## COUNCIL ON ORTHODONTIC HEALTH CARE (COHC)

The COHC has continued working on issues related to access to orthodontic healthcare, insurance coding and third-party payer issues. Our Council meeting was on June 10, at AAO headquarters in St. Louis. This year we have a new board liason, Dr. **Ken Dillehay** from Wichita, Kansas.

Dr. Dillehay gave the board a report on the updated AAO strategic map and governance structure. The new strategic map easily lays out AAO's goals and objectives in an easy to read single page format. This is important for councils to be able to refer to this document to ensure that their actions are consistent with the strategic plan. This document will be an important tool for the decision making process. Dr. Dillehay also went through the COHC self-assessment that we filled out earlier in the year. Council members feel we are meeting the objectives of our charge and have the appropriate resources at AAO to accomplish our tasks.

Next, **Ann Sebaugh** reviewed data on the cases treated by DOS during the first half of this year. There is a desire to see significantly more cases treated pro-bono by our membership to improve access to care for underserved populations. Having a large number of our colleagues volunteering to provide this type of care in their practices would help to educate the public to the charitable contributions of the orthodontic community. This would certainly be usable by COC to cast our profession in an even better light. At this time, COHC is exploring ways to increase access to care for underserved populations.

Moving on to CDT coding topics, it is relevant to note that I am currently serving on the ADA Council on Dental Benefit Plans and the Coding subcommittee. This will be important over the next year as COHC reviews all orthodontic codes to determine if there a benefit to revising some, or all, of the codes. It has been over two decades since the orthodontic codes have been modified and it is good practice to review them at this time to make sure they are relevant. COHC is also currently working to get "Box 40" on the ADA claim form removed. Box 40 is to be checked when an adjunctive service is provided for orthodontic purposes, such as extractions or canine exposures. This allows insurance companies to use the orthodontic benefit to cover the non-orthodontic procedure.

We reviewed the AAO Medically Necessary Orthodontic auto-qualifying conditions to see if the current language is acceptable. Utilizing data from the state of Nevada that uses these for their Medicaid orthodontic approval and a retrospective study on Medicaid cases in Washington, the Council felt that a review of these with some editorial changes to the list would be appropriate. As we move forward, private insurance could utilize these auto-qualifying conditions for coverage and we should regularly review them and relevant data to gauge their effectiveness.

The next COHC meeting is a conference call on January 12, 2019, and the summer meeting will be at AAO Headquarters on June 22, 2019.

**Randall Markarian** 

618/236-7846

randall@thinkbraces.com