

Request for Applications (RFA)

Colorado Medical-Dental Integration (CO MDI) Project Wave II

Introduction

Delta Dental of Colorado Foundation (DDCOF) requests applications to permanently integrate a registered dental hygienist into safety-net medical practices that serve individuals who have limited access to oral health care.

Background

In Colorado, as in most other states, dental caries (tooth decay) among those who are poor and disadvantaged is a serious public health concern with substantial human and financial costs¹. If left untreated it can lead to pain, low quality of life, missed school, emergency room visits, hospitalizations, and even death². Children in low-income families have double the caries rate of more economically advantaged children and are less likely to receive dental care³. Even low-income Coloradans of any age who have dental insurance are less likely to get dental care⁴. There are challenges for many populations to receive dental services. Only two out of three Colorado dentists accept Medicaid. Transportation, geography and other socioeconomic factors may also be at play.

However, over 90% of Colorado's publicly-insured children had at least one medical visit by age one. Also, 93% of Coloradans are medically insured⁵ compared to 70.6% dentally insured⁶. Integrating dental hygiene services into the medical home to coordinate with a medical visit leverages the numerous well-child visits children have with their medical provider. Adults may frequent their medical provider, particularly if they are pregnant or managing a chronic disease such as diabetes. Integrating dental hygiene services with their medical visit offers the opportunity to expand access to oral health services and in turn improve oral and overall well-being.

Since 2008 DDCOF has invested in and supported pilot testing innovative practice models that expand access to dental services and improve outcomes for high-risk populations. In 2015 DDCOF launched the Colorado Medical-Dental Integration Project (CO MDI). This project integrated dental hygienists, providing the full scope of preventive dental hygiene services, into medical practices as a part of care teams. This supported the notion that individuals access medical services more frequently than dental services, medical practices are a familiar and convenient setting, and having dental hygiene services available will increase the opportunity for dental care.

¹ Chew on This: 2012 Report on the Oral Disease Burden in Colorado. In: Environment CDoPHa, editor. 20122012.

² Casamassimo PS, Thikkurissy S, Edelstein BL, Maiorini E. Beyond the dmft: the human and economic cost of early childhood caries. *J Am Dent Assoc.* 2009; 140:650-7.

³ Dye BA, Thornton-Evans G. Trends in oral health by poverty status as measured by Healthy People 2010 objectives. *Public health reports.* 2010; 125:817-30.

^{4,5,6} Colorado Health Access Survey, 2015

Key Dates

Tuesday, December 12, 2017

Program Overview Webinar
12 p.m.-1 p.m. MST

<https://attendee.gotowebinar.com/register/2614338870952622595>

After registering, you will receive a confirmation email about the webinar.

Wednesday, December 13, 2017

Program Overview Webinar
2:30-3:30 p.m. MST

<https://attendee.gotowebinar.com/register/2434982136183415811>

After registering, you will receive a confirmation email about the webinar.

Tuesday, December 19, 2017

Toolkit Webinar
11:00 a.m. - 12:00 p.m. MST

<https://attendee.gotowebinar.com/register/8038579375469453059>

After registering, you will receive a confirmation email about the webinar.

Tuesday, January 23, 2018

Applications due by 5 p.m. MST

[Must be submitted via the online registration form.](#) Emailed applications will not be accepted.

Monday, February 12 through Friday, March 16, 2018

Site Visits

Attendees should include the executive leadership, dental leadership, and dental champion.

Friday, March 30, 2018

Notify Applicants of Awards

If awarded, your team will be expected to attend the kick-off, in-person, learning network session

Thursday, April 26-Friday April 27, 2018

Kick-off Learning Network Session
Grantees must attend startup phase training.

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The CO MDI Project provided grant funding, technical assistance and coaching to 16 medical practices across Colorado to implement this work. Two and a half years into this five year project the practices have:

- Provided over 32,000 patient visits for dental hygiene services.
- Served a population covered by Medicaid and CHP+ (72%), as well as those that were uninsured or covered in other ways (27%).
- Made 14,700 (47%) referrals to dentists specifically for restorative care, with 65% attendance.

The CO MDI Model

The CO MDI model of medical-dental integration supports delivery of a full scope of preventive dental hygiene services in a medical setting, and coordinated care to a dentist, for patient populations experiencing oral health disparities. These populations may have high oral health needs and are often publicly insured or uninsured. For more information on specific characteristics of the CO MDI model, please reference the [CO MDI model section of our toolkit](#).

Practices with a high percent of children generally do well implementing CO MDI. However, service to adults could support financial viability. Reimbursement for the groups are currently:

- Medicaid:
 - Coverage for children, unlimited.
 - Coverage for adults, limit of \$1,000 per year per patient.
- Child Health Plan Plus (CHP+):
 - Coverage for children.
- Medicare:
 - No coverage provided.

Funding Overview

DDCOF, in partnership with the Colorado Health Foundation, is launching a Wave II funding opportunity to expand the CO MDI Project. Wave II will support up to 10 additional medical practices in Colorado to increase access to oral health services by incorporating a dental hygienist into their practice. CO MDI Wave II builds on the lessons learned from CO MDI Wave I and provides grant funding, training, technical assistance, and coaching support to implement the CO MDI model.

DDCOF is seeking applications from nonprofit medical practices in Colorado that meet the following criteria:

- Provide a medical home to children and/or adults experiencing oral health disparities.
- Demonstrate a clear desire to expand patient services to include full scope preventive dental care.
- Demonstrate a readiness for this work as defined in the [CO MDI toolkit](#) and via the toolkit's [online readiness assessment](#).

DDCOF will consider funding varied models using supervised or independent dental hygienists in employed or contracted relationships. Models considered are:

- Federally Qualified Health Centers integrating a dental hygienist as part of the medical team.
- Nonprofit safety net practices integrating a dental hygienist as part of the medical team.
- A dental practice collaborating with a medical practice in a hub and spoke model to partner as a dental home.

The evaluation of the CO MDI Wave II Project will be assessing collective grantee attainment of the following goals:

- Increasing access to evidence-based dental care via 32,000 patient encounters over four years.

We are happy to support the development of your application and welcome inquiries. Please contact:

Cherith Flowerday
Program Officer

Delta Dental of Colorado Foundation
4582 South Ulster Street, Suite 800
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- Reduce the proportion of MDI® patient visits with untreated dental decay by 10% over four years.
- Reaching financial sustainability in 75% of the practices by the end of three years.

Grant Structure

DDCOF is committed to providing financial support to offset the costs of beginning this work, and extensive technical assistance and practice coaching to help reach practice goals. An online resource, [the CO MDI Toolkit](#), will be used to provide training for funded practices and is referenced extensively throughout this RFA, identified by hyperlinks for key topics. We recommend using it to support your application process.

A timeline of grant activities and payments is provided in the Appendices.

The grant period is end of April 2018-April 2020. Evaluation begins in the grant period and will continue through April 2022. Support will be given to cover the ongoing evaluation activities. The grant and evaluation will be structured as follows. Participation in all activities is required:

Startup Phase: 6 months, end of April-October 2018. The work of this phase is to accomplish the following activities and deliverables: (Although all the activities below need to occur in this time period, some are required deliverables to be completed by the end of the six month period in order to receive the next installment of funding.)

- Begin the two types of recommended [CO MDI team meetings](#).**
- Prepare your practice for the [addition of a dental hygienist to the team](#), including basic oral health education to be provided by Dr. Patty Braun.**
- [Hire a dental hygienist](#)** (deliverable).
- Implement a plan to comply with [federal and state regulations](#).**
- Set up [electronic dental record](#) software.**
- Prepare appropriate staff to [bill for dental services](#).**
- [Credential your dental hygienist with Medicaid and CHP+](#)** (deliverable).
- [Equipment](#) is installed and able to be used** (deliverable).
- Have a [relationship with a dentist](#) established for referrals.**
- Participate in baseline evaluation activities.**
- [Develop your first workflow](#)** (deliverable).
- See your first patient** (deliverable).
- **Participate in the following activities, which will support you in moving through the startup activities and deliverables:**
 - [Learning network session](#):** This mandatory session will be in person, April 26 & 27, 2018, one month after awards are announced on March 30. Due to a tight turn around between award announcements and this session, please put this date tentatively on the calendar of the persons you would have attend, if awarded this grant. April 26 will be a dinner and April 27 will be an all-day session. It will be in Denver with all costs covered for attendees. Three staff are asked to attend (executive leadership, the dental champion, and one other key person). Executive leadership will receive a stipend to cover their time investment in attending. Executive leadership refers to your Chief Executive Officer, Executive Director, Chief Operating Officer, etc. If you are in a very large practice, perhaps this refers to another leader who will not implement the work, but has an overarching director role. Dental champion refers to an administrative person with the project leadership role; often the hygienist's immediate supervisor.
 - Training:** Thirteen weeks of training will be provided to support your **movement** through the startup phase of the project. The training will begin after the learning network session, on May 8, from 2-3 p.m. and will continue weekly on the same day/time schedule through August 8th, 2018. There will also be a calibration training for dental hygienists on September 11, from 2-3:30 p.m.

- Please reference the included training schedule that covers the topic of each training and recommendations for attendees relevant to each topic.

- **Technical assistance:** Dental champion and dental hygienist meet via phone with DDCOF staff and coach, at least once a month. During this time you will be supported with whatever your needs are at that point in startup. They can answer questions, connect you to resources, and provide guidance.
- **Group calls:** DDCOF staff and coaches will host a monthly group call where all grantees participate. This is an opportunity for the grantees to learn from each other through facilitated discussion of issues and topics you are working on at the time. The calls rotate every other month between two different groups – the dental champions one month and dental hygienists the other month. These calls are one hour and will start after the 13 weeks of training is complete.
 - Please reference the CO MDI Activities & Payment Timeline in the appendices to see the group call schedule.
- **Evaluation activities:** Some baseline evaluation activities, such as interviews with key practice leadership or surveys of providers, as well as preparing for the submission of metrics and financials during the implementation phase, will occur during this time period.

Implementation Phase: 1.5 years, November 2018-April 2020. The work of this phase is [refining your program](#) to reach the point of improving the oral health of your target population by providing care to as many patients as possible, while also building a financially sustainable model. You will do so by participating in the following activities which will support you in this process:

- **Coaching:** Should your practice be ready to begin coaching during the start up phase, that is acceptable. You will be provided with a professional practice coach to guide and support you to meet the goals for this project. Coaching will be monthly, in person meetings with whichever team members are relevant to the work's progress at that time. Quality improvement methods and activities may be part of the coaching. If you have a quality improvement team or staff member, their participation would be valuable.
- **Group calls:** These were defined in the startup phase section above. They will continue throughout the implementation phase.
- **Biannual learning network sessions:** In addition to the learning network session mentioned in the startup phase above, there will be three additional sessions in November 2018, May 2019, and November 2019. Your dental hygienist will also be asked to attend once they are hired.
- **Evaluation:** Participate in evaluation activities which will support your practice's attainment of goals and gauge the impact of this work. This evaluation will be conducted by the University of Colorado ACCORDS program, led by Dr. Patty Braun. Learn more about the [CO MDI Wave I Project evaluation](#) in the CO MDI Toolkit. Activities for CO MDI Wave II may be different from those of CO MDI Wave I.
- **Biannual reports:** A biannual report template will be provided to submit regarding grant progress in key areas throughout the grant.

Evaluation Phase: 4 years, May 2018-April 2022.

Grant Funding Structure

Applicants may request up to \$185,000 in funding and award amounts will be made based on need. This is for a timeframe of two years to cover the startup and implementation phases of this project. Funding will be allocated as follows:

- **Equipment expenses:** If awarded you will receive \$55,000 for equipment. This will cover the equipment for a dental hygienist to provide dental hygiene services. You do not need to propose what equipment will be purchased as part of this application. If awarded support will be provided to order equipment during the start-up phase.

The program team is available to provide technical assistance for organizations developing the application and determining funding needs. Please contact:

Cherith Flowerday
Program Officer

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Additional considerations are:

- This funding is intended for the purchase of mobile equipment and a sample equipment list is included with this RFA.
- We recommend grantees purchase a mobile delivery unit with the capacity for use by a dentist, such as a Procart III. Should the need arise in the future for a dentist to come on-site, you will be able to adapt to the need more readily.
- Equipment can include start-up support for certain electronic dental record options up to \$5,000, if all other equipment needs have already been met.
- **Program expenses:** If awarded you will receive up to \$130,000 to support program expenses. Funding requests must take into consideration projected revenue reimbursements that the practice receives as a result of dental hygienist services provided. See additional details for the budget categories in the budget provided with this RFA.
- **Ongoing evaluation:** If awarded you will receive \$5,000/year for the two year period from May 2020 to April 2022.

Funding will not support capital improvements such as the new construction or build-out of an entirely new space. As you prepare your budget, please contact DDCOF staff for guidance when needed.

Deliverables and Payout Structure

Funding will be provided in three increments, based on completion of deliverables before the next funding support will be provided. Following are the time increments and deliverables.

- **Payment one:** April 2018
- **Payment two:** November 2018
 - To receive payment the following deliverable must be met by October 31, 2018.
 1. Hired a dental hygienist.
 2. Credentialed the dental hygienist with Medicaid and CHP+.
 3. Equipment is installed and functional for the delivery of all services.
 4. First workflow has been created and is ready to test.
 5. First patient has been seen.
- **Payment three:** May 2019
 - To receive payment the following deliverables must be met by April 30, 2019:
 1. Metrics are being submitted monthly and are accurate.
 2. Financials are being submitted quarterly and are accurate.
 3. Practice has sufficient relationship with dentist(s) to meet the restorative care needs of the target population.
 4. Six in person sessions have been held with practice coach.
- **Payment four:** May 2020 and **Payment five:** May 2021
 - This is for ongoing evaluation activities and is dependent on ongoing compliance with grant as defined in grant contract.

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Grant Application

Please complete the [grant application online](#). The grant application must be completed in one sitting. You can't save changes and return to your application to finish it. The grant application includes the following elements:

☑ Practice Information

- Name of Practice (should be the same as on IRS Form 990)**
- Address**
- Executive Director: Name, Phone Number, and Email Address**
- Primary Contact: Name, Phone Number, and Email Address**
- Summary of Practice and Patient Population (1,000 word limit)**

Briefly describe your organization's mission, history and services provided (including existing medical and dental services). Include patient population information such as the number of adults/children and type of insurance.

☑ Project Details

Target Population (750 word limit)

- Who is your target population specifically related to this CO MDI application?
- Why have you chosen this target population? Describe their dental needs both in the community and in your practice.

* If you are interested in surveying your patients, the CO MDI toolkit offers a [survey tool](#).

Interest in the CO MDI Model (300 Words)

Describe why your practice is interested in the CO MDI model of medical-dental integration versus another model that provides fewer services or is less integrated.

Your Program Model and Practice Goals (900 words)

Considering DDCOF's goals for this project, what are your practice's goals for medical-dental integration? Describe how you envision medical-dental integration occurring in your practice, including roles and activities.

Project Team (600 words)

- Describe the team that will work on the project. Who will be the dental champion? This is usually an administrative person with the leadership role in the implementation of the project and oversight of the dental hygienist. Who will be on your comprehensive practice team?
- Complete the "Team Awareness of Application and Participation" form provided with this RFA. You will need to upload it in the forms section of your application.

Restorative Care (600 words)

You will need to answer one of these questions and attach a letter of commitment, if applicable:

- **Relationship with Dentist for Restorative Care**

Since your practice already has a dental practice, please tell us about the plan for their involvement in this work. Does your dental practice have capacity for additional patients coming for restorative care from referrals the integrated dental hygienist makes? If not, what is your proposal for meeting this extra demand?

- **Providing Restorative Care to your Patients**

Since your practice does not have a dental practice, please tell us about your plan for providing restorative care to your patients. Is there capacity within your dental community? If you don't yet have a relationship with a dentist(s) for restorative care, please include your plans for developing that relationship.

Important RFA links:

- Link to [online grant application](#) (the only way we will accept applications)
- Link to [CO MDI Toolkit](#) (reference for your application)
- Link to [online Readiness Assessment](#) (Results will be automatically sent to us)

These documents are provided to inform your process:

- [CO MDI Activities & Payment Timeline](#)
- [Startup Activities Timeline & Training Plan](#)
- [Equipment list](#)
- [Budget template](#)
- [Team Awareness of Application & Participation Form](#)

Clinic Space (300 words)

Describe your plan for where the dental equipment will be set up and used. Do you have a room designated to become the dental room? If not, what other plan do you have for moving the equipment around in order to provide services?

Practice Transformation and Quality Improvement Experience (300 words)

Describe your team's experience with practice transformation activities, quality improvement activities, and other forms of integration such as behavioral health. Do you have a quality improvement team already and would they be able to dedicate time to supporting this work?

Sustainability Plan (300 words)

Our expectation is that your project will be self-sustaining within two years. In the case it isn't, how does your practice manage programs they find valuable but are not self-sustaining?

Completing the online readiness assessment

[Online readiness assessment](#) results from the CO MDI toolkit.

When you complete the assessment the results will automatically be sent to DDCOF. We are testing this tool so your feedback on this is welcome. The results of the assessment will not determine if you are awarded funding.

All of the following documents should be uploaded to accompany your application:

- Letter from your executive leadership regarding their interest in and support for this work.**
- Awareness of application and participation form.**
- Letter of commitment from dental director or local dentist(s) (if applicable).**
- Two year program budget.**
- Budget narrative.**
- Most recent IRS-990.**

For additional information, please contact:

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Team Awareness of Application & Participation

The integration of dental hygiene services into a medical practice, particularly in the model of Colorado Medical-Dental Integration (CO MDI), is most successful with the participation of the entire medical practice. We recommend having a comprehensive practice team focused on this effort. The team would be made up of one person from each department of the practice. They will support the dental champion and dental hygienist in development and implementation of this work. As part of your application for this grant we ask that you:

- Determine who will be your dental champion.
- Determine who you would want as a representative from each department of your practice on a comprehensive medical-dental integration team.
- Make these persons aware that you are applying for this grant, what the expectations are if awarded, what the timeline is, and that if awarded you plan for them to take on this role.
- Submit to us the documentation below showing the names of the persons you expect to have on your comprehensive practice team, what department they represent, and their signature showing awareness of this pending work and their role in it.

I am aware that my practice is applying for the CO MDI Project grant through Delta Dental of Colorado Foundation and that, if awarded, I will be part of the implementation team. I am aware that my department will be affected by the integration of a new provider to the practice and I will participate in the planning and implementation of those changes. I know what my role will be. I was told about the expectations of the grant and given the training and startup timeline. I know that if I want additional details I can read about the team roles at medicaldentalintegration.org/building-mdi-models/building-a-co-mdi-team/creating-a-co-mdi-team, and about the project as a whole at www.medicaldentalintegration.org.

Name (Printed)

Department

Signature

Dental champion:

1.

Other team members:

2.

3.

4.

5.

6.

7.

8.

9.

10.

CO MDI Activities & Payment Timeline

STARTUP PHASE – 6 MONTHS (End of April-October 2018)																
Activity	April 2018	May				June				July				Aug	Sept	Oct
Learning Network Sessions	26-27															
Start-up Training, 2-3 p.m.		8	15	22	29	5	12	19	26	10	17	24	31	7	11	
1:1 TA Calls *		X				X				X				X	X	X
Oral Health Lunch n' Learn with Dr. Patty Braun						X										
Group Calls Primary Contact/Dental Hygienist 2-3 p.m.															4	2
Possible In Person Coaching*															X	X
Evaluation Activities		X				X				X				X	X	X
Grant Payment	X															

* Adjusted to need of practice

IMPLEMENTATION PHASE – 1.5 YEARS (November 2018 – April 2020)																		
Activity	Nov	Dec	Jan 2019	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	Jan 2020	Feb	Mar	April
Learning Network Sessions	X						X						X					
Group Calls Primary Contact/Dental Hygienist	6	4	8	5	5	2	7	4	2	6	3	1	5	3	7	4	3	7
In Person Coaching*	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Evaluation Activities	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Payment	X						X											

* Adjusted to need of practice

MAINTENANCE & ONGOING EVALUATION PHASE – 2 YEARS (May 2020-April 2022)	
	May 2020-April 2021
Evaluation Activities	X
	May 2021-April 2022
	X

Startup Activities Timeline & Training Plan

The startup period for the Colorado Medical-Dental Integration (CO MDI) project is six months long, from May-October 2018. During this phase the practice will hire a dental hygienist, credential the dental hygienist, order and install dental hygiene equipment, be trained on and setup protocol's for compliance with federal and state regulations, learn to bill for dental services, kick-off the implementation teamwork, develop an initial workflow plan, learn how to submit evaluation data to Delta Dental of Colorado Foundation, learn dental quality activities, and see your first patient! A recommended timeline for these activities is offered below.

To support your accomplishment of these activities, DDCOF will provide the following training. Each training will be once/week, for one hour (Tuesdays at 2 p.m. starting May 8, 2018). The table below provides guidance on what staff person would be appropriate for each training. Each grantee will have a dental champion who oversees the implementation of the project. Often this is an administrative person and often they are also the dental hygienist's supervisor. We suggest the dental champion and dental hygienist (once hired) attend each training, so that as the core team they are aware of each piece of the project, whether the topic is their primary responsibility or not.

Note:

We have attempted to establish dates and timing of the following trainings. However, there is potential for them to change by the time they occur. If that is the case we will communicate any updates to you. You can always contact Cherith Flowerday at cflowerday@ddpco.com.

Timeline	Training Topic	Suggested Attendees	Recommended Timeline for Startup Activities
Week One May 8	Hiring and Credentialing	<ul style="list-style-type: none"> • HR department • Person responsible for credentialing providers • Dental champion 	<ul style="list-style-type: none"> • Begin the dental hygienist hiring process • Begin comprehensive practice team implementation meetings
Week Two May 15	Equipment	<ul style="list-style-type: none"> • Dental champion • Dental representative if your organization has one • IT department • Any department/person responsible for state and federal rules and regulations/ compliance • Purchasing department 	<ul style="list-style-type: none"> • Begin to draft an equipment list
Week Three May 22	Building relationships with dentists	<ul style="list-style-type: none"> • Dental champion 	<ul style="list-style-type: none"> • Begin to identify a referring dentist if you don't have one yet
Week Four May 29	Staff dentist introduction to the project (for practices with staff dentists)	<ul style="list-style-type: none"> • Staff dentist(s), if you have them • Dental hygienist • Dental champion 	
Week Five June 5	Federal and State Dental Rules and Regulations	<ul style="list-style-type: none"> • Dental champion • Person who manages MSDS on demand service material safety data sheets for medical • Any department/person responsible for state and federal rules and regulations/compliance 	<ul style="list-style-type: none"> • Define your plan for compliance with federal and state rules and regulations
Week Six June 12	Billing for CO MDI	<ul style="list-style-type: none"> • Billing/coding staff • Dental champion 	<ul style="list-style-type: none"> • Read relevant sections of the Medicaid Office Reference Manual (ORM) • Create a billing "cheat sheet" for your purposes

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Timeline	Training Topic	Suggested Attendees	Recommended Timeline for Startup Activities
Week Seven June 19	Evaluation	<ul style="list-style-type: none"> Dental champion IT QI 	<ul style="list-style-type: none"> Review provided evaluation materials Plan data gathering activities with IT Define roles
Week Eight June 26	Learnings from CO MDI Discussion around questions you don't know to ask, potential challenges, and how they were resolved (by grantees from CO MDI; sharing their experiences)	Anyone interested: <ul style="list-style-type: none"> RDH supervisor Medical providers Dental providers Dental champion Leadership Dental hygienist 	<ul style="list-style-type: none"> Hygienist hired and/or contracted by this week Begin weekly core team meetings
Week Nine July 10	Workflows, Roles, and Processes	<ul style="list-style-type: none"> Dental champion Medical providers MAs Schedulers Dental hygienist 	<ul style="list-style-type: none"> Hygienist begins helping create/refine equipment list Team begins developing a workflow and defining roles
Week Ten July 17	Self-management Goal Setting, Screening Forms	<ul style="list-style-type: none"> Dental hygienist Dental champion 	
Week Eleven July 24	Cultural Awareness	<ul style="list-style-type: none"> Dental hygienist Dental champion 	
Week Twelve July 31	Introduction to Cavity Free at Three	<ul style="list-style-type: none"> Dental champion Dental hygienist Medical providers MAs Any other staff 	
Week Thirteen August 7	Billing for Dental Hygienists	<ul style="list-style-type: none"> Dental hygienist Biller/coders Dental champion 	
End of month three			<ul style="list-style-type: none"> Equipment ordered Held oral health lunch n' learn for all staff with Dr. Patty Braun
September 11	Dental Hygienist Calibration for Evaluation	<ul style="list-style-type: none"> Dental hygienists IT 	
End of month six			<ul style="list-style-type: none"> First workflow finalized Dental hygienist contracted with Medicaid & CHP+ Dental hygienist has first patient encounter Practice has viable relationship with a dentist for referrals