



JIM GIBBONS  
Governor

STATE OF NEVADA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
**DIVISION OF HEALTH CARE FINANCING AND POLICY**  
1100 E. William Street, Suite 101  
Carson City, Nevada 89701

MICHAEL J. WILLDEN  
*Director*

CHARLES DUARTE  
*Administrator*

June 28, 2010

Inter-Tribal Council of Nevada  
Alvin Moyle, President  
Daryl Crawford, Executive Director  
P.O. Box 7440  
Reno, NV 89510

Indian Health Board of Nevada  
Larry Curley, Executive Director  
1325 Airmotive Way, Suite 300  
Reno, NV 89502

Dear Sirs:


In accordance with established consultation guidelines, the Division of Health Care Financing and Policy (DHCFP) is notifying Nevada tribes of the following proposed changes in policy regarding Dental services.

In an effort to contain rising costs while ensuring Dental services are available to those individuals who need them, DHCFP is requiring that recipients who are unable to wear their denture, schedule an appointment with the issuing dentist to make the denture functional. If the issuing dentist is unable to make the denture functional resulting in the recipient requiring services from another dentist, then partial or full recoupment of payment from the issuing dentist may occur. Criteria was loosened regarding denture lost in a natural disaster such as a fire or flood to accept additional forms of documentation. An additional circumstance was added to the 5 year override limitations for recipients whom cannot have their denture made functional by the issuing dentist resulting in the recipient receiving services from another dentist. Additionally, DHCFP is now requiring that the dentist has the recipient sign a receipt for the denture when it is provided. DHCFP is also changing the policy on denture Identification Imbedding. In an effort to protect the recipient's personal information only the last four digits of the recipient's social security number will now be required in addition to the recipient's first initial and last name. Policy is also being updated regarding pre-orthodontic treatment visits to clarify that all pre-orthodontic services for HMO recipients need to be billed to the HMO for payment.

If you would like a specific consultation regarding this new policy, please contact Crystal Johnson at 775-684-3722 who will schedule a meeting. We would appreciate a reply whether or not you would like this consultation, however if we do not hear from you within 30 days from the date of this letter we will consider that an indication that no consultation is requested.

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Sincerely,

A handwritten signature in cursive script that reads "Elizabeth Aiello for Charles Duarte". The signature is written in black ink and is positioned below the word "Sincerely,".

Charles Duarte  
Administrator

Cc: Elizabeth Aiello, Deputy Administrator  
John Whaley, Chief, Business Lines  
Jennifer Frischmann, Chief, Provider Support  
Coleen Lawrence, Chief, Program Services  
Marta Stagliano, Chief of Compliance