \$51,2415.96 0 \$50.00 1,78 \$51,2415.96 0 \$50.00 1,78 \$50	Ott 2015 Service Count Nett Perment Sc 3,465 S56,239,41 2,958 S75,134,402 958 S75,134,402 958 S75,134,402 958 S75,134,402 958 S75,257 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00	Nov 2015 1,629 558,198,50 1,047 574,508,79 927 552,365,85 54 55,040,02 0 50,00 0 50,00	Dec 2016 ervice Count Met Payment 5 3,679 577,474.0.77 852 557,374.0.07 852 55,350.89 0 \$00.00 1 \$150,00 0 \$0.00 0 \$0.00	Jan 2017 ervice Count Net Payment Se 3,779 S56,480,43 3,213 S77,117.66 7793 S44,111.84 40 S2,527.49 20 S2,450,00 0 S0,00 0 S0,00	Feb 2017 *Vice Count Net Payment S 3,199 575,010.28 864 552,163.29 2 \$31,70.99 2 \$31,70.99 0 \$50.00 0 \$50.00 0 \$50.00 0 \$50.00 0 \$50.00 159 \$\$5,509.07 0 \$50.00	March 2017 rrVice Court: Net Psymer 4,214 \$62,898.51 3,416 \$84,49.54 1,073 \$65,235.19 79 \$56,235.19 2 \$5138 0 \$0.00 0 \$0.		May 2017	
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 926 \$55,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 Styles 50 1,047 Styles 50 1,047 Styles 50 1,047 Styles 50 1,047 Styles 50 1,047 Styles 50 54 S5,054,02 0 S50,00 0 S50,00	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,68,11 8,2 555,585,11 8,2 555,585,11 8,2 555,585,11 1,555,585,11 0,550,00 0,55	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Check Up Ages 0 thru 18	0000 http://www.com/org/10/aproxit/ 2000 http://2009 Preventive 2000 http://2009 Restorative 2000 http://2009 Fendormics 20000 http://2009 Pendormics 20000 http://2009 Pendormics 20000 http://2009 Pendormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Prevision/endormics 20000 http://2009 Ortland.mics/	July 2016 Service Count Net Payment 5 3,660 557,589,07 3,225 577,589,26 0 550,00 0 50,00 0 50,000 0 50,0000 0 50,0000 0 50,0000 0 50,0000000000	Aug 2016 Sarvice Count Net Payment S 4,256 565,553,74 1,046 566,571,206 1,046 566,712,06 0 50,00 0 50,00	Sep 2016 Invice Count Net Payment 1 3,462 \$33,603.44 2,4801 \$77,025.04 926 \$65,642.91 91 \$77,715.59 0 \$50.00 0 \$50.00 0 \$50.00 0 \$50.00 1,78 \$32,415.96 0 \$50.00 1,78 \$51,2415.96 0 \$50.00 1,78 \$51,2415.96 0 \$50.00 1,78 \$51,2415.96 0 \$50.00 1,78 \$50	Ott 2015 Service Count Nett Permert Sc 3,465 S56,239,41 2,958 S75,134,402 958 S75,134,402 958 S75,134,402 958 S75,134,402 958 S75,257 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00	Nov 2015 1,629 558,198,50 1,047 574,508,79 927 552,365,85 54 55,040,02 0 50,00 0 50,00	Dec 2016 ervice Count Met Payment 5 3,679 577,474.0.77 852 557,374.0.07 852 55,350.89 0 \$00.00 1 \$150,00 0 \$0.00 0 \$0.00	Jan 2017 ervice Count Net Payment Se 3,779 S56,480,43 3,213 S77,117.66 7793 S44,111.84 40 S2,527.49 20 S2,450,00 0 S0,00 0 S0,00	Feb 2017 *Vice Count Net Payment S 3,199 575,010.28 864 552,163.29 2 \$31,70.99 2 \$31,70.99 0 \$50.00 0 \$50.00 0 \$50.00 0 \$50.00 0 \$50.00 159 \$\$5,509.07 0 \$50.00	March 2017 rrVice Court: Net Psymer 4,214 \$62,898.51 3,416 \$84,49.54 1,073 \$65,235.19 79 \$56,235.19 2 \$5138 0 \$0.00 0 \$0.		May 2017	ount Net Paymer
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 926 \$55,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymer
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 926 \$55,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Check Up Ages D thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 926 \$55,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 926 \$55,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymer
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymer
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Check Up Ages 0 thru 10	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,047 - 574,508,79 927 - 562,365,385 54 - 56,054,002 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Owek Up Ages 0 binu 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Owsk Up Agest O thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedotte 2000 thts: 00999 Freedotte 2000 thts: 00999 Predototts: 2000 thts: 00999 Predototts: Elemonole 05900 thts: 00999 Predototts: Elemonole 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Predototts: Glad 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery 05000 thts: 00999 Oreland Mailfoldad Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Owek Up Ages 0 binu 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Owsk Up Agest O thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 822 555,085,11 82 55,508,51 835,550,89 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Owek Up Ages 0 binu 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Omek Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Check Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payme
Owsk Up Agest 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 5 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55,	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Check Up Age: 0 then 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Owek Up Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Onesk Up Ages 0 thm 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,642,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymer
Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Predotottiss (Inde 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery 05000 thts: 00999 Oreland Mailfoldadi Surgery	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymer
Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (51,1377,46 0 (50,00) 349 (51,1381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Paymen
Ages 0 thru 38	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Not Payment
Ages 0 thru 38	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount NatPayment
Ages 0 thru 38	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Perment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Not Payment
Ages 0 thru 18	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Payment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Not Payment
Ages 0 thru 38	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Payment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	
Ages 0 thru 38	0000 thts: 00999 Diagnostic 2000 thts: 00999 Preventive 2000 thts: 00999 Freedottive 2000 thts: 00999 Freedottiss 2000 thts: 00999 Predotottiss 2000 thts: 00999 Predotottiss Removable 05900 thts: 00999 Predotottiss Removable 06900 thts: 00999 Predotottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss Gene 06900 thts: 00999 Oreloadottiss 06900 thts: 00999 Oreloadottiss	bily 2015 Service Count Net Payment 1 1,560 ST558107 1,255 S77,581.27 0 S50,256.81 73 S77,581.27 0 S50,00 0 S50,000 0 S50,00 0 S50,000 0 S50,0000 0 S50,000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000 0 S50,0000000000000000000000000000000000	Aug 2015 Gardez Counts Het Payment 5 4,255 56557 3,677 587,28554 1,046 566,512,98 47 57,277,55 0 50,00 0	Sep 2016 Furder Count Net Payment 3,462 \$35,642,91 2,807 \$70,755,64 916 \$50,562,91 91 \$7,715,59 0 \$50,00 0 \$50,000 0 \$50,0000 0 \$50,0000 0 \$50,0000 0 \$50,0000000 0 \$50,000	Oct.2016 Service Count Nett Peyment So 3,465 S56,259,41 2,968 S75,184,02 938 S62,603,81 73 S5,922,67 0 S0,00 0 S0,00 0 S0,00 0 S0,00 0 S0,00 195 \$10,150,05 0 S0,00 307 S8,422,13	Nov 2015 1,429 - 563,1985 0 1,647 - 574,508,79 927 - 562,365,385 54 - 56,054,602 0 - 50,000 0 -	Dec 2016 crvfcr Count Met Perment 5 3,679 557,443,55 2,889 577,340,07 8,22 555,061,11 8,2 555,061,11 8,2 555,061,11 8,2 555,061 0 550,00 0 550,00	Jan 2017 ervice Count Net Payment 50 3,779 55640.43 3,213 577,512,65 779 544,11883 40 52,527,69 0 53,000 0 54,000 0 54,000 0 54,000 0 55,000 0 55	Feb 2017         Veta Count         Net Payment         S           3,854         555,010,28         3	March 2017 vr/cc Count Net Payment 4,214 (50,598,51 3,415 (542,340,51 7) 562,593,43 2 (581,34 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00 0 (50,00) 0 (50,00 0 (50,00) 0 (50,00) 239 (511,377,46 0 (50,00) 349 (510,381,08	Solvice Count Net Payment So	May 2017 Invice Count Het Payment Service C	ount Net Payn

7 SC&C - HPN



	Member Enrollment Subset	All Data														
		All Data Medicaid														a an
		3	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17		· · · · · · · · · · · · ·
	Status	Age In Years				Members	Members	Members	Members			Members	Members	Member	s	
	FFS	Ages 00 to 20	68,870	70,658	69,063	69,066	66,705				66,443					· · · ·
	FFS	Ages 21 and Older Tota	129,887   198,757	132,224 202,882	131,001	132,395	131,579				133,231			~		
		101a	198,/5/	202,882	200,064	201,461	198,284	199,586	201,489	198,320	199,674	C	)	0	0	
	НМО	Ages 00 to 20	228,947	229,185	231,440	232,601	234,875	236,047	232,593	234,867	236,022					
	нмо	Ages 21 and Older	201,377	201,134	204,048	205,374	208,325		205,366		209,168				- 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997	
		Tota	430,324	430,319	435,488	437,975	443,200	445,224	437,959	443,184	445,190	c	)	0	0	Here and the second
	Subset	All Data														
		CHECK-UP														
			Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17		and a second sec
	Status	Age In Years		Members	Members	Members -	Members _	Members	Members	Members	Members	Members	Members	Members	5	
	FFS	Ages 00 to 20	3,360	3,313	3,391	3,439	3,427	3,459	3,438		3,461					
	НМО	Ages 00 to 20 Tota	20,981 24,341	21,518	21,377	22,207	22,851		22,207	22,851	22,268			•		
			24,341	24,831	24,768	25,646	26,278	25,727	25,645	26,277	25,729	0		0	0	
	Age Enrollment	-														
			Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17		
	FFS + HMO	Ages 00 to 20	322,158	324,674	325,271	327,313	327,858		327,313		328,194	0		D	0	
		Ages 21 and Older	331,264	333,358	335,049	337,769	339,904		337,780		342,399	. 0			0	
		Total	653,422	658,032	660,320	665,082	667,762	670,537	665,093	667,781	670,593	0		D 	0	
	يو دو مرد اد د	, ·														
	Note: There is duplicat	tion in above number	s because a	member can	be FFS and	HMO enroll	ed during ti	he same mo	nth. Enrolln	nent nümbe	s reported	by DSS.				
																· -
					NV M	adicaid 8.	Chark Lin	Member	Enrollmon	.+						
							check op	Member	Linoinnen							-
			500,000													
			450,000				1 1	M	I							
			400,000 +													
			350,000						<b>.</b> .							
			300,000 +						-			🖺 FFS				
			250,000 +						<u> </u>			III HMO				
			200,000						<u> </u>		<u> </u>	🛙 Check Up				
			150,000 +		-88				§							
			100,000 +						<u>[]</u>							
			50,000 +													
			· 。	Da, Ma	, Ma , U	հիններ					_					
			Jul	16 AUB-16 SE	16 16	. 16	16 1	. 1	1 .1	av-27 jun-27	,					
			Jul	AUB SE	sbir Octin	Nov Dec	Janie	Febra Mar	APT' M	an in in						•
		L														
					FF	S+HMO EI	nrollment	By Age G	oup							
•																
			800,000													
			700,000 -						·····				1			
			1													**************************************
-			600,000 +							• •						
			500,000 +		_	<u>                                     </u>			Į							
											₿ Ag	to 20 to 20				
			400,000 +-													· · · · · · · · · · · · · · · · · · ·
			300,000 +					-11 -1				ges 21 and der				
			200,000								i To					
			100,000 +			H			<u> </u>							
			₀∔		, III, III	Ļ₩IJĮ		, III, III	<u> </u>							1
			Jul	6 AUB 16 Set	p.16 Oct.16	NON-16 DEC-1	6 Jan-17 Fel	0-17 Mar-17	121 .15	1						
			Jun	AUB Set	A OCC.	Non Dec.	131, te	Wat	ADI MAY	10m.						
													1			
		<u>ل</u> ـــــ					~~~~									

8 FFS HMO Members

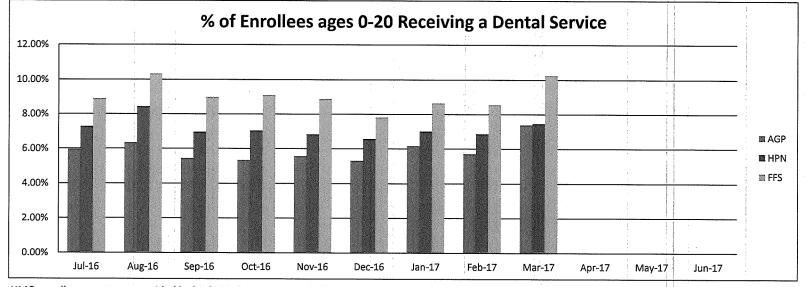
DHHS\_000252

## Nevada Division of Health Care Financing and Policy Dental Dashboard Reports SFY17

Enrollees ages 0-20	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
AGP Ages 0-20	104,970	105,118	106,121	105,070	105,427	105,764	105,679	105,777	105,545			
HPN Ages 0-20	142,461	142,518	143,679	146,484	148,786	147,447	148,345	150,664	149,991			-
Fee for Service Ages 0-20	72,230	73,971	72,454	72,505	70,132	69,872	70,981	70,247	70,553			

Dental Patients												
AGP	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
Ages 0 thru 20	6,274	6,673	5,779	5,623	5,881	5,617	6,524	6,050	7,811	0	0	0
HPN	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
Ages 0 thru 20	10,363	11,993	10,015	10,322	10,171	9,708	10,412	10,355	11,199	0	0	0
Fee-for-Service	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
Ages 0 thru 20	6,426	7,634	6,505	6,594	6,230	5,464	6,132	6,008	7,232	0	0	ı C
						······································					_	

Percentage of Enrollees Ages 0-20 receiving a												
dental service	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17
AGP	5.98%	6.35%	5.45%	5.35%	5.58%	5.31%	6.17%	5.72%	7.40%	#DIV/0!	#DIV/0!	#DIV/0!
HPN	7.27%	8.42%	6.97%	7.05%	6.84%	6.58%	7.02%	6.87%	7.47%	#DIV/0!	#DIV/0!	#DIV/0!
FFS	8.90%	10.32%	8.98%	9.09%	8.88%	7.82%	8.64%	8.55%	10.25%	#DIV/0!	#DIV/0!	#DIV/0!



HMO enrollee counts are provided by both HMOs on a quarterly basis. Numbers include both Medicaid and Check Up enrollees

## **Martha Framsted**

From:	acapurro@health.nv.gov
Sent:	Sunday, November 26, 2017 1:38 PM
То:	rwhitley@dhhs.nv.gov; amyroukie@health.nv.gov
Subject:	Notice of Proposed Action-OHP
Attachments:	Memo for Health Assesment Before School Entrance OHP.pdf; Notice of Proposed
	Regulatory Action.pdf; Proposal Policy.pdf; State.Reviewspdf; Health Exam for School
	Entrance (1).pdf

## Good Morning,

I am writing to request your review and authorization of a *health assessment before school entrance* policy. Attached is the notice of proposed action along with supporting documentation. Please contact me if further information is needed. Thank you for your consideration of this proposal. Best regards, Antonina
Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

## T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@<u>health.nv.gov</u> www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

#### STATE OF NEVADA

BRIAN SANDOVAL

Governor.

RICHARD WHITLEY, MS Director, DHHS



AMY ROUKIE, MBA Administrator, DPBH

VACANT Chief Medical Officer

## DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH 4150 Technology Way, Suite 300

Carson City, Nevada 89706

Telephone: (775) 684-4200 Fax: (775) 687-7570

## MEMORANDUM

**DATE:** November 20, 2017

To: Richard Whitley, MS, Director, Department of Health & Human Services

Through: Amy Roukie, MBA, Administrator, Division of Public and Behavioral Health

From: Antonina Capurro, DMD, MPH, MBA, State Dental Health Officer, DPBH

Subject: Authority to Pursue Health Assessment Before School Entrance Policy

The mission of DPBH is to, "protect, promote, and improve the physical and behavioral health of the people of Nevada." Data collection and analysis fuels our ability to make policy changes and establish programs that promote health and prevent diseases. While we have snapshots of the health of our school children such as the DPBH 2013 report which found that 36.8% of Nevada's children are overweight and obese, we do not have specific data on the health status of Nevada children through the grades or understand how their health changes as they develop. We cannot promote the wellness of children and their parents/guardians if we have no way to gauge the current health status of individuals relative to their peers as well as contrasting their counterparts from previous generations.

Universal access to health care and education are fundamental goals for us as public health advocates. It is for this very reason that the Affordable Care Act included preventative services such as regular medical and dental checkups, scheduled immunizations, and screenings for childhood disease as an essential requirement. However, despite the improvement in availability of health related services as a whole, the same emphasis has yet to be placed on improving the availability of dental specific services.

To wit, Oral Health in America: A Report of the Surgeon General reported in 2000 that "more than 51 million school hours are lost each year to dental-related illness". When children miss valuable classroom hours due to dental pain, they fall behind and become less likely to graduate and become a productive member of society. Children with good oral health spend more time in the classroom and can concentrate more effectively on their school work.

Eighteen states have already treated this disconnect by instituting a *health assessment before school entrance policy*. This policy requires children to receive a medical and a dental assessment before they enter school which promotes the establishment of a medical and dental home and provides the state with data on the healthcare needs and condition trends of its school age children.

I propose that Nevada adopt a similar policy, the vision of which would be to link children with a medical and dental home and thereby promote disease prevention as well as strengthening the data on the health of school age children. The health and wellness of Nevada's school age children would be assessed prior to entering grades kindergarten or 1<sup>st</sup> grade and again in 4<sup>th</sup>, 7<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> grades. This requirement could be the first step for Nevada in building a strong medical/dental support system that can serve and oversee each school district and connect parents with a network of local health professionals. These professionals can then work to not only complete the required screening, but also provide education and a medical/dental home for future treatment.

This policy also aligns with the Governor's 2016-2020 Strategic Planning Framework which outlines - the Governor's vision to improve the health and education of all students. 4.1 Promote health and wellness across all age groups. A health assessment before school entrance policy is an important and integral component to ensure children are healthy and ready to learn.

Attached are four documents:

- Notice of Proposed Regulatory Action
- Proposed Policy Overview (including proposed changes to NRS 392.320)
- Proposed Health Assessment Form (approved by Dr. DiMuro)
- Review of State School Entrance Health Policies

I am seeking your authorization and support for this project. If you would like to meet to discuss this proposal in further detail, I would appreciate your feedback and advice. I can be reached at (702) 774-2573 or <u>acapurro@health.nv.gov</u>. Thank you.

## ORAL HEALTH ASSESMENT FOR SCHOOL ENTRANCE POLICY

## By Dr. Capurro, Nevada State Dental Health Officer

### **OVERVIEW**

It is now common knowledge that oral health is a vital component of overall health. Numerous studies have identified the association between the oral bacteria and inflammation in dental diseases and overall systemic illness such as cardiovascular disease and diabetes. Oral health is a snapshot of a person's health status as the condition of the oral tissues can lead to early detection of systemic issues.

Proper oral hygiene and disease prevention are especially important for children who are developing and in whom oral decay can have lifelong affects. Furthermore, missing teeth, gum disease, and dental decay can lead to pain, loss of sleep, and low productivity in school which has an enormous impact on a child's nutritional status, self-esteem and overall quality of life. In fact, according to Oral Health in America: A Report of the Surgeon General, "more than 51 million school hours are lost each year to dental-related illness".

To date, eighteen states have found the solution to avoiding the consequences of oral disease in school age children by connecting young people to a dental home through implementation of a dental examination before school entrance policy. Furthermore, many states use the dental examination requirement as the first step in providing preventative services to school age children and meeting national objectives to improve overall oral health care. The ultimate goal of a dental examination portion of the health assessment before school entrance policy is to connect students with a dental provider and assist them in establishing a dental home. Incorporating dental hygiene into daily routines and directing children to oral care services allows children to enter school as a healthy individual capable of becoming an educated productive member of society.

## **History of Oral Examination Policies in Schools**

Kansas has the longest standing dental assessment before school entrance requirement. The Kansas law was passed in 1915 and requires the <u>school district</u> to provide a free dental assessment. Although individual school districts are mandated to provide screening services, they are currently unfunded. This places a great burden on the schools to organize and fund the screenings, and tasks the school nurses in answering parent questions, informing parents of the results of the screening, assisting parents in finding a dental home, monitoring the student's oral health status if urgent needs were identified, compiling student results, and sending the data to the Bureau of Oral Health.

Oregon is the latest state to implement a dental screening requirement with a bill that became effective June 2015. Oregon's dental assessment is a part of the medical review required for school entrance. Interesting to note that Oregon's vision screening law was passed in 2013 and the state is slowly adding different medical components into their medical examination school policy. Oregon also has an enforceable policy and will withhold a child's report card if they are not in compliance with the law. As they are the newest state to implement a dental policy for school entrance, they have instituted electronic student records and place the burden of responsibility on their Department of Education to compile student health examination information and submit a yearly report to the Oregon Health Authority Dental Director.

## **Current Nevada School Entrance Requirement**

For entrance into a Clark County school, parents must complete an online registration form, and bring the following documents to the school: 1. the child's birth certificate, 2. the child's immunization record, and 3. provide proof of residency. (<u>http://ccsd.net/parents/enrollment/</u>). In Washoe County, a health information sheet is added to the requirements which allows the parent to list any health problems or medications their child might need while in class. (<u>https://dcsd.k12.nv.us/main.aspx?pageid=177&lastpageid=2&lastpagename=Home</u>)

Although Nevada does not require a medical evaluation before school entrance, it does require the school to provide a visual and auditory exam in " at least two grades of elementary school, one grade of the middle or junior high school, and one grade of the high schools". The school nurse or school employee that provides basic first aid conducts the required examinations and reports school data to the Chief Medical Officer. Parents may request exemption by providing their child's teacher with a written statement of exemption. (NRS 392.420 Physical examinations of pupils; qualifications of persons to conduct examinations; notice to parent of examination and opportunity for exemption; report of results to Chief Medical Officer. [Effective July 1, 2015.])

Within the Clark County School District there are 184 BSN school nurses, 19 procedure nurses, and 25 support staff members that serve 321,000 students in 357 schools. That is a ratio of 1 nurse to 1745 students. In addition to serving the medical needs of these students, the nursing staff must also provide visual, auditory, and BMI screenings for all CCSD children. (Colosimo, R. (n.d.). School Nures. *Nevada-Edition 47*. Retrieved November 20,2016.

http://epubs.democratprinting.com/article/SCHOOL\_NURSES/2029486/261828/article.html#)

### **Proposed Policy**

## **Screening Interval**

Nevada health examination before school entrance policy be required at an interval that incorporates the current NRS 392.420 schedule. Therefore, the examination would be required for initial entrance into school ie. Kindergarten or 1<sup>st</sup> grade and in 4<sup>th</sup>, 7<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> grade. The exam

should also be completed not more than 12 months prior to commencement of the school year in which the exam is required. The grace period will be 45 days from school entrance.

The health assessment policy will be phased in beginning with grade 12 for school year (SY) 2019-2020. The policy will initially focus on high school seniors as these students are at an age when they should be starting to take ownership of their own healthcare options, and are more likely than younger students to be able to attend appointments independently. Additionally, many of these students are still covered by Medicaid and/or their parent's private insurance.

By focusing on an age group that is about to enter the workforce but is still covered by insurance (private or Medicaid), dental/medical issues that are identified in the assessment can be treated before the child loses eligibility. The ultimate goal would be to graduate individuals that are free of oral disease, are educated about their health, and empowered to make healthy decisions in their adult life.

## **Phase-in Plan:**

- 2019/20 Grade 12
- 2020/21 Grades 12 and 10
- 2021/22 Grades 12, 10, and 7
- 2022/23 Grades 12, 10, 7, and 4
- 2023/24 Grades 12, 10, 7, 4, and K/1

#### **Exam/Assessment/Screening**

The dental assessment portion of this policy allows both a dental and medical professional to complete the oral health section. The goal of the policy is to connect children to a local dental home. The American Academy of Pediatric Dentistry definition of a dental home will be used. It states, "a 'Dental Home' means that your child's oral health care is delivered in a comprehensive, continuously accessible, coordinated and family-centered way by a licensed dentist."

### Enforcement

The policy while mandatory should allow parents to submit a notarized written statement to the school for religious exemption. Parents that are having difficulty completing the requirement should be assisted by the school nurse in locating a community dentist/physician. No child will be removed from public school for lack of compliance with this policy, but parents that are unable to fulfill the requirements of the policy should be assisted in every way possible.

#### Referrals

Most referrals are delivered by the school nurse in the form of a handout with information on community clinics and practitioner that operate on a sliding fee schedule. Providing families that currently do not have a dentist or who cannot find a dentist with a list of providers in their area is central to the goal of the oral assessment for school entrance policy. The nurse should also be equipped with Medicaid enrollment forms and make these available to parents that indicate that they do not have health insurance.

#### Dental-vs.-Health-Form

Per NRS 392.420, Nevada schools in counties with a population of 100,000 or more are required by law to provide a visual, scoliosis, and auditory screening at set intervals. (Note, BMI screenings were recently removed.) If we merge the dental assessment with an overall health examination as a school entrance requirement, we would reduce the workload of the school nursing staff, minimize classroom contact time lost to complete the in-school examination, require health evaluations for all children not just those living in largely populated area, and improve our understanding of the healthcare needs of the State. In addition, by requiring the examination to be performed by medical/dental personnel outside the school, students and parents are compelled to build medical/dental relationships in their local community. There may also be greater buy-in for such a policy as it may result in a cost savings measure for school districts and allow for a redistribution of nursing staff.

#### **NRS** Proposed Changes

NRS 392.420 Physical examinations of pupils; qualifications of persons to conduct examinations; notice to parent of certain medical conditions; notice to parent of examination and opportunity for exemption; report of results to Chief Medical Officer.

- 1. It is the duty of all schools to support student health through promotion of an annual wellchild examination by a licensed physician and biannual dental examinations by a licensed dentist. Students and their families should receive assistance in enrolling in the state Medicaid system. In each school at which a school nurse is responsible for providing nursing services, the school nurse shall plan for and carry out, or coordinate and monitor the health promotion of the school through medical and dental screenings and verification of completed School Entrance Health Forms. The school nurse will verify that children enrolled in Nevada public school have submitted documentation of up-to-date immunizations, emergency information, and medical and dental health status in accordance with subsection 2. Exemption from all or part of the School Entrance Health Form will be granted if a parent or guardian files a written statement objecting to the examination with the school nurse.
- 2. All children in Nevada public school Kindergarten or 1 grade and students progressing to grades 4, 7, 10, and 12 **should** have on file within 45 days of entry or prior to the first day of

school attendance a record of a completed School Entrance Health Form in accordance with this subsection.

- a. School Entrance Health Form
  - i. Beginning the school year (SY) 2019/20 all students entering grade 12 shall be required to show proof of a completed School Entrance Health Form signed and dated by a qualified health professional as indicated on the School Entrance Health Form and completed within the prior 12 calendar months.
  - ii. Beginning the school year SY 20/21 all students entering grade 10 shall be required to show proof of a completed School Entrance Health Form signed and dated by a qualified health professional as indicated on the School Entrance Health Form and completed within the prior 12 calendar months.
  - iii. Beginning the school year SY 21/22 all students entering grade 7 shall be required to show proof of a completed School Entrance Health Form signed and dated by a qualified health professional as indicated on the School Entrance Health Form and completed within the prior 12 calendar months.
  - iv. Beginning the school year SY 22/23 all students entering grade 4 shall be required to show proof of a completed School Entrance Health Form signed and dated by a qualified health professional as indicated on the School Entrance Health Form and completed within the prior 12 calendar months.
  - v. Beginning the school year SY 23/24 all new enterers into Kindergarten and grade 1 shall be required to show proof of a completed School Entrance Health Form signed and dated by a qualified health professional as indicated on the School Entrance Health Form and completed within the prior 12 calendar months.

#### **Data Collection Methods**

An online database system provides for easy information entry and processing. Paper forms may be initially used but the information should be entered into an online database by either the school nurse or a regional state staff member tasked with this role.

It would be prudent to invest in an online database system from the onset of the policy. In light of the costs incurred by other states, a recordkeeping database will cost anywhere from sixteen to twenty thousand.

### **Regulatory Authority**

The State Board of Health provides medical oversight and has the regulatory authority to enforce the proposed policy. If the policy is approved, Dr. Capurro will be working with DPBH to build the necessary application for State Board of Health approval.

NRS 439.200 Regulations of State Board of Health: Adoption; effect; variances; distribution.

1. The State Board of Health may by affirmative vote of a majority of its members adopt, amend and enforce reasonable regulations consistent with law:

(a) To define and control dangerous communicable diseases.

(b) To prevent and control nuisances.

(c) To regulate sanitation and sanitary practices in the interests of the public health.

(d) To provide for the sanitary protection of water and food supplies.

(e) To govern and define the powers and duties of local boards of health and health officers, except with respect to the provisions of <u>NRS 444.440</u> to <u>444.620</u>, inclusive, <u>444.650</u>, <u>445A.170</u> to <u>445A.955</u>, inclusive, and <u>chapter 445B</u> of NRS.

(f) To protect and promote the public health generally.

(g) To carry out all other purposes of this chapter.

2. Except as otherwise provided in <u>NRS 444.650</u>, those regulations have the effect of law and supersede all local ordinances and regulations inconsistent therewith, except those local ordinances and regulations which are more stringent than the regulations provided for in this section.

3. The State Board of Health may grant a variance from the requirements of a regulation if it finds that:

(a) Strict application of that regulation would result in exceptional and undue hardship to the person requesting the variance; and

(b) The variance, if granted, would not:

(1) Cause substantial detriment to the public welfare; or

(2) Impair substantially the purpose of that regulation.

4. Each regulation adopted by the State Board of Health must be published immediately after adoption and issued in pamphlet form for distribution to local health officers and the residents of the State.

### Goals

The overall goal of the policy is to:

• Determine the dental and medical status on Nevada school children

• Identify those in need and refer them to services

· Connect families with a dental and medical home

Increase population based services

Develop targeted interventions

Build the connection between overall health, dental health, and education

#### **Outcomes for Nevada**

This requirement could be the first step for Nevada in building a strong dental support system that can serve and oversee each school district and connect parents with a network of local health professionals that not only complete the required screening, but also provide education, treatment, and a medical/dental home. Possible outcomes include meeting:

- 1. NRS 439.2793 #9: Develop and coordinate, in cooperation with the Department of Education, recommendations for dental programs to encourage proper oral hygiene by children.
- 2. Increase EPSDT levels from the current Nevada rate of 38.63% to the current national average for FY 2015 of 47.48%
- 3. Governor Sandoval's 2016-2020 Strategic Planning Framework. 4.1 Promote health and wellness across all age groups.
- 4. Healthy People 2020, Oral Health objective
  - OH-2: Reduce the proportion of children and adolescents with untreated dental decay. Children aged 3-5, 6-9, and 13-15 are targeted in this objective. This represents grades pre-k to kindergarten, 1<sup>st</sup> grade to 4<sup>th</sup> grade, and 8<sup>th</sup> grade to 10<sup>th</sup> grade.
  - OH-7: Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year

And may in time affect:

- OH-8: Increase the proportion of low-income children and adolescents who received any preventive dental service during the past year
- OH-12: Increase the proportion of children and adolescents who have received dental sealants on their molar teeth

## **Questions for Further Discussion**

- Who should provide care coordination and assist in locating a dental home for students if an assessment is completed at the school?
- Should a non-dental professional provide the dental assessment if the true goal is to connect students to a dental home that will provide a full examination?
- How will the grace period be enforced? Will school nurses be required to send reminders to parents that have not returned a health assessment form?
- What oversight will the Oral Health Program provide and what additional staff will be available to answer questions and oversee implementation?
- How will funds be raised to purchase a network database to house the health information collected?
- What is the policy/protocol should urgent dental issues be identified? Who will provide case management?

## STATE OF NEVADA SCHOOL ENTRANCE HEALTH FORM

Health Information Form/Oral Screening/Comprehensive Physical Examination Report

## Part I – HEALTH INFORMATION FORM

The parent or guardian completes this page (Part I) of the form. The Medical Provider completes Part II and Part III of the form. The exam must be completed not more than 12 months prior to commencement of the school year in which the exam is required.

Name of School:	Current Grade:
Student's Name	Student's ID#
Student's Name:Last First Mid	ldle
	Country of Birth: Main Language Spoken:
Student's Address: City	r' State: Zip
Name of Parent or Legal Guardian 1:	Phone: Work or Cell:
Name of Parent or Legal Guardian 2:	Phone: Work of Cell:
Emergency Contact:	Phone:
Current Health Issues	
Y N Allergies: Please list: Medications	FoodOther
History of Anaphylaxis to	Epi -Pen : ⊡Yes □No
Asthma: Asthma Action Plan	□ No (Please attach)
Diabetes:  Type I Type II	
Seizure disorder:	
Other (Please specify)	
Current Medications (if relevant to the student's healt **if any of these medications are to be administered at sc	
**If any of these medications are to be administered at sc	noor please notify the school hurse
Child's Health Insurance None Medicaid (Please check all that apply)	
I, (do) (do not) hereby aut	horize my child's dental and/or health care providers to
dental and medical record to and from the child's sch	nd/or exchange information from the above-named child's ool district and the DPBH's Oral Health Program. This w it. I may withdraw my authorization at any time by
contacting my child's school. This authorization shall beec	ome effective immediately and shall remain in effect for one year
from the date of signature. When information is released from	your child's record, documentation of the disclosure is maintained in
your child's health or scholastic record.	
Signature of Parent or Legal Guardian:	Date://
Signature of person completing this form:	Date: / /
Signature of Interpreter:	Dawii

DHHS\_000264

## Part II – ORAL SCREENING

A qualified licensed dentist, dental hygienist, physician, physician's assistant, school nurse, nurse practitioner, or dental student/hygiene student under direct supervision by a licensed dentist must complete Part II. The exam must be completed not more than 12 months prior to commencement of the school year in which the exam is required.
Student's Name: \_\_\_\_\_ Date of Birth: \_\_/\_ / \_\_\_ Sex: □ M □ F

Non- cavitated white spots	Untreated Decay	Treated Decay	Dental Sealants Present	Treatment Urgency	Referral for Care
<b>Yes</b>	□ Yes	🗆 Yes	<b>Ves</b>	Urgent Care Needed (pain, swelling, or infection present) – child	🗆 Pain
				appears to have a need for <b>immediate</b> dental care.	
🗆 No	□ No	□ No	□ No	□ Needs Dental Care – further dental evaluation needed. (Please schedule an appointment at your earliest convenience for a comprehensive dental examination.)	Abscess
<u> </u>			·	□ No Obvious Problems – continue with regular dental checkups.	Pathology
	]			Japanin' Indones' Laboration . 	
• =	e Reviewed: ment Comple	U Yes	2	No No, re-assessment needed due to behavio	ral issues
Oral Hygien Oral Assess Comments:			2	ាន សាមនាយាយ នាយាយនេះ។ ក្នុងសាមនាយាយនេះ។ "ស្ថិតនៃនិងមិន សាមនាយនេះ។ ស្ថិតនេះ។ ស្នាន់ ស្ថិតនេះ។ ស្ថិតនៃស្ថិតនេះ។ សាមនាយនេះ។ សាមនាយនេះ។	ral issues
Oral Assess Comments:	ment Comple	ted: 🗆 Yes		ាន សាមនាយាយ នាយាយនេះ។ ក្នុងសាមនាយាយនេះ។ "ស្ថិតនៃនិងមិន សាមនាយនេះ។ ស្ថិតនេះ។ ស្នាន់ ស្ថិតនេះ។ ស្ថិតនៃស្ថិតនេះ។ សាមនាយនេះ។ សាមនាយនេះ។	ral issues
Oral Assess Comments: Dental Refe	ment Comple	ted: D Yes		No, re-assessment needed due to behavio	

## Part III - COMPREHENSIVE PHYSICAL EXAMINATION REPORT

A qualified licensed physician, nurse practitioner, or physician assistant must complete Part III. The exam must be completed not more than 12 months prior to commencement of the school year in which the exam is required.

Student's	Name:	Date of B	Sirth:// Sex: $\Box$ M $\Box$ F
Health	Date of Assessment: / /	Physica	l Examination
Assessment	Weight:lbs.		= Normal / If abnormal, please
	Height: ft in.	describe	•
	Body Mass Index (BMI):		
	BP	Gene Gene	ral
	□ Age / gender appropriate history complete	d 🛛 🗖 Skin	
	Anticipatory guidance provided	<b>D</b> HEE	NT
		🛛 🗖 Lung	5S
		🛛 🗖 Hear	
		🗖 Abda	omen.
		🗖 Geni	talia
		🗖 Extre	emities
		<b>D</b> Nèur	ologic
		Othe	ř
	TB Screening:	Albert Control	
	$\square$ No risk for TB infection identified	2	
	$\Box$ No symptoms compatible with active TB d	isease	
	□ Risk for TB infection or symptoms identifi	ed	
	Test for TB Infection: DTSTD IGRA Date:	_TST Reading	imm TST/IGRA Result: □Positive
	□Negative		ma CVB Data:
	CXR required if positive test for TB infection Abnormal	1 or 1 B sympto	
	Adiioimai		
		1. 16.1 16.1 16.1 16.1	
Auditory	Screened at 20dB:	់ត្រីដើម្បីរវិក ខ្លួនក្រី ក្នែក ក	Referred to Audiologist/ENT
Screen	Indicate Pass (P) or Refer (R) in each box.		□ Unable to test – needs rescreen
Serven	na province a series de la construcción de	······	Permanent Hearing Loss Previously
	1000 2000 4000		identified:
			Left Right
	R		☐ Hearing aid or other assistive
			device
		I	
	Screened by OAE (Otoacoustic Emission	s):	
	$\Box$ Pass $\Box$ Refer	· · · · · · · ·	

## Part III - COMPREHENSIVE PHYSICAL EXAMINATION REPORT(Continued)

A qualified licensed physician, nurse practitioner, or physician assistant must complete Part III. The exam must be completed not more than 12 months prior to commencement of the school year in which the exam is required.

Student's Name: \_\_\_\_\_ Date of Birth: \_\_/\_\_\_/ Sex: 🗆 M 🗆 F

Vision Screen	U With Co	orrective	Lenses (ch	eck if yes)	
	Stereopsis	s Distanc	ce 🛛 Pass 🕻	Fail	Not tested
	Distance	Both	R	L	Test used
		20/	20/	20/	
	D Pass	Refe	red to eye	doctor 🗆	Jnable to test – needs rescreen
Recommendations	Summary	of Findi	ngs (check	( one):	
Recommendations					oncern to school program activities
					t to schooling or physical activity
			, a (a) a (a) a	or explain her	Para Arte Arte Arte Arte Arte Arte Arte Arte
		food:		insect:	nedicine: □ other:
					xis 🗆 local reaction
2	Res	ponse re	equired: 🗆 r	ione □ epinepl	nrine auto-injector $\Box$ other:
עלעי 					e.g., asthma, diabetes, seizure disorder,
ນ (ຈະນະອິດຊີນ (ສະຊິນ) ເປັດໃຫ້ເປັນ (ສະຊິນ) ເປັນ (ສະຊິນ) - 1.5 ເປັນ (ສະຊິນ) - 1.5 ເປັນ (ສະຊິນ)	severe aller	gy, etc)	Restricted	Activity Spec	ify:

Health Care Professional's	Certification (Write Legibly or Stamp)	
Name:	Signature:	Date://
Practice/Clinic Name:	Address:	
Phone: Fax: _	Email:	

**Developmental Evaluation** 
□ Has IEP □ Further evaluation needed for: \_\_\_\_\_

Special Diet Specify Special Needs Specify:

given and/or available at school.

**Other Comments:** 

Medication. Child takes medicine for specific health condition(s). 

Medication must be

DHHS 000267



### NOTICE OF PROPOSED REGULATORY ACTION

Regulation or Other	
Reference:	NRS 392.420
Requesting Agency:	DPBH Oral Health Program
Intended Actio	n (30 day notice to public)(Governor's office to be notified before notice is
distributed to	
Adoption	
🛛 🖾 Amendme	nt
Repeal	
	ed Action: September 2019
	ay prior notice) )(Governor's office to be notified before notice is distributed to
the public)	
Date of Works	
	ce at least 10 days prior to final adoption of regulations
Course and the second second	ith Governor's regulatory priorities (check all that apply):
a. Affects pu	
	blic safety and security for the pursuit of federal funds and certifications
C. Necessary	e application of powers, functions and duties essential to the operation of the state
	partment, board or commission at issue
	nding judicial deadlines
OCCUPIED CONTRACTOR	to comply with federal law
	is will have a positive economic impact for the people of the State of Nevada.
	must be provided as soon as possible.
Original draft	
is attached	
will be sent	
	oposed language to agency liaison in Governor's office)
1. What is the prob	lem the regulation is designed to address? Or, if the regulation does not
	roblem, the value to the public of the regulation?
According to the 20	17 DHCFP Dental Dashboard, less than 10% of children age 0-20 enrolled in
Medicaid are receiv	ing dental services. Despite the availability of services, the national lack of
utilization lead to th	e Oral Health in America: A Report of the Surgeon General report in 2000
	nillion school hours are lost each year to dental-related illness". When
	ble classroom hours due to dental pain, they fall behind and become less
	d become a productive member of society. This regulation is targeting the
	lental services and lack of information on the dental health condition of
	e children through the grades.
	ticipated impact of the regulation on the problem or the anticipated
benefits provided h	by it?
This policy will allo	w the state to build a valuable database of information on the medical and
	our school age children. Such data can be used to write policy, apply for
	ventions, build a surveillance plan, analyze current needs, and implement
	e measures can be submitted in an annual report to the Department of
millerventions. These	measures can be submitted in an annual report to the Department of

November 20, 2017 Page 1

## DHHS\_000269

,

Education and Nevada legislators.

Furthermore, the policy will encourage students and parents to build medical/dental relationships in their local community. The policy will initially focus on high school seniors. These students are at an age where they should be starting to take ownership of their own healthcare options, and are more likely than younger students to be able to attend appointments independently. Additionally, many of these students are still covered by Medicaid and/or their parent's private insurance.

By focusing on an age group that is about to enter the workforce but is still covered by insurance (private or Medicaid), dental/medical issues that are identified in the assessment can be treated before the child loses eligibility. The ultimate goal is to graduate individuals that are free of oral disease, are educated about their health, and empowered to make healthy decisions in their adult life.

## Phase-in Plan:

- 2019/20 Grade 12
- 2020/21 Grades 12 and 10
- 2021/22 Grades 12, 10, and 7
- 2022/23 Grades 12, 10, 7, and 4
- 2023/24 Grades 12, 10, 7, 4, and K/1

3. What is the anticipated adverse impact, if any, on impacted groups – including, but not limited to, businesses of all sizes, small communities and government entities?

Currently, access to quality health care services is limited by the network of medical and dental providers available to deliver the care. This regulation will stretch the current medical/dental provider system but is necessary to identify shortage areas and remove barriers to care.

4. What is the anticipated cost – both directed and indirect – of the regulation, including, but not limited to, the cost of enactment, enforcement and compliance?

- 1. Well-check visits and dental examinations for children are provided through Medicaid and private insurance. EPSDT utilization rates for medical and dental services will increase as a result of this policy.
- 2. An information database is needed and will have an associated cost depending on the system chosen. Database options include Epi Info which is a free application provided by the CDC. Another possibility for the database may be found through collaboration with WebIZ. However, use of this application platform would involve system modification which would require additional funding.

November 20, 2017 Page 2

## 5. Why is the regulation necessary?

The State Board of Health provides medical oversight and has the regulatory authority to enforce the proposed policy via NRS 439.200 1(f). However, a statutory change of NRS 392.420 which outlines the physical examination of pupils would provide greater oversight to implement the policy.

6. Are there alternate forms of regulation sufficient to address the problem?

No.

7. Is the regulation written clearly and concisely so as to achieve easy understanding and application?

Yes, please see Health Assessment Form and proposal.

8. Do other regulations address the same problem?

No. Per NRS 392.420, Nevada schools in counties with a population of 100,000 or more are required by law to provide a visual, scoliosis, and auditory screening at set intervals. (Note, BMI screenings were recently removed.) If we merge the dental assessment with an overall health examination as a school entrance requirement, we would reduce the workload of the school nursing staff, minimize classroom contact time lost to complete the in-school examination, require health evaluations for all children not just those living in largely populated area, and improve our understanding of the healthcare needs of the State. In addition, by requiring the examination to be performed by medical/dental personnel outside the school, students and parents are compelled to build medical/dental relationships in their local community. There may also be greater buy-in for such a policy as it may result in a cost savings measure for school districts and allow for a redistribution of nursing staff.

Division Administrator	Date
Agency Contact Name & Number	Date

November 20, 2017 Page 3

Please note, the information in this spreadsheet is compiled from the ASTDD website, online research, and State websites.

Code Summary	Requirement	Enforcement	Referrals	Outcomes Assessment	Forms	Links
Educati A child enrolled in	Assessment must be	No penalty for non-	Referrals are	Each school	Can be	http://legi
on Cod kindergarten or first grade	completed by a	compliance. There	not required	district submits	completed by a	nfo.legisl
49452. in a public school must	licensed dentist or	is a reported high	by law.	a yearly report	quick	ature.ca.g
8 present proof of an oral	dental professional.	rate of non-		to the county	assessment.	ov/faces/c
(2005) assessment by May 31 <sup>st</sup> of	f Waivers are given	compliance and	1	office of	Dental	odes_disp
the school year.	for "financial	high number of	4	education.	information is	laySectio
	burden, lack of	waivers Schools		http://www.sfus	similar to a	<u>n.xhtml?l</u>
	access, lack of	have been	1	d.edu/en/assets/	BSS. Large	<u>awCode=</u>
	parental consent".	encouraged to		sfusd-	section on the	EDC&sec
		explain the		staff/enroll/files	form for parents	tionNum=
		rationale behind the		/2014-	to choose a	<u>49452.8</u> .
		law and benefit of	1.00	<u>15/sf_school_h</u>	waiver.	
		dental exams.		ealth form 03-		
				<u>05-14.pdf</u>	www.cde.ca.go	
				http://www.aap	v/ls/he/hn/docu	
				d.org/media/pol	ments/oralhlthas	
				icies guidelines	sess.doc	
		1		/p_schoolexms.		
				pdf	÷	
				https://www.sfd		
				ph.org/dph/files		
				/hc/HCCommP		
				ublHlth/Agenda	-	
			i i i	<u>s/2015/Jan%20</u>		
				<u>20/San%20Fran</u>		
				cisco%20Childr		
	- Marine Stranger and Stranger		i	en		
D.C. Annual health certificates		Exemption	On the	Information not	Detailed form	http://dcc
Code are required for children	establish	available if parents	assessment	available.	that provides	ode.org/s
38-602 Pre-k through 12 <sup>th</sup> grade.		provide a notarized	there is a		dental	mple/sect
Dental is a small	periodic testing for	statement that the	write in		information on	ons/38-
component of this	lead poisoning and	assessment violates	referral		each tooth and	602.html
requirement.	dental	a religious practice.	section.			
	examinations. The				findings.	
		dental	dental a religious practice.	dental a religious practice. section.	dental a religious practice. section.	dental a religious practice. section. overall clinical

$\begin{array}{c cccc} 1003.2 & ex \\ 2(1), & th \end{array}$		Mayor shall also establish requirements for thesubmission of certificates of dental health for elementary and secondary school students." Part of the medical evaluation portion includes "teeth and gums" and must be	Entire form does not have to be completed to be submitted to a	Parents are encouraged to work with their family	Examination results are kept in the student's file.	http://www.si.e du/content/seec/ docs/child_dent al_assessment_f orm.pdf Full list of health related questions. Dental is a	http://ww w.leg.stat e.fl.us/stat utes/index
Chapte he r 6A- D	health exam form DH3040-CHP-07-2013 Student's entering school	completed by health care provider.	child's school.	healthcare provider to identify and		small component. <u>http://www.flori</u>	.cfm?App mode=D isplay_St
AC fo	or the first time must present a record of			treat any identified		dahealth.gov/% 5C/programs-	atute&Se arch Stri
	completion of examination. Dental is one component of the exam.			issues.		and- services/childre ns-	<u>ng=&amp;UR</u> <u>L=1000-</u> 1099/100
T fc	This form or a similar form must be completed within 12 months of					health/school- health/_docume nts/school-	$\frac{3/\text{Section}}{\frac{s/1003.22}{\text{.html}}}$
1 1	nrollment.					health-entry- exam-form- dh3040-chp-07-	
						2013.pdf	
Georgia Ga. F	Form 3300-Health	3300 form must be	There is an area on	No formal	Records are	Form 3300- Certificate of	<u>https://w</u> ww.gadoe
Code C	Certificate was approved	completed when a child first enters	the form for the screener to provide	referral. Parents are	kept in the child's file and	Eye, Ear, Dental	.org/Exter
R Ann. to 20-2- c	o ensure that early childhood issues were	school. Form can be	information about	told that if	transfer with	Exam. Dental is	nal-
	letected and addressed.	completed by a	an inability to	the child	the child if they	just one of the	Affairs-

176

	08) Ga. Comp. R. & Regs.	Children new to the Georgia public school system have 120 calendar days to provide proof	physician, dentists, hygienist, or school nurse. Dental is simply one of the	complete the exam.	"needs further evaluation", they should	move to another school district. Public health	health section on the screening form. Vision, hearing and	and- Policy/A kDOE/P ges/New
	290-5- 31.01- 09	health certificate.	areas assessed on Form 3300.		contact their local health department	department has access to the information.	nutrition are also assessed. Wide variety of	Student- Require ents.asp
					or family provider.		screeners available. <u>http://www.gac</u> <u>hd.org/DPH_Fo</u> rm_3300.pdf	
Illinois	Code: 77 IAC	Children enrolled in	Exam must be signed by a licensed	Waivers are available for	No referral noted. This	Schools forward data to	Form identifies sealants, caries	http://w w.ilga.g
	665.41	kindergarten, second grade, and sixth grade of	dentist. Forms are	religious objection,	may be due	the State Board	experience,	v/comm
	0 105	any public, private or	due by May 15 <sup>th</sup> of	financial burden, or	to the fact	of Education	untreated caries,	sion/jca
	Ш.	parochial school must	the school year.	lack of access.	that a dentist	who transfers	pathology,	adminc
	Comp.	provide proof of dental	Parents are given 60	Students can be	has already	the information	malocclusion	e/077/0
	Stat.	examination.	day reminder notice	"barred from	performed	to the	and type of	006650
	5/27-		of the requirement.	school if they have	the exam	Department of	treatment	04100R
	8.1		1	not completed the	and	Health. Schools	needed.	tml
				exam or have a	discussed	report 80%		
				waiver on file".	possible	compliance.	http://www.dph.	
				The school can	treatment	The	illinois.gov/sites	
			1	legally hold the	with the	information	/default/files/for	
				child's report card	parents.	allows Illinois	ms/dentalexamp	
				until a waiver is		to build their	roof10_0.pdf	
				submitted.		surveillance		
						data base,		
					-	analyze current		
						needs, and		
					i i	implement		
			1		р. — С. —	interventions.		

					T *1 1 1	D 1112	D-1-6-6	1.44 / /
lowa	Code	A dental screening is	Dental exam is	Waivers are	I-smile helps	Public and	Brief form	http://ww
	135.17	required for all students	performed by a	available if the	families find	private schools	identifies	w.idph.sta
	and	entering school in	dentist, hygienist,	screening cause an	local	provide the	obvious	te.ia.us/I
	641	kindergarten and ninth	physician, or nurse	undue burden or is	dentists and	school district	problems,	DPHChar
	IAC 51	grade in public and	for elementary	there is a religious	community	with	required dental	nelsServi
	Iowa	accredited nonpublic	students. For high	objection. If a	clinics.	information on	care, and urgent	ce/file.ash
	Admin.	school. I-smile	school students,	student does not		student	care.	x?file=B
	Code	coordinators work with the	screening must be	have a screening,	4	screening.	http://www.iow	B4043F5
	641-	school to ensure students	performed by a	the school provides			<u>a-</u>	3491-
	51.1	meet the requirement.	dentist or hygienist	community dental			valley.k12.ia.us/	4992-
		Requirement must be meet	only.	referrals.			District/Certific	AEE0-
		within 4 months of					ate%20of%20D	65CDEE0
		enrollment.					ental%20Screen	22145
					1		ing%209.13.12.	
							pdf	1 11
Kansas	Kan.St	"The boards of education	Annual exam	Dentists &	Parents are	Records are	Screening	http://ww
	at.Ann.	of cities of the first and	performed by	Hygienists provide	given	kept in the	identifies	w.kdheks
	72-	second class and school	dentists and	screenings at	information	school and sent	current decay,	gov/ohi/d
	5201(e	boards of school districts	hygienists to meet	schools to those	following	to the Bureau	dental	ownload/s
	stablish	are hereby required to	the mandate.	students that have	the	of Oral Health	experience,	creening
	ed in	provide for free dental		parental consent.	screening	and aggregate	urgent needs,	initiative/
	1915	inspection annually for all		Parents can easily	and are	date is included	and the need for	Kansas_S
	and	children, except those who		opt out of the	referred to	in an annual	treatment and/or	chool_Sci
	revised	hold a certificate from a		screening.	local	report.	sealants.	eening_T
	in	legally qualified dentist			dentists. The		Form is created	oolkit.pdf
	1923.	showing that this			school nurse		with the school	
		examination has been			monitors		in mind as there	
		made within three months			referrals.		is a long list of	
		last past, attending such					student names	
		schools."					and	
							information.	
							http://www.kdh	
					:		eks.gov/ohi/do	1
							1	

					Queent		wnload/screenin g_initiative/Oral Screening_For m.pdf	http:///
	Code 156.16 )	A dental exam or screening is required by Kentucky Board of Education. A student between 5-6 years of age and enrolling in public school for the first time must show proof of dental certificate by January 1 <sup>st</sup> of the year the student is enrolled. Dental screening is just one of the many required forms for school entrance.	Dental exam is performed by a dentist, dental hygienist, physician, registered nurse, PA or APRN.	There is no penalty under law if a student is non- compliant. Enrollment packet: <u>http://www.boone.k</u> <u>12.ky.us/docs/stude</u> <u>ntenrollmentpacket</u> <u>2.pdf</u> .Packet also includes health information for parents to better understand their child's current health status.	Comment section is on the form. If the exam is conducted by someone other than a licensed dentist and treatment urgency is found, the child should be referred to a dentist.	The data is entered into a state information system and the information is then pulled at the end of each school year.	Untreated and treated decay, pattern of early childhood cavities, and treatment urgency are entered on the screening form. <u>http://education. ky.gov/districts/ SHS/Document s/KDESHS005</u> DSF%20(3).pdf	http://ww w.lrc.ky.g ov/Statute.a spx?id=4 0139
2 - 2 1 1 2	R.S. 40:5.12 —it appears that the law was repeale d in 2010	Comprehensive physical examination report. Dental assessment is a small component of the overall form. A school health form advisory board designs and oversees all health forms.	Dental assessment is completed by a licensed physician, nurse practitioner or PA.	There does not appear to be any penalty or requirement. The school entrance and general health exam form seems to be voluntary.	No referral area listed.	N/a	Dental assessment identifies, oral disease, caries, if teeth are brushed regularly, and if the student has visited the dentist in the last year. <u>http://lhsaa.org/</u> uploads/forms/p	http://law justia.co m/codes/l ouisiana/2 014/code revisedsta tutes/title 40/rs-40- 5.12

							df/LA. Health Exam Form1.p df	
Minnesota	Code 121 A.17	An Early Childhood Screening is required for entrance into public school or within 30 days of enrollment into kindergarten. Dental is listed as an optional and additional component of the required health screening.	Required but screening is offered by local school districts. Dental is optional.	Dental information limited.	Dental information limited.	Dental information limited.	Screening identifies potential health issues by reviewing the vision, hearing, social/emotional , health history, and dental wellness of the child. <u>http://education.</u> <u>state.mn.us/MD</u> <u>E/fam/elsprog/s</u> creen/	https://w ww.revis or.mn.gov /statutes/? id=121a.1 7
Nebraska DHHS 0002	Statue 79-248 Admin Codde 173 NAC 7	Children in Pre-K, K, 1,2, 3, 4, 7, and 10 <sup>th</sup> grade must have a dental screening. Dental is one of the health areas that are assessed. Other areas include hearing and overall medical.	Screening can be performed by RN, LPN, dentist and hygienist.	Mandatory dental health screening. No official waivers allowed. "Any person violating any of the provisions Neb. Rev. Stat. §§ 79- 248 to 79- 252 is guilty of a Class V misdemeanor, as provided in Neb. Rev. Stat. § 79- 253."	Parent's are notified of their child's need for dental care.	The school keeps a copy of the certificate in the student's file and submits data to the Department of Health and Human Services every three years. The DHHS compiles a report and shares it with	Form identifies irregularities in the teeth and treatment urgency. http://dhhs.ne.g ov/publichealth/ Documents/4% 20Dental%20sc reening%20Co mpetencies%20 Assessment%20 checklist.pdf	http://ww w.legislat ure.ne.go v/laws/sta tutes.php? statute=s7 90204800 0

						the Nebraska Department of Education.		
0	Educati on Law 903	School Dental Health Readiness Certificates and health certificate are <u>requested</u> by schools for children entering grades K,2,4,7,and 10. Exam must be completed within 12 months of the school year. Dental certificate was put in place to improve the previous trend that only 50% of school age NY children visited a dentist.	Dental exam performed by dentists or dental hygienist under supervision by a dentist.	No mandatory requirement. "Optional" is list at the top of the form.	Schools must provide parents with a list of local dentists and community clinics if parents request.	Screening forms are for school use only.	Identifies caries experience, restoration history, untreated caries, sealants, pathology, malocclusion, and treatment urgency. <u>http://www.op.n</u> <u>ysed.gov/prof/d</u> <u>ent/dental- health-</u> certificate.pdf	http://ww w.p12.nys ed.gov/ss s/schoolh ealth/scho olhealthse rvices/Art icle19Sec tions.html

Oregon       Or. Rev.St al.336, 390       House Bill 2972 became effective June 25, 2015. This bill requires children seven years or younger to receive a dental screening, school for the first time and 7 years or younger, must provide a dental certificate. Certificates must beaths, hygienes twithout and 7 years or younger, must provide a dental certificate completing a vision screening was passed in 2013.       Dental exams are performed by a dentist, hygienes school for the first time and 7 years or younger, must provide a dental certificate. Certificate must be provide a dental certificate completing a vision screening was passed in 2013.       Dental exams are performed by a school for the school year. Interesting to note that a vision law requiring a vision screening was passed in 2013.       Dental exams are performed by a dentist. Mitp://gov       Waivers are available for requirements of this school research school 's       Schools provide school is school 's       Certificates are entered into the student from attending the program or school, but may result in withholding report actions."       Context School 's       Unable to find be provide a dental certificate completing a dental weight of the school is K/1 <sup>a</sup> , 3 <sup>d</sup> , and 7 <sup>ab</sup> , grade. Student enters grade. Student school kygienes twithout dential supervision.       Dental exams are performed by a dentist. An in- school is provide do and certificate completing a dental hygienes twithout dental supervision.       Dental exams are performed by a dentist. An in- school is school is k/1 <sup>a</sup> , 3 <sup>d</sup> , and 7 <sup>ab</sup> , grade. Student school the mithygienes twithout dental supervision.       Mandated but not required.       Hygienists will provide and certificate completing a dental bey at the status.       Dental form whealth.       http://ww and whealth.         Penns									
PennsylvaniaCode 24P.S. 1403(aDental exam is required when a student enters school at K/T&; 3", and 7" provide compliance by completing a dental program of school at K/T&; 1", and 7" provide compliance by completing a dental provide on alter than provide do ta K/T&; 3", and 7" provide dby a provide compliance by completing a dental provide dby a hygienist without dents. An in- school classing is provide dby a hygienist without dents. An in- school c	Oregon	Or.	House Bill 2972 became						
390seven years or younger to receive a dental screening. Students that are entering and 7 years or younger, must provide a dental certificate. Certificate must be provide do later than 120 days into the school year. Interesting to note that a vision law requiring a vision screening was passed in 2013.health care reprovide of the first time school nurse."Failure by a student to meet the requirements of the result in a program's or school's profing the program or school, but may result in withholding report eards or similar actions."record as part of Oregon's ereord as part on dental preventative care options.record as part of Oregon's electronic student from attending the program or school, but may result in withholding report eards or similar actions."record as part on dental on dental preventative care options.record as part of Oregon's electronic student from attending the program or school, but may result in withholding report eards or similar actions."meant care information on dental provide information on student needs and certificate compliance.Dental form allows dentist to provide on student needs and certificate compliance.Dental form allows dentist to provide but hat without of each tooth the structMandated but not required.Hygienists will provide referral information on student needs and certificate compliance.Dental form and legislative compliance.http://ww willow http://ww willow chart the status of each tooth the http://ww wy/se20Healt http://wwPennsylvania (24P.S. 14-4 provide compliance by<		Rev.St	effective June 25, 2015.	performed by a		1 A		form.	
PennsylvaniaCode 24P.S. 1403(a p)Dental exam is required whon a student teres be provide compliance by completing a dental program or shool, but may not program or school, but may result in a tribulation or school is informationDental exams are performed by a dental school is tribulation.Dental exams are performed by a dental school is tribulation on student needs actions.Dental exams are performed by a dental school is tribulation to the compliance.Dental form allow school is tribulation on student needs and certificate compliance.Dental form allow schoolDental form <br< th=""><th></th><th>at.336.</th><th>This bill requires children</th><th>dentist, hygienist,</th><th>religious objection.</th><th></th><th></th><th></th><th></th></br<>		at.336.	This bill requires children	dentist, hygienist,	religious objection.				
PennsylvaniaCode 24P.S, when a student enters school at K/1*, 3*, and 7th result in a provide or oppliance by compliance by <b< th=""><th></th><th>390</th><th>seven years or younger to</th><th>health care</th><th>"Failure by a</th><th></th><th></th><th></th><th></th></b<>		390	seven years or younger to	health care	"Failure by a				
PennsylvaniaCode 24P.S. school for the first time and 7 years or younger, must provide a dental certificate. Certificate must be provided no later than 120 days into the school year. Interesting to note that a vision law requiring a vision screening was passed in 2013.Section may not result in a program's or school's program or school, but may result in witholding report eards or similar actions."preventative care options.student record. The Oregon Department of Education submits a report each year to the Oregon Health Authority Dental Director and legislative compliance.student record. result in a program or school, but may result in withholding report eards or similar actions."student record. result in a program or school, but may result in withholding report eards or similar actions."student record. required.student record. The Oregon Department of Education submits a report and legislative compliance.student record. required.student record. required.student record. required.student record. required.student record. required.student record. record.student record. record.<			receive a dental screening.	practitioner, or	student to meet the	on dental			2972/
PennsylvaniaCode 24P.S. 14- 1403(a b)Dental exam is required by completing a dental certificate or a dental certificate or a dental dental supervision.Dental exam sare profersion provide due to the provide due to the provide due to the provide due to the due to the due to the provide due to the due to the 			Students that are entering	school nurse.	requirements of this	needs and			
PennsylvaniaCode 24P.S. 14- 3)Dental exam is required when a student enters school at K1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may p)Dental exam is required performed by a dentist. An in- school cleaning is provide down a turn dental supervision.Mandated but not required.Hygienists without dental supervision.Dental exams are performed by a dentist. An in- school cleaning is provide compliance by complete or a dental dental supervision.Dental exams are performed by a dentist. An in- school cleaning is provide compliance by complete or a dental dental supervision.Mandated but not required.Hygienists multical supervision.Dental is reported anice by of reacting statusDental form withen bioling report cards or similar actions."Dental exams are required.Mandated but not required.Hygienists referral informationDental form and legislative compliance.http://ww w.health.PennsylvaniaCode 24P.S. referral informationDental exams are performed by a dentist. An in- school cleaning is provide compliance by completing a dental certificate or a dentalDental exams are performed by a dentist. An in- school cleaning is provide by a health.Hygienist without dentist. An in- school cleaning is provide by a dentist. An in- school cleaning is provide by a dentist. An in- school cleaning is provide by a health.Dental supervision.Dental is provide in a supervision.http://ww we allowsPennsylvaniaCode completing a dental certificate or a dentalDental exams are performed by a provide by a <br< th=""><th></th><th></th><th>school for the first time</th><th></th><th>section may not</th><th>preventative</th><th></th><th></th><th></th></br<>			school for the first time		section may not	preventative			
PennsylvaniaCode 24P.S. 14- 1403(a)Dental exam is required suddent enters school at K/1 <sup>s</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide compliance by pompleting a dental certificate or a dentalDental exams are provide do ya this provide do ya this provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide do a dental certificate or a dentalDental exams are provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide do a dental certificate or a dentalDental exams are provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide do a dental certificate or a dentalDental exams are provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional provide compliance by provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional provide compliance by provide do ya the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the school at K/1 <sup>sd</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> actional the scho			and 7 years or younger,		result in a	care options.	The Oregon		
PennsylvaniaCode 24P.S. 14- 1403(a)Dental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide compliance by provide dural augervision.Dental exams are provide durate provide compliance by provide durated but not dental supervision.Hygienists manally by provide compliance by provide durated but not provide durated but not provid			must provide a dental		program's or				
PennsylvaniaCode 24P S. 14- 3 chool at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide compliance by provide compliance by provide compliance by provide compliance by certificate or a dentalDental exams are performed by a dental supervision.Mandated but not required.Hygienists required.Dental is reported and legislative committees to provide and legislative committees to provideDental exams are performed by a dental supervision.Mandated but not required.Hygienists required.Dental is reported and legislative committees to provide and legislative committees to provideDental form allows dentist to y%20Heat hygienists without dental supervision.http://ww w.committees to provideMandated but not required.Hygienists required.Dental is reported annually by and write notes informationDental form allows dentist to y%20Heat hyfe.http://ww w.compliance.Pennsylvania (1 403(a) (a)Dental exams are provide compliance by redental cental provide compliance by redental supervision.Mandated but not required.Hygienists will provide referral informationDental form annually by and write notes of each tooth y%20Heat h/Documhttp://ww w.compliance			certificate. Certificate must		school's				
PennsylvaniaCode 24P.S. 14- 1403(a )Dental exam is required when a student enters school at K1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide completing a dental certificate or a dentalDental exams are performed by a dentist. An in- school at k1/s, 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide completing a dental certificate or a dentalMandated but not required.Hygienists will provide required.Dental form and legislative committees to provide informationDental form and legislative committees to provide actions."Dental exams are required.Mandated but not required.Hygienists will provide referral informationDental form annually by Educational informationhttp://ww w.health. pa.gov/M w/20Healt h/School			be provided no later than		prohibiting the		submits a report		
PennsylvaniaCode 24P.S. 14- 1403(aDental exam is required with a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide compliance by completing a dental certificate or a dentalDental exams are performed by a dentist. An in- school cleaning is provide by a dentist without dental supervision.Mandated but not required.Hygienists will provide required.Dental form attion on student needs and certificate compliance.http://ww w.health. pa.gov/M y%20Heal this			120 days into the school		student from				
PennsylvaniaCode 24P.S. 14- 1403(aDental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide by a (completing a dental certificate or a dentalDental exams are provide the image of the image.Image of the image of t			year. Interesting to note		attending the				
PennsylvaniaCode 24P.S. 14- 1403(aDental exam is required when a student enters school at K/1st, 3rd, and 7thDental exams are performed by a dentist. An in- school cleaning is provide dintist. An in- school cleaning is provide dintist. An in- school at K/1st, 3rd, and 7thDental exams are performed by a dentist. An in- school cleaning is provide dintist. An in- school at K/1st, 3rd, and 7thDental exams are performed by a dentist. An in- school cleaning is provide dintist. An in- school at K/1st, 3rd, and 7thDental exams are performed by a dentist. An in- school cleaning is provide dby a hygienist without dental supervision.Mandated but not required.Hygienists will provide required.Data is reported annually by allows dentist to the pa.gov/M w.health. pa.gov/M w/%20Heal th/SchoolMandated but not required.Hygienists will provide required.Dental form annually by allows dentist to the pa.gov/M w/%20Heal th/Schoolhttp://ww w.health. pa.gov/M w/%20Heal th/SchoolPennsylvania of treatment dental supervision.Dental exams are provide different information.Mandated but not required.Hygienists will provide referral information.Dental form annually by annually by annually by dentist. An in- school cleaning is provide dot and write notesHttp://ww w.health. pa.gov/M w/%20Heal th/School %20Heal th/School %20Heal			that a vision law requiring		program or school,	1		1 1	
PennsylvaniaCode 24P.S. 14- )Dental exam is required 			a vision screening was		but may result in				
PennsylvaniaCode 24P.S. 14- 1403(a )Dental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide compliance by completing a dental certificate or a dentalDental exams are performed by a dentist. An in- school cleaning is provide compliance.Mandated but not required.Hygienists will provide required.Data is reported annually by Educational Institutions to the Pennsylvania of reatmenthttp://ww w.health. pa.gov/M y%20Heal ht/School			passed in 2013.		withholding report	1			
PennsylvaniaCode 24P.S. 14- 1403(a )Dental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide compliance by completing a dental certificate or a dentalDental exams are performed by a dentist. An in- school cleaning is provide dby a hygienist without dental supervision.Mandated but not required.Hygienists will provide required.Data is reported annually by Educational informationhttp://ww w.health. pa.gov/M y%20Heal informationPennsylvania (b)Code (completing a dental certificate or a dental)Dental exams are performed by a dentist. An in- school cleaning is provide dby a hygienist without dental supervision.Mandated but not required.Hygienists will provide required.Data is reported annually by Educational Institutions to the Pennsylvania Department ofMandated but not required.					· ·				
PennsylvaniaCode 24P.S. 14- 1403(a )Dental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> Dental exams are performed by a dentist. An in- school cleaning is provide compliance by completing a dental certificate or a dentalMandated but not required.Hygienists will provide required.Data is reported annually by Educational Institutions to the PennsylvaniaDental form allows dentist to y%20Heal th/SchoolPennsylvania (14-30)Code 24P.S.Dental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> Dental exams are performed by a dentist. An in- school cleaning is provide by a hygienist without dental supervision.Mandated but not required.Hygienists will provide required.Data is reported annually by Educational Institutions to the Pennsylvania Of treatment y620Heal th/School y620Heal th/Docum					actions."				
PennsylvaniaCode 24P.S. 14- 1403(aDental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may )Dental exams are performed by a dentist. An in- school cleaning is provide compliance by completing a dental certificate or a dentalDental exams are performed by a dentist. An in- school cleaning is provide dby a hygienist without dental supervision.Mandated but not required.Hygienists will provide required.Data is reported annually by Educational Institutions to the Pennsylvania Department of status.Dental form m whealth. pa.gov/M y%20Heal h/Docum				· · · · · ·					
PennsylvaniaCode 24P.S. 14- 1403(aDental exam is required when a student enters school at K/1 <sup>st</sup> , 3 <sup>rd</sup> , and 7 <sup>th</sup> grade. Students may provide compliance by completing a dental certificate or a dentalDental exams are performed by a dentist. An in- school cleaning is provided by a hygienist without dental supervision.Mandated but not required.Hygienists will provide required.Data is reported annually by Educational Institutions to the Pennsylvania Department ofDental form when a student enters of each tooth y%20Healt h/Docum									
PennsylvaniaCode 24P.S. 14- 1403(aDental exam is required when a student enters school at K/1st, 3rd, and 7th grade. Students may )Dental exams are performed by a dentist. An in- school cleaning is provide dby a hygienist without dental supervision.Mandated but not required.Hygienists will provide referral information.Data is reported annually by Educational Institutions to the Pennsylvania Department ofDental form allows dentist to y%20Hea Ith/School						1. 1.	4 1		
24P.S. 14- 1403(awhen a student enters school at K/1st, 3rd, and 7th 					*	t	compliance.		
24P.S. 14- 1403(awhen a student enters school at K/1st, 3rd, and 7th grade. Students may )performed by a dentist. An in- school cleaning is provide compliance by completing a dental dentalperformed by a dentist. An in- school cleaning is provide dby awill provide required.annually by Educational information.allows dentist to chart the status of each tooth and write notesw.health. pa.gov/M y%20Hea))provide compliance by completing a dental certificate or a dentalprovide dental supervision.required.will provide referral information.annually by Educational information.allows dentist to chart the status of each tooth and write notesw.health. pa.gov/M y%20Hea)provide compliance by completing a dental certificate or a dentalprovide dby a dental supervision.neuron required.multiprovide referral information.annually by Educational information.allows dentist to chart the status of each tooth Pennsylvania Department of status.w.health. pa.gov/M y%20Heal th/Docum									
24P.S. 14- 1403(awhen a student enters school at K/1st, 3rd, and 7thperformed by a dentist. An in- school cleaning is provide compliance by completing a dental certificate or a dentalperformed by a dentist. An in- school cleaning is provide dby a hygienist without dental supervision.will provide required.annually by Educational information.allows dentist to chart the status y%20Hea000<	Pennsylvania	Code	Dental exam is required	Dental exams are	Mandated but not	Hygienists	Data is reported	Dental form	http://ww
1403(a)grade. Students may provide compliance by completing a dental certificate or a dentalschool cleaning is provide dby a hygienist without dental supervision.information.Institutions to the Pennsylvania Department ofof each tooth and write notes <u>y%20Hea</u> <u>hth/School</u> <u>%20Healt</u> <u>h/Docum</u>		24P.S.	when a student enters	performed by a	required.	will provide		allows dentist to	w.health.
)provide compliance by completing a dental certificate or a dentalprovided by a hygienist without dental supervision.the Pennsylvania Department of Status.and write notes ½20Healt h/Docum		14-	school at $K/1^{st}$ , $3^{rd}$ , and $7^{th}$	dentist. An in-	1 	referral		chart the status	
	-	1403(a	grade. Students may	school cleaning is		information.			
	ť	)	provide compliance by						UNEAD-TOTAL TOTAL TOTA
	Ξ.		completing a dental	1 20		- -		of treatment	
hygiene service program.Unfunded mandate;Health. 70% ofhttp://shscs.org/ents/DentExams must be completedhowever, publicdentaldental%20form.al%20He	γ					:			
Exams must be completed however, public dental dental%20form. al%20He	⇒					1			
			Exams must be completed	however, public			dental	dental%20form.	<u>al%20He</u>

DHHS\_000279

			1 1				ndf	alth/Dent
		within one year of the stat	schools are		1	screenings are	<u>pdf</u>	al%20Hy
		of the school year.	reimbursed for			completed by	Dentel II.	giene%20
			~23% of public		:	private dentists.	Dental Hygiene	
			health dental				Service	Services
			hygienist claimed				program	<u>%20Progr</u>
			costs.		:		provides	am/LEG
							preventative	AL%20B
				and the second sec	1		dental services	ASIS.pdf
							and education.	
							http://www.heal	
							th.pa.gov/My%	
			·		1		20Health/Schoo	
							1%20Health/Do	
		• •		1			cuments/Dental	
							%20Health/Den	
							tal%20Hygiene %20Services%2	
							0Program/DRA	
							FT%20Dental% 20Hygiene%20	
							Services%20Pro	
							gram%20Guidel	
							ines.pdf	
			D (1 1	Descrite and maine	Schools	Dentist or	Form is very	http://sos.
Rhode Island	Code	Students attending any	Dentist and	Parents can waive	provide	hygienist must	brief and	ri.gov/doc
	14.0-	school in the state must	hygienist must	the requirement is already screened by	parents with	report any	identifies	uments/ar
	Rules	receive a dental screening	perform screening.	family dentist.	a list of	"suspected	recommended	chives/reg
<u> </u>	and	from grades K-5 <sup>th</sup> and at		Taminy uchust.	community	deviation from	dental treatment	docs/relea
Ϋ́	Regula	least once between grades $6^{th}$ and $10^{th}$ . Initial			dental	normal". The	for the child and	sed/pdf/D
Ŧ	tions		1		practices.	dental	provides	<u>OH/5471.</u>
က	for	screening should be conducted within six		1	This	screening	information to	$\frac{\text{off} \circ \text{iff}}{\text{pdf}}$
<b>'</b>	School Health.	months of the school start			mandate is	information is	the parent	
9	1				completed	submitted to the	including the	
DHHS_000280	Statue	date.	l				intraung no	<u> </u>
80				1	1			
-								

	16-21- 9 and 16-21- 12	The law requires each school " to employ a school dentist to provide oral health screenings and/or supervision of dental screenings".			with the assistance of community health centers.	RI Department of Oral Health website. Aggregate data is reported.	need for sealants and current infection. http://www.heal th.state.ri.us/for ms/screening/Sc hoolDental.pdf	
South Carolina	Title 44- Health Chapte r 8 Section 44-8- 10	Department of Health and Environmental Control "implements a targeted community program for dental health education, screening and treatment referral". Targets children in grades K, 3 <sup>rd</sup> , 7 <sup>TH</sup> , and 10 <sup>th</sup> or when any child first enters a SC public school. If a child is in need of preventative services, a dental hygienist is able to deliver preventative care via general supervision which has shown "100% success rate in connecting the urgent needs to care over the past 4 years. Additionally, HPS has eliminated the disparity between black and white children that have sealants in the first 5 years of its program."	Students receive a school-based screening. Screenings can be conducted by a school nurse, dentist, dental hygienist or dental assistant under supervision. Although screening is to be conducted in the school, no funding has been allocated for this program.	Not mandated and very easy for parents to sign a waiver. If a child regularly sees a family dentist, parents may submit that information in lieu of a school screening.	Parents are notified of screening results. School nurses monitor dental referrals if needed. School nurses also assist the parents in finding a medical and dental home.	Oral findings are placed in a student's file. Dental screenings are conducted as part of the state's oral health surveillance program.	BSS is conducted on students as part of the dental screening. http://www.scd hec.gov/health/ docs/Dental%20 Screening%20G uidelines%20Fi nal%2007%202 1%202008.pdf	http://ww w.llr.stat .sc.us/pc Dentistr

Utah	53A- 11-201 and 202	"Each local school board shall implement rules as prescribed by the Department of Health for vision, dental, abnormal spinal curvature, and hearing examinations of students attending the district's schools. "	Qualified health professionals perform the exam including teachers and nurses.	Waivers available to parents that feel the examination "violates their personal beliefs"	Unable to locate.	School nurses collect and compile student dental examination data.	Unable to locate.	http://le.u tah.gov/x code/Title 53A/Chap ter11/53A -11- P2.html
Virginia	22.1-270	Requires students to be immunized and receive a comprehensive physical examination before entering public kindergarten or elementary school.	A licensed physician, nurse, physician assistance may complete the form.	Waivers available to any child "whose parent shall object on religious grounds and who shows no visual evidence of sickness, provided that such parent shall state in writing that, to the best of his knowledge, such child is in good health and free from any communicable or contagious disease."	Referral is part of the dental screening section.	School nurse collects and forms can be viewed by the State Department of Health.	Dentistry is a small component of an overall health form.	https://va code.org/ 2016/22.1 /14/2/22.1 -270/

	D 1			27	Descrite		A Jamén1	http://www.
West Virginia	Policy	"New enters in West	Must be performed	No penalty for not	Parents	Dental	A dental	https://wv
	2423:	Virginia public school at	by licensed health	providing proof of	work with	examinations	screening is	de.state.w
	Health	first entry of either Pre-K	care provider. A 45-	a dental exam but	their child's	are kept as part	conducted.	v.us/polic
	Promot	or Kindergarten and all	day grace period	parents are given	school to	of a public	Form simply	ies/
	ion and	students progressing to	from the first day of	other options and	locate a	health record	identifies	
	Diseas	grades 2, 7, and 12 should	enrollment is	information to be	dental home	through West	current decay,	
	e	have on file within 45 days	allowed.	able to become	and	Virginia	previous	
	Prevent	of enrollment/entry or		compliant. The	scheduling a	Statewide	treatment, and	
	ion	prior to the first day of		state formed a Oral	dental exam	Immunization	treatment needs.	
	Title	school attendance a record		Disease Prevention	within six	Information	1	
	126	of oral health examination.		Program to provide	months of	System. Oral		
	Series	Dental is now part of a		oral assessments	the dental	health is		
	51	comprehensive physical		and preventative	exam.	supported		
	51	examination and		dental services to	CAUIII.	under		
				children without a		HealthCheck.		
		immunization requirement.						
				dental home.		The state is		
					:	working to		
						create a Dental		
					i	Data Module to	6	
						enter statewide	I	
						dental		
						examination		
					·	information.	: 1	

-

## **Martha Framsted**

From:	cshort@health.nv.gov
Sent:	Thursday, December 7, 2017 6:56 AM
	acapurro@health.nv.gov; kcausey@health.nv.gov; SLarson@health.nv.gov; aforero@health.nv.gov; sbennett@health.nv.gov
Subject:	RE: 3811 W Charleston #205

There is also a switch plate cover needed for the light socket on the wall near the front entry way into the office. There may be others that are missing as well but this is the one I noticed because the wires are completely exposed. Also, the two main thermostats in the office are old and need to be replaced. The markings on them are all worn off and you cannot see the settings. Lastly, the wood underneath the kitchen sink is water damaged and there is a hole. This was from a previous water leak that was repaired and facet was replaced earlier this year but the damage to the cabinetry was not.



## Catherina Short, CTR

Cancer Registry Specialist II Nevada Department of Health and Human Services Division of Public and Behavioral Health | Nevada Central Cancer Registry 3811 W. Charleston Blvd Suite 205 |Las Vegas, NV 89102 T: (702) 486-0799 |F: (702) 486-0490 |E: <u>cshort@health.nv.gov</u> www.dhhs.nv.gov | <u>http://dpbh.nv.gov/Programs/NCCR/Nevada Central Cancer Registry (NCCR) -Home</u> It is the mission of the Division of Public and Behavioral Health to protect, promote and improve the physical and behavioral health of the people of Nevada.

#### Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the 1 Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) or the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or crim you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

## From: Antonina Capurro Sent: Wednesday, December 6, 2017 9:48 AM To: Kimisha Causey <kcausey@health.nv.gov>; Sandra Larson <SLarson@health.nv.gov>; Cathy Short <cshort@health.nv.gov>; Adrian Forero <aforero@health.nv.gov>; Shannon Bennett <sbennett@health.nv.gov> Subject: RE: 3811 W Charleston #205

## Agreed. Good suggestions.

	Antonina Capurro, D.M.D, M.P.H, M.B.A
	Nevada State Dental Health Officer
	Nevada Department of Health and Human Services
	Division Public and Behavioral Health - Oral Health Program
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106
	T: (702) 774-2573  F: (702)774-2521  E: <u>acapurro@health.nv.gov</u>
	www.dhhs.nv.gov   www.division.website.nv.gov
	Helping People. It's who we are and what we do.
Find help	24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>
NOTICE: This mes	sage and accompanying documents are covered by the electronic Communications Privacy Act, 2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of

1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Kimisha Causey
Sent: Wednesday, December 06, 2017 8:40 AM
To: Sandra Larson; Cathy Short; Adrian Forero; Antonina Capurro; Shannon Bennett
Subject: RE: 3811 W Charleston #205

The carpet needs cleaning or replacing (all offices, cubical spaces, and general walking areas), walls need painting, ceiling tiles and light covers with water stains need to be replaced, & vent covers need to be cleaned and filters replaced. There are also areas in the ceiling that leak when it rains over the cubicles in the middle of the office.



Kimisha Causey, MPH Health Program Specialist II Nevada Department of Health and Human Services Division of Public and Behavioral Health | Office of Public Health Informatics and Epidemiology 3811 W. Charleston Blvd, Suite 205 |Las Vegas, NV 89102 T: (702) 486-3568 |F: (702) 486-0490 |E: kcausey@health.nv.gov www.dhhs.nv.gov | OPHIE online

> Helping People. It's who we are and what we do. Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Sandra Larson
Sent: Tuesday, December 05, 2017 5:05 PM
To: Cathy Short <<u>cshort@health.nv.gov</u>>; Adrian Forero <<u>aforero@health.nv.gov</u>>; Kimisha Causey
<<u>kcausey@health.nv.gov</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>>; Shannon Bennett <<u>sbennett@health.nv.gov</u>>
Subject: Fwd: 3811 W Charleston #205

Hello. As we move forward with renewal of our office lease we have opportunity to ask for any any cleaning or general problems with space that need addressed by building, #2 below. Please let me know if you have any specific concerns or items to be included in this request. Thank you!

mank you:

Sandi Larson, MPH State Epidemiologist Office of Public Health Informatics and Epidemiology Nevada Division of Public and Behavioral Health (O)702.486.0068 (F)702.486.0490

#### slarson@health.nv.gov

Happy Connecting. Sent from my Sprint Samsung Galaxy S<sup>®</sup> 5

------ Original message ------From: "Deborah L. Ohl" <<u>dlohl@health.nv.gov</u>> Date: 12/5/17 4:33 PM (GMT-08:00) To: Sandra Larson <<u>SLarson@health.nv.gov</u>> Cc: Rick Morse <<u>rmorse@health.nv.gov</u>> Subject: FW: 3811 W Charleston #205

Hi Sandi,

I am Debbie Ohl and I am working with Rick Morse with the Division leases. I am reviewing your space request and space justification.

I have these questions:

- 1. What is the billing address for invoices?
- 2. Have you requested or discussed with Sophia any maintenance items, ie, painting, carpeting or do you know of any cleaning problems or general problems with the location that needs to be negotiated by leasing services in the lease? This is the time to have leasing services help correct anything that needs attention.
- 3. Are there funds available to cover the rent? The Funds available box was left unchecked.
- 4. On the space justification page, under secure areas, it is identified that there is a need for additional storage space for marketing materials. Do you have suggestions of how to accomplish this or is this a tenant improvement requiring something remodeled?

That's all I have.

Thank you for your help.

Debbie Ohl Program Officer II Nevada Department of Health and Human Services Division of Public and Behavioral Health | Admin Services Direct Line: (775) 684-5915 <u>dlohl@health.nv.gov</u>

From: Rick Morse Sent: Tuesday, December 5, 2017 3:29 PM To: Deborah L. Ohl <<u>dlohl@health.nv.gov</u>> Subject: FW: 3811 W Charleston #205

## Division of Public and Behavioral Health | Admin Services Direct Line: (775) 684-5932

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an age are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this info administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Sandra Larson
Sent: Tuesday, December 05, 2017 12:40 PM
To: Debbie Ohl <<u>d-ohl@nvdetr.org</u>>; Rick Morse <<u>rmorse@health.nv.gov</u>>
Cc: Brian Parrish <<u>bparrish@health.nv.gov</u>>; Shannon Bennett <<u>sbennett@health.nv.gov</u>>; Julia Peek
<<u>ipeek@health.nv.gov</u>>
Subject: RE: 3811 W Charleston #205

Hello Debbie and Rick-

Please find the attached Space Request for the Las Vegas staff. In this space is 3219/3153/3216/3123/3220 staff. I had not added the budget analyst contact information as I was not sure given the split of budget who that person would be. Please let me know and I am happy to update any of the excel workbook.

Thank you! -Sandi

#### Sandi Larson, MPH State Epidemiologst Nevada Department of Heal

State Epidemiologst Nevada Department of Health and Human Services Division of Public and Behavioral Health 3811 W. Charleston Blvd, Suite 205 |Las Vegas, Nevada 89102 T: (702) 486-0068 |C: (702) 904-3923 |E: <u>slarson@health.nv.gov</u> www.dhhs.nv.gov | www.dbph.nv.gov

It is the mission of the Division of Public and Behavioral Health to protect, promote and impr

## **Martha Framsted**

From: Sent:	acapurro@health.nv.gov Thursday, December 21, 2017 11:21 AM		
То:	SLarson@health.nv.gov		
Subject:	RE: Space Request, Change of Square footage: 3219, Las Vegas	, NV	

## Thank you.

Antonina Capurro, D.M.D, M.P.H, M.B.A	
Nevada State Dental Health Officer	
Nevada Department of Health and Human Services	
 Division Public and Behavioral Health - Oral Health Program	
1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106	
T: (702) 774-2573  F: (702)774-2521  E: <u>acapurro@health.nv.gov</u>	
 www.dhhs.nv.gov  www.division.website.nv.gov	
Helping People. It's who we are and what we do.	
Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org	
<b>NOTICE:</b> This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination,	
 copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.	

From: Sandra Larson

Sent: Thursday, December 21, 2017 9:28 AM To: Antonina Capurro; Julia Peek; Brian Parrish; Christine Pool Subject: FW: Space Request, Change of Square footage: 3219, Las Vegas, NV

Good morning-

I do not want you all to be blindsided by this. When we sign the new lease in March/April for our space there will be a cost increase as a result fo an additional 300 sq ft that was originally missed. Your ASOs will be contacted about ensuring that you have funds to cover this but wanted the programs to be aware. Thank you!

From: Deborah L. Ohl
Sent: Wednesday, December 20, 2017 4:32 PM
To: Philene O'Keefe <<u>pokeefe@health.nv.gov</u>>
Cc: Contract Unit <<u>contractunit@health.nv.gov</u>>
Subject: Space Request, Change of Square footage: 3219, Las Vegas, NV

Hi Philene,

I left the space request/pre approval for 3811 W Charleston #205, Las Vegas, NV, negotiation on your desk because I didn't bring to your attention the square footage has increased 298 square feet for a new total of 2,658.

The leased office space at 3811 W Charleston #205, Las Vegas, NV has been identified incorrect. The Lessor has measured our space. Per Patrick Smorra with Leasing Services we have 2,698 square feet of space. However we have only been paying for 2,400 square feet.

Please let me know the funding is ok. Please check the yes line on page 2 of the space request agency pre approval, initial and return to Christina Hadwick.

Thank you for your help.



Debbie Ohl Program Officer II | Division Lease Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health / Admin Services 4150 Technology Way, Suis 300 | Carson City, NV 89706 T: (775) 684-5915 [E: dlohi@health.mtgov www.dhhs.nv.gov / http://dobh.nv.gov

Helping People. It's who we are and what we do. Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. § 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prolabiled. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by civilit, and delete the message.

From:	acapurro@health.nv.gov
Sent:	Thursday, February 8, 2018 8:57 AM
To:	jbonk@health.nv.gov
Subject:	<b>RE: School Health Integration</b>

Good Morning,

That's great. I will look forward to hearing more from Rose in the future.

I did want to ask you about how we might incorporate community health workers into our grant. Would you have any time today or tomorrow to discuss the type of support and collaboration that might be possible? Below is a little more information about our project.

Best regards, Antonina

#### ENHANCING ORAL HEALTH WORKFORCE ACTIVITIES TO INCREASE ACCESS TO CARE FOR POPULATIONS LIVING IN DENTAL HPSAs IN NEVADA

**PURPOSE:** Increase availability of sustainable oral health services for populations living in Dental Professional Shortage Areas (DPSAs) through workforce development.

# GOAL 1 Expand service delivery infrastructure to increase the availability of oral health services through the use of a unique and underutilized member of the dental workforce.

- 1. Engage dental hygienists with a public health endorsement(PHEDH) as a unique and underutilized member of the dental workforce to staff a school-based dental sealant program, and provide other preventive services to adults, seniors, vulnerable, and at-risk patients in identified DPSAs.
- 2. Mobilize the dental community practicing in or near DPSAs by creating a statewide program for dental providers—Oral Health Champions (OHC). Two tracks exist within OHC.

# GOAL 2 Expand community based prevention services to oversee and advocate for the health of citizens in Nevada's frontier counties.

1. Coordinate with local educational agencies to foster promotion of the dental profession and community health workers.

GOAL 3 Increase access to oral health services through preservation of oral health leadership within Nevada's Medicaid program.

1. With support from the Division of Healthcare Financing and Policy, this individual would expand the Medicaid provider network for those in DHPSAs by streamlining the enrollment system, continuing education online and in-person presentations, and by strengthening the lines of communication between the Medicaid fee-for-service system present in rural Nevada and dental offices.

# GOAL 4 <u>Develop and implement appropriate evaluation components to measure and assess the effectiveness</u> of the grant.

	Antonina Capurro, D.M.D, M.P.H, M.B.A						
	Nevada State Dental Health Officer						
	Nevada Department of Health and Human Services						
	Division Public and Behavioral Health - Oral Health Program						
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106						
	T: (702) 774-2573  F: (702)774-2521  E: <u>acapurro@health.nv.gov</u>						
	www.dhhs.nv.gov  www.division.website.nv.gov						
	Ŭ '						
	Helping People. It's who we are and what we do.						
Find help 2	4/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>						
18 U.S.C. §§ 2510-25 1996 and may conta individual(s) only. If	uge and accompanying documents are covered by the electronic Communications Privacy Act, 21, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of in confidential information or Protected Health Information intended for the specified you are not the intended recipient or an agent responsible for delivering it to the intended by notified that you have received this document in error and that any review, dissemination,	an a					
copying, or the taking	of any action based on the contents of this information is strictly prohibited. Violations may e, civil, or criminal penalties. If you have received this communication in error, please notify						

From: Jennifer Bonk Sent: Thursday, February 08, 2018 8:24 AM To: Antonina Capurro; Rose Sutherland Subject: RE: School Health Integration

Dr. Capurro, it was great for us to meet you and discuss the School Health grant. Rose will keep you updated on its status.



#### Jenni Bonk, M.S.

Chronic Disease Prevention & Health Promotion Section Manager Nevada Department of Health and Human Services Division of Public & Behavioral Health | CDPHP 4150 Technology Way | Carson City, NV 89706 T: (775) 684-5914 | C: (775) 291-7207 | E: jbonk@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.



Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Antonina Capurro Sent: Tuesday, February 06, 2018 10:45 AM To: Rose Sutherland <<u>rosutherland@health.nv.gov</u>>; Jennifer Bonk <<u>jbonk@health.nv.gov</u>> Subject: RE: School Health Integration

#### Good Morning,

Hope you both are doing well. It was so nice to meet you in person and learn more about the CDC grant application you are creating. There were so many insightful projects that were included in your draft. It was fantastic to learn that oral health might be a component of your grant activities. During our discussion, I mentioned two electronic health record systems that I believe are used by community health nurses. The system names are Avatar and Insight.

Feel free to reach out to me if the Oral Health Program can be of any assistance. Best regards,

· · · ·	Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov www.dhhs.nv.gov  www.division.website.nv.gov
Find help 2	Helping People. It's who we are and what we do. 4/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>
18 U.S.C. §§ 2510-25 1996 and may conta individual(s) only. If recipient, you are here copying, or the taking result in administrativ	age and accompanying documents are covered by the electronic Communications Privacy Act, 21, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of in confidential information or Protected Health Information intended for the specified you are not the intended recipient or an agent responsible for delivering it to the intended by notified that you have received this document in error and that any review, dissemination, of any action based on the contents of this information is strictly prohibited. Violations may e, civil, or criminal penalties. If you have received this communication in error, please notify y e-mail, and delete the message.

From: Rose Sutherland Sent: Wednesday, January 17, 2018 3:13 PM To: Antonina Capurro Subject: Re: School Health Integration

We will meet in room 204. It is located on the second floor, turn left off the elevator and another left and you will see it.

Thank you, Rose On Jan 8, 2018, at 4:47 PM, Antonina Capurro <a>acapurro@health.nv.gov</a>> wrote:

Good Afternoon,

I would be very interested to collaborate with you and the team working to improve the health of Nevada's students. What types of health initiatives are you currently implementing?

It would be very helpful to learn more about your goals and the best way to align our objectives. I will be in Carson City next Wednesday( the 17<sup>th</sup>) for a morning meeting. Would you perhaps be available for an afternoon meeting?

Also, at the Dec. School Based Health Service meeting, I spoke about our vision to implement a health assessment before school entrance policy. Background information regarding that topic is attached.

I look forward to	he	ari	ng fr	om	you	ι.
Best regards,						
Antonina						

	Antonina Capurro, D.M.D, M.P.H, M.B.A						
	Nevada State Dental Health Officer						
an a	Nevada Department of Health and Human Services						
-	Division Public and Behavioral Health - Oral Health Program						
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106						
	T: (702) 774-2573  F: (702)774-2521  E: <u>acaputro@health.nv.gov</u>						
	www.dhhs.nv.gov www.division.website.nv.gov						
	Helping People. It's who we are and what we do.						
Find he	p 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>						
18 U.S.C. §§ 251	nessage and accompanying documents are covered by the electronic Communications Privacy Act, 0-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of						
individual(s) only recipient, you are	1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, conving or the taking of any action based on the contents of this information is strictly prohibited. Violations may						

result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify

From: Rose Sutherland Sent: Tuesday, December 12, 2017 2:43 PM To: Antonina Capurro Cc: Tara Madden-Dent; Christy McGill; Laura Urban Subject: School Health Integration

sender immediately by e-mail, and delete the message.

Good afternoon Dr. Capurro,

I wanted to introduce myself. I am the School Health Program Coordinator with the Nevada Division of Public and Behavioral Health.

I am currently working with Christy McGill and Tara Madden-Dent from the Nevada Department of Education, Office for a Safe and Respectful Learning Environment on integrating student health initiatives through a new grant.

Eddie Ableser recommended you to join our collaborative efforts to explore paralleling goals and resources.

Therefore, I would like to invite you to our future grant meetings via phone. We can have a brief intro call soon if that works for you?

#### Thank you,

#### **Rose Sutherland**

<image005.jpg>

School Health Program Coordinator Chronic Disease Prevention & Health Promotion Nevada Department of Health and Human Services Division of Public & Behavioral Health | CDPHP 400 W. King St, Suite 300 | Carson City, NV 89703 T: (775) 684-4238 | C: (775) 220-2340 | E: rosutherland@health.nv.gov www.dhhs.nv.gov | www.nevadawellness.org

<image006.jpg>

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only: If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

<Health Exam for School Entrance (1).pdf>

<Memo for Health Assessment Before School Entrance OHP.pdf>

<Notice of Proposed Regulatory Action.pdf>

<Proposal Policy.pdf>

<State.Reviews .pdf>

From:	kcausey@health.nv.gov
Sent:	Tuesday, April 17, 2018 11:26 AM
То:	aforero@health.nv.gov; acapurro@health.nv.gov; cshort@health.nv.gov; cnjoku@health.nv.gov; dcubit@health.nv.gov; ngrandt@health.nv.gov;
	SLarson@health.nv.gov
Subject:	FW: Attention Tenants: Upcoming Parking Lot Restrictions
Attachments:	Parking Lot Restrictions 4.19.18.pdf

From: Alicia Luz [mailto:alicia.luz@cushwake.com]
Sent: Tuesday, April 17, 2018 11:22 AM
To: Cheryl McVay <cheryl.mcvay@cushwake.com>
Cc: Alicia.Luz@cushwake.com
Subject: Attention Tenants: Upcoming Parking Lot Restrictions

Good morning tenants of Charleston Valley View,

On the afternoon of April 19<sup>th</sup> starting at around 4:30 pm, the parking lot area on the north side of the 3811 W. Charleston bldg.., and the parking garage will be coned off for a construction dumpster. Please see the attached map for a more detailed location. This will affect about 16 parking spaces. Please alert your employees parking will not be accessible in this area.

The dumpster will be dropped off on Friday the 20<sup>th</sup> in the early morning hours and should be removed no later than Tuesday April 24<sup>th</sup>.

Printed notices will be posted around property by the end of today.

We appreciate your cooperation. If you have any questions please don't hesitate to contact our office.

Thank you, Alicia Luz Assistant Property Manager

Alicia Luz Assistant Property Manager

Direct: +1 702 688 6868 Main: +1 702 796 7900 Fax: +1 702 796 7920 Alicia.Luz@cushwake.com

6725 Via Austi Pkwy, Suite 275 Las Vegas, NV 89119 | USA http://www.cushmanwakefield.com/

# DHHS\_000295

This email (including any attachments) is confidential and intended for the named recipient(s) only. It may be subject to legal or other professional privilege and contain copyright material.

Any confidentiality or privilege is not waived or lost because this email has been sent to you by mistake.

Access to this email or its attachments by anyone else is unauthorised. If you are not the intended recipient, you may not disclose, copy or distribute this email or its attachments, nor take or

omit to take any action in reliance on it. If you have received this email in error, please notify the sender immediately, delete it from your system and destroy any copies.

We accept no liability for any loss or damage caused by this email or its attachments due to viruses, interference, interception, corruption or unauthorised access.

Any views or opinions presented in this email or its attachments are solely those of the author and do not necessarily represent those of the company.

From:	acapurro@health.nv.gov
Sent:	Tuesday, April 24, 2018 9:15 AM
То:	Christina.Demopoulos@sdm.unlv.edu
Cc:	Judith.Skelton@sdm.unlv.edu
Subject:	RE: School Sealant Information for CDC Grant

I am adding equipment and maintenance as part of our grant application, and it will be available to Seal Nevada South to expand school sealant programs.

A letter of recommendation from UNLV SDM would help strengthen our application. Would you be willing to write a letter of support for our CDC application to support the school sealant requirement? I am planning to submit our application next Wednesday.

Below is more specific information about our focus of the grant. Please let me know if additional information is needed. Thank you,

Antonina

#### **Application Purpose:**

The purpose of this program is to build the administrative capacity of the Nevada Oral Health Program and in so doing establish a strong foundation for the delivery of oral health preventative programs throughout the state. This program will have three foci: 1) expand school sealant programs thorough the state through established partnerships with school sealant organizations, 2) support water systems that maintain optimal fluoridation levels and increase education and public support for expansion of water fluoridation, and 3) develop a state oral health surveillance plan, collect oral health data, and report annual finding through a written report.

Throughout the life of the project, the Oral Health Program will also establish advisory committees where appropriate to assist in the development of written plans of action, provide accountability, and evaluate program performance.

Letter of Support should be addressed to: Ms. Marcia Parker Department of Health and Human Services Centers for Disease Control and Prevention 4770 Buford Hwy, NE, MS F-80 RE: CDC-RFA-DP18-1810

sender immediately by e-mail, and delete the message.

	Antonina Capurro, D.M.D, M.P.H, M.B.A							
Nevada State Dental Health Officer								
	Nevada Department of Health and Human Services							
	Division Public and Behavioral Health - Oral Health Program							
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106							
	T: (702) 774-2573  F: (702)774-2521  E: <u>acaputro@health.nv.gov</u>							
	www.dhhs.nv.gov www.division.website.nv.gov							
	Helping People. It's who we are and what we do.							
Find help 2	Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org							
<b>NOTICE:</b> This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination,								
copying, or the taking	of any action based on the contents of this information is strictly prohibited. Violations may							

result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify

# DHHS\_000297

**From:** Demopoulos, Christina [mailto:Christina.Demopoulos@sdm.unlv.edu] **Sent:** Friday, April 20, 2018 10:04 AM **To:** Antonina Capurro **Subject:** RE: School Sealant Information for CDC Grant

#### Hi,

Sorry, I have been at the NOHC and am still catching up on emails. We can support the hygiene salary if CDC funding was available for equipment and/or supplies.

#### Christina

From: Antonina Capurro [acapurro@health.nv.gov]
Sent: Thursday, April 12, 2018 2:41 PM
To: Brandi Dupont; 'Bdupont@chanevada.org?'; Demopoulos, Christina; Demopoulos, Christina; 'futuresmiles@centurylink.net'; Demopoulos, Christina; <u>roots@healthycomm.org</u>; <u>pjstraley@gmail.com</u>
Cc: <u>dkoester@chanevada.org</u>; Alicia Valle
Subject: RE: School Sealant Information for CDC Grant

Good Afternoon,

The CDC released FAQs for CDC-RFA-DP18-1810 which specifies that the grant will not provide funding for direct services. However, a required objective of the grant is to increase the number of school based sealant programs. The project officer for this grant informs us that under this funding opportunity, we would be able to purchase equipment and supplies as well as to pay for a sealant coordinator. However, the grant will not support dental hygiene salaries or their associated travel.

Would your program be able to support dental hygiene salaries if the grant provided your organization with equipment and supplies? To meet the objectives of the grant, we need build at least 5 eligible( >50% FRL)school based sealant programs.

Your feedback on this matter would be greatly appreciated. Best regards,

	Antonina Capurro, D.M.D, M.P.H, M.B.A							
	Nevada State Dental Health Officer							
	Nevada Department of Health and Human Services							
	Division Public and Behavioral Health - Oral Health Program							
	1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106							
	T: (702) 774-2573   F: (702)774-2521   E: <u>acapurro@health.nv.gov</u>							
	www.dhhs.nv.gov www.division.website.nv.gov							
	Helping People. It's who we are and what we do.							
Find help 2	Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>							
NOTICE: This messa	ge and accompanying documents are covered by the electronic Communications Privacy Act,							
18 U.S.C. §§ 2510-25	21, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of							
1996 and may contain confidential information or Protected Health Information intended for the specified								
individual(s) only. If	you are not the intended recipient or an agent responsible for delivering it to the intended							
recipient, you are here	by notified that you have received this document in error and that any review, dissemination,							
copying, or the taking	of any action based on the contents of this information is strictly prohibited. Violations may							

result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify

From: Antonina Capurro [mailto:acapurro@health.nv.gov] Sent: Thursday, April 5, 2018 9:43 AM

sender immediately by e-mail, and delete the message.

To: Brandi Dupont <<u>BDupont@chanevada.org</u>> Subject: FW: School Sealant Information for CDC Grant

sender immediately by e-mail, and delete the message.

From: Antonina Capurro
Sent: Thursday, April 05, 2018 9:41 AM
To: 'Bdupont@chanevada.org'; 'Christina Demopoulos'; Demopoulos, Christina; 'Terri Chandler'; 'futuresmiles@centurylink.net'
Cc: 'AValle@chanevada.org'; 'dkoester@chanevada.org'
Subject: School Sealant Information for CDC Grant

Good Morning,

Hope you all are doing well. I am currently in the middle of an application for CDC 18-1810, State Actions to Improve Oral-Health-Outcomes. A key component of the grant is expansion of school sealant programs.

From the information you provided as part of the Nassir Report for SFY 17, Community Health Alliance served 24 schools, Seal Nevada South served 16, and Future Smiles served 49. At your earliest convenience would you please send me a list of the schools that you are serving? Part of the application involves identifying potential school sealant locations. Also, for your organization what would be the cost associated with adding an additional school to your roster?

Any information that you might be able to provide would be greatly appreciated. Best regards,

	Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov www.dhhs.nv.gov  www.division.website.nv.gov Helping People. It's who we are and what we do.
Find help 2	4/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>
18 U.S.C. §§ 2510-25 1996 and may conta individual(s) only. If recipient, you are here copying, or the taking	ge and accompanying documents are covered by the electronic Communications Privacy Act, 21, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of in confidential information or Protected Health Information intended for the specified you are not the intended recipient or an agent responsible for delivering it to the intended by notified that you have received this document in error and that any review, dissemination, of any action based on the contents of this information is strictly prohibited. Violations may e, civil, or criminal penalties. If you have received this communication in error, please notify

The information contained in this transmission may contain privileged and confidential information, including patient information protected by federal and state privacy laws. It is intended only for the use of the person(s) named above. If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution, or duplication of this communication is strictly prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

From: Sent: To: Subject: Attachments: dcubit@health.nv.gov Tuesday, June 12, 2018 9:48 AM acapurro@health.nv.gov Nevada Licensed Child Care Facilities 20180612094841030.pdf

Good Morning,

Attached is the list of Nevada Licensed Child Care Facilities, as of February 2018. If you have any questions, please feel free to let me know.

Respectfully,

Danielle Cubit Oral Health Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health - Oral Health Program 3811 W. Charleston Blvd., Ste 205 | Las Vegas, NV 89102 T: (702) 486-0484 |E: dcubit@health.nv.gov www.dhhs.nv.gov | www.dpbh.nv.gov

-----Original Message-----From: noreply@health.nv.gov <noreply@health.nv.gov> Sent: Tuesday, June 12, 2018 9:49 AM To: Danielle Cubit <dcubit@health.nv.gov> Subject: OPHIE Scanned Document

This E-mail was sent from "LVOPHIEMFP001" (MP C401SR).

Scan Date: 06.12.2018 09:48:40 (-0700) Queries to: noreply@health.nv.gov

	na ya muunyaky ba tamana tara tara-			-								g nyang pyanononon ny na dani katila di Mili Pyani kati			nagan f an ann an an de chair tha tha 1900 1900 a g tha 2000 th	Y Man Anna an A			annen en
DPBH-CHII COUNTY/CII			NG PRO		RE FACI	LITIES		MONT	HLY RE			Feb-18 SED CAP	ACITY					, '. 1	
State Province of the second se	Family		Center	III Care		Accommo- dation	On-Site Center	Special Events	Total	F	Family	Group	Center	III Care	Institu- tion	Accommo- dation	On-Site Center	Special Events	Total
CARSON CIT Carson City	1	2	16	0	0	0	. 0	0	19		6	24	831	0	0	0	0	0	861
CHURCHILI Fallon	1	3	5	0	0	0	: • • 0	0	9		6	36	217	0	0	0	0.	0	259
CLARK Boulder City Henderson	0	1 4	5	0	0	0 6	0	0	6 59		0 48	12 48	197 5208	0	0	0 498	0	0	209 5802
Las Vegas	63	11	166	0	1	22	2	0	265		378	132	20251	0	90 0	1686 25	129 0	0	22666 37
Laughlin No. Las Vegas	0	13	0	0	0	1 5	0	0	2 32		0 60	12 36	0 2136	0	0	415	0	0	2647
Mesquite DOUGLAS	0	0	2	0	0	0	0	0	2	$\square$	0	0	189	0	0	0	0	0	189
Minden Gardnerville	2	0 0	3 5	0 0	0	0 0	· 0 0 ·	0	5		12 6	0	234 473	0 0	0 0	0	0	0	246 479
Stateline ELKO	0	0	3	0	0	0	0	0	3	$\left  \cdot \right $	0	0	101	0	0	0	0	0	101
Carlin Elko	0	0 0	1 7	0	0	0 0	0 0	0 0	1 7		0	0	18 444	0	0	0	0	0	18 444
Jackpot Ruby Valley	0	0	0	0	0	0	0	0	0		0 0	0	0	0 0	0	0	0	0	0
Spring Creek	0	3	1	0	i o	0	0	0	4		0	36	91	0	0	0	0	0	127
Wells	0	0	2	0	0	0	0	0	2		0 0	0	70 0	0	0	0	0	0	70 0
Wendover ESMERALDA		0	0	0	0	0	0	0	0		0	0	0	Ő	0	0	0	0	0
EUREKA	0	0	0	• 0	: 0	0	0	0	0		0	0	0	0	0	0	0	0	0
HUMBOLDT Winnemucca LANDER	0	2	3	0	0	0	0	0	5		0	24	194	0	0	0	0	0	218
Battle Mountain	<u>1 0</u>	1	2	0	0	0	: o	0	: 3		0	12	60	0	0	0	0	0	72
LINCOLN Pioche	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0
LYON	2	: 0	2	0	0	0	0	0	4		12	0	162	0	0	0	0	0	174
Dayton Fernley	2 4	0	2	0	0	0	ŏ	0	. 7		24	ŏ	247	ŏ	Ŏ	0	0	0	271
Smith	0	0	1	0	0	0	0	0	1		0	0	18	0	0	0	0	0	18 66
Yerington MINERAL	0	2	1	0	0	0	0	0	3		0	24	42	0	0	0	0	0	00
Hawthorne	1	0	0	0	0	0	0	0	1		6	0	0	0	0	0	0	0	6
NYE Beatty/Amargos		0	0	0	1	0	0	0	1		0	0	0	0	228 0	0	0	0	228 139
Pahrump Round Mountai	0 n 0	2	2	0	0	0	1	0	4		0	24	115 0	0	0	0	112	0	112
Tonopah	0	0	0	0	0	0	0	<u> </u>	i o		Ő	Ő	ō	0	0	0	0 -	0	0
PERSHING Lovelock Grass Valley	0	0	1	0	: 0	0	0	0	1		0	0	54 0	0	0	0	0	0	54 0
STOREY					:				1							0	0	0	0
Virginia City WASHOE	0	: 0	0	0	0	0	0	0	0 10		0	0	0 295	0	0 98	0	0	0	393
Reno/Sparks WHITE PINE	0	0	6	U	4	<u> </u>			10	17.77.4 20.86 20.85 20.85		<b>.</b>					-		
Ely McGill	0	0 0	3	0	0	0	0	0	3 0		0	0	140 0	0 0	0	0	0	0	140 0
TOTALS	93	35	295	0	6	34	3	0	466		558	420	31787	0	416	2624	241	0	36046
-																			Appendiate the second se
1 1.																			
				1															

DHHS\_000301

From:	Mary Foley <mfoley@medicaiddental.org></mfoley@medicaiddental.org>
Sent:	Tuesday, June 19, 2018 8:05 AM
То:	Antonina Capurro
Cc:	Marty Dellapenna; Mary Foley
Subject:	CEU Certificate
Attachments:	Capurro_2018 CEU CERTIFICATION OF PARTICIPATION.docx; PastedGraphic-1.tiff

Dear Antonina,

Thank you for completing the 2018 MSDA Symposium evaluation. Attached is your CEU certificate.

We hope you found value with this year's meeting and will plan to attend next year.

Sincerely,

Mary

Mary E. Foley, MPH

Executive Director Medicaid|Medicare|Services Dental Association

Washington DC Office 4411 Connecticut Ave NW Suite 401 Washington DC 20008

Massachusetts Office 2 Grove Street Sandwich, MA 02563

Phone: 508-322-0557 Website: <u>www.medicaiddental.org</u>

MSDA is a national membership non-profit corporation, organized under the California Secretary of State in 2004 as a 501 c3. MSDA represents all State Medicaid and CHIP dental programs, directors and staff, as well as individuals and groups from across the nation that aim to improve the oral health of all Medicaid, Medicare, and CHIP beneficiaries.

DHHS 000302

# ADA American Dental Association<sup>®</sup>

211 East Chicago Avenue Chicago, Illinois 60611 1 312.440.2500 F 312.440.7494 www.ada.org



## CONTINUING EDUCATION VERIFICATION OF PARTICIPATION

Date Issued:

June 19<sup>th</sup>, 2018

Participant Name:

Antonina Capurro, D.M.D, M.P.H, M.B.A 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

Participant Address:

Event/Activity Title: Demonstrating Value in Medicaid Dental Programs

Activity Location:

Washington Marriott Wardman Park 2660 Woodley Road Washington DC 20008

Session Title	Date	<u>Hours</u>	Instructors	Activity Type	CE Credits
Keynote: Valuing Healthcare	June 4 <sup>th</sup> , 2018	1	Todd	Lecture	1.0
1. Creating a Value-Based Proposition 2. Framing a Value-Based Program	June 4 <sup>th</sup> , 2018 June 4 <sup>th</sup> , 2018	· 1 1	Chandler Jackson, Miller, Zwetchkenbaum, Jones	Lecture Lecture	1.0 1.0
3. Increasing Efficiency-Administration	June 4 <sup>th</sup> , 2018	1.25	Exler, Urbach, Martinez	Lecture	1.25
4. Increasing Efficiency-Service Delivery	June 4 <sup>th</sup> , 2018	1.50	Maytan, Meeske, Weitzner, Shih	Lecture	1.50
5. Applying Policy Levers	June 5 <sup>th</sup> , 2018	1.75	Doherty, Errante, Hammer	Lecture	1.75
6. Meeting the Mark	June 5 <sup>th</sup> , 2018	2.0	Aravamudhan, Skenandore, Oreffice	Lecture	2.0
7. Clinical Perspectives-Evidence Update	June 5 <sup>th</sup> , 2018	1.0	Milgrom, Sadr	Lecture	1.0
8. Town Hall- Policy Discussion June 5th,	2018 1.0	Snyder		Panel-Discussion	1.0

Total Credits: 11.50

This confirms that the individual designated above has met all the requirements of the above course(s) for awarding applicable continuing education credit. Participants should retain this document for their records.

James S. Goodman VP, Conferences and Continuing Education American Dental Association

#### ADA C·E·R·P<sup>®</sup> Continuing Education Recognition Program

This continuing education activity has been planned and implemented in accordance with the standards of the ADA Continuing Education Recognition Program (ADA CERP) through joint efforts between the American Dental Association and the Medicaid-Medicare-CHIP Services Dental Association.

The American Dental Association is an ADA CERP recognized provider.

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.

From:acapurro@health.nv.govSent:Friday, June 29, 2018 3:25 PMTo:judwhite@health.nv.govSubject:PlanAttachments:FY19 OHP Strategic Plan (1).docx

This is rough but good enough for review. When you have a moment, please let me know your thoughts on what other activities we can reasonable accomplish in the next three months. Thanks.

Hope you are having a great week, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

# Division of Public and Behavioral Health, Nevada Oral Health Program

#### <u>Mission</u>

The mission of the Nevada Oral Health Program is to protect, promote, and improve the oral health of the people of Nevada. The Oral Health Program and its partners collaborate to promote optimal oral health for Nevadans across the lifespan.

#### **Priority Areas**

Access to Care, Collaborative Partnerships. Medicaid Dental Benefits, Oral Health Promotion, Data Acquisition, Dental Education, and Oral Health Workforce

#### <u>Vision</u>

Our vision is a healthy Nevada, where all people experience the benefits of oral health intrinsically linked to overall health. Our vision is to remove barriers to a patient's ability to maintain oral health regardless of the patient's location, age, or financial status.

#### **Strategic Goals**

1. Data Acquisition: Assess and track disease rates and improvements in oral health to determine the oral health needs of the residents of Nevada.

2. Dental Education: Increase public and health care provider's knowledge and raise awareness of the importance of oral health and on matters relating to oral health.

3. Collaborative Partnerships and Community Outreach: Promote and improve access to high-quality dental care and oral disease prevention services.

4. Strengthen organizational infrastructure and capacity: Explore sustainability-including writing grants, private funding opportunities, and creating business models.

5. Evaluation of program activities through public transparency and reporting to the Advisory Committee on the State Program for Oral Health.

### **Defining Goals, Strategies and Activities**

Goal1: Data Acquisition and dissemination

**Strategy 1**: With Healthy People 2020 as a guide, assess and track disease rates and improvements in oral health to determine the oral health needs of the residents of Nevada.

#### Activities:

- Design an oral health surveillance plan that extends beyond a core set of surveillance indicators (BRFSS, NPCR, CMS-416, NSCH) and will include additional indicators from among populations of interest such as an older adult BSS or a rural oral health survey.
- Coordinate and oversee open-mouth Basic Screening Surveillance projects for the elderly, third graders, special needs populations.
- Create quarterly reports, data briefs, and fact sheets that track the Program's progress towards Healthy People 2020 goals.
- House oral health reports and data on the OHP website
- Complete yearly reports as follows:
  - Annual DHHS Fact Book
  - Quarterly and annual MCAH reports
  - Annual ASTDD synopsis

DHHS\_000305

- o Annual Nassir (Sealant) report
- Monthly CDC water fluoridation data reporting and quarterly report into WFRS
- Yearly dental workforce survey

Goal 2: Improve Dental Education and Clinical Service Delivery (Medicaid)

**Strategy 2:** Increase public and health care provider's knowledge and raise awareness of the importance of oral health and on matters relating to oral health.

## Activities:

- Disseminate 'best practices' that improve oral health service, public health science, and improve patient outcomes ie. BSS training, CEs on silver diamine fluoride, CEs that bring both medical and dental professionals together
- Prepare educational materials for other departments (e.g., psychiatric case workers) to distribute (e.g., older adults, quit cards, community health nurses) on dental intervention.
- Education of the public, health care providers, and Medicaid parties through policy briefs, white papers, webinars and workshops (Medicaid). Consider older adults, diabetes and perio patients.
- Create educational materials for school nurses ie. emergency dental procedures for dental injuries
- Create removable partial patient education forms for DHCFP to distribute
- Work with Liberty Dental to review and update provider handbook

## Goal 3: Collaborative Partnerships and Community Outreach

**Strategy 3:** Promote and improve access to high-quality dental care and oral disease prevention services through collaboration with the Division of Health Care Financing and Policy to promote utilization of Medicaid and Nevada Check Up covered services and through partnership with other state agencies, local governments, county health departments, and community-based programs.

### Activities:

- Work with DHCFP to improve provider relations through timely education and communication on current issues
- Build a culture of dental volunteerism in this state (providers)—Need help from the administration (RAM events)
- Build fluoride varnish policy into medical EPSDT
- Support budding dental clinic at SNHD
- Work with Washoe Health District to support oral health efforts and educational outreach
- Work with Assemblywoman Neal as dental services bill is crafted
- Revise MOU with Bureau of Safe Drinking Water, Nevada Division of Environmental Protection

Goal 4: Strengthen organizational infrastructure and capacity

**Strategy 4:** Explore sustainability-including writing grants, private funding opportunities, and creating business models. Also, identify methods to build the infrastructure of the program through partnerships with other departments.

# Activities:

- When we run into a health problem/hazard, work with relevant departments as consultants to change the policies, contract, etc.
- Build business model for dental services and oral health education within licensed childcare centers
   DHHS 000306

- Explore oral health license plate proposal
- Apply for grants as applicable

**Goal 5:** Evaluation of program activities through public transparency and reporting to the Advisory Committee on the State Program for Oral Health

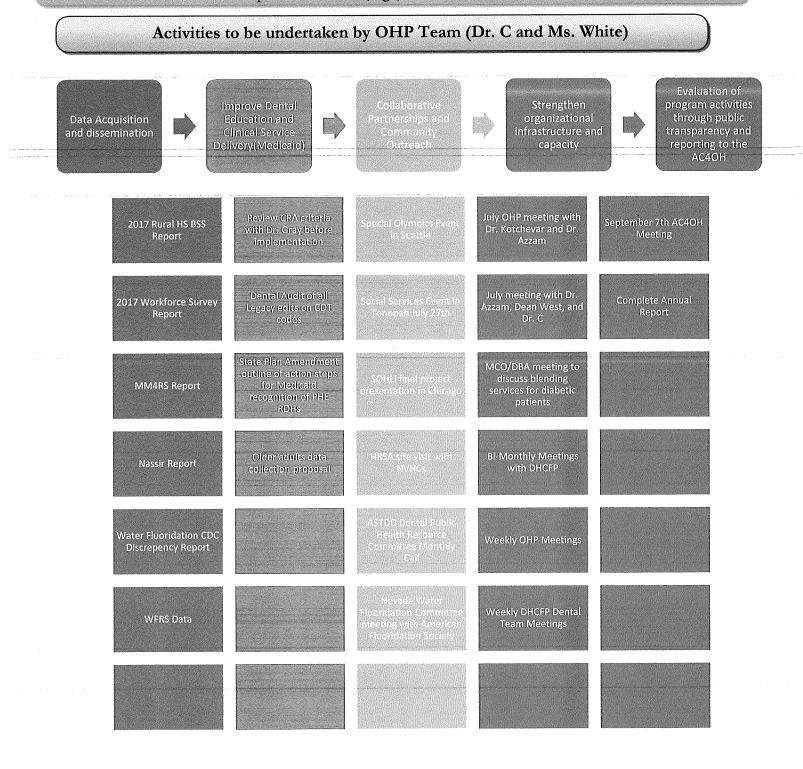
**Strategy 5:** Improve effectiveness of policy and advocacy efforts through open lines of communication and evaluation of --

#### Activities:

- Create system to monitor quality and effectiveness of activities
- Annual activities report
- Quarterly AC4OH meetings
- Quarterly DPBH meetings with Administration
- Bi-monthly DHCFP meetings
- Weekly OHP team meetings
- Weekly DHCFP dental team meetings

# July-August-September OHP Activity Plan

Our vision is a healthy Nevada, where all people experience the benefits of oral health intrinsically linked to overall health. Our vision is to remove barriers to a patient's ability to maintain oral health regardless of the patient's location, age, or financial status.



DHHS 000308

# <u>Budget</u>

Items that could not be purchased in FY18:

- Inventory system with barcode scanner: \$3,065.56
- Barcode scanner cloud system: \$100/month
- Lockboxes for Nomads-required by Radiation Control: \$600
- Silver Diamine Fluoride Varnish: \$ 339.75—optional
- Surcharge from Judy's Special Olympics trip:
- Memory Card for Camera: \$35

#### FY19 Timeline:

	Antonina	Judy	Auxiliary Staff	AC4OH
				Members
July				July 12-14th Oral
·				Health 2020
				Western
				Regional
				Convening from
				Denta Quest
				Foundation
		· · · · · · · · · · · · · · · · · · ·	MCH report due	
	Nassir Report			
August	WIC MOU needs to			
	be signed!!! By			
	August for it to go			
	into effect in the			
	fall.	·		
September	NPHA Annual	- · · ·		
September	Conference			
		BSS class to		
		TMCC		
	AC4OH meeting			
0 / 1	AC40H meeting			
October				
November	D 1.04			
December	Prepare end of the			
	year report			
	ASTDD Report			
	AC4OH meeting		AC4OH meeting	
January	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · ·
March	AC4OH meeting		AC4OH meeting	
	DHHS Fact Book	V 1 1011 100111111111111111111111111111		
			Request	
			graduating dental	
			and dental	
			hygiene student	
			lists from	
			TMCC, CSN,	
			and UNLV SDM	
April	NOHC Conference		NOHC	
Ahm			Conference	
				DHHS_0

ſ	May	Radiation Control		Radiation		
		Renewal		Control Renewal		
	June	AC4OH meeting		AC4OH meeting		
ſ		Nassir Notes			· · · · · · · · · · · · · · · · · · ·	
		information request				
		sent				
		June 4 <sup>th</sup> -6 <sup>th</sup> MSDA				
		in Washington,	i			
		D.C.				
		······································				
ľ		June 16th Journey	June 16th			
		of Hope event by	Journey of Hope			
		Western Nevada	event by Western			
		College and Nevada	Nevada College			
		Governor's Council	and Nevada			·
		on Developmental	Governor's			
		Disabilities	-Council on			
			Developmental			
			Disabilities			
ŀ		June 2 <sup>nd</sup> Printing dead			1	
		June 9 <sup>th</sup> PO deadline				
.	·		· · · .	··· · · · ·		
ŀ	July	· · ·				

# FY19 Trips:

July	Trip to Carson City for MCO/DBA Quarterly meeting
August	Trip to Carson City for meeting with Liberty Dental Executives
	Special Olympics event Las Vegas
September	Nevada Public Health Association Conference
October	Nevada Health Conference
	RAM event in Pahrump
	Special Olympics event Reno
November	
December	
January	
February	2 trips to Carson City for NDHA, NDA Legislative Days
	Give Kids a Smile Event
March	
April	NOHC Conference in Memphis, TN
May	
June	MSDA in Washington

From:	Christina Demopoulos <christina.demopoulos@unlv.edu></christina.demopoulos@unlv.edu>
Sent:	Tuesday, July 10, 2018 9:54 PM
To:	Antonina Capurro
Cc:	judith. skelton
Subject:	Re: Nassir Notes Request
Attachments:	SNS Summary, SEALS, SFY18 revised 07102018.xlsx; SNS, SEALS Raw Data, SFY18 revised 07102018.xlsx; SNS, Rundle ES, Revised 07102018.xlsx

Hi,

Please find attached the revised report for Rundle ES, revised raw data and revised summary report for SNS.

Let me know if you have any questions.

Christina

×	Christina A. Demopoulos, DDS, MPH Associate Professor, Clinical Sciences School of Dental Medicine University of Nevada, Las Vegas
	<u>Christina.Demopoulos@unlv.edu</u> Office: 702-774-2545
L	] unlv.edu • Twitter • <u>Facebook</u> • <u>Instagram</u> • <u>YouTube</u>

On Thu, Jul 5, 2018 at 7:15 AM, Christina Demopoulos <<u>christina.demopoulos@unlv.edu</u>> wrote: Good morning!

Please find attached the SEALS summary report, raw data, and individual school reports. I cross checked the raw data with the hard copies for Rundle ES, but the report is slightly off. I don't have the forms with me now, but will have the team reenter them into SEALS to see if it will resolve the gliche. The difference in SEALS compared to ACCESS (my hard count of forms) is 2 less for fluoride varnish, 4 more for sealants, and 4 more students sealed for just the one school. All the other figures match up.

I wanted to send you everything now since I have a few days to work. I will resend the SEALS summary report and raw data once Rundle ES is re-entered.

We visited a total of 12 schools:

Here are the totals:

639 screenings437 students sealed622 applications of fluoride varnish

1425 sealants were placed

Let me know if you have any questions.

Christina

×	Christina A. Demopoulos, DDS, MPH Associate Professor, Clinical Sciences School of Dental Medicine University of Nevada, Las Vegas
	<u>Christina.Demopoulos@unlv.edu</u> Office: 702-774-2545

unlv.edu • Twitter • Facebook • Instagram • YouTube

On Thu, Jun 21, 2018 at 9:23 AM, Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Yes, just the raw data.

Thank you,

Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A

Nevada State Dental Health Officer

Nevada Department of Health and Human Services

Division Public and Behavioral Health - Oral Health Program

1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

T: (702) 774-2573 |F: (702)774-2521 |E: <u>acapurro@health.nv.gov</u><<u>http://health.nv.gov/></u> <u>www.dhhs.nv.gov</u><<u>http://www.dhhs.nv.gov/</u>> | www.division <u>website.nv.gov</u><<u>http://www.division%20website.nv.gov/</u>>

Helping People. It's who we are and what we do.

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail,

DHHS 000312

and delete the message.

From: Christina Demopoulos [<u>christina.demopoulos@unlv.edu</u>] Sent: Wednesday, June 20, 2018 11:36 PM To: Antonina Capurro Subject: Re: Nassir Notes Request

Hi,

To be clear, you don't want the summary. You only want the raw data.

Christina

[UNLV Logo]<<u>http://unlv.edu/></u>

Christina A. Demopoulos, DDS, MPH Associate Professor, Clinical Sciences School of Dental Medicine University of Nevada, Las Vegas

<u>Christina.Demopoulos@unlv.edu</u><mailto:<u>Christina.Demopoulos@unlv.edu</u>> Office: 702-774-2545<tel:17027742545>

<u>unlv.edu</u><<u>https://unlv.edu/</u>> • Twitter<<u>http://twitter.com/unlv</u>> • Facebook<<u>https://www.facebook.com/OfficialUNLV</u>> • Instagram<<u>http://instagram.com/unlv</u>> • YouTube<<u>https://www.youtube.com/unlvofficial></u>

On Tue, Jun 19, 2018 at 4:55 PM, Antonina Capurro <<u>acapurro@health.nv.gov</u><mailto:<u>acapurro@health.nv.gov</u>>> wrote:

Good Afternoon,

For reporting ease this year, please send me the raw data from SEALS for the Nassir Report. The information will be compiled and sent to you for review before being included in the September AC4OH meeting packet.

If you have any questions or concerns, feel free to contact me.

Thank you,

Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A

Nevada State Dental Health Officer

Nevada Department of Health and Human Services

Division Public and Behavioral Health - Oral Health Program

1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

T: (702) 774-2573 |F: (702)774-2521 |E:

<u>acapurro@health.nv.gov</u><mailto:<u>acapurro@health.nv.gov</u>><<u>http://health.nv.gov/</u>> www.dhhs.nv.gov<<u>http://www.dhhs.nv.gov</u>><<u>http://www.dhhs.nv.gov/</u>> | www.division website.nv.gov<<u>http://website.nv.gov</u>><<u>http://www.division</u>%20website.nv.gov/<<u>http://20website.nv.gov/</u>>>

Helping People. It's who we are and what we do.

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Antonina Capurro Sent: Monday, June 11, 2018 9:53 AM To: <u>christina.demopoulos@unlv.edu</u><mailto:<u>christina.demopoulos@unlv.edu</u>>; <u>BDupont@chanevada.org</u><mailto:<u>BDupont@chanevada.org</u>>; <u>terri@futuresmiles.net</u><mailto:<u>terri@futuresmiles.net</u>> Subject: Nassir Notes Request

Good Morning Oral Health Partners,

It is that time again to write the SY17 Nassir Notes. I am reaching out to you for details on the sealant activities of Community Health Alliance Sealant program, Seal Nevada South, and Future Smiles. Specifically, the number of schools served, number of children seen, number of individual teeth sealed from July 1st 2017 to June 30th 2018 will be needed for the report.

Would it be reasonable to compile this information and send it to me by July 30th?

I look forward to hearing for you.

Thank you,

Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A

Nevada State Dental Health Officer

Nevada Department of Health and Human Services

Division Public and Behavioral Health - Oral Health Program

1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

T: (702) 774-2573 |F: (702)774-2521 |E:

<u>acapurro@health.nv.gov</u><mailto:<u>acapurro@health.nv.gov</u>><<u>http://health.nv.gov/</u>> <u>www.dhhs.nv.gov</u><<u>http://www.dhhs.nv.gov</u>><<u>http://www.dhhs.nv.gov/</u>> | www.division website.nv.gov<<u>http://website.nv.gov</u>><<u>https://newmail.state.nv.us/owa/UrlBlockedError.aspx</u>>

Helping People. It's who we are and what we do.

NOTICE: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

# SUMMARY STATISTICS FOR PROGRAM:

2017

-

2018

#### **Seal Nevada South**

#### GENERAL DEMOGRAPHICS

Number of events held	12		
% male	46.5	% reporting sex	100.0
% Medicaid patients	45.7	% SCHIP patients	4.9
% on neither	49.4	% reporting Medicaid/SCHIP status	99.2
% White‡	16.6	% Asian‡	4.6
% Black/African American‡	20.6	% Hispanic <b>‡</b>	62.7
% American Indian/Alaska Native‡	0.9	% Other‡	1.4
% Hawaiian/Pacific Islander‡	0.5	% reporting race	98.9

#### Summary of effectiveness in targeting high-risk

, , , , , , , , , , , , , , , , , , , ,		/0 01
populations that lack access to care	value	participants
1. Participants with untreated decay (baseline)	279	43.7
2. Participants with urgent dental needs (baseline)	46	7.2
3. Participants with early dental needs (baseline)	241	37.7
4. Participants with treated or untreated decay (baseline)	484	75.7
5. Participants with sealants present (baseline)	193	30.2
6. Percentage of events targeting children in schools with		
<20% of students in free or reduced lunch program	8.3	
7. Percentage of events targeting children in schools with		
>=20% & <40% of students in free or reduced lunch program	83.3	
8. Percentage of events targeting children in schools with		
>=40% & <50% of students in free or reduced lunch program	0.0	
9. Percentage of events targeting children in schools with		
>=50% of students in free or reduced lunch program	8.3	
	0.0	

#### Summary of effectiveness of targeting high-risk teeth 100.0 1. Percentage of events targeting 1st molars 2. Percentage of events targeting 1st molars of second graders 75.0 3. Percentage of events targeting 2nd molars 8.3 4. Percentage of events targeting 2nd molars of sixth graders 0.0 5. 1.5-year attack rate in 1st molars (baseline) / based on # children 0.170 6. Estimated 9-year decay increment in 1st molars without program 866 7. Among children age 12+, percentage of decayed or filled 2nd 31.4 molars / based on # children 8. Estimated 9-year decay increment in 2nd molars without program\*\* 88

%\* of

Summary of services delivered	value	% response
1. Number of children screened	639	
2. Number of screened children with special health care needs	27	
3. Number of children sealed	437	
4. Percentage of screened children with at least one sealant after event	80.4	
5. Percentage of screened children subsequently sealed*	68.4	100.0
6. Average number of teeth sealed per child sealed	3.3	
7. Number of children receiving fluoride varnish	623	
8. Number of children receiving other fluoride treatments	0	
9. Number of children referred for dental care	283	
10. Number of children receiving oral health education	10	
11. Average hours of oral health education received per		
student instructed	1.0	

Summary of quality of services delivered	value	
1. Number of referrals that resulted in a dental visit	0	
2. Percentage of "early dental care"		
referrals that resulted in a dental visit*	0.0	
3. Percentage of "urgent care" referrals that		
resulted in a dental visit*	0.0	
4. Number of children evaluated for sealant retention 8 to 14 months		
from delivery	0	
5. Number of children evaluated for sealant retention <8 months / >14		
months from delivery	1	0
<ol><li>Sealant retention rate / # children based on</li></ol>	0.000	1
7. 1st molar cavities averted by program (9-year horizon)	0	
8. 2nd molar cavities averted by program (9-year horizon)¶	0	

	Total	Direct
Summary of efficiency of input usage	outlays	state funds
1. Total cost	\$7,128.00	\$0.00
2. Cost per child screened	\$11.15	\$0.00
3. Cost per child sealed	\$16.31	\$0.00
4. Cost per tooth sealed	\$5.00	\$0.00
5. Cost per cavity averted	\$0.00	\$0.00
6. Number of children screened per chair hour	63.90	
7. Number of children sealed per chair hour	43.70	
8. Number of children checked for sealant retention per chair hour	0.10	
9. Number of labor hours per chair hour during screening	61.20	
10. Number of labor hours per chair hour during sealing	62.20	
11. Number of labor hours per chair hour during retention check	61.20	
12. Administrative time (including organization, setup, and		
breakdown) per child screened (in hours)	0.03	

‡ The sum of the percentages in all racial/ethnic groups may exceed 100%, as more than one group may be reported per ch

\* based on responses not entered as "99"

\*\* based on 1st molar attack rate

 $\P$  based on cavities averted per sealant for 1st molars

% response
100.0
100.0
100.0
100.0
100.0

DHHS\_000318

State funds + Medicaid				
reimb				
\$0.00				
\$0.00				
\$0.00				
\$0.00				
\$0.00				

ıild.

From:	acapurro@health.nv.gov
Sent:	Thursday, August 16, 2018 10:47 AM
То:	BDupont@chanevada.org;
Subject:	Nassir School-Based Sealant Report-Please Review
Attachments:	Nassir 2018- Draft.docx

#### Good Morning,

Thank you for providing me with your SEALS data for the 2017-2018 school year. There was a significant jump in the number of sealants placed. Congratulations on this phenomenal accomplishment. The draft Nassir report is attached. Please review your respective sections and provide any corrections or updates to me by **August 27**<sup>th</sup>. Once I receive your feedback, the Nassir report will be included in the September 7th AC4OH meeting packet.

Thank you, Antonina

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

DHHS\_000320

## Nevada Department of Health and Human Services, Division of Public and Behavioral Health, Oral Health Program, School-Based Sealant Report

#### **Program:**

The Community Preventive Services Task Force recommends school-based sealant delivery programs based on strong evidence of effectiveness in preventing dental caries (tooth decay) among children. Dental (pit and fissure) sealants contain clear or opaque plastic resinous material which is applied to the chewing surfaces of the back teeth to provide a protective barrier against decay causing bacteria. Dental sealants can last up to ten years and take as little as 15 minutes to apply. School-based sealant programs target schools in low socioeconomic status (SES) neighborhoods which are identified based on the percentage of children eligible for the federal free and reduced-price meal programs. Data shows that these programs increase the number of children who receive sealants either onsite at schools or offsite in dental clinics.

**Community Health Alliance** is a non-profit school-based sealant program that utilizes a mobile van to provide oral health education, sealants, and fluoride varnish to  $2^{nd}$  grade children in underserved schools in Northern Nevada (> 50 percent Free and Reduced Lunch (FRL). They operate during the nine-month academic year.

**Seal Nevada South** is a non-profit school-based sealant program, administered through UNLV School of Dental Medicine (SDM). The program serves uninsured children in second through fifth grade in underserved schools (>50 percent FRL) in Southern Nevada. They operate during the nine-month academic year.

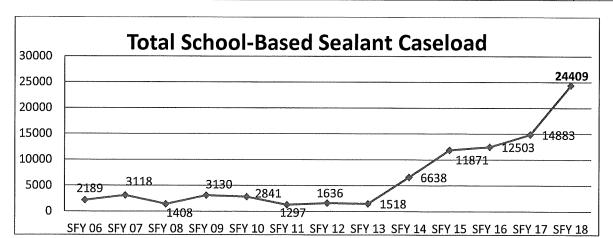
**Future Smiles** is a non-profit school-based sealant program that provides two types of delivery models: set locations in School-Based Health Centers for Education and Prevention of Oral Disease (EPODs) and mobile school-based locations utilizing portable equipment. Underserved schools (Title I with >50 percent FRL) in both Northern and Southern Nevada are now served year round during the twelve-month academic year.

#### **Eligibility:**

Eligibility is determined by the individual programs. (Please note: These Community-Based Organizations do not receive funding through the Division of Public and Behavioral Health for their sealant programs.)

Program									
	Number of Schools			Children Served			Number of Dental Sealants Placed		
	SFY16	SFY17	SFY18	SFY16	SFY17	SFY18	SFY16	SFY17	SFY18
Community Health Alliance	25	24	22	609	467	1,067	1,562	1,219	3,362
Seal Nevada South	18	16	12	515	507	639	1,631	1,665	1,443
Future Smiles	25	49	60	3,323	4,691	6,700	9,310	11,999	19,604
Total	68	89	94	4,447	5,665	8,406	12,503	14,883	24,409

# Caseload History:



Comments: All programs are reporting individual teeth sealed per CDC recommendations. DHHS\_000321 Website: <u>http://dpbh.nv.gov/Programs/OH/OH-Home/</u>

# Nevada Department of Health and Human Services, Division of Public and Behavioral Health, Oral Health Program, School-Based Sealant Report

#### **Program:**

The Community Preventive Services Task Force recommends school-based sealant delivery programs based on strong evidence of effectiveness in preventing dental caries (tooth decay) among children. Dental (pit and fissure) sealants contain clear or opaque plastic resinous material which is applied to the chewing surfaces of the back teeth to provide a protective barrier against decay causing bacteria. Dental sealants can last up to ten years and take as little as 15 minutes to apply. School-based sealant programs target schools in low socioeconomic status (SES) neighborhoods which are identified based on the percentage of children eligible for the federal free and reduced-price meal programs. Data shows that these programs increase the number of children who receive sealants either onsite at schools or offsite in dental clinics.

**Community Health Alliance** is a non-profit school-based sealant program that utilizes a mobile van to provide oral health education, sealants, and fluoride varnish to  $2^{nd}$  and  $6^{th}$  grade children in underserved schools in Northern Nevada (> 50 percent Free and Reduced Lunch (FRL). They operate during the nine-month academic year.

**Seal Nevada South** is a non-profit school-based sealant program, administered through UNLV School of Dental Medicine (SDM). The program serves uninsured children in second through fifth grade in underserved schools (>50 percent FRL) in Southern Nevada. They operate during the nine-month academic year.

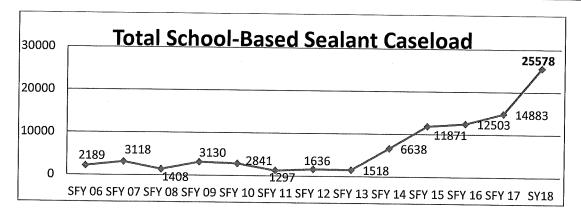
**Future Smiles** is a non-profit school-based sealant program that provides two types of delivery models: set locations in School-Based Health Centers for Education and Prevention of Oral Disease (EPODs) and mobile school-based locations utilizing portable equipment. Underserved schools (Title I with >50 percent FRL) in both Northern and Southern Nevada are now served year round during the twelve-month academic year.

#### **Eligibility:**

Eligibility is determined by the individual programs. (Please note: These Community-Based Organizations do not receive funding through the Division of Public and Behavioral Health for their sealant programs.)

Program									
	Number of Schools			Children Served			Number of Dental Sealants Placed		
	SFY16	SFY17	SFY18	SFY16	SFY17	SFY18	SFY16	SFY17	SFY18
Community Health Alliance	25	24	22	609	467	1,067	1,562	1,219	3,362
Seal Nevada South	18	16	12	515	507	639	1,631	1,665	1,443
Future Smiles	25	49	60	3,323	4,691	6,520	9,310	11,999	20,773
Total	68	89	94	4,447	5,665	8,226	12,503	14,883	25,578

#### **Caseload History:**



**Comments:** All programs are reporting individual teeth sealed per CDC recommendations. **Website**: <u>http://dpbh.nv.gov/Programs/OH/OH-Home/</u>

DHHS\_000322

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>					
Sent:	Tuesday, January 8, 2019 10:35 AM					
То:	Ihsan Azzam					
Subject:	CMO Report and Questions (nonencrypted)					
Attachments:	SDOHighlights.docxDecember.docx; CMOMonthlyReportSummary.docxDec18.docx					

Good Morning,

I hope you had a wonderful Christmas and New Year's! Below are a number of items that require your attention and approval.

First, I was accepted to AT Still University's Dental Public Health Residency program and will begin in July. John was very supportive of my application and wrote my letter of recommendation. I do not anticipate any lapse in my duties during the program and hope you will support my continuation of my education. If you have any questions about the program, I would be happy to supply additional information.

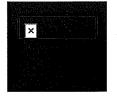
Secondly, the Southern Nevada Health District is forming a 501c3 health care coalition. They will have a medical and dental focus and will be applying for federal grants that will support outreach efforts for rural Nevada. Dr. Iser has asked me to be a member of the coalition board to provide oral health information and direction. Is there any reason that I would not be able to join this coalition?

Thirdly, we are still waiting for the subaward for C16188. I spoke with Debi Reynolds this morning but she was unsure as to why it suddenly stalled. Any information that you might be able to provide would be greatly appreciated. The hiring committee will be interviewing applicants later this month although the subgrant is still not in place. Furthermore, the Oral Health Program is at a bit of a standstill. Without the subgrant travel, annual membership renewals, and needed supplies cannot be ordered. Can you please assist me in reaching a conclusion to this issue?

Additionally, Judy purchased 500+ units of denture kits in preparation for a senior project. The materials are expiring in June and with no project in sight, I will be providing these supplies to our oral health partners for use this spring. I wanted you to be aware of this before I disseminate these items. Also, I have not yet received the 2017 HS BSS report from Judy which she said would be completed by December 30th. Have you revived this report?

Lastly, attached is the CMO report for December. Projects to highlight include the dental benefits legislative bill being sponsored by Assemblywoman Neal, a ER redirect pilot project with Liberty Dental and UMC, and continued transition of OHP.

I look forward to hearing from you. Best regards, Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer, Visiting Assistant Professor,

12/2018

- 1. This month the State Public Health Dental Hygienist position posted on the UNLV SDM website. The hiring committee has been formed and Dr. Capurro wrote the interview questions. Dr. Capurro will be meeting with the hiring committee in January to review the interview questions and guide the team through the hiring process.
- 2. Ms. Chartier completed the Hy-Life CE series which examined a possible funding opportunity in which oral hygiene is provided to residents at nursing home and memory care facilities. A full proposal will be developed in January and submitted to Dr. Azzam and Mr. Whitley for review.
- Dr. Capurro and Dr. Iser of the SNHD presented a presentation to Nye County Board of County Commissioners on the results of the MM4RS project. The County Commissioners wrote a letter of support for the projects continuation to Dr. Kotchevar. Additionally, the OHP was asked to provide dental services at the Nye County Social Services event in January in Pahrump.
- 4. Work continued on the legislative proposal being sponsored by Assemblywoman Neal to expand Medicaid dental benefits for adults with diabetes.
- 5. The contents of Judy's Reno office were moved to Las Vegas. Dr. Capurro prepared to clean out the Valley View office and relocate at UNLV.
- 6. Ms. Chartier moved offices within UNLV SDM
- 7. Dr. Capurro prepared to move offices within UNLV SDM.
- 8. Dr. Capurro revised the subgrant for C16188 to reflect the changes in verbiage that were suggested by UNLV legal counsel and Dr. Kotchevar. The subgrant has not yet left the Division, but will be walked for UNLV signature by Dr. Capurro when it is released.
- 9. On December 7<sup>th</sup> an AAPHD grant application for \$5,000 to support the Rural Nevada Expectant Mother Medicaid Dental Access Program was planned for submission. The remaining budget for the project was \$17,000. Since the Program is still in flux, Dr. Capurro made the decision to forgo submission of the application, as Program funds cannot be allotted for specific projects at the moment.

# January 2019

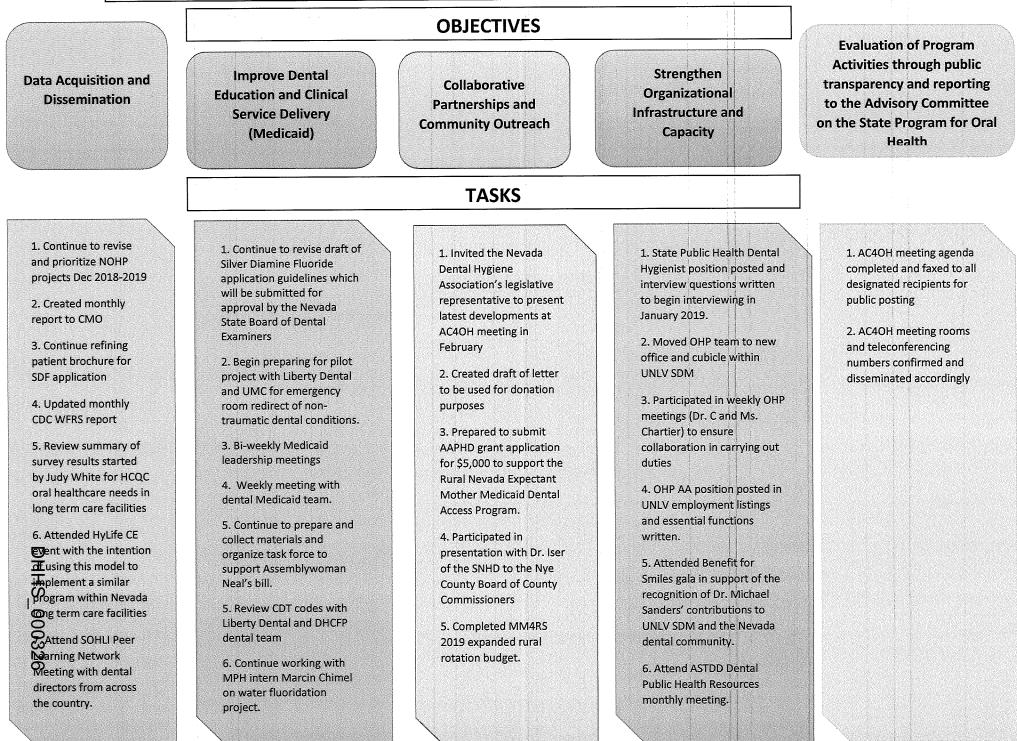
# To Do List

- 1. Preparation for February 1<sup>st</sup> AC4OH meeting will continue.
- 2. Design the first "Tooth Time" video to improve visibility of OHP and distribute oral health education through three to four minute videos published at the end of each month.
- 3. Continue to explore funding opportunities for OHP.
- 4. Dr. Capurro will attend a CE on silver diamine fluoride (SDF) to help shape the Nevada
- SDF-policy that will be submitted to the Nevada Board of Dental Examiners for approval.
- 5. Dr. Capurro will attend the American Institute of Dental Public Health annual conference January 23-25<sup>th</sup>.
- 6. Dr. Capurro is working with the Office of Statewide Initiatives and Dr. Matt Walker on HRSA19-088, a Rural Residency Planning and Development Program grant.

- 7. The OHP team will attend the January 16<sup>th</sup> Nye County Social Services event to provide oral exams, dental cleanings, and preventive services. We will be accompanied by Liberty Dental's educational coordinator and Ms. Woods of the SNHD.
- 8. OHP will attend the January 18<sup>th</sup> CCOH oral health coalition meeting.
- 9. Dr. Capurro will continue to work closely with Assemblywoman Neal as the bill language is drafted.
- 10. Dr. Capurro is preparing an article on the MM4RS project for publication in the UMC monthly newsletter.
- 11. Annual report and legislative brief for the Oral Health Program will be finalized.
- 12. Dr. Capurro and Dr. Tongsiri, Liberty Dental, will be meeting with Mason Van
- Houweling, CEO of UMC, to discuss a proposed emergency room redirect project for non-traumatic dental conditions.
- 13. Dr. Capurro will continue to follow up with Division Administrators on the progress of the subgrant to C16188.

DHHS 000325

# **OHP MONTHLY REPORT to the CMO SUMMARY-December. 2018**



From: Sent: To: Subject: Antonina Capurro <antonina.capurro@unlv.edu> Wednesday, February 13, 2019 12:21 PM Nathan K. Orme Re: State Dental Health Officer

#### Thank you!



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu • Twitter • Facebook • Instagram • YouTube

On Wed, Feb 13, 2019 at 12:16 PM Nathan K. Orme <<u>nkorme@health.nv.gov</u>> wrote:

I am watching Julie Kotchevar's testimony on that part of the budget right now, you can check it out here: <u>http://nvleg.granicus.com/MediaPlayer.php?clip\_id=10597</u>

From: Antonina Capurro <<u>antonina.capurro@unlv.edu</u>> Sent: Wednesday, February 13, 2019 12:13 PM To: Nathan K. Orme <<u>nkorme@health.nv.gov</u>> Subject: Re: State Dental Health Officer

I'll keep my fingers crossed that the discussion will have a positive fiscal impact on the program. If this help, although the position was written into statute in 2001, it was not funded until 2016. That's what I was told when I accepted the position.



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer, Visiting Assistant Professor,



School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

On Wed, Feb 13, 2019 at 12:04 PM Nathan K. Orme <<u>nkorme@health.nv.gov</u>> wrote:

No that I know of, it was a question at a legislative budget hearing. I'm sorry I don't know the context.

From: Antonina Capurro <<u>antonina.capurro@unlv.edu</u>> Sent: Wednesday, February 13, 2019 12:01 PM To: Nathan K. Orme <<u>nkorme@health.nv.gov</u>> Subject: Re: State Dental Health Officer

Are there proposed changes to the position?



Antonina Capurro, DMD, MPH, MBA

Nevada State Dental Health Officer, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

On Wed, Feb 13, 2019 at 11:59 AM Nathan K. Orme <<u>nkorme@health.nv.gov</u>> wrote:

That should do for the moment, thanks.

From: Antonina Capurro <<u>antonina.capurro@unlv.edu</u>> Sent: Wednesday, February 13, 2019 11:58 AM To: Nathan K. Orme <<u>nkorme@health.nv.gov</u>> Subject: Re: State Dental Health Officer

Good Morning,

Yes, the State Dental Health Officer and State Public Health Dental Hygienist positions were first created in 2001 under Senate Bill No. 208 by Senator Rawson. The positions were included in Chapter 439 of the NRS.

If additional information is needed, please let me know.

Thank you,



# Antonina Capurro, DMD, MPH, MBA

Nevada State Dental Health Officer, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

On Wed, Feb 13, 2019 at 11:31 AM Nathan K. Orme <<u>nkorme@health.nv.gov</u>> wrote:

Dr. Capurro – Can you possibly tell me when the State Dental Health Officer position was created?

#### Nathan Orme



Education and Information Officer

Nevada Department of Health and Human Services

Division of Public and Behavioral Health | Bureau of Health Care Quality and Compliance

727 Fairview Drive, Suite E | Carson City, NV, 89701 T: (775) 684-1070 | F: (775) 684-1073 | E: <u>nkorme@health.nv.gov</u>

www.dhhs.nv.gov | www.dpbh.nv.gov

# Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient (recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the cont may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the me

xJanuary.docx

Greetings,

Hope this email finds you well. Attached is the January CMO report. Projects to highlight include the dental benefits legislative bill being sponsored by Assemblywoman Neal, a ER redirect pilot project with Liberty Dental and UMC, and continued transition of OHP. Also included is my annual evaluation which is a requirement of UNLV.

I look forward to hearing from you. Best regards,

Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

# UNIV | NON-TENURE TRACK FACULTY annual evaluation report

Evaluation period January 1, 2018 through December 31, 2018

Fenure Status				De stál se	No	
	Non-Tenure Tra	CK Faculty	_ Present Title:	Position	Number: 2886	
College/School:	Dental Medicin	е		Dept./Unit: Clinical Sc	iences	
Contract Type:	XA	FTE: 🗌 1	00% or Percenta	ge of FTE: 100%		
В						
This annual evalu performance in e progress towards	ach area since t	he last annı	alendar year. Th ual evaluation. W	e evaluator's remarks i here applicable, the re	nust address any changes marks should address the	s in individual's
NOTE: For ins	<b>ition Effectiver</b> tructional faculty e Title 2, Chapte	<ol> <li>evaluatior</li> </ol>	is "shall include a	gned duties for non-tea an assessment of teacl	ching faculty) ning evaluations complete	d by their
CHECK ONE:	× Excellent	🗌 Co	ommendable	Satisfactory	Unsatisfactory*	🗌 N/A
outlined in NR State Dental H *Report month * Provided adr Health, Oral H *Function as th associated gra * Created the * Provided sub * Attended all meetings to re * Organize we with OHP staff *Update the O * Organize all agendas, disc * Dr. Capurro water fluoridat	S 439.279. lealth Officer for ily to the State C ninistration for a ealth Program he fiscal manage ants and agreem scope of work se oject matter expe Division of Publi present the prog ekly agendas wi f and DPBH Dep oral Health Progr Advisory Comm ussions, etc are continued to ma	the Nevada thief Medica and am response ement analy ents(WIC a ection for all ection for all ect	a Division of Publ I Officer onsible for all act st for the half a n nd MCH). contracts with si Division in matte vioral and Depart esent the program Health Program s with dental publi State Program for ce with state ope	ic and Behavioral Heal ivities in the Nevada D nillion dollar Oral Healt ster agencies on beha rs of statewide clinical tment of Health and Hu m's goals and current p staff. Strategic planning c health and health pro or Oral Health Meeting on meeting law protoco tion Reporting System	iman Service administrative projects. I session was conducted of motion information. Is and ensure meeting plar Is. information for Nevada's of	DHP): vioral dgets for am ve quarterly on May 15th nning,

DHHS\_000332 of 6

Examiners deadline was not met and the Division decided to move forward with a subaward. This has been written and monitored through both UNLV and DPBH systems in 2019.

\*The FY 20-21 budget for the Oral Health Program has been created and submitted for state approval.

\* Provided tours of UNLV SDM as requested and provide information about SDM to Division Administrators.

Chief Dental Consultant for the Division of Health Care Financing and Policy:

\*Weekly provide consultation for the management of the contract with the dental benefits administrator, Liberty Dental. Review and assess access to care, utilization of services, and reporting data using quality measures endorsed by national entities.

\* Attend bi-monthly leadership meetings with Administrators within the Division of Health Care Financing and Policy (DHCFP) (Medicaid, CHIP, Medicare).

\*Attend weekly meeting with the Medicaid dental team.

\* Two Budget Enhancement Concepts were written for DHCFP

1. Increased reimbursement rates for dental patients in rural Nevada

Periodontal services for adult diabetic patients

\* Periodicity Schedule: Examine Nevada Medicaid and CHIP dental fee schedule and payment policies against pediatric dental periodicity schedule. Provide recommendations to align dental payment policies in Nevada. Medicaid and CHIP Program with established pediatric dental periodicity schedules.

\*Research and provide state wide statements on the impact alignment of ambulatory surgical center rates with Medicare fee schedule for code 41899 have had and continue to have in Nevada, alternative treatment options, and lessons learned from other state Medicaid programs.

\* Attend all public workshops on Medicaid dental topics to provide subject matter expertise and represent not only the DPBH Oral Health Program but the DHCFP dental department.

\*Completed the State Oral Health Leadership Institute Cohort 2, Center for Health Care Strategies (2017-2018)-12 month leadership program for state oral health and Medicaid teams to build leadership skills and policy knowledge. The Institute began October 2017 and ended October 2018.

\*Advocate for a state plan amendment for Medicaid provider type recognition of public health endorsed dental hygienist provider 22-187.

#### 2. Scholarly Research and/or Creative Activity

CHECK ONE: X Excellent Commendable Satisfactory Unsatisfactory\* N/A

Dr. Capurro was an Internship Preceptor for:

Heidi longi, Doctor of Dental Medicine-Master of Public Health Fast Track Internship, Spring 2018. Designed a survey that reviewed the health assessment before school entrance policies of eighteen other states. Findings were presented to the Advisory Committee on the State Program for Oral Health (AC4OH) in September of 2018. Marcin Chimel, Master of Public Health Internship, Fall 2018. Project focuses on water fluoridation and dental caries

Marcin Chimel, Master of Public Health Internship, Fall 2018. Project focuses on water fluoridation and dental caries throughout Nevada. Findings will be presented to the Advisory Committee on the State Program for Oral Health (AC4OH).

#### Research and Grants:

 Dr. Capurro prepared a concept paper on expanding Medicaid dental services for adults with diabetes. The Division assisted her in finding a bill sponsor. Assemblywoman Neal is sponsoring the proposal in the 2019 Legislative Session as BDR: 38-544. Dr. Capurro wrote the bill language and oversaw completion of the necessary fiscal impact report.
 \*Brokered a research relationship between the Division of Health Care Financing and Policy and Dr. Greg

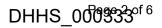
Oppenhuizen of the American Association of Orthodontists (AAO) in conjunction with the Angle Society-Midwest and the University of Detroit/Mercy for Nevada to be a part of a research study that may solidify or alter the AAO Committee on Medically Necessary Orthodontic Care's decision.

3. \*HRSA 18-014 "Grants to States to Support Oral Health Workforce Activities" —Principal Investigator (PI). Application submitted on behalf of Nevada Oral Health Program

4. \*CDC-RFA-18-1810 "State Actions to Improve Oral Health Outcomes" a 5-year, \$370,000 per year grant — Principal Investigator (PI). Application submitted on behalf of Nevada Oral Health Program

5. \*HRSA 19-025 "Rural Health Network Development Planning Program"— Co-author. Application submitted on behalf of William Bee Ririe Hospital in Ely, Nevada. Dr. Capurro initiated and facilitated discussion of this grant and brought partners to the table. This grant is a one year, \$100,000 planning grant for White Pine, Eureka, Lander, and Lincoln Counties. If awarded this grant, OHP will be a partner with other rural counties, critical access hospitals, and other health care partners.

6. Dr. Capurro wrote a proposal entitled Rural Nevada Expectant Mother Medicaid Dental Access Program. This



proposal was submitted Delta Dental funding. Although the funding request was not accepted, Dr. Capurro was able to	Л
secure state funds to execute the project in 2019.	

7. Dental Trade Alliance Foundation Grant proposal accepted 2018. Dr. Capurro designed a Ryan White dental integration project with UNLV SOM and UNLV SDM. This project was submitted for funding to the Dental Trade Alliance Foundation. The proposal was accepted, but UNLV SDM requested that Dr. Capurro retract her proposal as another UNLV SDM faculty had also submitted a proposal( which was not funded). Dr. Capurro complied with the request.

Presentations:

• Esmeralda County Board of County Commissioners February 2018

Presenter, Rural Outreach Pilot Project

Lincoln County Board of County Commissioners February 2018

Presenter, Rural Outreach Pilot Project

Nye County Board of County Commissioners February 2018

Presenter, Rural Outreach Pilot Project

White Pine County Board of County Commissioners February 2018

Presenter, Rural Outreach Pilot Project

• 2018 Nevada Public Health Association Annual Conference

Presenter, Medical Miles for Rural Smiles

• 2018 Nevada Health Conference

Presenter, Medical Miles for Rural Smiles, Oral Cancer, and HPV

White Pine County Board of County Commissioners, August 2018

Presenter, Results and Next Steps for Medical Miles for Rural Smiles

Nye County Board of County Commissioners December 2018

Presenter, Results and Next Steps for Medical Miles for Rural Smiles

Advisory Committee on the State Program for Oral Health

Presenter, quarterly Oral Health Program reports and presentations are provided to the Committee and videoconference to locations throughout the state

Community Coalition for Oral Health

Presenter, quarterly Oral Health Program reports and presentations are provided to the Committee

Dr. Capurro wrote the following reports:

• Rural health assessment survey that will be distributed to citizens throughout rural Nevada in 2019.

• ASTDD Synopsis Questionnaire for FY 17-18: Association of State and Territorial Dental Director's Annual synopsis of 50 states, and territories. Compiled information on Nevada's oral health program infrastructure, programming, and demographics on at-risk populations in the state. The information gathered from the questionnaire is compiled into a comprehensive report and shared on the ASTDD and CDC website.

DHHS Fact Book

• Revised and edited 2018 State Standing Order for Fluoride Varnish Application for Community Nurses

Policy: Urgent Dental Issues Identified During Community/School Screenings

2018 Nassir Sealant Report

Dr. Capurro was featured in the follow news outlets:

Immunization and Oral Health Video with the Southern Nevada Health District:

https://youtu.be/HIL6QwsnjqQ

Centers for Health Care Strategies. State Oral Health Leadership Institute Selection:

3. Service/Community Engagement (NSHE, University, College/School, Department/Unit, Professional, or Community)

#### CHECK ONE: X Excellent Commendable Satisfactory

#### Outreach:

1. Med	ical Miles	for I	Rural	Smiles	(MM4RS)	)
--------	------------	-------	-------	--------	---------	---

Project Lead on Medical Miles for Rural Smiles collaborative with the Division of Public and Behavioral Health and Southern Nevada Health District which included facilitating the creation of \$80,000 of state grantfunding. • Dr. Capurro, launched the Medical Miles for Rural Smiles project in collaboration with the Southern Nevada Health

District. Dr. Capurro petitioned the Nevada State Board of Dental Examiners to recognize the Southern Nevada Health District as a dental public health clinic. This designation was approved and the Southern Nevada Health District is the only health department in the state that is listed as a dental public health clinic. The Southern Nevada Health District used this distinction to hire a dental public health endorsed dental hygienist and build a dental clinic for health

N/A

Unsatisfactory\*

department patients. The SNHD Dental Clinic continues to treat dental patients and receives administrative support from the Oral Health Program.

Dr. Capurro petitioned the state for funding to bring dental services to dental health professional areas. Her request
was granted and Dr. Capurro secured two state grants for a pilot rural medical-dental outreach program. The first grant
was from the Department of Health and Human Services and the second was a grant from the Division of Public and
Behavioral Health, Maternal, Child, and Adolescent Health Section.

• Dr. Capurro wrote one subaward and one contract to award funding to the Southern Nevada Health District and outline associated budgets, objectives, and staffing for the rural outreach project.

• Dr. Capurro worked with the newly hired SNHD hygienist to build the SNHD Dental Clinic which continues to operate and treat vulnerable populations.

 Dr. Capurro and Dr. Iser made formal presentations on a rural outreach pilot project (later known as MM4RS) to the Board of County Commissioners in Esmeralda, Lincoln, Nye, and White Pine Counites. With support for county officals, Dr. Capurro and Dr. Iser launched the Medical Miles for Rural Smiles program in April of 2018.

• The pilot project which spanned three months(April to June 2018) included 11 clinical sessions and traveled a total of 2,040 miles. The trip successfully delivered 221 preventive dental sealants, 117 fluoride varnishes, 120 dental screenings, 18 dental cleanings, oral cancer screenings, oral health and nutritional information, Medicaid enrollment paperwork, and oral hygiene supplies. In addition, 102 immunizations (42 Shingrix, 20 Tdap, and 40 others including HPV, Hep A, PCV13, MMR) were provided to 57 clients. Through this pilot project, over \$30,000 of donated dental services were provided to patients of all ages in rural Nevada.

 The team consisted of Antonina Capurro, DMD,MPH,MBA, Nevada State Dental Health Officer, Jessica Woods, RDH,MPH, Public Health Dental Hygienist, Sarah Lugo, MSN, RN, Senior Community Health Nurse, Judith Flores, RN, Community Health Nurse II, Lizette Enzenauer, Senior Administrative Assistant II, and Lester Rossi-Boudreaux-Thibodeaux, Administrative Assistant.

 Dr. Capurro and Dr. Iser presented project results to the Board of County Commissioners in the counties that receivec services.

2. Participated in Special Olympics, Special Smiles (3 events)-provided oral health screenings, fluoride varnish application, and mouth guards to Nevada Special Olympics Healthy Athletes. Dr. Capurro was asked to be a State Dental Director for Special Olympics Healthy Smiles. She plans to complete that training in 2019.

3. Participated in the UNLV poverty simulation on June 8th

4. Give Kids a Smile-national American Dental Association event.

5. Joined the Southern Nevada Health District to bring dental services to the November Project Homeless Connect event. 105 dental screenings, fluoride varnish and oral cancer screenings were provided to event participants.

6. Participated in the Remote Area Medical event in Pahrump, Nevada. Patients of all ages were provided dental screenings, cleanings, extractions, and education.

7. Lead the dental team for the Nye County Social Services Fair in July. Provided dental cleanings to patients previously screened and walk in dental exams, education, and Medicaid information.

Dr. Capurro was involved in the following interdisciplinary committees:

\* Association of State and Territorial Dental Directors Member

\* ASTDD State Dental Director Mentorship Program Member

\* Community Coalition on Oral Health

\* Patient Centered Medical Home Subcommittee for Chronic Disease Council

\* Rural Health Network Member

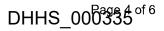
\* Nevada Statewide Maternal and Child Health Coalition

\* Risk Assessment Monitoring System(PRAMS)

At the SDM, Dr. Capurro was an active member of:

• 2017-2018 Research Committee

Voting member of committee which was created to facilitate research activities and review and provide feedback on research activities, issues, proposals, and potential funding opportunities within the SDM Office of Research. The committee develops a strategic plan for research efforts and recommends to the Dean allocation of research funds which have been placed at the Dean's disposal.



	• 2016-2018 SDM Alumni Board Member-Board Secretary Voting member of UNLV SDM Alumni Board. The mission of the committee is to develop general activities, programs and resources relevant to supporting the mission of UNLV SDM.
	In public health governance, Dr. Capurro participated in the following: • 2018-2020 Nevada Health Centers Board Member Current Board Secretary and voting member of Nevada Health Centers Board. Provide recommendations and strategies on the direction and strategies of the organization, assist leadership team in meeting HRSA grant objectives, and uphold the mission and values of the organization to provide quality care to Nevada's most vulnerable populations.
	<ul> <li>2018-2019 American Fluoridation Society's Community Water Fluoridation Training Corps</li> <li>Voting member of American Fluoridation Society's Community Water Fluoridation Training Corps. Other members include local and state officials and oral health stakeholders from across the state. Through a grant from Delta Dental of California foundation, Nevada was chosen as one of four states to receive fluoridation training and technical assistance from the American Fluoridation Society.</li> </ul>
	• 2018-2019 Families for Effective Autism Treatment (FEAT) of Southern Nevada Board Member Voting member of FEAT Board. Provide leadership and grant writing support for organization.
	<ul> <li>2016-2018 Advisory Committee on the State Program for Oral Health Nonvoting ex officio member. Lead discuss on oral health initiatives in the state and provide information on current public health dental topics and progress of the State Oral Health Program. The purpose of the Committee is to support the state program and facilitate the delivery of oral health services.</li> </ul>
4.	Evaluation of Progress Toward Promotion in Title ONLY
	CHECK ONE: X Excellent Commendable Satisfactory Unsatisfactory* X N/A
	As a visiting faculty, Dr. Capurro is unable to apply for promotion.
an co un	any section is rated "Unsatisfactory": Per UNLV Bylaws, Chapter III, Section 8.5, "Specifications for Improvement. If annual evaluation identifies unsatisfactory performance or finds significant need for improvement, a proposed remedial urse of action and a reasonable time limit must be added to the evaluation for mutual collegial benefit, and be dertaken during the period before the next evaluation. Both the evaluee and the department will thus have on record a force and content of the shortcoming. In principle this allows a wide range of evaluations and of warnings."
	<b>/ALUATOR</b> ave prepared this "Annual Evaluation Report" and reviewed it with the employee.
Ev	aluator's Name Evaluator's Title
Ev	aluator's Signature
	IPLOYEE ave read and reviewed the foregoing evaluation.
En	nployee's Signature
-	

DHHS\_000336<sup>of 6</sup>

Non-Tenure Track Faculty \* 2018 \* Antonina Capurro

The faculty member will have an opportunity to submit a written response to the evaluation to be incorporated therewith if the additional reviewer, Dean, or Executive Vice President and Provost provide written comments on the evaluation.

Per <u>UNLV Bylaws</u>, Chapter 3, Section 8.3, "If the faculty member disagrees with the evaluation, then he or she (a) within thirty calendar days after notification, may submit a written response to the evaluation to be incorporated therewith, and (b) within fifteen calendar days after notification, may request in writing to the college dean or appropriate vice president the formation of a committee of peers to conduct a separate annual evaluation."

\* <u>Click here</u> within 30 days of receipt of this evaluation to submit a written response (rejoinder). By using this link, your rejoinder will be submitted to both your supervisor and the Office of Faculty Affairs for inclusion with your annual evaluation.

Click here within 15 days of receipt of this evaluation to request a peer review. By using this link, your request will be forwarded to the college/school dean (or appropriate administrator) and the Office of Faculty Affairs to ensure that the peer review is completed before the end of the B-Contract period.

#### ADDITIONAL REVIEWER

l acknowledge receipt of this evaluation.

Reviewer's Comments, if any:

**Reviewer's Name** 

Reviewer's Title

**Reviewer's Signature** 

#### DEAN

l acknowledge receipt of this evaluation.

Dean's Comments, if any:

Dean's Name

Dean's Signature

## EXECUTIVE VICE PRESIDENT AND PROVOST

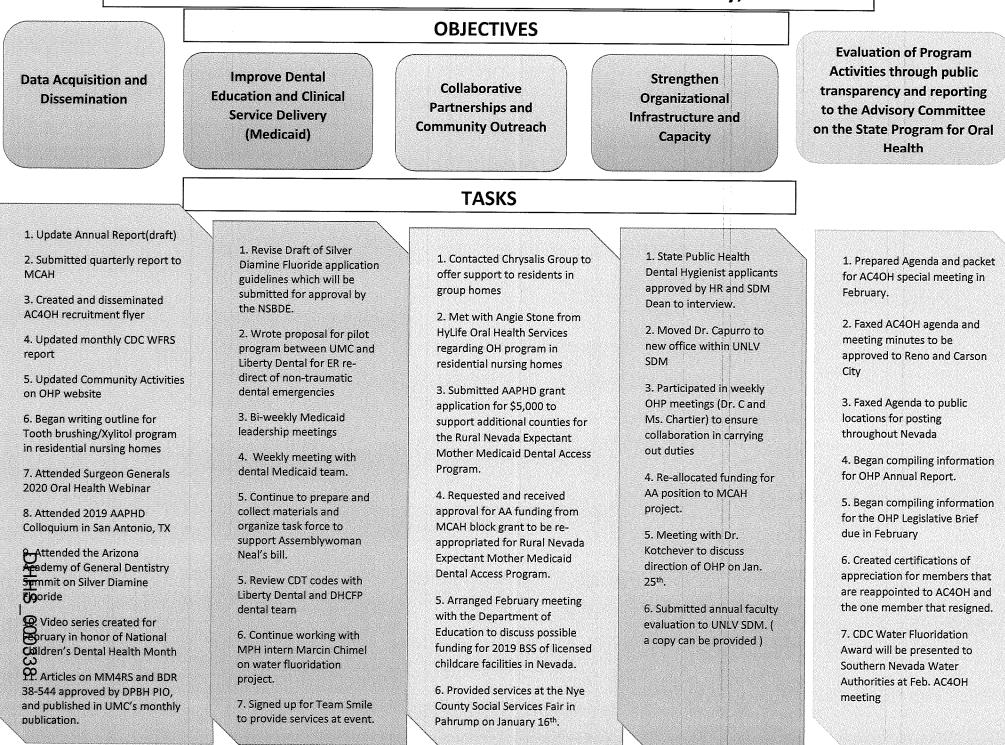
I acknowledge receipt of this evaluation.

Executive Vice President & Provost's Comments, if any:

Executive Vice President and Provost's Name

Executive Vice President and Provost's Signature

# OHP MONTHLY REPORT to the CMO SUMMARY-January, 2019



1/2019

- 1. This month the hiring committee met to review interview questions and candidates for the State Public Health Dental Hygienist. Two candidates were identified as meeting the minimal requirements and were approved by Dean West for an interview. One of the candidates is out of the country until March. It is anticipated that an interview date will be set with both candidates for the first week in March.
- 2. Dr. Capurro provided clinical insight and proposed legislative language for BDR 38-544. The language will be finalized in February after a thorough review of available DHHS funding.
- 3. The Program prepared for the February 1<sup>st</sup> AC4OH legislatively focused meeting.
- 4. Dr. Capurro prepared to move offices within UNLV SDM.
- 5. Approval was provided by Ms. Vicki Ives to redirect MCH Block Grant funds to support a Rural Nevada Expectant Mother Medicaid Dental Access Program. The project will be planned to begin in April.
- 6. Dr. Capurro prepared an article on the MM4RS project which was published in the UMC Hospital monthly newsletter.
- 1. Dr. Capurro along with Ms. Jessica Woods, SNHD Dental Hygienist, filmed a series of oral health messaging for SNHD.
- 2. Dr. Capurro attended a CE on silver diamine fluoride (SDF) to help shape the Nevada SDF policy that will be submitted to the Nevada Board of Dental Examiners for approval.
- 3. Dr. Capurro attended the American Institute of Dental Public Health annual conference January 23-25<sup>th</sup>.
- 4. January 16<sup>th</sup> Nye County Social Services event to provide oral exams, dental cleanings, and preventive services. We were accompanied by Liberty Dental's educational coordinator and Ms. Woods of the SNHD.

# February 2019

# To Do List

- 5. Preparation for March 1<sup>st</sup> AC4OH meeting will continue.
- 6. February 1<sup>st</sup> AC4OH meeting will be held. Meeting will include presentation to the Southern Nevada Water Authority and Henderson Water Authority and awarding CDC 2017 Water Fluoridation Award.
- 7. Dr. Capurro is working with the SNHD on HRSA 19-031, Ryan White HIV/AIDS Program Part C Capacity Development Program grant.
- 8. The OHP team will attend the February  $2^{nd}$  Give Kids a Smile event at UNLV.
- 9. The OHP team will attend the Team Smile event on February 21<sup>st</sup>.
- 10. The OHP team will meet with AC4OH Chair and Vice-Chair, Cathie Davenport and Chris Garvey, to discuss a more meaningful method to solicit advice from AC4OH.
- 11. OHP will attend the January 18th CCOH oral health coalition meeting.
- 12. Dr. Capurro will continue to work closely with Assemblywoman Neal as the bill moves forward.
- 13. Annual report and legislative brief for the Oral Health Program will be finalized.

- 14. Dr. Capurro and Dr. Tongsiri, Liberty Dental, will be meeting with Mason Van Houweling, CEO of UMC, to discuss a proposed emergency room redirect project for non-traumatic dental conditions.
- 15. Dr. Capurro will continue to follow up with Division Administrators on the progress of the subgrant to C16188.
- 16. Dr. Capurro will move offices within UNLV
- 17. Begin ASTDD National Annual Report
- 18. Write article for the Nevada Dental Association quarterly journal.
- 19. Complete SDF policy
- 20. Present with Shauna Tavcar, DHCFP, at the Nevada Pediatric Dentist Annual Summit on February 9<sup>th</sup>.
- 21. Work with DHCFP dental team to identify possible solutions to ASC access to care issues.
- 22. Collaborative meeting will be held on February 14<sup>th</sup> with the Department of Education to discuss possible funding for 2019 Basic Screening Survey of Licensed Childcare Centers.
- 23. Dr. Capurro will attend and present at the Nevada Dental Association Legislative Day on February 27<sup>th</sup>.

From: Sent: To: Cc: Subject:

acapurro@health.nv.gov Wednesday, February 20, 2019 11:58 AM poya@doe.nv.gov; elizabeth.chartier@unlv.edu CASKEW@dwss.nv.gov; pmgardner@doe.nv.gov Re: Oral Health - Child Care Centers

Good Morning,

Thank you for providing the list of licensed child care centers. Beth and I are meeting with the ASTDD biostatistician that was contracted with us for the 2017 HS BSS next week. We should have a working budget to you the week of March 4th.

Best regards, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya

Sent: Tuesday, February 19, 2019 3:15 PM To: Antonina Capurro; elizabeth.chartier@unlv.edu Cc: Christell Askew; Patrice M. Gardner Subject: Oral Health - Child Care Centers

Hi, I have attached a list of licensed child care centers that are in the rural areas. I didn't complete the column for Head Starts as I didn't know to which ones you went. Also, the highlighted programs are pre-k settings in elementary schools. You probably don't need to visit these, but we can discuss.

This should give you a rough idea for travel purposes.

Let me know if you have questions.

Patti

Patti Oya, Director Office of Early Learning and Development Nevada Department of Education 9890 S. Maryland Pkwy, Suite 210 Las Vegas, NV 89183

702.486.6492 Office

From:Antonina Capurro <antonina.capurro@unlv.edu>Sent:Thursday, March 14, 2019 5:19 PMTo:Ihsan AzzamSubject:CMO Report from OHPAttachments:CMOMonthlyReportSummary.docxFeb19 (1).docx; SDOHighlights.docxFebruary.docx

Good Afternoon,

Hope this email finds you well. Attached is the CMO report that describes the activities of the OHP team during the month of February.

If additional information is needed or if questions arise about specific activites, please do not hesitate to contact me. Thank you,

Antonina

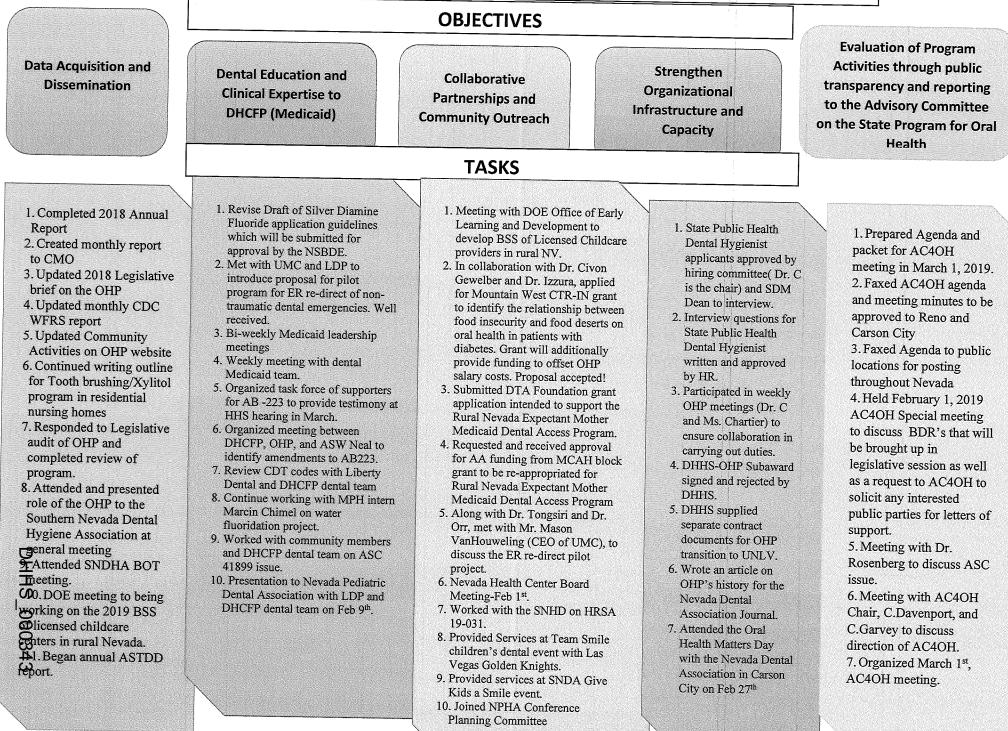


Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube





2/2019

- 1. This month the hiring committee met to review interview questions and candidates for the State Public Health Dental Hygienist. Two candidates were identified as meeting the minimal requirements and were approved by Dean West for an interview. One of the candidates is out of the country until March. It is anticipated that an interview date will be set with both candidates for the first week in March.
- 2. The February 1<sup>st</sup> AC4OH legislatively focused meeting was held. Meeting included the presentation of CDC 2017 Water Fluoridation Awards to the Southern Nevada Water Authority and Henderson Water Authority.
- 3. The legislative language for BDR 38-544/AB223 was finalized and Dr. Capurro coordinated meetings between DHCFP and ASW Neal to identify amendments.
- 4. Dr. Capurro prepared an article on the history and direction of OHP for the Nevada Dental Association Journal. It will be published in the spring edition.
- 5. The Department of Education has approved funding for a 2019 Basic Screening Survey of Licensed Childcare Centers in rural Nevada. A preliminary budget and project outline are underway.
- 6. The article on BDR 38-544 was published in the UMC Hospital monthly newsletter in February. The article can be accessed online at: <u>https://issuu.com/umcmarketing/docs/the\_pulse</u>
- 7. The oral health messaging series filmed by Dr. Capurro and Ms. Jessica Woods, SNHD Dental Hygienist, aired on the SNHD Facebook page and through their media outlets during the month of February. Two videos were released each week of the month for nine total videos: <u>https://youtu.be/Gltnj1n1hDg</u>
- 8. Annual report and legislative brief for the Oral Health Program finalized.
- 9. Dr. Capurro continues to work with the SNHD on HRSA 19-031, Ryan White HIV/AIDS Program Part C Capacity Development Program grant.
- 10. The OHP team attended the February 2<sup>nd</sup> Give Kids a Smile event at UNLV.
- 11. On February 6<sup>th</sup>, Dr. Capurro and Dr. Tongsiri, Liberty Dental, met with Mason Van Houweling, CEO of UMC, to discuss a proposed emergency room redirect project for non-traumatic dental conditions. The proposal was very well received.
- 12. Dr. Capurro and Ms. Shauna Tavcar, DHCFP, presented at the Nevada Pediatric Dentist Annual Summit on February 9<sup>th</sup>.
- The OHP team met with AC4OH Chair and Vice-Chair, Cathie Davenport and Chris Garvey, to discuss a more meaningful method to solicit advice from AC4OH on March 14<sup>th</sup>.
- 14. Ms. Chartier attended the Team Smile event on February 21st.
- 15. Dr. Capurro attended the Nevada Dental Association Legislative Day on February 27th.

March 2019

# To Do List

- 1. Conduct March 1<sup>st</sup> AC4OH meeting.
- 2. Prepare a presentation on the State Oral Health Program for Den 7255-Dental Public Health Research and Practice on March 7<sup>th</sup>.
- Dr. Capurro will continue to work closely with Assemblywoman Neal as the bill moves forward. The bill will be heard on March 8<sup>th</sup>.
   DHHS 000344

- 4. Attend the March 9th Special Olympics, Healthy Athletes, Special Smiles event.
- 5. Dr. Azzam will be meeting with the OHP team on March 12<sup>th</sup>. Meetings with Mr. Van Houweling and Dean West will be arranged.
- 6. Dr. Capurro will continue to follow up with Division Administrators on the progress of the subgrant to C16188 or the current version of the subaward.
- 7. Finalize and submit the ASTDD National Annual Report.
- 8. Complete SDF policy
- 9. Continue to work with DHCFP dental team to identify possible solutions to ASC access to care issues. (update the rate was increased and will be adjusted April 1<sup>st</sup>)
- 10. The article on the MM4RS project will be published in the UMC Hospital monthly newsletter, the Pulse, in March.
- 11. Submit a final budget for the 2019 Basic Screening Survey of Licensed Childcare Centers to Patti Oya.
- 12. Present on an OHP update at the March 15<sup>th</sup> CCOH meeting.
- 13. Continue to work with the SNHD on HRSA 19-031, Ryan White HIV/AIDS Program Part C Capacity Development Program grant due March 19<sup>th</sup>.
- 14. The OHP team will work with DPBH to make travel arrangements to attend the March 22<sup>nd</sup> Oral Health Day in Carson City with the oral health coalitions and Nevada Dental Hygiene Association.
- 15. Prepare a legislative packet of information on OHP for the March 22<sup>nd</sup> Oral Health Day.
- 16. Complete a programmatic outline for the Rural Expectant Mother Dental Access project.

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
Sent:	Monday, April 15, 2019 2:40 PM
То:	Ihsan Azzam
Subject:	CMO Reports for March 2019
Attachments:	CMOMonthlyReportMarch2019.docx; SDOHighlights.docxMARCH.2019.docx

Good Afternoon,

Hope this email finds you well. Attached is the CMO report that describes the activities of the OHP team during the month of March.

If additional information is needed or if questions arise about specific activities, please do not hesitate to contact me. Thank you,

Antonina

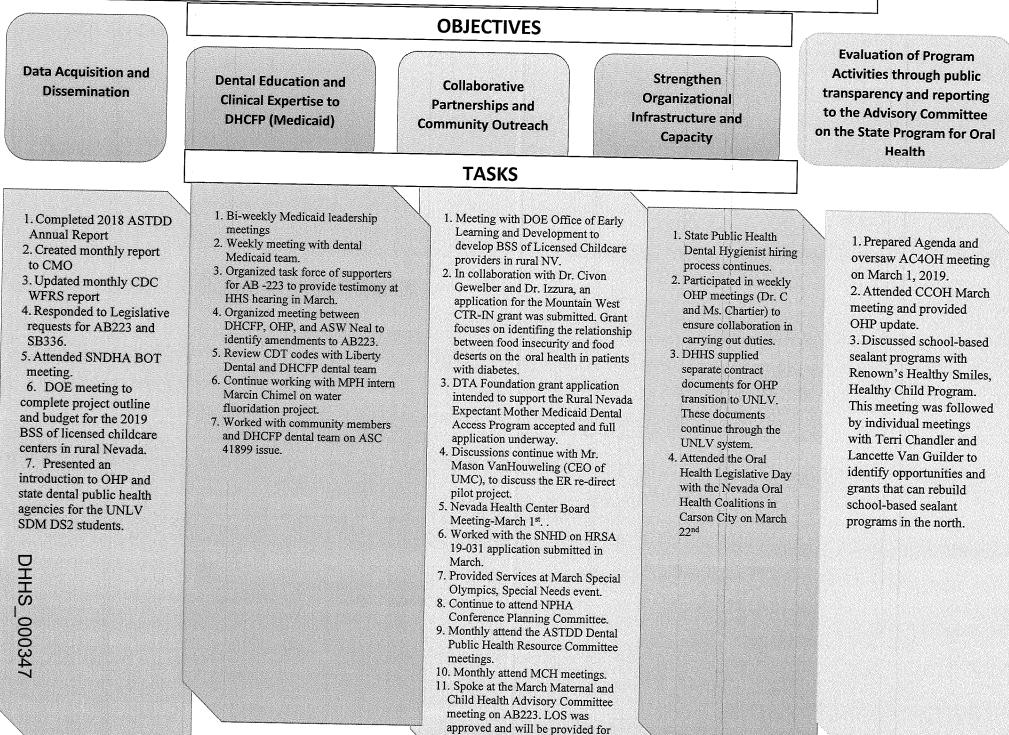


Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube





the hill.

- 1. Gave a presentation on the State Oral Health Program for Den 7255-Dental Public Health Research and Practice on March 7<sup>th</sup>.
- 2. Reviewed project abstracts on oral health topics for the American Public Health Association 2019 Annual Meeting and Expo to ensure the meeting is a successful contribution to NPHA's goal of making the U.S. the healthiest nation in one generation.
- 3. March 1<sup>st</sup> AC4OH meeting.
- 4. AB223 was heard on March 8<sup>th</sup> and Dr. Capurro presented the bill with Assemblywoman Neal.
- 5. Annual report and legislative brief for the Oral Health Program prepared and mailed to the oral health coalitions and was included in the oral health coalition packets that were given to each legislator.
- 6. HRSA 19-031, Ryan White HIV/AIDS Program Part C Capacity Development Program grant was submitted in March. Dr. Capurro worked with SNHD on the development of this grant.
- On March 12<sup>th</sup>, Dr. Azzam, Dr. Capurro and Dr. Tongsiri, Liberty Dental, met with Mason Van Houweling, CEO of UMC, to discuss next steps of the emergency room redirect project for non-traumatic dental conditions. IT discussions will occur with the teladentistry team in April.
- 8. Attended the March 9<sup>th</sup> Special Olympics, Healthy Athletes, Special Smiles event.
- 9. Presented on an OHP update at the March 15<sup>th</sup> CCOH meeting and took meeting minutes.
- 10. ASTDD National Annual Report submitted as part of ASTDD's CDC grant.
- 11. The article on MM4RS was published in the UMC Hospital monthly newsletter in March. The article can be accessed online at: <u>https://issuu.com/umcmarketing/docs/the\_pulse</u>
- 12. The OHP team attended the March 22<sup>nd</sup> Oral Health Day in Carson City with the oral health coalitions and Nevada Dental Hygiene Association.
- 13. Dr. Capurro named American Dental Association's 2018 10 Under 10 Dentist Award.

# April 2019

# To Do List

- 1. Dr. Capurro asked by DHCFP to speak at the April Medical Care Advisory Committee meeting to highlight OHP's recent collaboration with Liberty Dental Plan and UMC of Southern Nevada to redirect non-traumatic dental conditions in EDs.
- 2. Dr. Capurro will continue to follow up with Division Administrators on the progress of the subgrant to C16188 or the current version of the subaward.
- 3. Complete SDF policy and submit to NSBDE for Board opinion.
- 4. Continue to finalize project outline and budget for the 2019 Basic Screening Survey of Licensed Childcare Centers for DOE, Patti Oya.
- 5. Nevada Dental Association Journal spring edition will be released with OHP article.
- 6. Continue to work on Rural Expectant Mother Dental Access project with MCH.
- 7. Nevada Health Centers Board Retreat April 4-5th
- 8. Attend National Oral Health Conference April 13-17th
- 9. Complete and request DPBH approval for FY 20 and 21 biennium OHP budget and contract for June BOE meeting.

- 10. Submit abstracts for the Nevada Public Health Association Conference and Nevada Primary Care Association Conference.
- 11. Will attend hearings and committee meetings for AB223 and SB 336. Necessary DPBH ALSRs will be written.
- 12. Complete Dental Trade Alliance full proposal. Abstract was accepted for submission of full proposal. This project will fund a Northern Nevada Rural Expectant Mother Dental Access project.
- 13. Continue to monitor and assist Healthy Smiles, Healthy Child to reestablish school based sealant programs in the north.
- 14. Keep in close contact with CSN Dental Hygiene Program as CSN Faculty Practice are reviewed and BS program complete accreditation site visit.

From: Sent:	Antonina Capurro <acapurro@health.nv.gov> Wednesday, June 12, 2019 9:24 AM</acapurro@health.nv.gov>
То:	Patti Oya
Cc:	elizabeth.chartier@unlv.edu
Subject:	Meeting Requested for Educational Project for Licensed Childcare Providers in Rural Nevada

Good Morning Patti,

Hope this email finds you well. We have been a bit overwhelmed this legislative session and haven't had an opportunity to speak with you about the next steps for the licensed childcare oral health screening. Now that things are calming down a bit, we would like to schedule a time to meet with you discuss next steps.

Would you be available next Thursday or Friday? We are fairly open both days and can work around your schedule.

Please let me know and I will send a calendar invitation.

Thank you, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Elizabeth Chartier <<u>elizabeth.chartier@unlv.edu</u>> Date: Mon, May 20, 2019 at 1:06 PM Subject: Status of the BSS/Educational Project for Licensed Childcare Providers in the rural To: <<u>poya@doe.nv.gov</u>> Cc: Antonina Capurro <<u>antonina.capurro@unlv.edu</u>>

#### Good morning,

I hope that you are doing well. I just wanted to check in with you regarding the status of the BSS/Educational Project for the rural Licensed Childcare Providers in rural Nevada. Please let me know at your earliest convenience if you have any questions or concerns with the Scope of Work or Budget Proposal as we would like to start working on the webinar in the near future.

Thank you again for your partnership.

Regards, Beth



#### Beth Chartier, RDH, MPH University of Nevada, Las Vegas School of Dental Medicine

elizabeth.chartier@unlv.edu Office: 702-744-4566 Mobile: 240-477-3572

unlv.edu · Twitter · Facebook · Instagram · YouTube

NOTICE: The information contained in this email may contain confidential and/or proprietary information intended only for the use of the individual(s) or entity(ies) named above. If you are not the intended recipient of this email, or the employee or agent responsible for delivering this email to the intended recipient, you are hereby notified that any unauthorized use, dissemination or copying of this email is strictly prohibited. If you have received this email in error, notify the sender by replying to this message and delete the email from your system

From:	poya@doe.nv.gov
Sent:	Tuesday, July 2, 2019 1:54 PM
То:	elizabeth.chartier@unlv.edu; acapurro@health.nv.gov
Subject:	RE: Scope of Work - Dental Screening and Oral Health Education for Licensed Child Care
-	Facilities in Rural Nevada

Hi, I'm finally able to begin to move forward with this contract.

I'm double checking that the contract will be between NDE and Division of Public and Behavioral Health (or Board of Regents, UNLV).

Patti

From: Elizabeth Chartier [mailto:elizabeth.chartier@unlv.edu]
Sent: Thursday, April 11, 2019 12:45 PM
To: Patti Oya
Cc: Antonina Capurro
Subject: Scope of Work - Dental Screening and Oral Health Education for Licensed Child Care Facilities in Rural Nevada

Good afternoon Patti,

I hope that this email finds you well. I have attached the Scope of Work for the Dental Screening and Oral Health Education for Licensed Child Care Facilities in Rural Nevada project, as well as a revised and cleaned up version of the estimated budget. I have started the Nevada Registry application and have included a scanned copy for your review. Once we have finished the outline of the training, we will submit it for approval. If you have any questions or concerns, please feel free to contact me at any time.

Thank you and have a great day. Respectfully, Beth Chartier



Beth Chartier, RDH, MPH

Interim State Public Health Dental Hygienist University of Nevada, Las Vegas School of Dental Medicine

elizabeth.chartier@unlv.edu Office: 702-744-4566 Mobile: 240-477-3572

univ.edu • Twitter • Facebook • Instagram • YouTube

NOTICE: The information contained in this email may contain confidential and/or proprietary information intended only for the use of the individual(s) or entity(ies) named above. If you are not the intended recipient of this email, or the employee or agent responsible for delivering this email to

From:poya@doe.nv.govSent:Tuesday, July 23, 2019 12:22 PMTo:acapurro@health.nv.gov; elizabeth.chartier@unlv.eduSubject:RevisedAttachments:Interlocal Contract.docx; SOW and Budget UNLV School of Dental 7-23-19.docx

Hi, I have attached the revised contract and SOW.

You'll notice on the SOW I spread the cost and activities of the bio statistician across all three parts, but this does not change the total amount awarded. I also changed the end date of Part 2 as we discussed.

If these look good to you, I'll send to our contracts person for review. When I receive back from him, I will send to you for signature.

Patti

Patti Oya, Director Office of Early Learning and Development Nevada Department of Education

We've Moved (as of May 20, 2019)! 2080 E Flamingo Rd, Suite 210 Las Vegas, NV 89119

702.486.6492 Office 702.668.4340 Fax 702.810.8175 Cell

This message and accompanying documents are covered by the Electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

#### ATTACHMENT A: SCOPE OF WORK AND BUDGET

#### Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada

Team: Antonina Capurro DMD, MPH, MBA Elizabeth Chartier RDH, MPH Phone: 702-774-4566 Fax: 702-774-2651

Part 1: Project Planning and Facility Education Timeline: October 1, 2019-December 31, 2019 Total Cost: \$26,317.52

Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed child care facilities throughout rural Nevada (see script attached). Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Four, comparable, Nevada Registry approved webinars will be offered that provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
- All travel arrangements and purchase orders for screening supplies will be completed during this time frame.
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - Developing of a data entry program

#### Part 2: Dental Screening and Classroom Education Timeline: January 1, 2020-May 31, 2020 Total Cost: \$5,822.81

Scope of work

• Each participating classroom within an individual child care center will receive a gradelevel appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.

- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual child care center will receive:
  - A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child),
  - Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating child care center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating child care facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Selection of replacement schools/sites

#### Part 3: Technical Assistance with Evaluation Activities Timeline: April 1, 2020-December 31, 2020 Total Cost: \$3,620.00

Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating child care facilities one month following completion of the screenings. This survey will provide data to measure compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

#### Script for Introductory Calls to Child Care Centers

Hello, my name is Marc Chimel and I am calling on behalf of the State of Nevada Oral Health Program. The state dentist and dental hygienist are planning a trip to rural Nevada this fall to visit licensed child care facilities. They will be offering free dental screenings, education to teachers, "goody bags" for the children as well as some other great gifts for your classrooms. They are very excited to be given the opportunity to provide these services and supplies at no cost to your center and the families of the children you serve. Is this a good time to ask you a few questions about your center?

- 1. We would like to bring toothbrushes for all the children in your center. How many children do you have enrolled in your center?
- 2. The dental screenings will be given to children in the 3-5 year age range. How many children do you have enrolled in this age group?
- 3. How many classrooms do you have in the 3-5 year age group?
- 4. What are the hours and days the children in the 3-5 age range are enrolled?
- 5. We are planning our trip during the months of September November. Are there any days or times during those months that you will be closed? Including holidays and weekends?
- 6. We plan to offer a 90-minute educational webinar to the teachers, staff and directors about oral health and tooth brushing in the classroom. We are planning to offer four webinars in July each on Tuesday evenings. Is there a specific time that you would suggest the webinar be scheduled to get the maximum number of participants from your center? If July is not a good month, is another month better?
- 7. How many educators/teachers do you have in your facility?
- 8. When the details of our trip are finalized, who is the best person to speak with at your facility about this project?

Thank you for your time in answering these questions. We look forward to serving your facility. If you would like any additional information about the Nevada Oral Health Program, feel free to visit our website at: http://dpbh.nv.gov/Programs/OH/OH-Home/

## <u>NEVADA POLICY FOR URGENT DENTAL ISSUES IDENTIFIED DURING COMMUNITY</u> <u>SCREENING</u>

http://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Programs/OH/Boards/AC4OH/Meetings/2017/P olicy%20for%20Urgent%20Dental%20Issues%20Identified%20During%20Community%20Screening-Nina%20Edits(2).pdf

DHHS\_000357

#### INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

#### A Contract Between the State of Nevada Acting By and Through Its

Department of Education Office of Early Learning and Development 2080 E Flamingo Road, Suite 210 Las Vegas, NV 89119 Contact: Patti Oya 702-486-6492 poya@doe.nv.gov

#### And

Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine 1001 Shadow Lane, Las Vegas, NV 89106 Contact: Dr Antonina Capurro 702-774-2573 acapurro@health.nv.gov

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services of the Department of Education hereinafter set forth are both necessary to the Department of Education and in the best interests of the State of Nevada;

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. <u>REQUIRED APPROVAL</u>. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. <u>DEFINITIONS</u>. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.

3. <u>CONTRACT TERM</u>. This Contract shall be effective subject to Board of Examiner's approval (anticipated to be October 8, 2019) to March 31, 2021, unless sooner terminated by either party as set forth in this Contract.

4. <u>TERMINATION</u>. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until 30 days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason federal and/or State Legislature funding ability to satisfy this Contract is withdrawn, limited, or impaired.

5. <u>NOTICE</u>. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.

Page 1 of 4

6. <u>INCORPORATED DOCUMENTS</u>. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT A: SCOPE OF WORK AND BUDGET

7. <u>CONSIDERATION</u>. Board of Regents, UNLV agrees to provide the services set forth in paragraph (6) at a cost as specified in Attachment A: Scope of Work and Budget with the total contract or installment payable: Project Planning and Facility Education - \$26,317.52; Dental Screening and Classroom Education - \$5,822.81; Technical Assistance and Evaluation Activities - \$3,620.00, not exceeding \$35,760.33. Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of legislative appropriation may require.

8. <u>ASSENT</u>. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

a. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with all state and federal regulations and statutes.

b. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.

c. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained a minimum three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

10. <u>BREACH; REMEDIES</u>. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs. It is specifically agreed that reasonable attorneys' fees shall not exceed \$150 per hour.

11. <u>LIMITED LIABILITY</u>. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. Actual damages for any State breach shall never exceed the amount of funds which have been appropriated for payment under this Contract, but not yet paid, for the fiscal year budget in existence at the time of the breach.

12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, acts of public enemy, acts of terrorism, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.

13. INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.

14. <u>INDEPENDENT PUBLIC AGENCIES</u>. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing

Page 2 of 4

contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.

15. <u>WAIVER OF BREACH</u>. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.

16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.

17. <u>ASSIGNMENT</u>. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.

18. <u>OWNERSHIP OF PROPRIETARY INFORMATION</u>. Unless otherwise provided by law any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.

19. <u>PUBLIC RECORDS</u>. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.

20. <u>CONFIDENTIALITY</u>. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.

21. <u>PROPER AUTHORITY</u>. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).

22. <u>GOVERNING LAW; JURISDICTION</u>. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the exclusive jurisdiction of and venue in the First Judicial District Court, Carson City, Nevada for enforcement of this Contract.

DHHS\_000360

23. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Attorney General.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

On Behalf of the University of Nevada, Las Veg Public Agency #1				- V &	
		Evenutive Dir	ector of Sponsore	d Programs	
Lori Ciccone, MBA, CRA	Date	Title			
Nevada Department of Education Public Agency #2					
hone Ebert	Date	Superintende Title	ent of Public Instr	uction	
ignature – Nevada State Board of Examiners		APPROVED BY BC	OARD OF EXAM	IINERS	
		On(Date	)		
Approved as to form and compliance with law b	ру:				
	•	On		 	
Deputy Attorney General for Attorney General,	State of Nevada		ate)		

DHHS\_000361

From: Sent: To: Subject: poya@doe.nv.gov Tuesday, July 23, 2019 3:19 PM acapurro@health.nv.gov; elizabeth.chartier@unlv.edu RE: Revised

Hi, thanks for resending. One more thing, do you know your vendor number? For our other UNLV contract it is D35000813 – Office of the Controller. Would it be the same?

Patti

From: Antonina Capurro Sent: Tuesday, July 23, 2019 1:27 PM To: Patti Oya; elizabeth.chartier@unlv.edu Subject: Re: Revised

I'm glad we thought of this now. I've gone ahead and removed the funding needed to pay for the indirect. The total direct costs would now be: 32, 509.39 with a 10% indirect for a total budget of 35,760.32. The funding in part 1 was reduced to cover the indirect. The revised SOW is attached. Use of an administrative assistant was included in component 1 and we will reduce the number of hours available accordingly to meet the new budgeted amount.

Thank you, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya Sent: Tuesday, July 23, 2019 12:39:11 PM To: Antonina Capurro; elizabeth.chartier@unlv.edu Subject: RE: Revised

Unfortunately, I can't increase the total so you'll need to pull the indirect out of the costs

From: Antonina Capurro Sent: Tuesday, July 23, 2019 12:32 PM **To:** Patti Oya; elizabeth.chartier@unlv.edu **Subject:** Re: Revised

Hello Patti,

Thank you for making these changes. The SOW and contract look great. I just remembered that all of our DPBH-UNLV contracts include a standard indirect cost of 10% of the direct costs. This would be an additional expense of 3,576.03 for a total contract cost of 39,336.36. I believe DPBH charges an indirect for contract's as well, but that may be negotiable.

How would you like to proceed?

Best regards, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya Sent: Tuesday, July 23, 2019 12:22:16 PM To: Antonina Capurro; elizabeth.chartier@unlv.edu Subject: Revised

Hi, I have attached the revised contract and SOW. You'll notice on the SOW I spread the cost and activities of the bio statistician across all three parts, but this does not change the total amount awarded. I also changed the end date of Part 2 as we discussed.

If these look good to you, I'll send to our contracts person for review. When I receive back from him, I will send to you for signature.

Patti

Patti Oya, Director Office of Early Learning and Development Nevada Department of Education

We've Moved (as of May 20, 2019)! 2080 E Flamingo Rd, Suite 210 Las Vegas, NV 89119

702.486.6492 Office 702.668.4340 Fax 702.810.8175 Cell This message and accompanying documents are covered by the Electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this Information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
Sent:	Monday, July 29, 2019 11:30 AM
То:	Ihsan Azzam
Subject:	CMO Report for July from OHP [no encryption]
Attachments:	SDOHighlights.docxJuly.docx; CMOMonthlyReportJuly2019.docx

Good Afternoon Dr. Azzam,

Hope this email finds you well. Attached is the CMO report and highlights page that describe the activities of the OHP team during the month of July.

If you would like additional information or if questions arise about specific activities, please do not hesitate to contact me.

Thank you,

#### Antonina



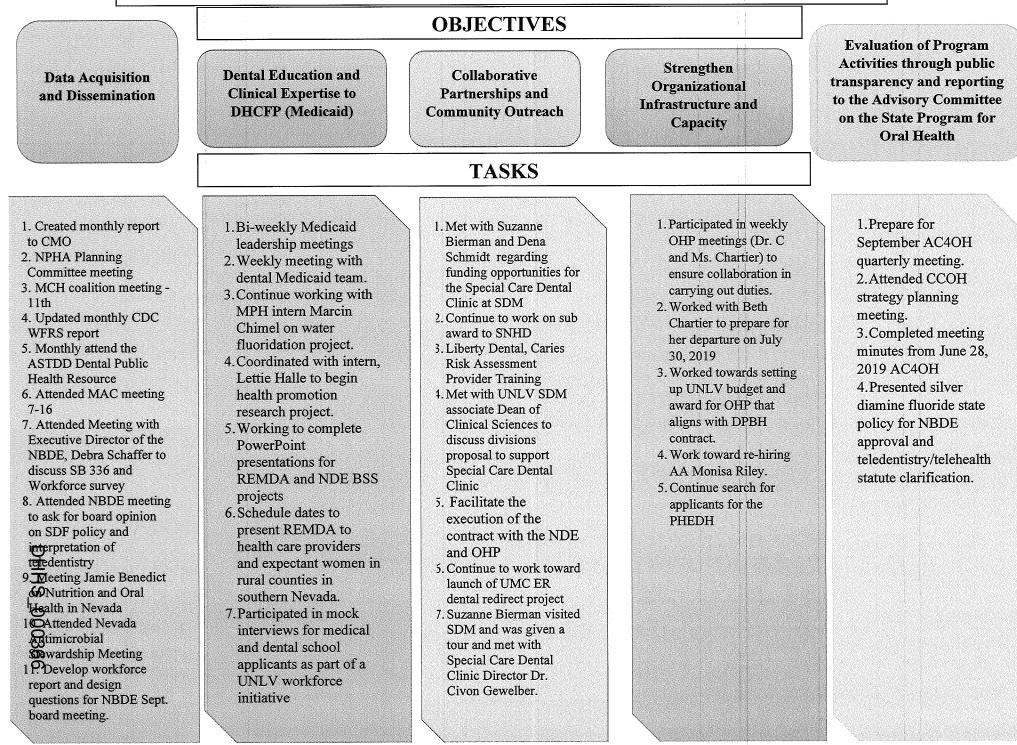
Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor,

School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu • Twitter • Facebook • Instagram • YouTube

# **OHP MONTHLY REPORT to the CMO SUMMARY-July 2019**



With SFY19 reconciliations behind us and SFY20 C17117 fully executed, the Oral Health Program has worked diligently to successful implement and complete program obligations before Beth Chartier, Interim State Public Health Dental Hygienist, leaves the Program on July 30<sup>th</sup>. The OHP and Dr. Civon Gewelber, Director of the UNLV Special Care Dental Clinic, met with Director Whitley and his team of financial and legal experts to strategize funding opportunities to support and expand the clinic for this special population. Arrangements to present to healthcare providers and expectant women in the rural counties of southern Nevada are coming together, as we prepare to implement the Rural Expectant Mother Dental Access project (REMDA) at the end of August.

# August, 2019

# To Do List

- 1. Continue to complete tasks assigned during June dental access for adults with special health care needs meeting with Mr. Whitley and Administrative team.
- 2. Work with Marc Chimel to complete his internship poster presentation and continue to guide his research.
- 3. Implement Dr. Letti Hale's internship course content for project on health promotion for OHP.
- 4. Complete PowerPoint presentations for the Rural Expectant Mother Dental Access project (REMDA) and NDE BSS project.
- 5. Facilitate the execution of the contract with the Nevada Department of Education.
- 6. Solidify dates and locations to present REMDA to health care providers in rural Nevada and organize community presentation for counties without OBGYNs.
- 7. Launch UMC ER redirect project.
- 8. Complete proposal for rural workforce project.
- 9. Continue search for applicants for State Public Health Endorsed Dental Hygienist.
- 10. Implement REMDA
- 11. Submit workforce survey questions to NBDE for September 13<sup>th</sup> meeting discussion.

From: Sent: To: Subject: Patti Oya <poya@doe.nv.gov> Tuesday, August 20, 2019 2:50 PM elizabeth.chartier@unlv.edu; Antonina Capurro Re: Contract Signatures

Let's not make any changes until we see what BOE agenda we can make.

On Tue, Aug 20, 2019 at 2:43 PM -0700, "Antonina Capurro" <a href="mailto:acapurro@health.nv.gov">acapurro@health.nv.gov</a> wrote:

That's fine. Would this SOW with the November start date be appropriate then?

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <poya@doe.nv.gov> Sent: Tuesday, August 20, 2019 2:34:47 PM To: elizabeth.chartier@unlv.edu <elizabeth.chartier@unlv.edu>; Antonina Capurro <acapurro@health.nv.gov> Subject: Re: Contract Signatures

# Thanks

We may have to push back until Nov BOE

On Tue, Aug 20, 2019 at 2:30 PM -0700, "Antonina Capurro" <<u>acapurro@health.nv.gov</u>> wrote:

Good Afternoon Patti,

I am working with the UNLV Office of Sponsored Programs and hope to have a signature within the next week or two. Thank you,

Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program

DHHS 000368

1

1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <poya@doe.nv.gov>
Sent: Friday, August 16, 2019 12:02:34 PM
To: Antonina Capurro <acapurro@health.nv.gov>; elizabeth.chartier@unlv.edu <elizabeth.chartier@unlv.edu>
Subject: Contract Signatures

Hi, I had our contracts person review and think we are all set.

Attached – Interlocal Contract – signature needed on last page Data Privacy Agreement – two signatures needed on last page SOW is FYI only – no signature needed

I only need the signature pages returned - please sign in blue ink and scan in color. If you could send by next week, that would be great. We should still be able to make Oct BOE.

Thanks, Patti

Patti Oya, Director Office of Early Learning and Development Nevada Department of Education

We've Moved (as of May 20, 2019)! 2080 E Flamingo Rd, Suite 210 Las Vegas, NV 89119

702.486.6492 Office 702.668.4340 Fax 702.810.8175 Cell

This message and accompanying documents are covered by the Electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

#### INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

#### A Contract Between the State of Nevada Acting By and Through Its

Department of Education Office of Early Learning and Development 2080 E Flamingo Road, Suite 210 Las Vegas, NV 89119 Contact: Patti Oya 702-486-6492 poya@doe.nv.goy

And

Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine 1001 Shadow Lane, Las Vegas, NV 89106 Contact: Dr Antonina Capurro 702-774-2573 acapurro@health.nv.gov

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services of the Department of Education hereinafter set forth are both necessary to the Department of Education and in the best interests of the State of Nevada;

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. <u>REQUIRED APPROVAL</u>. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. <u>DEFINITIONS</u>. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.

3. <u>CONTRACT TERM</u>. This Contract shall be effective subject to Board of Examiner's approval (anticipated to be October 8, 2019) to March 31, 2021, unless sooner terminated by either party as set forth in this Contract.

4. <u>TERMINATION</u>. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until 30 days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason federal and/or State Legislature funding ability to satisfy this Contract is withdrawn, limited, or impaired.

5. <u>NOTICE</u>. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.

Page 1 of 4

6. <u>INCORPORATED DOCUMENTS</u>. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

#### ATTACHMENT A: SCOPE OF WORK AND BUDGET ATTACHMENT B: DATA SHARING AGREEMENT

7. <u>CONSIDERATION</u>. Board of Regents, UNLV agrees to provide the services set forth in paragraph (6) at a cost as specified in Attachment A: Scope of Work and Budget with the total contract or installment payable: Project Planning and Facility Education - \$25,373.24; Dental Screening and Classroom Education - \$6,405.09; Technical Assistance and Evaluation Activities - \$3,982.00, not exceeding \$35,760.33. Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of legislative appropriation may require.

8. <u>ASSENT</u>. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

a. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with all state and federal regulations and statutes.

b. <u>Inspection & Audit</u>. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.

c. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained a minimum three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

10. <u>BREACH; REMEDIES</u>. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs. It is specifically agreed that reasonable attorneys' fees shall not exceed \$150 per hour.

11. <u>LIMITED LIABILITY</u>. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. Actual damages for any State breach shall never exceed the amount of funds which have been appropriated for payment under this Contract, but not yet paid, for the fiscal year budget in existence at the time of the breach.

12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, acts of public enemy, acts of terrorism, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.

13. <u>INDEMNIFICATION</u>. Neither party waives any right or defense to indemnification that may exist in law or equity.

14. <u>INDEPENDENT PUBLIC AGENCIES</u>. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to

Page 2 of 4

supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.

15. <u>WAIVER OF BREACH</u>. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.

16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.

17. <u>ASSIGNMENT</u>. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.

18. <u>OWNERSHIP OF PROPRIETARY INFORMATION</u>. Unless otherwise provided by law any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.

19. <u>PUBLIC RECORDS</u>. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.

20. <u>CONFIDENTIALITY</u>. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.

21. <u>PROPER AUTHORITY</u>. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).

22. <u>GOVERNING LAW; JURISDICTION</u>. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the exclusive jurisdiction of and venue in the First Judicial District Court, Carson City, Nevada for enforcement of this Contract.

DHHS\_000372

23. ENTIRE AGREEMENT AND MODIFICATION. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Attorney General.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

ublic Agency #1		
		Executive Director of Sponsored Programs
ori Ciccone, MBA, CRA	Date	Title
Vevada Department of Education Public Agency #2		
hone Ebert	Date	Superintendent of Public Instruction Title
ignature – Nevada State Board of Examir	ners	APPROVED BY BOARD OF EXAMINERS
		On (Date)
Approved as to form and compliance with	law by:	
		On
Deputy Attorney General for Attorney Gen	neral, State of Neva	

DHHS\_000373

# ATTACHMENT B DATA SHARING AGREEMENT BETWEEN THE STATE OF NEVADA AND

#### Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine

1. This Data Sharing Agreement ("Agreement") is made by and between Board of Regents, NSHE ("Contractor") and the State of Nevada Department of Education("State").

2. The terms of this Agreement shall commence on October 2019 and end when the Contractor no longer is in possession of any Confidential Information. This Agreement may be terminated by either party hereto upon thirty (30) days written notice.

3. For purposes of this Agreement and any contracts to which it serves as an attachment and the Family Educational Rights and Privacy Act ("FERPA"), State designates Contractor an "school official" with a "legitimate educational interest" pursuant to 20 U.S.C. 1232g(b)(1)(A) and 34 C.F.R. 99.31(a)(1)(i)(B). Contractor and the State shall comply with the provisions of FERPA in all respects. Nothing in this Agreement may be construed to allow either party to maintain, use, disclose or share personally identifiable student information in a manner not allowed by state or federal law or regulation.

4. "Confidential Information" shall include any and all personally identifiable student information, as that term is defined 34 C.F.R. § 99.3 or any information shared under this agreement deemed to be confidential or private by the State.

5. "Disclose" or "disclosure" means to permit access to or the release, transfer, or other communication of Confidential Information contained in education records by any means, including oral, written, or electronic means, to any party except the party identified as the party that provided or created the record.

6. The State may disclose Confidential Information to Contractor for the purpose of developing and maintaining a statewide student information system; including, software implementation services, software maintenace services, training services, technical support services, and hosting services. Further disclosure by Contractor of any Confidential Information released to Contractor by the State is prohibited by this Agreement.

7. Contractor shall not: (i) disclose any Confidential Information to any unauthorized third party; (ii) make any use of Confidential Information except to perform its obligations under this Agreement; or (iii) make Confidential Information available to any of its employees, officers, or agents except those individuals who have been authorized by Contractor to use the information as a component of their project assignment(s). The term "unauthorized third party" for purposes of this Agreement does not include employees, officers, or agents of the State who are authorized to have access to the Confidential Information.

8. At the State's discretion, the state may elect to disclose to Contractor under this Agreement the Confidential Information identified within the State's Data Dicationary as currently established and, at such time it becomes necessary, as modified. No other personally identifiable student information will be disclosed to Contractor. The Department may also elect to disclose any Department program data such as individual performance information, fiscal records or education personnell data.

Page 1 of 4

*Revised 9/4/18* DHHS\_000374

9. Contractor agrees to use Confidential Information provided by the State, or any Nevada School District or charter school only for the purpose of fullfilling the Contractor's obligations under this Agreement and Contract.

10. Contractor understands that the Confidential Information is protected under state and federal law and agrees to immediately notify the State if any of the Confidential Information is disclosed, either intentionally or inadvertently. Such notice is not required if Contractor is directed to disclose certain Confidential Information, in writing, by the State.

11. Contractor agrees to protect Confidential Information in such a manner that it will be disclosed only to Contractor's staff whose duties under this Agreement specifically require them to have access to the Confidential Information and to any State approved subcontractors listed in this paragraph who have executed similar Data Sharing Agreements with State

a. State approved subcontractors executing similar Data Sharing Agreements:

LIST SUB(S) HERE AND ENGAGE EACH WITH UNIQUE AGREEMENT(S)

Not Applicable

12. Contractor and the State shall identify at least one authorized representative or data custodian from their respective agencies who shall be responsible for processing and responding to data requests from the other party. The State identifies Mr. Glenn Meyer (<u>gmeyer@doe.nv.gov</u>) as the authorized representative. Board of Regents, NSHE identifies Dr Antonina Capurro (acapurro@health.nv.gov) as the data custodian. These individuals shall be noted as Key Personnel and immediate notice to all parties of any change. Change notices will be delivered via email or courier and such notice must include the name of the new data custodian.

13. Upon request of the State, Contractor shall agree to permit the State to review or shall provide written assurances to the State regarding the use of Confidential Data under this Agreement. In such an event, the State shall provide appropriate notice and an adaquate timeframe for Contractor to prepare data. The purpose of this provision is to ensure that appropriate policies and procedures are in place to protect the Confidential Information and that there has been no further Disclosure of the Confidential Information.

14. All Contractor employees, officers, and agents with access to the Confidential Information must acknowledge that they are aware of and will abide by the provisions of this Agreement. Contractor agrees to remove any person from performing work who has violated the terms of this Agreement, or if the Contractor suspects any person to have violated the terms of the Agreement. Contractor shall notify the State of a breach of the Agreement within 10 days. If the United States Department of Education's Family Policy Compliance Office determines that the Contractor has violated paragraph 34 C.F.R. 99.31(a)(3), the State may not allow the Contractor access to personally identifiable information from education records for at least five years. 34 C.F.R. 99.67.

15. By disclosing Confidential Information to Contractor, the State is in no way assigning ownership of the Confidential Information to Contractor. Upon the termination of this Agreement for any reason, Contractor shall immediately return all Confidential Information, including all copies, to the State or destroy all Confidential Information in its possession, custody, or control unless otherwise agreed to in writing by both parties. Upon request, Contractor will provide the State with affidavits to this effect.

*Revised 9/4/18* DHHS\_000375

16. Contractor agrees to destroy the personally identifiable information, within 45 days, from the education records when the information is no longer needed for the purpose specified in this Agreement and the contract as amended and approved. The parties to this Agreement and contract may agree to extend the time period for destruction if needed.

17. This Agreement shall be governed by and construed in accordance with the laws of the Nevada. Any lawsuit pertaining to or affecting this Agreement shall be venued in the First Judicial District Court for the State of Nevada, in Carson City.

18. Violation of this Agreement is cause for immediate termination of this Agreement.

*Revised 9/4/18* DHHS\_000376

In witness hereto the parties signify their agreement by signature below:

Antonino Capurro, D.M.D, M.P.H., M.B.A.		Nevada Department of Education
	CERTIFICATI	DN:
I,	, have read th	nis Data Sharing Agreement and agree to abide
by its terms.		······································
Dated this day of	_, 20	
		Recipient
		······································
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·

# ATTACHMENT A: SCOPE OF WORK AND BUDGET

# Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada

Team: Antonina Capurro DMD, MPH, MBA Elizabeth Chartier RDH, MPH Phone: 702-774-4566 Fax: 702-774-2651

# Part 1: Project Planning and Facility Education Timeline: October 8, 2019-December 31, 2019 Total Cost: \$23,066.58 (\$2,306.66 10% Indirect)

Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed child care facilities throughout rural Nevada (see script attached). Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Four, comparable, Nevada Registry approved webinars will be offered that provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
- All travel arrangements and purchase orders for screening supplies will be completed during this time frame.
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - Developing of a data entry program

# Part 2: Dental Screening and Classroom Education Timeline: January 1, 2020-May 31, 2020 Total Cost: \$5,822.81 (\$582.28 10% Indirect)

Scope of work

• Each participating classroom within an individual child care center will receive a gradelevel appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.

- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual child care center will receive:
  - A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child),
  - Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating child care center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating child care facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Selection of replacement schools/sites

# Part 3: Technical Assistance with Evaluation Activities Timeline: April 1, 2020-December 31, 2020 Total Cost: \$3,620.00 (\$362 10% Indirect)

Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating child care facilities one month following completion of the screenings. This survey will provide data to measure compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

<b>Total Direct Cost:</b>	\$32,509.39
Indirect Cost of 10%:	\$3,250.94
Total Budget:	\$35,760.32

#### Script for Introductory Calls to Child Care Centers

Hello, my name is Marc Chimel and I am calling on behalf of the State of Nevada Oral Health Program. The state dentist and dental hygienist are planning a trip to rural Nevada this fall to visit licensed child care facilities. They will be offering free dental screenings, education to teachers, "goody bags" for the children as well as some other great gifts for your classrooms. They are very excited to be given the opportunity to provide these services and supplies at no cost to your center and the families of the children you serve. Is this a good time to ask you a few questions about your center?

- 1. We would like to bring toothbrushes for all the children in your center. Howmany children do you have enrolled in your center?
- 2. The dental screenings will be given to children in the 3-5 year age range. How many children do you have enrolled in this age group?
- 3. How many classrooms do you have in the 3-5 year age group?
- 4. What are the hours and days the children in the 3-5 age range are enrolled?
- 5. We are planning our trip during the months of September November. Are there any days or times during those months that you will be closed? Including holidays and weekends?
- 6. We plan to offer a 90-minute educational webinar to the teachers, staff and directors about oral health and tooth brushing in the classroom. We are planning to offer four webinars in July each on Tuesday evenings. Is there a specific time that you would suggest the webinar be scheduled to get the maximum number of participants from your center? If July is not a good month, is another month better?
- 7. How many educators/teachers do you have in your facility?
- 8. When the details of our trip are finalized, who is the best person to speak with at your facility about this project?

Thank you for your time in answering these questions. We look forward to serving your facility. If you would like any additional information about the Nevada Oral Health Program, feel free to visit our website at: http://dpbh.nv.gov/Programs/OH/OH-Home/

# <u>NEVADA POLICY FOR URGENT DENTAL ISSUES IDENTIFIED DURING COMMUNITY</u> <u>SCREENING</u>

http://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Programs/OH/Boards/AC4OH/Meetings/2017/P olicy%20for%20Urgent%20Dental%20Issues%20Identified%20During%20Community%20Screening-Nina%20Edits(2).pdf

DHHS\_000381

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
Sent:	Monday, September 16, 2019 12:23 PM
То:	Ihsan Azzam
Cc:	l.sherych@health.nv.gov
Subject:	OHP Report-August [no encryption]
Attachments:	SDOHighlights.docxAugust.docx; FY20 OHP Activity Goals.docx;
	CMOMonthlyReportAugust2019.docx
	and the second

Good Afternoon Dr. Azzam,

Hope this email finds you well. Attached is the CMO report that describes the activities of the OHP team during the month of August. Additionally, the FY20 OHP activity goals have been updated to reflect the recent loss of the State Public Health Dental Hygienist position. This document is also attached for your review.

Should additional information be needed or questions arise about specific activities, please do not hesitate to contact me.

Thank you,

Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

The key issue facing the Nevada Oral Health Program is staffing and sustainable funding. I continue to work to hire a State Public Health Dental Hygienist, but realize that this may not be possible this fiscal year. In order to fulfill obligations and accept new opportunities, I am preparing to hire two dental hygienists as contractors for separate and specific projects.

#### Highlight of ongoing and new projects:

#### Washoe County School District Clinical Services

This month, I met with the Director, Assistant Director, and Clinical Services Director for Washoe County Clinical Student Health Services who oversee all medical services for students enrolled in the Washoe County School District. This meeting was initially scheduled to discuss dental referral services for ID/DD adult students within the school district. However, after further evaluation of the school nursing systems, it was apparent that the school nurses were eager for oral health education and capable of completing an oral assessment on specific grade levels. From this meeting, it was decided that a pilot study on a set number of Title 1 schools over the SFY20 which will include a standardized method of data collection via BSS will begin spring 2020. A full contract between agencies is in development and professional development training on oral health, dental traumas, and BSS is scheduled for all 47 school nurses in December.

#### Rural Nevada Expectant Mother Dental Access Program with MCH

This month, I traveled over 1700 miles through 4 rural counties in Nevada to provide information on the importance of oral health during pregnancy as part of a collaborative project with the Maternal, Child, and Adolescent Health Department through a HRSA grant. While obstetric offices were targeted, the shortage of providers in many counties lead me to open the presentation to the general public through a presentation in the library or community center of the major town in each county. Flyers from the American Academy of Pediatrics with the Division logo, a magnet with oral health tips, a hygiene kit with pregnancy reminders and Medicaid information, and a medical clearance for dental treatment mock prescription pad were designed and included as an oral health kit for each medical and community health office. Additionally, materials were available to the public during each presentation. A survey on expectant mother's nutritional and behavioral habits and oral health status during pregnancy was also designed and disseminated.

#### ER Redirect for Non-Traumatic Dental Conditions

My work on a pilot project to reduce emergency room visits for non-traumatic dental conditions continues. My team is comprised of the Dental Director for Liberty Dental Plan, the sole Medicaid dental benefits administrator for Nevada, and the owner of Teladentistry. This program is a medical-dental integration pilot that will add a dental provider to the medical team in the ER. It will take place at University Medical Center of Southern Nevada. This month, I met once again with hospital administrators and the UMC attorney to discuss hospital regulations and the project outline. While the feedback from administrators is positive, there are extensive revisions that are needed to meet CMS and regulatory standards. I have a meeting in October with the district attorney's office to assist me in better understanding the nuances of healthcare law and to redesign the project parameters.

#### <u>AB223</u>

This month, I began work with our Medicaid dental team to design the outline for Nevada's CMS 1115 waiver as part of legislation recently passed to expand Medicaid dental benefits for adults with diabetes. The bill was originally designed with statewide implementation in mind but due in part to the fiscally neutral nature of the waiver, implementation will be geographically restricted. This has led to an investigation into implementation into certain counties or zip codes. However, I have advocated for expansion of services to the two FQHCs in the state (one north and one in the south) that offer dental benefits and already have a pool of diabetic patients. This will allow for analysis of a cohort of patients over time and an evaluation of medical savings through dental treatment will be possible. At the moment, I am designing my implementation plan proposal using data supplied by the FQHCs and will present my plan for consideration to the Medicaid Administrator at the end of September.

# September, 2019

# To Do List

- 1. Prepare for meeting with Administrator Lisa Sherych to discuss the direction of the Oral Health Program and identify possible funding options for pending legislative letters of intent.
- 2. Contract period for AA, Monisa Riley, ends September 6<sup>th</sup>. A contract extension will be requested.
- 3. Continue to work with Interns:
  - a. Work with Marc Chimel to complete his internship poster presentation and continue to guide his research.
  - b. Review and assist Dr. Letti Hale's in gathering data for her project on health promotion and public health marketing. Dr. Hale will be presenting her initial findings at the September 27<sup>th</sup> AC4OH meeting.
- 4. Train SNHD dental assistant for her part in the Rural Expectant Mother Dental Access project (REMDA).
- 5. Facilitate the execution of the contract with the Nevada Department of Education.
- 6. Provide contract language and oral health educational and training overview for Washoe County School District.
- 7. With Assemblywoman Neal present on AB223 as part of the Nevada Public Health Association Conference.
- 8. Begin to build PowerPoint for presentation on AB223 and teledentistry for the Nevada Health Conference in October.
- 9. Prepare legislative proposals for meeting with Senator Ratti.
- 10. Finalize investigation into access to peer reviewed resources for clinical DHHS team.
- 11. Prepare, plan, and execute September 27th AC4OH meeting.
- 12. Travel to American Dental Association Conference for CE and national recognition as recipient of Ten Under Ten award.
- 13. Submit workforce survey questions to NBDE for September 20<sup>th</sup> meeting discussion.
- 14. Prepare updated report on REMDA for MCH.
- 15. Prepare updated report on UNLV SDM Special Care Dental Clinic utilization. rates and associated budget for discussion with ADSD and DHCFP.

# July 2019-June 2020 Oral Health Program Activities

Data Acquisition and Dissemination Dental Education and Clinical Expertise to DHCFP (Medicaid)

Collaborative Partnerships and Community Strengthen Organizational Infrastructure and Capacity Evaluation of Program Activities through public transparency and reporting to the Advisory Committee on the State Program for Oral Health

# 1. Reports

- a. 2017 Dental Workforce Report
- b. Monthly CMO Report
- c. Year annual report
- d. Monthly inclusion of state water fluoridation data into CDC WFRS site
- e. Yearly ASTDD reporting
- 2. Legislative Implementation Plans
  - a. AB223-CMS 1115 waiver
  - b. SB 366-Medicaid chapter updates, benefit schedule, provider type and mapping

### 3. Dental Screening Pilot with Washoe County School District

- a. Contract in progress
- b. Course launch December 2019
- c. Liberty Dental Plan partnering to provide materials and supplies

### 4. Dental Education

- a. OHP Interns for 2019-2020
  - i. Marcin Chimel-Water Fluoridation and Reduction in Dental Decay Rates
  - ii. Lettie Hale-Health Promotion for Oral Health
- b. Conference Presentations
  - i. NPHA
  - ii. NHC
  - iii. PCA- webinar

# 5. Medicaid

- a. Bi-weekly leadership meetings
- b. Weekly meeting with dental team
- c. Clinical review of fair hearing requests, as needed
- d. Subject matter review, as needed
- e. Currently, working to bring dental benefits and Chp 1000-Dental into alignment with public health intent
- f. Completing review of dental charts and patient histories from ASCs

# 6. Collaborative Partnerships

- a. Rural Nevada Expectant Mother Dental Access Program-with MCH (primary funder)
- b. Licensed Childcare Oral Health Education and Basic Screening Survey—NDE (primary funder)
- c. ER Redirect Project for Non-Traumatic Dental Conditions—UMC of Southern Nevada, Liberty Dental Plan, and Teladentistry
- d. Dental License Plate for Outreach Project Fund—with UNLV SDM, TMCC Hygiene, and CSN Hygiene Alumni Associations and NDA and NDHA

- e. UNLV Special Care Dental Clinic—contract to support the clinic with ADSD, DHCFP, and OHP
- f. Rural Nevada Dental Workforce Initiative-in progress
- g. Diabetes, Food Deserts, and Oral Health Research Project—with UNLV SDM and UNLV SOM

### 7. Internal Infrastructure

- a. FY21 Contract-not yet written
- b. State Public Health Dental Hygienist position-unfilled
- c. Temporary AA position-Ms. Monisa Riley, extended until November

#### 8. Outreach

- a. Active participation in Special Olympics, Special Smiles
- b. NSBDE approved SDF and GI course by OHP for PHE RDHs

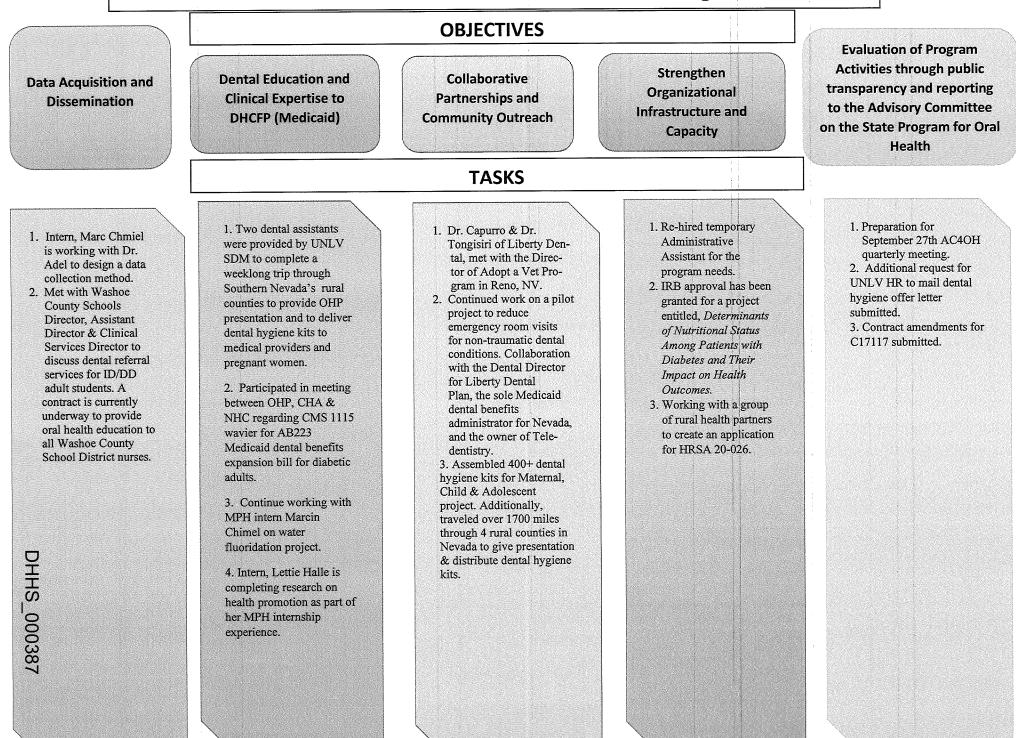
# 9. Transparency and Reporting

- a. Quarterly AC4OH meeting organization and reporting
- b. Quarterly CCOH reporting
- c. NSBDE reporting
- d. NDA meetings
- e. MCH Coalition
- f. ASTDD-Public Health Resource Committee
- g. NVHC Board Meetings

#### 10. Grants

- a. Dental Trade Alliance—grant announcement Sep 2019 for expansion of Rural Nevada Expectant Mother Dental Access Program
- b. HRSA 20-025, Rural Health Network Development Program

# **OHP MONTHLY REPORT to the CMO SUMMARY-August 2019**



From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Monday, September 23, 2019 1:48 PM
То:	Antonina Capurro; elizabeth.chartier@unlv.edu
Subject:	RE: Contract Signatures

Hi, just following up. Any luck with signatures? At this point we may need to shoot for Dec BOE meeting date.

Patti

From: Antonina Capurro Sent: Monday, September 09, 2019 11:35 AM To: Patti Oya; elizabeth.chartier@unlv.edu Subject: Re: Contract Signatures

Good Morning Patti,

I do apologize for the delay in responding to your message. I have been out of the office for the last two weeks, but will contact the UNLV Office of Sponsored Programs today for an update. As soon as I hear from them, I will be in touch. Thank you, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <poya@doe.nv.gov>
Sent: Tuesday, September 3, 2019 11:35:56 AM
To: elizabeth.chartier@unlv.edu <elizabeth.chartier@unlv.edu>; Antonina Capurro <acapurro@health.nv.gov>
Subject: FW: Contract Signatures

Hi, any word on when you will be able to get this signed?

Patti

From: Patti Oya
Sent: Friday, August 16, 2019 12:03 PM
To: Antonina Capurro (acapurro@health.nv.gov); elizabeth.chartier@unlv.edu
Subject: Contract Signatures

Hi, I had our contracts person review and think we are all set.

Attached – Interlocal Contract – signature needed on last page Data Privacy Agreement – two signatures needed on last page SOW is FYI only – no signature needed

I only need the signature pages returned - please sign in blue ink and scan in color. If you could send by next week, that would be great. We should still be able to make Oct BOE.

Thanks, Patti

Patti Oya, Director Office of Early Learning and Development Nevada Department of Education

We've Moved (as of May 20, 2019)! 2080 E Flamingo Rd, Suite 210 Las Vegas, NV 89119

702.486.6492 Office 702.668.4340 Fax 702.810.8175 Cell

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>	
Sent:	Tuesday, October 1, 2019 11:49 AM	
То:	Amalie Alver	
Subject:	Re: Diabetic Research Project	

Good Morning Amalie,

Yes, I see that this patient was added to the schedule. Thank you for checking in with me about the google calendar.

Best regards, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 [F: (702)774-2521 [E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Tuesday, October 1, 2019 9:11 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: Re: Diabetic Research Project

Good morning,

I just scheduled a patient for October 29th at 8:30 am for the dental screening. I believe I added you to the google calendar last week, are you able to see the appointments?

Thank you!

Amalie

On Wed, Sep 18, 2019 at 9:54 AM Nirav Patel <nirav.patel@unlv.edu> wrote:

------ Forwarded message ------From: **Antonina Capurro** <<u>acapurro@health.nv.gov</u>> Date: Wed, Sep 18, 2019 at 9:29 AM Subject: Diabetic Research Project To: <u>nirav.patel@unlv.edu</u> <<u>nirav.patel@unlv.edu</u>> Cc: civon.gewelber@unlv.edu <<u>civon.gewelber@unlv.edu</u>> Good Morning Nirav,

Civon just informed me that her calendar for October is fairly busy. I wanted to let you know that I will be available on the following dates to cover any dental exams that come up. Also, would you please share the research calendar with me? Thank you, Antonina

Availability for Dental Exams: October 4th after 12:30pm October 18th all day October 23rd all day October 25th all day October 29th all day November 1st all day November 6th after 1:00pm November 8th after 1:00pm November 13th all day

My cell phone number is 702-677-7416 and my office number is 702-774-2573

### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program <u>1001 Shadow Lane</u>, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov <u>www.dhhs.nv.gov</u> | <u>www.division website.nv.gov</u> Helping People. It's who we are and what we do.

Nirav Patel

Clinical Research Coordinator UNLV School of Medicine <u>1707 W. Charleston Blvd. Suite 220</u> & 230 Las Vegas NV 89102 Office: 702-671-4351 Fax: 702-671-6410 <u>nirav.patel@unlv.edu</u>

From:	Amalie Alver <alver@unlv.nevada.edu></alver@unlv.nevada.edu>
Sent:	Tuesday, October 1, 2019 12:31 PM
То:	civon.gewelber@unlv.edu; Antonina Capurro
Cc:	Kenneth Izuora
Subject:	Friday 10/04 Dental Screen, diabetes study

Good afternoon,

Subject 012 has confirmed their appointment on 10/04 at 1 pm, so we will have just the one dental screening this Friday afternoon.

See you then!

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Tuesday, October 1, 2019 4:02 PM
То:	Amalie Alver; civon.gewelber@unlv.edu
Cc:	Kenneth Izuora
Subject:	Re: Friday 10/04 Dental Screen, diabetes study

Thank you! Civon will be there this Friday to cover this appointment.

# Antonina Capurro, D.M.D, M.P.H, M.B.A

Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu>

Sent: Tuesday, October 1, 2019 12:31 PM

To: civon.gewelber@unlv.edu <civon.gewelber@unlv.edu>; Antonina Capurro <acapurro@health.nv.gov> Cc: Kenneth Izuora <kenneth.izuora@unlv.edu>

**Subject:** Friday 10/04 Dental Screen, diabetes study

Good afternoon,

Subject 012 has confirmed their appointment on 10/04 at 1 pm, so we will have just the one dental screening this Friday afternoon.

See you then!

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Tuesday, October 8, 2019 1:39 PM
To:	Amalie Alver; civon.gewelber@unlv.edu
Subject:	Re: Diabetes Study: Subject 019 Visit 10/11 Rescheduled

Thank you for letting us know.

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Tuesday, October 8, 2019 12:14 PM To: civon.gewelber@unlv.edu <civon.gewelber@unlv.edu>; Antonina Capurro <acapurro@health.nv.gov> Cc: Kenneth Izuora <kenneth.izuora@unlv.edu>; Nirav Patel <nirav.patel@unlv.edu> Subject: Diabetes Study: Subject 019 Visit 10/11 Rescheduled

Hello all,

The patient who was scheduled for dental screening this Friday at 1 pm has rescheduled to next Friday, October 18th at 2 pm. We currently do not have any patients scheduled for dental exams this Friday.

Thank you,

From:	civon.gewelber@unlv.edu
Sent:	Tuesday, October 15, 2019 10:18 AM
To: " ' ' '	Amalie Alver
Cc:	Antonina Capurro; Kenneth Izuora; Nirav Patel
Subject:	Re: Diabetes Study Dental Visit 12/16

Antonina,

Do you think you can do this one? I'm supposed to be in clinic that morning but with this much notice I can have clinic start a little later. Thanks,

Civon

Sent from my iPhone

On Oct 15, 2019, at 8:39 AM, Amalie Alver <<u>alver@unlv.nevada.edu</u>> wrote:

Hello,

We have a patient who was hoping to have her dental screening performed at the next visit she has scheduled with Dr. Izuora which is 12/16 at 9 am. Since this is a Monday morning I wanted to check and see if this was possible with the dentist schedule? If not we can ask her to come in at a different time.

Thank you,

Amalie Alver MD Candidate, Class of 2022 AMWA Secretary Scientific Foundations Curriculum Subcommittee Representative University of Nevada Las Vegas School of Medicine <u>alver@unlv.nevada.edu</u> | (781) 605-9887

From:	Kenneth Izuora <kenneth.izuora@unlv.edu></kenneth.izuora@unlv.edu>
Sent:	Tuesday, October 15, 2019 2:58 PM
To:	Antonina Capurro
Cc:	Amalie Alver; Nirav Patel; civon.gewelber@unlv.edu
Subject:	Re: Diabetes Study Dental Visit 12/16
Thank you.	
Kenneth Izuora, MD, MBA, FACE Associate Professor of Medicine	
	Department of Internal Medicine
University of Nevada Las Vegas,	
1701 W. Charleston Blvd., Suite	230
Las Vegas, NV 89102.	
Phone: (702) 671-2345 Fax: (702) 671-2376	
Email: <u>kenneth.izuora@unlv.edu</u>	
Ennan: <u>Ronnounie dora (ogannie da</u>	
×	
On Tue, Oct 15, 2019 at 11.27 A	M Antonina Capurro < <u>acapurro@health.nv.gov</u> > wrote:
Good Morning,	MAntonina caparro sacaparro (ancananina. 500) Miote.
Good Morning,	
I can certainly be there on 12	1/16 for the Ram careening
-	
Thank you,	
Antonina	
Antonina Capurro, D.M.	
Nevada State Dental Hea	alth Officer
Nevada Department of Health a	
Division Public and Behavioral	6
1001 Shadow Lane, MS 7411, I	
	-2521 [E: acapurro@health.nv.gov
www.dhhs.nv.gov   www.divisi	on website.nv.gov
II. I. '. Desult II's sales are set	
Helping People. It's who we ar	e and what we do.
From: Amalie Alver < <u>alver@unl</u>	<ul> <li>Zuba chevan v</li> </ul>
Sent: Tuesday, October 15, 201	
	<u>o@health.nv.gov</u> >; Kenneth Izuora < <u>kenneth.izuora@unlv.edu</u> >; Nirav Patel
	gewelber@unlv.edu <civon.gewelber@unlv.edu></civon.gewelber@unlv.edu>
Subject: Diabetes Study Dental	
Subject. Diabetes Study Delitar	
4	

Hello,

We have a patient who was hoping to have her dental screening performed at the next visit she has scheduled with Dr. Izuora which is 12/16 at 9 am. Since this is a Monday morning I wanted to check and see if this was possible with the dentist schedule? If not we can ask her to come in at a different time.

Thank you,

Amalie Alver MD Candidate, Class of 2022 AMWA Secretary Scientific Foundations Curriculum Subcommittee Representative University of Nevada Las Vegas School of Medicine <u>alver@unlv.nevada.edu</u> | (781) 605-9887 --Amalie Alver MD Candidate, Class of 2022

AMWA Secretary Scientific Foundations Curriculum Subcommittee Representative University of Nevada Las Vegas School of Medicine alver@unlv.nevada.edu | (781) 605-9887

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Wednesday, October 16, 2019 12:31 PM
To:	Amalie Alver
Subject:	Re: Diabetes Study Dental Visit Friday 10/18

Thank you for the update. I will plan to be there on Friday.

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Wednesday, October 16, 2019 11:47 AM To: Antonina Capurro <acapurro@health.nv.gov> Cc: civon.gewelber@unlv.edu <civon.gewelber@unlv.edu>; Kenneth Izuora <kenneth.izuora@unlv.edu>; Nirav Patel <nirav.patel@unlv.edu> Subject: Diabetes Study Dental Visit Friday 10/18

Good afternoon,

We do have one patient scheduled to come in on Friday at 1 pm for the dental screening. The patient did not answer the phone and I made multiple attempts to contact them and confirm that they will still be coming, but to my knowledge they haven't called to cancel or reschedule so hopefully they will make it.

Thank you,

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
Sent:	Wednesday, October 16, 2019 5:09 PM
То:	Ihsan Azzam
Cc:	l.sherych@health.nv.gov
Subject:	OHP Report-September [no encryption]
Attachments:	Nevada Oral Health Policy Priorities.pdf; SDOHighlights.docxSeptember.docx;
	CMOMonthlyReportSEPtember2019.docx

Good Afternoon Dr. Azzam,

Hope this email finds you well. Attached is the CMO report that describes the activities of the OHP team during the month of September. Additionally, I created a document of oral health policy priorities for meetings with legislators. This document is also attached for your review. Assemblywoman Neal informed me that she would like to pick up idea # 3 and expand Medicaid dental benefits for adults with ID/DD for next session. Senator Ratti has expressed interest in idea #4 and has invited me to present these ideas to the Legislative Committee on Healthcare. I am tentatively scheduled to meet with her and Assemblywoman Cohen to discuss the Oral Health Program and tour the dental school next week.

Lastly, would you please help me find information on the current status of proposed amendments to the OHP contract budget, C17117? Last month, I submitted an amendment to move personnel funds from the dental hygiene position to the 'other' category to hire contract dental hygienists. This movement of funds would also allow me to retain the interim administrative assistant, Monisa Riley. Her temporary contract expires on November 8th, but I will not be able to renew her contract unless the amendment is approved by DPBH and moved to UNLV by the end of next week.

Any assistance you might be able to provide would be greatly appreciated.

Thank you,

Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

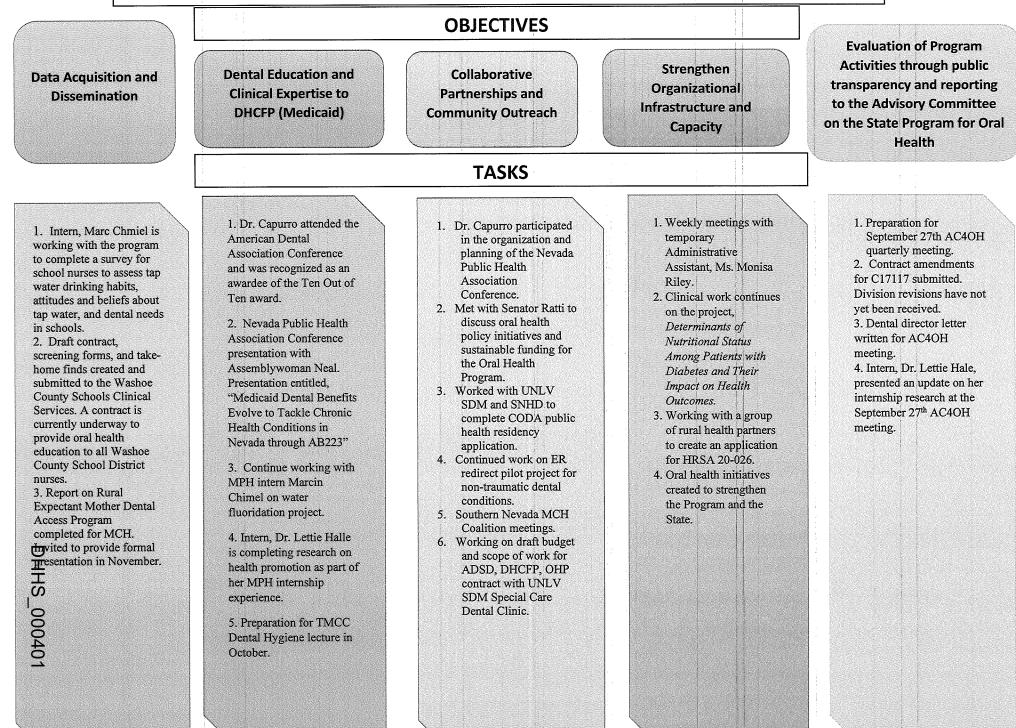
The key issue facing the Nevada Oral Health Program is staffing and sustainable funding. This month the Rural Expectant Mother Dental Access project with MCH was completed and all reports submitted. In addition, the Nevada State Board of Dental Examiners approved OHP to certify public health endorsed dental hygienist to place silver diamine fluoride and interim therapeutic restorations through a course OHP will build. In order to fulfill obligations and accept new opportunities, I am preparing to hire two dental hygienists as contractors for the contract with the Nevada Department of Education and the silver diamine course that will be built for implementation in the spring.

Also, this month, I met with Senator Ratti to discuss oral health initiatives for the 2021 legislative session, lectured with Assemblywoman Neal, and met with Dr. Ricks, Assistant Surgeon General and Chief Dental Officer for the U.S. Public Health Service Assistant Surgeon General. Dr. Ricks has agreed to visit OHP in April to help us strategize for the next year. In October, I will meet with Senator Ratti, Assemblywoman Cohen, and Assemblywoman Carlton, will complete another presentation with Assemblywoman Neal, and will continue to build relationships with legislators.

# October, 2019 To Do List

- 1. Contract period for AA, Monisa Riley, ends November 11<sup>th</sup>. A contract extension will be requested if the OHP budget amendment is completed by mid-October.
- 2. Continue to work with Interns:
  - a. Work with Marc Chimel to complete his internship poster presentation and continue to guide his research.
  - b. Review and assist Dr. Letti Hale's in gathering data for her project on health promotion and public health marketing.
- 3. Continue to work with SNHD dental assistant as part the Rural Expectant Mother Dental Access project (REMDA).
- 4. Build and present PowerPoint for presentation on AB223 and teledentistry/ER pilot project for the Nevada Health Conference.
- 5. Finalize investigation into access to peer reviewed resources for clinical DHHS team.
- 6. Submit workforce survey questions to NBDE for December meeting discussion.
- 7. Follow up meeting with Senator Ratti and Assemblywoman Cohen
- 8. The following contracts are in progress and will be reviewed during October:
  - i. Nevada Department of Education for licensed childcare
  - ii. Washoe County School District, Clinical Services
  - iii. UMC, LDP, and Teladentistry
  - iv. License Plate MOU
  - v. ADSD, DHCFP, DPBH, OHP and UNLV SDM Special Care Dental Clinic

# OHP MONTHLY REPORT to the CMO SUMMARY-September 2019



From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>	
Sent:	Friday, October 18, 2019 12:32 PM	
То:	Amalie Alver	
Subject:	Re: Diabetes Study Dental Visit Friday 10/18	

Great, thanks!

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Friday, October 18, 2019 11:30 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: Re: Diabetes Study Dental Visit Friday 10/18

Hi Antonina,

I just spoke with the patient and they will be here at 1 pm today, see you then!

Amalie

On Wed, Oct 16, 2019, 12:30 PM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Thank you for the update. I will plan to be there on Friday.

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Amalie Alver <<u>alver@unlv.nevada.edu</u>> Sent: Wednesday, October 16, 2019 11:47 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Cc: civon.gewelber@unlv.edu <civon.gewelber@unlv.edu>; Kenneth Izuora <<u>kenneth.izuora@unlv.edu</u>>; Nirav Patel <<u>nirav.patel@unlv.edu</u>> **Subject:** Diabetes Study Dental Visit Friday 10/18

Good afternoon,

We do have one patient scheduled to come in on Friday at 1 pm for the dental screening. The patient did not answer the phone and I made multiple attempts to contact them and confirm that they will still be coming, but to my knowledge they haven't called to cancel or reschedule so hopefully they will make it.

Thank you,

Amalie Alver
MD Candidate, Class of 2022
AMWA Secretary
 Scientific Foundations Curriculum Subcommittee Representative
University of Nevada Las Vegas School of Medicine
alver@unly.nevada.edu.l (781) 605-9887

From:	Jaime Sparling <jaimesparling@atsu.edu></jaimesparling@atsu.edu>	
Sent:	Wednesday, October 30, 2019 9:54 AM	
То:	acapurro@health.nv.gov	
Subject:	A.T. Still University - Graduate Health Studies Online	



# Hi Antonina,

#### Do you need to continue working while you study?

The nature of our online programs allow you to continue working full-time while pursuing your degree.

We use an online education platform called Canvas. You can access it anytime – even on the go from your cell phone. It's where you'll find your dashboard, inbox and calendar, making it easy to keep up with your advisors, classmates and course requirements.

All of our programs are fully accredited by the Higher Learning Commission, so your qualifications will speak for themselves.

Please let us know what program you are interested by selecting your program of interest.

To learn more about each program, please visit the links below:

- Doctor of Health Sciences
- Doctor of Education in Health Professions
- Doctor of Health Administration
- Master of Science in Kinesiology
- Master of Health Administration
- Master of Public Health
- Master of Public Health Dental Emphasis

#### Best wishes,

CGHS Admissions A.T. Still University 877-626-5577 cghsonlineadmissions@atsu.edu

#### Contact us

### Schedule an appointment

From: Sent: To: Cc: Subjec		civon.gewelber@unlv.edu Thursday, November 7, 2019 6:44 PM Amalie Alver Antonina Capurro; Kenneth Izuora; Nirav Patel Re: Subject 009 cancellation tomorrow
Thank	you for the info!	
Sent fr	om my iPhone	
		PM, Amalie Alver <alver@unlv.nevada.edu> wrote:</alver@unlv.nevada.edu>
	Hello all, Subject 009 has cancelled	d for tomorrow so there are no dental visits on tomorrow's schedule.
	Thank you,	
		rriculum Subcommittee Representative Vegas School of Medicine

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Friday, November 8, 2019 6:07 AM
To:	civon.gewelber@unlv.edu; Amalie Alver
Subject:	Re: Subject 031 dental visit

Agreed. One of us will be there. Thank you, Antonina

#### Antonina Capurro, D.M.D, M.P.H, M.B.A– Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: civon.gewelber@unlv.edu <civon.gewelber@unlv.edu>
Sent: Thursday, November 7, 2019 6:44 PM
To: Amalie Alver <alver@unlv.nevada.edu>
Cc: Antonina Capurro <acapurro@health.nv.gov>
Subject: Re: Subject 031 dental visit

I can probably be there. I'm scheduling myself for surgery end of February so the 13th should be good.

Sent from my iPhone

On Nov 7, 2019, at 2:36 PM, Amalie Alver <alver@unlv.nevada.edu> wrote:

Hello Dr. Capurro and Dr. Gewelber,

Subject 031 would like to have their second visit on 02/13/20 around 1:00 pm when they return for their 3-month appointment. This is a Thursday afternoon, is it possible for one of you to be here? I know it's quite a long time from now but I wanted to check in and see if it's a possibility.

Thank you,

From: Sent: To: Subject:	Antonina Capurro <acapurro@health.nv.gov> Tuesday, November 12, 2019 10:05 AM Gladys Cook; DuAne Young; Jodi Patton; Julie Lindesn Re: School Health and Wellness with NDE</acapurro@health.nv.gov>	nith; Shauna Tavcar
Good Morning,		
at 3:45 pm if that time would	: I will be in Reno on Thursday the 14th. I could com I work. If not, perhaps we could arrange a zoom me m you.	
Antonina Capurro, D.M. Nevada State Dental Hea		
Nevada Department of Health a Division Public and Behavioral 1001 Shadow Lane, MS 7411, I T: (702) 774-2573  F: (702)774 www.dhhs.nv.gov   www.divisi	Health - Oral Health Program D280 Las Vegas, NV 89106 -2521  E: acapurro@health.nv.gov	
Helping People. It's who we ar	e and what we do.	
From: Gladys Cook <gcook@dh Sent: Tuesday, November 12, 2 To: Antonina Capurro <acapurr< th=""><th></th><th>ov&gt;; Jodi Patton</th></acapurr<></gcook@dh 		ov>; Jodi Patton

<jpatton@dhcfp.nv.gov>; Julie Lindesmith <j.lindesmith@dhcfp.nv.gov>; Shauna Tavcar <stavcar@dhcfp.nv.gov>
Subject: RE: School Health and Wellness with NDE

Hello Ms. Capurro,

The School Health Services (SHS) team looks forward to meeting with you and discuss how Medicaid can assist with the collaborative projects.

Please let me know when is best time to meet and we can set up a meeting.

Thank you,



Nevada Department of Health and Human Services DIVISION OF REALTH CASE FINANCING AND POLICY Gladys Cook, SSPS III Nevada Department of Health and Human Services Division of Health Care Financing and Policy 1000 E. William Street, Suite 111 | Carson City, NV 89701 (775) 684-7596 | gcook@dhcfp.nv.gov Http://dhhs.nv.gov/ | http://dhcfp.nv.gov/ Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u> <u>NOTICE</u>: This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: DuAne Young <dyoung@dhcfp.nv.gov> Sent: Tuesday, November 12, 2019 8:38 AM To: Antonina Capurro <acapurro@health.nv.gov>; Richard Whitley <rwhitley@dhhs.nv.gov> Cc: Gladys Cook <gcook@dhcfp.nv.gov> Subject: RE: School Health and Wellness with NDE

Thank you for this update, I was not aware of all the work you are doing. I have added Glady who can set up a meeting so we can explore how to leverage the work you are doing with the new SPA and what might be reimbursable.

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Monday, November 11, 2019 1:48 PM To: DuAne Young <<u>dyoung@dhcfp.nv.gov</u>>; Richard Whitley <<u>rwhitley@dhhs.nv.gov</u>> Subject: School Health and Wellness with NDE

Good Afternoon,

Following our Friday meeting on school health and wellness with the NDE, I am writing to provide you with an update on collaborative projects underway between the Oral Health Program and NDE. Please let me if additional information is needed on any of these topics. I look forward to hearing from you.

Best regards, Antonina

#### Licensed Childcare Oral Health Education and Basic Screening Survey

The Oral Health Program has partnered with the Nevada Department of Education to launch a non-invasive open-mouth basic screening survey, create educational webinars, and build classroom toothbrush stations and protocols for licensed childcare centers throughout rural Nevada. The data collected as a part of this project will be compared to the 2017 Head Start BSS to better understand what health disparities and educational opportunities exist in rural Nevada. The contract is tentatively scheduled to be heard at the January Board of Examiners meeting. If you would like a copy of the contract scope of work, please let me know.

#### **Oral-Health Survey for Nevada School Nurses**

Mr. Marcin Chimel is an intern with the Division of Public and Behavioral Health, Oral Health Program. He is completing a project to evaluate the association between water fluoridation and dental decay rates in Nevada. As part of this project, a survey has been designed with OHP to evaluate the oral health needs and observations of school nurses throughout Nevada. This project is being completed as part of Mr. Chimel's requirements for a Master in Public Health degree through UNR School of Community Health Sciences. The survey can be accessed at: https://www.surveymonkey.com/r/S7LY258

#### Washoe County School District Clinical Services

Dr. Tongsiri, Liberty Dental Plan Director, and I met with the Director, Assistant Director, and Clinical Services Director for Washoe County Clinical Student Health Services who provide oversight of the medical services for students enrolled in the Washoe County School District in September. This meeting was initially scheduled to discuss dental referral services for ID/DD adult students within the school district. However, after further evaluation of the school nursing systems, it was apparent that the school nurses were eager for oral health education and that the opportunity existed to complete oral assessments at specific grade levels.

From this meeting, a contract has been drafted to launch a pilot study to train the Washoe County school nurses to assess the dental status of 3rd and 6th graders in selected Title 1 schools and to collect this data using a national a standardized non-invasive method of intraoral data collection known as the Basic Screening Survey(BSS). This information is invaluable to OHP's preparation for application to the next CDC oral health program grant in 2021.

Liberty is providing all necessary supplies and materials. However, it is estimated that \$3-5,000 will be required to upgrade the dental tab in the Infinite Campus system to reflect the information collected through the Basic Screening Survey and ensure efficient analysis of data collected. We estimate that 850 elementary school students will be served through this project. Drs. Capurro and Tongsiri are scheduled to provide an oral health training session on December 21st as part of a professional development day to 47 nurses. The training will cover such topics as an overview of oral health in school settings, dental trauma 101, BSS data collection, and fluoride varnish application.

Unfortunately, it appears that funding reallocation of OHP salary savings will not be approved and paper forms, manual entry, and analyses by OHP will be required to assess the outcomes of this study. Hopefully, this inefficient process will be somehow avoided.

#### Oral Health License Plate Launch with Drawing Completion for School-Age Students

In order to increase revenue streams for the Oral Health Program and to raise visibility for dental public health services, the Oral Health Program is partnering with the UNLV SDM Alumni Association, Nevada Dental Association, and Nevada Dental Hygiene Association to apply for a specialty license plate through the Division of Motor Vehicle (DMV). For each license plate purchased the group will receive between \$20.00 and \$25.00 in fees.

Marketing, education, and public awareness are essential components of this project. To create a conversation around oral health, the Oral Health Program will launch a drawing competition in the spring of 2020 for school-age children across the state. The winning picture will appear as the graphic on the license plate. A board of judges will be solicited to review submissions.

#### Future Ideas for Oral Health and Education

- 1. Connect the free and reduced lunch program application with Medicaid enrollment. Conversely, direct
- certification provide free and reduced lunch to those enrolled in Medicaid. Using state-level matching, authorize pairing of SNAP, TANF, FDPIR, the foster care program, and Medicaid participation data with school enrollment and report these results to the school district.
- 2. Oral health policy priorities list (attached): #2: Health Screening Before School Entrance Policy and #7: Statewide School-Based Sealant Program for Nevada

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Tuesday, November 12, 2019 10:08 AM
То:	Amalie Alver; civon.gewelber@unlv.edu
Subject:	Re: Monday 11/18 subject 011

Good Morning,

I wasn't going to be in the office on Monday, but Civon if you can't see this pt, I will come in. Just let me know. Thank you,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Tuesday, November 12, 2019 9:25 AM To: civon.gewelber@unlv.edu <civon.gewelber@unlv.edu>; Antonina Capurro <acapurro@health.nv.gov> Subject: Monday 11/18 subject 011

Good morning,

We have a patient coming back for a follow-up visit on Monday morning at 10:20 am, are either of you available to do a dental screen sometime around then after her visit?

From:	Amalie Alver <alver@unlv.nevada.edu></alver@unlv.nevada.edu>
Sent:	Tuesday, November 12, 2019 11:30 AM
То:	Antonina Capurro; civon.gewelber@unlv.edu; Nirav Patel; Kenneth Izuora
Subject:	Subject 025 11/13

Hello,

Just a reminder that we do have a patient scheduled for dental screen and visit 2 tomorrow morning at 10 am. I was unable to confirm with the patient over the phone, but I left a voicemail reminding them to be here. I will not be here tomorrow but Nirav will be here. Thanks!

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Friday, November 15, 2019 8:38 AM
То:	Amalie Alver; Civon Gewelber
Cc:	Nirav Patel
Subject:	Re: Monday 11/18 subject 011

Good Morning,

Yes, I will plan to be there for both patients on Wednesday and Friday. Thank you, Antonina

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Thursday, November 14, 2019 3:54 PM To: Civon Gewelber <civon.gewelber@unlv.edu> Cc: Antonina Capurro <acapurro@health.nv.gov>; Nirav Patel <nirav.patel@unlv.edu> Subject: Re: Monday 11/18 subject 011

Thank you! Yes, there is one patient scheduled at 10:20 pm and one patient at 1 pm.

Dr. Capurro, are you available next Wednesday at 8 am and Friday at 1 pm for dental screenings? Those are the two additional dental screenings next week that we have scheduled.

Amalie

On Wed, Nov 13, 2019 at 3:21 PM Civon Gewelber <<u>civon.gewelber@unlv.edu</u>> wrote: Hello,

I can come in Monday at 10:20 to do the screening. I'm on vacation all next week, but I'm not leaving to go out of town until Tuesday morning. I took Monday off to pack and get ready for my trip. It looks like the schedule has someone at 10:20 and also at 1? I'll go to the mall in between patients or something. I will be in Kansas from Tuesday to Saturday, so I won't be available for any of the other appointments.

Thanks, Civon On Tue, Nov 12, 2019 at 10:08 AM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Good Morning,

I wasn't going to be in the office on Monday, but Civon if you can't see this pt, I will come in. Just let me know.

Thank you,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program <u>1001 Shadow Lane</u>, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521-|E: acapurro@health.nv.govwww.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Amalie Alver <<u>alver@unlv.nevada.edu</u>> Sent: Tuesday, November 12, 2019 9:25 AM To: <u>civon.gewelber@unlv.edu</u> <<u>civon.gewelber@unlv.edu</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: Monday 11/18 subject 011

Good morning,

We have a patient coming back for a follow-up visit on Monday morning at 10:20 am, are either of you available to do a dental screen sometime around then after her visit?

Amalie Alver MD Candidate, Class of 2022 AMWA Secretary Scientific Foundations Curriculum Subcommittee Representative University of Nevada Las Vegas School of Medicine alver@unlv.nevada.edu | (781) 605-9887

19.docx
)

Good Afternoon Dr.Azzam,

Hope this email finds you well. Attached is the CMO report that describes the activities of the OHP team during the month of October. The funding for the program's temporary Administrative Assistant, Monisa Riley, was exhausted as of November 13th. A revised budget proposal for C17117 was submitted to Julia Peek last week. I am hopeful that the contract amendment will be drafted later this month. The salary savings from the open dental hygienist position will be used to rehire Ms. Riley and to hire a contract hygienist.

Additionally, I want to let you know that I am planning to be on maternity leave for most of March. The contract amendment to C17117 will enable me to ensure that the program is staffed with at minimum a full-time administrative assistant during my leave.

Lastly, I was given the opportunity to share information on the Oral Health Program last week and would like to share that with you. The link to the video is: <u>https://www.ktvn.com/face-the-state</u>

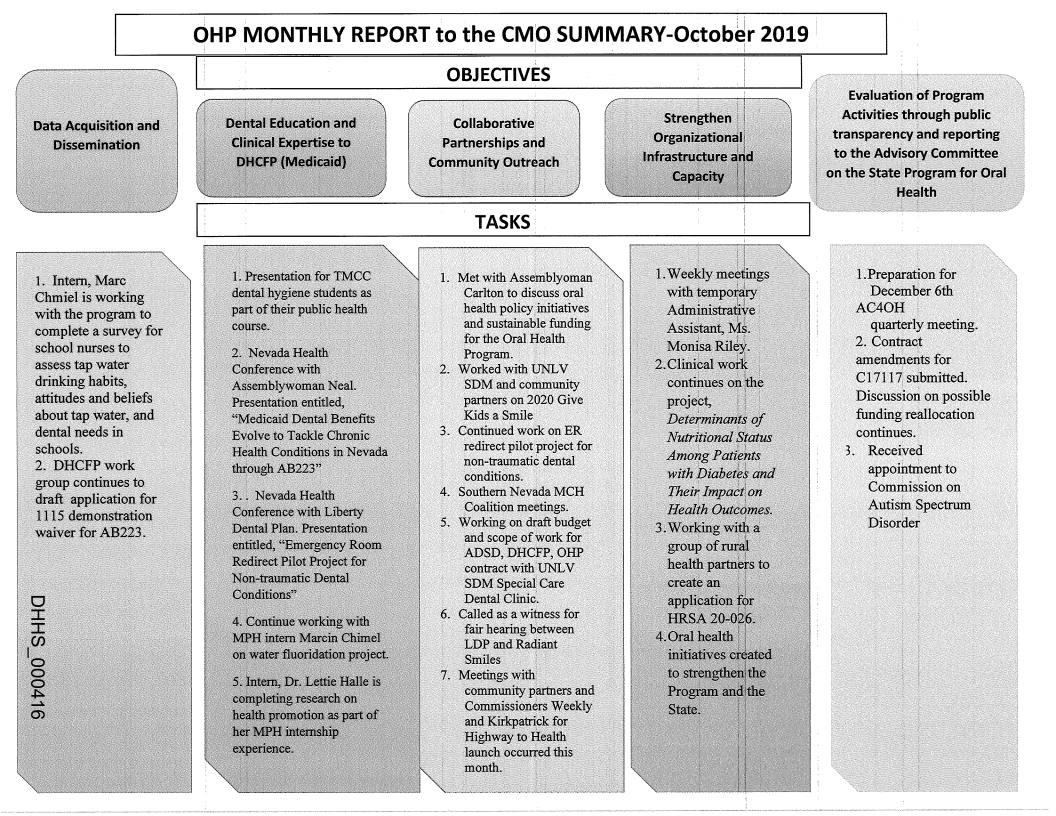
If additional information is needed, please let me know. Best regards, Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

<u>antonina.capurro@unlv.edu</u> <u>Office: 702-774-2573</u>

unlv.edu • Twitter • Facebook • Instagram • YouTube



The key issue facing the Nevada Oral Health Program is staffing and sustainable funding. This month several educational presentations were completed. A presentation on dental public health and an overview of the Nevada Oral Health Program was provided to the TMCC dental hygiene students as part of their public health course. Two presentations were provided as part of the Nevada Health Conference. The first was Medicaid Dental Benefits Evolve to Tackle Chronic Health Conditions in Nevada through AB223 with Assemblywoman Neal. The second was Emergency Room Redirect Pilot Project for Non-traumatic Dental Conditions with Liberty Dental Plan.

Also, this month, I met with Assemblywoman Maggie Carlton to discuss oral health initiatives for the 2021 legislative session, discussed possible SDM tours and Interim Health Care Committee meetings with Senator Ratti and Assemblywoman Cohen. For continuation of legislative policy initiatives, the Nevada Dental Association, Advocacy for Access and Prevention Committee held its initial meeting and Dr. Capurro was voted in as chair of this committee. Expansion of the scope of practice for dental professionals to provide immunizations moves forward and Dr. Capurro met with the DPBH immunization team, Kristy Zigenis and Shannon Bennett.

Community work this moth includes continuation of creation of the application for HRSA 20-026, Rural Health Network Development Planning Program to Increase Access to Care for Populations Living in Health Professional Shortage Areas in Nevada. Lastly, Give Kids a Smile meetings with community partners and meetings with community partners and Commissioners Weekly and Kirkpatrick for Highway to Health launch occurred this month.

Lastly, Dr. Capurro received Governmental appointment to Commission on Autism Spectrum Disorder.

# November, 2019

## To Do List

- 1. Contract period for AA, Monisa Riley, ends November 11<sup>th</sup>. A contract extension will be requested if the OHP budget amendment is completed by mid-October.
- 2. Continue to work with Interns:
  - a. Work with Marc Chimel to complete his internship poster presentation and continue to guide his research.
  - b. Review and assist Dr. Letti Hale's in gathering data for her project on health promotion and public health marketing.
- 3. Meeting with Easter Seals and possible training date for social workers on oral health for individuals with ID/DD.
- 4. Rural Health Conference in Reno
- 5. Face the State Interview: https://www.ktvn.com/face-the-state
- 6. The following contracts are in progress and will be reviewed during November:

- i. Nevada Department of Education for licensed childcare
- ii. Washoe County School District, Clinical Services
- iii. UMC, LDP, and Teladentistry
- iv. License Plate MOU
- v. ADSD, DHCFP, DPBH, OHP and UNLV SDM Special Care Dental Clinic
- 7. First meeting of AC4OH legislative focused workgroup
- 8. Meeting with DHCFP school health and wellness team to identify methods to build sustainability in oral health school-based programs.
- 9. Meetings with Anthem and HPN to discuss oral health integration into medical
- CSN to provide/expand dental services to clients of the Department of Health and Human Services.
- 11. Special Olympics, Special Smiles service activity on November 16<sup>th</sup>
- 12. Project Homeless Connect service activity on November 26th

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Tuesday, November 19, 2019 12:12 PM
To:	Amalie Alver; Civon Gewelber; Nirav Patel; Kenneth Izuora
Subject:	Re: Subject 034 dental screen 11/20 8 am

Thank you for the reminder. I will be there in the morning.

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Tuesday, November 19, 2019 11:23 AM To: Civon Gewelber <civon.gewelber@unlv.edu>; Antonina Capurro <acapurro@health.nv.gov>; Nirav Patel <nirav.patel@unlv.edu>; Kenneth Izuora <kenneth.izuora@unlv.edu> Subject: Subject 034 dental screen 11/20 8 am

Hello,

Just a reminder that we have a dental screen scheduled for tomorrow morning at 8 am. I will not be here but Nirav will be here.

Thank you,

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>	
Sent:	Friday, November 22, 2019 9:22 AM	
То:	Amalie Alver; Civon Gewelber	
Subject:	Re: Subject 014 dental screen	

Hello,

I can see the pt on 12/5 at 11am. I'll plan to see you then. Thank you,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Tuesday, November 19, 2019 10:15 AM To: Civon Gewelber <civon.gewelber@unlv.edu>; Antonina Capurro <acapurro@health.nv.gov> Subject: Subject 014 dental screen

Hello,

Are either of you available on Thursday 12/5 around 11 am for a dental screen? I'm sorry for the Tuesday/Thursday slots, there were a few patients scheduled for 11/27 for follow-ups that have had to reschedule for the thanksgiving holiday. Let me know! If not, I will call the patient to schedule a different dental screening visit.

From:Amalie Alver <alver@unlv.nevada.edu>Sent:Tuesday, November 26, 2019 8:38 AMTo:Antonina CapurroSubject:Re: Subject 014 dental screen

We have another patient scheduled for this date (12/5) at 1 pm here in the clinic, are either of you available at this time?

Amalie Alver MD Candidate, Class of 2022 Vice President, UNLV SOM Medical Research Society Curriculum Committee Class Representative University of Nevada Las Vegas School of Medicine alver@unlv.nevada.edu | (781) 605-9887

On Fri, Nov 22, 2019 at 9:21 AM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Hello,

I can see the pt on 12/5 at 11am. I'll plan to see you then. Thank you,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <<u>alver@unlv.nevada.edu</u>> Sent: Tuesday, November 19, 2019 10:15 AM To: Civon Gewelber <<u>civon.gewelber@unlv.edu</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: Subject 014 dental screen

Hello,

Are either of you available on Thursday 12/5 around 11 am for a dental screen? I'm sorry for the Tuesday/Thursday slots, there were a few patients scheduled for 11/27 for follow-ups that have had to reschedule for the thanksgiving holiday. Let me know! If not, I will call the patient to schedule a different dental screening visit.

Amalie Alver

From: Sent: To: Subject: Antonina Capurro <acapurro@health.nv.gov> Wednesday, November 27, 2019 8:49 AM Amalie Alver Re: Subject 014 dental screen

Yes, I am available. Thank you,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Tuesday, November 26, 2019 8:37 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: Re: Subject 014 dental screen

We have another patient scheduled for this date (12/5) at 1 pm here in the clinic, are either of you available at this time?

Amalie Alver MD Candidate, Class of 2022 Vice President, UNLV SOM Medical Research Society Curriculum Committee Class Representative University of Nevada Las Vegas School of Medicine alver@unlv.nevada.edu | (781) 605-9887

On Fri, Nov 22, 2019 at 9:21 AM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Hello,

I can see the pt on 12/5 at 11am. I'll plan to see you then. Thank you,

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Amalie Alver <<u>alver@unlv.nevada.edu</u>>
Sent: Tuesday, November 19, 2019 10:15 AM
To: Civon Gewelber <<u>civon.gewelber@unlv.edu</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>>
Subject: Subject 014 dental screen

Hello,

Are either of you available on Thursday 12/5 around 11 am for a dental screen? I'm sorry for the Tuesday/Thursday slots, there were a few patients scheduled for 11/27 for follow-ups that have had to reschedule for the thanksgiving holiday. Let me know! If not, I will call the patient to schedule a different dental screening visit.

From: Sent: To: Subject: Antonina Capurro <acapurro@health.nv.gov> Monday, December 2, 2019 12:23 PM Amalie Alver Re: Subject 031 dental visit

Yes, absolutely. Thank you,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <alver@unlv.nevada.edu> Sent: Monday, December 2, 2019 11:18 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: Re: Subject 031 dental visit

I have another subject scheduled for a follow-up appointment at 2 pm this date (02/13), if they come a little early could this subject also be seen right after the first?

Thank you both so much!

Amalie Alver MD Candidate, Class of 2022 Vice President, UNLV SOM Medical Research Society Curriculum Committee Class Representative University of Nevada Las Vegas School of Medicine <u>alver@unlv.nevada.edu</u> | (781) 605-9887

On Fri, Nov 8, 2019 at 6:06 AM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Agreed. One of us will be there. Thank you, Antonina

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: <u>civon.gewelber@unlv.edu</u> <<u>civon.gewelber@unlv.edu</u>> Sent: Thursday, November 7, 2019 6:44 PM To: Amalie Alver <<u>alver@unlv.nevada.edu</u>> Cc: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: Re: Subject 031 dental visit

I can probably be there. I'm scheduling myself for surgery end of February so the 13th should be good.

#### Sent from my iPhone

On Nov 7, 2019, at 2:36 PM, Amalie Alver <alver@unlv.nevada.edu> wrote:

Hello Dr. Capurro and Dr. Gewelber,

Subject 031 would like to have their second visit on 02/13/20 around 1:00 pm when they return for their 3-month appointment. This is a Thursday afternoon, is it possible for one of you to be here? I know it's quite a long time from now but I wanted to check in and see if it's a possibility.

Thank you,

From:	
Sent:	
To:	
Cc:	
Subject:	

Civon Gewelber <civon.gewelber@unlv.edu> Monday, December 2, 2019 12:32 PM Antonina Capurro Amalie Alver Re: Subject 030 2/10 screening

On Mondays I'm generally in clinic from 9-12 and 2-5. I could do an 8am on a Monday.

On Mon, Dec 2, 2019 at 12:25 PM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: I will be available that day and will put it on my schedule now.

Thank you,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Amalie Alver <<u>alver@unlv.nevada.edu</u>> Sent: Monday, December 2, 2019 11:15 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>>; Civon Gewelber <<u>civon.gewelber@unlv.edu</u>> Subject: Subject 030 2/10 screening

Hello,

Are either of you available on Monday Feb 10th around 9 am to complete a dental screen?

Thanks,

Amalie Alver MD Candidate, Class of 2022 Vice President, UNLV SOM Medical Research Society Curriculum Committee Class Representative University of Nevada Las Vegas School of Medicine <u>alver@unlv.nevada.edu</u> | (781) 605-9887

From:Patti Oya <poya@doe.nv.gov>Sent:Wednesday, December 4, 2019 1:45 PMTo:Antonina CapurroSubject:RE: NDE, Oral Health Contract

Hi, the agenda for Jan BOE is not out yet, but as far as I know we should be good.

Patti

From: Antonina Capurro Sent: Wednesday, December 04, 2019 1:44 PM To: Patti Oya Subject: NDE, Oral Health Contract

Good Afternoon Patti,

I hope you had a wonderful Thanksgiving. I am beginning to plan the Oral Health Program's activities for the spring and am touching base regarding the NDE/UNLV contract. Is this contract still scheduled to be heard in January by the Board of Examiners?

If additional adjustments to the proposal need to be made, please let me know.

Thank you for this opportunity and support of expanding oral health services to children in rural Nevada. Best regards,

Antonina

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>	
Monday, December 16, 2019 11:39 AM	
Ihsan Azzam	
Lisa Sherych	
CMO Report- November [no encryption]	
CMOMonthlyReportDecember 2019.docx; December Letter from the Dental Director 2019 finished.pdf	

#### Good Afternoon Dr.Azzam,

Hope this email finds you well. Attached is the CMO report that describes the activities of the OHP team during the month of November. The highlights page and the director's report for AC4OH are attached to illustrate the work that is underway.

As an update, the contract amendment for C17117 is being reviewed internally. I am hopeful that the amendment will be approved in January and I will be able to rehire program staff. If additional information is needed, please let me know. Best regards, Antonina

#### Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

STEVE SISOLAK Governor

RICHARD WHITLEY, MS Director



LISA SHERYCH Administrator

IHSAN AZZAM, Ph.D., M.D. Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH 4150 Technology Way Carson City, Nevada 89706 Telephone (775) 684-4200 • Fax (775) 687-7570 http://dpbh.nv.gov

#### FROM THE DESK OF THE STATE DENTAL HEALTH OFFICER

## "Sometimes the most ordinary things could be made extraordinary, simply by doing them with the right people."

#### – Nicholas Sparks

**Oral Health Program Mission**: To protect, promote, and improve the oral health of the people of Nevada. **Core Values**: Integrity, Compassionate Care, Innovation, Quality, and Hard Work.

In the spirit of informational transparency, I would like to present our latest projects and update you on our progress.

## **Education**

#### Washoe County School District Clinical Services

Dr. Tongsiri, Liberty Dental Plan Nevada Director, and Dr. Capurro met with the Director, Assistant Director, and Clinical Services Director for Washoe County Clinical Student Health Services who provide oversight of the medical services for students enrolled in the Washoe County School District. This meeting was initially scheduled to discuss dental referral services for ID/DD adult students within the school district. However, after further evaluation of the district's nursing system, it became apparent that the nurses were eager for oral health education and an opportunity existed to complete and collect oral assessment data for specific grade levels.

From this meeting, a contract has been drafted to launch a pilot study to train the Washoe County school nurses to assess the dental status of 3rd and 6th graders in selected Title 1 schools and to collect this data using a national a standardized non-invasive method of intraoral data collection known as the Basic Screening Survey(BSS). This information is invaluable to the Oral Health Program's preparation for application to the next CDC oral health program grant in 2021.A full contract between agencies is in process and professional development training on oral health, dental trauma, and BSS is scheduled for all 47 school nurses on December 20<sup>th</sup>.

#### Oral Health License Plate Launch with Drawing Completion for School-Age Students

In order to increase revenue streams for the Oral Health Program and to raise visibility for dental public health services, the Oral Health Program is partnering with the UNLV SDM Alumni Association, Nevada Dental Association, and Nevada Dental Hygiene Association to apply for a specialty license plate through the Division of Motor Vehicle (DMV). For each license plate purchased the group will receive between \$20.00 and \$25.00 in



Nevada Department of Health and Human Services DIVISION OF PUBLIC AND BEINAVIORAL HEALTH Helping People --It's Who We Are And What We Do

fees. Marketing, education, and public awareness are essential components of this project. To create a conversation around oral health, the Oral Health Program in collaboration with our partners will launch a drawing competition in the spring of 2020 for school-age children across the state. The winning picture will appear as the graphic on the license plate. A board of judges will be solicited to review submissions.

#### Licensed Childcare Oral Health Education and Basic Screening Survey

The Oral Health Program has partnered with the Nevada Department of Education to launch a non-invasive open-mouth basic screening survey, create educational webinars, and build classroom toothbrush stations and protocols for licensed childcare centers throughout rural Nevada. The data collected as a part of this project will be compared to the 2017 Head Start BSS to better understand what health disparities and educational opportunities exist in rural Nevada. The contract is tentatively scheduled to be heard at the January Board of Examiners meeting.

#### **UNLV SDM Special Care Dental Clinic**

The Aging and Disability Services Division, the Division of Health Care Financing and Policy, and DPBH, Oral Health Program have partnered to support the UNLV SDM Special Care Dental Clinic. The clinic provides comprehensive clinical and hospital dental services for adults with intellectual and developmental disabilities. A coordinated effort is needed to ensure patients are able to overcome the multifactorial challenges including financial limitations and guardianship concerns to receive needed treatment. A contract is being drafted which will provided administrative clinical support and financial assistance for patients. Additionally, a dental desensitization event and resource fair is tentatively being planned for late May/early June 2020. If you are interested in participating, please contact Dr. Capurro at <u>acapurro@health.nv.gov</u>.

#### Silver Diamine Fluoride Continuing Education Course

In the last quarter, the Oral Health Program petitioned the Nevada State Board of Dental Examiners for an advisory opinion for clarification on the scope of practice for public health endorsed dental hygienists to place silver diamine fluoride and glass ionomer as an interim therapeutic restoration. The Board approved placement of silver diamine fluoride and glass ionomer as an interim therapeutic restoration for public health endorsed dental hygienists who completed an educational course on this topic through the Nevada Oral Health Program. The Program is working to develop this hands-on class which is tentatively scheduled for late spring 2020.

#### **Conference Presentations and Lectures**

- Nevada Public Health Association: Medicaid Dental Benefits Evolve to Tackle Chronic Health Conditions in Nevada through AB22, Dr. Capurro with Assemblywoman Neal
- Nevada Health Conference: Emergency Room Redirect Pilot Program Using Teladentistry, Dr. Capurro with Dr. Tongsiri
- Nevada Health Conference: Medicaid Dental Benefits Evolve to Tackle Chronic Health Conditions in Nevada through AB22, Dr. Capurro with Assemblywoman Neal
- Presentation to TMCC 2<sup>nd</sup> Year Students in on the NV Oral Health Program as part of their Community Dental Health course.
- Face the State Interview: <u>https://www.ktvn.com/face-the-state</u>. Dr. Capurro was invited to share information on the Nevada Oral Health Program and highlight the technology that will be utilized during

2 | P a g e

the pilot emergency room redirect for non-traumatic dental conditions program.



# **Medicaid**

#### ER Redirect for Non-Traumatic Dental Conditions

Contract negotiations continue on the pilot project to reduce emergency room visits for non-traumatic dental conditions at University Medical Center of Southern Nevada. In addition to the Nevada Oral Health Program, the team consists of Liberty Dental Plan, the sole Medicaid dental benefits administrator for Nevada, and Teladentistry. This program is a medical-dental integration pilot that will add a live video streaming dental consultant to the medical team in the ER. Contract revisions continue to meet CMS and regulatory standards.

Capurro

#### MSM 1000 and Benefit Schedule

The Medicaid dental benefit schedule has been revised and clinically appropriate changes have been submitted. Additionally, Medicaid Chapter 1000-Dental is being updated to reflect these changes and to streamline often ambiguous verbiage. A public workshop is tentatively planned for December 20<sup>th</sup>. Specific details will follow.

#### Legislative Implementation Plans

- AB223- the outline of the CMS 1115 Demonstration Waiver continues
- SB366-Medicaid chapter updates, provider mapping, benefit schedule revisions if needed

## **Service**

#### Special Olympics, Special Smiles, Bowling Tournament, November 16<sup>th</sup>.

The Oral Health Program joined UNLV School of Dental Medicine to provide oral hygiene instruction, dental screenings, and oral hygiene kits to Special Olympics athletes.



(Pictured: SO Program Reps: Dr. Civon Gewlber and Dr. Antonina Capurro; Volunteers: Dr. Rassilee Sharma, Dr. Jay Morgenstern, Ashlee Gibson, RDH, Yuxuan Ren, Marnelli Lapitan, Roberto Garcia, , Ghazal Rezaei, Jared Link, Eric Bosman, Soma Santoyo, Adilene Agmilar, Dustin Ballenges, Manere Ross, Andrew Ballard, Roxanna Parga)

#### Homeless Connect Event, November 26<sup>th</sup>.

The Oral Health Program joined the Southern Nevada Health District and Roseman University of Health Sciences to provide oral hygiene instruction, dental screenings, and oral hygiene kits to health fair participants. Patients were given appointments for dental cleanings from the Southern Nevada Health District and/or received a voucher for dental treatment at Roseman University's GPR Dental Clinic in December.



(Pictured: Sara Mercier RDH, BSDH, Annette Lincicome, BS, RDH, Jessica Woods, RDH, MPH, Antonina Capurro, DMD, MPH, MBA, Amy Tongsiri, DMD, and Karina Vara)

## **Infrastructure**

#### **Organizational Strength and Capacity**

- Currently, the State Public Health Dental Hygienist position remains unfulfilled.
- Ms. Monisa Riley returned to the Oral Health Program at the end of July; however, her contract was extended only until November 13<sup>th</sup>. Programmatic funds are being identified to continue Ms. Riley's contract as she provides essential administrative and technical support for the program.
- Identification of funding allocation continues for FY21 contract to continue the operation of the Nevada Oral Health Program and associated positions.

#### **Oral Health Program Interns for 2019-2020**

- Mr. Marc Chmiel is currently working on a project to deeper our understanding of water fluoridation and dental decay rates in Nevada. He is completing a project to evaluate the association between water fluoridation and dental decay rates in Nevada. As part of this project, a survey has been designed with OHP to evaluate the oral health needs and observations of school nurses throughout Nevada. The survey can be accessed at: <u>https://www.surveymonkey.com/r/S7LY258</u>
- Dr. Letti Hale is currently working on a project to review health promotion and marketing techniques and will apply best practices to propose oral health message for Nevada.

# **<u>Quality</u>**

#### Reports\_

- Monthly report to the Chief Medical Officer
- Monthly inclusion of state water fluoridation data into CDC WFRS site
- 2017 Dental Workforce Survey Report (in-progress)
- MCH report on Rural Nevada Expectant Mother Dental Access Program. (Completed)

# **Growth**

#### **Grant Applications**

- HRSA 20-025, Rural Health Network Development Planning Program. The DPBH, Oral Health Program partnered with Nevada Office of Rural Health, PACE Coalition, and State Grant Office to create an application for HRSA 20-026, a one year \$100,000 network development planning grant. The application focused on improving the health of individuals with chronic disease in Elko, Eureka, Lander, Lincoln, and White Pine Counties. The proposed program had four foci:
  - 1) to build a collaborative partnership with rural hospitals, healthcare leaders, and community members to create a formalized network to meet the unique health care needs of residents, particularly those with chronic diseases specifically diabetes;
  - 2) to develop a plan to improve chronic disease, mental health, and primary care services through tele-health;
  - 3) to build an interprofessional health care delivery system that incorporates recently authorized expansion of Medicaid dental benefits for diabetic adults;
  - 4) to develop educational resources for training on diabetes; and workforce development opportunities for students in healthcare in targeted counties

The application was successfully submitted at the end of November.

• Determinants of Nutritional Status Among Patients with Diabetes and Their Impact on Health Outcomes, a collaborative medical-dental research project to identify the relationship between food insecurity and food deserts in Las Vegas on the oral health and overall health of patients with diabetes. Dr. Capurro is a grant contributor and co-PI along with PI, Dr. Izuora, Associate Professor of Internal Medicine at the UNLV School of Medicine and fellow co-PI, Dr. Civon Gewelber, Director Special Care Dental Clinic at UNLV School of Dental Medicine.

#### Oral Health Initiatives for the 81<sup>st</sup> (2021) Session of the Nevada Legislature

- 1. Expansion of Medicaid Dental Benefits for Adults Diagnosed with ID/DD
- 2. Expansion of Scope of Practice for Dentists to Provide Vaccinations
- 3. Resource and data support for entities that will report as part of the Interim Committee on Health Care Committee meeting on February 19<sup>th</sup>.

Respectfully submitted, Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer The key issue facing the Nevada Oral Health Program is staffing and sustainable funding. This month several educational presentations were completed. The contract period for AA, Monisa Riley, ended on November 11<sup>th</sup>. A contract amendment which will allow Ms. Riley to continue has been submitted to DPBH and is being reviewed for approval.

This month, discussions began with Jodi Patton and the Medicaid school based health services team to identify mechanism to build sustainable school based sealant programs. In December, Dr. Capurro will join Dr. Tongsiri of Liberty Dental Plan to train the Washoe County School District nurses on oral health screening and data collection.

Meetings also began with administration at Easter Seals and a December date was identified to provide a oral health training for social workers that provide early intervention services.

Community work this moth includes continuation of creation of the application for HRSA 20-026, Rural Health Network Development Planning Program to Increase Access to Care for Populations Living in Health Professional Shortage Areas in Nevada. The grant was submitted at the end of November.

Give Kids a Smile meetings with community partners continue.

Lastly, Dr. Capurro received Governmental appointment to Commission on Autism Spectrum Disorder.

- Contract period for AA, Monisa Riley, ends November 11<sup>th</sup>. A contract extension will be requested if the OHP budget amendment is completed by mid-October.
- 2. Continue to work with Interns:

1.

- i. Work with Marc Chimel to complete his internship poster presentation and continue to guide his research.
- ii. Review and assist Dr. Letti Hale's in gathering data for her project on health promotion and public health marketing.
- 3. Meeting with Easter Seals and schedule December training date for social workers on oral health for individuals with ID/DD.
- 4. Rural Health Conference in Reno
- 5. Face the State Interview: <u>https://www.ktvn.com/face-the-state</u>
- 6. First meeting of AC4OH legislative focused workgroup
- 7. Meeting with DHCFP school health and wellness team to identify methods to build sustainability in oral health school-based programs.
- 8. Meetings with Anthem and HPN to discuss oral health integration into medical model
- 9. Meeting with CSN and DHCFP to discuss potential for Charleston Campus of CSN to provide/expand dental services to clients of the Department of Health and Human Services.
- 10. Special Olympics, Special Smiles service activity on November 16th
- 11. Project Homeless Connect service activity on November 26th
- 12. Medicaid pharmacy provider announcement written and released on prescription fluoride toothpaste.

# December, 2019

# To Do List

- 1. The following contracts are in progress and will be reviewed during December:
  - i. Amendment to C117176 continue
  - ii. Nevada Department of Education for licensed childcare
  - iii. Washoe County School District, Clinical Services
  - iv. UMC, LDP, and Teladentistry
  - v. License Plate MOU
  - vi. ADSD, DHCFP, DPBH, OHP and UNLV SDM Special Care Dental Clinic
- 2. AC4OH meeting on December 6<sup>th</sup>
- 3. Give Kids a Smile planning meeting December 6<sup>th</sup>
- 4. Meeting with NSHE administrators and Senator Ratti to discuss legislative initiatives from dental educators.
- 5. Oral health training at Easter Seals for early intervention social workers
  - a. 25 training packets with materials that can be shared with parents, oral hygiene kits, magnets, and flyers were provided. 50 oral health informational brochures were left for the office.
- 6. Oral health during pregnancy presentation and dental screening at the Pahrump WIC office on December 19<sup>th</sup>.
- Oral health training and BSS screening/data collection for Washoe County School District nurses on December 20<sup>th</sup> in Reno. 47 nurses are scheduled to attend. This will be a hands-on two hour training session.
- Medicaid dental workshop to solicit public feedback on MSM 1000-dental chapter changes and benefit schedule service limit alterations on December 21<sup>st</sup>.

From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Thursday, December 19, 2019 12:39 PM
То:	Antonina Capurro (antonina.capurro@unlv.edu); Antonina Capurro
Cc:	Lyndsay Ifo
Subject:	FW: Contract 22479 NOR-UNLV Amendment & Contract 14145 WCSD Amendment
Attachments:	20191219111803800.pdf

HI, signed contract is attached! Let me know if you have questions.

Happy Holidays!

Patti

From: Joel Smedes Sent: Thursday, December 19, 2019 12:21 PM To: Patti Oya Subject: Contract 22479 NOR-UNLV Amendment & Contract 14145 WCSD Amendment

Patti,

Attached are copies of your 2 amendments for BOR-UNLV and WCSD. The originals are being sent in the mail today.

Joel Smedes Department of Education Business and Support Services 700 E. Fifth Street, Rm 104 Carson City, NV 89701 Joelsmedes@doe.nv.gov 775-687-9209

#### CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

#### I. DESCRIPTION OF CONTRACT

1. Contract Number: 22479

				Legal Entity Name:	BOARD OF REGENTS-UNLV
	Agency Name:	NDE - DEPARTMENT OF EDUCATION		Contractor Name:	BOARD OF REGENTS-UNLV
	Agency Code:	300		Address:	SCHOOL OF DENTAL MEDICINE
	Appropriation Unit:	2709-21			1001 SHADOW LN
	Is budget authority available?:	Yes		City/State/Zip	LAS VEGAS, NV 89106
	If "No" please expla	in: Not Applicable		Contact/Phone:	Dr. Antonina Capurro 702/774-2573
				Vendor No.:	D35000824
				NV Business ID:	N/A
		al Year(s) will the contract b	-	2020-2021	
	What is the source the contractor will b	of funds that will be used to e paid by multiple funding s	o pay the contract sources.	ctor? Indicate the per	rcentage of each funding source if
	General Fur		Fees	0.00 %	
	X Federal Fun	nds 100.00 %	Bonds	0.00 %	
	Highway Fu	inds 0.00 %	Other funding	0.00 %	
	Agency Reference	#: 300			
2.	Contract start date:				
	a. Effective upon B Examiner's appr		other effective c	late 12/17/2019	
	••	DE meeting date 12/2	019		
	Retroactive?	No			
	If "Yes", please exp	lain			
	Not Applicable			· · ·	· · · ·
3.	Termination Date:	03/31/2021			
	Contract term:	1 year and 104 day	'S		
4.	Type of contract:	Interlocal Agreeme	ent		
	Contract description	n: Trng, Dental & Eva	ls		
5.	Purpose of contract				
	This is a new inter	local agreement to provid litionally, a survey will be	de oral health e administered t	ducation and denta o all participating c	al screenings to children in rural child child care facilities to provide an
6.	NEW CONTRACT				
	The maximum amo	unt of the contract for the te	erm of the contra	oct is: \$35,760.00	
	Other basis for pay	ment: Three installments ba	ased on the follo	wing deliverables: P	roject Planning and Facility Education -
	\$25,372, Dental Sci	reening and Classroom Ed	ucation - \$6,406,	, Technical Assistant	ce and Evaluation Activities - \$3,982.
	USTIFICATION				
-7.	What conditions rec	uire that this work be done	?		
	This work is include Development Fund	d in the State Child Care P (CCDF).	lan that has bee	n submitted as a rec	uirement of the Child Care and
8.		employees in your agency o			
	NDE employees do government agency		rtise to perform	these duties and the	UNLV School of Dental Medicine is a
9.	Were quotes or pro	posals solicited?		No	
		(RFP) done by the Purcha	sing	No	
	Division?				

11.

1 1-4 44 .. .. 14 ... . . -+ I. -+ +h

			ted with the Board of Regents, Unive	rsity of Nevada, Las Vegas.
	d. Last bld date:	Anticipated re	e-bid date:	
10.	Does the contract contain any IT c	omponents?	No	
. (	OTHER INFORMATION			
11.	Is there an Indirect Cost Rate or P	ercentage Paid to the C	Contractor?	
		÷	te or Percentage Paid to the Contrac	tor
	10%			
12.	a. Is the contractor a current employee of the State of Nevada?	oyee of the State of Nev	vada or will the contracted services b	e performed by a current
	b. Was the contractor formerly en performed by someone formerly en No	ployed by the State of M mployed by the State of	Vevada within the last 24 months or v f Nevada within the last 24 months?	will the contracted services be
	c. Is the contractor employed by a	ny of Nevada's political	subdivisions or by any other govern	ment?
	No If "Yes", please expla	• •	· · · · · · · · · · · · · · · · · · ·	
	Not Applicable			
	I las des seudos stan such seus such	and under contract by	any State agonov?	
13.	Has the contractor ever been enga Yes If "Yes", specify when agency has been ver	and for which agency	and indicate if the quality of service	provided to the identified
13.	Yes If "Yes", specify when	and for which agency		provided to the identified
14.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid	n and for which agency ified as satisfactory: in litigation with the Sta	and indicate if the quality of service	······································
14.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved	n and for which agency ified as satisfactory: in litigation with the Sta	and Indicate if the quality of service	
14.	Yes If "Yes", specify when agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and Indicate if the quality of service	he contract:
14. 15.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered with	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and indicate if the quality of service ate of Nevada? on and facts supporting approval of t	he contract:
14. 15. 16.	Yes If "Yes", specify when agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered with Governmental Entity	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and indicate if the quality of service ate of Nevada? on and facts supporting approval of t	he contract:
14. 15. 16. 17.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered wit Governmental Entity Not Applicable	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and indicate if the quality of service ate of Nevada? on and facts supporting approval of t	he contract:
14. 15. 16. 17. 18.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered wit Governmental Entity Not Applicable Not Applicable Not Applicable	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and indicate if the quality of service ate of Nevada? on and facts supporting approval of t	he contract:
14. 15. 16. 17. 18. 19.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered wit Governmental Entity Not Applicable Not Applicable Not Applicable Agency Field Contract Monitor:	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and indicate if the quality of service ate of Nevada? on and facts supporting approval of t	he contract:
14. 15. 16. 17. 18. 19.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved <u>No If "Yes", please provid</u> Not Applicable The contractor is not registered will Governmental Entity Not Applicable Not Applicable Not Applicable Agency Field Contract Monitor: Contract Status:	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and indicate if the quality of service ate of Nevada? on and facts supporting approval of t	he contract:
14. 15. 16. 17. 18. 19.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered wit Governmental Entity Not Applicable Not Applicable Not Applicable Agency Field Contract Monitor:	n and for which agency ifled as satisfactory: in litigation with the Sta de details of the litigatio	and indicate if the quality of service ate of Nevada? on and facts supporting approval of t	he contract:
14. 15. 16. 17. 18. 19.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered will Governmental Entity Not Applicable Not Applicable Not Applicable Agency Field Contract Monitor: Contract Status: Contract Approvals:	n and for which agency ified as satisfactory: In litigation with the Sta de details of the litigation th the Nevada Secretary	and indicate if the quality of service ate of Nevada? on and facts supporting_approval of t y of State's Office because the legal	he contract:
14. 15. 16. 17. 18. 19.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered will Governmental Entity Not Applicable Not Applicable Not Applicable Agency Field Contract Monitor: Contract Status: Contract Approvals: Approval Level	ified as satisfactory: in litigation with the Sta de details of the litigation th the Nevada Secretary	and Indicate if the quality of service ate of Nevada? on and facts supporting_approval of t y of State's Office because the legal Signature Date	he contract:
14. 15. 16. 17. 18. 19.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered will Governmental Entity Not Applicable Not Applicable Not Applicable Agency Field Contract Monitor: Contract Status: Contract Status: Contract Approvals: Approval Level Budget Account Approval Division Approval	in and for which agency ified as satisfactory: in litigation with the Sta de details of the litigatio th the Nevada Secretary User bmcdani	and Indicate If the quality of service ate of Nevada? on and facts supporting_approval of t y of State's Office because the legal 10/15/2019 09:47:04 AM 10/15/2019 09:50:44 AM 10/15/2019 09:50:46 AM	he contract:
14. 15. 16. 17. 18. 19.	Yes If "Yes", specify wher agency has been ver Education-satisfactory Is the contractor currently involved No If "Yes", please provid Not Applicable The contractor is not registered wit Governmental Entity Not Applicable Not Applicable Not Applicable Not Applicable Agency Field Contract Monitor: Contract Status: Contract Status: Contract Approvals: Approval Level Budget Account Approval Division Approval	in and for which agency ified as satisfactory: in litigation with the Sta de details of the litigatio th the Nevada Secretary bmcdani amccalla	and Indicate If the quality of service ate of Nevada? on and facts supporting_approval of t y of State's Office because the legal Signature Date 10/15/2019 09:47:04 AM 10/15/2019 09:50:44 AM	he contract:

#### INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

#### A Contract Between the State of Nevada Acting By and Through Its

Department of Education Office of Early Learning and Development 2080 E Flamingo Road, Suite 210 Las Vegas, NV 89119 Contact: Patti Oya 702-486-6492 poya@doe.nv.goy

#### And

Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine 1001 Shadow Lane, Las Vegas, NV 89106 Contact: Dr Antonina Capurro 702-774-2573 acapurro@health.nv.gov

WHEREAS, NRS 277.180 authorizes any one or more public agencies to contract with any one or more other public agencies to perform any governmental service, activity or undertaking which any of the public agencies entering into the contract is authorized by law to perform; and

WHEREAS, it is deemed that the services of the Department of Education hereinafter set forth are both necessary to the Department of Education and in the best interests of the State of Nevada;

NOW, THEREFORE, in consideration of the aforesaid premises, the parties mutually agree as follows:

1. <u>REQUIRED APPROVAL</u>. This Contract shall not become effective until and unless approved by appropriate official action of the governing body of each party.

2. <u>DEFINITIONS</u>. "State" means the State of Nevada and any state agency identified herein, its officers, employees and immune contractors as defined in NRS 41.0307.

3. <u>CONTRACT TERM</u>. This Contract shall be effective subject to Board of Examiner's approval to March 31, 2021, unless sooner terminated by either party as set forth in this Contract.

4. <u>TERMINATION</u>. This Contract may be terminated by either party prior to the date set forth in paragraph (3), provided that a termination shall not be effective until 30 days after a party has served written notice upon the other party. This Contract may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Contract shall be terminated immediately if for any reason federal and/or State Legislature funding ability to satisfy this Contract is withdrawn, limited, or impaired.

5. <u>NOTICE</u>. All notices or other communications required or permitted to be given under this Contract shall be in writing and shall be deemed to have been duly given if delivered personally in hand, by telephonic facsimile with simultaneous regular mail, or mailed certified mail, return receipt requested, postage prepaid on the date posted, and addressed to the other party at the address set forth above.

Page 1 of 4

6. <u>INCORPORATED DOCUMENTS</u>. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

#### ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT BB: DATA SHARING AGREEMENT

7. <u>CONSIDERATION</u>. Board of Regents, UNLV agrees to provide the services set forth in paragraph (6) at a cost as specified in Attachment A: Scope of Work and Budget with the total contract or installment payable: Project Planning and Facility Education - \$25,372.00; Dental Screening and Classroom Education - \$6,406.00; Technical Assistance and Evaluation Activities - \$3,982.00, not exceeding \$35,760.00. Board of Regents, UNLV agrees to submit invoices after the completion of each deliverable for the total amounts of each part as listed in Attachment AA. Payments to the Board of Regents, UNLV will be made payable to <u>University of Nevada, Las Vegas</u> and make reference to the Principal Investigator (<u>Dr. Antonina Capurro</u>) and the Title of the Research (<u>Dental Screening & Oral Health Edu for Child Care Centers in Rural NV</u>). Payments will be submitted

Office of Sponsored Programs University of Nevada, Las Vegas 4505 S. Maryland Parkway, Box 451055 Las Vegas, NV 89154-1055

Any intervening end to a biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) or a termination as the results of legislative appropriation may require.

8. <u>ASSENT</u>. The parties agree that the terms and conditions listed on incorporated attachments of this Contract are also specifically a part of this Contract and are limited only by their respective order of precedence and any limitations expressly provided.

#### 9. INSPECTION & AUDIT.

a. <u>Books and Records</u>. Each party agrees to keep and maintain under general accepted accounting principles full, true and complete records, agreements, books, and documents as are necessary to fully disclose to the State or United States Government, or their authorized representatives, upon audits or reviews, sufficient information to determine compliance with all state and federal regulations and statutes.

b. Inspection & Audit. Each party agrees that the relevant books, records (written, electronic, computer related or otherwise), including but not limited to relevant accounting procedures and practices of the party, financial statements and supporting documentation, and documentation related to the work product shall be subject, at any reasonable time, to inspection, examination, review, audit, and copying at any office or location where such records may be found, with or without notice by the State Auditor, Employment Security, the Department of Administration, Budget Division, the Nevada State Attorney General's Office or its Fraud Control Units, the State Legislative Auditor, and with regard to any federal funding, the relevant federal agency, the Comptroller General, the General Accounting Office, the Office of the Inspector General, or any of their authorized representatives.

c. <u>Period of Retention</u>. All books, records, reports, and statements relevant to this Contract must be retained a minimum three years and for five years if any federal funds are used in this Contract. The retention period runs from the date of termination of this Contract. Retention time shall be extended when an audit is scheduled or in progress for a period reasonably necessary to complete an audit and/or to complete any administrative and judicial litigation which may ensue.

10. <u>BREACH</u>; <u>REMEDIES</u>. Failure of either party to perform any obligation of this Contract shall be deemed a breach. Except as otherwise provided for by law or this Contract, the rights and remedies of the parties shall not be exclusive and are in addition to any other rights and remedies provided by law or equity, including but not limited to actual damages, and to a prevailing party reasonable attorneys' fees and costs. It is specifically agreed that reasonable attorneys' fees shall not exceed \$150 per hour.

11. <u>LIMITED LIABILITY</u>. The parties will not waive and intend to assert available NRS chapter 41 liability limitations in all cases. Contract liability of both parties shall not be subject to punitive damages. Actual damages for any State breach shall never exceed the amount of funds which have been appropriated for payment under this Contract, but not yet paid, for the fiscal year budget in existence at the time of the breach.

Page 2 of 4

12. FORCE MAJEURE. Neither party shall be deemed to be in violation of this Contract if it is prevented from performing any of its obligations hereunder due to strikes, failure of public transportation, civil or military authority, acts of public enemy, acts of terrorism, accidents, fires, explosions, or acts of God, including, without limitation, earthquakes, floods, winds, or storms. In such an event the intervening cause must not be through the fault of the party asserting such an excuse, and the excused party is obligated to promptly perform in accordance with the terms of the Contract after the intervening cause ceases.

13. INDEMNIFICATION. Neither party waives any right or defense to indemnification that may exist in law or equity.

14. <u>INDEPENDENT PUBLIC AGENCIES</u>. The parties are associated with each other only for the purposes and to the extent set forth in this Contract, and in respect to performance of services pursuant to this Contract, each party is and shall be a public agency separate and distinct from the other party and, subject only to the terms of this Contract, shall have the sole right to supervise, manage, operate, control, and direct performance of the details incident to its duties under this Contract. Nothing contained in this Contract shall be deemed or construed to create a partnership or joint venture, to create relationships of an employer-employee or principal-agent, or to otherwise create any liability for one agency whatsoever with respect to the indebtedness, liabilities, and obligations of the other agency or any other party.

15. <u>WAIVER OF BREACH</u>. Failure to declare a breach or the actual waiver of any particular breach of the Contract or its material or nonmaterial terms by either party shall not operate as a waiver by such party of any of its rights or remedies as to any other breach.

16. <u>SEVERABILITY</u>. If any provision contained in this Contract is held to be unenforceable by a court of law or equity, this Contract shall be construed as if such provision did not exist and the nonenforceability of such provision shall not be held to render any other provision or provisions of this Contract unenforceable.

17. <u>ASSIGNMENT</u>. Neither party shall assign, transfer or delegate any rights, obligations or duties under this Contract without the prior written consent of the other party.

18. <u>OWNERSHIP OF PROPRIETARY INFORMATION</u>. Unless otherwise provided by law any reports, histories, studies, tests, manuals, instructions, photographs, negatives, blue prints, plans, maps, data, system designs, computer code (which is intended to be consideration under this Contract), or any other documents or drawings, prepared or in the course of preparation by either party in performance of its obligations under this Contract shall be the joint property of both parties.

19. <u>PUBLIC RECORDS</u>. Pursuant to NRS 239.010, information or documents may be open to public inspection and copying. The parties will have the duty to disclose unless a particular record is made confidential by law or a common law balancing of interests.

20. <u>CONFIDENTIALITY</u>. Each party shall keep confidential all information, in whatever form, produced, prepared, observed or received by that party to the extent that such information is confidential by law or otherwise required by this Contract.

21. <u>PROPER AUTHORITY</u>. The parties hereto represent and warrant that the person executing this Contract on behalf of each party has full power and authority to enter into this Contract and that the parties are authorized by law to perform the services set forth in paragraph (6).

22. <u>GOVERNING LAW; JURISDICTION</u>. This Contract and the rights and obligations of the parties hereto shall be governed by, and construed according to, the laws of the State of Nevada. The parties consent to the exclusive jurisdiction of and venue in the First Judicial District Court, Carson City, Nevada for enforcement of this Contract.

Page 3 of 4

23. <u>ENTIRE AGREEMENT AND MODIFICATION</u>. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract. Unless otherwise expressly authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Aftorney General.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

Board of Regents, Nevada System of Higher Education <u>On Behalf of the University of Nevada, Las Vegas</u> Public Agency #1

10/03/2019 Date

Executive Director, Sponsored Programs

Nevada Department of Education Public Agency #2

gnature

Deputy Superintendent

for Susan Brown

APPROVED BY BOARD OF EXAMINERS

Signature - Nevada State Board of Examiners

(Date)

12/17/1 On.

(Date)

Approved as to form and compliance with law by:

Deputy Attorney General for Attorney General, State of Nevada

Page 4 of 4

On

23. <u>ENTIRE AGREEMENT AND MODIFICATION</u>. This Contract and its integrated attachment(s) constitute the entire agreement of the parties and such are intended as a complete and exclusive statement of the promises, representations, negotiations, discussions, and other agreements that may have been made in connection with the subject matter hereof. Unless an integrated attachment to this Contract specifically displays a mutual intent to amend a particular part of this Contract, general conflicts in language between any such attachment and this Contract shall be construed consistent with the terms of this Contract, Unless otherwise expressive authorized by the terms of this Contract, no modification or amendment to this Contract shall be binding upon the parties unless the same is in writing and signed by the respective parties hereto, approved by the Office of the Attorney General.

IN WITNESS WHEREOF, the parties hereto have caused this Contract to be signed and intend to be legally bound thereby.

Board of Regents, Nevada System of Higher Education On Behalf of the University of Nevada, Las Vegas Public Agency #1

10/03/2019 Dale

<u>Nevada Department of Education</u> Public Agency #2

Signature

Date

Title

Title

Signature - Nevada State Board of Examiners

APPROVED BY BOARD OF EXAMINERS

**Executive Director, Sponsored Programs** 

Approved as to form mpliance with law by: and

(Date)

(Date)

Deputy Attorney General for Attorney General, State of Nevada

Page 4 of 4

On

#### ATTACHMENT AA: SCOPE OF WORK AND BUDGET

Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada Team: Antonina Capurro DMD, MPH, MBA

Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

Part 1: Project Planning and Facility-Education Timeline: December 16, 2019-April 30, 2020 Cost: \$23,066 + \$2,306 (10% Indirect) = \$25,372

Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed child care facilities throughout rural Nevada (see script attached). Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Four, comparable, Nevada Registry approved webinars will be offered that provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
- All travel arrangements and purchase orders for screening supplies will be completed during this time frame.
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - Developing of a data entry program

Part 2: Dental Screening and Classroom Education Timeline: March 1, 2020-June 30, 2020 Cost: \$5,823 + \$583 (10% Indirect) = \$6,406

#### Scope of work

• Each participating classroom within an individual child care center will receive a gradelevel appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.

- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual child care center will receive:
  - A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child).
  - Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating child care center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating child care facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - o Selection of replacement schools/sites

#### Part 3: Technical Assistance with Evaluation Activities Timeline: April 1, 2020-March 31, 2021 Cost: \$3,620 + \$362 (10% Indirect) = \$3,982

#### Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating child care facilities one month following completion of the screenings. This survey will provide data to measure compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

<b>Direct Cost:</b>	\$32,509
Indirect Cost:	\$3,251
<b>Total Budget:</b>	\$35,760

#### ATTACHMENT BB DATA SHARING AGREEMENT BETWEEN THE STATE OF NEVADA AND Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine

1. This Data Sharing Agreement ("Agreement") is made by and between Board of Regents, NSHE ("Contractor") and the State of Nevada Department of Education("State").

2. The terms of this Agreement shall commence on October 2019 and end when the Contractor no longer is in possession of any Confidential Information. This Agreement may be terminated by either party hereto upon thirty (30) days written notice.

3. For purposes of this Agreement and any contracts to which it serves as an attachment and the Family Educational Rights and Privacy Act ("FERPA"), State designates Contractor an "school official" with a "legitimate educational interest" pursuant to 20 U.S.C. 1232g(b)(1)(A) and 34 C.F.R. 99.31(a)(1)(i)(B). Contractor and the State shall comply with the provisions of FERPA in all respects. Nothing in this Agreement may be construed to allow either party to maintain, use, disclose or share personally identifiable student information in a manner not allowed by state or federal law or regulation.

4. "Confidential Information" shall include any and all personally identifiable student information, as that term is defined 34 C.F.R. § 99.3 or any information shared under this agreement deemed to be confidential or private by the State.

5. "Disclose" or "disclosure" means to permit access to or the release, transfer, or other communication of Confidential Information contained in education records by any means, including oral, written, or electronic means, to any party except the party identified as the party that provided or created the record.

6. The State may disclose Confidential Information to Contractor for the purpose of developing and maintaining a statewide student information system; including, software implementation services, software maintenace services, training services, technical support services, and hosting services. Further disclosure by Contractor of any Confidential Information released to Contractor by the State is prohibited by this Agreement.

7. Contractor shall not: (i) disclose any Confidential Information to any unauthorized third party; (ii) make any use of Confidential Information except to perform its obligations under this Agreement; or (iii) make Confidential Information available to any of its employees, officers, or agents except those individuals who have been authorized by Contractor to use the information as a component of their project assignment(s). The term "unauthorized third party" for purposes of this Agreement does not include employees, officers, or agents of the State who are authorized to have access to the Confidential Information.

8. At the State's discretion, the state may elect to disclose to Contractor under this Agreement the Confidential Information identified within the State's Data Dicationary as currently established and, at such time it becomes necessary, as modified. No other personally identifiable student information will be disclosed to Contractor. The Department may also elect to disclose any Department program data such as individual performance information, fiscal records or education personnell data.

Page 1 of 4

Revised 9/4/18

9. Contractor agrees to use Confidential Information provided by the State, or any Nevada School District or charter school only for the purpose of fullfilling the Contractor's obligations under this Agreement and Contract.

10. Contractor understands that the Confidential Information is protected under state and federal law and agrees to immediately notify the State if any of the Confidential Information is disclosed, either intentionally or inadvertently. Such notice is not required if Contractor is directed to disclose certain Confidential Information, in writing, by the State.

11. Contractor agrees to protect Confidential Information in such a manner that it will be disclosed only to Contractor's staff whose duties under this Agreement specifically require them to have access to the Confidential Information and to any State approved subcontractors listed in this paragraph who have executed similar Data Sharing Agreements with State

a. State approved subcontractors executing similar Data Sharing Agreements:

#### LIST SUB(S) HERE AND ENGAGE EACH WITH UNIQUE AGREEMENT(S)

#### Not Applicable

12. Contractor and the State shall identify at least one authorized representative or data custodian from their respective agencies who shall be responsible for processing and responding to data requests from the other party. The State identifies Mr. Glenn Meyer (gmever@doe.nv.gov) as the authorized representative. Board of Regents, NSHE identifies Dr Antonina Capurro (acapurro@health.nv.gov) as the data custodian. These individuals shall be noted as Key Personnel and immediate notice to all parties of any change. Change notices will be delivered via email or courier and such notice must include the name of the new data custodian.

13. Upon request of the State, Contractor shall agree to permit the State to review or shall provide written assurances to the State regarding the use of Confidential Data under this Agreement. In such an event, the State shall provide appropriate notice and an adaquate timeframe for Contractor to prepare data. The purpose of this provision is to ensure that appropriate policies and procedures are in place to protect the Confidential Information and that there has been no further Disclosure of the Confidential Information.

14. All Contractor employees, officers, and agents with access to the Confidential Information must acknowledge that they are aware of and will abide by the provisions of this Agreement. Contractor agrees to remove any person from performing work who has violated the terms of this Agreement, or if the Contractor suspects any person to have violated the terms of the Agreement. Contractor shall notify the State of a breach of the Agreement within 10 days. If the United States Department of Education's Family Policy Compliance Office determines that the Contractor has violated paragraph 34 C.F.R. 99.31(a)(3), the State may not allow the Contractor access to personally identifiable information from education records for at least five years. 34 C.F.R. 99.67.

15. By disclosing Confidential Information to Contractor, the State is in no way assigning ownership of the Confidential Information to Contractor. Upon the termination of this Agreement for any reason, Contractor shall immediately return all Confidential Information, including all copies, to the State or destroy all Confidential Information in its possession, custody, or control unless otherwise agreed to in writing by both parties. Upon request, Contractor will provide the State with affidavits to this effect.

Revised 9/4/18

16. Contractor agrees to destroy the personally identifiable information, within 45 days, from the education records when the information is no longer needed for the purpose specified in this Agreement and the contract as amended and approved. The parties to this Agreement and contract may agree to extend the time period for destruction if needed.

18. Violation of this Agreement is cause for immediate termination of this Agreement.

Page 3 of 4

Revised 9/4/18

In witness hereto the parties signify their agreement by signature below;

Authorized Representative Antoning Capurro, D.M.D, M.P.H., M.B.A.

0-1-19

Authorized Representative Nevada Department of Education

Date

Date

#### **CERTIFICATION**;

l. <u>hto</u> by its terms. have read this Data Sharing Agreement and agree to abide DULYND

Dated this \_\_\_\_ day of October, 2019

Page 4 of 4

Revised 9/4/18

From:civon.gewelber@unlv.eduSent:Monday, January 6, 2020 1:37 PMTo:Kenneth IzuoraCc:Antonina Capurro; Nirav PatelSubject:Re: dental screenings Feb+

Hello, I tried to send you a text message but it won't go through there's something wrong with my phone. Will you be at your clinic tomorrow at 1 o'clock? I can bring Dr. Baca over to meet you when I do the screening that's on the schedule.

Thanks,

Civon

Sent from my iPhone

On Jan 6, 2020, at 12:36 PM, Kenneth Izuora <kenneth.izuora@unlv.edu> wrote:

Hello Civon,

I wish you the best in the surgery.

Thank you for identifying someone that is willing to help and I am fine with bringing Dr Baca on board. In addition to calibration for the screening, we will have to add her to the study team with the IRB. Nirav please let's get the IRB process started ASAP.

Thank you.

Ken

Kenneth Izuora, MD, MBA, FACE Associate Professor of Medicine Chief, Division of Endocrinology, Department of Internal Medicine University of Nevada Las Vegas, School of Medicine 1701 W. Charleston Blvd., Suite 230 Las Vegas, NV 89102. Phone: (702) 671-2345 Fax: (702) 671-2376 Email: kenneth.izuora@unlv.edu

×

On Mon, Jan 6, 2020 at 10:51 AM Civon Gewelber <<u>civon.gewelber@unlv.edu</u>> wrote: Hi Dr. Izuora,

I'm having surgery February 10th and I have a lot of appointments and things this month leading up to it, so my availability is limited for dental screenings for a while. I spoke with Dr. Kristin Baca, one of my good friends here who is a general dentist, and she is interested in being calibrated and helping out

with this research project. If you're okay with this, she has her CITI training done already, so please let me know and I'll connect her with Nirav or you or whoever she needs to contact to get started.

Thank you, Civon

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>			
Sent:	Wednesday, January 15, 2020 2:04 PM			
То:	Ihsan Azzam; Lisa Sherych			
Subject:	OHP Monthly Report and Request for Advice [no encryption]			
Attachments:	CMOMonthlyReportDECember 2019_summary.docx; CMOMonthlyReportDecember 2019_highlights.docx			

#### Good Afternoon Dr.Azzam,

Hope this email finds you well. Attached is the CMO report that describes the activities of the OHP team during the month of December.

As an update, I am growing concerned about the lack of execution on the contract amendment for C17117. The Oral Health Program has received a grant from the Nevada Department of Education, but without contract staff, I am unable to begin the project. It has now been 120 days since Ms. Chartier left the program as the part-time State Public Health Dental Hygienist and 42 days since Ms. Riley left as the administrative assistant for the program. The contract amendments were submitted in September and a final version has not yet been approved by the Department. How would you like me to proceed?

I will be on maternity leave in March and the staffing shortfall will drastically affect OHP's ability to meet deliverables and outreach obligations. In all likelihood, the March 6th AC4OH meeting will have to be postponed, and this week I notified the Nevada Special Olympics Director that OHP would need to cancel the March 7th Special Olympics, Special Smiles event. Without OHP staffing, I can't guarantee that the athletes will receive care should I be on medical leave.

Your advice and guidance on this issue would be greatly appreciated. Best regards, Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu • Twitter • Facebook • Instagram • YouTube

#### **Communication on Oral and Public Health Issues**

This month I presented a lecture entitled, *The Importance of Oral Health for Children with Developmental and Intellectual Disabilities in Nevada* with the UNLV SDM Special Care Dental Clinic Director. This training was provided to 26 social workers that provide early intervention services for families at Easter Seals, a nonprofit that provides disability services. Training packets with materials that will be shared with families, oral hygiene kits, magnets, and flyers were provided. 50 oral health informational brochures on oral health for babies and children were left for the Easter Seals Office. The trainers requested additional educational packets for each of their families. It was explained that this request would be dependent on funding.

Additionally, a basic screening survey (BSS) and oral health educational presentation was provided to 56 Washoe County school nurses. This half-day training was provided as an initial introduction to BSS and a pilot study that will begin in the spring. The school nurses will assess the dental status of 3rd and 6th graders in selected Title 1 schools and collect this data using a national standardized non-invasive method of intraoral data collection. A full contract between agencies is in process.

Lastly, the final presentation to a WIC clinic in Pahrump as part of the collaborative project with the Maternal, Child, and Adolescent Health Department through a HRSA grant to provide information on the importance of oral health during pregnancy was completed. A general presentation to expectant mothers as well as oral health screenings for the entire family were conducted.

#### **Medicaid Updates**

The Medicaid dental chapter and benefit schedule have been updated and a public workshop was held this month. I provided clinical expertise and will provide the Division report on the results on the feedback received.

# Advocate for public health policy, legislation, and regulations to protect and promote the public's oral health and overall health

An oral health day has been assigned to the Interim Committee on Health Care for February 19<sup>th</sup>. I am leading the effort to coordinate the presentations and legislative asks from all stakeholders including the FQHCs, Medicaid, educational institutions, and coalitions.

#### **Research to Address Oral and Public Health Problems.**

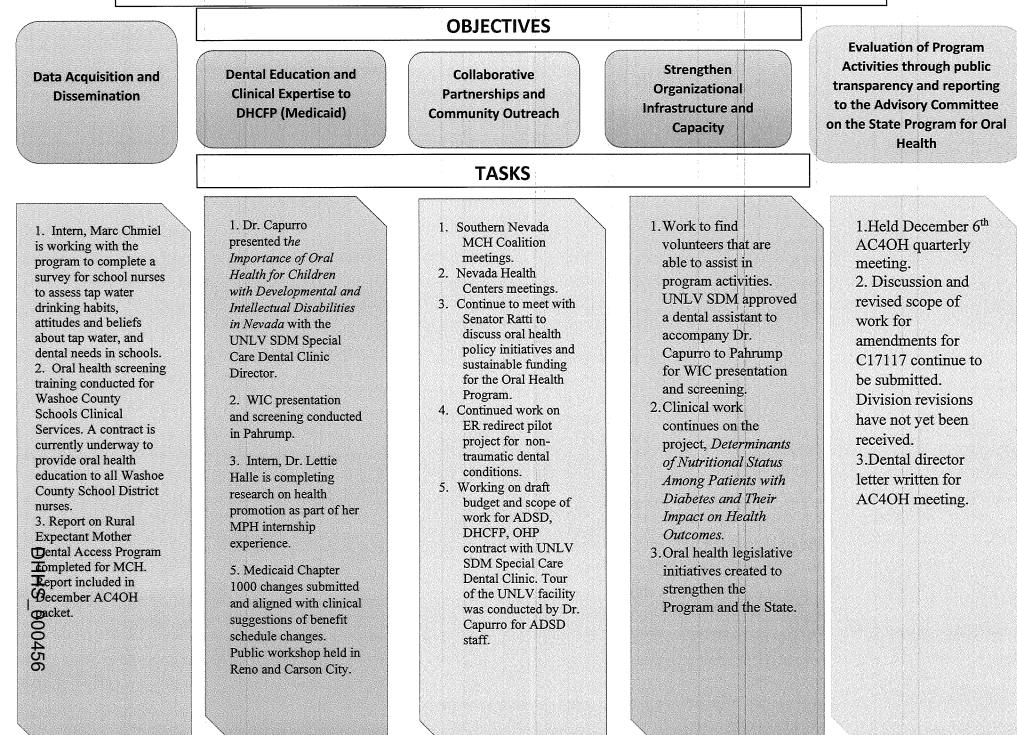
Dental screenings for the project entitled, *Determinants of Nutritional Status Among Patients with Diabetes and Their Impact on Health Outcomes* continue. This is a collaborative research project with an endocrinologist, nutritionist, and biostatistician from the UNLV School of Medical School. A project abstract will be submitted in January to the American Diabetes Association.

# January, 2020

## To Do List

- 1. The following contracts are in progress and will be reviewed during January:
  - i. Amendment to C117176 continue
  - ii. Nevada Department of Education for licensed childcare-Should become effective January 1<sup>st</sup>.
  - iii. Washoe County School District, Clinical Services
  - iv. UMC, LDP, and Teladentistry
  - v. License Plate MOU
  - vi. ADSD, DHCFP, DPBH, OHP and UNLV SDM Special Care Dental Clinic- in the final stages
- 2. Presentation to the Nevada Dental Association on oral health legislative initiatives on January 11<sup>th</sup>
- 3. Planning for Give Kids a Smile January 10<sup>th</sup>
- 4. Meetings with Adopt-a-Vet Dental Program, CSN, and DHCFP
- 5. Outreach: January 16<sup>th</sup> Nye County Social Services Fair
- 6. Coordination with Coalgate for April outreach to school-age children in Nye and Clark County
- 7. Preparation for February 19<sup>th</sup> Interim Legislative Health Care Committee Meeting
- 8. LOI submitted to Interim Finance Committee by January 10<sup>th</sup>
- 9. Presentation on Vegas PBS' public affairs shows Nevada Week to discuss healthcare in rural Nevada, January 23<sup>rd</sup>.
- 10. Presentation to the Southern Nevada Dental Association on January 23<sup>rd</sup> on the Medical Miles for Rural Smiles project and OHP.
- 11. Initial meeting with DWSS on methods to expand oral health outreach to their families.
- 12. Nevada State Board of Dental Examiners meeting scheduled for January 17<sup>th</sup> and 18<sup>th</sup>. Dr. Capurro was asked to attend and will be appointed on the NSBDE's Committee on Public Health to create regulation for SB366.

# **OHP MONTHLY REPORT to the CMO SUMMARY-December 2019**



From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
Sent:	Tuesday, February 18, 2020 12:02 PM
То:	Ihsan Azzam
Cc:	Lisa Sherych
Subject:	CMO Report- January [no encryption]
Attachments:	CMOMonthlyReportJanuary2020_summary.docx; CMOMonthlyReportJanuary 2020 _highlights.docx

#### Good Afternoon Dr.Azzam,

Hope this email finds you well. Attached is the CMO report that describes the activities of the Oral Health Program during the month of January.

As an update, the contract amendment for C17117 has been approved by the Division and is being reviewed by UNLV. I am hopeful that the contract amendment will be approved before the end of the month. I will hire an administrative assistant as soon as funds are available to ensure programmatic activities are maintained during my maternity leave.

If additional information is needed, please let me know. Best regards, Antonina



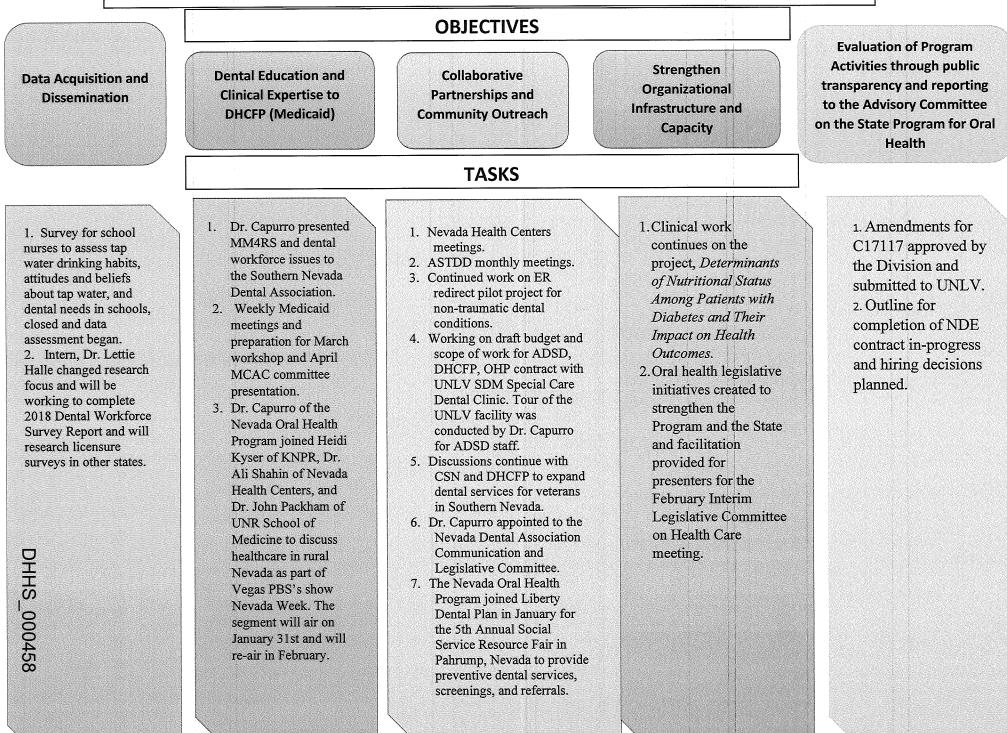
#### Antonina Capurro, DMD, MPH, MBA

Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

# OHP MONTHLY REPORT to the CMO SUMMARY-January 2020



#### **Communication on Oral and Public Health Issues**

Lectures this month included:

- A lecture entitled, *MM4RS and Dental Workforce Development* to the Southern Nevada Dental Association.
- Presentation to the Nevada Dental Association on oral health legislative initiatives on January 11<sup>th</sup>
- An interview on oral health in rural Nevada was provided. I joined Heidi Kyser of KNPR, Dr. Ali Shahin of Nevada Health Centers, and Dr. John Packham of UNR School of Medicine to discuss healthcare in rural Nevada as part of Vegas PBS's show Nevada Week. The segment will air on January 31st and will re-air in February.

#### **Community Service**

The Nevada Oral Health Program joined Liberty Dental Plan in January for the 5th Annual Social Service Resource Fair in Pahrump, Nevada to provide preventive dental services, screenings, and referrals. Of the patients seen, 63% had decayed teeth with early treatment needs, 26% had no obvious dental concerns, and 11% had urgent needs. The Nye County Health and Human Services has requested that the Oral Health Program attends the Tonopah Health Fair in July to provide dental services.

#### **Medicaid Updates**

The Medicaid dental chapter and benefit schedule have been updated and a public workshop was held this month. I provided clinical expertise and will provide the Division report on the results on the feedback received.

# Advocate for public health policy, legislation, and regulations to protect and promote the public's oral health and overall health

An oral health day has been assigned to the Interim Committee on Health Care for February 19<sup>th</sup>. I am leading the effort to coordinate the presentations and legislative asks from all stakeholders including the FQHCs, Medicaid, educational institutions, and coalitions.

Additionally, the Nevada State Board of Dental Examiners meeting occurred on January 17th and 18th. Dr. Capurro was asked to attend for appointed on the NSBDE's Committee on Public Health to create regulation for SB366. This item was tabled by the Board.

# February, 2020

# To Do List

The following contracts are in progress and will be reviewed during January:

 Amendment to C117176 continue

- ii. Washoe County School District, Clinical Services
- iii. UMC, LDP, and Teladentistry
- iv. License Plate MOU
- v. ADSD, DHCFP, DPBH, OHP and UNLV SDM Special Care Dental Clinic- in the final stages
- 2. Planning for Give Kids a Smile to occur on February 22<sup>nd</sup>.
- 3. Meetings with Adopt-a-Vet Dental Program, CSN, and DHCFP
- 4. Coordination with Coalgate for April outreach to school-age children in Nye and Clark County
- 5. Preparation and presentation for February 19<sup>th</sup> Interim Legislative Committee on Health Care meeting
- 6. Monthly meeting with DWSS on methods to expand oral health outreach to their families.
- Will join Senator Ratti and members of the Interim Legislative Committee on Health Care for a discussion of oral health in Nevada and tours of UNLV SDM, CSN, and TMCC on February 3<sup>rd</sup> and 11<sup>th</sup>.
- 8. Annual ASTDD Synopsis report will be submitted .

From:	Latisha Brown <labrown@health.nv.gov></labrown@health.nv.gov>
Sent:	Thursday, February 27, 2020 6:09 PM
То:	Antonina Capurro; Edith Farmer
Cc:	Connie Bejarano-Flores
Subject:	RE: Inquiry-Childcare Facility Information for Oral Health Project
Attachments:	February 2020 Child Care Licensee List.xls; State of Nevada Child Care Ratios
	03.2018.docx

Hello,

We are happy to help. Attached for your convenience is a list of licensed child care facilities, however you can find a list online at: <u>https://nvdpbh.aithent.com/</u>. Some folks have found it tricky to use so please feel free to call our office (702)486.3822 and we can walk you through the steps because the online listing is the most up to date listing.

As for other information, I am not sure what you would deem necessary to know about child cares that would help with your very worthy endeavor. However, I have attached a quick reference sheet for your review and if you have any questions or would like us to expand on anything then give us a call.

Hope some of this helps to get you started.

Thank you for all you do.

Best Regards,



#### Latisha Brown, MSW

Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: <u>labrown@health.nv.gov</u> www.dhhs.nv.gov | <u>http://dpbh.nv.gov/</u>



Helping People. It's who we are and what we do.

#### Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting <u>www.nevada211.org</u>

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.



From: Antonina Capurro <acapurro@health.nv.gov> Sent: Thursday, February 27, 2020 4:26 PM To: Latisha Brown <labrown@health.nv.gov>; Edith Farmer <efarmer@health.nv.gov> Subject: Inquiry-Childcare Facility Information for Oral Health Project

#### Good Afternoon,

My name is Dr. Antonina Capuro and I am the State Dental Health Officer with the DPBH, Oral Health Program. The Oral Health Program has recently entered into a contract with the Nevada Department of Education to complete a dental screening with data collection and build an education module and oral health protocols for licensed childcare centers throughout rural Nevada. Would your office be able to assist me in locating a list of the licensed childcare facilities by facility type with the approved capacity for children in each facility? Additionally, any other information that might inform our project would be greatly appreciated.

I look forward to hearing from you. Best regards,

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.



# State of Nevada Child Care Licensing Reference Guide

Please note this is a **brief reference** and for more information, contact the licensing agency in your area: Washoe County (775) 337.4470 \* Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Nye, Pershing, Carson, Churchill, Douglas, Lyon, Mineral, or Storey (775)684.4463 \* Clark County (702) 486.3822.

Child care provider qualifications can be found on the child website: <u>http://dpbh.nv.gov/Reg/ChildCare/Child\_Care\_Licensing\_-\_Home/</u>. You will find information on the application process, trainings, background checks, TB testing, etc.

Please access the full Nevada Administrative Code and the Nevada Revised Statutes online: <u>https://www.leg.state.nv.us/NAC/NAC-432A.html</u> or <u>https://www.leg.state.nv.us/NRS/NRS-432A.html</u>

Centers Operating from 6:30a.m. to 9:00p.m.					
Age of Child Child Ratio to Group					
	Staff	Size			
Under 9 mos.	8				
9mos - < 2yrs	12				
2yrs < 3yrs.	18				
3yrs < 4yrs.	12:1	24			
4yrs < 5yrs	13:1	26			
5yrs. & up	18:1	36			
Note: When dealing with mixed age groups, ratios will be determined by the youngest child in					
the room.					
Operating from 9:00p.m. to 6:30a.m.					
< 3 yrs. 6:1 12					
3 yrs. & up 10:1 20					

Family Care Homes Up to 6 children Total			
Age of Child Group Size			
< 1 yr.	2		
1yr – 3 yrs.	4		
3yrs &up	6		

Group Care Homes Up to 12 children Total				
Age of Child	Child to Staff Ratio	Group Size		
< 1 yr.	2:1	4		
1yr – 3 yrs.	4:1	8		
3yrs &up	6:2	12		

<u>Trainings include but are not limited to</u>: Child Development, First Aid/CPR, Signs and Symptoms of Illness w/ Blood Borne Pathogens, Reporting and Recognizing Child Abuse, SIDS, Prevention of Shaken Baby Syndrome an Abusive Head Trauma, Administration of Medication, Building and Physical Premises Safety, Emergency Preparedness, Transportation and Wellness.

Anyone 18 years or older who is a provider, employee, resident or volunteer will be required to have <u>a complete background check</u>. This process could take up to 3 months.

A completed Health Inspection is required

A completed Fire Inspection is required.

Providers will be required to obtain and provide proof of <u>a negative TB test</u>.

\*\*\* If you have any questions regarding the above please speak with your surveyor. \*\*\*



-----

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>	
Sent:	Wednesday, May 27, 2020 1:56 PM	
To: Subjects	civon.gewelber@unlv.edu Re: Inquiry	
Subject:	Re. Inquiry	
Yes, it's not due till Friday end	of day.	
 Thanks!! So glad this is the las	t week of this semester. Ready to have it over with for a while.	
Antonina Capurro, D.M.D	, M.P.H, M.B.A	
 Nevada State Dental Heal	lth_Officer	
 Nevada Department of Health an	id Human Services	
Division Public and Behavioral H	Health - Oral Health Program	
 1001 Shadow Lane, MS 7411, D2		
	2521  E: acapurro@ <u>health.nv.gov</u>	
www.dhhs.nv.gov   www.division	<u>n website.nv.gov</u>	
Helping People. It's who we are	and what we do.	
Reisenio de la completera	and a second second In the second	
Furshing a second beau and a second	caiven anyughar Qualy adus	
From: civon.gewelber@unlv.edu Sent: Wednesday, May 27, 2020		
Sent: Weanesday, May 27, 2020	@health.nv.gov>	
Subject: Re: Inquiry	enean.nv.gov	
Subject. Ne. inquiry		
Hello,		
	ow? I'm about to jump into an hour and half CE.	
Thanks!		
Civon		
Sent from my iPhone		
On May 27, 2020, at 1:47	7 PM, Antonina Capurro <acapurro@health.nv.gov> wrote:</acapurro@health.nv.gov>	
· · ·		
Hello Civon,		
• •	to ask you, but would you have time this week to write a very brief	
	my ATSU course? I took a picture of the course assignment. It seems	very
 simple, just to acknow	/ledge that you worked with me and I changed my project from a	
desensitization event t	to a presentation for your SDM course.	
	you would be able to do this and what information you might need.	
Thank you,	, , , , ,	
Antonina		
Antonina		
Antoning Canurro	, D.M.D, M.P.H, M.B.A	
Antonna Capullo	9 X7417A4X7 9 X7A4X 4XX 9 X7A4X74X7	

#### Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do. <Screen Shot 2020-05-27 at 1.44.38 PM.png>

From: Sent:	Antonina Capurro <acar Friday, June 5, 2020 4:10</acar 	-	V>	and the File of the second
То:	Patti Oya			
Subject:	Re: CCDF Quality Funds			
Perfect. I just sent you a ca	landar invitation			
Looking forward to speakin	g with you next week.			
Antonina Capurro, D.N	the start and the start of the start and the			
-Nevada-State-Dental-H	ealth Officer			······
Nevada Department of Health Division Public and Behavior 1001 Shadow Lane, MS 7411	al Health - Oral Health Progr			
T: (702) 774-2573  F: (702)77 www.dhhs.nv.gov   www.divi	4-2521  E: acapurro@health.			
Helping People. It's who we	are and what we do			
Therpfing reoptic. It is who we a				
		*		
From: Patti Oya <poya@doe.r Sent: Friday, June 5, 2020 3:5</poya@doe.r 	-			
To: Antonina Capurro <acapu< th=""><th>the second se</th><th>in a substantia de la companya de la</th><th>ان المان المان المانية. من المانية الم</th><th>a a construction of the second se</th></acapu<>	the second se	in a substantia de la companya de la	ان المان المان المانية. من المانية الم	a a construction of the second se
Subject: RE: CCDF Quality Fun	_			
Hi, I'm so glad you reached ou I am available on Mon at 9:00		tact you.		an a state a sa
Have a good weekend.				
Patti				
From: Antonina Capurro <aca Sent: Friday, June 05, 2020 3: To: Patti Oya <poya@doe.nv. Subject: Re: CCDF Quality Fun</poya@doe.nv. </aca 	00 PM gov>	· · · · · ·	 	

Good Afternoon Patti,

I hope this email finds you healthy and safe. The time seems to have flown by since we last spoke about the oral health surveillance project for licensed childcare facilities in rural Nevada. Would you have any time next week to touch base and review the project and timeline? I am fairly open on Monday and Thursday. If either day works for you, please suggest a time and I will create a calendar invitation.

I look forward to hearing from you. Thank you, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001-Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Thursday, March 19, 2020 5:01 PM To: Antonina Capurro <<u>antonina.capurro@unlv.edu</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: CCDF Quality Funds

Hi, I have been asked to estimate spending for the remainder of the fiscal year. DWSS is trying to support child care facilities or programs such as the Boys and Girls Clubs who are currently closed, but could open and care for children of workers deemed essential.

According to our records, you have not requested funds for contract #22479 and have a the full balance of \$35,760.

Please take a look at your budget, we are thinking there may be some activities/expenses that will not occur as planned moving forward. I don't need down to a penny, but if you could identify an amount that could be repurposed, it would be greatly appreciated. At this time, this will not impact your FY21 budgets.

Please respond by COB Wed 3/25. Whether you believe you will have unobligated funds or not this fiscal year, please give a brief explanation of why.

If you are not the person in your agency that can provide a response, please forward.

Hope you and your family are staying healthy!

Thanks, Patti

Patti Oya, Director Office of Early Learning and Development Nevada Department of Education

2080 E Flamingo Rd, Suite 210 Las Vegas, NV 89119

702.486.6492 Office 702.668.4340 Fax 702.810.8175 Cell

From: Sent: To: Subject: Attachments:	Patti Oya <poya@doe.nv.gov> Tuesday, June 9, 2020 9:52 AM Antonina Capurro RE: COVID Facility Listing 6.5.2020 Revised SOW and Budget UNLV School of De</poya@doe.nv.gov>	ental 6-9-20.docx	1999 - Aparlan J., 1997 - 1997	
-	DW. My edits are in red – please edit as neces did not make any changes to costs – I will lea			
If you can return by next week, the Also, I forgot to mention, I need	nat would be great. the invoice for this year by July 15.		· · · · · ·	
Let me know if you have question Patti	<u>าร.</u>			
From: Antonina Capurro <acapur Sent: Monday, June 08, 2020 2:2 To: Patti Oya <poya@doe.nv.gov Subject: Re: COVID Facility Listing</poya@doe.nv.gov </acapur 	8 PM ≥====================================			
	g. The plan for the amendment sounds gr		e the draft from	
Best,				
Antonina				
Antonina Capurro, D.M.D	, M.P.H, M.B.A	<u> </u>	ang ang taong aga sa sa	• • •
Nevada State Dental Hea Nevada Department of Health an Division Public and Behavioral H 1001 Shadow Lane, MS 7411, D T: (702) 774-2573  F: (702)774-2 www.dhhs.nv.gov   www.divisio Helping People. It's who we are	<b>Ith Officer</b> d Human Services Health - Oral Health Program 280 Las Vegas, NV 89106 2521  E: acapurro@ <u>health.nv.gov</u> n website.nv.gov	· · · · · · · · · · · · · · · · · · ·		
<b>From:</b> Patti Oya < <u>poya@doe.nv.</u> s	<u>30V</u> >		encourproving and stated as much many one and and the definitions.	

Sent: Monday, June 8, 2020 12:19 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: FW: COVID Facility Listing 6.5.2020

Hi, here is the current list from child care licensing.

I did speak with our contracts person. Yes, we have to do an amendment, but only needs Clerk signature. I will work on amending the SOW and you can edit from there. I will send this week for your approval.

Patti

An approximate the second s	Contraction of the second s	TANA TELEVISION DE LA VIOLENCIA DE LA VI	
From: Latisha Brown < <u>labrown@health.</u>	nv.gov>		
<b>Sent:</b> Friday, June 05, 2020 2:22 PM		hum nu cour Morty Flouist	
<b>To:</b> Crystal Johnson < <u>cmxjohnson@dwss</u> <melquist@childrenscabinet.org>; Chels</melquist@childrenscabinet.org>			
<a>  <a>  <a>  <a>  <a>    <a>    <a>     </a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></a></br></a></a></a></a>			aya daharan dari ku taka dari
Orme < <u>nkorme@health.nv.gov</u> >; Margo			
		hleen Baker < <u>kbaker@washoecounty.us</u> >	>;
Nye, Shelly < <u>SNye@washoeschools.net</u> >	>; Patti Oya < <u>poya@doe.nv.gov</u> >; Emily	Champlin < <u>echamplin@doe.nv.gov</u> >;	
Patrice M. Gardner < <u>pmgardner@doe.n</u>			
< <u>Emily.Buckles@lvul.org</u> >; Tara Phebus	< <u>Tara.Phebus@cityofhenderson.com</u> >;	Angela Rose	
<arose@lasvegasnevada.gov></arose@lasvegasnevada.gov>			
Cc: Darryl J. Parker < <u>dparker@dwss.nv.g</u>		<u>wss.nv.gov</u> >; Millie Cady	
< <u>ECADY@dwss.nv.gov</u> >; Paul Shubert < <u>F</u>	oshubert@nealtn.nv.gov>		
Subject: COVID Facility Listing 6.5.2020 Importance: High			
Importance: High			
Hello All,			
Attached you will find the most up to da	ate COVID19 facility listing along with a	list of registered emergency child cares.	
		lities have opened since last week and 16	
facilities plan to open within the next tw	vo weeks or more. Further, we were als	so able to open 4 new facilities this week	(= · · · ·
and 3 more new facilities plan to open in	n the weeks to come.	gen parte de la segura de la segura de la compositiva de la segura de la segura de la segura de la segura de la	yan yan bu bu bu bu Sun na seter seter seter Sun na seter s
Southern Total Facilities Opened = 171		and the second	
na sa ang ang ang ang ang ang ang ang ang an	a an	and a second	
Sothern Centers Open = 126	ا المان ما الماني المسيقية ( المان مينيون في الماني ما المانية عن عرقية عن المانية . ا	ana nga ngangangangan ang ang ang ang an	
Southern Family/Group Open = 045			
Northern Total Facilities Opened = 055			
Northern rotal racinties Opened = 033		and a second	
Northern Centers Open = 036		· · · · · · · · · · · · · · · · · · ·	
Northern Family/Group Open = 019			
Numbers combined equate 226 Opene	d State Child Care Facilities		
Southern Total Facilities Closed = 185	· · · · · · ·	· · · · · · · · · ·	
South Centers Closed = 150			
South Family/Group Closed = 035			
Northern Total Facilities Closed = 036			
North Centers Closed = $034$			
North Family/Group Closed = 002			
Numbers combined equate 221 Closed	State Child Care Facilities		
Facilities that have closed this week du	ie to COVID:		
NONE			

#### Facilities Reopened or Planning to Reopen:

Southern Facilities –			
Creative Kids Craig – (To Open 6/8) Merryhill Durango – (To Open 6/8) Merryhill Snow Trail – (To Open 6/8) Brilliant Child – (To Open 6/9) Mojave Springs (To Open 8/17)			
Our Lady of Las Vegas (To Open 8/17)			
Northern Facilities –			
Child and Family Research Center 6 <sup>th</sup> Street (To Open 6, Child and Family Research Center Comstock (To Open 6 St. Teresa of Avila CDC – (To Open 6/8) Tiny Sprouts Learning (To Open 6/8) Child Development Center (6/15) Educare Dei Montessori (To Open 6/15)			
Learning Ladder – (To Open 8/10)			· · · · · ·
Great Basin – (To Open 8/31) CSA Cottonwood Head Start (To open 9/1) Little Red Caboose (9/1)			
Currently there are <b>117</b> facilities registered for emerge	ncy care.		
Let me know if there are any questions.		· · ·	
Stay safe and well.			an a
Best Regards,			
		-	wong.



# Latisha Brown, MSW

Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: <u>labrown@health.nv.gov</u> www.dhhs.nv.gov | <u>http://dpbh.nv.gov/</u>



Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

LIK	(E U	<u>S (</u>	<u>)N</u>		
		Í			
				na anto to co	

DHHS\_000471

# ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET June 2020

Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

**Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada** Team: Antonina Capurro DMD, MPH, MBA

Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

Part 1A: Project Planning and Facility Education Timeline: December 16, 2019-June 30, 2020 Cost: \$23,066 + \$2,306 (10% Indirect) = \$25,372

### Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed child care facilities throughout rural Nevada (see script attached).
- Development of four, comparable, webinars to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- All purchase orders for screening supplies will be completed during this time frame.
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - suatification s of sampling suata, and
  - Developing of a data entry program

Part 1B: Project Planning and Facility Education Timeline: July 1, 2020-September 30, 2020 Cost: \$23,066 + \$2,306 (10% Indirect) = \$25,372

#### Scope of work

- Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Implementation of four, comparable, Nevada Registry approved webinars will be offered to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they

will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
All travel arrangements will be completed during this time frame.

Part 2: Dental Screening and Classroom Education Timeline: October 1, 2020-December 31, 2020 Cost: \$5,823 + \$583 (10% Indirect) = \$6,406

#### Scope of work

- Each participating classroom within an individual child care center will receive a gradelevel appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.
- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual child care center will receive:
  - A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child),
  - Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating child care center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating child care facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Selection of replacement schools/sites

## Part 3: Technical Assistance with Evaluation Activities Timeline: October 1, 2020-March 31, 2021 Cost: \$3,620 + \$362 (10% Indirect) = \$3,982

## Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating child care facilities one month following completion of the screenings. This survey will provide data to measure

compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

<b>Direct Cost:</b>	\$32,509
Indirect Cost:	\$3,251
Total Budget:	\$35,760

-----

# Martha Framsted

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Sunday, June 14, 2020 6:33 PM
То:	Patti Oya
Subject:	Re: COVID Facility Listing 6.5.2020
Attachments:	Revised SOW and Budget UNLV School of Dental 6-9-20.docx

Good Afternoon Patti,

Attached is the revised SOW and budget. Please let me know if further revisions are needed. Again, I appreciate your flexibility. Once I hear from you, I will submit the revised SOW and signature page to UNLV.

Thank you and have a wonderful weekend, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services – Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <poya@doe.nv.gov> Sent: Tuesday, June 9, 2020 9:51 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: RE: COVID Facility Listing 6.5.2020

Hi, I have attached the revised SOW. My edits are in red – please edit as necessary. I highlighted the costs in green. I did not make any changes to costs – I will leave that to you to edit.

If you can return by next week, that would be great. Also, I forgot to mention, I need the invoice for this year by July 15.

Let me know if you have questions. Patti

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Monday, June 08, 2020 2:28 PM To: Patti Oya <poya@doe.nv.gov> Subject: Re: COVID Facility Listing 6.5.2020

Thank you for the facility listing. The plan for the amendment sounds great. I will wait to receive the draft from you. Best,

# Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A	
Nevada State Dental Health Officer	
Nevada Department of Health and Human Services	
Division Public and Behavioral Health - Oral Health Program	
1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106	
T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov	
www.dhhs.nv.gov   www.division website.nv.gov	
Helping People. It's who we are and what we do.	
Frame Datti Qua casua adaga nu gaus	7
From: Patti Oya < <u>poya@doe.nv.gov</u> >	
Sent: Monday, June 8, 2020 12:19 PM	
To: Antonina Capurro <a a="" compan<="" company="" comparison="" of="" th=""><th></th></a>	
Subject: FW: COVID Facility Listing 6.5.2020	
Hi, here is the current list from child care licensing.	
I did speak with our contracts person. Yes, we have to do an amendment, but only needs Clerk signature.	
I will work on amending the SOW and you can edit from there. I will send this week for your approval.	
n Patti un na serie de la companya d La patti un na serie de la companya d	
From: Latisha Brown <labrown@health.nv.gov></labrown@health.nv.gov>	· · ·
Sent: Friday, June 05, 2020 2:22 PM	
To: Crystal Johnson < <u>cmxjohnson@dwss.nv.gov</u> >; Christell Askew < <u>CASKEW@dwss.nv.gov</u> >; Marty Elquist	
<pre><melquist@childrenscabinet.org>; Chelsea Sliter &lt;<u>csliter@childrenscabinet.org</u>&gt;; Warren Evans</melquist@childrenscabinet.org></pre>	 
<warren.evans@lvul.org>; Mary Regan &lt;<u>Mary.Regan@lvul.org</u>&gt;; Jennifer Butler &lt;<u>Jennifer.Butler@lvul.org</u>&gt;; Nathan K.</warren.evans@lvul.org>	
Orme < <u>nkorme@health.nv.gov</u> >; Margot Chappel < <u>MChappel@health.nv.gov</u> >; Elisa Cafferata	
< <u>Ecafferata@dwss.nv.gov</u> >; kate.mcnabney < <u>kate.mcnabney@caanv.org</u> >; Kathleen Baker < <u>kbaker@washoecounty.us</u> >	>:
Nye, Shelly < <u>SNye@washoeschools.net</u> >; Patti Oya < <u>poya@doe.nv.gov</u> >; Emily Champlin < <u>echamplin@doe.nv.gov</u> >;	
Patrice M. Gardner < <u>pmgardner@doe.nv.gov</u> >; Kathryn Roose < <u>kroose@dcfs.nv.gov</u> >; Emily Buckles	
< <u>Emily.Buckles@lvul.org</u> >; Tara Phebus < <u>Tara.Phebus@cityofhenderson.com</u> >; Angela Rose	
<arcse@lasvegasnevada.gov></arcse@lasvegasnevada.gov>	
Cc: Darryl J. Parker < <u>dparker@dwss.nv.gov</u> >; Dave Goldstein < <u>dmgoldstein@dwss.nv.gov</u> >; Millie Cady	
< <u>ECADY@dwss.nv.gov</u> ; Paul Shubert < <u>pshubert@health.nv.gov</u> >	
Subject: COVID Facility Listing 6.5.2020	
Importance: High	
Hello All,	
Attached you will find the most up to date COVID19 facility listing along with a list of registered emergency child cares.	
The numbers continue to show facilities opening and planning to open. 26 facilities have opened since last week and 16	
facilities plan to open within the next two weeks or more. Further, we were also able to open 4 new facilities this week	
and 3 more new facilities plan to open in the weeks to come.	
Southern Total Facilities Opened = 171	

Sothern Centers Open = 126 Southern Family/Group Open = 045

Northern Total Facilities Opened = 055

# Numbers combined equate 226 Opened State Child Care Facilities

Southern Total Facilities Closed = 185	
South Centers Closed = 150 South Family/Group Closed = 035	
Northern Total Facilities Closed = 036	
North Centers Closed = 034 North Family/Group Closed = 002	
Numbers combined equate 221 Closed State Child Care Facilities	
Facilities that have closed this week due to COVID:	
Facilities Reopened or Planning to Reopen:	
Southern Facilities –	
Creative Kids Craig – (To Open 6/8) Merryhill Durango – (To Open 6/8)	
Merryhill Snow Trail – (To Open 6/8) Brilliant Child – (To Open 6/9)	
Mojave Springs (To Open 8/17) Our Lady of Las Vegas (To Open 8/17)	
Northern Facilities –	
Child and Family Research Center 6 <sup>th</sup> Street (To Open 6/8) Child and Family Research Center Comstock (To Open 6/8) St. Teresa of Avila CDC – (To Open 6/8) Tiny Sprouts Learning (To Open 6/8)	
Great Basin – (To Open 8/31) CSA Cottonwood Head Start (To open 9/1)	
Little Red Caboose (9/1) Currently there are <u>117</u> facilities registered for emergency care.	

Let me know if there are any questions.

Stay safe and well.

#### Best Regards,



Latisha	Brown.	MS	W
- mailonia		<b>X1XU</b>	

Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: labrown@health.nv.gov www.dhhs.nv.gov | http://dpbh.nv.gov/



Helping People. It's who we are and what we do.

### Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy-Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

LIKE US ON

# ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET June 2020

Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada Team: Antonina Capurro DMD, MPH, MBA

> Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

## Part 1A: Project Planning and Facility Education Timeline: December 16, 2019-June 30, 2020 Cost: \$7,140.46 + \$714.05 (10% Indirect) = \$7,854.51

### Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability
   of licensed childcare facilities throughout rural Nevada (see script attached).
- Development of four, comparable, webinars to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement
   System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Purchase orders for screening supplies except for out-of-stock PPE will be completed during this time frame.
- Hourly staff will be hired to assist in project implementation
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - Developing of a data entry program

## Part 1B: Project Planning and Facility Education Timeline: July 1, 2020-September 30, 2020 Cost: \$ 12, 896.88 + \$1,289.69 (10% Indirect) = \$14,186.57

## Scope of work

- Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Purchase orders for previously out-of-stock screening supplies including PPE will be completed during this time frame.
- Implementation of four, comparable, Nevada Registry approved webinars will be offered to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's

Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.

- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
- All travel arrangements will be finalized during this time frame.

## Part 2: Dental Screening and Classroom Education Timeline: October 1, 2020-December 31, 2020 Cost: \$11,431,74+1,143,17 (10% Indirect) = \$12,574.91

Scope of work

- Each participating classroom within an individual childcare center will receive a grade-level appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.
- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual childcare center will receive:
  - A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child),
  - Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating childcare center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating childcare facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- Travel will be taken during this time frame and motor pool and per diem charges will be incurred.
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Selection of replacement schools/sites

Part 3: Technical Assistance with Evaluation Activities Timeline: October 1, 2020-March 31, 2021 Cost: \$1,040 +\$104(10% Indirect) = \$1,144

Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating childcare facilities one month following completion of the screenings. This survey will provide data to measure compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

Direct Cost:	\$32,509	
<b>Indirect Cost:</b>	\$3,251	
Total Budget:	\$35,760	

3

# **Martha Framsted**

	From:	Patti Oya <poya@doe.nv.go< th=""><th></th><th></th><th></th></poya@doe.nv.go<>			
- 2	Sent:	Monday, June 15, 2020 7:31	*AM* ==== *****	nation contactual de la contactual de Minister esté construir en la construir de la construir de la construir e	
	To: Subject:	Antonina Capurro RE: COVID Facility Listing 6.5	: 2020		
	Subject: Attachments:	Revised SOW and Budget U		l-20 docx	
	Attachments.	Revised SOW and Budget of		20.000	
	Looks good to me - I have reatt	ached w/o the green and red f	onts.		
	Patti				
	From: Antonina Capurro <acap< th=""><th>urro@health.nv.gov&gt;</th><th></th><th></th><th></th></acap<>	urro@health.nv.gov>			
	Sent: Sunday, June 14, 2020 6:	33 PM			
	<b>To:</b> Patti Oya <poya@doe.nv.go< th=""><th></th><th></th><th></th><th></th></poya@doe.nv.go<>				
	Subject: Re: COVID Facility Listi	ing 6.5.2020			
	Good Afternoon Patti,		· · · ·		
	an a	n an	and and a second se	n en se e sont de la composition de la La composition de la c	· · · · ·
	Attached is the revised SOW				·····
	appreciate your flexibility. O	nce I hear from you, I will su	bmit the revised SOW	and signature page to L	JNLV.
	Thank you and have a wond	erful weekend,		a an anna an	
• •	Antonina		· · · · · · · · · · · · · · · · · · ·		
	Antonina Capurro, D.M.	D, M.P.H, M.B.A			
	Nevada State Dental He		in a star a s	an a	
	Nevada Department of Health a				
	Division Public and Behavioral				
	1001 Shadow Lane, MS 7411, 1				
	T: (702) 774-2573 F: (702)774	-2521  E: acapurro@health.nv.	gov		
	www.dhhs.nv.gov   www.divis	ion website.nv.gov			
	Helping People. It's who we an	re and what we do.			
					· · ·
	<b>From:</b> Patti Oya < <u>poya@doe.nv</u>	v.gov>			
	Sent: Tuesday, June 9, 2020 9:	51 AM			
	<b>To:</b> Antonina Capurro < <u>acapurr</u>	ro@health.nv.gov>			
	Subject: RE: COVID Facility List	ing 6.5.2020	· · · · · · · · · ·		
	Hi, I have attached the revised	SOW. My edits are in red – ple	ase edit as necessarv.		
	I highlighted the costs in green	•		to you to edit.	
	If you can return by next week	, that would be great.			
	Also, I forgot to mention, I nee		ly 15.		

Let me know if you have questions. Patti

From: Antonina Capurro <a and="" concernmentation="" se<="" second="" th="" the=""></a>
Sent: Monday, June 08, 2020 2:28 PM
<b>To:</b> Patti Oya < <u>poya@doe.nv.gov</u> >
Subject: Re: COVID Facility Listing 6.5.2020
Thank you for the facility listing. The plan for the amendment sounds great. I will wait to receive the draft from
you.
Best,
Antonina
Antonina Capurro, D.M.D, M.P.H, M.B.A
Nevada State Dental Health Officer
Nevada Department of Health and Human Services
Division Public and Behavioral Health - Oral Health Program
1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106
T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov
www.dhhs.nv.gov   www.division website.nv.gov
Helping People. It's who we are and what we do.
From: Patti Oya < <u>poya@doe.nv.gov</u> >
Sent: Monday, June 8, 2020 12:19 PM
To: Antonina Capurro <a a="" concer<="" concerning="" of="" th=""></a>
Subject: FW: COVID Facility Listing 6.5.2020
Hi, here is the current list from child care licensing. I did speak with our contracts person. Yes, we have to do an amendment, but only needs Clerk signature.
I will work on amending the SOW and you can edit from there. I will send this week for your approval.
Twill work on amending the SOW and you can edit nom there. Twill send this week for your approval.
Patti
From Latiana Brown Alabrawn @haalth av gov>
From: Latisha Brown < <u>labrown@health.nv.gov</u> > Sent: Friday, June 05, 2020 2:22 PM
<b>To:</b> Crystal Johnson < <u>cmxjohnson@dwss.nv.gov</u> >; Christell Askew < <u>CASKEW@dwss.nv.gov</u> >; Marty Elquist
<pre>crystal Johnson &lt;<u>crmston Bonguwss.nv.gov</u>&gt;, Christen Askew &lt;<u>CASKEW@dwss.nv.gov</u>&gt;, Marty Equist &lt;<u>melquist@childrenscabinet.org</u>&gt;; Chelsea Sliter &lt;<u>csliter@childrenscabinet.org</u>&gt;; Warren Evans</pre>
< <u>melguist@cmidrenscabinet.org</u> >; Cheisea Sher < <u>csiner@cmidrenscabinet.org</u> >; Warren Evans < <u>warren.evans@lvul.org</u> >; Mary Regan < <u>Mary.Regan@lvul.org</u> >; Jennifer Butler < <u>Jennifer.Butler@lvul.org</u> >; Nathan K.
<pre>     Comme &lt; &lt; &lt; &gt; Set Set Set Set Set Set Set Set Set Set</pre>
<u>Example and a second secon</u>
< <u>Ecarrerata@dwss.nv.gov</u> >; kate.mchabney< <u>kate.mchabney@caanv.org</u> >; katheen baker < <u>kbaker@washoecounty.ds</u> >; Nye, Shelly < <u>SNye@washoeschools.net</u> >; Patti Oya < <u>poya@doe.nv.gov</u> >; Emily Champlin < <u>echamplin@doe.nv.gov</u> >;
Patrice M. Gardner < <u>pmgardner@doe.nv.gov</u> >; Kathryn Roose < <u>kroose@dcfs.nv.gov</u> >; Emily Buckles
< <u>Emily.Buckles@lvul.org</u> >; Tara Phebus < <u>Tara.Phebus@cityofhenderson.com</u> >; Angela Rose
<u>aiose@lasvegasilevaua.gov</u> /
Cc: Darryl J. Parker < <u>dparker@dwss.nv.gov</u> >; Dave Goldstein < <u>dmgoldstein@dwss.nv.gov</u> >; Millie Cady
< <u>ECADY@dwss.nv.gov</u> >; Paul Shubert < <u>pshubert@health.nv.gov</u> >
Subject: COVID Facility Listing 6.5.2020
Importance: High
Hello All,

Attached you will find the most up to date COVID19 facility listing along with a list of registered emergency child cares. The numbers continue to show facilities opening and planning to open. 26 facilities have opened since last week and 16

	facilities plan to open within the next two weeks or more. I and 3 more new facilities plan to open in the weeks to com		o open 4 new facilities this	week
	Southern Total Facilities Opened = 171			
	Sothern Centers Open = 126 Southern Family/Group Open = 045		(1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	
	Northern Total Facilities Opened = 055			
	Northern Centers Open = 036 Northern Family/Group Open = 019		, <u>, , , , , , , , , , , , , , , , , , </u>	
	Numbers combined equate 226 Opened State Child Care I	Facilities		
	Southern Total Facilities Closed = 185			
	South Centers Closed = 150 South Family/Group Closed = 035			
- 22	Northern Total Facilities Closed = 036			
	North Centers Closed = 034 North Family/Group Closed = 002			
	Numbers combined equate 221 Closed State Child Care Fa	acilities		
	Facilities that have closed this week due to COVID:	e e e e e e e e e e e e e e e e e e e		
	NONE		· · · · · · · · · · · · · · · · · · ·	
	Facilities Reopened or Planning to Reopen:			
	Southern Facilities –			
	Creative Kids Craig – (To Open 6/8) Merryhill Durango – (To Open 6/8) Merryhill Snow Trail – (To Open 6/8) Brilliant Child – (To Open 6/9)			
	Mojave Springs (To Open 8/17) Our Lady of Las Vegas (To Open 8/17)		· · · · · · · · · · · · · · · · · · ·	···· • · · · · · · · · · · · · · · · ·
	Northern Facilities –			
	Child and Family Research Center 6 <sup>th</sup> Street (To Open 6/8) Child and Family Research Center Comstock (To Open 6/8) St. Teresa of Avila CDC – (To Open 6/8) Tiny Sprouts Learning (To Open 6/8) Child Development Center (6/15) Educare Dei Montessori (To Open 6/15)			

\_\_\_\_

Learning Ladder – (To Open 8/10) Great Basin – (To Open 8/31) CSA Cottonwood Head Start (To open 9/1) Little Red Caboose (9/1)

#### Currently there are **117** facilities registered for emergency care.

Let me know if there are any questions.

Stay safe and well.

Best Regards,



# Latisha Brown, MSW

Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: <u>labrown@health.nv.gov</u> www.dhhs.nv.gov | <u>http://dpbh.nv.gov/</u>



Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

Helping People. It's who we are and what we do.

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.



# ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET June 2020

# Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada

Team: Antonina Capurro DMD, MPH, MBA

Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

## Part 1A: Project Planning and Facility Education Timeline: December 16, 2019-June 30, 2020 Cost: \$7,140.46 + \$714.05 (10% Indirect) = \$7,854.51

Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed childcare facilities throughout rural Nevada (see script attached).
- Development of four, comparable, webinars to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Purchase orders for screening supplies except for out-of-stock PPE will be completed during this time frame.
- Hourly staff will be hired to assist in project implementation
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - Developing of a data entry program

## Part 1B: Project Planning and Facility Education Timeline: July 1, 2020-September 30, 2020 Cost: \$ 12,896.88 + \$1,289.69 (10% Indirect) = \$14,186.57

## Scope of work

- Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Purchase orders for previously out-of-stock screening supplies including PPE will be completed during this time frame.
- Implementation of four, comparable, Nevada Registry approved webinars will be offered to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's

Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.

- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
- All travel arrangements will be finalized during this time frame.

## Part 2: Dental Screening and Classroom Education Timeline: October 1, 2020-December 31, 2020 Cost: \$11,431.74+ 1,143.17 (10% Indirect) = \$12,574.91

Scope of work

- Each participating classroom within an individual childcare center will receive a grade-level appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.
- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual childcare center will receive:
  - A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child),
  - Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating childcare center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating childcare facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- Travel will be taken during this time frame and motor pool and per diem charges will be incurred.
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:

• Selection of replacement schools/sites

## Part 3: Technical Assistance with Evaluation Activities Timeline: October 1, 2020-March 31, 2021 Cost: \$1,040 +\$104 (10% Indirect) = \$1,144

#### Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating childcare facilities one month following completion of the screenings. This survey will provide data to measure compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

Direct Cost:	\$32,509
<b>Indirect Cost:</b>	\$3,251
<b>Total Budget:</b>	\$35,760

## Martha Framsted

	From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
T		Monday, June 15, 2020 9:32 AM
-	То:	Patti Oya
	Subject:	Re: COVID Facility Listing 6.5.2020
	Attachments:	Interlocal Amendment (UNLV Dental Agreement) (1).docx

I probably would just so to avoid any confusion. The document attached includes that revision. If this looks good, I'll send it forward. Thank you, Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 [F: (702)774-2521 [E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <poya@doe.nv.gov> Sent: Monday, June 15, 2020 9:19 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: RE: COVID Facility Listing 6.5.2020

No, we don't need a new data sharing agreement. Do you think we should remove it from Section C?

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Monday, June 15, 2020 9:13 AM To: Patti Oya <poya@doe.nv.gov> Subject: Re: COVID Facility Listing 6.5.2020

Thank you, Patti. Quick question, in the amendment section C refers to three attachments. I am assuming the
revised scope of work is the only new document. Should I attach a new data-sharing agreement as well?
Please advise.
Thank you,
Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

and the second	
<b>From:</b> Patti Oya < <u>poya@doe.nv.gov</u> >	
<b>Sent:</b> Monday, June 15, 2020 7:30 AM	
To: Antonina Capurro < <u>acapurro@health.nv.gov</u> >	
Subject: RE: COVID Facility Listing 6.5.2020	
Looks good to me - I have reattached w/o the green and red fonts.	
Patti	
<b>From:</b> Antonina Capurro < <u>acapurro@health.nv.gov</u> >	na a na sana da na manga manana da na Grana yang Kanganana na manga karangkan Mananan da na sa
Sent: Sunday, June 14, 2020 6:33 PM	
<b>To:</b> Patti Oya < <u>poya@doe.nv.gov</u> >	
Subject: Re: COVID Facility Listing 6.5.2020	
Good Afternoon Patti,	
Attached is the revised SOW and budget. Please let me know if further revisions are nee appreciate your flexibility. Once I hear from you, I will submit the revised SOW and signa	
Thank you and have a wonderful weekend, Antonina	
Antonina Capurro, D.M.D, M.P.H, M.B.A	
Nevada State Dental Health Officer	
Nevada Department of Health and Human Services	· · · · · · · · ·
Division Public and Behavioral Health - Oral Health Program	
1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106	
T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov	
www.dhhs.nv.gov   www.division website.nv.gov	
Helping People. It's who we are and what we do.	
From: Patti Oya < <u>poya@doe.nv.gov</u> >	
Sent: Tuesday, June 9, 2020 9:51 AM	
<b>To:</b> Antonina Capurro < <u>acapurro@health.nv.gov</u> >	
Subject: RE: COVID Facility Listing 6.5.2020	
Hi, I have attached the revised SOW. My edits are in red – please edit as necessary.	
I highlighted the costs in green. I did not make any changes to costs – I will leave that to you to	edit.
If you can return by next week, that would be great.	
Also, I forgot to mention, I need the invoice for this year by July 15.	
Let me know if you have questions.	
Patti	
From: Antoning Canurro acconurro @health nu gova	
From: Antonina Capurro < <u>acapurro@health.nv.gov</u> > Sent: Monday, June 08, 2020 2:28 PM	
<b>To:</b> Patti Oya < <u>poya@doe.nv.gov</u> >	
Subject: Re: COVID Facility Listing 6.5.2020	

Thank you for the facility listing. The plan for the amendment sounds great. I will wait to receive the draft from you. Best, Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division-Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Monday, June 8, 2020 12:19 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: FW: COVID Facility Listing 6.5.2020

Hi, here is the current list from child care licensing.

I did speak with our contracts person. Yes, we have to do an amendment, but only needs Clerk signature. I will work on amending the SOW and you can edit from there. I will send this week for your approval.

Patti

From: Latisha Brown <<u>labrown@health.nv.gov</u>>

Sent: Friday, June 05, 2020 2:22 PM

To: Crystal Johnson <<u>cmxjohnson@dwss.nv.gov</u>>; Christell Askew <<u>CASKEW@dwss.nv.gov</u>>; Marty Elquist

<melquist@childrenscabinet.org>; Chelsea Sliter <csliter@childrenscabinet.org>; Warren Evans

<<u>warren.evans@lvul.org</u>>; Mary Regan <<u>Mary.Regan@lvul.org</u>>; Jennifer Butler <<u>Jennifer.Butler@lvul.org</u>>; Nathan K. Orme <<u>nkorme@health.nv.gov</u>>; Margot Chappel <<u>MChappel@health.nv.gov</u>>; Elisa Cafferata

<<u>Ecafferata@dwss.nv.gov</u>>; kate.mcnabney <<u>kate.mcnabney@caanv.org</u>>; Kathleen Baker <<u>kbaker@washoecounty.us</u>>;

Nye, Shelly <<u>SNye@washoeschools.net</u>>; Patti Oya <<u>poya@doe.nv.gov</u>>; Emily Champlin <<u>echamplin@doe.nv.gov</u>>;

Patrice M. Gardner <<u>pmgardner@doe.nv.gov</u>>; Kathryn Roose <<u>kroose@dcfs.nv.gov</u>>; Emily Buckles

<<u>Emily.Buckles@lvul.org</u>>; Tara Phebus <<u>Tara.Phebus@cityofhenderson.com</u>>; Angela Rose

<arose@lasvegasnevada.gov>

Cc: Darryl J. Parker <<u>dparker@dwss.nv.gov</u>>; Dave Goldstein <<u>dmgoldstein@dwss.nv.gov</u>>; Millie Cady <ECADY@dwss.nv.gov>; Paul Shubert <<u>pshubert@health.nv.gov</u>>

Subject: COVID Facility Listing 6.5.2020

Importance: High

\_\_\_\_\_

Hello All,

Attached you will find the most up to date COVID19 facility listing along with a list of registered emergency child cares. The numbers continue to show facilities opening and planning to open. 26 facilities have opened since last week and 16 facilities plan to open within the next two weeks or more. Further, we were also able to open 4 new facilities this week and 3 more new facilities plan to open in the weeks to come.

## Southern Total Facilities Opened = 171

**Sothern Centers Open** = 126

Southern Family/Group Open = 045
Northern Total Facilities Opened = 055
Northern Centers Open = 036 Northern Family/Group Open = 019 Numbers combined equate 226 Opened State Child Care Facilities
Southern Total Facilities Closed = 185
South Centers Closed = 150 South Family/Group Closed = 035
 Northern Total Facilities Closed = 036
 North Centers Closed = 034 North Family/Group Closed = 002
Numbers combined equate 221 Closed State Child Care Facilities
Facilities that have closed this week due to COVID:
NONE
Facilities Reopened or Planning to Reopen:
 Southern Facilities –
Creative Kids Craig – (To Open 6/8) Merryhill Durango – (To Open 6/8) Merryhill Snow Trail – (To Open 6/8) Brilliant Child – (To Open 6/9) Mojave Springs (To Open 8/17) Our Lady of Las Vegas (To Open 8/17)
Northern Facilities —
 Child and Family Research Center 6 <sup>th</sup> Street (To Open 6/8) Child and Family Research Center Comstock (To Open 6/8) St. Teresa of Avila CDC – (To Open 6/8) Tiny Sprouts Learning (To Open 6/8) Child Development Center (6/15) Educare Dei Montessori (To Open 6/15) Learning Ladder – (To Open 8/10) Great Basin – (To Open 8/31) CSA Cottonwood Head Start (To open 9/1) Little Red Caboose (9/1)
Currently there are 117 facilities registered for emergency care

Currently there are  $\underline{\textbf{117}}$  facilities registered for emergency care.

......

Let me know if there are any questions.

Stay safe and well.

Best Regards,



#### Latisha Brown, MSW Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: labrown@health.nv.gov www.dhhs.nv.gov | http://dpbh.nv.gov/



Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender inimediately by e-mail, and delete the message.



CETS #:	
Agency Reference #:	

## **AMENDMENT #1**

#### TO INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

Between the State of Nevada Acting By and Through Its

Public Entity #1:	NDE Department of Education, Office of Early Learning and Development
Address:	2080 E Flamingo Road, Suite 210
City, State, Zip Code:	Las Vegas, NV 89119
Contact:	Patti Oya
Phone:	702-486-6492
Email:	poya@doe.nv.gov

Public Entity #2:	Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine
Address:	1001 Shadow Lane
City, State, Zip Code:	Las Vegas, NV 89106
Contact:	Dr Antonina Capurro
Phone:	702-774-2573
Email:	acapurro@health.nv.gov

1. **AMENDMENTS.** For and in consideration of mutual promises and other valuable consideration, all provisions of the original Contract dated 12/17/2019, attached hereto as Exhibit A, remain in full force and effect with the exception of the following:

#### A. <u>Provide a brief explanation for contract amendment.</u>

This amendment is to revise the dates within the scope of work but does not change the activities, funding amount, or end date of the current contract. This contract is 100% Federally funded. The primary activity of this contract is to provide dental screenings and classroom education for child care centers in rural Nevada. Due to the closure of child care centers during the Covid-19 pandemic, all travel and visits were postponed. As child care centers are now beginning to slowly reopen, visits will be rescheduled for Oct-Dec 2020.

#### B. <u>Current Contract Language:</u>

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence. ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT BB: DATA SHARING AGREEMENT

#### C. Amended Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence. ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET

# DHHSag000494

CETS #:	
Agency Reference #:	

- 2. **INCORPORATED DOCUMENTS.** Exhibit A (original Contract) is attached hereto, incorporated by reference herein and made a part of this amended contract.
- 3. **REQUIRED APPROVAL**. This amendment to the original Contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

		CETS #: Agency Reference #:	
		······································	
IN WITNESS WHEREOF, the parties hereto have c be legally bound thereby.		dment to the original contract to be signed and inter-	nd to
Board of Regents, Nevada System of Higher Educatio <u>On Behalf of the University of Nevada, Las Vegas</u> Public Agency #1	n		
		Executive Director, Sponsored Programs	
Lori M. Ciccone, MBA, CRA	Date	Title	
Nevada Department of Education Public Agency #2			
		Deputy Superintendent, Nevada Department Education	of
State of Nevada Authorized Signature	Date	Title	
		APPROVED BY BOARD OF EXAMINERS	
Signature – Board of Examiners			
· · ·			
	0		
	On:	Date	
Approved as to form by:			
	On:		
Deputy Attorney General for Attorney General	· · · · ·	Date	
n an			

# Martha Framsted

From: Sent:		acapurro@health.nv 020 10:02 AM	.gov>	u - The second	
To:	Patti Oya				
Subject:	Re: COVID Facility L	istina 6.5.2020			
	······································				
Perfect. Will do.					
				······································	
Antonina Capurro, D.M.D	. M.P.H. M.B.A				
Nevada State Dental Hea					
Nevada Department of Health an	the second se				
Division Public and Behavioral H		Program			
1001 Shadow Lane, MS 7411, D					
T: (702) 774-2573 [F: (702)774-2					
www.dhhs.nv.gov   www.divisio		cartininy.gov			
www.dims.nv.gov   www.divisio	II Website.itv.gov				
III 1 'n Deenle It'e ook e oor	and what we do				
Helping People. It's who we are	and what we do.				
· · · ·		· · · ·		· · ·	
			-		
From: Patti Oya <poya@doe.nv.< th=""><th></th><th></th><th></th><th></th><th></th></poya@doe.nv.<>					
Sent: Monday, June 15, 2020 9:3					
<b>To:</b> Antonina Capurro <acapurro< th=""><th>and the second second</th><th></th><th></th><th></th><th></th></acapurro<>	and the second				
Subject: RE: COVID Facility Listin	g 6.5.2020				
Looks good – please move forwa	rd with signatures				
Antonina Capurro, D.M.D	, M.P.H, M.B.A			ی بند این ایک	
Nevada State Dental Hea					
Nevada Department of Health an					
Division Public and Behavioral I		Program			
1001 Shadow Lane, MS 7411, D					
T: (702) 774-2573  F: (702)774-2					
www.dhhs.nv.gov   www.divisio					
Helping People. It's who we are					
Theiping reopie. It's who we are	and what we do.				
From: Patti Oya < <u>poya@doe.nv.</u>	ダーン	naritanas e menantaria narrea constante promoto estrato que dan accumentativa facilitaria dal mandativa a difera		an annan an - an - Marainte an bhairt fa bhair an Anna Anna Anna Anna Anna Anna Anna	
Sent: Monday, June 15, 2020 9:1					
To: Antonina Capurro < <u>acapurro</u>					
•					
Subject: RE: COVID Facility Listin	g 0.3.2020	· · · · · · · · · · · · · · · · · · ·		• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · ·
No, we don't need a new data sł	naring agreement. D	o you think we shou	ld remove it from Sect	ion C?	
	· ····································				
From: Antonina Capurro <acapu< th=""><th>rro@health.nv.gov&gt;</th><th></th><th></th><th></th><th></th></acapu<>	rro@health.nv.gov>				
Sent: Monday, June 15, 2020 9:1					
To: Patti Oya < <u>poya@doe.nv.gov</u>					
IV. Fatti Uya ~poya@uve.nv.gov					

Subject: Re: COVID Facility Listing 6.5.2020

Thank you, Patti. Quick question, in the amendment section C refers to three attachments. I am assuming the revised scope of work is the only new document. Should I attach a new data-sharing agreement as well? Please advise. Thank you, Antonina Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do. From: Patti Oya poya@doe.nv.gov> Sent: Monday, June 15, 2020 7:30 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: RE: COVID Facility Listing 6.5.2020 Looks good to me - I have reattached w/o the green and red fonts. Patti From: Antonina Capurro <a concernment of the second Sent: Sunday, June 14, 2020 6:33 PM To: Patti Oya <poya@doe.nv.gov> Subject: Re: COVID Facility Listing 6.5.2020 Good Afternoon Patti, Attached is the revised SOW and budget. Please let me know if further revisions are needed. Again, I appreciate your flexibility. Once I hear from you, I will submit the revised SOW and signature page to UNLV. Thank you and have a wonderful weekend, Antonina Antonina Capurro, D.M.D, M.P.H, M.B.A

# Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>>
Sent: Tuesday, June 9, 2020 9:51 AM
To: Antonina Capurro <<u>acapurro@health.nv.gov</u>>
Subject: RE: COVID Facility Listing 6.5.2020

Hi, I have attached the revised SOW. My edits are in red – please edit as necessa I highlighted the costs in green. I did not make any changes to costs – I will leave		
If you can return by next week, that would be great. Also, I forgot to mention, I need the invoice for this year <b>by July 15</b> .		
Let me know if you have questions. Patti		
From: Antonina Capurro < <u>acapurro@health.nv.gov</u> > Sent: Monday, June 08, 2020 2:28 PM To: Patti Oya < <u>poya@doe.nv.gov</u> > Subject: Re: COVID Facility Listing 6.5.2020	······································	
Thank you for the facility listing. The plan for the amendment sounds greatyou.	it. I will wait to receive the draf	t from
Best, Antonina		
Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 [F: (702)774-2521 [E: acapurro@health.nv.gov www.dhhs.nv.gov   www.division website.nv.gov Helping People. It's who we are and what we do.		
From: Patti Oya < <u>poya@doe.nv.gov</u> > Sent: Monday, June 8, 2020 12:19 PM To: Antonina Capurro < <u>acapurro@health.nv.gov</u> > Subject: FW: COVID Facility Listing 6.5.2020		
Hi, here is the current list from child care licensing. I did speak with our contracts person. Yes, we have to do an amendment, but o I will work on amending the SOW and you can edit from there. I will send this w	eek for your approval.	
Patti	· · · · · · · · · · · · · · · · · · ·	· · · ·
From: Latisha Brown < <u>labrown@health.nv.gov</u> > Sent: Friday, June 05, 2020 2:22 PM To: Crystal Johnson < <u>cmxjohnson@dwss.nv.gov</u> >; Christell Askew < <u>CASKEW@dv</u> < <u>melquist@childrenscabinet.org</u> >; Chelsea Sliter < <u>csliter@childrenscabinet.org</u> >;	; Warren Evans	
< <u>warren.evans@lvul.org</u> >; Mary Regan < <u>Mary.Regan@lvul.org</u> >; Jennifer Butler Orme < <u>nkorme@health.nv.gov</u> >; Margot Chappel < <u>MChappel@health.nv.gov</u> >; < <u>Ecafferata@dwss.nv.gov</u> >; kate.mcnabney < <u>kate.mcnabney@caanv.org</u> >; Kath Nye, Shelly < <u>SNye@washoeschools.net</u> >; Patti Oya < <u>poya@doe.nv.gov</u> >; Emily C Patrice M. Gardner < <u>pmgardner@doe.nv.gov</u> >; Kathryn Roose < <u>kroose@dcfs.nv</u> < <u>Emily.Buckles@lvul.org</u> >; Tara Phebus < <u>Tara.Phebus@cityofhenderson.com</u> >; <i>A</i> < <u>arose@lasvegasnevada.gov</u> > <b>Cc:</b> Darryl J. Parker < <u>dparker@dwss.nv.gov</u> >; Dave Goldstein < <u>dmgoldstein@dw</u>	Elisa Cafferata leen Baker < <u>kbaker@washoecoun</u> Champlin < <u>echamplin@doe.nv.gov</u> . <u>gov</u> >; Emily Buckles Angela Rose	<u>ty.us</u> >;

<ECADY@dwss.nv.gov>; Paul Shubert pshubert@health.nv.gov> Subject: COVID Facility Listing 6.5.2020 Importance: High Hello All, Attached you will find the most up to date COVID19 facility listing along with a list of registered emergency child cares. The numbers continue to show facilities opening and planning to open. 26 facilities have opened since last week and 16 facilities plan to open within the next two weeks or more. Further, we were also able to open 4 new facilities this week and 3 more new facilities plan to open in the weeks to come. Southern Total Facilities Opened = 171 **Sothern Centers Open = 126** Southern Family/Group Open = 045 Northern Total Facilities Opened = 055 Northern Centers Open = 036 Northern Family/Group Open = 019 Numbers combined equate 226 Opened State Child Care Facilities Southern Total Facilities Closed = 185 South Centers Closed = 150 South Family/Group Closed = 035 Northern Total Facilities Closed = 036 North Centers Closed = 034 North Family/Group Closed = 002 Numbers combined equate 221 Closed State Child Care Facilities Facilities that have closed this week due to COVID: NONE Facilities Reopened or Planning to Reopen: Southern Facilities -Creative Kids Craig – (To Open 6/8) Merryhill Durango – (To Open 6/8) Merryhill Snow Trail – (To Open 6/8) Brilliant Child – (To Open 6/9) Mojave Springs (To Open 8/17) Our Lady of Las Vegas (To Open 8/17)

#### Northern Facilities -

Child and Family Research Center 6<sup>th</sup> Street (To Open 6/8) Child and Family Research Center Comstock (To Open 6/8) St. Teresa of Avila CDC – (To Open 6/8) Tiny Sprouts Learning (To Open 6/8) Child Development Center (6/15) Educare Dei Montessori (To Open 6/15) Learning Ladder – (To Open 8/10) Great Basin – (To Open 8/31) CSA Cottonwood Head Start (To open 9/1) Little Red Caboose (9/1)

#### Currently there are **<u>117</u>** facilities registered for emergency care.

Let me know if there are any questions.

Stay safe and well.

Best Regards,

7
An addition to active
i 🕼 lasti Buai
N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

## Latisha Brown, MSW

Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: <u>labrown@health.nv.gov</u> www.dhhs.nv.gov | <u>http://dpbh.nv.gov/</u>



Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.



# **Martha Framsted**

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
	Monday, June 22, 2020 10:17 AM
To:	lori.ciccone@unlv.edu
Cc:	David P. Cappelli, DMD, MPH, PhD
Subject:	For Signature Re: For Review and Approval. DOE.UNLV Amendment [do not encrypt]
Attachments:	Revised DOE.UNLV Agreement.pdf

## Good Morning Lori,

One additional correction has been made to the DOE, UNLV contract. Attached is the updated version for your review and approval. The PPE materials that would have been ordered in Part 1A of the scope of work have now been moved to Part 1B due to the invoice timeline and supplier restrictions. No other changes have been made and this movement does not change the overall budget just the timeline that monies will be spent.

If additional information is needed, I would be happy to supply it. Thank you, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Antonina Capurro
Sent: Monday, June 15, 2020 10:13 AM
To: lori.ciccone@unlv.edu <lori.ciccone@unlv.edu>
Cc: David P. Cappelli, DMD, MPH, PhD <david.cappelli@unlv.edu>
Subject: For Review and Approval. DOE.UNLV Amendment [do not encrypt]

Good Morning Lori,

I hope this email finds you well. First, thank you for your willingness to move the SFY21 DPBH.UNLV contract through the approval process. It is now back with the state and will be heard at the August BOE meeting.

Due to COVID, I am cleaning up other program obligations and contracts and one of these is the agreement with the Department of Education and UNLV. The DOE has agreed to extend the timeline for deliverables due to the state-mandated shutdown of schools and childcare facilities.

The revised scope of work is attached for review and signature. For reference, the fully executed version of this contract is also attached.

Should additional information be needed, I would be happy to provide it. I look forward to hearing from you. Best regards, Antonina

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

CETS #:	
Agency Reference #:	

### AMENDMENT #1

### TO INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

Between the State of Nevada Acting By and Through Its

Public Entity #1:	NDE Department of Education, Office of Early Learning and Development
Address:	2080 E Flamingo Road, Suite 210
City, State, Zip Code:	Las Vegas, NV 89119
Contact:	Patti Oya
Phone:	702-486-6492
Email:	poya@doe.nv.gov

Public Entity #2:	Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine
Address:	1001 Shadow Lane
City, State, Zip Code:	Las Vegas, NV 89106
Contact:	Dr Antonina Capurro
Phone:	702-774-2573
Email:	acapurro@health.nv.gov

1. **AMENDMENTS.** For and in consideration of mutual promises and other valuable consideration, all provisions of the original Contract dated 12/17/2019, attached hereto as Exhibit A, remain in full force and effect with the exception of the following:

#### A. <u>Provide a brief explanation for contract amendment.</u>

This amendment is to revise the dates within the scope of work but does not change the activities, funding amount, or end date of the current contract. This contract is 100% Federally funded. The primary activity of this contract is to provide dental screenings and classroom education for child care centers in rural Nevada. Due to the closure of child care centers during the Covid-19 pandemic, all travel and visits were postponed. As child care centers are now beginning to slowly reopen, visits will be rescheduled for Oct-Dec 2020.

#### B. <u>Current Contract Language:</u>

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence. ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT BB: DATA SHARING AGREEMENT

#### C. <u>Amended Contract Language:</u>

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence. ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET

CETS #:	
Agency Reference #:	

- 2. **INCORPORATED DOCUMENTS.** Exhibit A (original Contract) is attached hereto, incorporated by reference herein and made a part of this amended contract.
- 3. **REQUIRED APPROVAL**. This amendment to the original Contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

CETS #:	
Agency Reference #:	

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

			Executive I	Director, Sponsored Programs
ori M. Ciccone, MBA, CRA		Date		Title
evada Department of Education				
ublic Agency #2				
				ntendent, Nevada Department of Education
tate of Nevada Authorized Signature		Date		Title
			APPROVED BY BOA	RD OF EXAMINERS
ignature – Board of Examiners				
- 				· · · · · · · · · · · · · · · · ·
		On:		
				Date
pproved as to form by:				
		On:		
Deputy Attorney General for Attorney	General	OII.	<u> </u>	Date

## **Martha Framsted**

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Monday, June 22, 2020 10:22 AM
То:	Patti Oya
Subject:	For Approval Re: COVID Facility Listing 6.5.2020 [do not encrypt]
Attachments:	Revised DOE.UNLV Agreement.pdf

#### Good Morning Patti,

The NDOE amendment was sent to UNLV for signature on the 15th and is currently under review. We have been working to make the necessary purchases, and due to supplier restrictions, much of the PPE that is needed is not available for order. Would it be reasonable to move \$1,438.46 from Part1A to Part1B? No other change would be made to the amendment nor would this change the budget. This requested revision is attached. If this meets with your approval, I will notify UNLV of this additional change.

I look forward to hearing from you. Thank you, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 [F: (702)774-2521 [E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <poya@doe.nv.gov> Sent: Monday, June 15, 2020 9:35 AM To: Antonina Capurro <acapurro@health.nv.gov> Subject: RE: COVID Facility Listing 6.5.2020

Looks good - please move forward with signatures

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do. From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Monday, June 15, 2020 9:19 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: RE: COVID Facility Listing 6.5.2020

No, we don't need a new data sharing agreement. Do you think we should remove it from Section C?

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Monday, June 15, 2020 9:13 AM To: Patti Oya <<u>poya@doe.nv.gov</u>> Subject: Re: COVID Facility Listing 6.5.2020

Thank you, Patti. Quick question, in the amendment section C refers to three attachments. I am assuming the revised scope of work is the only new document. Should I attach a new data-sharing agreement as well? Please advise. Thank you, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Monday, June 15, 2020 7:30 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: RE: COVID Facility Listing 6.5.2020

Looks good to me - I have reattached w/o the green and red fonts.

Patti

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Sunday, June 14, 2020 6:33 PM To: Patti Oya <<u>poya@doe.nv.gov</u>> Subject: Re: COVID Facility Listing 6.5.2020

Good Afternoon Patti,

Attached is the revised SOW and budget. Please let me know if further revisions are needed. Again, I appreciate your flexibility. Once I hear from you, I will submit the revised SOW and signature page to UNLV.

Thank you and have a wonderful weekend, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A

Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov www.dhhs.nv.gov   www.division website.nv.gov Helping People. It's who we are and what we do.		- 1	
From: Patti Oya < <u>poya@doe.nv.gov</u> > Sent: Tuesday, June 9, 2020 9:51 AM To: Antonina Capurro < <u>acapurro@health.nv.gov</u> >			
Subject: RE: COVID Facility Listing 6.5.2020 Hi, I have attached the revised SOW. My edits are in red – please I highlighted the costs in green. I did not make any changes to co		o you to edit.	a
If you can return by next week, that would be great. Also, I forgot to mention, I need the invoice for this year by July 1	5.		
Let me know if you have questions. Patti			
From: Antonina Capurro < <u>acapurro@health.nv.gov</u> > Sent: Monday, June 08, 2020 2:28 PM To: Patti Oya < <u>poya@doe.nv.gov</u> >			· · · · · · · · · · · · · · · · · · ·
<b>Subject:</b> Re: COVID Facility Listing 6.5.2020 Thank you for the facility listing. The plan for the amendmer you.	nt sounds great. I wil	l wait to receive the dra	ift from
Best,			a an
Antonina		a a su an an anna an an	
Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573  F: (702)774-2521  E: acapurro@health.nv.gov www.dhhs.nv.gov   www.division website.nv.gov Helping People. It's who we are and what we do.	 		:
From: Patti Oya < <u>poya@doe.nv.gov</u> > Sent: Monday, June 8, 2020 12:19 PM To: Antonina Capurro < <u>acapurro@health.nv.gov</u> > Subject: FW: COVID Facility Listing 6.5.2020			
Hi, here is the current list from child care licensing.			

I did speak with our contracts person. Yes, we have to do an amendment, but only needs Clerk signature. I will work on amending the SOW and you can edit from there. I will send this week for your approval.

From: Latisha Brown < <u>labrown@health.nv.go</u>	<u>vv</u> >			
Sent: Friday, June 05, 2020 2:22 PM			Norty Flauist	
To: Crystal Johnson < <u>cmxjohnson@dwss.nv.g</u>				
< <u>melquist@childrenscabinet.org</u> >; Chelsea Sl				1.8
< <u>warren.evans@lvul.org</u> >; Mary Regan < <u>Mar</u>				• • • • • • • •
Orme < <u>nkorme@health.nv.gov</u> >; Margot Cha	ppel < <u>iviCnappel@nea</u>	<u>iith.nv.gov</u> >; Elisa Cali	erala	
< <u>Ecafferata@dwss.nv.gov</u> >; kate.mcnabney <				
Nye, Shelly < <u>SNye@washoeschools.net</u> >; Pat				
Patrice M. Gardner < pmgardner@doe.nv.gov				
< <u>Emily.Buckles@lvul.org</u> >; Tara Phebus < <u>Tara</u>	i.Phebus@cityofhende	erson.com>; Angela RC	ose	
<a>arose@lasvegasnevada.gov&gt;</a>				
Cc: Darryl J. Parker < <u>dparker@dwss.nv.gov</u> >;		oldstein@dwss.nv.gov	>; Mille Cady	
< <u>ECADY@dwss.nv.gov</u> >; Paul Shubert < <u>pshub</u>	pert@health.nv.gov>			
Subject: COVID Facility Listing 6.5.2020				
Importance: High				
Hello All,				
Attached you will find the most up to date CC				
The numbers continue to show facilities oper				
facilities plan to open within the next two we		we were also able to c	open 4 new facilities this week	
and 3 more new facilities plan to open in the	weeks to come.			
Southern Total Facilities Opened = 171				
Sothern Centers Open = 126				· · · · · · · · · · · · · · · · · · ·
Southern Family/Group Open = 045				
Northern Total Facilities Opened = 055				
	and a straight straig			
Northern Centers Open = 036				
Northern Family/Group Open = 019				
Numbers combined equate 226 Opened Stat	te Child Care Facilities	;		
Southern Total Facilities Closed = 185				
South Centers Closed = 150				
South Family/Group Closed = 035				
Northern Total Facilities Closed = 036				
North Centers Closed = 034				
North Family/Group Closed = 002	,			
Numbers combined equate 221 Closed State	e Child Care Facilities			
·				
Facilities that have closed this week due to	COVID:			
NONE				

-----

#### Facilities Reopened or Planning to Reopen:

Southern Facilities –	
Creative Kids Craig – (To Open 6/8) Merryhill Durango – (To Open 6/8) Merryhill Snow Trail – (To Open 6/8) Brilliant Child – (To Open 6/9) Mojave Springs (To Open 8/17)	
Our Lady of Las Vegas (To Open 8/17)	
Northern Facilities —	
Child and Family Research Center 6 <sup>th</sup> Street (To Open 6/8) Child and Family Research Center Comstock (To Open 6/8) St. Teresa of Avila CDC – (To Open 6/8) Tiny Sprouts Learning (To Open 6/8) Child Development Center (6/15) Educare Dei Montessori (To Open 6/15)	
Learning Ladder – (To Open 8/10) Great Basin – (To Open 8/31) CSA Cottonwood Head Start (To open 9/1) Little Red Caboose (9/1)	
Currently there are <b><u>117</u></b> facilities registered for emergency care.	
Let me know if there are any questions.	

Stay safe and well.

Best Regards,

DWWS

# Latisha Brown, MSW

Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: <u>labrown@health.nv.gov</u> <u>www.dhhs.nv.gov</u> | <u>http://dpbh.nv.gov/</u>



Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

	· <u> </u>		a aa aad maala dagaa ah a	
	المعارية المناج المستسبب وأشار المراجع المراجع	and the second second second second	يعواد المتناسية فتتناسط والرواقية الار	· · · · · · · · · · · · · · · · · · ·
	n gana ing manipuna ang mar na sa sa s	angan sa kabupangkangkangkangkangkangkangkangkangkangk	, , , , , , , , , , , , , , , , , , ,	
	an a	· · · · · · · · · · · · · · · · · · ·		
a a a a a a a a a a	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
a a a a a a a a a a	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·			

## **Martha Framsted**

From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Tuesday, June 23, 2020 1:18 PM
То:	Antonina Capurro
Subject:	RE: For Approval Re: COVID Facility Listing 6.5.2020 [do not encrypt]

Hi, I received the signed agreement. I think your revision to the SOW and Budget is fine. I will submit this one. Don't forget to submit your invoice for FY20 to me by Wed July 15.

Patti

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Monday, June 22, 2020 10:22 AM To: Patti Oya <poya@doe.nv.gov> Subject: For Approval Re: COVID Facility Listing 6.5.2020 [do not encrypt]

Good Morning Patti,

The NDOE amendment was sent to UNLV for signature on the 15th and is currently under review. We have been working to make the necessary purchases, and due to supplier restrictions, much of the PPE that is needed is not available for order. Would it be reasonable to move \$1,438.46 from Part1A to Part1B? No other change would be made to the amendment nor would this change the budget. This requested revision is attached. If this meets with your approval, I will notify UNLV of this additional change.

I look forward to hearing from you. Thank you, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Monday, June 15, 2020 9:35 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: RE: COVID Facility Listing 6.5.2020

Looks good – please move forward with signatures

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Monday, June 15, 2020 9:19 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: RE: COVID Facility Listing 6.5.2020

No, we don't need a new data sharing agreement. Do you think we should remove it from Section C?

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Monday, June 15, 2020 9:13 AM To: Patti Oya <<u>poya@doe.nv.gov</u>> Subject: Re: COVID Facility Listing 6.5.2020

Thank you, Patti. Quick question, in the amendment section C refers to three attachments. I am assuming the revised scope of work is the only new document. Should I attach a new data-sharing agreement as well? Please advise.

Thank you,

Antonina

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 [F: (702)774-2521 [E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Monday, June 15, 2020 7:30 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: RE: COVID Facility Listing 6.5.2020

Looks good to me - I have reattached w/o the green and red fonts.

Patti

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Sunday, June 14, 2020 6:33 PM To: Patti Oya <<u>poya@doe.nv.gov</u>> Subject: Re: COVID Facility Listing 6.5.2020

Good Afternoon Patti,

Attached is the revised SOW and budget. Please let me know if further revisions are needed. Again, I appreciate your flexibility. Once I hear from you, I will submit the revised SOW and signature page to UNLV.

Thank you and have a wonderful weekend, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Tuesday, June 9, 2020 9:51 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: RE: COVID Facility Listing 6.5.2020

Hi, I have attached the revised SOW. My edits are in red – please edit as necessary. I highlighted the costs in green. I did not make any changes to costs – I will leave that to you to edit.

If you can return by next week, that would be great. Also, I forgot to mention, I need the invoice for this year by July 15.

Let me know if you have questions. Patti

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Monday, June 08, 2020 2:28 PM To: Patti Oya <<u>poya@doe.nv.gov</u>> Subject: Re: COVID Facility Listing 6.5.2020

Thank you for the facility listing. The plan for the amendment sounds great. I will wait to receive the draft from you. Best, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Monday, June 8, 2020 12:19 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: FW: COVID Facility Listing 6.5.2020

Hi, here is the current list from child care licensing.

I did speak with our contracts person. Yes, we have to do an amendment, but only needs Clerk signature. I will work on amending the SOW and you can edit from there. I will send this week for your approval.

Patti

From: Latisha Brown <<u>labrown@health.nv.gov</u>>

Sent: Friday, June 05, 2020 2:22 PM

To: Crystal Johnson <<u>cmxjohnson@dwss.nv.gov</u>>; Christell Askew <<u>CASKEW@dwss.nv.gov</u>>; Marty Elquist <<u>melquist@childrenscabinet.org</u>>; Chelsea Sliter <<u>csliter@childrenscabinet.org</u>>; Warren Evans <<u>warren.evans@lvul.org</u>>; Mary Regan <<u>Mary.Regan@lvul.org</u>>; Jennifer Butler <<u>Jennifer.Butler@lvul.org</u>>; Nathan K.
Orme <<u>nkorme@health.nv.gov</u>>; Margot Chappel <<u>MChappel@health.nv.gov</u>>; Elisa Cafferata <<u>Ecafferata@dwss.nv.gov</u>>; kate.mcnabney <<u>kate.mcnabney@caanv.org</u>>; Kathleen Baker <<u>kbaker@washoecounty.us</u>>; Nye, Shelly <<u>SNye@washoeschools.net</u>>; Patti Oya <<u>poya@doe.nv.gov</u>>; Emily Champlin <<u>echamplin@doe.nv.gov</u>>; Patrice M. Gardner <<u>pmgardner@doe.nv.gov</u>>; Kathryn Roose <<u>kroose@dcfs.nv.gov</u>>; Emily Buckles <<u>Emily.Buckles@lvul.org</u>>; Tara Phebus <<u>Tara.Phebus@cityofhenderson.com</u>>; Angela Rose <<u>arose@lasvegasnevada.gov</u>>; Dave Goldstein <<u>dmgoldstein@dwss.nv.gov</u>>; Millie Cady

<<u>ECADY@dwss.nv.gov</u>>; Paul Shubert <<u>pshubert@health.nv.gov</u>> **Subject:** COVID Facility Listing 6.5.2020

Importance: High

Hello All,

Attached you will find the most up to date COVID19 facility listing along with a list of registered emergency child cares. The numbers continue to show facilities opening and planning to open. 26 facilities have opened since last week and 16 facilities plan to open within the next two weeks or more. Further, we were also able to open 4 new facilities this week and 3 more new facilities plan to open in the weeks to come.

Southern Total Facilities Opened = 171

Sothern Centers Open = 126 Southern Family/Group Open = 045

Northern Total Facilities Opened = 055

Northern Centers Open = 036 Northern Family/Group Open = 019

Numbers combined equate 226 Opened State Child Care Facilities

Southern Total Facilities Closed = 185

South Centers Closed = 150 South Family/Group Closed = 035

Northern Total Facilities Closed = 036

North	<b>Centers</b> Closed	d = 034	
North	Family/Group	Closed =	002

#### Numbers combined equate 221 Closed State Child Care Facilities

Facilities that have closed this week due to COVID:

NONE

Facilities Reopened or Planning to Reopen:

Southern Facilities -

Creative Kids Craig — (To Open 6/8) Merryhill Durango – (To Open 6/8) Merryhill Snow Trail – (To Open 6/8) Brilliant Child – (To Open 6/9) Mojave Springs (To Open 8/17) Our Lady of Las Vegas (To Open 8/17)

Northern Facilities -

Child and Family Research Center 6 <sup>th</sup> Street (To Open 6/8)
Child and Family Research Center Comstock (To Open 6/8)
St. Teresa of Avila CDC – (To Open 6/8)
Tiny Sprouts Learning (To Open 6/8)
Child Development Center (6/15)
Educare Dei Montessori (To Open 6/15)
Learning Ladder – (To Open 8/10)
Great Basin – (To Open 8/31)
CSA Cottonwood Head Start (To open 9/1)
Little Red Caboose (9/1)

Currently there are **<u>117</u>** facilities registered for emergency care.

Let me know if there are any questions.

Stay safe and well.

Best Regards,

#### Latisha Brown, MSW

Program Manager Nevada Department of Health and Human Services Division of Public and Behavioral Health | Child Care Licensing 3811 W. Charleston Blvd. #210 |Las Vegas, NV 89102 Office Hours: Tuesday – Friday 6:30am – 5:00pm T: (702) 486-0574 |F: (702) 486-6660 |E: <u>labrown@health.nv.gov</u> www.dhhs.nv.gov | http://dpbh.nv.gov/



Helping People. It's who we are and what we do.

#### Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.



DHHS\_000518

## Martha Framsted

From:	Lyndsay Ifo <lyndsay.ifo@unlv.edu></lyndsay.ifo@unlv.edu>
Sent:	Wednesday, June 24, 2020 1:36 PM
То:	Patti Oya
Cc:	Antonina Capurro; UNLV Contracts
Subject:	Re: Revisions

Hi Patti,

Thanks for the update, these changes are acceptable.

Thank you

Lyndsay K. Ifo, CRA Contract Manager Office of Sponsored Programs University of Nevada, Las Vegas | 4505 S. Maryland Parkway, Box 451055 | Las Vegas, NV 89154-1055 Direct: (702) 895-5304 | OSP Main: (702) 895-1357 | lyndsay.ifo@unlv.edu | unlv.edu/research/osp

As of March 19th, the Office of Sponsored Programs has transitioned to working remotely and is continuing normal business operations. During this time we have forwarded direct lines to be answered and all staff have email access. We appreciate your understanding as we may experience delays with response times.

PUBLIC RECORDS NOTICE: In accordance with NRS Chapter 239, this email and responses, unless otherwise made confidential by law, may be subject to the Nevada Public Records laws and may be disclosed to the public upon request. CONFIDENTIALITY NOTICE: The contents of this electronic mail and any attached documents are intended solely for the addressee(s) to whom this electronic mail was intended to be sent and may contain information that is privileged, confidential or exempt from disclosure under applicable law. If the reader of this communication is not the intended recipient(s), or the employee or agent responsible for delivering the message to the intended recipient(s), you are hereby notified that any use, dissemination, copying or storage of this electronic mail or its contents (including any attachments) by persons other than the intended recipient(s) is strictly prohibited. If you believe you have received this message in error, please notify the sender immediately by reply email or by telephone at (702) 895-5304 and delete the original electronic mail (including any attachments) in its entirety.

On Wed, Jun 24, 2020 at 11:14 AM Patti Oya poya@doe.nv.gov wrote:

Hi, our contracts person had to make a couple of small revisions to the contract amendment you already signed. See attached:

- "He listed all three documents in the "Amended Contract Language" section bottom of page 1
- He also renamed you as Public Agency 2 on page 3 (NDE is supposed to sign on the first line)

In addition, Dr. Capurro made a slight change to the SOW now dated June 23 (attached)

If you are okay with these changes, you do not need to re-sign, and we will move forward. I just didn't want you to be surprised by the changes when it comes back fully executed.

	Thanks,
	Patti
5 m	
	Patti Oya, Director
-	Office of Early Learning and Development
	Nevada Department of Education
-	2080 E Flamingo Rd, Suite 210
	Las Vegas, NV 89119
	702.486.6492 Office
	702.668.4340 Fax
	702.810.8175 Cell

· · · · · · · · · · · · ·

CETS #:		
Agancy Reference #	1	

Agency Reference #

#### AMENDMENT #1

## TO INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES

Between the State of Nevada

Acting By and Through Its

Public Entity #1:	NDE Department of Education, Office of Early Learning and Development
Address:	2080 E Flamingo Road, Suite 210
City, State, Zip Code:	Las Vegas, NV 89119
Contact:	Patti Oya
Phone:	702-486-6492
Email:	poya@doe.nv.gov
Public Entity #2:	Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine
Address:	1001 Shadow Lane

Address:	1001 Shadow Lane
City, State, Zip Code:	Las Vegas, NV 89106
	Dr Antonina Capurro
Phone:	702-774-2573
Email:	acapurro@health.nv.gov

AMENDMENTS. For and in consideration of mutual promises and other valuable consideration, all provisions of the original Contract dated 12/17/2019, attached hereto as Exhibit A, remain in full force and effect with the exception of the following:

This amendment #1 to the original contract is to revise the dates within the scope of work but does not change the activities or funding amount. The primary activity of this contract is to provide dental screenings and classroom education for childcare centers in rural Nevada. Due to the closure of childcare centers during the Covid-19 pandemic, all travel and visits were postponed. As childcare centers are now beginning to slowly reopen, visits will be rescheduled for Oct-Dec 2020.

#### Current Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT BB: DATA SHARING AGREEMENT

#### **Amended Contract Language:**

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT AB: REVISED SCOPE OF WORK ATTACHMENT BB: DATA SHARING AGREEMENT

1.

## DHHS 00052113

CETS #:	
Agency Reference #:	
(a) A second state of the second state of the second state	the state of the second s

- 2. **INCORPORATED DOCUMENTS.** Exhibit A (original Contract) is attached hereto, incorporated by reference herein and made a part of this amended contract.
- 3. **REQUIRED APPROVAL**. This amendment to the original Contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

1			
Agency Reference #:		 	

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

Board of Regents, Nevada System of Higher Education On Behalf of the University of Nevada, Las Vegas Public Agency # 2 06/22/2020 Executive Director, Sponsored Programs\_ Date Title Ciccone, MBA, Nevada Department of Education Public Agency #1 Deputy Superintendent, Business and Support Services, Nevada Department of Education Title Date State of Nevada Authorized Signature APPROVED BY BOARD OF EXAMINERS Signature - Board of Examiners On: Date Approved as to form by: On: Date Deputy Attorney General for Attorney General

#### ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET June 23, 2020

Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada Team: Antonina Capurro DMD, MPH, MBA

Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

Part 1A: Project Planning and Facility Education — Timeline: December 16, 2019-June 30, 2020 Cost: \$5,702.00 + \$570.20 (10% Indirect) = \$6,272.20

Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed childcare facilities throughout rural Nevada (see script attached).
- Development of four, comparable, webinars to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Purchase orders for screening supplies except for out-of-stock PPE will be completed during this time frame.
- Hourly staff will be hired to assist in project implementation
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - o Developing of a data entry program

Part 1B: Project Planning and Facility Education Timeline: July 1, 2020-September 30, 2020 Cost: \$ 14,335.35 + \$1,433.54 (10% Indirect) = \$15,768.89

#### Scope of work

- Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Purchase orders for previously out-of-stock screening supplies including PPE will be completed during this time frame.
- Implementation of four, comparable, Nevada Registry approved webinars will be offered to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's

1

Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.

- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
- All travel arrangements will be finalized during this time frame.

#### Part 2: Dental Screening and Classroom Education Timeline: October 1, 2020-December 31, 2020 Cost: \$11,431.74+ 1,143.17 (10% Indirect) = \$12,574.91

#### Scope of work

- Each participating classroom within an individual childcare center will receive a grade-level appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.
- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual childcare center will receive:
  - o A classroom UV toothbrush holder and associated supplies (toothbrushes, and
    - toothpaste for each child),
  - o Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating childcare center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating childcare facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- Travel will be taken during this time frame and motor pool and per diem charges will be incurred.
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - o Selection of replacement schools/sites

alla transformation of			an and a star for an		an a standar bara	n na servici na servici de la servici de		3	
	Part 3: Technic Timeline: Octol Cost: \$1,040 +\$	ber 1, 2020-Ma	arch 31, 2021		S			· · · ···	
	Scope of Work								
	This aid will o C	ician hired from be in the form completing data onsultant report	of: analysis inclu						
	• A post dental month follow	l screening surving completion with the daily of	vey will be ma n of the screen	ings. This s	urvey will j	provide data to	measure	to	
	Direct Cost: Indirect Cost Total Budget:		\$32,509 <u>\$3,251</u> \$35,760			nan gangan sa			· .
		an a		· · ·		د است. مرکز در در میرود و در ماند از د		 1	 
						an a			
		· · · · · ·							· . ·

DHHS\_000526

## **Martha Framsted**

From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Wednesday, July 22, 2020 11:10 AM
То:	Antonina Capurro; Antonina Capurro
Cc:	Ruth Lopez (ruth.lopez@unlv.edu)
Subject:	Amendment - Contract 22479
Attachments:	20200722111245666.pdf

Hi, I have attached your fully executed amendment.

Please let me know if you have any questions.

Thanks, Patti

-----Original Message-----From: doehelp@doe.nv.gov <doehelp@doe.nv.gov> Sent: Wednesday, July 22, 2020 11:13 AM To: Patti Oya <poya@doe.nv.gov> Subject: Message from "RNP002673B84926"

This E-mail was sent from "RNP002673B84926" (MP C6003).

Scan Date: 07.22.2020 11:12:45 (-0700) Queries to: doehelp@doe.nv.gov

## CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

DESC	<b>RIPTION OF CON</b>	TRACT				
1. Cor	ntract Number: 224	79		Amendment	1	
				Number: Legal Entity Name:	BOARD OF REGENTS-UNL	.V
Age		- DEPARTMENT	OF	Contractor Name:	BOARD OF REGENTS-UNI	_v
۸ac	ency Code: 300	JCATION		Address:	SCHOOL OF DENTAL MED	DICINE
-	propriation Unit: 270	9-21		/ laar ooor	1001 SHADOW LN	
ls b	udget authority ilable?:	Yes		City/State/Zip	LAS VEGAS, NV 89106	
	lo" please explain: N	Not Applicable		Contact/Phone:	Dr. Antonina Capurro 702/77	4-2573
				Vendor No.:	D35000824	
				NV Business ID:	N/A	
	what State Fiscal Yea			2020-2021		
Wha the	at is the source of fur contractor will be pal	nds that will be use Id by multiple fundi	d to pay the contrac ng sources.		rcentage of each funding sour	ce if
	General Funds	0.00 %	Fees	0.00 %		
X	Federal Funds	100.00 %	Bonds	0.00 %		
	Highway Funds	0.00 %	Other funding	0.00 %		
Age	ncy Reference #:	300				
2. Con	tract start date:					
a. I	Effective upon Board Examiner's approval? Anticipated BOE m	?	b. other effective d	late 12/17/2019		
<b>.</b> .	•	<b>U</b>	, carry # 3 64 13			
	roactive?	No				
	<u>'es", please explain</u>					
	Applicable		-			
3. Prev Terr	viously Approved mination Date:	03/31/2021				
Con	tract term:	1 year and 104	days			
4. Typ	e of contract:	Interlocal Agree	ement			
Con	tract description:	Trng, Dental & I	Evals			
5. Purr	oose of contract:					
to c faci Sco and	hildren in rural chil lities to provide an ne of Work due to t	d care facilities. A evaluation of the he closure of chll ned. As child car	dditionally, a surv project. This amen dcare centers duri	ey will be administ idment is to change ng the Covid-19 pa	ealth education and dental s ered to all participating chil e the timeline of activities lis indemic which also caused n (June 2020), visits will be	d care sted in the
6. COI	NTRACT AMENDME	NT				
			Trans \$		a construction of the second	Agenda
1.	The max amount contract:	of the original	\$35,760.00			Yes - Info
2.	Amount of current (#1):	t amendment	\$0.00		0.00 \$35,760.00	No
3.	New maximum co amount:	ontract	\$35,760.00			
JUST	IFICATION					

7. What conditions require that this work be done?

This work is included in the State Child Care Plan that has been submitted as a requirement of the Child Care and Development Fund (CCDF). 8. Explain why State employees in your agency or other State agencies are not able to do this work: NDE employees do not have the medical expertise to perform these duties and the UNLV School of Dental Medicine is a government agency. 9. Were quotes or proposals solicited? No Was the solicitation (RFP) done by the Purchasing No Division? a. List the names of vendors that were solicited to submit proposals (include at least three): Not Applicable b. Soliciation Waiver: Not Applicable c. Why was this contractor chosen in preference to other? In accordance with NRS 277.180 the agency has contracted with the Board of Regents, University of Nevada, Las Vegas d. Last bld date: Anticipated re-bid date: 10. Does the contract contain any IT components? No **III. OTHER INFORMATION** 11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor? If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor Yes 10% 12, a, Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada? No b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months? No c. Is the contractor employed by any of Nevada's political subdivisions or by any other government? No If "Yes", please explain Not Applicable 13. Has the contractor ever been engaged under contract by any State agency? If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified Yes agency has been verified as satisfactory: Education-satisfactory 14. Is the contractor currently involved in litigation with the State of Nevada? If "Yes", please provide details of the litigation and facts supporting approval of the contract: No Not Applicable 15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: **Governmental Entity** 16. Not Applicable 17. Not Applicable 18. Not Applicable 19. Agency Field Contract Monitor: 20. Contract Status: **Contract Approvals:** Approval Level User Signature Date **Budget Account Approval** bfarra2 07/07/2020 16:04:13 PM 07/07/2020 16:04:17 PM **Division Approval** bfarra2 07/07/2020 16:04:22 PM bfarra2 Department Approval 07/07/2020 16:04:29 PM **Contract Manager Approval** bfarra2 mranki1 07/13/2020 15:50:33 PM **Budget Analyst Approval** 

CETS #:

Agency Reference #:

AMENDMENT #1

#### TO INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES Between the State of Nevada

Acting By and Through Its

Public Entity #1:	NDE Department of Education, Office of Early Learning and Development	
Address:	2080 E Flamingo Road, Suite 210	
City, State, Zip Code:	Las Vegas, NV 89119	1
Contact:	Patti Oya	
Phone:	702-486-6492	
Email:	poya@doe.nv.gov	J

Public Entity #2:	Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine				
Address:	1001 Shadow Lane				
City, State, Zip Code:	Las Vegas, NV 89106				
Contact:	Dr Antonina Capurro				
Phone:	702-774-2573				
Email:	acapurro@health.nv.gov				

AMENDMENTS. For and in consideration of mutual promises and other valuable consideration, all provisions of the original Contract dated 12/17/2019, attached hereto as Exhibit A, remain in full force and effect with the exception of the following:

This amendment #1 to the original contract is to revise the dates within the scope of work but does not change the activities or funding amount. The primary activity of this contract is to provide dental screenings and classroom education for childcare centers in rural Nevada. Due to the closure of childcare centers during the Covid-19 pandemic, all travel and visits were postponed. As childcare centers are now beginning to slowly reopen, visits will be rescheduled for Oct-Dec 2020.

#### Current Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

#### ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT BB: DATA SHARING AGREEMENT

#### Amended Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT AB: REVISED SCOPE OF WORK ATTACHMENT BB: DATA SHARING AGREEMENT

1.

DHHS\_000530

			CETS #:		
			Agency Reference	ce #:	
	·····				· · · · · · · · · · · · · · · · · · ·
2.	INCORPORATED DOCUMENTS and made a part of this amended con	5. Exhibit A (original Contract.	ntract) is attached hereto, inc	orporated by reference here	əin
3,	REQUIRED APPROVAL. This a	amendment to the origin	al Contract shall not becom	ne effective until and unle	ess
	approved by the Nevada State Board	of Examiners.			
		·		· · · · · · · · · · · · · · · · · · ·	
	a se se de la serie de la configue de la serie de l Serie de la serie de la ser				
					S ATTRAS COMPA
	and the second se	د این داد. این این میشور و مشاور اور دیرو اور میشور و میشود.	 	ی . موجد انداز وحمد بیرم در مربع می مربع می م	· · · · · · · · · · · · · · · · · · ·
					v nosť ju do cise
					илдат-екузайскойа 
	,				ad the second second second
		• •			
					re-contributor
		·····			
					A CERTIFICIAL STATES
					~
					2014)
					5. / P

Revised: August 2019

DHHS\_000531

CONTROL OF

CETS #:	
Agency Reference #:	

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

Board of Regents, Nevada System of Higher Education On Behalf of the University of Nevada, Las Vegas Public Agency #2

Lori M. Ciccone, MBA, CRA	06/22/2020	Executive Director, Sponsored Programs	
Lori M. Ciccone, MBA, CRA	Date	Title	
<u>Nevada Department of</u> <u>Education</u> Public Agency #1	•		
State of Nevada Authorized Signature	<u>U2U2D</u> Date	Deputy Superintendent, Business and Support Services, Nevada Department of Education Title	
n an			
1	APPROVED BY BOARD OF EXAMINERS		

for Susan Brown

## Signature - Board of Examiners

# On: 07/13/20

Date

Approved as to form by:

Deputy Attorney General for Attorney General

On:

Date

•					
			CETS#:		]
e e e e e e e e e e e e e e e e e e e	- The complete set to be an experiment of the contract of the		Agency Reference #:	······································	
	IN WITNESS WHEREOF, the parties hereto here by be legally bound thereby.		ndment to the original contract to	be signed and intend to	
	Board of Regents, Nevada System of Higher Edu <u>On Behalf of the University of Nevada, Las Ve</u> Public Agency # 2 <u>Lori M. Ciccone</u> , MBA, CRA	ication i <u>gas</u> 06/22/2020 Date	<u> </u>	msored Programs	
	LOII M. CICCONE, MDA, CRA	LYGIO			
	<u>Nevada Department of</u> <u>Education</u> Public Agency #1	•		uning and Support	
			Deputy Superintendent, Br Services, Nevada Depart	ment of Education	
	State of Nevada Authorized Signature	Date	Title		
	•	A	APPROVED BY BOARD OF EXA	MINERS	
	Signature Board of Examiners		-*- ·		
		On:	Date		
•	Approved as to form by Deputy Attorney General for Attorney General	On:	7/7/20 Date		
	•				
		•			
	Provised - Summer 2010		a an	Pare 3 of 3	

DHHS\_000533

## ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET June 23, 2020

Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada Team: Antonina Capurro DMD, MPH, MBA

> Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

Part 1A: Project Planning and Facility Education Timeline: December 16, 2019-June 30, 2020 Cost: \$5,702.00 + \$570.20 (10% Indirect) = \$6,272.20

#### Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed childcare facilities throughout rural Nevada (see script attached).
- Development of four, comparable, webinars to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Purchase orders for screening supplies except for out-of-stock PPE will be completed during this time frame.
- Hourly staff will be hired to assist in project implementation
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - o Developing of a data entry program

Part 1B: Project Planning and Facility Education Timeline: July 1, 2020-September 30, 2020 Cost: \$ 14,335.35 + \$1,433.54 (10% Indirect) = \$15,768.89

#### Scope of work

- Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Purchase orders for previously out-of-stock screening supplies including PPE will be completed during this time frame.
- Implementation of four, comparable, Nevada Registry approved webinars will be offered to
  provide an overview of the dental screening process and evidence based oral health
  education. These webinars will meet the standards set forth by the Department of Education's

Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.

Webinar attendance is free of charge to participants. For those participants that complete the
pre and post survey (pre provided with the registration link and post provided after the webinar), they
will receive a "goody bag" containing adult oral hygiene supplies including a one-time use
tooth whitening tray along with a certificate of attendance.

• All travel arrangements will be finalized during this time frame.

Part 2: Dental Screening and Classroom Education Timeline: October 1, 2020-December 31, 2020 Cost: \$11,431.74+ 1,143.17 (10% Indirect) = \$12,574.91

Scope of work

- Each participating classroom within an individual childcare center will receive a grade-level appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.
- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual childcare center will receive:
  - o A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child),
  - Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule,
  - o A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating childcare center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating childcare facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- Travel will be taken during this time frame and motor pool and per diem charges will be incurred.
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - o Selection of replacement schools/sites

### Part 3: Technical Assistance with Evaluation Activities Timeline: October 1, 2020-March 31, 2021 Cost: \$1,040 +\$104 (10% Indirect) = \$1,144

Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating childcare facilities one month following completion of the screenings. This survey will provide data to measure compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

\$32,509 <u>\$3,251</u> \$35,760

Direct Cost:	
<b>Indirect Cost:</b>	
Total Budget:	

DHHS\_000536

3

## **Martha Framsted**

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>	
Sent:	Tuesday, July 28, 2020 2:14 PM	
То:	Ihsan Azzam	
Cc:	Lisa Sherych; Julia Peek	
Subject:	CMO Report from OHP [do not encrypt] Nevada Action Network.Proposal Draft.docx; OHP Overview in COVID-19.pdf	
Attachments:		

Good Afternoon Dr.Azzam,

I hope this email finds you well. For the CMO report, I have attached an overview of my current work in the Oral Health Program. The document is entitled, "OHP Overview in COVID-19".

Recently, I have been able to focus on picking up projects that were postponed by the pandemic such as:

a. The oral health surveillance project in licensed childcare centers in rural Nevada which is funded by NDOE through a contract that ends March 2021 is in-progress.

- b. AB223--the 1115c demonstration waiver is moving forward.
- c. School-based oral health services project with Washoe County nurses and Liberty is postponed.
- d. ER redirect pilot project for non-traumatic dental conditions is postponed.

Additionally, multiple dental procedural reports were created for DHCFP to prepare for the Special Session and I am grateful that the dental benefits will no longer be eliminated or capped.

Lastly, I have been working with multiple entities, (AC4OH, Liberty, Future Smiles, Seal Nevada South, and Teledentistry) to create an alternative service delivery model for preventive dental care. This is especially important now that schoolbased sealant programs will not be able to enter schools and outreach events have been canceled this year. Please see the Nevada Action Network proposal attached. Your feedback would be appreciated. I am also planning to submit this proposal to DuAne Young and Cody Phinney.

Best regards, Antonina

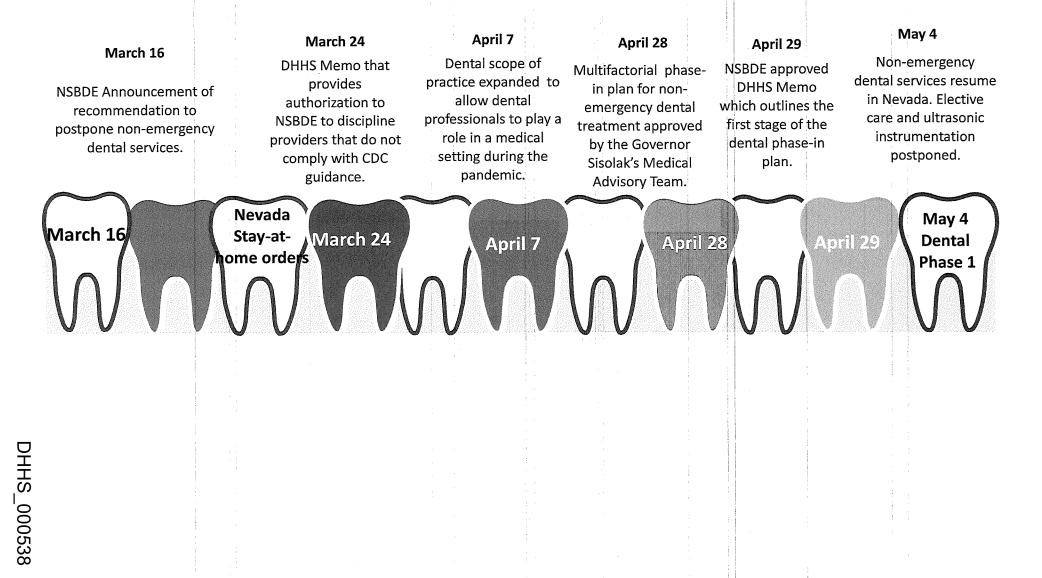


Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

# The Effect of the COVID-19 Pandemic on Dental Services in Nevada



## **COVID-19 Related Health Literacy Documents Created by OHP**

- 1. March 24th: OHP wrote a memorandum to all licensed dental providers to cease non-emergency dental care, Routine, Non-Essential Visits, Procedures and Surgeries.
- 2. March 26th: Public announcement on COVID-19 related changes to dental offices and services provided.
- 3. April 14th and 15th: The Governor's Medical Advisory Team (MAT) approved Emergency Response Providers: Dental which expanded the scope of practice of dentists and dental hygienists during this state of emergency and included us in the Battle Born Medical Corps. Flyers were produced to notify the dental community of this change and to encourage them to enroll in the Battle Born Medical Corps.
- 4. April 28th: OHP created the reopening plan for dental offices in Nevada entitled Guidance for Dental Services in Nevada approved by the Governor's Medical Advisory Team (MAT).
- 5. April 28th: A press release was created in collaboration with the Governor's Office to announce expansion of dental services in Nevada.
- 6. April 30th: Nevada State Board of Dental Examiners adoption of DHHS Memorandum to expand dental services in Nevada on May 4th. A formal presentation for adoption of the memo was presented by Dr. Capurro. The notice can be found on their website.
- 7. April 4th: To answer questions from the DHHS Memorandum a clarification letter was created entitled, Clarification on Guidance for Dental Services
- 8. May: Revised list of oral health initiatives that would be beneficial if carried forward for the next legislative session was presented to the Legislative Health Care Committee.
- 9. May: Special Olympics, Special Smiles presentation for Virtual Summer Games. Video was entitled Special Smiles New Office Procedures.
- **10. June**: Guidance on COVID-19 Exposure for Dental Healthcare Personnel (DHCP) was created as a decision tree to provide detailed information that DHCPs can follow should they develop symptoms consistent with COVID-19 or experience exposure.
- 11. July: Daily updates and reports during the 31st Special Session to educate the dental community on the proposed reductions and elimination of Medicaid dental benefits.

# **Oral Health Program Spring Presentations:**

- 1. National Oral Health Conference April 6-8, 2020 rescheduled to June
  - i. Title: Emergency Room Redirect Pilot Using Teledentistry accepted for presentation at a roundtable session.
- 2. American Public Health Association 2020 Annual Meeting and ExpoVirtual Conference. The following abstracts were accepted for presentation.
  - i. Abstract Title: Emergency room redirect for non-traumatic dental conditions pilot project in Nevada using teladentistry
  - ii. Abstract Title: Medicaid dental benefits evolve to tackle chronic health conditions in Nevada: A case study

- 3. Legislative Committee on Health Care two presentations on February 19th. The first entitled 'Overview of the State of Oral Health in Nevada—Successes, Challenges, and Policy Options' and the second entitled 'Overview of the Implementation of Assembly Bill 223 and Senate Bill 366 That Passed During the 2019 Legislative Session'.
- 4. Nevada Week S2, Ep 29: Healthcare in Rural Nevada
- 5. Face the State Interview Part 1
- 6. Face the State Interview Part 2
- 7. COVID Media Presentations:
  - i. NSBDE meeting presentation
  - ii. Plan for Dental Providers Offers Guidance for Procedures
  - iii. Nevada Independent, Facing lack of protective gear, dental hygienists want more guidance
  - iv. KTVN, Dentist during the Pandemic
- 8. Special Olympics, Special Smiles presentation for Virtual Summer Games with Dr. Gewelber
  - i. Presenter, What Are Cavities
  - ii. Presenter, video was entitled Special Smiles New Office Procedures.
- 9. Den 7255 Summer/2020/1hr
  - i. Overview of the Nevada Oral Health Program Successes, Challenges, and Policy Options
- 10. Den 7354 Summer/2020/1hr
  - i. State Perspective of Dental Services for Individuals with Intellectual and Developmental Disabilities (ID/DD)
- 11. 2020 Southern Nevada Dental Society Dinner Meeting
  - i. Presenter, Making Waves in the Desert

## **Research:**

 K. Izuora, A. Basu, A. Alver, A. Salaza, A. Capurro, C. Gewelber, C. Cross, S. Williams and J. Ebersole. Relationship Between Plasma CRP And Fibrinogen Measured Using Dried Blood Samples And Vascular Complications In Type 2 Diabetes. Poster presentation at the American Diabetes Association 80th Scientific Sessions (virtual meeting). Diabetes 2020 June; Volume 69: Supplement 1, https://doi.org/10.2337/db20-505-P

# Two grants secured:

- 1. Nevada Department of Education for \$35,760 to complete a basic screening survey of licensed childcare facilities in rural Nevada.
- 2. DHHS, Department of Aging and Disability for \$252,520 to support the UNLV SDM Special Care Clinic and a desensitization event with NV OHP.

## Nevada Action Network

"Everyone has a mouth, not everyone has a voice"

The COVID-19 pandemic has resulted in a series of interconnected crises which will be compounded by the recently proposed alternative learning environment for the 20-21 school year. This will result in a disruption to school-based health services which is an opportunity for creative solutions and alternative service delivery methods particularly focused on the Medicaid population. To increase value-based care and disparity reversal activities, delivery of preventive services that prioritize reaching children where they are through teledenitstry dental visits and fluoride varnish home application is proposed.

The Nevada Division of Public and Behavioral Health, Oral Health Program (NV OHP) is committed to partnering with community dental providers and stakeholders to improve oral health throughout the State and specifically supports partners that are able to meet the needs of underserved vulnerable children. According to the 2012, *Burden of Oral Disease in Nevada*, Nevada's proportion of children with dental caries experiences in primary and permanent teeth is more than double the nation average. Children in Nevada are twice as likely to have a dental cavity compared to the United States national average. Caries experience and untreated decay are documented with the National Oral Health Surveillance System which allows comparison across the nation and standard calibration. In order to improve oral disease in Nevada, we believe early detection is the key along with education and resources. In recent years Washoe County has suffered losses of school-based sealant programs and Clark County will not allow school-based sealant programs on campus in the 20-21 school year which severely limits access to preventive dental services for underserved children.

The Oral Health Program proposes a pilot project in collaboration with Liberty Dental Plan(LDP), the dental benefits administrator for Nevada Medicaid Dental Services, and Teledentistry.com to train, educate, and improve oral health care of Medicaid enrolled children throughout the state.

Through this partnerships and collaboration, Nevada's children will be navigated to care and receive preventive services which will identify early dental needs and increase oral health literacy. Additionally, in a blanket fashion, state measures will be boosted and DHCFP will be able to increase HEDIS and EPSDT metrics, health literacy and care coordination will be promoted by Liberty Dental Plan and Teledentistry, and the Nevada Oral Health Program will receive oral health surveillance data needed to develop sustainable funding sources for ongoing improvement of oral health in Nevada.

### Goal:

Focus on an alternative delivery method to provide preventive dental services to children previously reached through school-based health services and in so doing increase HEDIS measures and EPSDT reportable dental preventive services.

## **Mechanism:**

DHHS\_000541

Through an MOU between DHCFP, NV OHP, Liberty Dental Plan and Teledentistry.com, all Medicaid enrollees under the age of 21 will be called by Teledentistry.com to schedule a virtual dental appointment. A fluoride varnish packet, toothbrush kit, and oral health educational brochure will be mailed to children that schedule a virtual dental appointment. Using teledentistry, a licensed Nevada dentist will provide a limited intraoral exam, collect oral health information, instruct the parent to safely apply fluoride varnish, and deliver oral hygiene instruction. Data collected will be shared with DHCFP and NV OHP which will result in a final program report. Teledentistry.com will submit claims for services rendered to Liberty Dental Plan which is sufficient to fund this program.

Additionally, this MOU will allow DHCFP to share Medicaid member contact information both FFS and DBA with Teledentistry.com.

A formal advisory opinion from the Nevada State Board of Dental Examiners will also be sought for approve of fluoride varnish application via teledentistry as presented in this project proposal.

## Partners and Responsibilities:

Division of Health Care Financing and Policy (DHCFP):

- a. Will provide member lists to LDP and Teledentistry.com of all enrolled Medicaid children
- b. DHCFP will promote the program to members.

### Liberty Dental Plan(LDP):

- a. LDP will provide care coordination to any DBA members that are in need of dental services.
- b. LDP will provide a list of members under the age of 21 to Teledentisitry.com
- c. LDP will supply the oral hygiene supplies (toothbrush and toothpaste) to be mailed to child members
- d. LDP will promote this program.

## Teledentistry.com:

- a. Patients will be contacted by Teledentistry.com (based on member information from LDP and DHCFP) and an appointment will be scheduled with the member (child) and parent.
- b. Teledentistry.com will mail a fluoride varnish kit with gloves to eligible members with NV OHP brochures and LDP oral hygiene supplies (toothbrush and toothpaste). **Note**: Parent consent will be secured and an allergy questionnaire check will be completed before fluoride varnish will be mailed.
- c. Teledentistry internal team verifies the insurance coverage of the child prior to the appointment and then services are rendered as follows:

i. Licensed Nevada-Dentist performs the limited oral evaluation (D0140) through the Teledentistry.com platform.

ii. Parent takes intra-oral photos as applicable and then applies fluoride varnish to the child's teeth with the dentist's instructions.

iii. Parent and child are instructed on the proper techniques for daily oral hygiene and motivated to follow the dental checkup and preventive services periodicity schedule for infants, children, and adolescents.

d. If there are obvious, visually apparent signs of decay, then the dentist will recommend that the parent schedule with a local dentist to get these issues addressed as soon as possible. The patient will be flagged and their information

- addressed as soon as possible. The patient will be flagged and their information transferred to LDP for care coordination with their assigned dental home.
- e. Prescriptions as appropriate will be sent to the local pharmacy (no opioids will ever be prescribed).
- f. If the patient is a FFS patient not enrolled with LDP, a referral will be given to the patient to access in-network dentist.
- g. Claim will be generated and sent to LDP. Codes include DO140, D1206, and D9994
- h. Teledentistry.com will work collaboratively with NV OHP on final project report.

## The Nevada Oral Health Program (NV OHP):

- a. NV OHP will provide educational brochures on oral hygiene and the NV OHP fluoride varnish pamphlet which will be included in the varnish packets.
- b. Will provide Teledentistry with a list of questions based on state specific metrics that should be collected during each phone call to better inform state policies and gather oral health surveillance information.
- c. NV OHP will be provided with data from oral health questionnaire and will analyze information for final report.

## **Reporting metrics:**

- Number of calls made before appointment scheduled
- Utilization of teledentistry services (visits, no-shows, declined appointments)
- Positive consent for fluoride varnish
- Number fluoride varnishes applied
- Number of limited exams completed
- Number of children with an urgent dental case
- Number of children with active decay
- Number of children who have been to the dentist in the last 12 months
- Number of children that report having had a cleaning in the past 12 months.
- Demographics: child's age, sex, current zip code, ethnicity
- Dental health: last dental visit (date or year), presence of untreated decay, treatment
- urgency (none, early, urgent), presence of sealants (for school age), suspicious lesions.
- Possible additional date to collect :
  - 1. How would you describe the condition of your child's teeth? (check one)
  - a. Excellent b. Good c. Fair d. Poor
  - 2. During the past 12 months, has your child had frequent or chronic difficulty with any of the following? (Check all that apply)
  - a. Toothaches (no/yes)

- b. Bleeding gums (no/yes)
- c. Decayed teeth or cavities (no/yes)
- 3. About how long has it been since your child last visited (saw) a dentist? Include all types of dentists, such as, orthodontists, oral surgeons, and all other dental specialists, as well as dental hygienists. (check one)
- a. 12 months or less
- b. More than 1 year, but not more than 3 years ago
- c. More than 3 years ago
- d. My child has never been to a dentist
- e. Don't know/don't remember
- 4. What was the main reason your child last visited a dentist? (check one)
- a. Went in on own for check-up, examination or cleaning
- b. Was called in by the dentist for check-up, examination or cleaning
- c. Something was wrong, bothering or hurting
- d. Went for treatment of a condition that dentist discovered at earlier check-up or examination
- e. Other
- f. Don't know/don't remember
- 5. During the past 12 months, was there any time when your child NEEDED dental care (including check-ups) but didn't get it because you couldn't afford it? (check one)
- a. No b. Yes c. Don't know/don't remember
- 6. During the past 12 months, was there a time when your child needed dental care but could not get it at that time? (check one)
- a. No b. Yes c. Don't know/don't remember
- IF YES: What were the reasons that your child could not get the dental care she/he needed?
- (Check all that apply)
- b. Could not afford the cost
- c. Did not want to spend the money
- d. Insurance did not cover recommended procedures
- e. Dental office is too far away
- f. Dental office is not open at convenient times
- g. Another dentist recommended not doing it
- h. Afraid or do not like dentists
- i. Unable to take time off from work
- j. Too busy –
- k. I did not think anything serious was wrong/expected dental problems to go away
- l. Other
- m. Don't know/don't remember

# **Martha Framsted**

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Friday, July 31, 2020 6:25 PM
To:	Julia Peek
Subject:	Re: Help Requested [no encryption]

Julia,

On thinking about that this, whether the program space is moved out of the school and into a state office or not, I would recommend that the UNLV Dean be made aware of the situation and the inconvenience on the state during a time of crisis. To be effective, I would think it would need to come from you or Lisa. Moving to a state office would be an enormous undertaking but I am happy to do so if it becomes necessary.

Thank you, Julia for your assistance in this matter. Hope you have a good weekend, Antonina

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Julia Peek <jpeek@health.nv.gov> Sent: Friday, July 31, 2020 4:22 PM To: Antonina Capurro <acapurro@health.nv.gov> Subject: RE: Help Requested [no encryption]

Would you rather move off campus? I can get you space with other DPBH staff?

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Friday, July 31, 2020 4:17 PM To: Julia Peek <jpeek@health.nv.gov> Subject: Help Requested [no encryption] Importance: High

Hello Julia,

I realize this is an incredibly busy time and I wouldn't reach out if I weren't at a loss as to how to proceed. I am happy to provide you with a brief synopsis over the phone if that would be easier.

Below is an email chain from Dr. Davenport who is the new Vice Dean at UNLV SDM regarding an office relocation for the OHP team space. I am reaching out to you because I feel that it will be

extremely difficult if not impossible to meet the objectives of the UNLV-SDM contract in the new space. Currently, I have an office and OHP has two cubicles and storage space in each area. The area is pictured with a recent order for a licensed childcare project that has not been unpacked yet but illustrates the space. The cubicles would be utilized in August when the contract is finalized by BOE by already identified new staff.

UNLV has informed me that we will be moving into an office the size of a small cubicle. It is physically impossible to fit the OHP materials in that new area. In the email chain below is my response to this information which provides additional details. I am in no way averse from being relocated, but aside from feeling completely disrespected, I cannot fathom how the program can function in space that is not comparable to what we have occupied for the past several years.

Julia, would you please reach out to Dean Garcia at <u>lily.t.garcia@unlv.edu</u> ? I have drafted the below as a possible email to her.

If that is not the best course of action, please advise. Thank you, Antonina

Dear Dean Garcia,

We were just informed that UNLV SDM will be relocating Dr. Capurro and her team within the school. We would like confirmation that her new working space will be of at least equal size to her current space to fulfill UNLV's obligation with the Division of Public and Behavioral Health per C17647. As I am sure you are aware, the Nevada Oral Health Program and it's materials and supplies are being housed at UNLV, and per the contract, UNLV has agreed to provide separate furnished offices for Dr. Capurro and her team as well as storage space.

We have enjoyed a positive partnership with the dental school and the State has been happy to support UNLV SDM as evidence by the recent \$252,000 grant to the UNLV SDM Special Care Dental Clinic. We look forward to many years of continued success to improve the health of Nevadans.

------ Forwarded message ------From: William Davenport <<u>william.davenport@unlv.edu</u>> Date: Fri, Jul 31, 2020 at 12:31 PM We have space near B241 where we can put cubicle space up. It is not possible for you to remain in your current space as that is designated for the Chair of Clinical Sciences.

×	William D. Davenport, Jr., Ph.D. Vice Dean and Associate Dean for Faculties	
	Professor of Biomedical Sciences University of Nevada, Las Vegas	
	1001 Shadow Lane, MS 7418	
	Las Vegas, NV 89106	
94 94 - 14 12 14 14 14	<u>william.davenport@unlv.edu</u> Office: 702-774-2518	
	Mobile: 702-592-4392 unlv.edu • Twitter • Facebook • Instagram • YouTube	

On Fri, Jul 31, 2020 at 12:28 PM Antonina Capurro <<u>antonina.capurro@unlv.edu</u>> wrote:

Good Morning Dr. Davenport,

In considering the scope of this move, I am concerned with the space that is required to support the staff and storage needed to comply with C17117 and now C17647. Currently, D268 and the two cubicles in front of it were allocated for staffing and storage to fulfil the deliverables of UNLV's contract with the state. These cubicles were previously occupied by Elizabeth Chartier and Monisa Riley. Their positions will be tentatively filled again in August. Are these cubicles scheduled to be moved to B building as well?

Additionally, since my current office doubles as a storage space I have purchased multiple large bookcases, a console, three filing cabinets, and two large tables. Recently, Lorenzo has assisted me in finding additional storage space for supplies ordered for a fall outreach event. I am concerned there will not be room in the new space for this equipment.

If it is at all possible to remain in my current area, I would greatly appreciate it and am available to discuss further so that I can plan accordingly.

Thank you, Antonina

Nevada Visiting School Univers <u>antonina.c</u> Office: 702	ina Capurro, DMD, MPH, MB a State Dental Health Officer und g Assistant Professor, of Dental Medicine sity of Nevada, Las Vegas <u>apurro@unlv.edu</u> 2-774-2573 <u>Twitter + Facebook + Instagram + YouTube</u>		
In order to facilitate sm requirements by the Ur B241 are relocated to t	27 AM William Davenport < <u>william.</u> oother operations in clinical science niversity, you will be relocating your heir newly assigned location, we wil renzo Bethea who will assist you wit	es and to comply with prop office from D268 to B241. I move you into that space	oosed space allocation . Once the occupants of
Thanks, BD	n montanti por la substanti n na substanti por la substanti n		
	··· · · · · · · · · · · · · · · · · ·		
	William D. Davenport, Jr., P Vice Dean and Associate Dean for F		
	Professor of Biomedical Sciences University of Nevada, Las Vegas		·······
	1001 Shadow Lane, MS 7418		
	Las Vegas, NV 89106 <u>william.davenport@unlv.edu</u> Office: 702-774-2518		ал ал - Сайтана - Сайтана
	<i>Mobile: 702-592-4392</i> unlv.edu • <u>Twitter</u> • <u>Facebook</u> • <u>Instagram</u> •	YouTube	

# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

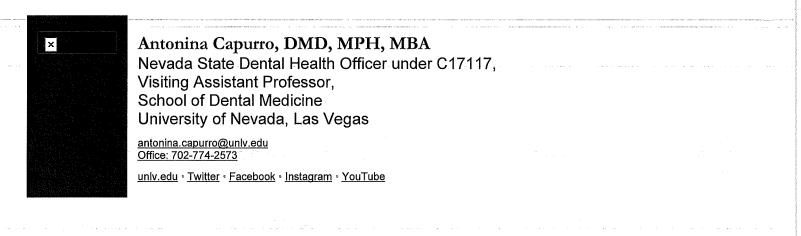
## T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

. . . . .

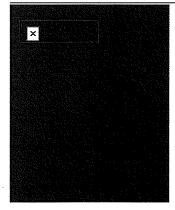
# **Martha Framsted**

From:	Antonina Capurro <antonina.capurro@unlv.edu></antonina.capurro@unlv.edu>
Sent:	Monday, August 3, 2020 1:49 PM
То:	William Davenport
Cc:	David Cappelli; Lorenzo Bethea; Julia Peek; Ihsan Azzam
Subject:	Re: Office relocation [do not encrypt]

Thank you for the clarification. Your guarantee that cubicles and storage space will be found is reassuring. That was my chief concern. I will coordinate the move from my office to B241 with Lorenzo. Best regards,



On Mon, Aug 3, 2020 at 8:33 AM William Davenport <<u>william.davenport@unlv.edu</u>> wrote: Your contract does not specify square footage. The square footage of the office space meets the proposed guidelines of the University and BoR. We will provide cubicle areas for your support staff. Offices are not to be used for storage. We will look at some assistance with storage of your materials.



William D. Davenport, Jr., Ph.D. Vice Dean and Associate Dean for Faculties Professor of Biomedical Sciences University of Nevada, Las Vegas 1001 Shadow Lane, MS 7418 Las Vegas, NV 89106

<u>william.davenport@unlv.edu</u> Office: 702-774-2518 Mobile: 702-592-4392

unlv.edu · Twitter · Facebook · Instagram · YouTube

On Mon, Aug 3, 2020 at 8:25 AM Antonina Capurro <<u>antonina.capurro@unlv.edu</u>> wrote: Good Morning Dr. Davenport,

After receiving the attached photo of B241, the matter of my new room assignment warrants additional discussion. I am not opposed to moving, and I understand that the needs of the school with regards to space allocation are in-flux. However, in order to comply with C17117 and now C17647 the school is required to provide furnished office space not only for myself and two support staff, but also storage facilities for the materials and equipment allocated to the DPBH Oral Health Program. Office B241 is 1/3 the size of my current office and will physically not comply with those grant requirements. Currently, D268 as well as the two cubicles directly in front of it are allocated for staffing and storage in order to fulfill the deliverables of the state's grant with UNLV, and they do so only by creative packaging and organization of the state materials and supplies on my part.

I respectfully request that my new room assignment be changed from B241 to either B249 or B238 and in either case also include an adjacent cubicle. Either of those arrangements would provide a more equivalent space and I believe could be made to accommodate the oral health program staff and associated supplies.

Best Regards,



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17647, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

univ.edu · Twitter · Facebook · Instagram · YouTube

On Fri, Jul 31, 2020 at 12:28 PM Antonina Capurro <<u>antonina.capurro@unlv.edu</u>> wrote: Good Morning Dr. Davenport,

In considering the scope of this move, I am concerned with the space that is required to support the staff and storage needed to comply with C17117 and now C17647. Currently, D268 and the two cubicles in front of it were allocated for staffing and storage to fulfil the deliverables of UNLV's contract with the state. These cubicles were previously occupied by Elizabeth Chartier and Monisa Riley. Their positions will be tentatively filled again in August. Are these cubicles scheduled to be moved to B building as well?

Additionally, since my current office doubles as a storage space I have purchased multiple large bookcases, a console, three filing cabinets, and two large tables. Recently, Lorenzo has assisted me in finding additional storage space for supplies ordered for a fall outreach event. I am concerned there will not be room in the new space for this equipment.

If it is at all possible to remain in my current area, I would greatly appreciate it and am available to discuss further so that I can plan accordingly.

Thank you, Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor,

DHHS\_000551

School of Dental Medicine University of Nevada, Las Vegas <u>antonina.capurro@unlv.edu</u> <u>Office: 702-774-2573</u> <u>unlv.edu • Twitter • Facebook • Instagram • YouTube</u>
On Fri, Jul 31, 2020 at 8:27 AM William Davenport < <u>william.davenport@unlv.edu</u> > wrote: In order to facilitate smoother operations in clinical sciences and to comply with proposed space allocation requirements by the University, you will be relocating your office from D268 to B241. Once the occupants of B241 are relocated to their newly assigned location, we will move you into that space. Please coordinate your move with Mr. Lorenzo Bethea who will assist you with this.
BD
X       William D. Davenport, Jr., Ph.D.         Vice Dean and Associate Dean for Faculties         Professor of Biomedical Sciences         University of Nevada, Las Vegas         1001 Shadow Lane, MS 7418         Las Vegas, NV 89106         william.davenport@univ.edu         Office: 702-774-2518         Mobile: 702-592-4392         univ.edu · Twitter · Facebook · Instagram · YouTube

# **Martha Framsted**

From: Sent:	Antonina Capurro <antonina.capurro@unlv.edu> Monday, August 3, 2020 5:16 PM</antonina.capurro@unlv.edu>
То:	Julia Peek
Subject:	Re: Office relocation [do not encrypt]

This may be a topic that we revisit in a month or so. I was just told two weeks ago that there was no room on campus to store the oral hygiene supplies ordered for the OHP license childcare project. Those supplies will go out to the rurals beginning in September so it only requires short term storage. However, the enormity of the OHP program materials, brochures, and files have consumed the cubicles and office space currently allotted. I don't know if Dr. Davenport realizes just how much there is, but I guess we will see how it goes.

 I appreciate your support. The announcement of the move has been challenging. Antonina



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17117, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

unlv.edu · Twitter · Facebook · Instagram · YouTube

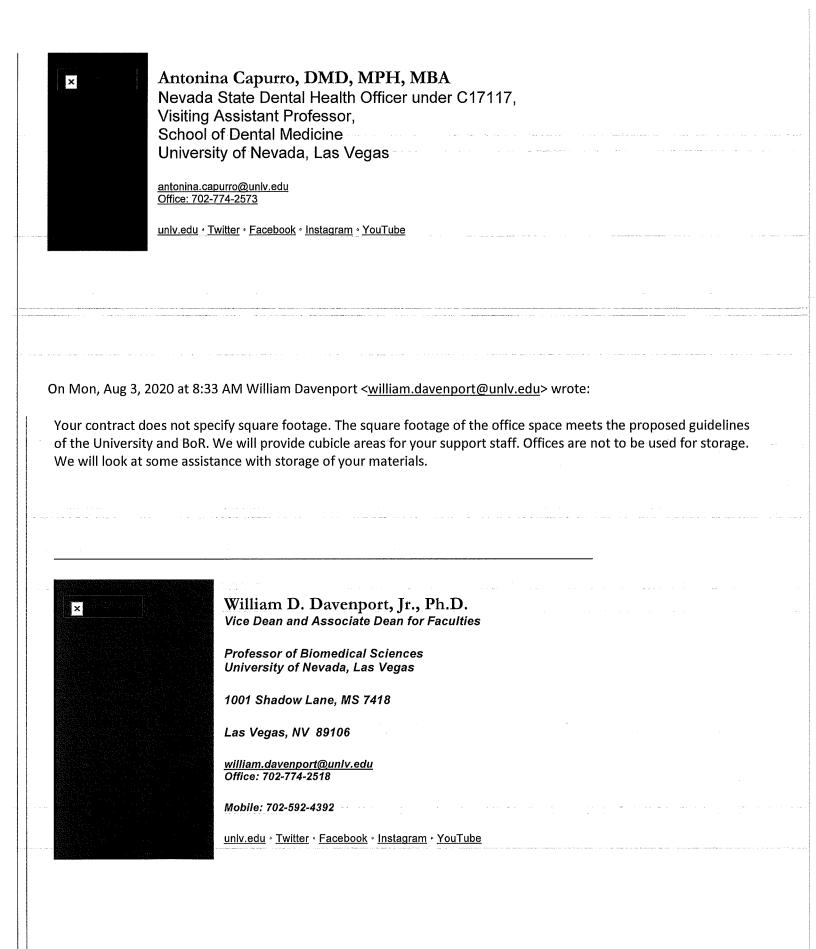
On Mon, Aug 3, 2020 at 2:03 PM Julia Peek <<u>ipeek@health.nv.gov</u>> wrote:

Ok, are you ok with this response or should we try to find you new space?

From: Antonina Capurro <<u>antonina.capurro@unlv.edu</u>>
Sent: Monday, August 3, 2020 1:49 PM
To: William Davenport <<u>william.davenport@unlv.edu</u>>
Cc: David Cappelli <<u>david.cappelli@unlv.edu</u>>; Lorenzo Bethea <<u>lorenzo.bethea@unlv.edu</u>>; Julia Peek
<<u>ipeek@health.nv.gov</u>>; Ihsan Azzam <<u>iazzam@health.nv.gov</u>>
Subject: Re: Office relocation [do not encrypt]

Thank you for the clarification. Your guarantee that cubicles and storage space will be found is reassuring. That was my chief concern. I will coordinate the move from my office to B241 with Lorenzo.

Best regards,



On Mon, Aug 3, 2020 at 8:25 AM Antonina Capurro <<u>antonina.capurro@unlv.edu</u>> wrote:

Good Morning Dr. Davenport,

After receiving the attached photo of B241, the matter of my new room assignment warrants additional discussion. I am not opposed to moving, and I understand that the needs of the school with regards to space allocation are in-flux. However, in order to comply with C17117 and now C17647 the school is required to provide furnished office space not only for myself and two support staff, but also storage facilities for the materials and equipment allocated to the DPBH Oral Health Program. Office B241 is 1/3 the size of my current office and will physically not comply with those grant requirements. Currently, D268 as well as the two cubicles directly in front of it are allocated for staffing and storage in order to fulfill the deliverables of the state's grant with UNLV, and they do so only by creative packaging and organization of the state materials and supplies on my part.

I respectfully request that my new room assignment be changed from B241 to either B249 or B238 and in either case also include an adjacent cubicle. Either of those arrangements would provide a more equivalent space and I believe could be made to accommodate the oral health program staff and associated supplies.

Best Regards,



Antonina Capurro, DMD, MPH, MBA Nevada State Dental Health Officer under C17647, Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas

antonina.capurro@unlv.edu Office: 702-774-2573

 $\underline{unlv.edu} \cdot \underline{Twitter} \cdot \underline{Facebook} \cdot \underline{Instagram} \cdot \underline{YouTube}$ 

On Fri, Jul 31, 2020 at 12:28 PM Antonina Capurro <antonina.capurro@unlv.edu> wrote:

Good Morning Dr. Davenport,

In considering the scope of this move, I am concerned with the space that is required to support the staff and storage needed to comply with C17117 and now C17647. Currently, D268 and the two cubicles in front of it were allocated for staffing and storage to fulfil the deliverables of UNLV's contract with the state. These cubicles were previously occupied by Elizabeth Chartier and Monisa Riley. Their positions will be tentatively filled again in August. Are these cubicles scheduled to be moved to B building as well?

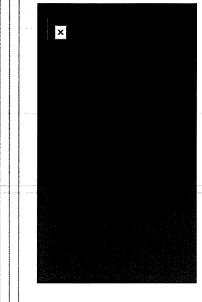
Additionally, since my current office doubles as a storage space I have purchased multiple large bookcases, a console, three filing cabinets, and two large tables. Recently, Lorenzo has assisted me in finding additional storage space for supplies ordered for a fall outreach event. I am concerned there will not be room in the new space for this equipment. If it is at all possible to remain in my current area, I would greatly appreciate it and am available to discuss further so that I can plan accordingly. Thank you, Antonina Antonina Capurro, DMD, MPH, MBA × Nevada State Dental Health Officer under C17117. Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas antonina.capurro@unlv.edu Office: 702-774-2573 univ.edu · Twitter · Facebook · Instagram · YouTube

On Fri, Jul 31, 2020 at 8:27 AM William Davenport <<u>william.davenport@unlv.edu</u>> wrote:

In order to facilitate smoother operations in clinical sciences and to comply with proposed space allocation requirements by the University, you will be relocating your office from D268 to B241. Once the occupants of B241 are relocated to their newly assigned location, we will move you into that space. Please coordinate your move with Mr. Lorenzo Bethea who will assist you with this.

Thanks,

BD



## William D. Davenport, Jr., Ph.D. Vice Dean and Associate Dean for Faculties

Professor of Biomedical Sciences University of Nevada, Las Vegas

1001 Shadow Lane, MS 7418

Las Vegas, NV 89106

william.davenport@unlv.edu Office: 702-774-2518

Mobile: 702-592-4392

unlv.edu · Twitter · Facebook · Instagram · YouTube

# **Martha Framsted**

From:	Scott Howell <showell@atsu.edu></showell@atsu.edu>
Sent:	Thursday, September 3, 2020 9:27 AM
То:	Antonina Capurro
Cc:	Harry Goodman; Judith Feinstein
Subject:	Re: ASTDD Dental Public Health Policy Committee   FW: ADA resolutions Sept. 3 DPHPC meeting [no encryption]
Attachments:	Clean. Oral Health BDR - Conceptual Language as of 9.2 SH comments.docx

Here you go Antonina. Overall I like what Nevada is proposing. The law as proposed here is much more prescriptive than what we have in Arizona and I have found that the more details laid out in the law leaves less room for questions. Of course some might say it's more restrictive but I think what is being proposed is not outrageous. I just had a few comments for things to consider. Not any major changes but maybe some minor ones and some additional thoughts to consider.

Good luck!

On Thu, Sep 3, 2020 at 7:46 AM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Harry,

That is good to know. Scott's input would be invaluable. I have attached the draft BDR for Nevada here. Of course, this idea was picked up last week and it's due tomorrow.

Scott, I would appreciate any feedback you might have on this draft legislative language. Many thanks,

Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Harry Goodman <<u>harrygoodman2307@gmail.com</u>>

Sent: Thursday, September 3, 2020 7:24 AM

To: Judith Feinstein < jafme52@gmail.com >

Cc: Antonina Capurro <a comparison of the second se

Subject: Re: ASTDD Dental Public Health Policy Committee | FW: ADA resolutions Sept. 3 DPHPC meeting

Agree Antonina - before you base your language on the ADA resolutions, please look at Scott's warning about the ADA in their resolution de-emphasizing asynchronous as a useful tool in teledentistry.

DHHS\_000558

If you have time, you might just want to vet the language you're considering with Scott and see what he thinks…he's a very valuable resource to us on this issue and likely a lot more available than his mentor, Paul Glassman.
If we don't hear you on the call today, hope all is well. Harry
On Thu, Sep 3, 2020 at 10:02 AM Judith Feinstein < <u>jafme52@gmail.com</u> > wrote:
Antonina,
You're very welcome. I'm also attaching very recent correspondence with Scott Howell (who wrote ASTDD's <u>teledentistry policy statement</u> ) as his comments and attachments might be helpful to you as well – time permitting.
And as I recall, you're not able to join the call this morning – right?
Judy
From: Antonina Capurro < <u>acapurro@health.nv.gov</u> > Sent: Thursday, September 3, 2020 9:32 AM To: Judith Feinstein < <u>jafme52@gmail.com</u> > Subject: Re: ASTDD Dental Public Health Policy Committee   FW: ADA resolutions Sept. 3 DPHPC meeting
Thank you for sending these resolutions. I am right now on a deadline to draft legislative language on teledentistry, dental emergency responders, and dental loss ratio. The verbiage in the resolutions is exactly what I had hoped to find.
Again, thank you,
Antonina
Antonina Capurro, D.M.D, M.P.H, M.B.A Nevedo State Dental Health Officer
Nevada State Dental Health Officer

Nevada Department of Health and Human Services

Division Public and Behavioral Health - Oral Health Program

1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Dental-Public-Health-Policy <<u>dental-public-health-policy@committees.astdd.org</u>> on behalf of Judith Feinstein via Dental-Public-Health-Policy <<u>dental-public-health-policy@committees.astdd.org</u>> Sent: Thursday, September 3, 2020 4:47 AM To: ASTDD DPHP Committee <<u>dental-public-health-policy@committees.astdd.org</u>> Subject: ASTDD Dental Public Health Policy Committee | FW: ADA resolutions Sept. 3 DPHPC meeting

My email of late last night (early this morning) appears to have NOT gone through the list, and may have exceeded the size limit. I'm trying again after deleting one of the attachments (the list of resolutions from Committee C (Dental Education, Science And Related Matters), which are all reports. My apologies for being even later.

Judy

From: Judith Feinstein <<u>jafme52@gmail.com</u>> Sent: Thursday, September 3, 2020 12:37 AM To: 'ASTDD DPHP Committee ' <<u>dental-public-health-policy@committees.astdd.org</u>> Subject: RE: ADA resolutions Sept. 3 DPHPC meeting

Hello again...

This will be just a little late for those of you who were looking forward to some evening reading...

Attached is a Word document listing ADA proposed resolutions that from my review could be of interest to ASTDD (plus some input from Harry and Chris Wood). I've listed the resolution number, document page, sponsoring ADA Council, and then either a short summary or a short version of the proposal. The PDFs are the full lists with texts for these resolutions and more, plus the "All Inclusive" General Index. Once again, it doesn't seem that there's much on the docket that will be controversial; there's a lot of housekeeping, and as noted at the top of my document, amendments that change resolutions originally worded as time-limited assignments to standing or adopted policies.

FYI, in the past, ASTDD has often simply monitored resolutions of inter statements of support for items we felt strongly about, and occasional	
Thank you —	
Judy	
Judith A. Feinstein, MSPH	
Consultant, ASTDD Dental Public Health Policy Committee	
Consultant, ASTDD Fluorides Committee	
jafme52@gmail.com	
Phone: 207-626-0655	
Mobile phone: 207-485-7552	
From: Judith Feinstein < <u>jafme52@gmail.com</u> > Sent: Wednesday, September 2, 2020 10:17 AM To: ASTDD DPHP Committee < <u>dental-public-health-policy@committees.astdo</u> Subject: Meeting reminder and materials for Sept. 3; Call in #: 1-877-988-690	
Good morning, all:	
Last (minute) reminder for tomorrow's meeting:	
September 3, 2020 11:00 AM, Eastern Time	
Meeting Call in #: 1-877-988-6905, access code: 345447#	

Please let me know if you are unable to participate so that Harry and I will know not to expect you.

Attached are an agenda, last month's meeting minutes, and a draft policy statement for review and discussion. The minutes include a couple of updates, and I know should have been out to you much sooner.

Comments on the agenda, as a preview and to facilitate discussion:

Document review: Healthy People 2030 Oral Health Objectives — this draft came to us at the end of last week and was somewhat of a surprise. Because of the timeliness of the HP 2030 launch, we're taking this one ahead of the others in our queue. What you have here is a version with changes and comments from Harry and me. Although this is short notice for you, review of this paper could be a fairly straightforward process and we could conceivably finish it via email in time for approval at the October 1<sup>st</sup> meeting. → If you can't participate tomorrow, please plan to review the paper as soon as you are able to, and forward your comments by email.

• Updates on other documents

• Opioids Prescribing: as noted in the update in the minutes, the writer, Arjun Singh, has responded to the questions and comments from our last discussion of the draft, and also reviewed the references (which I will do also). Because I didn't receive his last draft until the end of last week, I haven't worked with it yet. So a final draft is now pending.

• Promoting Nutrition and Healthy Eating in Schools is an update of an older PS, and is in process with the School and Adolescent OH Committee. They have this on their agenda for 9/17, after which it should come to the DPHRC. I've been monitoring and commenting, and I think it's very close to being done.

• Health Equity: I am "tweaking" the communications plan and expect to start drafting this paper. I hope to have some questions to pose to you and will send them ahead if time permits.

- ADA House of Delegates Resolutions The ADA is meeting virtually the week of October 12. There seem to be a few resolutions that could be of interest and ASTDD could consider simple statements of support. I'll be sending more on the ADA resolutions separately, because of the number of attachments.
- Other upcoming papers: there will be other papers, but not until after October (more likely November), coming from the SAOH and Fluorides Committees at least, with revisions and updates of current ASTDD documents.

Thank you, and as always, please let me know if you have any questions.

## Judy

Judith A. Feinstein, MSPH

Consultant, ASTDD Dental Public Health Policy Committee

Consultant, ASTDD Fluorides Committee

jafme52@gmail.com

Phone: 207-626-0655

Mobile phone: 207-485-7552

------ Forwarded message ------From: Scott Howell <<u>showell@atsu.edu</u>> To: Judith Feinstein <<u>jafme52@gmail.com</u>> Cc: Paul Glassman <<u>Paul.Glassman@cnsu.edu</u>> Bcc: Date: Thu, 3 Sep 2020 03:19:17 -0400 Subject: Re: ADA resolution on teledentistry Hi Judy,

Happy to provide some thoughts.

I'm concerned that they put so much emphasis on synchronous. Asynchronous can be just as effective (if not even more effective because you aren't limited by bad internet connections) in conducting exams via teledentistry. I think this is all being written as a response to direct-to-consumer ortho companies who primarily work in asynchronous models. But the really should not be viewed as an adjunct to a live patient exam. It is as much an exam as a synchronous encounter is. I also don't understand why an in person exam would be preferred. We have plenty of data demonstrating that digital exams are just as effective (if not more so) than in person. I've attached articles that I reviewed when I helped write the ASTDD white paper that might be beneficial. Not that you have time/need to read through all of these but hopefully it gives some background for challenging the language the ADA is proposing.

Hope that helps, Scott On Wed, Sep 2, 2020 at 8:59 PM Judith Feinstein <<u>jafme52@gmail.com</u>> wrote:

Hello Scott and Paul,

This is hopefully just a quick question... ASTDD usually reviews the ADA proposed resolutions before the annual meeting of the House of Delegates. Part of my job with ASTDD is to review the resolutions and flag any that may be of further interest. Most of the time we simply monitor these, but occasionally have provided simple letters of support and occasionally testimony. Many of the resolutions this year, as in recent years, are for changes in language, to eliminate redundancy or change something from a time-limited initiative into a more permanent policy.

This year, Resolution #16, Proposed Amendment of the Comprehensive ADA Policy Statement on Teledentistry. on p. 3002 of the attached document caught my eye. It add texts and explanations but also specifically addresses licensure. We wonder if either of you would be willing to share any thoughts about this resolution with us, and I hope you don't mind that I've written to both of you in one email.

Thanks very much for your help.

Judy

Judith A. Feinstein, MSPH

Consultant, ASTDD Dental Public Health Policy Committee

Consultant, ASTDD Fluorides Committee

jafme52@gmail.com

Phone: 207-626-0655

Mobile phone: 207-485-7552

Scott Howell, DMD, MPH		
Assistant Professor and Director of	Public Health Dentistry &	Teledentistry
ATSU-ASDOH		
Office: (480) 265-8089		
showell@atsu.edu		

Scott Howell, DMD, MPH Assistant Professor and Director of Public Health Dentistry & Teledentistry ATSU-ASDOH Office: (480) 265-8089 showell@atsu.edu



## LCHC ORAL HEALTH BDR CONCEPTUAL LANGUAGE

Connecting People to Policy

NOTE: Senator Ratti requested dental therapists be included wherever possible.

### TELEDENTISTRY

## EXISTING LAW

Nevada Revised Statutes (NRS) 629.515(4)(c) defines the term "telehealth" to mean "the delivery of services from a **provider of health care** to a patient at a different location through the use of information and audiovisual communication technology, not including standard telephone, facsimile or electronic mail." NRS <u>629.031(1)(c)</u> provides that a dentist is a provider of health care for the purposes of Chapter 629. Because a dentist is a provider of health care, any services provided by a dentist to a patient at a different location through the use of information and audio-visual technology are considered telehealth, and NRS 629.510 and 629.515 apply.

#### Creation of Teledentistry section within NRS 631:

- 1. Require the Division of Health care Financing and Policy, DHHS, in requests for proposals (RFPs) for Medicaid medical managed care organizations (MCOs), to mandate that MCOs provide referrals to teledentistry services within any telehealth packages;
- Require the Division of Health care Financing and Policy, DHHS, dental managed care organization and fee-for-service programs to cover services provided through teledentistry including the synchronous or asynchronous encounter code.
  - a. As a condition of payment, synchronous and asynchronous "store and forward" technology is permitted.
  - b. The dental managed care organization must create and annually update a resource inventory on currently available teledentistry services within their network. This information shall be accessible to hospital emergency departments.
- Require hospital emergency departments to provide written information regarding currently available teledentistry services for patients who present with non-traumatic dental conditions;
- 4. A dental screening, exam, or assessment provided to patients through teledentistry meets the requirements for an oral health exam or assessment for entrance into an educational facility such as Head Start, licensed childcare facilities, and public or private school as long as the dental screening, exam, or assessment identifies definitive dental or oral lesions and provides care coordination and referral in locating a dental home.
- Accordingly, the purpose of this act is to enhance access to dental care via teledentistry. Dental practitioners who use teledentistry must meet:
  - a. Teledentistry General Provisions as outlined in NRS XX
  - b. Practitioner-Patient Relationship standards as outlined in NRS XXY
  - c. Patient Rights and Informed Consent as outlined in NRS XXZ
  - d. Coordination of Care as outlined in NRS XXO
- 6. Licensure
  - a. Require dental practitioners to obtain 2 hours of continuing education in teledentistry for initial licensure and, for those who are already licensed, for licensure renewal by 2022. The Board will create regulation on courses that qualify for teledentistry continuing education.

**Commented [MC1]:** Request or mandate? Are telehealthcovered services separate from other covered services, or is the goal to include teledentistry as part of any MCO oral health services?

**Commented [SH2]:** This is really smart. A lot of states don't require asynchronous reimbursement so insurances aren't doing it.

**Commented [JC3]:** Should this be more actionable? Perhaps instead of "accessible" should it read "distributed" "or "provided to" ??

Commented [JC4]: resource sheet

**Commented [MC5]:** Connect these two. Target – Medicaid adults in ERs for nontraumatic dental conditions Unaware of services available.

**Commented [MC6]:** Creates definition of "Dental practitioner" – includes licensed under NRS 631. If going to provide teledentistry, need to follow these standards/reouirements outlined in these sections.

Commented [SH7]: Very interesting idea and I think it's a

great addition. The challenge you might run up against is that there aren't a ton of CE offered in this area but if it's in

the law then more might pop up.

- b. This requirement is waived if the dental practitioner presents a certificate of completion in a teledentistry course as part of their coursework for graduation from a CODA accredited institution.
- c. A dental practitioner using teledentistry to practice dentistry, dental hygiene, or dental therapy on patients in Nevada must be licensed to practice in Nevada. This includes dental practitioners who treat or prescribe to Nevada patients through online service sites.
- 7. Professional liability insurance policies must provide malpractice coverage for teledentistry.

The Board is authorized to adopt regulations as necessary to carry out the provisions of the bill. These regulations should at a minimum establish:

- a. Prescribing policies
- b. Patient records and privacy
- c. Collaborative practices between medical and dental offices
- d. Consultation, referrals, and billing between different dental specialty types
- e. Definitions and interaction between dentists, dental hygienists, and dental therapists, including supervision and delivery of care.
- 9. Teledentistry may be used in real time to provide limited diagnostic or emergency treatment planning services in collaboration with a non-dental community liaison such as a community health worker, teacher, or emergency medical responder, or a student enrolled in a program of study to become a dental hygienist, dental therapist or dentist.

10. For the purposes of this chapter, "telehealth" as referenced in NRS 629 shall include "teledentistry". NRS XX: Teledentistry General Provisions

- 1. Treatment and consultation recommendations made in an online setting, including issuing a prescription via electronic means or initial diagnosis and correction of malpositions of human teeth or initial use of orthodontic appliances will be held to the same standards of appropriate practice as those in traditional, in-person encounters as outlined in NRS 631. Treatment;
- including issuing a prescription or orthodontic appliance based solely on an online questionnaire, does not constitute an acceptable standard of care.
- 2. Pursuant to NRS 631, the standards of professional conduct is the same whether a patient is seen in person or through a teledentistry encounter. A dentist shall not conduct a dental examination using teledentistry if the standard of care necessitates an in-person dental examination.
- 3. Dental practitioners using teledentistry will be held to the same standard of professional conduct as practitioners engaging in more traditional in-person care delivery, including the requirement to meet all technical, clinical, confidentiality and ethical standards required by law.
- 4. This section shall not be construed to alter the scope of practice of any dental practitioner or authorize the delivery of dental health care services in a setting, or in a manner, not otherwise authorized by law.
- 5. All laws and regulations governing professional responsibility, unprofessional conduct, and standards of practice that apply to a dental practitioner under his/her Nevada license shall apply while providing teledental services.
- 6. The Board may adopt regulation to specify evidence-based standards of practice and practice guidelines during a teledental procedure to ensure patient safety, quality of care, and positive outcomes.

NRS XXY: Practitioner-Patient Relationship Standards

- 1. A dental practitioner may use teledentistry to conduct an examination for a new patient or for a new diagnosis if the examination is conducted in accordance with evidence-based standards of practice to sufficiently establish an informed diagnosis.
- Practitioner-Patient Relationship is the relationship between a dental practitioner and a receiver of oral health care services (patient) based on mutual understanding of their sh

2

receiver of oral health care services (patient) based on mutual understanding of their shared responsibility for the patient's oral health care.



Commented [MC8]: Provide services with CHW, students, nurses, dentist extenders in the community. Expand reach. Don't limit. Hoping to help more people in the field.

**Commented [SH9]:** I agree with the other comment. Don't limit who the non-dental provider is.

Commented [MC10]: Include prescribing for sure

**Commented [SH11]:** I'm not sure we have any kind of standard of care that requires in-person visits. What I tell people is that they should use their clinical judgement. If you can't get a complete diagnosis with teledentistry than an in person visit is required. Maybe this means the same thing as standard of care.

- 3. When practicing teledentistry, a dental practitioner must establish a practitioner-patient relationship with the patient. The absence of in-person contact does not eliminate this requirement. Patient completion of a questionnaire does not, by itself, establish a practitioner-patient relationship, and therefore treatment, including prescriptions, based solely on a questionnaire does not constitute an acceptable standard of care.
  - a. The dental practitioner must provide proof of identity, jurisdiction, and licensure status to the patient.
  - b. The dental practitioner must make appropriate effort to confirm the patient's identity. If patient is a minor, the dental practitioner must make appropriate effort to confirm the parent or legal guardian is present when required.
  - c. The dental practitioner must make appropriate effort to confirm and document the patient is physically located in a jurisdiction in which the dental practitioner is licensed.
  - Any individual, partnership, corporation, or other entity that provides dental services through teledentistry shall make available the name, telephone number, practice address, and Nevada state license number of any dentist who will be involved in the provision of services to a patient prior to the rendering of services and when requested by a patient.
     A violation of this section shall constitute unprofessional conduct.

#### NRS XXZ: Patient Rights and Informed Consent

2.

- 1. When teledentistry will be utilized, the patient will be actively involved in treatment decisions. Prior to the delivery of dental health care via teledentistry, the dental practitioner initiating the use of teledentistry shall inform the patient about the use of teledenistry and obtain verbal or written consent from the patient for the use of telehealth as an acceptable mode of delivering dental health care services and public health. The consent shall be documented.
  - The dental practitioner shall ensure informed consent covers the following:
    - i. A description of the types of dental care services provided via teledentistry, including limitations on services;
    - ii. The identity, contact information, practice location, licensure, credentials, and qualifications of all dental practitioners involved in the patient's dental care, which must be publicly displayed on a website or provided in writing to the patient;
    - iii. Precautions for technological failures or emergency situations; and
    - iv. Any other regulations established by the Nevada State Board of Dental Examiners
  - 2. Patient information must be stored and shared through a secure server. Electronic devices being used to record or store patient information must be encrypted and password protected.
  - 3. The dental practitioner shall ensure that the use of teledentistry complies with the privacy and security requirements of the Health Insurance Portability and Accountability Act.
  - 4. A dental practitioner providing teledentistry services must document the encounter appropriately and completely so that the record clearly, concisely and accurately reflects what occurred during the encounter. Such records should be permanent and easily available to or on behalf of the patient and other practitioners in accordance with patient consent, direction and applicable standards, dental practitioner should maintain security and confidentiality of the patient record in compliance with applicable laws and regulations related to the maintenance and transmission of such records. A dental practitioner who delivers dental services using teledentistry shall, upon request of the patient, provide health records in a timely manner.
  - 5. A provider of dental services shall not require a patient to sign an agreement that limits the patient's ability to file a complaint with the board.
  - 6. Nothing in this section shall preclude a patient from receiving in-person dental health care delivery services during a specified course of dental health care and treatment after agreeing to receive services via teledentistry.

NRS XXO: Coordination of Care





Commented [MC12]: Some from ADA

DHHS 000568

- 1. A dental practitioner who uses teledentistry shall have adequate knowledge of the nature and availability of local dental resources to provide appropriate follow-up care to a patient following a teledentistry encounter. A dental practitioner shall refer a patient to an acute care facility or an emergency department when referral is necessary for the safety of the patient or in the case of emergency.
- 2. If the information transmitted through electronic or other means as part of a patient's encounter is not of sufficient quality or does not contain adequate information for the dental practitioner to form an opinion or if the procedures is beyond the practitioner's capability, the dental practitioner must declare they cannot make an adequate diagnosis and shall refer the patient for care. The dental practitioner may either complete an in-person physical examination, request additional data, or recommend the patient be evaluated by the patient's primary dentist or other local oral health care provider.

#### Definition

- "Board" means the Nevada State Board of Dental Examiners.
- "Dental practitioner" means a dentist, affiliated practice dental hygienist, dental hygienists with a public health endorsement, or dental therapist who is licensed pursuant to NRS 631
- "Teledentistry" means the mode of delivering dental health care services and public health via information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient's dental health care while the patient is at the originating site and the dental practitioner is at a distant site. Teledentistry facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store and forward transfers.
- "Teledental Services" means the use of telehealth systems and methodologies as outlined in NRS 629 by a licensed dental practitioner operating within the scope of their practice or specified in rules adopted by the Board
- "Dental Home" means that a child's oral health care is delivered in a comprehensive, continuously
  accessible, coordinated and family-centered way by a licensed dentist.
- Asynchronous store and forward" means the transmission of a patient's medical and dental information from an originating site to the dental practitioner at a distant site.
- "Distant site" means a site where a dental practitioner who provides dental health care services is located while providing these services via a telecommunications system.
- "Originating site" means a site where a patient is located at the time dental health care services are provided via a telecommunications system or where the asynchronous store and forward service originates.
- "Synchronous interaction" means a real-time interaction between a patient and a dental practitioner located at a distant site.

#### DENTAL EMERGENCY RESPONDERS

#### 1. Establish dental responders within NRS 631?

a. A dentist, dental hygienist, or dental therapist in good standing with the Nevada State Board of Dental Examiners who is appropriately certified in disaster preparedness, immunizations, and dental humanitarian emergency medical response consistent with the Society of Disaster Medicine and Public Health and certified by the National Incident Management System of the Federal Emergency Management Agency, the National Disaster Life Support Foundation, or

4



Commented [SH13]: This covers what I referred to above regarding standard of care vs clinical judgement but I'd still be cautious about using standard of care so as not create a perception that there is only one right way to do something

**Commented [MC15]:** Want to keep options open, allow the Board to expand what qualifies as teledentistry if necessary.

Commented IJC141: same question as above for legal

DHHS\_000569

their successor organizations may apply for a dental responder permit from the Nevada State Board of Health.

- b. Dental responders are deemed to be acting within the bounds of licensure when providing emergency medical care, immunizations, mobile and humanitarian care during the existence of a state of emergency or declaration of disaster pursuant to NRS 414.070 or a public health emergency or other health event pursuant to NRS 439.970.
- c. The Nevada State Board of Health in association with the Committee on Dental Emergency Management shall adopt regulations as necessary to carry out the provisions of the bill.
- d. A dental responder who provides care is not liable for any civil damages, liability, or legal action as a result of any act or omission by that person in rendering that care or assistance in good faith for the purpose of exercising functions related to an emergency. This does not exempt any harm that occurs because a dental responder committed intentional misconduct, gross negligence or provided services under the influence of alcohol or drugs.
- e. A dental responder is afforded additional protections under NRS 41.5.
- Include dental responders into NRS 450B.151 Creation; membership; terms of members; alternate members; vacancies.
  - a. 3 (j) One member who is licensed pursuant to NRS 631, holds a dental responder permit, and who has experience providing emergency medical services;

#### **Definition:**

"Dental responders" defined. "Dental responders" means a dentist, dental hygienist, or dental
therapist who is appropriately certified in disaster preparedness, immunizations, and dental
humanitarian medical response consistent with the Society of Disaster Medicine and Public Health
and certified by the National Incident Management System of the Federal Emergency Management
Agency, the National Disaster Life Support Foundation, or their successor organizations and holds a
permit from the Nevada State Board of Health.

#### 3. Establish the Committee on Dental Emergency Management within Chapter 439?

- a. Creation; membership; terms of members; alternate members; vacancies.
  - a. Committee on Dental Emergency Management is hereby established within the Division of Public and Behavioral Health .
  - b. The Director shall appoint to the Committee on Dental Emergency Management:
    - 1. One representative of the Nevada Dental Association
    - 2. One representative of the Nevada Dental Hygienists' Association
    - 3. One representative of the Nevada State Board of Dental Examiners
    - 4. One or more representative of a NSHE dental or dental hygiene school
    - 5. One representative who is a county health officer county appointed pursuant to <u>NRS 439.290</u> in a county whose population is 100,000 or less, or the county health officer's designee
    - 6. The Chief Medical Officer
    - 7. The State Dental Health Officer
    - 8. The State Public Health Dental Hygienist
    - One or more representatives of a state or local public health agency whose duties relate to emergency preparedness
    - 10. One representative who is a consumer of dental healthcare services.

5

c. The term of each representative appointed to the Committee on Dental Emergency Management is 3 years. A representative may not serve more than two consecutive



Commented [JC16]: A health officer from a rural county

terms but may serve more than two terms if there is a break in service of not less than 2 years.

- d. Each representative of the Committee shall appoint an alternate to serve in the member's place if the member is temporarily unable to perform the duties required of him or her pursuant to NRS (whatever this number will be), inclusive.
- e. A position on the Committee that becomes vacant before the end of the term of the member must be filled in the same manner as the original appointment.
- b. Chair; meetings; rules for management; compensation of members.
  - -----a. The Committee shall elect a Chair from among its members. The term of the Chair is 1 year with the possibility for reappointment.
    - b. The Committee shall adopt rules for its own management.
    - c. Representatives of the Committee serve without compensation, except that, for each day or portion of a day during which a member attends a meeting of the Committee or is otherwise engaged in the business of the Committee, the member of the Committee is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally. The per diem allowance and travel expenses must be paid by the Division from money not allocated by specific statute for another use.
- c. Duties. The Committee on Dental Emergency Management shall:
  - a. Advise the State Board of Dental Examiners and Division with respect to the preparation and adoption of regulations regarding any issues related to the delivery of dental services, dental practitioners, educational requirements, licensure, and emergency management during the existence of a state of emergency or declaration of disaster pursuant to NRS 414,070 or a public health emergency or other health event pursuant to NRS 439.970
  - Report any incidence of patient abandonment or unprofessional conduct to the State Board of Dental Examiners for investigation.
  - c. Review and advise the Division and the Committee on Emergency Medical Service regarding the management and performance of dental services during an emergency and regarding statewide emergency dental protocols.
  - d. Organize and activate dental emergency responders in coordination with the Medical Reserve Corps, Statewide Volunteer Pool, Battle Born Medical Corps, or any other state emergency health care workforce.
  - e. Request Division action through public health announcements, memorandums, or emergency declarations.
  - f. Develop an emergency service plan for the continuation of dental services during a declared local, state, or national emergency and establish associated protocols and notification systems including clear protocols for patient communication and emergency treatment, including patient screening and the appropriate use of personal protective equipment for the dental practitioner and dental staff.
  - g. Encourage the training and education of dental emergency responders to improve the system of public safety in this State; and
  - h. On or before January 31 of each year, submit a report to the Department, Division, and Chief
    - 1. a summary of any policies or procedures adopted by the Committee on Dental Emergency Management
    - 2. a description of the activities of the Committee on Dental Emergency Management for the immediately preceding calendar year
  - i. Perform such other duties as may be required by law or regulation.

a. Activation of Committee or subcommittee: Conditions; duties.





#### Commented [JC17]: From NRS 450b.152, COMMITTEE ON EMERGENCY MEDICAL SERVICES is this reasoonable to include here?

- 1. The Committee on Dental Emergency Management shall meet at least twice each calendar year.
- 2. The Chief or State Dental Health Officer may activate the Committee on Dental Emergency Management or any subcommittee thereof
- During the existence of a state of emergency or declaration of disaster pursuant to <u>NRS 414.070</u> or a public health emergency or other health event pursuant to <u>NRS 439.970</u>, the provisions of chapter 241 of NRS do not apply to any meeting held by the Committee on Dental Emergency Management or a subcommittee thereof.

b. Regulations.

1. The Division of Public and Behavioral Health shall adopt such regulations as are necessary to govern the Committee on Dental Emergency Management

#### **Definition:**

- "Dental Abandonment" defined. "Dental abandonment" means temporary or permanent unilateral severance of professional relationship between a dental practitioner and patient without sufficient notice when the necessity of continuing dental services exists.
- "Director" defined. "Director" means the Administrator of the Division of Public and Behavioral Health.
- "Division" defined. "Division" means the Division of Public and Behavioral Health.
- "Department" defined. "Department" means the Department of Health and Human Services
- "Chief" defined. "Chief" means the Chief of the Division of Emergency Management of the
- Department of Public Safety.

#### DENTAL LOSS RATIO / DENTAL PUBLIC HEALTH FUND

#### NEW: NRS 695D. 24X Reinvestment for Prevention and Dental Public Health Fund

- 1. Establish the Fund for Silver State Smiles, housed within the Department of Health and Human Services and administered by the State Dental Health Officer.
- 2. Require every organization for dental care that serves members in the State of Nevada (as defined in Chapter 695D of NRS), to contribute 1 percent (up to \$500,000 per fiscal year) of its prepaid charges or premiums to the Fund for Silver State Smiles.
- 3. Require moneys from the Fund for Silver State Smiles to be directed to community-based prevention and oral health promotion, surveillance, and improvement initiatives and infrastructure to serve insured residents, dental practitioners, and underserved, vulnerable and rural citizens of all ages.

# **REVISE NRS** 695D.240 Limitation on expenses for marketing and administration and reporting of medical loss ratio (MLR) by organizations for dental care

- 1. The organization for dental care shall use not more than 25 percent of its prepaid charges or premiums for marketing and administrative expenses, including all costs to solicit members or dentists.
- 2. Marketing and administrative expenses must include agent commissions, profits and salaries of employees at organization for dental care.
- 3. The Commissioner may adopt further regulations which define "marketing and administrative expenses" for the purposes of subsection 1 and 2.

7

4. An organization for dental care that issues, sells, renews, or offers a contract covering dental services shall file a report with the department by July 31 of each year, which shall be known as the MLR annual report. The MLR annual report shall be organized by market and product type and shall



Commented [MC18]: Reporting and transparency for dental medical loss ratio

Commented [MC19]: Has DOI defined this more?

DHHS 000572

contain the same information required in the 2013 federal Medical Loss Ratio (MLR) Annual Reporting Form (CMS-10418). The department shall post a health care service plan's MLR annual report on its Internet Web site within 45 days after receiving the report.

- 5. The MLR reporting year shall be for the calendar year during which dental coverage is provided by the plan. As applicable, all terms used in the MLR annual report shall have the same meaning as used in the federal Public Health Service Act (42 U.S.C. Sec. 300gg-18), Part 158 (commencing with Section 158.101) of Title 45 of the Code of Federal Regulations, and Section 1367.003.
- 6. If the commissioner decides to conduct a financial examination as described in NRS 695D.270 because the commissioner finds it necessary to verify the organization for dental care's representations in the MLR annual report, the department shall provide the health care service plan with a notification 30 days before the commencement of the financial examination.
- The organization for dental care shall have 30 days from the date of notification to electronically submit to the department all requested records, books, and papers. The commissioner may extend the time for a health care service plan to comply with this subdivision upon a finding of good cause.
   The department shall make available to the public all of the data provided to the department
- pursuant to this section.
  9. Organizations for dental care are exempt from this reporting requirement for products offered under Nevada Medicaid, Children's Health Insurance Plans (CHIP) or other state sponsored health programs.

#### Definition:

 "Medical Loss Ratio" defined. A financial measurement to determine the percentage of prepaid charges or premiums collected that are used to pay for dental care. For example, a medical loss ratio of 75% indicates that the organization for dental care is using the remaining 25% of premiums to pay marketing and administration expenses, including profits, agent commissions and salaries for employees at the organization for dental care.

8

Commented [MC20]: Don't have anything in NV requiring DLR to be public. California requires it to be published on a website.

**Commented [MC21]:** Defining medical loss ratio, but for dental care.



# Martha Framsted

From: Sent: To: Cc: Subject:	Scott Howell <showell@atsu.edu> Thursday, September 3, 2020 4:27 PM Harry Goodman Antonina Capurro; Judith Feinstein Re: ASTDD Dental Public Health Policy Committee   FW: ADA resolutions Sept. 3 DPHPC meeting [no encryption]</showell@atsu.edu>	
My pleasure Harry and Antonina	1	
	Harry Goodman < <u>harrygoodman2307@gmail.com</u> > wrote:	
Thanks, Scottso appreciate ye	Sur willingness to neip.	
Be well Harry		
On Thu, Sep 3, 2020 at 7:10 PM	1 Antonina Capurro < <u>acapurro@health.nv.gov</u> > wrote:	
· · · · · · · · · · · · · · · · · · ·		
	Truly appreciate your feedback. The usage of the phrase 'standard of care' may biage is not defined in any other statute. I agree with you that something like nt eliminate confusion.	
We have a great chance to	change the delivery of care in our state through teledentistry and I want to get it	
right.		
······		-

# Again, many thanks!

# Antonina Capurro, D.M.D, M.P.H, M.B.A

# Nevada State Dental Health Officer

Nevada Department of Health and Human Services

Division Public and Behavioral Health - Oral Health Program

1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov

www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Scott Howell <<u>showell@atsu.edu</u>>

Sent: Thursday, September 3, 2020 9:27 AM

To: Antonina Capurro <<u>acapurro@health.nv.gov</u>>

<b>Cc:</b> Harry Goodman <	x <u>harrygoodman2307@gmai</u>	l.com>; Judith Feinstein	<jafme52@gmail.com></jafme52@gmail.com>	
	Dental Public Health Policy C	Committee   FW: ADA re	solutions Sept. 3 DPHPC meet	ing [no
· · · · ·			<u></u>	
Here you go Antonina than what we have ir Of course	a. Overall I like what Nevad n Arizona and I have found t	a is proposing. The law hat the more details laid	as proposed here is much mo d out in the law leaves less roo	re prescriptive om for questions.
some might say it's m	nore restrictive but I think w	/hat is being proposed is	s not outrageous. I just had a nes and some additional thoug	few comments
for things to consider	. Not any major changes be	at maybe some minor of		
				, , , <u>, , , , , , , , , , , , , , , , </u>
Good luck!				
On Thu, Sep 3, 2020	at 7:46 AM Antonina Capur	ro < <u>acapurro@health.nv</u>	<u>v.gov</u> > wrote:	
. <u></u>				
Harry,				

-----

That is good to know. Scott's input would be invaluable. I have attached the draft BDR for Nevada here. Of course, this idea was picked up last week and it's due tomorrow. Scott, I would appreciate any feedback you might have on this draft legislative language. Many thanks, Antonina

### Antonina Capurro, D.M.D,

### M.P.H, M.B.A

### Nevada State Dental Health Officer

Nevada Department of Health and Human Services

Division Public and Behavioral Health - Oral Health Program

1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106

T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov

www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Harry Goodman <<u>harrygoodman2307@gmail.com</u>>

Sent: Thursday, September 3, 2020 7:24 AM

To: Judith Feinstein <jafme52@gmail.com>

Cc: Antonina Capurro <a href="mailto:acapurro@health.nv.gov">acapurro@health.nv.gov</a>>

Subject: Re: ASTDD Dental Public Health Policy Committee | FW: ADA resolutions Sept. 3 DPHPC meeting

Agree Antonina - before you base your language on the ADA resolutions, please look at Scott's warning about the ADA in their resolution de-emphasizing asynchronous as a useful tool in teledentistry.

If you have time, you might just want to vet the language you're considering with Scott and see what he thinks...he's a very valuable resource to us on this issue and likely a lot more available than his mentor, Paul Glassman.

DHHS 000580

	n and a second secon
	If we don't hear you on the call today, hope all is well.
	Harry
	On Thu, Sep 3, 2020 at 10:02 AM Judith Feinstein < <u>jafme52@gmail.com</u> > wrote:
	on ma, sep 5, 2020 at 10.02 AW Saath Constent A <u>lamico 2 (2 Amandom</u> ) - motel
	I
	Antonina,
	y / /
	You're very welcome. I'm also attaching very recent correspondence with Scott Howell (who wrote ASTDD's
	<u>teledentistry policy statement</u> ) as his comments and attachments might be helpful to you as well – time permitting.
I	

			<b></b>			<u></u>					
Judy											
						ι,					
	· · · · · · · · · · · · · · · · · · ·										
From: A	ntonina Capu	ırro < <u>acapu</u>	<u>rro@health.</u>	<u>nv.gov</u> >							
Sent: Th	ursday, Sept	ember 3, 20	020 9:32 AM						 		
<b>To:</b> Judit	h Feinstein <	jafme52@j	<u>gmail.com</u> >								
Subject	Re: ASTDD E	Dental Publi	ic Health Pol	icy Commi	ttee   FW:	ADA reso	olutions Se	ot. 3 DPHPC	Cmeeting		
			· · · - · · · ·								
Thank	vou for send itistry, denta	ing these	resolutions	. I am righ	it now on	a deadlir	ne to draft	legislative	e languag	e on	

	· · · · · ·	, , , , , , , , ,		
Again, thank	you,			 
Antonina			<u>.</u>	 
		. , <u>, , , , , , , , , , , , , , , , , ,</u>		

### Antonina Capurro, D.M.D,

M.P.H, M.B.A

### Nevada State Dental Health Officer

Nevada Department of Health and Human Services

Division Public and Behavioral Health - Oral Health Program

1001-Shadow Lane,

MS 7411, D280 Las Vegas, NV 89106

T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov

www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

**From:** Dental-Public-Health-Policy <<u>dental-public-health-policy@committees.astdd.org</u>> on behalf of Judith Feinstein via Dental-Public-Health-Policy <<u>dental-public-health-policy@committees.astdd.org</u>>

Sent: Thursday, September 3, 2020 4:47 AM

To: ASTDD DPHP Committee <<u>dental-public-health-policy@committees.astdd.org</u>>

Subject: ASTDD Dental Public Health Policy Committee | FW: ADA resolutions Sept. 3 DPHPC meeting

My email of late last night (early this morning) appears to have NOT gone through the list, and may have exceeded the size limit. I'm trying again after deleting one of the attachments (the list of

resolutions from Committee C (Dental Education, Science And Related Matters), which are all reports. My apologies for being even later.

From: Judith Feinstein <jafme52@gmail.com>

Sent: Thursday, September 3, 2020 12:37 AM

To: 'ASTDD DPHP Committee ' <<u>dental-public-health-policy@committees.astdd.org</u>>

Judy ------

Subject: RE: ADA resolutions Sept. 3 DPHPC meeting

Hello again...

This will be just a little late for those of you who were looking forward to some evening reading...

Attached is a Word document listing ADA proposed resolutions that from my review could be of interest to ASTDD (plus some input from Harry and Chris Wood). I've listed the resolution

number, document page, sponsoring ADA Council, and then either a short summary or a short version of the proposal. The PDFs are the full lists with texts for these resolutions and more, plus the "All Inclusive" General Index. Once again, it doesn't seem that

there's much on the docket that will be controversial; there's a lot of housekeeping, and as noted at the top of my document, amendments that change resolutions originally worded as time-limited assignments to standing or adopted policies.

FYI, in the past, ASTDD has often simply monitored resolutions of interest, but has sometimes written statements of support for items we felt strongly about, and occasionally offered

additional comments.

Thank you –

Judy

Judith A. Feinstein, MSPH

Consultant, ASTDD Dental Public Health Policy Committee

Consultant, ASTDD Fluorides Committee

	ione: 207-626-0655
Μ	obile phone: 207-485-7552
Fr	om: Judith Feinstein < <u>jafme52@gmail.com</u> >
Se	nt: Wednesday, September 2, 2020 10:17 AM
Тс	: ASTDD DPHP Committee < <u>dental-public-health-policy@committees.astdd.org</u> >
Su	bject: Meeting reminder and materials for Sept. 3; Call in #: 1-877-988-6905, access code: 345447#

Good morning, all:

Last (minute) reminder for tomorrow's meeting:

September 3, 2020

11:00 AM, Eastern Time

Meeting Call in #: 1-877-988-6905, access code: 345447#

Please let me know if you are unable to participate so that Harry and I will know not to expect you.

Attached are an agenda, last month's meeting minutes, and a draft policy statement for review and discussion. The minutes include a couple of updates, and I know should have been

out to you much sooner.

Comments on the agenda, as a preview and to facilitate discussion:

- **Document review**: Healthy People 2030 Oral Health Objectives -- this draft came to us at the end of last week and was
  - somewhat of a surprise. Because of the timeliness of the HP 2030 launch, we're taking this one ahead of the others in our queue. What you have here is a version with changes and comments from Harry and me. Although this is short notice for you, review of this

paper could be a fairly straightforward process and we could conceivably finish it via email in time for approval at the October 1<sup>st</sup> meeting.

 $\rightarrow$  If you can't participate tomorrow, please plan to review the paper as soon as you are able to, and forward your comments by email.

**Updates** on other documents

Opioids Prescribing: as noted in the update in the minutes, the writer, Arjun Singh, has responded to the questions and comments from our last discussion of the draft, and also reviewed the references

(which I will do also). Because I didn't receive his last draft until the end of last week, I haven't worked with it yet. So a final draft is now pending.

0

0

0

Promoting Nutrition and Healthy Eating in Schools is an update of an older PS, and is in process with the School and Adolescent OH Committee. They have this on their agenda for 9/17, after which it should

come to the DPHRC. I've been monitoring and commenting, and I think it's very close to being done.

Health Equity: I am "tweaking" the communications plan and expect to start drafting this

paper. I hope to have some questions to pose to you and will send them ahead if time permits.

• **ADA House of Delegates** Resolutions – The ADA is meeting virtually the week of October 12. There seem to be a few resolutions

that could be of interest and ASTDD could consider simple statements of support. I'll be sending more on the ADA resolutions separately, because of the number of attachments.

• **Other** upcoming papers: there will be other papers, but not until after October (more likely November), coming from the

SAOH and Fluorides Committees at least, with revisions and updates of current ASTDD documents.

Thank you, and as always, please let me know if you have any questions.

Judy

Judith A. Feinstein, MSPH

Consultant, ASTDD Dental Public Health Policy Committee

Consultant, ASTDD Fluorides Committee

jafme52@gmail.com

Phone: 207-626-0655

Mobile phone: 207-485-7552

----- Forwarded message ------

From: Scott Howell <<u>showell@atsu.edu</u>>

To: Judith Feinstein < jafme52@gmail.com >

Cc: Paul Glassman < Paul.Glassman@cnsu.edu>

Bcc:

Date: Thu, 3 Sep 2020 03:19:17 -0400

Subject: Re: ADA resolution on teledentistry

Hi Judy,

Happy to provide some thoughts.

I'm concerned that they put so much emphasis on synchronous. Asynchronous can be just as effective (if not even more effective because you aren't limited by bad internet connections) in conducting exams via teledentistry. I think this is all being written

as a response to direct-to-consumer ortho companies who primarily work in asynchronous models. But the really should not be viewed as an adjunct to a live patient exam. It is as much an exam as a synchronous encounter is. I also don't understand why an in

person exam would be preferred. We have plenty of data demonstrating that digital exams are just as effective (if not more so) than in person. I've attached articles that I reviewed when I helped write the ASTDD white paper that might be beneficial. Not that

you have time/need to read through all of these but hopefully it gives some background for challenging the language the ADA is proposing.

Hope that helps,

Scott

On Wed, Sep 2, 2020 at 8:59 PM Judith Feinstein <<u>jafme52@gmail.com</u>> wrote:

Hello Scott and Paul,

This is hopefully just a quick question... ASTDD usually reviews the ADA proposed resolutions before the annual meeting of the House of Delegates. Part of my job with ASTDD is to review the resolutions and flag any that may be

of further interest. Most of the time we simply monitor these, but occasionally have provided simple letters of support and occasionally testimony. Many of the resolutions this year, as in recent years, are for changes in language, to eliminate redundancy

or change something from a time-limited initiative into a more permanent policy.

This year, Resolution #16, Proposed Amendment of the Comprehensive ADA Policy Statement on Teledentistry. on p. 3002 of the attached document caught my eye. It add texts and explanations but also specifically addresses licensure.

We wonder if either of you would be willing to share any thoughts about this resolution with us, and I hope you don't mind that I've written to both of you in one email.

Thanks very much for your help.

	Judy
	Judith A. Feinstein, MSPH
	Consultant, ASTDD Dental Public Health Policy Committee Consultant, ASTDD Fluorides Committee
	jafme52@gmail.com
-	Phone: 207-626-0655
	Mobile phone: 207-485-7552

Scott Howell, DMD, MPH

Assistant Professor and Director of Public Health Dentistry & Teledentistry

ATSU-ASDOH

---

Office: (480) 265-8089

<u>showell@atsu.edu</u>

 	· · · · · · · · · · ·	

Scott Howell, DMD, MPH

Assistant Professor and Director of Public Health Dentistry & Teledentistry

Office: (480) 265-8089

### showell@atsu.edu

---

Scott Howell, DMD, MPH Assistant Professor and Director of Public Health Dentistry & Teledentistry ATSU-ASDOH Office: (480) 265-8089 <u>showell@atsu.edu</u>

DHHS\_000598

### **Martha Framsted**

From:Antonina Capurro <acapurro@health.nv.gov>Sent:Thursday, September 10, 2020 11:49 AMTo:Patti OyaSubject:Update and Question Re: Amendment - Contract 22479

Good Morning Patti,

I hope you are doing well. I am writing to provide you with a status update on the licensed childcare project. The sites have been selected and approved by the biostatistician. Also, the live webinar has received Nevada Registry approval and the first presentation will be held at the end of the month. Jessica Woods, a new dental hygienist, has been hired for this project and is completing the onboarding process. She will be traveling with me to complete the dental assessments and will join me during the webinars.

The packets for each center, which include a welcome letter and parental consent forms, are being prepared for mailing. Will you be reviewing and signing the welcome letter as we did with the Head Start project? Please let me know, and I will provide you with a draft copy of the letters.

Thank you, Antonina

### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <poya@doe.nv.gov> Sent: Wednesday, July 22, 2020 11:10 AM To: Antonina Capurro <acapurro@health.nv.gov>; Antonina Capurro <antonina.capurro@unlv.edu> Cc: Ruth Lopez (ruth.lopez@unlv.edu) <ruth.lopez@unlv.edu> Subject: Amendment - Contract 22479

Hi, I have attached your fully executed amendment.

Please let me know if you have any questions.

Thanks, Patti

-----Original Message-----

From: doehelp@doe.nv.gov <doehelp@doe.nv.gov> Sent: Wednesday, July 22, 2020 11:13 AM

### To: Patti Oya <poya@doe.nv.gov> Subject: Message from "RNP002673B84926"

This E-mail was sent from "RNP002673B84926" (MP C6003).

Scan Date: 07.22.2020 11:12:45 (-0700) Queries to: doehelp@doe.nv.gov

### **Martha Framsted**

From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Monday, September 21, 2020 10:55 AM
То:	Antonina Capurro
Subject:	RE: Letters for review [no encryption]

Thanks for sending the final letter and flyer. Hope it the webinar goes well.

Patti

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Monday, September 21, 2020 10:53 AM To: Patti Oya <poya@doe.nv.gov> Subject: Re: Letters for review [no encryption]

Good Morning Patti,

I made a slight change to the description of the webinar on the letter and am sending that to you for review. Additionally, I created a flyer to promote the webinar. This will go into the envelope being mailed to each site. The letters are scheduled to be mailed today, but if changes are identified for either of the attached forms, I am happy to make those changes.

Thank you,

Antonina

### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Wednesday, September 16, 2020 1:07 PM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: RE: Letters for review [no encryption]

Hi, thanks for the information. I have attached the signed letter.

Patti

From: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Sent: Wednesday, September 16, 2020 9:47 AM

## DHHS\_000601

To: Patti Oya <<u>poya@doe.nv.gov</u>> Subject: Letters for review [no encryption]

Good Morning Patti,

Hope this email finds you well. Attached for your review and signature is the initial letter for the licensed childcare facilities.

All of the sites have received at least one call (some have had three calls), to assess their interest in participating in this project. The attached initial letter will be mailed to those centers that have agreed to participate and are part of the sample size.

Those sites will be called a week after the letter has been mailed to schedule the in-person visit. After that call, the consent forms, parent letter, and individual site letters with the date of their in-person visit will be mailed. I will provide you with a copy of those materials for signature later this week. With this plan, we are on track to complete the project planning period by the end of the month and begin the screenings in October.

Additionally, six live webinar sessions have been created and approved through Nevada Registry. The registration link is listed in the attached letter.

If there additional components that should be considered or any suggestions on the project plan, please let me know.

I look forward to hearing from you.

Best regards,

Antonina

### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Antonina Capurro
Sent: Tuesday, September 15, 2020 12:05 PM
To: jessicawoodsrdhap@gmail.com <jessicawoodsrdhap@gmail.com>; Jessica Woods <jessica.woods@unlv.edu>
Subject: Letters for review [no encryption]

Please review and edit.

### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

DHHS\_000603

STEVE SISOLAK Governor

RICHARD WHITLEY, MS



LISA SHERYCH Administrator

IHSAN AZZAM, Ph.D., M.D. Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH 4150 Technology Way Carson City, Nevada 89706 Telephone (775) 684-4200 • Fax (775) 687-7570 http://dpbh.nv.gov

#### Dear Licensed Childcare Facility Administrator,

The Nevada Division of Public and Behavioral Health (DPBH), Oral Health Program (OHP) has partnered with the Department of Education's Office of Early Learning and Development to assess children's oral health at licensed childcare centers across the state. Our goal is to increase the number of young children with dental "homes" and to decrease the number of children with untreated tooth decay. This information will help determine the extent of children's dental needs and allocate resources. But it all starts with dental screenings of students like yours.

DPBH,OHP is offering a dental screening to all children 3-5 years of age within identified licensed childcare facilities who provide parental consent. Parents can also consent to a fluoride varnish application for their child to strengthen teeth and reduce dental decay. This year, we will also be working with you to establish a toothbrushing station. Our team will conduct the oral health services from October 2020 – January 2021. All services are of no cost to you or your students.

Our team will call to schedule the screening at a time that is convenient for each site and mail the forms in advance for distribution (please see enclosed samples, which will also be available in Spanish). The screening and application of fluoride varnish will be conducted by a licensed dental professional who will follow all current infection control protocols and wear proper personal protective equipment(PPE). The process should take about two minutes per child. Each participating classroom within an individual childcare center will receive a grade-level appropriate, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening. Supplies for the in-classroom toothbrushing station will also be provided. Following the screening, children will receive a toothbrush, toothpaste, floss, written take-home findings for the parents, and contact information of dental providers where treatment can be rendered for issues identified during the screening.

We are pleased to offer a webinar as part of the 2020 Nevada Licensed Childcare Oral Health Survey which has been approved by the Nevada Registry. While the screening targets 3-5-year olds, this webinar is for <u>all</u> educators, staff, and administrators of licensed childcare facilities. This training will provide a working understanding of the landscape of dental disease in Nevada children, the etiology of tooth decay and prevention strategies, the relationship between nutrition and oral health, and tips to implement a classroom tooth brushing program. We ask that you and your team register for this free virtual 2.5-hour webinar prior to your screening date. Multiple dates and times are available. The registration page can be found here: <u>https://tinyurl.com/y3l27u72</u> Also included is a flyer on this webinar.



Nevada Department of Health and Human Services DIVISION OF PUBLIC AND BEHAVIORAL HEALTH Helping People --It's Who We Are And What We Do

DHHS\_000604

# 2020 Nevada Licensed Childcare Oral Health Webinar

Presented by the Nevada Division of Public and Behavioral Health, Oral Health Program through a grant with the Department of Education's Office of Early Learning and Development and in collaboration with Colgate.



This free virtual 2.5 hour webinar has been approved by the Nevada Registry and is for educators, staff, and administrators of licensed childcare facilities.

During this virtual training we will be discussing:

- Dental disease in children
- Oral health and hygiene
- Strategies to implement a classroom toothbrushing program
- First aid for pediatric dental trauma
- The relationship between nutrition and oral health

# We ask that you and your team register for this webinar prior to your screening date.

This webinar is offered several times. Select the date/time that is most convenient to you.

Pre-registration is required.

Every registered participant will receive a:

- Certificate of completion and
- FREE whitening toothbrush kit

## Register here: https://tinyurl.com/y3l27u72



Email Jessica Woods at jwoods@health.nv.gov with any registration questions.

DHHS\_000605

### **Martha Framsted**

From:	Loretta Moses <loretta.moses@unlv.edu></loretta.moses@unlv.edu>
Sent:	Wednesday, September 23, 2020 10:04 AM
То:	Antonina Capurro
Cc:	Jessica Woods
Subject:	Re: Licensed Childcare [no encryption]

Received. Thank you. I will review and let you know if I have any questions.

Lo

On Tue, Sep 22, 2020 at 5:59 PM Antonina Capurro <<u>acapurro@health.nv.gov</u>> wrote: Hello,

Attached are two important documents for the licensed childcare project. The first is the original budget that was part of the proposal to win the grant and the second is the amended contract between NDE and UNLV.

The original proposal has a tentative travel schedule which we can now adjust based on feedback from the letters mailed today.

Please let me know if you have any questions or would like any other information. Thank you,

### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

Loretta Moses Project Manager, Office of Faculty Affairs UNLV School of Medicine 702-895-0497 Loretta.Moses@unlv.edu

×

## Budget Estimate for Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada - 2019

Category	<b>Details of Category</b>	Detailed Cost	Total Cost
Personnel	Screener 1/Webinar Creator/Educator	\$83.94/hour (\$33,576 paid for by DPBH, Oral Health Program)	n/a
	Screener 2/Webinar Creator/Educator	\$49.67/hour (19,888 paid for by DPBH, Oral Health Program)	n/a
	Administrative Assistant (AA)	\$20.00/hour	\$8,800.00
	Biostatistician	\$150.00/hour	\$6,000.00
Travel	Trip One		\$6,866.79
	Trip Two		\$2,989.58
	Trip Three		\$213.77
	Trip Four		\$217.19
Supplies	Disposable	\$2.64 x 450	\$1,188.00
<u>, 1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,</u>	Oral Hygiene Supplies (Child)	\$5.84 x 450	\$2,628.00
	Oral Hygiene Supplies (Adult)	\$4.62 x 250	\$1,155.00
	Misc. Supplies		\$5,702.00
TOTAL			\$35,760.33

# (ITEMIZED) Budget Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada 2019

## **Supplies**

*Disposable Supplies*: on a per child basis

Item	Comment	Unit	<b>Unit</b> Cost	Cost/Child
Gloves	Necessary	_150/box	\$13.52	\$.18-
Disposable Mirrors	Necessary	200/box	\$35.12	\$.18
Tray Covers	Necessary	1500/package	\$28.11	\$.02
Gauze	Necessary	200/package	\$2.65	\$.01
Fluoride Varnish	Necessary	70/box	\$122.50	\$1.75
Shipping/handling/tax	Necessary			\$.50
TOTAL COST PER CHILD				\$2.64

### Oral Hygiene supplies: on a per child basis

Item	Comment	Unit	Unit	Cost/Child
			Cost	
Toothbrush/Toothpaste/Floss Bundle 3-5 years/Toy	Good Idea	72/box	\$60.48	\$.84
Story or Disney Princess				
2 Minute Timer	Good Idea	72/box	\$37.39	\$.52
Goody bags	Good idea	144/box	\$17.99	\$.12
Toothbrush Capacity UV Toothbrush Sanitizer	Good Idea	1 unit hold 20	\$70.00	\$3.50
		toothbrushes		
Toothbrush for center usage	Good Idea	144/box	\$43.19	\$.30
1 Large Toothpaste tube/per center	Good Idea	24/box	\$30.96	\$.06
Shipping/handling/tax	Necessary			\$.50
TOTAL COST PER CHILD				\$5.84

### Oral Hygiene Supplies: on a per adult basis

Item	Comment	Unit	Unit Cost	Cost/Adult
Adult Toothbrush/Toothpaste/Floss Bundle	Good Idea	72/box	\$60.48	\$.84
Opalescent Teeth Whitening Tray (one time use)	Good Idea	20/box	\$65.61	\$3.28
Shipping/handling/tax	Necessary			\$.50
TOTAL COST PER ADULT				\$4.62

### **Misc Supplies**

Item	Comment	Cost/Box	Cost	
Antiseptic Hand Wash	Necessary	\$9.00/box		\$27.00
L	1		DHHS	000608

Penlights	Necessary	\$14.00/2 in box	\$14.00
Antiseptic Wipes	Necessary	\$8.00/160 per box	\$16.00
Supply Tub	Necessary	\$10.00 each	\$20.00
Garbage Bags	Necessary	\$10.00 each	\$10.00
Postage/Brochures/printing	Necessary	\$50/center	\$1500.00
Misc. Office Supplies	Necessary		\$300.00
Gift Cards from Lakeshore	Necessary	\$100 each	\$2800.00
Zoom (webinar platform)	Necessary	Pro Platform (one year)	\$600.00
Survey Monkey	Necessary	Advantage (one year)	\$415.00
TOTAL COST			\$5702.00

### Personnel

<u>Administrative assistant:</u> Responsible for survey coordination, ordering supplies, arranging travel, printing, child care center coordination and data entry. Bi-lingual preferred.

<u>Biostatistician</u>: Responsible for the development of data entry program, data analysis including creation of data tables, data brief and consultant report. Design the sample, including the determination of sampling frame and potential stratifications or sampling strata.

<u>Two (2) Screeners:</u> Screenings will be performed by the State Dental Officer, a NV licensed dentist and the State Public Health Dental Hygienist, a licensed NV dental hygienist. Salaries for these two positions will be covered by the Oral Health Program.

Personnel	Hours	Total
Administrative	440 hours x \$20.00/hour (paid by	\$8,800.00
Assistant	project)	
Biostatistician	40 hours x \$150.00/hour	\$6,000.00
ASTDD		
Screener 1 (dentist)	400 hours x \$83.94/hour	\$33,576.00 (paid for by the Oral Health
		Program)
Screener 2 (hygienist)	400 hours x \$49.67/hour	\$19,868.00 (paid for by the Oral Health
		Program)
Total		\$14,800.00
Total	<u> </u>	\$14,800

### Travel

Four (4) separate trips will be needed to complete the BSS project which will include two (2) screeners and one (1) administrative assistant/scribe.

Trip 1: Tentative Schedule – \*Costs are based upon latest GSA rates

Day 1- Monday- Leave Las Vegas- drive to White Pine - screen 1 center - spend night in Ely

Motorpool Vehicle (\$33.00 + \$.19 per mile) (263 miles)	Meals per diem x 3 people (\$55.00/day - gsa rate)	Lodging per diem x 3 people (\$94.00- gsa rate)	Additional Fees/Tax per diem x 3 people (\$16.20 – gsa rate)	Incidentals per diem x 3 people (\$5.00 – gsa rate)	Total Cost
\$82.97	\$165.00	\$282.00	\$48.60	\$15.00	\$593.57

Day 2 – Tuesday- White Pine County – screen 1 centers– Drive to Elko County – spend night in Elko
---

Motorpool Vehicle (\$33.00 + \$.19 per mile) (199 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$70.81	\$165.00	\$282.00	\$48.60	\$15.00	\$581.41

Day 3 - Wednesday - Elko County - screen 2 centers - spend night in Elko

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per <b>mile</b> ) (20 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$36.80	\$165.00	\$282.00	\$48.60	\$15.00	\$547.40

Day 4 - Thursday - Elko County - screen 2 centers - Drive to Lander County - spend night in Battle Mountain

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per <b>mile</b> ) (91miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$50.29	\$165.00	\$282	\$48.60	\$15.00	\$560.89

Day 5 - Friday - Lander County - screen 2 centers - spend night in Battle Mountain

Motorpool Vehicle (\$33.00 + \$.19 per mile) (20 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00) DHHS 0006	Total Cost
---	--	--	---	---	---------------

**Day 6** – Saturday - <u>Lander County – centers closed – spend night in Battle Mountain \* possible health</u> <u>fair/screening/outreach to justify expense</u>

Motorpool Vehicle (\$33.00 + \$.19 per mile) (20 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$36.80	\$165.00	\$282.00	\$48.60	\$15.00	\$547.40

Day 7 - Sunday - Lander County - centers closed - drive to Humboldt County - spend night in Winnemucca

Motorpool Vehicle (\$33.00 + \$.19 per mile) (74 miles)	<ul> <li>Meals per diem</li> <li>x 3 people</li> <li>(\$55.00/day)</li> </ul>	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$47.	06 \$165.00	\$282.00	\$48.60	\$15.00	\$557.66

Day 8 - Monday - Humboldt County - screen 2 centers - drive to Pershing County - spend night in Lovelock

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per <b>mile</b> ) (94 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$50.86	\$165.00	\$282.00	\$48.60	\$15.00	\$561.46

Day 9 - Tuesday - Pershing County - screen 1 center - drive to Churchill County - spend night in Fallon

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per <b>mile</b> ) (76 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$47.44	\$165.00	\$282	\$48.60	\$15.00	\$558.04

Day 10 – Wednesday – <u>Churchill County - screen 2 centers – drive to Carson City County – spend night in</u> Carson City

Motorpool Vehicle (\$33.00 + \$.19 per mile) (82 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$48.58	\$165.00	\$282	\$48.60	\$15.00	\$559.18

DHHS\_000611

Day 11 – Thursday – Carson City County – screen 3 centers – spend the night in Carson City

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per <b>mile</b> ) (20 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00)	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$36.80	\$165.00	\$282.00	\$48.60	\$15.00	\$547.40

Day 12 - Friday - Drive to Storey County - screen 2 centers - Drive to Reno

	<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per <b>mile</b> ) (76 miles)	Meals per -diem x 3 people (\$55.00/day)	Lodging per diem x-3 people (\$94.00) Battle Mountain	Additional Fees/Tax-per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
ł	\$47.44	\$165.00	\$0	\$48.60	\$15.00	\$276.04

Day 12 – Friday night – Fly from Reno to Las Vegas

Adult One Way x 3 (Southwest – Wanna Get Away) – approx.	Taxes + Fees - approximate	Total
\$359.10	\$69.84	\$428.94

# Trip 2 – Tentative Schedule

**Day 1** – Monday <u>Fly to Reno from Las Vegas– Drive to Douglas County- screen 1 center (if possible) - spend</u> the night in Minden

Adult x 3 (Southwest – Wanna Get Away) – approx.	Taxes + Fees - approximate	Total
\$359.10	\$69.84	\$428.94

Day 1

 Motorpool Vehicle (\$33.00 + \$.19 per mile) (70 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00) Minden	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$46.30	\$165.00	\$282.00	\$48.60	\$15.00	\$556.90

Day 2 – Tuesday Douglas County- screen 1-2 center(s) – Drive to Lyon County - spend night in Fernley

Motorpool Vehicle (\$33.00 + \$.19 per mile) (85 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00) Minden	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$49.15	\$165.00	\$282.00	\$48.60	\$15.00	\$559.75

Day 3 – Wednesday – <u>Lyon County – screen 2 centers – Drive to Mineral County – spend the night in</u> <u>Hawthorne</u>

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per <b>mile</b> ) (141 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00) Minden	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$59.79	\$165.00	\$282.00	\$48.60	\$15.00	\$570.39

Day 4 - Thursday - Mineral County - screen 1 center - Drive to Nye County - spend night in Tonopah

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per mile) (129 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00) Minden	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$57.51	\$165.00	\$282.00	\$48.60	\$15.00	\$568.11

Day 5 - Friday - <u>Nye County - screen 2 centers - Drive to Las Vegas</u>

<b>Motorpool Vehicle</b> (\$33.00 + \$.19 per mile) (231 miles)	Meals per diem x 3 people (\$55.00/day)	Lodging per diem x 3 people (\$94.00) Minden	Additional Fees/Tax per diem x 3 people (\$16.20)	Incidentals per diem x 3 people (\$5.00)	Total Cost
\$76.89	\$165.00	\$.0	\$48.60	\$15.00	\$305.49

# **Trip 3** – Tentative schedule

Day 1 – Drive from Las Vegas to Nye County – screen 2 centers in Pahrump, NV – drive back to Las Vegas

Motorpool Vehicle (\$33.00 + \$.19 per mile)	Meals per diem	Total
83 miles)	x 3 people (\$55.00/day)	
\$48.77	\$165.00	\$213.77

## Trip 4 – Tentative schedule

Day 1 – Drive from Las Vegas to Mesquite – screen 1 center – drive back to Las Vegas

Motorpool Vehicle (\$33.00 + \$.19 per mile)	Meals per diem	Total
(101 miles)	x 3 people (\$55.00/day)	
\$52.19	\$165.00	\$217.19

# CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

1.	DE	ESCRIPTION OF	CONTRACT					
	1.	Contract Number:	22479		Amendment Number:	1		
					Legal Entity Name:	BOARD OF R	REGENTS-UNL	V
		Agency Name:	NDE - DEPARTMENT ( EDUCATION	OF	Contractor Name:	BOARD OF F	REGENTS-UNL	V
		Agency Code:	300	•	Address:	SCHOOL OF	DENTAL MED	ICINE
		Appropriation Unit:	2709-21			1001 SHADO	WLN	
		Is budget authority available?:	Yes		Clty/State/Zip	LAS VEGAS,	NV 89106	
		If "No" please expla	ain: Not Applicable		Contact/Phone: Vendor No.:	Dr. Antonina ( D35000824	Capurro 702/77	4-2573
			. <b>.</b>		NV Business ID:	N/A		
		To what State Fisca	al Year(s) will the contrac	t be charged?	2020-2021			
		What is the source	of funds that will be used be paid by multiple fundin	i to pay the contrac		rcentage of eac	h funding sourc	ce lf
		General Fu	• • •	Fees	0.00 %			
		X Federal Fur		Bonds	0.00 %			
		Highway Fu	and the second	Other funding	0.00 %			
		Agency Reference		Ũ				
	2.	Contract start date:						
		a. Effective upon E Examiner's appr		b. other effective c	late 12/17/2019			. –
		Anticipated BC	DE meeting date no	ull/null				
		Retroactive?	No					
	1	If "Yes", please exp	lain					
		Not Applicable	· · · ·		×			
	3.	Previously Approve Termination Date:	d 03/31/2021					
		Contract term:	1 year and 104 d	ays				
	4.	Type of contract:	Interlocal Agree	ment				
		Contract description	n: Trng, Dental & E	vals				
	5.	Purpose of contract						
		This is the first an to children in rura facilities to provid Scope of Work du	nendment to the interlo I child care facilities. A e an evaluation of the p e to the closure of child ostponed. As child care	dditionally, a surv project. This amen Icare centers durl	ey will be administ idment is to change ing the Covid-19 pa	ered to all par e the timeline indemic which	ticipating child of activities lis also caused a	ted in the
	6.	CONTRACT AMEN	IDMENT	<b>—</b> •	I C- A	un t	ofice Agente A	Aaanda
			مرابعة مرافلهم وبالماسما	Trans \$	and the second	the second s	ction Accum \$ \$35,760.00	Agenda Yes - Info
		contract:	ount of the original	\$35,760.00				
		(#1):	urrent amendment	\$0.00		0.00	\$35,760.00	No
		3. New maximu amount:	im contract	\$35,760.00				

#### **II. JUSTIFICATION**

7. What conditions require that this work be done?

This work is included in the State Child Care Plan that has been submitted as a requirement of the Child Care and Development Fund (CCDF).

8	Explain why State employees in w	our agency or other State a	gencies are not able to do this work:
			n these duties and the UNLV School of Dental Medicine is a
9.	Were quotes or proposals solicited	1?	No
	Was the solicitation (RFP) done by Division?	/ the Purchasing	No
	a. List the names of vendors that v	vere solicited to submit pro	posals (include at least three):
	Not Applicable		
	b. Soliciation Waiver: Not Applica		a and a second
	c. Why was this contractor chosen		
		he agency has contracted Anticipated re-bid	with the Board of Regents, University of Nevada, Las Vegas.
40	d. Last bld date: Does the contract contain any IT o	•	
	OTHER INFORMATION	omponentsz	
11.	Is there an Indirect Cost Rate or P	-	ractor? r Percentage Paid to the Contractor
	Yes If "Yes", please provi 10%	Je the maneet Cost Rate of	
12.		oyee of the State of Nevada	a or will the contracted services be performed by a current
		ployed by the State of Neva nployed by the State of Ne	ada within the last 24 months or will the contracted services be vada within the last 24 months?
	c. Is the contractor employed by an No If "Yes", please expla		divisions or by any other government?
	Not Applicable		
13.	Has the contractor ever been enga Yes If "Yes", specify wher agency has been ver	and for which agency and	State agency? indicate if the quality of service provided to the identified
	Education-satisfactory		
14.	Is the contractor currently involved No If "Yes", please provid		of Nevada? nd facts supporting approval of the contract:
	Not Applicable		
15.	The contractor is not registered wit Governmental Entity	h the Nevada Secretary of	State's Office because the legal entity is a:
16.	Not Applicable		
17.	Not Applicable		
	Not Applicable		
	Agency Field Contract Monitor:		
	Contract Status:		
	Contract Approvals: Approval Level Budget Account Approval	User bfarra2	Signature Date 07/07/2020 16:04:13 PM
	Division Approval	bfarra2	07/07/2020 16:04:17 PM
	Department Approval	bfarra2	07/07/2020 16:04:22 PM
	Contract Manager Approval	bfarra2	07/07/2020 16:04:29 PM
	Budget Analyst Approval	mranki1	07/13/2020 15:50:33 PM

CETS #:

Agency Reference #:

### AMENDMENT #1

### TO INTERLOCAL CONTRACT BETWEEN PUBLIC AGENCIES Between the State of Nevada Acting By and Through Its

Public Entity #1:	NDE Department of Education, Office of Early Learning and Development
Address:	2080 E Flamingo Road, Suite 210
City, State, Zip Code:	Las Vegas, NV 89119
Contact:	Patti Oya
Phone:	702-486-6492
Email:	poya@doe.nv.gov

Public Entity #2:	Board of Regents, NSHE on behalf of the University of Nevada, Las Vegas School of Dental Medicine
Address:	1001 Shadow Lane
City, State, Zip Code:	Las Vegas, NV 89106
Contact:	Dr Antonina Capurro
Phone:	702-774-2573
Email:	acapurro@health.nv.gov

1. AMENDMENTS. For and in consideration of mutual promises and other valuable consideration, all provisions of the original Contract dated 12/17/2019, attached hereto as Exhibit A, remain in full force and effect with the exception of the following:

This amendment #1 to the original contract is to revise the dates within the scope of work but does not change the activities or funding amount. The primary activity of this contract is to provide dental screenings and classroom education for childcare centers in rural Nevada. Due to the closure of childcare centers during the Covid-19 pandemic, all travel and visits were postponed. As childcare centers are now beginning to slowly reopen, visits will be rescheduled for Oct-Dec 2020.

#### Current Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

#### ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT BB: DATA SHARING AGREEMENT

#### Amended Contract Language:

6. INCORPORATED DOCUMENTS. The parties agree that the services to be performed shall be specifically described; this Contract incorporates the following attachments in descending order of constructive precedence:

DHHS\_0006173

ATTACHMENT AA: SCOPE OF WORK AND BUDGET ATTACHMENT AB: REVISED SCOPE OF WORK ATTACHMENT BB: DATA SHARING AGREEMENT

CETS #:	
Agency Reference #:	

2. **INCORPORATED DOCUMENTS.** Exhibit A (original Contract) is attached hereto, incorporated by reference herein and made a part of this amended contract.

3. **REQUIRED APPROVAL**. This amendment to the original Contract shall not become effective until and unless approved by the Nevada State Board of Examiners.

CETS #:	
Agency Reference #:	

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

Board of Regents, Nevada System of Higher Education On Behalf of the University of Nevada, Las Vegas Public Agency #2 06/22/2020 Executive Director, Sponsored Programs Lori M. Ciccone, MBA, CRA Date Title Nevada Department of Education Public Agency #1 Deputy Superintendent, Business and Support Services, Nevada Department of Education Date Title State of Nevada Authorized Signature APPROVED BY BOARD OF EXAMINERS for Susan Brown Signature - Board of Examiners On: 07/13/20 Date

Approved as to form by:

Deputy Attorney General for Attorney General

On:

Date

	CETS #:		
1	Agency Reference #:	and the second se	

Page 3 of 3

0000Z0

תס

IN WITNESS WHEREOF, the parties hereto have caused this amendment to the original contract to be signed and intend to be legally bound thereby.

Board of Regents, Nevada System of Higher Education On Behalf of the University of Nevada, Las Vegas, Public Agency #2

Pontend Anmet 2010

ori M. Ciccone, MBA, CRA	06/22/2020 Date	<u>Executive Director, Spo</u> Title	
levada Department of			
ducation Public Agency #1			
		Deputy Superintendent, Bu	siness and Support
	en e	Services, Nevada Departr	nent of Education
ate of Nevada Authorized Signature	Date	Title	
		APPROVED BY BOARD OF EXA	
		ATTOVED BT DOARD OF BAA	CARENT CO
gnature Board of Examiners			
	· · · · · · · · · · · · · · · · · · ·	<del>.</del>	
		· •	
	_		
	On: -		· · · · · · · · · · · · · · · · · · ·
		Date	
proved as to form by outy Attorney General for Attorney General	On;	7/7/ZO Date	
oard of Regents, Nevada System of High In Behalf or the University of Nevada. La chool of Dental Medicine Public Agency# 2			
		Professor of Biomedical Sceinces	
David Cappelli, DMD, MPH, PhD	Date	Title	

### ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET June 23, 2020

Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicine

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada Team: Antonina Capurro DMD, MPH, MBA

> Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

Part 1A: Project Planning and Facility Education Timeline: December 16, 2019-June 30, 2020 Cost: \$5,702.00 + \$570.20 (10% Indirect) = \$6,272.20

#### Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability of licensed childcare facilities throughout rural Nevada (see script attached).
- Development of four, comparable, webinars to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Purchase orders for screening supplies except for out-of-stock PPE will be completed during this time frame.
- Hourly staff will be hired to assist in project implementation
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
    - o Developing of a data entry program

Part 1B: Project Planning and Facility Education Timeline: July 1, 2020-September 30, 2020 Cost: \$ 14,335.35 + \$1,433.54 (10% Indirect) = \$15,768.89

#### Scope of work

- Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Purchase orders for previously out-of-stock screening supplies including PPE will be completed during this time frame.
- Implementation of four, comparable, Nevada Registry approved webinars will be offered to
  provide an overview of the dental screening process and evidence based oral health
  education. These webinars will meet the standards set forth by the Department of Education's

1

Silver State Stars Quality Rating and Improvement System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.

- Webinar attendance is free of charge to participants. For those participants that complete the pre and post survey (pre provided with the registration link and post provided after the webinar), they will receive a "goody bag" containing adult oral hygiene supplies including a one-time use tooth whitening tray along with a certificate of attendance.
- All travel arrangements will be finalized during this time frame.

### Part 2: Dental Screening and Classroom Education Timeline: October 1, 2020-December 31, 2020 Cost: \$11,431.74+ 1,143.17 (10% Indirect) = \$12,574.91

#### Scope of work

- Each participating classroom within an individual childcare center will receive a grade-level appropriate, entertaining, oral health educational session to equip children with dental hygiene and nutritional information and to remove any apprehension about the dental screening.
- Only children with a positive parental consent form will be provided a dental screening and fluoride varnish application by Basic Screening Survey ASTDD trained and calibrated screeners. Each child will be assigned a treatment urgency code and those with a code of "Urgent" will be treated accordingly per the Nevada Policy for Urgent Dental Issues Identified during Community Screenings (see attached).
- Each participating classroom within an individual childcare center will receive:
  - A classroom UV toothbrush holder and associated supplies (toothbrushes, and toothpaste for each child),
    - o Instructions on how to incorporate a daily tooth brushing regimen into the classroom schedule.
    - A template of suggested language for inclusion into the facility's parent policies and procedures manuals.
- All children within each participating childcare center will receive oral hygiene supplies with age appropriate oral hygiene items for home care.
- Incentives will be offered for each participating childcare facility that reaches at least a 70% consent return rate in the form of a \$100 in educational learning materials (from educational companies i.e. Lakeshore Learning, Kaplan, or Discount School Supplies.)
- Travel will be taken during this time frame and motor pool and per diem charges will be incurred.
- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - o Selection of replacement schools/sites

Part 3: Technical Assistance with Evaluation Activities Timeline: October 1, 2020-March 31, 2021 Cost: \$1,040 +\$104 (10% Indirect) = \$1,144

Scope of Work

- A bio statistician hired from the ASTDD will provide technical assistance on this project. This aid will be in the form of:
  - Completing data analysis including creation of data tables, data brief and consultant report.
- A post dental screening survey will be mailed to all participating childcare facilities one month following completion of the screenings. This survey will provide data to measure compliance with the daily oral care regimen in the classrooms as well as overall reception to the project at large.

Direct Cost:	\$32,509
<b>Indirect Cost:</b>	\$3,251
Total Budget:	\$35,760

# **Martha Framsted**

From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Thursday, October 1, 2020 10:21 AM
То:	Antonina Capurro
Subject:	RE: Contract number 22479_Dental Screening and Oral Health Education

Thanks, I will get this submitted today.

Patti

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Thursday, October 01, 2020 10:10 AM To: Patti Oya <poya@doe.nv.gov> Subject: Re: Contract number 22479\_Dental Screening and Oral Health Education

Good Morning Patti,

Of course, let me provide you with an update.

To date, all welcome letters have been mailed to identified licensed childcare centers. (the letter and flyer you approved are attached). We are scheduling the first screenings for the end of October (Pahrump and Mesquite) and will be completing the Elko route the first week of November and the northwest and middle of the state the third week of November and first week of December.

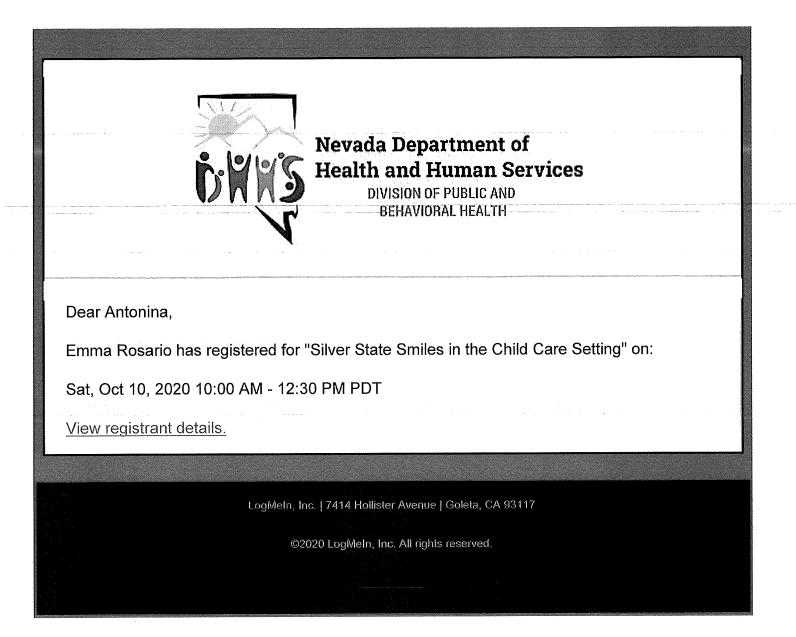
To date, the webinars have been approved by NV Registry(please see the registration form attached). Six webinar dates have been scheduled. Registrations are completed electronically (see below) and the NV Registry certificates and whitening toothbrush kit will be delivered to each site during the screenings following the webinar. The webinar ppt, pre and post survey, and handouts have been created.

The IRB form for the project has also been completed. The project is surveillance and should be exempt but I completed this process since the contract is being executed through the University. This also gives us the option to publish aggregate findings in the future.

During this period(July-September), the contract paid Loretta Moses who is an administrative assistant who joined the team, we purchased a go-to-webinar subscription for the webinars, and the Henry Schein invoice is attached. The Henry Schein invoice is shared between this contract and the Oral Health Program budget. This invoice reflects the whitening toothbrush bundles for educators, fluoride varnish, gowns, masks, and toothbrush bundles for children under 5 years old. Other materials were purchased in the last segment of the contract.

I anticipate that the next segment of the contract payment will reflect charges for travel that cannot be prepaid until the travel occurs and the payment for the part time administrative assistant.

If additional information is needed, please let me know. Thank you,



# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

To: Antonina Capurro <<u>acapurro@health.nv.gov</u>>

Subject: FW: Contract number 22479\_Dental Screening and Oral Health Education

Hi, hope you're doing well. Ruth has submitted the second RFF for Part 1B. Because this is a fixed price contract, can you send me any documentation that shows the work was completed? Maybe the invoices for PPE that were ordered, webinar details, or confirmation from the Registry?

Thanks, Patti

From: Ruth Lopez <<u>ruth.lopez@unlv.edu</u>>
Sent: Wednesday, September 30, 2020 9:45 AM
To: Patti Oya <<u>poya@doe.nv.gov</u>>
Cc: Francine Flores <<u>francine.flores@unlv.edu</u>>
Subject: Contract number 22479\_Dental Screening and Oral Health Education

Hi Patti,

Hope you're doing well.

Attached is our invoice for this fixed price contract for Part 1B for your review and approval.

Please let me know if you need anything else.

Best regards and be safe.

Ruth Lopez, CRA Financial Research Accountant

The Office of Sponsored Programs is continuing normal business operations, however we have transitioned to working remotely and have limited our onsite staff as of March 19<sup>th</sup>. During this time we have forwarded direct lines to be answered and all staff have email access. We remain committed to sponsored programs, while practicing social distancing to limit exposure and ensure the health and safety of the OSP staff. If you must visit us in person, please call 702-895-1357 before you arrive for access.

We appreciate your understanding as we may experience delays but please know that we are being as responsive as we can due to the high volume of questions and business needs.

PUBLIC RECORDS NOTICE: In accordance with NRS Chapter 239, this email and responses, unless otherwise made confidential by law, may be subject to the Nevada Public Records laws and may be disclosed to the public upon request.

A | University of Nevada, Las Vegas, 4505 South Maryland Parkway, Box 451055, Las Vegas, NV 89154-1055 P | (702) 895-

1150 E | ruth.lopez@unlv.edu W | https://www.unlv.edu/research



UNIV Office of SPONSC PROGRA	ORED AMS			•
UNIVERSITY OF NEVADA, LAS VEGAS				
INVOICE TO				00/00/00
-ATTN: PATTI OYA, DIRECTOR	Date			09/30/20
OFFICE OF EARLY LEARNING AND DEVELOPMENT DEPARTMENT OF EDUCATION 9890 S MARYLAND PKWY, SUITE 221	Invoice Num	ber _	C	1-02-00006192
LAS VEGAS, NV 89183	Account Nun	nber _	A۷	VD-02-00001313
Contract/Grant/Agreement/Purchase Order			Period	Billed
Contract # 22479	-	07/01/00	τ.	00100/00
PI: Antonina Capurro	From	07/01/20	То	09/30/20
Dental Screening and Oral Health Education for Child (	Care Centers in R	ural Nevad	a	
Fixed Price Agreement				
	Current			Cumulative
Part 1A: Project Planning and Facility Education	Expense \$ -			Expense \$ 6,272.20
Part 1B: Project Planning and Facility Education	\$ 15,768.89			\$15,768.89
Part 2: Dental Screening and Dental Education				
	\$ 15,768.89			\$22,041.09
PAY THIS AMOUNT	\$ 15,768.89			
"By signing this report, I certify to the best of my kno accurate, and the expenditures, disbursements and cash terms and conditions of the Federal award. I am aware omission of any material fact, may subject the university statements, false claims or otherwise. (U.S. Code Title 1: 38	receipts are for th that any false, fic to criminal, civil c	e purposes titious, or fr or administr	and obje audulent ative per	ectives set forth in the t information, or the nalties for fraud, false
Futh hote				09/30/20
Ruth Lopez , Financial Research Accountant	(702	) 895-1357		DATE
Make check payable to: Board of Regents	Mail check to:	University	of Nevad	a, Las Vegas
		Office of S	ponsored	d Programs
* Please return invoice copy with check *		•		kway - Box 451055 a 89154-1055

ľ

DHHS\_000627

### ATTACHMENT AB: REVISED SCOPE OF WORK AND BUDGET June 23, 2020

Nevada System of Higher Education (NSHE), University of Nevada, Las Vegas (UNLV), School of Dental Medicino

Dental Screening and Oral Health Education for Child Care Centers in Rural Nevada Team: Antonina Capuro DMD, MPH, MBA

Dental Hygienist TBD Phone: 702-774-4566 Fax: 702-774-2651

Part 1A: Project Planning and Facility Education Timcline: December 16, 2019-June 30, 2020 Cost: \$5,702.00 + \$570.20 (10% Indirect) = \$6,272.20

#### Scope of work

- Preliminary information will be gathered to determine child enrollment status and availability
  of licensed childcare facilities throughout rural Nevada (see script attached).
- Development of four, comparable, webinars to provide an overview of the dental screening
  process and evidence based oral health education. These webinars will meet the standards set
  forth by the Department of Education's Silver State Stars Quality Rating and Improvement
  System (QRIS). Content mastered will be evaluated through the use of pre and post surveys.
- Purchase orders for screening supplies except for out-of-stock PPE will be completed during this time frame.
- Hourly staff will be hired to assist in project implementation
- A bio statistician hired from the Association of State and Territorial Dental Directors (ASTDD) will provide technical assistance on this project. This aid will be in the form of:
  - Creating a study design, including the determination of sampling frame and potential stratification's or sampling strata, and
  - o Developing of a data entry program

Part 1B: Project Planning and Facility Education Timeline: July 1, 2020-September 30, 2020 Cost: \$ 14,335.35 + \$1,433.54 (10% Indirect) = \$15,768.89

Scope of work

- Each facility will then be mailed the details of the project with a registration link for the educational webinar. It is estimated that dental screenings will be provided for at least four hundred children in twenty-eight child care facilities and an oral health educational opportunity will be offered to all teachers, staff, and administrators within the child care facility.
- Purchase orders for previously out-of-stock screening supplies including PPR will be completed during this time frame.
- Implementation of four, comparable, Nevada Registry approved webinars will be offered to provide an overview of the dental screening process and evidence based oral health education. These webinars will meet the standards set forth by the Department of Education's

1/1

# **Martha Framsted**

From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Thursday, October 15, 2020 7:16 PM
To:	Antonina Capurro
Subject:	RE: Contract number 22479_Dental Screening and Oral Health Education [no encryption]

Hi, thanks for the update. That's great that you had such good attendance for your webinars! Not sure my schedule will allow, but if possible, I would love to visit Mesquite or Pahrump.

Thanks, Patti

From: Antonina Capurro <acapurro@health.nv.gov> Sent: Thursday, October 15, 2020 5:06 PM To: Patti Oya <poya@doe.nv.gov> Subject: Re: Contract number 22479\_Dental Screening and Oral Health Education [no encryption]

### Good Afternoon Patti,

Hope your week is going well. I wanted to provide you with a quick update on the licensed childcare project since we are transitioning into the in-person portion. The oral health educational webinars have been completed. 53 childcare educators registered and 46 attended 1 of the 6- 2.5 hour sessions (10.9 to 10.13). The webinar sessions have been recorded and can be used for future educational offerings. Please let me know if you would like a copy of the video. The pdf of the ppt will be included in the final report but can also be provided for your records.

In addition, the centers will be mailed the consent forms tomorrow (attached). We are scheduling screenings for the first week of November and depending on the weather and holidays will screen throughout December as well. When we visit the Mesquite and Pahrump sites would you like to come with us? I remember you mentioned that before but am not sure if this might have changed due to COVID.

Best regards, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poya@doe.nv.gov</u>> Sent: Thursday, October 1, 2020 10:21 AM

### **To:** Antonina Capurro <<u>acapurro@health.nv.gov</u>> **Subject:** RE: Contract number 22479\_Dental Screening and Oral Health Education

Thanks, I will get this submitted today.

Patti

From: Antonina Capurro <a column capacity according to the second stress of the seco

Good Morning Patti,

Of course, let me provide you with an update.

To date, all welcome letters have been mailed to identified licensed childcare centers. (the letter and flyer you approved are attached). We are scheduling the first screenings for the end of October (Pahrump and Mesquite) and will be completing the Elko route the first week of November and the northwest and middle of the state the third week of November and first week of December.

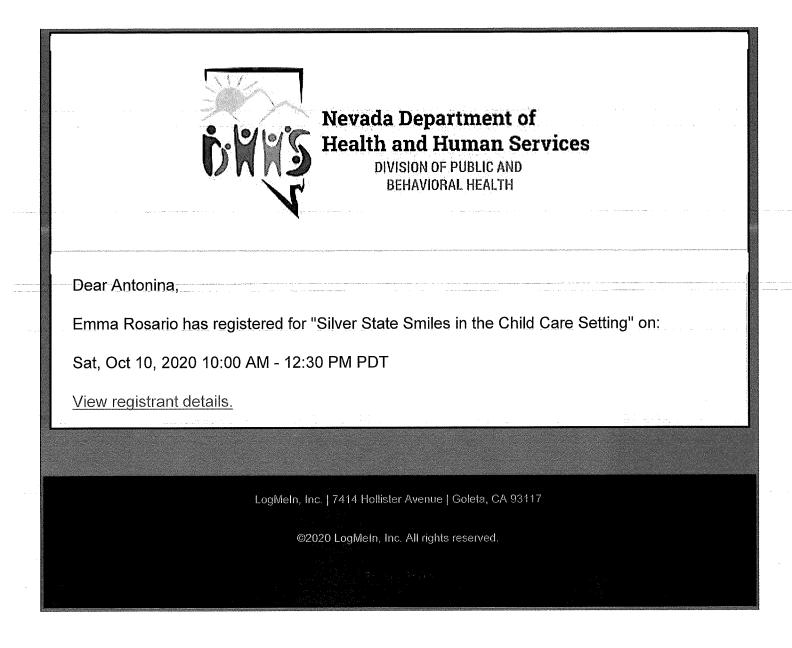
To date, the webinars have been approved by NV Registry(please see the registration form attached). Six webinar dates have been scheduled. Registrations are completed electronically (see below) and the NV Registry certificates and whitening toothbrush kit will be delivered to each site during the screenings following the webinar. The webinar ppt, pre and post survey, and handouts have been created.

The IRB form for the project has also been completed. The project is surveillance and should be exempt but I completed this process since the contract is being executed through the University. This also gives us the option to publish aggregate findings in the future.

During this period(July-September), the contract paid Loretta Moses who is an administrative assistant who joined the team, we purchased a go-to-webinar subscription for the webinars, and the Henry Schein invoice is attached. The Henry Schein invoice is shared between this contract and the Oral Health Program budget. This invoice reflects the whitening toothbrush bundles for educators, fluoride varnish, gowns, masks, and toothbrush bundles for children under 5 years old. Other materials were purchased in the last segment of the contract.

I anticipate that the next segment of the contract payment will reflect charges for travel that cannot be prepaid until the travel occurs and the payment for the part time administrative assistant.

If additional information is needed, please let me know. Thank you, Antonina



# Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Patti Oya <<u>poγa@doe.nv.gov</u>> Sent: Thursday, October 1, 2020 8:54 AM To: Antonina Capurro <<u>acapurro@health.nv.gov</u>> Subject: FW: Contract number 22479\_Dental Screening and Oral Health Education

Hi, hope you're doing well. Ruth has submitted the second RFF for Part 1B. Because this is a fixed price contract, can you send me any documentation that shows the work was completed? Maybe the invoices for PPE that were ordered, webinar details, or confirmation from the Registry?

Thanks, Patti

From: Ruth Lopez <<u>ruth.lopez@unlv.edu</u>>
Sent: Wednesday, September 30, 2020 9:45 AM
To: Patti Oya <<u>poya@doe.nv.gov</u>>
Cc: Francine Flores <<u>francine.flores@unlv.edu</u>>
Subject: Contract number 22479\_Dental Screening and Oral Health Education

Hi Patti,

Hope you're doing well.

Attached is our invoice for this fixed price contract for Part 1B for your review and approval.

Please let me know if you need anything else.

Best regards and be safe.

Ruth Lopez, CRA Financial Research Accountant

The Office of Sponsored Programs is continuing normal business operations, however we have transitioned to working remotely and have limited our onsite staff as of March 19<sup>th</sup>. During this time we have forwarded direct lines to be answered and all staff have email access. We remain committed to sponsored programs, while practicing social distancing to limit exposure and ensure the health and safety of the OSP staff. If you must visit us in person, please call 702-895-1357 before you arrive for access.

We appreciate your understanding as we may experience delays but please know that we are being as responsive as we can due to the high volume of questions and business needs.

PUBLIC RECORDS NOTICE: In accordance with NRS Chapter 239, this email and responses, unless otherwise made confidential by law, may be subject to the Nevada Public Records laws and may be disclosed to the public upon request.

A | University of Nevada, Las Vegas, 4505 South Maryland Parkway, Box 451055, Las Vegas, NV 89154-1055 P | (702) 895-

1150 E | ruth.lopez@univ.edu W | https://www.univ.edu/research





Vevada Real

October 12, 2020

Dear Parent:

The 2020 Nevada Licensed Childcare Oral Health Survey is about to take place! The State dentist and dental hygienist will be screening children across Nevada to help learn about children's oral health. A healthy mouth is an important part of total wellbeing, and helps a child be ready to learn. Combined results of dental screenings at licensed childcare facilities will help us identify community needs so that we can plan dental programs for Nevada's children. For this reason, your participation is important! We hope that you will allow your child to participate in the screening even if s/he already visits a dentist.

With your consent, a dentist or dental hygienist will look at your child's teeth using a small mouth mirror and a light. We will send a report home to you that describe any findings, along with a list of dental providers in your area. Please note that this screening does <u>not</u> take the place of a complete dental exam.

In addition, your child can also have a thin coat of fluoride varnish painted on the teeth with a tiny brush. Fluoride varnish helps prevent new cavities, and it can help stop some cavities that have just started (please read the enclosed brochure). The fluoride varnish is sticky and if a child finds it uncomfortable on their teeth, the thin film of fluoride varnish can be removed immediately with a toothbrush and floss, and then by rinsing with and spitting out warm water.

The screening and fluoride varnish application take only about two minutes, and they are completely free. These services are voluntary and your child can leave at any time. Every child who participates will receive a free toothbrush, floss, and toothpaste. All information will be kept confidential, and your child's name will NOT be used in any reporting.

If you want your child to participate in either or both of the services, then you must sign the attached Consent Form— we cannot see any child without consent signed by the parent. It would be helpful if you would return the form even if your child does not participate. Please return the form to your child's teacher as soon as possible, so that we can plan for our visit.

For questions, please call the Nevada State Dental Health Officer, Dr. Antonina Capurro, at (702) 774-2573. Thank you for your attention in this important matter.

Respectfully,

Patti Oya Director, Office of Early Learning and Development

Optown Copins

Antonina Capurro, DMD, MPH, MBA State Dental Health Officer, Division of Public and Behavioral Health



Jessica Woods, RDH, MPH Interim State Dental Hygienist, Division of Public and Behavioral Health

STEVE SISOLAK Governor

RICHARD WHITLEY, MS Director



LISA SHERYCH Administrator

IHSAN AZZAM, Ph.D., M.D. Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC AND BEHAVIORAL HEALTH 4150 Technology Way Carson City, Nevada 89706 Telephone (775) 684-4200 • Fax (775) 687-7570 http://dpbh.nv.gov

Dear Licensed Childcare Facility Administrator,

The Nevada Division of Public and Behavioral Health (DPBH), Oral Health Program (OHP) is looking forward to our visit to your facility. As a reminder, we have partnered with the Department of Education's Office of Early Learning and Development to assess children's oral health at licensed childcare centers across the state. Our goal is to increase the number of young children with dental "homes" and to decrease the number of children with untreated tooth decay. DPBH,OHP is offering a dental screening to all children 3-5 years of age within identified licensed childcare facilities who provide parental consent. This year, we will also be working with you to establish a toothbrushing station. All services are of no cost to you or your students.

Some time in mid-October, please expect to receive an email confirming a site visit date. Before the visit to your site, the following items should be completed.

- Please have the parent/guardian completely fill out the permission form (Consent with Family Demographics) that are included in this packet. The forms are in English and Spanish. All offered dental services are for all students regardless of dental insurance coverage.
- Any parent that <u>does not</u> wish for their child to have the Dental Visual Exam performed, *PLEASE* have the parent complete the permission slip form and check "No, I do not want my child to have either of the services mentioned above" on the permission slip form.
- You are vital to encouraging completion of parental permission forms and ensuring that forms are returned in a timely manner. Each participating facility that reaches a **70% permission form return rate** will receive a **\$100 gift card to Lakeshore Learning**. The percentage of completed permission forms will be associated with forms that have a parental signature regardless of whether or not the parent accepts or denies the child's participation in the dental screening. Gift cards will either be distributed on the day of the screening or will be mailed to site coordinators after the screening date.



Nevada Department of Helping People --Health and Human Servit'ssWho We Are And What We De Division of Public and BEHAVIORAL REALTH March 7, 2021 Page 2

- Please make sure parents are aware they must fill out the permission form (Consent with Family Demographics) to have their child receive the Free Dental Kit. Encourage parents to do so that way no child in the class is without one. Kids all want to participate for a Goodie Bag
- The enclosed **self-adhesive colored wristbands** can be used as a reminder for children and parents that a consent form has gone home for signature.
- On the day of the dental screening, we will visit the classrooms to provide a brief oral health presentation. We will work with you to ensure your students are ready at **your scheduled time** for the presentation and dental screening.
- Please have the permission forms (Consent with Family Demographics) completed and ready for Hygienist upon his/her arrival into your classroom. Please make sure that parent has **completely** filled out and signed the forms.
- The Hygienist will leave a **Take-home Findings** form and **oral hygiene kit** for you to give to the parents with their child's results of the Dental Visual Exam.
- Your center's participation is very important even if the children regularly visit a dentist. Your site may be representative of a geographic section of Nevada that may not otherwise be characterized.

**THANK YOU** for all your help during this process. It is a great experience and provides a needed service for Nevada's children. It is a day to learn about oral health and have fun! We could not do this without your help!

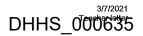
Respectfully,

Optown Copins

Antonina Capurro, DMD, MPH, MBA State Dental Health Officer, Division of Public and Behavioral Health

Jessica Woods, RDH, MPH Interim State Dental Hygienist, Division of Public and Behavioral Health

Nevada Oral Health Program Saving Nevada Smiles, One Tooth at a Time http://dpbh.nv.gov/Programs/OH/OH-Home/



	Nevada Licensed Childcare	For office use only:
Nevada Department of		Screening Date
THE Health and Human Services DIVISION OF PUBLIC AND BEHAVIORAL NEALTH	Oral Health Survey	Center Name
N	Nevada 2020 Consent Form	Record #
Wevada Ready.	<b>Please Note:</b> Your child's name will NOT be use for recording grant data.	ed in tracking data. The Record # will be used
Please answer the following que	estions about your child. Complete a separate	e form for each child.
1. Child's Name (print)		
2. Child's Birth Date/	/ 3. Name of Child's Dentist	or 🗌 None
4. Gender 🗌 Male	Female	
Does your child have any o Y N Asthma Y N Allergy to pine nuts Y N Any other allergies Y N Any medical condit Y N Taking any medicat Y N Takes fluoride table	(list) ion (list)	r no for each question)
r in Anuonue variisiru	reatment within the last three months	
	Parental Permission for Ser	vices
	t mark "Yes", SIGN, and return this slip if you No services can be provided without markin	want your child to be screened and/or
a full dental exam, and may be shared with the	<b>r my child to have a dental screening. I under</b> that my child should still go to a dentist. <b>I un</b> Nevada Department of Health and Human S n, and with dental providers for my child.	derstand that the results of this screening
Yes, I give permission for	my child to have a fluoride varnish application	on.
🔲 No, I do not want my chi	ld to have either of the services mentioned al	bove.
	x	
	Signature of Parent	:/Legal Guardian Date
······		· · · · · · · · · · · · · · ·
The following information is	important to help us understand acces	ss to dental care in your community.
Please mark the best answer	-	
	he condition of your child's teeth and gun	
	ery good c. Good c. Fair d. Po	
•	rou feel comfortable coming into a dental	office for an appointment?
a. Yes b. No		acks?
a. 2 or less b. 3	<b>y does your child have sugary drinks or sn</b> to 5            c. 6 or more	
9. Is your child reluctant		Over

a. Yes b. No c. Sometimes

DHHS\_000636

					entist? Include all types of dentists, ts, as well as dental hygienists.	
	12 months or less					
d.	My child has never been t	o a de	entist			
e.	Don't know/don't remem	ber				
11	What was the main reas		r child last visited a dentist?	) (Circ	la antivana)	
		-	ck-up, examination or cleani			
			check-up, examination or cle			
	Something was wrong, bo		• •	0		
				t earli	er check-up or examination	
e.	Other					
f.	Don't know/don't remem	ber				
12.	During the past 12 mon	ths, w	vas there a time when your	child ı	needed dental care but could not get	
	it at that time? (Circle or					
	a. Yes b. No	c. D	on't know/don't remember			
	IF YES: What were the re all that apply)	asons	that your child could not ge	et the	dental care she/he needed? (Circle	
	Cost was too high	b.	Dental office is not open at convenient times	с.	I did not think anything serious was wrong/expected dental problems to	
					go away	
d.	Dental office is too	e.	Another dentist	f.	Transportation or lack of reliable	
	far away		recommended not doing it		transportation	
g۰	Unable to take time off of work	h.	Afraid or do not like dentists	i.	Dentist did not accept insurance	
j.	No insurance	k.	Too busy	١.	Insurance did not cover	
-					recommended procedures	
m.	Other	n.	Don't know/don't	о.	COVID-19/pandemic	
			remember			
14.			ince that pays for some or al illed – these services are cor			
b.	Private dental insurance Medicaid					
	Other government denta None	insur	ance			
□ w	Which of the following b /hite	n Ame	escribes your child? (Check al erican 🔲 Native Hawaiian, 🗌 American Indian/Alask	/Pacifi	c Islander 🔄 🦳 Multiracial	
		Th	ank you for your partici	patio	n!	
					DHHS_000637	

## **Martha Framsted**

From:	Loretta Moses <loretta.moses@unlv.edu></loretta.moses@unlv.edu>
Sent:	Wednesday, December 2, 2020 1:00 PM
То:	Lorenzo Bethea
Cc:	Antonina Capurro; Antonina Capurro
Subject:	Re: Moving Dr. Capurro's Office

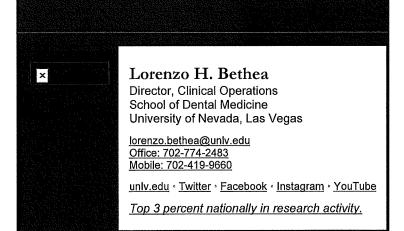
## Thank you Lorenzo!

Lo

On Wed, Dec 2, 2020 at 12:59 PM Lorenzo Bethea <<u>lorenzo.bethea@unlv.edu</u>> wrote: Hello Loretta,

10am will be fine and the plaques should be taken off the wall this evening.

Thank You



On Wed, Dec 2, 2020 at 12:56 PM Loretta Moses <<u>loretta.moses@univ.edu</u>> wrote:

Hi Lorenzo,

Nice talking with you on Monday. I just wanted to send a gentle reminder of the move from Dr. Capurro's office from D268 to B Building this Friday, Dec. 4, 2020. If we can plan the move at 10am that would be great.

Thank you.

Lo

A

# Loretta Moses, BSBM

Administrative Assistant, Nevada Oral Health Program UNLV School of Dental Medicine --DPBH Oral Health Program Under C17647 Shadow Lane Campus Office: 702-774-2429 Loretta.Moses@unlv.edu Lmoses@health.nv.gov

unlv.edu · Twitter · Facebook · Instagram · YouTube



# Loretta Moses, BSBM

Administrative Assistant, Nevada Oral Health Program UNLV School of Dental Medicine --DPBH Oral Health Program Under C17647 Shadow Lane Campus Office: 702-774-2429 Loretta.Moses@unlv.edu Lmoses@health.nv.gov

unlv.edu • Twitter • Facebook • Instagram • YouTube

Α

# **Martha Framsted**

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Friday, January 8, 2021 10:47 AM
To:	president
Subject:	Request for Information Re: ABDPH Application for Written Exam [no encryption]

Good Morning Dr. Sarno,

My name is Dr. Antonina Capurro and I am a DPH resident at A.T. Still University. My application for the ABDPH application was submitted via email in August and a hard copy was mailed along with a check.

I understand there has been a change of leadership and am writing to ensure I am still registered for the ABDPH exam in April at NOHC.

Any information to verify my examination status would be greatly appreciated. Thank you, Dr. Capurro

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: executive.director@abdph.org <executive.director@abdph.org>
Sent: Sunday, October 11, 2020 4:34 PM
To: Antonina Capurro <acapurro@health.nv.gov>
Cc: president <president@abdph.org>
Subject: RE: Request for Information Re: ABDPH Application for Written Exam [no encryption]

Dear Dr. Capurro,

Thank you for your e-mail. Please review my e-mail below back to you on August 2nd about the Board's next communication with Applicants. The Application in 2nd paragraph also provides what the ABDPH process and dates are.

Best wishes,

Dr. Ana Karina Mascarenhas Executive Director American Board of Dental Public Health From: "Antonina Capurro" <acapurro@health.nv.gov>
Date: Sun, Oct 11, 2020 11:30 am
To: "executive.director@abdph.org" <executive.director@abdph.org>
Cc: "president" <president@abdph.org>
Subject: Request for Information Re: ABDPH Application for Written Exam [no encryption]
Good Morning,

The supporting documentation and check for my ABDPH application were mailed in August. I have not received confirmation that I am registered for the written peroration of the exam.

Would you please verify my application status?

Thank you,

Dr. Capurro

#### Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: executive.director@abdph.org <executive.director@abdph.org>
Sent: Sunday, August 2, 2020 10:52 AM
To: Antonina Capurro <acapurro@health.nv.gov>
Cc: president <president@abdph.org>
Subject: RE: ABDPH Application for Written Exam [no encryption]

Dear Dr. Capurro,

We are in receipt of your application. However, to be considered complete, the application fee and all supporting documentation must be received. Please mail a check to the address of the application. The next update from the Board is on February 5, 2021. Best regards Dr. Ana Karina Mascarenhas Executive Director American Board of Dental Public Health

From: "Antonina Capurro" <acapurro@health.nv.gov>
Date: Sat, Aug 1, 2020 6:34 pm
To: "executive.director@abdph.org" <executive.director@abdph.org>
Subject: ABDPH Application for Written Exam [no encryption]

Good Afternoon Dr. Mascarenhas,

My name is Dr. Antonina Capurro and I am submitting my application for the written examination offered by the American Board of Dental Public Health. If additional documentation is needed, please let me know. Also, is there an online method of payment or should I proceed to mail a check to the address listed in the application?

Thank you,

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

# **Martha Framsted**

From:	Antonina Capurro <acapurro@health.nv.gov></acapurro@health.nv.gov>
Sent:	Wednesday, February 17, 2021 9:23 AM
То:	Heather Lazarakis; Cody Phinney
Subject:	Re: space at the Valley View Medicaid Office

Thank you, Cody.

Heather, I appreciate the warm welcome. It will be nice to be apart of your office. I will plan to call you to discuss the details.

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 |F: (702)774-2521 |E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Heather Lazarakis <hlazarakis@dhcfp.nv.gov> Sent: Tuesday, February 16, 2021 4:44 PM To: Cody Phinney <cphinney@dhcfp.nv.gov>; Antonina Capurro <acapurro@health.nv.gov> Subject: RE: space at the Valley View Medicaid Office

Thanks, Cody! We know each other well! Dr. Capurro, let me know if there are other staff in your office, how many and what they will need. Also, perhaps a date so we can be ready for you.

We are so pleased to welcome you in our office!

#### Heather Lazarakis, MSW, LSW

Social Services Manager III Nevada Department of Health and Human Services Division of Health Care Financing and Policy | LasVegas District Office Direct Line: (702) 668-4216

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

From: Cody Phinney <cphinney@dhcfp.nv.gov> Sent: Tuesday, February 16, 2021 4:17 PM To: Antonina Capurro <acapurro@health.nv.gov>; Heather Lazarakis <hlazarakis@dhcfp.nv.gov> Subject: space at the Valley View Medicaid Office

Dr. Capurro and Heather,

I am not sure if this is an introduction, or just a connection. As you are both aware, the State Dental Officer Position is slated to move to the DHCFP budget in July, assuming the budget is approved as submitted. Currently, the space the Dental Health Officer was using at the dental school is no longer available. So, it makes sense to move in this direction now. Dr, C, what are your needs and how can we help? Heather, I understand you have one office available. What else should we know?

Thanks!

×

#### Cody L. Phinney, MPH

Deputy Administrator Nevada Department of Health and Human Services Division of Health Care Finance and Policy 1100 E. William Street, Suite 101 | Carson City, NV 89706 T: (775) 684 -3735 | C: (775) 742-9963 | E: <u>c.phinney@dhcfp.nv.gov</u> www.dhhs.nv.gov <u>https://www.medicaid.nv.gov</u>

Pronouns she/her

Helping People. It's who we are and what we do.

Find help 24/7 by dialing 2-1-1; texting 898-211; or visiting www.nevada211.org

**NOTICE:** This message and accompanying documents are covered by the electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521, may be covered by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and may contain confidential information or Protected Health Information intended for the specified individual(s) only. If you are not the intended recipient or an agent responsible for delivering it to the intended recipient, you are hereby notified that you have received this document in error and that any review, dissemination, copying, or the taking of any action based on the contents of this information is strictly prohibited. Violations may result in administrative, civil, or criminal penalties. If you have received this communication in error, please notify sender immediately by e-mail, and delete the message.

## **Martha Framsted**

From:	Patti Oya <poya@doe.nv.gov></poya@doe.nv.gov>
Sent:	Thursday, February 18, 2021 12:20 PM
То:	Antonina Capurro
Subject:	RE: Licensed Childcare Update and Mailing Address Question

Hi, thanks for the update. It's amazing how much you completed during this crazy time. I'd definitely like to go with Mesquite if I can work it into my schedule – keep me posted 🜚

We did move. Our new address is below.

Thanks, Patti

Patti Oya, Director Office of Early Learning and Development Nevada Department of Education

2080 E Flamingo Rd, Suite 210 Las Vegas, NV 89119

702.486.6492 Office 702.668.4340 Fax 702.810.8175 Cell

From: Antonina Capurro <acapurro@health.nv.gov>
Sent: Thursday, February 18, 2021 11:10 AM
To: Patti Oya <poya@doe.nv.gov>
Subject: Licensed Childcare Update and Mailing Address Question

Good Morning Patti,

I hope this email finds you well. It has been some time since we last spoke, and I am writing to provide you with an update on the licensed childcare project's progress. Things are going well and advancing nicely. The response from licensed childcare centers has been overwhelming positive. Please see the below email with feedback on our presentation and services from a licensed childcare center in Carson City.

Thus far, oral hygiene supplies and classroom tooth brushing center kits have been delivered for over 880 children. For each centerr, an oral hygiene and nutrition presentations have been provided to all children in the classroom, and while the exact numbers are still being tallied, over 400 children have been screened.

In addition to the classroom component, an educational webinar was offered for educators and was approved for continuing education credits through the Nevada Registry. Along with our partners at Colgate, we held six webinars in October, and hosted a make-up webinar on January 24th. The presentations have been recorded

and are available for anyone that would like to rewatch a session. Seven educators registered for the make-up webinar.

We are working with the biostatistician to enter all of the data thus far collected.

Due to the pandemic, our travel schedule was slightly delayed as Fleet Services was closed for the month of December. Nonetheless, we were able to visit Pahrump at the end of January and plan to visit our last sites in Mesquite in March. Earlier in the project cycle, you mentioned that you might be interested in joining us to visit one of the closer sites. Would you like to go with us to Mesquite? We are still finalizing the exact visit date but will be in touch as soon as that is finalized.

Lastly, we mailed some information to your office on our National Children's Dental Health Month campaign, but the package was returned. The address we have for your office is 9890 S. Maryland Pkwy, Ste 210. Is there a new mailing address?

I look forward to hearing from you and appreciate your continued support and partnership. Best regards, Antonina

## Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program Visiting Assistant Professor, School of Dental Medicine University of Nevada, Las Vegas 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2573 [F: (702)774-2521 [E: acapurro@health.nv.gov www.dhhs.nv.gov | www.division website.nv.gov Helping People. It's who we are and what we do.

From: Cindi Supko <<u>csupko@stts.org</u>>
Sent: Tuesday, November 24, 2020 7:22 AM
To: Loretta Moses <<u>Imoses@health.nv.gov</u>>; Antonina Capurro <<u>acapurro@health.nv.gov</u>>
Subject: Re: Response Requested | Dental Screening Site Visit Confirmation - St. Teresa of Avila Child Development
Center

WOW! Could have knocked me over with a feather. What a great presentation, Dr. Capurro was so good with the kids, right down to their level. I am used to people who are not quite sure how to interact with 3 and 4 year olds. The children definitely enjoyed and learned a lot. The teachers kept asking questions about the presentation during the day and the kids chimed in with the answer. Sorry I could not attend the whole time but am so busy with all the new paperwork I have to fill out.

Anyway, we all here at St. Teresa CDC wanted to thank you for a job more than well done and the kids were so excited to receive their takeaways. So sorry that only about half of my students were present on this day, but I understand that you all were on a tight schedule. My teachers were more than thrilled with their goodies! One of them told me that she had always wanted a toothbrush like the one she received but could never afford one. So I just wanted to let you know that you had an impact on not only our students, but our teachers as well!

Thanks again, I know now that this was a well thought out statewide initiative and I know all of the hard work and time that was put into this endeavor was well worth it. Till next time!!

## Laura C. Supko (Cindi) M.Ed.

Director

St. Teresa of Avila

Child Development Center

(775)283-0261 Ext. 232

567 S. Richmond Ave.

Carson City, NV 89703

csupko@stts.org

On Thu, Nov 12, 2020 at 2:44 PM Loretta Moses <<u>Imoses@health.nv.gov</u>> wrote:

Thank You. Back at you!

Lo

## Loretta Moses, BSBM

# Administrative Assistant, Nevada Oral Health Program

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2429 |F: (702)774-2521 |E: <u>lmoses@health.nv.gov</u> www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Cindi Supko <<u>csupko@stts.org</u>>

Sent: Thursday, November 12, 2020 10:42 PM

To: Loretta Moses <<u>lmoses@health.nv.gov</u>>

Subject: Re: Response Requested | Dental Screening Site Visit Confirmation - St. Teresa of Avila Child Development Center

Nice talking to you! Thank you for all your hard work!

On Nov 12, 2020, at 2:11 PM, Loretta Moses <<u>lmoses@health.nv.gov</u>> wrote:

Hi Cindi,

Please confirm, if Friday, Nov. 20th from 11:15 - 12 noon is better for your schedule. Also, how many teachers do you have at your center? We would like to leave them a little gift? Lo

Loretta Moses, BSBM Administrative Assistant, Nevada Oral Health Program Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2429 |F: (702)774-2521 |E: <u>lmoses@health.nv.gov</u> www.dhhs.nv.gov | www.division website.nv.gov

Helping People. It's who we are and what we do.

From: Cindi Supko <<u>csupko@stts.org</u>> Sent: Tuesday, November 10, 2020 1:13 AM To: Loretta Moses <<u>lmoses@health.nv.gov</u>> Subject: Re: Response Requested | Dental So

Subject: Re: Response Requested | Dental Screening Site Visit Confirmation - St. Teresa of Avila Child Development Center

This date would work but I will only have about half my children there as their siblings who, attend K-8 next door will be off that week of Thanksgiving. We are open, but those siblings do not attend when the school next door is closed.

Could we possibly change dates? I have 2 classrooms only. One 3 year old class, PreSchool, and one 4 year old class, Pre-K. Would both classes be part of this? I cannot combine classes because of COVID, so would two sessions take place?

P-S. 24 students P-K. 21 students

AM is school, PM is nap time for full day students.

Sorry to be asking all these questions, but I am a planner!

Cell phone. 775-741-8811

Thank you, Ms. Cindi

On Nov 9, 2020, at 3:54 PM, Loretta Moses <<u>lmoses@health.nv.gov</u>> wrote:

Dear Cindy,

On behalf of the Nevada Division of Public and Behavioral Health (DPBH), Oral Health Program team, we are looking forward our visit to your facility. Our state dentist,

DHHS 000648

Antonina Capurro, DMD, and dental hygienist, Jessica Woods, RDH are thrilled to perform free dental screenings, education to teachers, fluoride varnish, and toothbrush kit for the children and a toothbrush sanitizer for the classroom.

Please confirm by responding to this email as soon as possible if the date and times below work with your facility and answer the three questions. Also, please share your cell number with us as we would like to have a day of event contact number in any need for communication arises on the road!

Center: St. Teresa of Avila Child Development Center

Date: Monday, November 23, 2020

Time: 11:00AM - 11:45AM

Contact Person: Cindy Supko Cell #: (\_\_\_\_\_\_\_)

Email:

**Physical Address:** 

Mailing Address (if different from Physical):

PLEASE COMPLETE THE BRIEF QUESTIONS BELOW: (To ensure correct amount of resources & time allotment)

- How many children age 3-5 yrs. do you currently have? •
- How many 3-5 yr. old classrooms do have?
- Do you have an AM and PM class? If yes, what are the start and end times?

Your pre-screening packet mailed to you the end of October included instructions and a parent letter, brochure and consent form with wristbands to help remind the children to return the signed consent forms. Please let me know if for some reason you have not received. Do not forget, if you achieve 75% consent form return - you receive a \$100 gift card to Lakeshore Learning!

Do not hesitate to call me at 702.774.2429 or email me (or any one of our OHP team members) if you have any questions or need additional information at this time.

Loretta Moses

Antonina Capurro, D.M.D, M.P.H, M.B.A Nevada State Dental Health Officer |T: (702) 774-2573 | E: acapurro@health.nv.gov

#### Jessica Woods, MPH, RDH

State Public Health Dental Hygienist (Interim) | T: (702) 774-2573 |E: <u>jwoods@health.nv.gov</u>

# Loretta Moses, BSBM

Administrative Assistant, Nevada Oral Health Program

Nevada Department of Health and Human Services Division Public and Behavioral Health - Oral Health Program 1001 Shadow Lane, MS 7411, D280 Las Vegas, NV 89106 T: (702) 774-2429 |F: (702)774-2521 |E: <u>lmoses@health.nv.gov</u> <u>www.dhhs.nv.gov</u> | <u>www.division</u> website.nv.gov

Helping People. It's who we are and what we do.

## **CERTIFICATE OF CUSTODIAN OF RECORDS**

I, Martha Framsted, swear and state under penalty of perjury the assertions of this affidavit are true.

1. I am the Custodian of Records or other person authorized to make this certification and have knowledge of the records and documents of the Nevada Department of Health and Human Services.

2. On or about February 24, 2021, the Nevada Department of Health and Human Services received a subpoena requesting the production of records pertaining to Antonina Capurro, DMD.

3. I have examined the original of those records and have made or caused to be made a true and exact copy of them and the reproduction of them attached is true and complete as of March 8, 2021.

(Insert name) Martha Framsteel

STATE OF NEVADA  $\mathbf{SS}$ COUNTY OF Carsor

Signed and Sworn to before me this <u>8th</u> day of <u>March</u>, 2021 by <u>Ulie Dickerson</u>.

NOTARY PUBLIC

JULIE DICKERSON Notary Public State of Nevada Appt. No. 18-1956-3 My Appt. Expires Mar. 15, 2022

DHHS\_000651