

Questions related to Matching Component of LB661 (Memo 9-18-15 from Ben Civic)
FROM: UNMC College of Dentistry 11-18-15

1. “the Commission will consider a pledge as match”

- a) What pledge period can be counted – i.e. can pledges made PRIOR to the signing of LB661 be counted? (assumption: intent states for new and/or expanded oral health services)

CCPE Response: Yes, pledges made prior to the effective date of this legislation may be considered as match. However, those pledges still need to conform to the match memo dated September 18, 2015 and the Oral Health fund statute. Donors who already have pledged funds could be approached again so the pledge can meet the memo requirements and now include a purpose – to be used to accomplish oral health goals, specifically those in Neb. Rev. Stat. § 85-1414.01(2). Knowing, however, that some donors cannot be contacted again and earlier pledges were general in nature and left to the discretion of the Dean, the Dean could direct existing pledges to be used specifically as matching funds for this oral health contract. If the Dean directs existing pledges to be used specifically for the oral health contract matching funds, documentation must be sufficient to identify the amount and allow for review to ensure funds are spent in accordance with statute.

- b) Can pledges from “other” entities (other than private donors) also be counted?

CCPE Response: Yes, pledges from other entities may also qualify as match if they comply with statute and the match memo.

2. “an applicant at the time of application needs to be able to show evidence of match received”

Response: Ongoing support is required in order for service programs to be sustainable for more than one year. Please elaborate on sustainability and the prohibition of future state appropriations as match.

CCPE Response: Due to the received and evidence standard noted in the match memo and in statute, future state appropriations cannot qualify as match for this oral health contract. You note that ongoing support will be necessary to sustain the program for more than one year. Financial support to implement oral health services, if part of your plan, could be paid from the oral health funds received from the state, as “any funds disbursed pursuant to the contract shall only be used for services and equipment related to the proposals in the plan.” Neb. Rev. Stat. § 85-1414.01(6). In order to carry out your services in the contract, there would necessarily be some administrative costs that would be appropriate to have included in the contract. This may help alleviate the need to use match funds to carry out the actual services included in the contract.

3. “match must be used to offer new and/or expanded oral health services to residents of Nebraska”

Question: Can matching funds from the institution be used to support expansion of the infrastructure in order to expand current clinical capacity? This would allow for new/expanded clinical services and opportunity to treat more Nebraska patients.

CCPE Response: Certainly. The oral health fund statute only limits oral health funds received from the state to services and equipment whereas there is no limitation on the use of match dollars as long as they are used for this contract and comply with statute and the match memo.

ADDITIONAL QUESTIONS:

1. Would revenue from various sources that is received during the performance period count as “other support”?

CCPE Response: Revenue received during the performance period of the contract would not qualify as match as it fails to meet the received and evidenced standard at the time of application. However, if you are generating revenue now and that revenue is in some type of reserve fund, it could then qualify as match as it has been received and can be evidenced at the time of application. Documentation must be sufficient to identify the amount and allow for review to ensure funds are spent in accordance with statute.

2. Would our internal costs for running community dental care services count as “other support” (i.e. supplies, radiographs, sterilization, travel, housing, gas)

CCPE Response: These expenses would occur during the performance period of the contract and thus the underlying funds could not be shown to have been received at the time of application.

3. LB661 currently states, “The plan shall include (a) a proposal to provide oral health training at a reduced fee to students in dental education programs who agree to practice dentistry for at least five years after graduation in a dental health profession shortage area designated by the Nebraska Rural Health Advisory Commission pursuant to section 71-5665. Questions and comments related to this:
 - a. There are already state plans in existence to reduce student loans for students practicing in these areas. Can partnerships be established with state programs such that reduction in student loans could be offered as part of a program and managed by the state in lieu of reduced tuition?

CCPE Response: The oral health statute instructs the applicant’s plan to include oral health training at a reduced fee. CCPE does not have the discretion to change that piece to a loan forgiveness program.

- b. Regarding the five year pay-back – can 1-3 years of a residency or specialty program where a student rotates in different communities of need while in a residency count toward the five year pay-back?
- c. If the plan remains as a plan with “reduced tuition”,
 - i. How many students must be offered reduced tuition?
 - ii. What constitutes “reduced”?

CCPE Response: Neb. Rev. Stat. § 85-1414.01(5) states the plan shall include oral health training at a reduced fee to students in dental education programs who agree to practice dentistry for at least five years after graduation. It is our understanding residency begins after graduation and therefore could count towards the five year requirement. Please note, the time spent practicing dentistry in a shortage area as designated by the Nebraska Rural Health Advisory Commission during residency would count toward the five year requirement. However, if a resident practices dentistry in a non-shortage area that time would not be counted. The formerly mentioned statute also specifies that reduced fee training is to be provided to “students” and therefore an applicant must offer this training to at least two students. Because the term “reduced” is not defined, training that costs less (in any amount greater than zero) than the going rate would be considered reduced. However, the success of the reduced tuition plan would depend on an appropriate amount to induce the student to participate.