

**Department of Health Care Services (DHCS)
Medi-Cal Dental Program**

Proposed Provider Participation Measurement Revisions

DHCS Presented Proposal (April 2)	DHCS Revised Proposed Provider Participation Measurement (April 21)
<p>County-Specific Dentist-to-General Population Ratio as By County Standard</p> <p>DHCS will identify counties with provider participation ratios that fall below the dentist-to-general population ratio standard as counties that lack active providers</p>	<p>DHCS will move forward with using the county-specific licensed dentist-to-general population ratio standard as benchmarks to compare provider participation ratios to.</p> <p><u>Inclusion of Age Stratification in Measurement</u> DHCS will also look at the number of adults and children in the general population by county and compare these numbers to the number of licensed dentists in the county.</p>
<p>Option 1: 1+ Services</p> <p>Provider Participation Measure methodology: <u>Numerator 1</u> – Number of rendering providers who provided 1 or more dental services in a 12-month period in the county <u>Numerator 2</u> – Number of rendering providers AND Safety Net clinics who provided 1 or more dental services in a 12-month period in the county <u>Denominator</u> – Total Medi-Cal Eligibles in the county</p>	<p>Consistent with stakeholder feedback, DHCS has decided against this approach reflecting the general consensus that providing a minimum of 1 service is too small of a threshold to consider a provider as actively participating.</p>
<p>Option 2: 25+ Beneficiaries</p> <p>Provider Participation Measure methodology: <u>Numerator 1</u> – Number of rendering providers who serviced 25 or more unduplicated beneficiaries in a 12-month period in the county <u>Numerator 2</u> – Number of rendering providers AND Safety Net clinics who serviced 25 or more unduplicated beneficiaries in a 12-month period in the county <u>Denominator</u> – Total Medi-Cal Eligibles in the county</p>	<p><u>Revised Measurement Methodology: 25+ Beneficiaries</u> Numerator: Number of rendering providers and number of safety net clinics who serviced 25, 50, 75, and 100 or more unduplicated beneficiaries in a 12-month period Denominator: Total Medi-Cal eligibles in the county</p> <p><u>Inclusion of Age Stratification in Measurement</u> DHCS will also look at the number of Medi-Cal eligible adults and children by county and compare these numbers to the number of participating providers in the county.</p>

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Additional Information to Consider Regarding Provider Participation Measurements

Referral List Information – Secondary

DHCS collects referral list information voluntarily provided by the dental provider office. The following data elements are readily available to track and inform provider participation:

- County
- Dental provider specialist information
- Languages offered

Information captured but not readily available via aggregated reporting:

- General anesthesia/sedation availability
- Type of special needs accommodated
- Age groupings seen, if limited
- Any limitation on availability to Medi-Cal patients

Provider Network Capacity Information – Tertiary

DHCS will conduct bi-annual surveys to determine the capacity of providers and safety net clinics to see Medi-Cal beneficiaries. Provider surveys will request the following information:

- Proportion of the provider's practice that serves Medi-Cal beneficiaries, stratified by children and adults
- Number of new Medi-Cal beneficiaries that can be accommodated each week, stratified by children and adults
- Provider office hours and days of operation
- Provider office wait time averages for appointments consistent with the generally accepted timely access to care standards (e.g. urgent appointments must be scheduled within 72 hours).
- Whether any limitations apply for Medi-Cal patients in obtaining an appointment
- Feedback on what the program can do to increase its provider participation

DHCS Considerations for the Future

- Spatial analysis for time and distance traveled
- Increase frequency of reporting from annual to quarterly
- Increase frequency of provider network capacity survey from bi-annual to quarterly