## **CAP Response Form**

**DMC Plan: LIBERTY Dental Plan** 

**CAP Type:** Department of Health Care Services Dental Audit

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 Dental Managed Care Unit of 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	Description of Corrective Action	Supporting Documentation (include list of file names)	Implementatio n Date	DHCS Comments
2.1.1 The Plan did not report changes to its initial screenin policy within t required timefr	LIBERTY Dental Plan (LIBERTY or Plan) reported changes to our initial screening policy to DHCS in April 2022. Aligning with the annual deliverable schedule, LIBERTY submitted timely a copy of the initial screening policy for DHCS's review and approval on January 31, 2023.  Any changes will be reported to DHCS within ten calendar days.	EXHIBIT A_2023 LIBERTY Annual Deliverables_Communication	Q1 2023	
2.1.2 The Plan did not ensure new members had an initial screenin completed wi days of enrol	LIBERTY maintains an initial screening policy that outlines our process to ensure all new members complete an Oral Health Risk Assessment (OHRA) within 90 days of enrollment. LIBERTY makes multiple attempts to obtain a	EXHIBIT B_QM PP – Oral Health Risk Assessments_Initial Screening EXHIBIT C_CA Medicaid Welcome Letter_05.25.2022	Policy Approved 12/1/2022 Report: Q4 2022	

Finding	Description of Corrective Action	Supporting Documentation (include list of file names)	Implementatio n Date	DHCS Comments
Attempts to contact	completed OHRA for all new	EXHIBIT D_2022 Q4_CA OHR		
members we	members by including a copy of the	Report		
tracked nor	OHRA Form with every new member			
documented.	packet with a self-addressed return			
	envelope. In addition to the paper			
	copy in the member welcome			
	packets, LIBERTY includes a QR			
	code on the Welcome Letter that			
	directs members online to fill out the			
	OHRA directly. Additionally, we have modified our Welcome Calls to offer			
	assistance in completing the OHRA			
	Form in real-time by connecting to a			
	live representative.			
	live representative.			
	LIBERTY has made system updates			
	to the OHRA workflow to include			
	additional attributes to capture the			
	outreach attempts and follow-up for			
	better tracking and reporting.			
	Effective Q4 2022, LIBERTY			
	implemented standardized reports to			
	review outreach strategies and			
	evaluate the effectiveness of our			
	efforts to increase the number of			
	completed OHRAs for new members			
	within 90 days of enrollment.		0.4.0000	
2.2.1	LIBERTY Dental Plan has an	EXHIBIT E_C_SHCN 834	Q4 2022	
During the aud	established process to ensure all new	Referral Report_Q4		
period, the Plad	members complete an Oral Health			
not ensure that	Risk Assessment within 90 days of			
initial screenin	enrollment and identifies members with SHCN and CHSCN for additional			
assessment we completed forN	services. In addition to self-reporting			
completed form	Services. III addition to Self-reporting	2		

Finding	Description of Corrective Action	Supporting Documentation (include list of file names)	Implementatio n Date	DHCS Comments
and CSHCN members wi days of enrol	from members, the Plan identifies members with Special Health Needs and Children with Special Health Care Needs using the Medi-Cal aid codes located in the state's eligibility file (834). The members identified as having a potential special health care need are routed to Case Management for outreach and further assistance.			
4.1.1 The review of the written record of grievances wa not thoroughly documented by t Plan's governin body of the DMC plan, the public policy body, and an officer of the DMC plan or designee.	LIBERTY has reformatted the template utilized for taking committee minutes to require a full list of all materials provided to the committee members as part of the review, oversight and improvement of our grievance systems. The updated format of committee minutes includes more details of actions and discussions that may have occurred through the quarter and during the committee, including a section dedicated to tracking process improvements and committee action items.  Following the onsite audit discussions and recommendations, LIBERTY revised the policy, "GA PP - GRIEVANCE AND APPEALS TRACKING AND REPORTING — CALIFORNIA" to clearly indicate grievances and appeals, described as the 'data logs', are provided at each level of oversight. Complete	EXHIBIT F_GA PP - Grievance and Appeals Tracking and Reporting_CA  EXHIBIT G_Grievance and Appeals Narrative	Policy Approved 8/17/2022 Q4 2022	

Finding	Description of Corrective Action	Supporting Documentation (include list of file names)	Implementatio n Date	DHCS Comments
	grievance and appeals data logs are reviewed and analysized monthly to the Dental Director and G&A committee chair as well as provided quarterly to sub-committees, QMIC and BOD.			
5.1.1 The Plan did not have the necessa information to perform effective quality improvement on its UM activitie specifically its Treatment Authorization Requests (TAR system).	LIBERTY has updated the reporting specification to ensure that TAR data is accurately reported to the Department and Plan's committees for effective oversight and quality improvement activities.  As of Q4 2022, LIBERTY incorporated daily monitoring of deferred TARs through LIBERTY's control mechanisms and internal dashboards monitored by the business area to ensure accurate reporting to DHCS and the Plan's Committees.  Additionally, in Q4 2022, the UM Committee received and reported quarterly TAR data, which is inclusive of approvals, denials, deferrals, and modifications to ensure ongoing monitoring, and oversight of timely and accurate processing of prior authorizations.  LIBERTY is confident that the enhancements made to the TAR systems reporting and oversight	EXHIBIT H_Q4 2022 Utilization Mangement Committee_TAR Oversight	Q4 2022	

Finding	Description of Corrective Action	Supporting Documentation (include list of file names)	Implementatio n Date	DHCS Comments
	monitoring demonstrates the activities to perform effective quality improvement on LIBERTY's UM activities.			
	Submitted by: Sydney Lee	Da	ate: March 3, 2023	

Submitted by: Sydney Lee Title: AVP, Quality Management