



Local Dental Pilot Project Application

Application due XXXX, XX 2016

DRAFT

General Instructions

Thank you for your interest in applying to participate in the Local Dental Pilot Project (LDPP) that is part of the State of California's Medi-Cal 2020 section 1115 waiver. In order to apply, the organization that is submitting the application must be one of the eligible entities as enumerated in the special terms and conditions (STCs) of the Medi-Cal 2020 section 1115 waiver and will serve as the Lead Entity of the LDPP must complete and sign the entire application. Prior to completing this application, it is strongly suggested that applicants carefully review the STCs that govern the Medi-Cal 2020 section 1115 waiver, specifically the Dental Transformation Initiative (DTI), which is available on the Department of Health Care Services (DHCS) at: <http://www.dhcs.ca.gov/provgovpart/Pages/DTI.aspx> Other types of organizations may participate in the LDPP, as long as the organization has gained the sponsorship of an approved applicant.

- [Current Medi-Cal 2020 Special Terms and Conditions \(STCs\)](#)
- *See STCs 104-109 and Attachment JJ for information relevant to the DTI.*

LDPP applicants may sponsor a single pilot project or multiple different pilot projects to test a variety of innovations aimed at meeting the goals of this domain. The goals of Domain 4 are to increase dental prevention; caries risk assessment and disease management, and continuity of care among Medi-Cal children through innovative pilot projects implemented by alternative programs, potentially using strategies focused on urban or rural areas, care models, delivery systems, workforce, integration of oral health into primary care, local case management initiatives and/or education. Progress toward reaching pilot project(s) goals and objectives will be measured, tracked and reported by selected LDPPs with the potential for regional and/or statewide expansion of pilot project(s) demonstrating a positive impact on the oral health of target Medi-Cal populations. The specific innovation that will be tested, strategies, target population(s), budget, payment methodologies, and participating entities shall be proposed by the entity submitting the application for participation. DHCS shall approve only those applications that meet the requirements to further the goals of one (1) or more of the three (3) following dental domains or other measures closely tied to the domains:

1. Increase preventative services utilization for children;
2. Increase caries risk assessment and disease management; and
3. Increase continuity of care

LDPPs are intended to target Medi-Cal beneficiaries in need of dental services. LDPPs will identify the oral health needs of their population and propose innovations, interventions and/or strategies that would be supported through the LDPP in their application. Applications will be expected to detail a pilot project's specific goals, anticipated outcomes, data that will be used to measure whether the project is having the intended impact, and the frequency of performance metric measurements. The goals, outcomes and performance metrics for analyzing the success of the pilot project should be consistent with and build upon the performance metrics of the DTI Domains 1, 2 and 3 and should not be wholly redundant of the approaches taken in the aforementioned domains. LDPPs should consider the

potential for statewide expansion, although some pilot projects may affect rural areas or only children in tribal communities.

Please complete the LDPP application and return it to DTI@DHCS.CA.GOV no later than 5:00 pm PT on [DATE]. Incomplete applications will not be considered. DHCS reserves the right to suspend or terminate an LDPP at any time if the enumerated goals are not met, corrective action has been imposed and not addressed, and/or poor performance continues despite corrective action..

In order for this application to be considered complete for purposes of submission, all components of the application must be completed, the application must be signed, and two attachments must be included:

1. (Required) Letters of Participation Agreements and/or Support for all participating entities (See Question 1.4)
2. (Required) A funding diagram illustrating how the requested funds would flow from DHCS to the Lead Entity and how the funds would be distributed among participating entities (See Question 5.2)
3. (Optional) A description of any requested requirement exceptions. For example: If a Lead Entity cannot reach agreement with a required participating entity.

Applications will be reviewed and selected based on the process outlined in the Appendix.

The application review process and timing is as follows:

Deliverable/Activity	Date
1. DHCS releases draft LDPP program Request for Applications (RFA) and selection criteria for public comment	May 13, 2016
2. DHCS conducts webinar to review LDPP application and respond to questions from potential applicants/interested entities	May 18, 2016
3. Public comments on LDPP application and selection criteria due to DHCS	May 20, 2016
4. DHCS releases final LDPP RFA	June 1, 2016
5. LDPP applications due to DHCS	August 1, 2016
6. DHCS completes application review and sends written questions/concerns to applicants	September 15, 2016
7. LDPP responds to DHCS questions/concerns	October 1, 2016
8. DHCS makes final decisions on approved LDPP applications	October 31, 2016
9. DHCS notifies CMS of final decisions on approved LDPP applications	October 31, 2016
10. DHCS notifies applicants of LDPP selection final decisions	October 31, 2016
11. Lead LDPP entity provides formal acceptance to DHCS	November 30, 2016
12. LDPP programs commence	January 1, 2017

Section 1: LDPP Lead Entity and Participating Entity Information

The purpose of this section is to provide information about the LDPP Lead Entity and the other entities that will be participating in the LDPP.

Lead Entity Description

DHCS will accept applications for LDPPs from the designated Lead Entity, which must be a county, a city and county, a consortium of counties serving a region consisting of more than one (1) county, a Tribe, an Indian Health Program, a University of California (UC) or California State University (CSU) campus. Each LDPP application must designate the Lead Entity that will be responsible for coordinating the LDPP and be the single point of contact for DHCS and the Centers for Medicare and Medicaid (CMS). (STC 109.a)

Participating Entity Description

In addition to designating a Lead Entity, the LDPP application must identify other entities that will participate in the LDPP. Participating entities should represent a diverse set of key local partners, educational entities, Medi-Cal providers, and stakeholders demonstrating community support and collaboration including Tribes and Indian health programs, with incentives related to goals and metrics of the overall proposal.

1.1 LDPP Lead Entity and Contact Person (STC 109.a)

Organization Name	
Type of Entity	<input type="checkbox"/> County <input type="checkbox"/> City and County <input type="checkbox"/> Tribe <input type="checkbox"/> Indian Health Program <input type="checkbox"/> UC or CSU campus <input type="checkbox"/> Consortium of counties serving a region consisting of more than one county
Contact Person	
Title	
Telephone	
Email Address	
Mailing Address	

1.2 Participating Entities

Identify the participating entities in the LDPP, describe who they are, and explain their role in the LDPP. LDPP applicants may sponsor a single pilot project or multiple different pilot projects to test a variety of innovations aimed at meeting the goals of this domain. Please add additional rows as needed to the chart below.

Organization Name and Address	Description of Organization	Contact Name & Title	Role in LDPP
1.			
2.			
3.			

4.			
5.			
6.			

1.3 Letters of Participation

As part of the application submission, attach letters of support from participating entities and other relevant entities/stakeholders indicating their agreement to participate in and/or support the LDPP. Letters of support/participation should be on official letterhead and should clearly state its role with and/or support of the LDPP. (Attachment JJ.299.b.x)

1.4 Collaboration Plan

Describe a collaboration plan that includes participating entities and details how decisions will be made. Include information on how communication among the Lead Entity and the participating entities will occur, how silos will be minimized and how issues will be resolved. (Attachment JJ.299.b.ii)

Section 2: General Information and Target Population

The purpose of this section is to provide general information about the LDPP, the needs for the project and the target population.

LDPP Target Population Description

LDPP pilot projects must select a target population among Medi-Cal children ages, 0-20 to test innovations to increase prevention; address caries risk assessment and disease management, and continuity of care. LDPPs must identify the needs of their selected population. Proposed interventions should not be wholly redundant of the DTI domains.

2.1 Target Population

The target population shall be identified through a needs assessment that was conducted to identify the population(s), and include an estimated number of Medi-Cal beneficiaries to be served. The Lead Entity shall describe the needs assessment that was conducted and the data used. If the LDPP plans to have any enrollment caps for part or all of the pilot project(s), please provide information on the rationale for and level of the proposed cap for the target population. (Attachment JJ.299.b.iii)

Section 3: Services, Interventions, Care Coordination and Data Sharing

The purpose of this section is to provide information about the pilot project(s) that will be implemented and tested under the LDPP. These unique innovations, interventions, and/or strategies may focus on urban or rural areas, care models, delivery systems, workforce, integration of oral health into primary care, local case management initiatives, education or other concepts that will be tested and evaluated for success. Applicants will describe how care may be coordinated and how data will be analyzed, shared and utilized by the participating entities. Pilot projects cannot include Medi-Cal covered services or services directly reimbursed by the Medi-Cal Denti-Cal program for the target population in the geographic area(s) where the pilot project(s) is being implemented.

3.1 Services and Care Coordination

Describe the pilot project(s) under the LDPP. Describe the Medi-Cal Denti-Cal provider network that will deliver dental services. If applicable, describe how care coordination will be implemented including what each entity will be responsible for, and how the care coordination will be seamless to the beneficiary, taking into consideration other care coordination efforts by other pilot projects and/or other entities and how duplication of effort will be avoided. Explain how pilot projects will work together to meet the goals envisioned under the DTI. (Attachment JJ.299.b.iv)

3.2 Innovations, Interventions and Strategies

Describe the specific pilot project innovations, interventions and/or strategies that will be implemented and tested under the LDPP for the targeted population, including a quality improvement plan. Applications are expected to detail a pilot project's specific goals, anticipated outcomes, data that will be used to measure whether the project is having the intended impact, and the frequency of performance metric measurements. The goals, outcomes and performance metrics for analyzing the success of the pilot project should be consistent with and build upon the performance metrics of the three (3) DTI domains and should not be wholly redundant of the approaches taken in these domains. Applications should describe how the quality improvement plan will be incorporated to adjust, modify and learn from the pilot project activities implemented under the LDPP. (Attachment JJ.299.b.vi and b.viii)

3.3 Accountability

Describe how pilot projects will be monitored and the frequency of monitoring. Describe the quality improvement plan, how it will be used to adjust and modify pilot project activities and the frequency of quality improvement activities. Describe how the LDPP Lead Entity will assure compliance with its agreement with DHCS that specifies the requirements of the LDPP with STC109 and Attachment JJ of the Medi-Cal 2020 Waiver Special Terms and Conditions. Describe how the Lead Entity and participating entities will be accountable for ensuring that the targeted population receives timely, medically necessary care. (Attachment JJ.299.b.v)

3.4 Data Sharing

Describe how data sharing will occur between the LDPP and participating entities, including what data will be shared with whom and how data sharing will evolve over the life of the pilot. Indicate anticipated challenges and strategies the LDPP will employ to manage the challenges. (Attachment JJ.299.b.vii)

Section 4: Progress Reports and Ongoing Monitoring

The purpose of this section is to provide information on the progress reports the LDPP will use for ongoing monitoring of the participating entities performance.

Progress Reports Description

The LDPP shall submit quarterly and annual reports as agreed upon by DHCS and CMS upon approval of the LDPP. Continuation of the LDPP may be contingent on timely submission of all required reports.

4.1 LDPP Monitoring

Describe the Lead Entity's plan to conduct ongoing monitoring of the pilot projects and to make subsequent adjustments if poor performance or other issues are identified. This should include a process to provide technical assistance, impose corrective action and termination from the LDPP if poor performance is identified or continues. (AttachmentJJ.299.b.ix)

4.2 Data Analysis and Reporting

Describe the plan for ongoing data collection, analyses, and reporting of the LDPP innovations, interventions and/or strategies. Identify data that will be used to measure whether the project is having the intended impact, the source of the data, and the frequency of specific performance metric measurements and reporting. Describe how the data will be analyzed.

Section 5: Financing

Funding and Budget Description

Financing for up to 15 LDPPs is contingent upon the structure and design of approved applications and is limited to a maximum of twenty-five (25) percent of the annual funding limits – up to \$185 million in total funds over the duration of the LDPP. The Department intends to begin this effort in a variety of select locations and will then, subject to the demonstrated success of pilot project(s) and the availability of funding under the initiative, may seek to implement on a regional and/or statewide basis any pilot project(s) determined to be successful. The incentive funding available for preventive services, caries risk assessment and disease management, and continuity of care provided within this domain will not exceed the amount apportioned from the DTI pool for Domains 1, 2, and 3 for the applicable Demonstration Year. Incentive funding is payable to enrolled Medi-Cal dental service locations only.

5.1 Financing Structure

Describe the financing structure of the LDPP, including a description of how and to whom payments will be distributed. (AttachmentJJ.299.b.xi)

5.2 Funding Request

Define the total requested annual dollar amount for each of the Demonstration Years. Include the amounts for each element that funding is proposed, including personnel costs, fringe benefits, operating expenses, equipment expenses, subcontractor expenses, travel expenses, other and indirect costs and will exclude covered services reimbursable by Medi-Cal Dental or other federal funding resources. (AttachmentJJ.299.b.xi)

5.3 Budget

Provide the total annual requested budget amount and link it to expected value(s) or impact(s) that will be achieved each demonstration year (e.g. the performance of specific activities, interventions, supports and services, and/or outcomes) of the LDPP. (AttachmentJJ.299.b.xii)

Section 6: Attestations and Certification

6.1 Attestation

I certify that, as the representative of the LDPP Lead Entity, the Lead Entity agrees to the following conditions:

- The LDPP Lead Entity will assure appropriate participation in regular Learning Collaboratives to share best practices among participating entities, in accordance with STC 109.
- The LDPP Lead Entity will enter into an agreement with DHCS that specifies the requirements of the LDPP with STC109 and Attachment JJ of the Medi-Cal 2020 Waiver Special Terms and Conditions.
- The LDPP Lead Entity shall submit quarterly and annual reports in a manner specified by DHCS and CMS. Continuation of the LDPP may be contingent on timely submission of the quarterly and annual reports.
- The LDPP Lead Entity will report and submit timely and complete data to DHCS in a format specified by the State and as defined in the LDPP's individual agreement with the State. Incomplete and/or non-timely data submissions may lead to a financial penalty after multiple occurrences and technical assistance is provided by the State.

I hereby certify that all information provided in this application is true and accurate to the best of my knowledge, and that this application has been completed based on a thorough understanding of program participation requirements as specified in the Medi-Cal 2020 Waiver Special Terms and Conditions and Attachment JJ of said waiver.

Signature of LDPP Lead Entity Representative

Date

Appendix: Application Evaluation Process

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