

August 28, 2025

*THIS LETTER SENT VIA EMAIL*

Mr. Steve Sohn  
Chief Administrative Officer  
Liberty Dental Plan of California  
1730 Flight Way, Suite 125  
Tustin, CA 92782

**RESPONSE REGARDING CORRECTIVE ACTION PLAN FOR GREIEVANCES  
ALLEGING DISCRIMINATION**

Dear Mr. Sohn,

The Department of Health Care Services (DHCS) is writing regarding the Notice of Deficiency (NOD) sent to Liberty on May 9, 2025, in accordance with Dental Managed Care (DMC) contracts 12-89343 (GMC) and 13-90117 (PHP) and Dental All Plan Letters (APLs) 21-001 and 22-006.

On June 2, 2025, Liberty submitted a Corrective Action Plan (CAP) to DHCS stating that they submitted all grievances with a discrimination allegation component resolved between October 1, 2024, to April 11, 2025, to DHCS's designated discrimination grievance email box.

On July 1, 2025, DHCS responded to the submitted CAP from Liberty requesting supporting documentation that members with alleged discrimination grievances, which were not forwarded by Liberty to DHCS within 10 days of resolution prior to October 1, 2024, be made whole.

On July 11, 2025, DHCS hosted a Technical Assistance meeting with Liberty, during which DHCS discussed supporting documentation expectations and evidence of members being made whole. Liberty acknowledged understanding.

Liberty submitted a CAP to DHCS on July 29, 2025. Liberty stated that they emailed all grievances with a discrimination allegation component dating back to May 2021, to DHCS's designated discrimination grievance email box. DHCS has reviewed and confirms that Liberty has provided sufficient evidence to remediate CAP findings. The CAP is hereby closed, effective July 29, 2025.

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DHCS will continue to monitor Liberty's compliance with the DMC contract, federal and state regulations, and Dental All Plan Letters. DHCS reserves the right to implement sanctions or other enforcement actions should Liberty resume non-compliance with the terms of the contract. Should there be future enforcement actions, prior history can and will be factored into the enforcement actions.

If you have any questions regarding this notice, please contact DHCS at [dmcdeliverables@dhcs.ca.gov](mailto:dmcdeliverables@dhcs.ca.gov).

Sincerely,

*Original signed by:*

Dana Durham  
Chief, Medi-Cal Dental Services Division  
Department of Health Care Services

Enclosure: CAP Response Form

## Corrective Action Plan Response Form

DMC Plan: Liberty Dental Plan

The Medi-Cal Dental Managed Care (DMC) plan is required to submit a corrective action plan (CAP) within 30 calendar days. The CAP response must include completion of the prescribed columns below to include a description of the corrective action, a list of all supporting documentation submitted, and the CAP implementation date. For systemic deficiencies that may be reasonably determined to require long-term corrective action for a period longer than 30 days to fully remediate or operationalize, the DMC plan must demonstrate that sufficient progress has been made toward implementation of the CAP. In those instances, the DMC plan is required to include the dates for key milestones as well as when full compliance will be achieved. CAP reporting on the deficiency(ies) will continue through demonstrative compliance.

The Department of Health Care Services will maintain close communication with the DMC plan throughout the CAP review process and provide technical assistance as needed.

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
Liberty did not comply with APL 21-001 in the timely and accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously unsubmitted discrimination	A memo was issued to the CA Grievance and Appeals Team with the SOP "GA SOP - Anti Discrimination Process", requiring attestation of understanding & immediate implementation.	GA SOP_Memo_Signed Attestations_04.11.2025	Completed 04/11/25	<ul style="list-style-type: none"><li>» 7/1/25: DHCS accepts this documentation.</li><li>» 8/28/25: The plan submitted all outstanding discrimination grievance cases dating back to 2021, demonstrating</li></ul>

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
Grievances to make all affected members Whole.				compliance with APL 21-001. DHCS closes this CAP effective July 29, 2025. The plan does not need to provide further documentation.
Liberty did not comply with APL 21-001 in the timely and accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously unsubmitted discrimination Grievances to make all affected members Whole.	A training was conducted with the CA G&A team to review the SOP in detail and provide team opportunity to ask questions.	West Coast Team Huddle - Attendance report 4-17-25	Completed 04/17/2025	<ul style="list-style-type: none"> <li>» 7/1/25: DHCS accepts this documentation.</li> <li>» 8/28/25: The plan submitted all outstanding discrimination grievance cases dating back to 2021, demonstrating compliance with APL 21-001. DHCS closes this CAP effective July 29, 2025. The plan does not need to</li> </ul>

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
				provide further documentation.
Liberty did not comply with APL 21-001 in the timely and accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously unsubmitted discrimination Grievances to make all affected members Whole.	All grievances with a discrimination allegation component resolved between October 1, 2024 - April 11, 2025 were forwarded to the DHCS OCR's designated discrimination grievance email box (DHCS.DiscriminationGrievances@dhcs.ca.gov).	Reporting of Q4 24 _Q1 25 DiscrimGriev_DHCS	Completed 04/24/2025	<p>» 7/1/25: DHCS accepts this documentation for cases that were resolved between 10/1/24-4/11/25. However, DHCS requests documentation confirming that cases prior to 10/1/24 were forwarded to DHCS OCR to make all affected members whole.</p> <p>» 7/29/25: LDP emailed all outstanding cases back to May 2021 to the appropriate DHCS mailbox. In total 122 discrimination</p>

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
				<p>grievance cases were sent to the DHCS discrimination inbox—113 on July 24, 2025, and 9 on July 28, 2025.</p> <p>» 8/28/25: The plan submitted all outstanding discrimination grievance cases dating back to 2021, demonstrating compliance with APL 21-001. DHCS closes this CAP effective July 29, 2025. The plan does not need to provide further documentation.</p>
Liberty did not comply with APL 21-001 in the timely and	Oversight procedure to be implemented to ensure all	Weekly Oversight_CA DHCS_DiscriminationCa ses	Continuous, Started 04/28/25	<p>» 7/1/25: DHCS accepts this documentation</p>

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
<p>accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously unsubmitted discrimination Grievances to make all affected members Whole.</p>	<p>discrimination grievances that are closed the week prior are reviewed by the Lead/Supervisor to confirm timely forward to DHCS.</p>			<p>for cases that were resolved between 10/1/24-4/11/25. However, DHCS requests documentation confirming that cases prior to 10/1/24 were forwarded to DHCS OCR to make all affected members whole.</p> <p>» 7/29/25: LDP emailed all outstanding cases back to May 2021 to the appropriate DHCS mailbox. In total 122 discrimination grievance cases were sent to the DHCS discrimination inbox—113 on July 24, 2025,</p>

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
				<p>and 9 on July 28, 2025.</p> <p>» 8/28/25: The plan submitted all outstanding discrimination grievance cases dating back to 2021, demonstrating compliance with APL 21-001. DHCS closes this CAP effective July 29, 2025. The plan does not need to provide further documentation.</p>
Liberty did not comply with APL 21-001 in the timely and accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously	The formal grievance policy for the CA Medicaid market will be updated to reference the GA SOP—Anti Discrimination Process.	01. GA SOP - Anti Discrimination Process"	Estimated 06/06/2025	<p>» 7/1/25: DHCS has reviewed and denies CAP provided from Liberty submitted on June 2, 2025. The CAP is missing supporting</p>



Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
unsubmitted discrimination Grievances to make all affected members Whole.				documentation that has not yet been submitted. » 8/28/25: The plan submitted formal grievance policy specific to CA DMC, demonstrating compliance with APL 21-001. DHCS closes this CAP effective July 29, 2025. The plan does not need to provide further documentation.
Liberty did not comply with APL 21-001 in the timely and accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously unsubmitted	Grievance training materials for CA Medicaid LOB to be updated to ensure it includes requirements/references to "GA SOP - Anti Discrimination Process".	» 02. GA Memo - Discrimination Grievances_04.1 1.2025" » 03. B. Erin_CA DHCS Discrimination Cases"	Estimated 06/13/2025	» 7/1/25: DHCS has reviewed and denies CAP provided from Liberty submitted on June 2, 2025. The CAP is missing supporting documentation

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
discrimination Grievances to make all affected members Whole.		<ul style="list-style-type: none"> <li>» 04. C. Jessica_Discrimination Grievances_04.1 1.2025"</li> <li>» 05. H. Rachel_GA Memo - Discrimination Grievances_04.1 1.2025"</li> <li>» 06. S. Gloria_GA Memo - Discrimination Grievances_04.1 1.2025"</li> <li>» 07. S. Katrina_GA Memo - Discrimination Grievances_04.1 1.2025"</li> <li>» 08. V. Cynthia_GA Memo - Discrimination</li> </ul>		<p>that has not yet been completed and does not satisfactorily demonstrate that all affected members have been made whole.</p> <ul style="list-style-type: none"> <li>» 8/28/25: The plan submitted evidence of G&amp;A staff training with signed memos, as well as grievances letter requirements and internal discrimination grievance procedures, demonstrating compliance with APL 21-001. DHCS closes this CAP effective July 29, 2025. The plan does not need to</li> </ul>

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
		<p>Grievances_04.1 1.2025"</p> <p>» 09. S. Claribel_GA Memo - Discrimination Grievances_04.1 1.2025"</p> <p>» 10.CA_Medicaid _Grievance_Reso lution_Letter_Re quirements _07.02"</p> <p>» 11. Discrimination_ Grievance_Proce dure_LIBERTY _07.02"</p> <p>» "12. West Coast Team Huddle - Attendance report 4-17-25"</p> <p>» 13. System Enhancement</p>		provide further documentation.

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
Liberty did not comply with APL 21-001 in the timely and accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously unsubmitted discrimination Grievances to make all affected members Whole.	Update to the MIS to includes a reportable field to capture the date the resolution details were forwarded to the DHCS inbox for all discrimination grievances.		Estimated 06/30/2025	<p>» 7/1/25: DHCS has reviewed and denies the CAP provided from Liberty submitted on June 2, 2025. The CAP is missing supporting documentation that has not yet been completed and does not satisfactorily demonstrate that all affected members have been made whole.</p> <p>» 8/28/25: The plan submitted evidence of their MIS system being upgraded to include a reportable field that captures the date the</p>

Finding/Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comments
				resolution details were forwarded to the DHCS inbox for all discrimination grievances, demonstrating compliance with APL 21-001. DHCS closes this CAP effective July 29, 2025. The plan does not need to provide further documentation.