



August 14, 2015

Christopher G. Ullrich, MD  
Committee Chair  
State Health Coordinating Committee

Greg Yakaboski, Assistant Chief  
Health Planning Section  
Division of Health Service Regulation  
2714 Mail Service Center  
Raleigh, NC 27699-2714

**RE:** Letter of support for Triangle Implant Center's Special Need Petition for a Demonstration Dental Operating Room for Wake County in the *2016 State Medical Facilities Plan*.

Dear Dr. Ullrich and Mr. Yakaboski,

I am writing to ask you to approve the request from Triangle Implant Center for an adjustment to the 2016 Proposed State Medical Facilities Plan to include a special need for a Demonstration Dental Operating Room in Wake County.

Even with recent improvements, North Carolina is still underserved with regard to dentists. There are too few to meet all of the need. The complex problem of treating dental patients is now compounded by availability of facilities and level of training in our workforce. Of the 5,000 dentists licensed in North Carolina, only a small percentage, the 195 Oral and Maxillofacial Surgeons and the 176 pediatric dentists have trained in a hospital and can qualify for hospital privileges. The other 93 percent must find another alternative for patient care as it relates to anesthesia.

In-office conscious sedation is permitted for dentists who pursue and maintain certification. A small number have pursued this. Most have not because of the complexity of managing both the anesthesia and the dental procedure at the same time. In-office general anesthesia by a trained and certified anesthesiologist is an option, but many payors, including Medicaid do not pay for the required support and oversight associated with patient preparation and recovery when general anesthesia is administered in an office. It is covered in an ambulatory surgery center and dentists can be credentialed in an ambulatory surgery center.

The facility fee is low, particularly for Medicaid. Most pediatric patients are Medicaid beneficiaries because they are the group at highest risk for the complex repair. Because the fee is low and the equipment to support dental surgery is unique, few ambulatory surgery centers in the state extend privileges to dentists.

Triangle Implant has worked with Duke Anesthesia to design a model that works in their practice. They are willing to make it accessible to other dentists. To do so, they need an ambulatory surgery license. Letting them pilot a demonstration would provide the state with an important opportunity to test this model in an area where dentists cannot get time in operating rooms and where the need is high.

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As a provider of comprehensive dental services in Alamance County, I support a demonstration dental operating room in Wake County. A demonstration would provide the state and the dental community with important insights on how a dedicated, licensed and certified dental ambulatory surgery center could provide safe, quality care for patients, affordable options for private and public payors, and increased geographic access for patients, families and providers.

The state needs an alternative. Few dental practices could manage this undertaking. Dr. Reebye and Duke have provided the leadership to address both the access and quality issues in a convenient location. I have been working with Triangle to develop an impartial credentialing committee. We ask that you provide the opportunity for the state to take a small step to test solutions.

I understand that you are considering a similar request for a center in Cumberland County, which serves a more rural population. The two locations, slightly different approaches, would provide an important test, that will save patients a great deal of pain, intervene earlier in the disease process, and possibly save money for the Medicaid program.

Thank you for your time and attention to this important matter.

Sincerely,

Ralph K. Mensah, DDS  
General Dentist

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