

Centers for Medicare & Medicaid Services
DENTAL MANAGED CARE
Network Adequacy Certification

Prepared by the California Department of Health Care Services

September 2021

Executive Summary

The Department of Health Care Services (DHCS) conducted a comprehensive review of the provider networks for each of the six contracted Dental Managed Care (DMC) plans and has concluded that all DMC plan provider networks are compliant with the annual network certification requirements set forth in Title 42, Code of Federal Regulations, Section 438.207. Federal and state laws and regulations establish state-specified network adequacy standards, which DMC plans are required to comply with as specified in the DMC contracts. DMC plans are known as Geographic Managed Care (GMC) in Sacramento County, and Prepaid Health Plans (PHP) in Los Angeles County. DHCS' network evaluation consisted of a review of the DMC plans' ability to maintain a network of providers that is sufficient in number, mix, and geographic distribution to meet the needs of the anticipated number of members in both Sacramento and Los Angeles counties.

Description of Sacramento County¹

Sacramento County is located in Northern California Central Valley at the base of the Sierra Nevada. Sacramento County has a total area of 994 square miles and county borders Sutter County to the north, El Dorado County to the northeast, Amador County to the southeast, San Joaquin County to the south, Contra Costa County to the southwest, Solano County to the west and Yolo County to the northwest. As of July 1, 2019, the United States Census Bureau estimates that Sacramento County had a population of 1,552,058.

Description of Los Angeles County²

Los Angeles County is located in Southern California and has 88 incorporated cities and many unincorporated areas. The county is home to more than one-quarter of California residents and is one of the most ethnically diverse counties in the U.S. The county is bordered by Kern County to the north, San Bernardino County on the East, Orange County and the Pacific Ocean to the South, and Ventura County to the West. As of July 1, 2019, LA County is the most populous county in the United States (U.S.), with more than 10 million residents. Its population is larger than that of 41 individual states.

¹<https://www.census.gov/quickfacts/fact/table/CA,losangelescountycalifornia,sacramentocountycalifornia/PST045219>

²<https://www.census.gov/quickfacts/fact/table/CA,losangelescountycalifornia,sacramentocountycalifornia/PST045219>

Projected Enrollment

Existing DMC contracts require the plans to develop and implement policies and procedures to mitigate the effects of disasters involving broad healthcare surge events that greatly impact the plans' delivery of dental services. In response to COVID-19, the DMC plans implemented policies and procedures to maintain access to care and continuity of services. Policies and procedures implemented included in-office safety and health measures (i.e., Personal Protective Equipment), increased member outreach through text campaign, teledentistry, dental office closures, and access to care for emergency dental treatments during closures. In April 2020, the DMC plans self-reported approximately 35-40 percent office closures with 100 percent offices opening with COVID-19 restrictions by October 2020.

The network evaluation took into account each DMC plan's ability to meet the needs of members anticipated to be enrolled in Sacramento and Los Angeles counties. To evaluate whether DMC plans have a sufficient number of providers to meet the anticipated enrollment, DHCS reviewed enrollment trends from the previous three fiscal years and assumed that trends within DMC plans would remain consistent.

Provider Network Evaluation

Members enrolled in DMC are assigned a Primary Care Dentist (PCD) when joining a DMC plan, either by choice (PHP) or automatic (GMC) assignment. Members are able to change their PCD at any time. For the purposes of this certification, General Dentists are considered PCDs. DHCS reviewed each DMC plan's network in Sacramento and Los Angeles County to verify compliance with federal and state laws and regulations. DHCS evaluated the DMC plans' provider networks to assess members' access to PCDs, specialty care dentists, and other providers of dental covered services (e.g. safety net clinics, etc.). In order for DMC plans to meet network access requirements, they must demonstrate compliance with following provider to member ratios, time and distance standards, and timely access standards:

Network Capacity – Provider to Member Ratios

DMC plans must demonstrate compliance with provider to member ratios pursuant to the DMC contract, Exhibit A, Attachment 8.B (Provider to Member Ratios). All DMC plans must demonstrate there is one full-time equivalent PCD to every 2,000 members, and one full-time equivalent network dentist (PCDs and specialists combined) to every 1,200 members within each service area. DMC plans must either meet or exceed the network capacity requirements and proportionately adjust the number of network providers to support any anticipated changes in enrollment. To validate that the providers listed on the DMC plans' reported networks provide services to enrolled plan members, DHCS requested and reviewed provider contracts for a random sample of primary and specialty dental providers.³ DHCS confirmed that the DMC plans' reported

³ Sample size was determined utilizing a statistical calculator using the following conditions: Confidence Level – 90%; Margin of Error -15%; Population Proportion – 50%; and the GMC or PHP total General Practice Dentist Count. Specialist population was no high enough to warrant the use of a Statistical calculator.

networks exceeded the required provider to member ratios and would still have the capacity to serve members even with a substantial increase in projected enrollment or decrease in provider participation. (See Figure 1.)

Geographic Network Distribution – Time or Distance Standards

DMC plans must demonstrate compliance with the time and distance standards pursuant to the DMC contract, Exhibit A, Attachment 8.E (Time and Distance Standard) on an annual basis or any time there has been a significant change in its operations that would affect the adequacy of capacity and services. DMC plans must maintain a network of PCDs that are located within 10 miles or 30 minutes from a member's residence unless the DMC plan has an approved alternative time and distance standard. DHCS utilized Geographic Information Systems software to validate and evaluate the geographic distribution of PCD provider networks for children and adults for DMC plans in Sacramento and Los Angeles counties. With the exception of four zip codes in Sacramento County and 10 zip codes in Los Angeles County for which alternate access standards (AAS) have been approved by DHCS, all other zip codes within these networks met the contractual requirements for time and distance standards for eligible members, thereby demonstrating an adequate network. (See Figure 2.)

Appointment Availability – Timely Access Standards

DMC plans must demonstrate compliance with timely access standards pursuant to the DMC contract, Exhibit A, Attachment 11.B (Access Requirements). All Plan Letter 18-003E⁴ further requires all DMC plans to submit a quarterly Timely Access and Specialty Referrals Report to DHCS to demonstrate compliance with the following appointment types:

- Initial Appointment – within 4 weeks
- Routine Appointment (non-emergency) – within 4 weeks
- Preventive Dental Care Appointment – within 4 weeks
- Specialist Appointment (adult) – within 30 **business days** from authorized request
- Specialist Appointment (children) – within 30 **calendar days** from authorized request
- Emergency Appointment – 24 hours

State and federal law regulations establish DMC plans' timely access responsibility. DMC plans must ensure continual compliance by monitoring network providers regularly and requiring corrective action when compliance is not being met. To assess compliance with these timely access standards, DHCS reviewed the DMC plans' quarterly reports and validated full implementation of the DMC plans' internal follow-up procedures and re-measurement activities to ensure timely access to primary and specialty dental care. DHCS confirmed that all six DMC plans demonstrated compliance with the timely access standards for all appointment types. (See Figure 3.)

⁴ Dental Managed Care All Plan Letters.

<http://www.dhcs.ca.gov/services/Pages/DentalAllPlanLetters.aspx>

Specialist Network and Out-of-Network Access

To evaluate whether DMC plans meet the required ratio of one full-time equivalent network dentist to every 1,200 members, DHCS incorporated the following provider types into its calculations: endodontists, oral surgeons, orthodontists, pedodontists, and prosthodontists. While there are no established ratios for dental specialties delineated in either federal or state laws, DHCS evaluated the specialist network for each DMC plan. Based on the network evaluation, DHCS concluded that DMC plans have an adequate specialist network in place to ensure access to specialty services. DHCS further reviewed DMC plans' policies and procedures to confirm that DMC plans have the ability, when required, to provide members with out-of-network access when services are not available within the network. (See Figure 4.)

Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), and Indian Health Service (IHS) Facilities

DMC plans must conduct outreach to subcontract with FQHCs, RHCs, and IHS facilities and include them as part of their provider network pursuant to the DMC contract, Exhibit A, Attachment 8.L (Subcontracts with FQHC/RHC). DMC plans are contracted with FQHCs, RHCs, and IHS facilities in Sacramento and Los Angeles counties. DHCS monitors all DMC plans to ensure contracts are in place with existing facilities. (See Figure 5.)

APPENDIX

Attachment A: Access Dental Plan

Attachment B: Health Net of California, Inc.

Attachment C: Liberty Dental Plan of California, Inc.

Figure 1: Provider to Member Ratios

Sacramento County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	111	140,215	1:1,263	1:2,000	Yes
Total Dentists	135	140,215	1:1,039	1:1,200	Yes

*Source: Plan Provider Network Report (May 2021); DHCS Data Warehouse (May 2021).

Los Angeles County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	524	132,017 134,546	1:191 1:257	1:2,000	Yes
Total Dentists	810	132,017 134,546	1:141 1:166	1:1,200	Yes

*Source: Plan Provider Network Report (May 2021); DHCS Data Warehouse (May 2021).

Figure 2: Time and Distance Standards

Sacramento County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Yes
Children	10 miles/30 minutes	Yes

*Source: DHCS Geo Maps (Jan 2021).

Los Angeles County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Yes ²
Children	10 miles/30 minutes	Yes ³

*Source: DHCS Geo Maps (Jan 2021).

On July 13, 2021, Access Dental submitted no AAS requests for zip codes in Sacramento County and one AAS for one zip code in Los Angeles County. Upon evaluation and consideration of the number of members affected, the location of the nearest network provider, and the lack of dental offices and/or fee-for-service providers in the area, DHCS approved the following AAS requests:

Sacramento County – AAS Approvals

No AAS needed.

² Standard met with AAS approval.

³ Standard met with AAS approval.

Los Angeles County – AAS Approvals

Zip Code	County	Region	PCD Type	AAS
93536	Los Angeles	Lancaster	Adult; Pediatric	35 minutes/30 miles

Figure 3: Timely Access Standards

Appointment Type	Required Standard	Standard Met (Sacramento County)	Standard Met (Los Angeles County)
Initial	Within 4 weeks	Yes	Yes
Routine	Within 4 weeks	Yes	Yes
Preventive	Within 4 weeks	Yes	Yes
Specialist (adults)	Within 30 business days from authorized request	Yes	Yes
Specialist (children)	Within 30 calendar days from authorized request	Yes	Yes
Emergency	24 hours	Yes	Yes

*Source: Plan Timely Access Deliverable (Q4 2020).

Figure 4: Contracted Specialists

Provider Type	Sacramento County	Los Angeles County
Specialists ⁴	24	286

*Source: Plan Provider Network Report (May 2021).

Figure 5: Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), and Indian Health Service (IHS) Facilities

Type	Sacramento County	Los Angeles County
FQHCs/RHCs	9	34
IHS Facilities	1	0 ⁵

*Source: Plan Provider Network Report (May 2021).

⁴ Specialist network is comprised of: endodontists, oral surgeons, orthodontists, pedodontists, periodontists, and prosthodontists.

⁵ The plan must permit Indian enrollees to obtain covered services from out-of-network (OON) Indian Health Care Providers (IHCP) and pay for those services

Figure 1: Provider to Member Ratios

Sacramento County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	171	152,656	1:893	1:2,000	Yes
Total Dentists	229	152,656	1:667	1:1,200	Yes

⁵Source: Plan Provider Network Report (May 2021); DHCS Data Warehouse (May 2021).

Los Angeles County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	572	196,520	1:344	1:2,000	Yes
Total Dentists	757	186,520	1:260	1:1,200	Yes

⁶Source: Plan Provider Network Report (May 2021); DHCS Data Warehouse (May 2021).

Figure 2: Time and Distance Standards

Sacramento County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Yes ⁶
Children	10 miles/30 minutes	Yes ⁷

⁸Source: DHCS Geo Maps (Jan 2021).

Los Angeles County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Yes ⁸
Children	10 miles/30 minutes	Yes ⁹

⁹Source: DHCS Geo Maps (Jan 2021).

⁶ Standard met with AAS approval.

⁷ Standard met with AAS approval.

⁸ Standard met with AAS approval.

⁹ Standard met with AAS approval.

On July 13, 2021, Health Net submitted AAS requests for two zip codes in Sacramento County and five zip codes in Los Angeles County. Upon evaluation and consideration of the number of members affected, approval of AAS requests in previous years, the location of the nearest network provider, and the lack of dental offices and/or fee-for-service providers in the area, DHCS approved the following AAS requests:

Sacramento County – AAS Approvals

Zip Code	County	Region	PCD Type	AAS
95615	Sacramento	Isleton	Adult; Pediatric	42 minutes/34 miles
95757	Sacramento	Walnut Grove	Adult; Pediatric	32 minutes/23 miles

Los Angeles County – AAS Approvals

Zip Code	County	Region	PCD Type	AAS
93532	Los Angeles	Lake Hughes	Adult; Pediatric	44 minutes/27 miles
93535	Los Angeles	Lancaster	Adult; Pediatric	24 minutes/13 miles
93536	Los Angeles	Lancaster	Adult; Pediatric	17 minutes/12 miles
93243	Los Angeles	Lebec	Adult; Pediatric	64 minutes/67 miles
93544	Los Angeles	Llano	Adult; Pediatric	33 minutes/27 miles

Figure 3: Timely Access Standards

Appointment Type	Required Standard	Standard Met (Sacramento County)	Standard Met (Los Angeles County)
Initial	Within 4 weeks	Yes	Yes
Routine	Within 4 weeks	Yes	Yes
Preventive	Within 4 weeks	Yes	Yes
Specialist (adults)	Within 30 business days from authorized request	Yes	Yes
Specialist (children)	Within 30 calendar days from authorized request	Yes	Yes
Emergency	24 hours from the request for appointment	Yes	Yes

Source: Plan Timely Access Deliverable (Q4 2020).

Figure 4: Contracted Specialists

Provider Type	Sacramento County	Los Angeles County
Specialists ¹⁰	58	185

¹⁰Source: Plan Provider Network Report (May 2021).

Figure 5: Federally Qualified Health Centers (FQHC), Rural Health Clinic (RHC), and Indian Health Service (IHS) Facilities

Type	Sacramento County	Los Angeles County
FQHCs/RHCs	14	49
IHS Facilities	1	0 ¹¹

¹¹Source: Plan Provider Network Report (May 2021).

¹⁰ Specialist network is comprised of: endodontists, oral surgeons, orthodontists, pedodontists, periodontists, and prosthodontists.

¹¹ The plan must permit Indian enrollees to obtain covered services from OON IHCPs and pay for those services.

Figure 1: Provider to Member Ratios

Sacramento County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	184	183,148	1:995	1:2,000	Yes
Total Dentists	243	183,148	1:754	1:1,200	Yes

¹Source: Plan Provider Network Report (May 2021); DHCS Data Warehouse (May 2021).

Los Angeles County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	872	69,747	1:80	1:2,000	Yes
Total Dentists	1,063	69,747	1:60	1:1,200	Yes

¹Source: Plan Provider Network Report (May 2021); DHCS Data Warehouse (May 2021).

Figure 2: Time and Distance Standards

Sacramento County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Yes ¹²
Children	10 miles/30 minutes	Yes ¹³

¹Source: DHCS Geo Maps (Jan 2021).

Los Angeles County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Yes ¹⁴
Children	10 miles/30 minutes	Yes ¹⁵

¹Source: DHCS Geo Maps (Jan 2021).

¹² Standard met with AAS approval.

¹³ Standard met with AAS approval.

¹⁴ Standard met with AAS approval.

¹⁵ Standard met with AAS approval.

ATTACHMENT C – Liberty Dental Plan of California, Inc.

On July 16, 2021, Liberty submitted AAS requests for two zip codes in Sacramento County and four zip codes in Los Angeles County. Upon evaluation and consideration of the number of members affected, approval of AAS requests in previous years, the location of the nearest network provider, and the lack of dental offices and/or fee-for-service providers in the area, DHCS approved the following AAS requests:

Sacramento County – AAS Approvals

Zip Code	County	Region	PCD Type	AAS
95641	Sacramento	Isleton	Adult; Pediatric	32 minutes/34 miles
95690	Sacramento	Walnut Grove	Adult; Pediatric	32 minutes/23 miles

Los Angeles County – AAS Approvals

Zip Code	County	Region	PCD Type	AAS
93535	Los Angeles	Lancaster	Adult; Pediatric	24 minutes/12 miles
93536	Los Angeles	Lake Hughes	Adult; Pediatric	44 minutes/27 miles
93563	Los Angeles	Valyermo	Adult; Pediatric	52 minutes/50 miles
92397	Los Angeles	Wrightwood	Adult; Pediatric	43 minutes/20 miles

Figure 3: Timely Access Standards

Appointment Type	Required Standard	Standard Met (Sacramento County)	Standard Met (Los Angeles County)
Initial	Within 4 weeks	Yes	Yes
Routine	Within 4 weeks	Yes	Yes
Preventive	Within 4 weeks	Yes	Yes
Specialist (adults)	Within 30 business days from authorized request	Yes	No**
Specialist (children)	Within 30 calendar days from authorized request	Yes	No***
Emergency	24 hours from the request for appointment	Yes	Yes

*Source: Plan Timely Access Deliverable (Q4 2020).

**One office: Limited hours due to COVID restrictions. Office was counseled on access and availability guidelines for appointment scheduling. The office is no longer contracted for specialty. There are 6 total offices within a 5 mile radius for specialty referrals.

***One office: Reduced chair time available due to COVID restrictions. The office was counseled on access and availability guidelines for appointment scheduling. Office has been closed to referrals until access standards are met. There are 6 total offices within a 5 mile radius for specialty referrals.

Figure 4: Contracted Specialists

Provider Type	Sacramento County	Los Angeles County
Specialists ¹⁶	59	191

Source: Plan Provider Network Report (May 2021).

Figure 5: Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), and Indian Health Service (IHS) Facilities

Type	Sacramento County	Los Angeles County
FQHCs/RHCs	10	50
IHS Facilities	1	0 ¹⁷

Source: Plan Provider Network Report (May 2021).

¹⁶ Specialist network is comprised of: endodontists, oral surgeons, orthodontists, pedodontists, periodontists, and prosthodontists.

¹⁷ The plan must permit Indian enrollees to obtain covered services from OON IHCPs and pay for those services.