

Medi-Cal Dental LA Stakeholder Meeting

Meeting Agenda

Thursday, October 8, 2015

Time: 10:00 AM – 12:30 PM

Location: Maternal and Child Health Access

1111 W. Sixth Street, 4th Floor, Los Angeles, CA 90017

Call-In Number: 1-877-953-6729 Participant Passcode: 4731235

Agenda		
1.	Introductions	All
2.	Department Updates	Nik Ratliff/ Latoya Brown
3.	Full-Scope Medi-Cal For All Children- SB 75	Raul Vasquez
4.	Provider Capacity Survey	Deepika Raj
5.	California State Auditor- Audit Update	Deepika Raj
6.	Little Hoover Commission	Chris Wordlaw
7.	Fee-For –Service Performance Report	Chris Wordlaw
8.	Walk on Items	All
9.	Announcements	All
10.	Next Meeting: Thursday, December 10, 2015	

**Los Angeles County Stakeholder Meeting
August 13, 2015 - Meeting Summary Notes**

Topics	Discussion	Action Items
Attendees	Alani Jackson, Monica Ochoa, Theresa Anselmo, Sarah Benjamin, Debbie Hartman, Alisha Hightower, Jacob Vigil, Chris Wordlaw, Latoya Brown, Edward Bynum, Jennifer Pilapil, Nicette Short, Sean O'Brien, Khae Saetern, John Carvelli, Matt Robinson, Norman Williams, Eileen Espejo, Robin Flint, Ruel Nolledo, Joy Langford, Jon Chorman, Luis Gonzalez, Stella Kim, Arica Clayton-Sen. Hernandez, Dr. Barzaga, Lynn Kersey, J.Crall, Debbie Mendoza, Lee Scott, Cheng Scott, Kate Veranelli, Julie Byers, J. Kidman, Anita Garcia, Ana Castorena, Eilleen McGee-Davidson, Jason Thompson	
1. Introductions	Introductions- All	
2. Department Updates (Latoya Brown)	<p>Teledentistry - Phase I – effective July 1, 2015 Phase II – effective September 1, 2015, still pending SPA approval An updated provider bulletin will be released outlining detailed instructions for both Phase I and Phase II The provider training quick billing reference guide and the PowerPoint presentation have been modeled based on the edits provided by stakeholders, but contains more/different details than the provider bulletin offers. We are working internally with our contractors to get those documents posted as soon as possible.</p> <p>Nicette Short, California Dental Association (CDA) - Does the Live Transmissions SPA include the AB97 rate reduction exemption language?</p> <p>Deepika Raj- The live transmissions SPA is specifically for Live Transmissions and does not include AB 97 provider payment reduction dental services exemption language.</p> <p>Nicette Short, CDA- Can the rate cut reversal be retroactive to dates of service on or after July 1, 2015?</p> <p>Deepika Raj- Yes, An Erroneous Payment Correction would be issued to providers once federal approval is acquired.</p> <p>General Anesthesia- The final policy is still under internal review based on the feedback provided by stakeholders.</p>	

	<p>One last stakeholder meeting will be scheduled to present the final policy and the provider bulletin/handbook changes will be released immediately following the last meeting.</p>	
<p>3. Provider Capacity Survey (Deepika Raj)</p>	<p>The Provider Capacity Survey</p> <ul style="list-style-type: none"> • Used as an evaluation tool • Informs the Department about capacity of providers to serve adults and children <p>Chris Wordlaw- This survey can assist the Department on outreach efforts.</p> <p>Jacob Vigil, Children’s Partnership- More stakeholder input on the formulation of the methodology for the surveys would be helpful. Twenty percent of counties were left out of the sample.</p> <p>Nicette Short, CDA- Concerned with the consistency of the survey, some representatives’ spoke with office staff, and some spoke with the provider. Additionally, another concern is the initial sample of providers surveyed participates in Medi-Cal even though they are not billing providers.</p> <p>The Provider Capacity Survey will be conducted on a semiannual basis.</p> <p>Nicette Short, CDA- Did Delta Dental introduce themselves as Denti-Cal during the survey?</p> <p>Deepika Raj-Yes</p> <p>Nicette Short, CDA-Does the Department think that the responses were bias because it was Delta Dental rather that a survey company?</p> <p>Deepika Raj - The Department plans to deploy the use of a secret shopper to supplement provider network capacity survey information with a different perspective. The plan for the secret shopper survey is not fully developed at this time.</p> <p>Stakeholder feedback on the use of secret shoppers have not been discussed yet.</p> <p>David, Dental Office- Office received the survey call and thought it was a positive experience because Delta Dental was reaching out directly/personally. The call was more honest because we felt that our concerns were actually being heard.</p>	

<p>4. FQHC Challenges (FQHC Reps.)</p>	<p>FQHC Representatives</p> <p>What is the medically necessary justification for varnishes?</p> <p>Chris Wordlaw- Services provided by FQHCs are billed to, and overseen by, the medical side of the Department, so we would need to defer to their guidance on what justification should be in the patient's file when services exceed what the program allows. The medical Provider Handbook does outline the requirements for providing Early and Periodic Screening and Diagnostic Treatment Supplemental Services (EPSDT-SS).</p> <p>Sean O'Brien, Health Net- Varnishes are covers through the medical side.</p> <p>FQHC Representative - Our process is very strict and our offices never go beyond the Manual of Criteria (MOC) allowed two varnishes per year.</p> <p>First Five has a grant working in conjunction with UCLA to bring back beneficiaries that have risk factors every three months for visits.</p> <p>FQHCs' want to ensure that the MOC clearly states how many varnishes are available so that we do not run in to issues.</p> <p>Chris Wordlaw- Providers should document information in the patient's record.</p> <p>FQHC Representative- We would prefer to have something in writing before we proceed.</p> <p>Alani Jackson, The MOC is currently under review and we will reach out to the medical side for more clarification. As a reminder, varnishes are not approved alone only in conjunction with another service.</p>	<p>Dental will reach to the Medical side for clarification on additional varnishes available on the medical side.</p>
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**5. Mobile Dental Vans
(Dental Vans)**

Jacob Vigil, Children's Partnership- What is the intent of the mobile van service?

Chris Wordlaw - The mobile van service is for the Fee- for- Service contract and the provision is to serve underserved areas. Los Angeles is not one of the areas because it is a large county with higher than the 41.17% threshold.

- Alpine County- already concluded
- Calaveras County- August 2015
- Amador County- September 2015

Jacob Vigil, Children's Partnership, Is the mobile van services targeted to children?

Chris Wordlaw, No, the mobile van efforts are not specific to children. The Department wants to raise utilization rates in those counties as a whole.

Utilization data will be provided on a quarterly basis.

Nicette Short, CDA-Mobile van services pose a dental home and a continuity of care issue because there is not a system of care. How is the Department moving forward with those beneficiary protections?

What is the baseline for utilization?

Chris Wordlaw-2014 is based on children post May 1st adult restoration of some services. 2013 is based on children (no adults.)

Jim, UCLA- What is the utilization methodology?

Chris Wordlaw- HEDIS-like- 11 of 12 months. The Department is aware of the inflation when this methodology is use.

<p>6. Walk On Items (All)</p>	<p>New Dental Director Role Alani Jackson-The Department has discussed the opportunity for collaboration with the Director. Exact areas of collaborations have not been determined yet.</p> <p>FQHC Challenge Julie Byers- FQHC's with Medical and dental in one location cannot bill medical and dental appointments on the same day. Julie, Alta Medical – Encounters for medical and dental can be billed on the same day; our office does it frequently.</p> <p>Provider/ Beneficiary Outreach Focus Group Alani Jackson- The focus group is still a work in progress. The Department will follow-up with focus group participants when more information when available.</p> <p>Pregnancy Data Lynn Kersey- I know Kristina Clark is working on the cost estimate, when can the data be expected?</p> <p>Alani Jackson, The Department is still exploring if the pregnancy data would have a cost associated with the request. The Department also needs to evaluate if the data is usable.</p> <p>Chris Wordlaw-The data requested is not currently collected and the Department has limitations on what data is available. The Department wants to ensure the data will be useful/informative, given these limitations. As we have previously discussed, these limitations prevent us from having a full picture of services rendered to pregnant beneficiaries. The solution we've arrived upon we believe will get us as close as possible, but we are still cognizant of the limitations.</p>	
<p>7. Announcements (All)</p>	<p>None</p>	
	<p>Next Meeting: Thursday, October 8, 2015</p>	