



DHCS Safety-Net-Clinic Baseline Data Submittal Instructions Webinar

Dental Transformation Initiative (DTI)

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Presentation Outline

- Overview
- Data collection template instruction
 - Domain 1
 - Domain 3
- Naming convention & Resubmission instruction
- Questions



Overview

- This webinar will give Safety Net Clinic (SNC) providers instructions to properly utilize the SNC baseline data file template.
- Provide instruction on how to submit baseline and encounter data going into future program years.
- Domains 1 and 3 data collection spreadsheets are available on the DTI webpage.



Domain 1: At a glance

County Code List

COUNTY CODE OF SERVICE OFFICE LOCATION	COUNTY NAME
2	
3	1 ALAMEDA
4	2 ALPINE
5	3 AMADOR
6	4 BUTTE
7	5 CALAVERAS
8	6 COLUSA
9	7 CONTRA COSTA
10	8 DEL NORTE
11	9 EL DORADO
12	10 FRESNO
13	11 GLENN
14	12 HUMBOLDT
15	13 IMPERIAL
16	14 INYO
17	15 KERN
18	16 KINGS
19	17 LAKE
20	18 LASSEN
21	19 LOS ANGELES
22	20 MADERA
23	21 MARIN
24	22 MARIPOSA
25	23 MENDOCINO
26	24 MERCED
27	25 MODOC
28	26 MONO

NPI NUMBER	SAFETY NET CLINIC	SAFETY NET CLINIC OFFICE LOCATION ADDRESS	COUNTY CODE NUMBER	TOTAL NUMBER OF UNDUPLICATED BENEFICIARIES, AGE 1-20 AT THE DATE OF SERVICE, THAT RECEIVED A QUALIFYING PREVENTIVE SERVICE	QUALIFYING PROCEDURE CODES	TOTAL NUMBER OF BENEFICIARIES, AGE 1-20 AT THE DATE OF SERVICE, THAT RECEIVED A QUALIFYING PREVENTIVE SERVICE
123456789	123 Clinic	123 A Street, Sacramento, CA 11111	58	500	D1120	79
NO INPUT	456 Clinic	456 B Street, Marin, CA 3333	21	NO INPUT	D1206	416
	-	-	-		D1208	398
	-	-	-		D1351	815
	-	-	-		D1352	389
	-	-	-		D1510	476
	-	-	-		D1515	274
	-	-	-		D1520	427
	-	-	-		D1525	798
	-	-	-		D1550	468
	-	-	-		D1555	596
COLUMN NAME	DESCRIPTION	FILE FORMAT	EXAMPLE			
NPI NUMBER	National Provider Identifier Number, one per template	NNNNNNNN	123456789			
SAFETY NET CLINIC	Name of the Safety Net Clinic, all associated to the NPI number	Alphabetical and Numeric as Needed	123 FQHC			
SAFETY NET CLINIC OFFICE LOCATION ADDRESS	Physical address, city, state, and postal zip code where all offices are billed through. All associated to the NPI number	NNNN (Street Number) Street Name, City, STATE ABBREVIATED, NNNNN (Postal Code)	123 A Street, Sacramento, CA 11111			
COUNTY CODE NUMBER	Assigned number of the county in accordance with the list on the left. All associated to the NPI number	NN	58			
TOTAL NUMBER OF UNDUPLICATED BENEFICIARIES 1-20 AT THE TIME OF SERVICE THAT RECEIVED A QUALIFYING PREVENTIVE SERVICE	Number of unduplicated beneficiaries (no beneficiary counted twice) ages 1 through 20 at the time of service that received at least one of the specified Qualifying Preventive Services in calendar year 2014. Note: D1203/D1204 were valid Common Dental Terminology (CDT) 2011-12 codes until June 1, 2014. These CDT codes should be included in the 2014 data request to determine the baseline. D1208 is a valid CDT 2013 code for dates of service after June 1, 2014.	NNN	500			
QUALIFYING PREVENTIVE SERVICES	CDT code of each Qualifying Preventive Service. Not for input, fixed value.	DNNNN	D1120			
COUNTY CODE OF SERVICE OFFICE LOCATION ADDRESS	Reference Only to Populate County					
COUNTY NAME	Reference Only to Populate County					

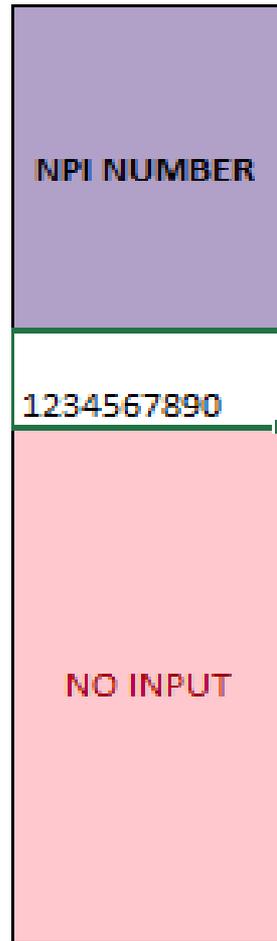
Data template

Brief instructions for each data element.

10/13/2016 Fill template out for 2014 & 2016.



Data Element: NPI Number



- National Provider Identifier Number (NPI)
 - The NPI is a ten digit numeric identifier.
 - Must use the Billing NPI associated to the clinic
 - One NPI per template.
- File Format
 - Numeric
- Example
 - 1234567890



Data Element: Safety-Net-Clinic

SAFETY NET CLINIC
123 Clinic
456 Clinic
-
-
-
-
-
-
-
-
-

- Safety-Net-Clinic
 - Name of the SNC
 - All associated to the NPI
- File Format
 - Alphanumeric
- Example
 - 123 FQHC



Data Element: SNC Office Location Address

SAFETY NET CLINIC OFFICE LOCATION ADDRESS
123 A Street, Sacramento, CA 11111
456 B Street, Marin, CA
-
-
-
-
-
-
-
-
-
-

- SNC Address
 - Physical address, city, state, and postal zip code.
 - All associated to the NPI
- File Format
 - NNNN (Street Number) Street Name, City, State Abbreviated, NNNNN (Postal Code)
- Example
 - 123 A Street, Sacramento, CA 11111



Data Element: County Code Number

COUNTY CODE NUMBER
58
21
-
-
-
-
-
-
-
-
-
-

- County Code Number
 - Assigned **number** of the county in accordance with the list found in the Domain 1 Data Collection Template.
 - All county codes associated to the NPI, one for each SNC Office Location Address.
- File Format
 - NN
- Example
 - 58 (Represents an office in Ventura County)



Data Element: Unduplicated Beneficiaries

TOTAL NUMBER OF UNDUPLICATED BENFICIARIES 1-20 AT THE TIME OF SERVICE THAT RECEIVED A QUALIFYING PREVENTIVE SERVICE
500
NO INPUT

- Unduplicated Beneficiaries
 - SNC should provide the number of unique beneficiaries (no beneficiary counted twice) ages 1 through 20 at the time of service that received at least one of the specified Qualifying Preventive Services in the calendar year.
- File Format
 - NNN
- Example
 - 500



Qualifying Procedure Codes

QUALIFYING PROCEDURE CODES
D1120
D1206
D1208
D1351
D1352
D1510
D1515
D1520
D1525
D1550
D1555

- Qualifying Procedure Codes
 - The 11 procedure codes listed are eligible to receive incentive payments in Domain 1.
 - No input required for this field.



Data Element: Total Number Of Beneficiaries, Age 1-20 At The Date Of Service, That Received A Qualifying Preventive Service

TOTAL NUMBER OF BENEFICIARIES, AGE 1-20 AT THE DATE OF SERVICE, THAT RECEIVED A QUALIFYING PREVENTIVE SERVICE
79
416
398
815
389
476
274
427
798
468
596

- Total Qualifying Preventive Service
 - The total number of duplicated services, by CDT code. Qualifying Preventive Services could be duplicated for an unduplicated beneficiary during the calendar year (e.g., topical application of fluoride varnish D1206 is covered twice a year).
- File Format
 - NNN
- Example
 - 500



Domain 1: SNC Data Submission Process

- Review, populate, and return the DTI Domain 1 spreadsheet(s) by e-mail to DTI@dhcs.ca.gov.
- Naming your file:
 - [Your clinic's name] baseline data [R]
 - Only use [R] in the file name if you are resubmitting baseline data for your clinic.
- Domain 1 baseline data is due to DHCS by **October 27, 2016.**



Domain 3: At a glance

Data template

NPI	Safety Net Clinic	Safety Net Clinic Office Location Address	County Code of Service Office Location	County Name	Medi-Cal Beneficiary BIC Number (2015)	Medi-Cal Beneficiary Last Name, First Name (2015)	D0120	D0145	D0150	County Code of Service Office	COUNTY NAME
1234567890	123 FQHC	123 A Street, West Sacramento, CA 1111	57	Yolo	90000000A95001	Smith, John	2	0	1	01	ALAMEDA
	456 FQHC	456 B Street, Marin, CA 33333	21	Marin	90000000A95002	Smith, Joe	1	1	2	08	DEL
										09	EL
										10	FRESNO
										15	KERN
										20	MADERA
										21	MARIN
										25	MODOC
										29	NEVADA
										31	PLACER
										33	RIVERSIDE
										40	SAN LUIS
										44	SANTA
										45	SHASTA
										49	SONOMA
										50	STANISLA
										57	YOLO

County Code List

Brief instructions for each data element

COLUMN NAME	DESCRIPTION	FILE FORMAT	EXAMPLE
NPI	National Provider Identifier Number for	Numeric (NNNNNNNNNN)	1234567899
Safety Net Clinic	Name of the Safety Net Clinic	Alphabetical and Numeric as Needed	123 FQHC
Safety Net Clinic Office Location Address	Physical address, city, state, and postal zip code where all offices are billed through.	NNNN (Street Number) Street Name, City, STATE ABBREVIATED, NNNNN (Postal Code)	123 A Street, Sacramento, CA 11111
County Code	County of Service Office Location.	Numeric (NN)	57
County Name	Name of County of Service Office Location.	Alphabetical	Yolo
Medi-Cal Beneficiary BIC Number (2015)	Beneficiary Identification Card (BIC) number of Medi-Cal beneficiaries under the age of 21 at the time of service that received any type of qualifying dental services (Common Dental Terminology (CDT) Codes D0120, D0150, or	Numeric (NNN)	90000000A95001
Medi-Cal Beneficiary Last Name, First Name (2015)	Last name and first name of Medi-Cal beneficiaries under the age of 21 at the time of service that received any type of qualifying dental services (Common Dental Terminology (CDT) Codes D0120, D0150, or D0145) in calendar year 2015 associated with specified BIC number.	Alphabetical as Needed	Smith, John
D0120, D0145, D0150	Input the number of times the beneficiary received the service	N	2



Domain 3: Increase Continuity of Care

Participating Counties

- Alameda
- Del Norte
- El Dorado
- Fresno
- Kern
- Madera
- Marin
- Modoc
- Nevada
- Placer
- Riverside
- San Luis Obispo
- Santa Cruz
- Shasta
- Sonoma
- Stanislaus
- Yolo

County Code of Service Office	COUNTY NAME
01	ALAMEDA
08	DEL NORTE
09	EL DORADO
10	FRESNO
15	KERN
20	MADERA
21	MARIN
25	MODOC
29	NEVADA
31	PLACER
33	RIVERSIDE
40	SAN LUIS
44	SANTA
45	SHASTA
49	SONOMA
50	STANISLAU
57	YOLO



Domain 3: SNC Data Collection Template

	A	B	C	D	E	F	G	H	I	J
1										
2				Calendar Year 2015						
3				January 1, 2015–December 31, 2015						
4				Beneficiaries Under the Age of 21 At The Time of Service						
5										
6										
7	NPI	Safety Net Clinic	Safety Net Clinic Office Location Address	County Code of Service Office Location	County Name	Medi-Cal Beneficiary BIC Number [2015]	Medi-Cal Beneficiary Last Name, First Name [2015]	D0120	D0145	D0150
8	12345678990	123 FQHC	123 A Street, West Sacramento CA 11111	57	Yolo	90000000A35001	Smith, John	2	0	1
9		456 FQHC	456 B Street, Marin, CA 33333	21	Marin	90000000A35002	Smith, Joe	1	1	2
10										
11										
12										
13										
14										
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Data Element: NPI

NPI
12345678990
NO INPUT

- Must use the billing NPI associated with the clinic
- One NPI per template



Domain 1: Baseline Submission Instruction

- Naming your file:
 - [Your clinic's name] baseline data [R]
 - Only use [R] in the file name if you are resubmitting baseline data for your clinic.
- Submit files to **DTI@dhcs.ca.gov**



Domain 3: Baseline Submission Instruction

- Naming your file:
 - [Your clinic's name] baseline data [R]
 - Only use [R] in the file name if you are resubmitting baseline data for your clinic.
- **DO NOT send completed DTI Domain 3 spreadsheets to DHCS directly or the DTI inbox.**



Domain 3: SNC Data Submission Process (Using a Secure E-mail)

- DTI Domain 3 data from Safety Net Clinics contains protected Medi-Cal beneficiary health information and must be submitted using a secure protocol.
- When you are ready to return completed DTI Domain 3 spreadsheet(s) (template available on the DTI Webpage) with the requested data, please send an email to **DTIdata@delta.org** including **ONLY**:
 - Name of the Safety Net Clinic
 - Name of the contact (who is submitting the completed DTI Domain 3 spreadsheet)
 - Contact's email address and telephone number.
 - Name of clearinghouse



Domain 3: SNC Data Submission Process (Using a Secure E-mail)

- **Completed DTI Domain 3 data spreadsheets should be submitted using a secure email inbox**
- The secure email inbox address with instructions for secure submission of the DTI Domain 3 data will be provided in response to and upon receipt of your email to **DTIdata@delta.org** with the required contact information
- Questions related to the completion of the DTI Domain 3 spreadsheets should be emailed to: **DTI@dhcs.ca.gov**.



Submitting Encounter Data for Incentive Payment

- In order to track services for incentive payment, SNCs will be required to submit data to Delta Dental, the State's Fiscal Intermediary.
- There will be two methods of submission:
 - Electronic: 837D
 - Paper: Denti-Cal Claim form



Encounter Data Submission Details: Electronic

- SNCs that submit dental encounter data through a clearinghouse, should provide the name of the that which the SNC holds a relationship with, in their initial e-mail to Delta.
- Providers who do not submit dental encounter data through a clearinghouse should follow the submission process outlined in Domain 3 SNC Data Submission Process.



Encounter Data Submission Details: Paper

- SNC providers are encouraged to submit encounter data electronically.
 - If you require hard copy submissions, this must be done using Denti-Cal Claim Forms (DC-206), which can be obtained using a Form Reorder Request, found on the Denti-Cal website under Provider Services.
- Instructions on how to complete the claim form and where to submit it can be found on the claim form or the Denti-Cal website
- Submission questions can be directed to DTI@dhcs.ca.gov



Baseline Data Opt-in & Due Date

- If you want to participate in the current demonstration year, please ensure your baseline information is provided by the deadline below.
 - Failure to submit this information timely will result in your clinic not participating in Domain 3 this demonstration year.
- Domain 3 baseline data is due to DHCS by **October 27, 2016.**



Questions?

