

# Funding Opportunity : Senior Dental Services Program

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Pre-Application Conference

Funding Opportunity Number: CHA-SDSP-5.3.24

Tuesday, May 14, 11:30 AM – 12:30 PM

# PURPOSE OF PRE-APPLICATION CONFERENCE

- Overview of DC Health
- Purpose of Grant
- Funding Information
- Background
- Overview of Senior Dental Services Program
- Request for Applications Overview
- Review Key Dates

# DC Health

## Mission Statement

- The District of Columbia Department of Health promotes health, wellness and equity across the District, and protects the safety of residents, visitors, and those doing business in our nation's capital.

## Strategic Priorities

- Promote a culture of health and wellness
- Address the social determinants of health
- Strengthen public-private partnerships
- Close the chasm between clinical medicine and public health
- Implement data driven and outcome-oriented approaches to program and policy development

# Funds Available (p. 10)

- Total anticipated award amount is \$550,000 for FY2025 for 1-2 grantees
  - Floor: \$250,000
  - Ceiling: \$550,000
- Funding must be used between October 1, 2024 – September 30, 2025.
- ❖ *After the first budget period, there will be up to three (3) additional 12-month budget periods, for a total project period of October 1, 2024 – September 30, 2028*

# Grantee Eligibility (p. 10)

Eligible organizations/entities who can apply for grant funds under this RFA:

- Dental practices that are:
  - for profit or non-profit;
  - located and licensed to provide services within the District of Columbia;
  - experienced in providing comprehensive dental services to seniors;
  - actively billing DC Medicaid and Medicare; and
  - experienced in charging patients according to a formal sliding-scale fee policy.\*
- Practices located in DC's Low-Income Dental HPSA or designated as a shortage facility (e.g., FQHCs) will be given priority in the application selection process, receiving five (5) points (as noted under Evaluation Criterion 2, p. 26)

*\* Sliding-Scale Fee is a formal, posted up-front discount policy based on income or ability to pay and is tied to the Federal Poverty Level (see: <http://aspe.hhs.gov/poverty/>). Bad debt write-offs are not included.*

# Age and Oral Health (p. 12)

- Oral health is a major contributor to older adults' general health and quality of life.
- Oral health problems among older US adults include untreated tooth decay at coronal and root surfaces, gum disease, tooth loss, and oral cancer.
- Older adults' oral health needs are often complex, due to an array of factors including:
  - comorbid chronic conditions (e.g., HTN, DM);
  - physical, sensory, and/or cognitive impairments; and
  - use of medications that can cause dry mouth (xerostomia).

# Age and Oral Health (p. 12)

- Approximately 33% of DC seniors report having lost 6 or more teeth and ~11% report having lost all their natural teeth due to tooth decay or gum diseases (2020 BRFSS).
- Prevalence estimates are higher among Black residents, residents with lower income, and residents with lower educational attainment.

	Percent of DC adults aged 65+ who have lost six or more teeth due to tooth decay or gum disease, 2020	Percent of DC adults aged 65+ who have lost all of their natural teeth due to tooth decay or gum disease, 2020
<b>Total</b>	32.6%	10.5%
<b>Race</b>		
White	11.4%	*
Black	48.7%	17.9%
<b>Income</b>		
<b>Less than \$15,000</b>	57.6%	22.1%
\$15,000 - \$24,999	66.2%	22.1%
\$25,000 - \$34,999	45.4%	23.8%
\$35,000 - \$49,999	38.8%	*
\$50,000+	16.7%	*
<b>Education</b>		
<b>Less than H.S.</b>	67.4%	25.6%
H.S. or G.E.D.	52.5%	19.4%
Some post H.S.	37.8%	13.7%
College graduate	14.9%	*

# Oral Health Care Utilization and Access (p. 13)

- Approximately one in three seniors aged 65 and over report having *not visited* a dentist or dental clinic in the past year, both nationally (32.9%) and in the District (32.8%).
- The majority of US seniors are not covered by employer-sponsored dental insurance; Medicare, which covers seniors' medical care, does not cover routine dental care.
  - At varying expense, seniors enrolled in Medicare may purchase dental coverage through Medicare Advantage Plans (Part C).
- DC Medicaid provides comprehensive dental benefits; however:
  - only the most vulnerable DC seniors retain Medicaid dental coverage after age 65, when eligibility changes from 200% of the Federal Poverty Line (FPL) to 100% of FPL.



# Purpose (p. 15)

- The DC Health Community Health Administration (CHA) is requesting proposals from qualified applicants to implement the Senior Dental Services Program (SDSP).
- **The purpose of the Senior Dental Services Program is to**
  - ❖ promote the dental health and welfare of the District's seniors,
  - ❖ with a focus on increasing the percentage of District seniors who have seen a dentist for quality and comprehensive dental care in the last 12 months.

# Target Population (p. 15)

- Grantee(s) shall provide services to patients who are:
  - 65 years or older;
  - reside in DC; and
  - have an adjusted gross income (AGI) of less than \$100,000.
- All seniors who meet these criteria, regardless of insurance status, are eligible for services; however:
  - *priority for dental services should be given to seniors who are uninsured or underinsured and who are not currently engaged in dental care (i.e., have not had a dental visit within the last two years).*
- All seniors receiving individual-level services must provide proof of age, DC residency, and AGI of less than \$100,000.

# Location of Services (p. 15)

- Grantees must be located within DC.
- Services must be delivered in the following settings:
  - Clinical services shall be provided at the provider’s primary office location.
  - Outreach and education services, including dental screenings as appropriate, shall be provided at a variety of locations, such as:
    - DC-based outpatient medical and emergency department sites;
    - DC Office on Aging Senior Wellness Centers;
    - faith-based institutions; and
    - assisted living and skilled nursing facilities.
  - Sites targeted for outreach and education should be located within the provider’s service area (e.g. neighborhood, ward, within 30 minutes travel using public transportation, etc.).

# Allowable Activities (p. 16)

- Grantee funds can be used for:
  - provision of comprehensive clinical dental care services;
  - care coordination and navigation;
  - outreach and health education; and
  - data collection and reporting.
- The grantee shall ensure that the Senior Dental Services Program (SDSP) is the Payer of Last Resort.
  - The grantee will be required to coordinate services and seek third-party payment before SDSP funds are used.

# Program Strategies (pp. 16-19)

Grantee(s) shall employ strategies and implement activities in four service areas:

- ❖ Comprehensive Dental Care;
- ❖ Care Coordination and Navigation;
- ❖ Outreach and Health Education; and
- ❖ Data Collection and Reporting.

# SA1: Comprehensive Dental Care (p. 16)

- The primary grant activity is the delivery of comprehensive dental care services to seniors
  - including all medically-indicated diagnostic, preventive, restorative, and surgical clinical dental care that can be provided by a general dentist.

## ❖ Key Performance Indicators:

- **Process** – reported monthly
  - Number of SDSP patients served
  - Number of sliding fee discount services provided
- **Outcome** – reported quarterly
  - Percent increase in seniors receiving dental care at the practice compared to the previous 12-month period
  - Number and percent of seniors served who are re-initiating dental care (i.e., have not had a dental visit in previous two (2) years)
  - Number and percent of seniors served who completed their treatment plan within a 12-month period.

# SA2: Care Coordination and Navigation (p. 17)

- Grantee(s) will provide individual-level care coordination and navigation services, ensuring participants initiate and complete care.
  - See RFA (p. 17) for non-exhaustive list of care coordination/navigation services
  - Grantee(s) should engage local senior-serving organizations, including Medicaid, *to leverage any and all resources provided to seniors through existing programs, maximizing coordination and centering SDSP resources on gap filling*
- ❖ **Key Performance Indicators:**
  - **Process** – reported monthly
    - Number of SDSP patients who received care coordination and/or navigation

# SA3: Outreach and Health Education (p. 18)

- Grantee(s) shall engage in outreach and education in community settings to recruit seniors who have not been engaging in regular dental care, especially those covered by Medicaid.
  - In addition to educating seniors and/or their caregivers on oral hygiene, healthy diet, and the importance of accessing regular dental care, grantee(s) shall provide education on navigating the dental health system, including understanding and utilizing dental insurance benefits.
- ❖ **Key Performance Indicators:**
  - **Process** – reported monthly
    - Number of outreach events/activities conducted



# SA4: Data Collection and Reporting (p. 18)

- Grantee(s) will be required to collect, track, and report information on services provided and individuals served.
- Data Collection and Tracking
  - Ensuring all individuals receiving services complete intake process confirming patients' eligibility and collecting, at a minimum, basic demographic information, insurance coverage, oral health history, and barriers to care.
  - Internally tracking patient volume, performance, and quality, including extracting and analyzing patient health information (e.g., oral health status, type of dental care provided, treatment outcomes, visit/service history).
  - Tracking and evaluating grant activities, including the cost of clinical services provided, billed, and reimbursed
- Reporting
  - Monthly: narrative reporting on grant performance; data reporting for *process KPIs*
  - Quarterly: data reporting for *outcome KPIs*
  - Annual: detailed narrative report on overall budget period performance; summary data on services provided

# Application Requirements (pp. 19-24)

- The complete application package should include the following:

## ❖ Proposal Components

- Project Abstract
- Project Narrative  
(10-page maximum)
- Work Plan
- Budget Table
- Budget Justification
- Organizational Chart
- Risk Self-Assessment

## ❖ Eligibility Documents

- Certificate of Clean Hands
- Current Business License
- Current Certificate of Insurance
- Copy of Cyber Liability Policy
- IRS Tax-Exempt Determination Letter
- IRS 990 Form
- Current List of Board of Directors, on Letterhead, Signed and Dated by a Certified Official from the Board
- Assurances, Certifications, and Disclosures

# Evaluation Criteria (pp. 25-28)

- ❖ **Criterion 1:** Need (10 points)
- ❖ **Criterion 2:** Implementation (40 points)
- ❖ **Criterion 3:** Evaluative Measures (10 points)
- ❖ **Criterion 4:** Capacity (30 points)
- ❖ **Criterion 5:** Project Budget and Justification (10 points)

# Key Dates

- Notice of Funding Announcement Date: April 19, 2024
- Request for Application Release Date: May 03, 2024
- Last Day to Register in EGMS for new accounts: May 29, 2024
- Last Day to Submit Questions: June 12, 2024
- Application Submission Deadline: June 18, 2024, *by 3:00PM*

**LATE APPLICATIONS WILL NOT BE ACCEPTED**

- Anticipated Award Start Date: October 01, 2024

# Application Submission Recommendations

- Do not wait until the last minute to submit
- Submit at least 48 hours before deadline
- Applications will **not** be accepted after the deadline

# Contact Information

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Health Care Access Bureau

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*Debbie Vishnevsky – Project Officer*

Oral Health Program Manager

Health Care Access Bureau

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# Questions and Answers

- Questions will ONLY be accepted in writing
  - Please submit questions to [pcorfa@dc.gov](mailto:pcorfa@dc.gov) and reference SDSP RFA in subject line
- **Last Day to Submit Questions:** June 12, 2024
- All responses will be made available on the District Grants Clearinghouse in a FAQ document

# DC | HEALTH

GOVERNMENT OF THE DISTRICT OF COLUMBIA

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DC Health

For more information on the District's COVID-19 response, visit [coronavirus.dc.gov](https://coronavirus.dc.gov)