

CAP Response Form



DMC Plan: Health Net of California, Inc.

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.

The Medi-Cal Dental Services Division 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)	Implementation Date	DHCS Comments
<p>1.1.1 The Plan did not that all the provided services identified in the policies and procedures were consistent with the MOC. There were services where they were not consistent with the MOC: scaling root planing, prefabricated stainless steel crown, extra sealant, endodontic procedures for children under the age of 13, periodic evaluation fluoride, denture relines.</p>	<p>1. Health Net's delegate, Liberty Dental, revised the Quality Management Standard Operating Procedures "QM SOP - Dissemination of Regulatory and Client Updates" P&P to include all provided covered services that are consistent with the MOC. Approval pending review by Liberty UMQI Compliance Committee.</p> <p>2. Quarterly internal random assurance audits are conducted to monitor compliance.</p> <p>3. The CDT-20 MOC was implemented in July 2021. Updates to the CDT-20</p>	<p>1. QM SOP – Dissemination of Regulatory and Client Updates</p> <p>2 UM 1.1.1_2a CL PP - Internal UM Audit Process</p> <p>2. UM 1.1.1_2b CAD SOP - Dental Director Claim Determination Oversight</p> <p>2. UM 1.1.1_2c Sample CA QA Audit Committee Report</p> <p>3. UM 1.1.1_3a MOC updates memorandum</p>	<p>1. 11/30/2021</p> <p>2. Existing quarterly report</p> <p>3. 7/13/2021</p>	<p>The following documentation supports the plan's efforts to correct this finding:</p> <p>Policies and Procedures</p> <ul style="list-style-type: none"> • QM SOP – Dissemination of Regulatory Client Update <ul style="list-style-type: none"> ○ Outlines the process for the QM Department to track, update, and disseminate changes needed to P&P's, regulations, templates, and provider notifications, as prompted by email notification, APL, and online bulletins. • UM 1.1.1_21 CL PP – Internal UM Audit Process <ul style="list-style-type: none"> ○ Describes daily audit process to ensure prior authorizations and referrals are accurately processed and that CDT codes are reviewed.

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	<p>MOC were disseminated internally to the auths, claims and ops teams.</p> <p>LIBERTY issued a provider alert to all Health Net providers informing them of the CDT 20 update.</p> <p>4. The provider reference guide will be updated to include changes and approved during tMI Committee on November 30,</p>	<p>3. UM 1.1.1_3b CA - Provider Alert CDT 2020 Update</p> <p>4. Provider Reference Guide</p>	<p>3. 7/13/2021</p> <p>4. 11/30/2021</p>	<ul style="list-style-type: none"> • UM 1.1.1_2b CAD SOP – Dental Director Claim Determination Oversight <ul style="list-style-type: none"> ○ Describes ASOs process for monthly Quality Assurance Clinical Review Assessments for revision and development of policies and procedures to ensure alignment with Clinical Criteria Guidelines and the Manual of Criteria. • Monitoring & Oversight: <ul style="list-style-type: none"> • Q1 2021 – CA QA Audit Committee Report and Q2 2021 – CA QA Audit Committee Report <ul style="list-style-type: none"> ○ Evidence that the ASO conducts quarterly audits to monitor, evaluate and assess the consistency of clinical decision making in accordance with the Manual of Criteria. • UM 1.1.1_3a MOC updates memorandum <ul style="list-style-type: none"> ○ Evidence that the ASO sent an internal memorandum reminding clinical decision makers to review of the Manual of Criteria during the decision making process, and informing them of upcoming CDT-20 updates. • UM 1.1.1_3b CA – Provider Alert CDT 2020 Updates

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				<ul style="list-style-type: none"> ○ Evidence that the ASO informed providers of the upcoming CDT 20 updates. ● 1.1.1 Health Net Dental-CA PRG 11.30.21_Clean <ul style="list-style-type: none"> ○ Evidence that the ASO updated the Provider Reference Guide to reflect CDT-20. <p>This finding is closed.</p>
<p>1.1.2 The Plan's ASnot inform the prover or the member thathe denied services we consistently dered under the EPS criteria when standard program criteria were not The Plan's ASnot have a denial that references EDT service when ogram criteria has not met.</p>	<p>1. Health Net's delegate, LIBERTY Dental, will revise UM P&Ps "Coverage of EPSDT Services" and "Coverage of EPSDT Services - APPENDIX C - CA MEDICAID V.2" to include APL requirements for EPSDT services.</p> <p>2. LIBERTY Dental provided training to clinical staff on the identification and notepad documentation of EPSDT review when standard program criteria was not met for all members under the age of 21.</p> <p>3. LIBERTY Dental is implementing a system update to include the clinical notepad language in the provider and member notification. This enhancement will ensure language is included that denied services are reviewed for consideration under the EPSDT criteria when the standard program criteria is n met.</p> <p>4. LIBERTY conducts a random selection of quality assurance audits through processors and clinical reviewers to ensure that EPSDT requirements are in place and appropriate processing and clinical review are consistent with the EPSDT</p>	<p>1a. Coverage of EPSDT Services_Redlined</p> <p>1b. Coverage of EPSDT Services – APPENDIX C – CA MEDICAID V.2 REDLINED2</p> <p>2. UM 1.1.2_2a E.P.S.D.T Presentation</p> <p>2. UM 1.1.2_2b EPSDT sign in sheet</p> <p>4. UM 1.1.2_4a CL PP - Internal UM Audit Process</p> <p>4. UM 1.1.2_4b Clinical Quality Assurance Audits_Desktop_SOP</p>	<p>1. 11/30/2021</p> <p>2. 7/1/2021 (Training)</p> <p>3. 12/1/2021 (System Program enhancement)</p> <p>4. 12/1/2021</p>	<p>The following documentation supports the plans efforts to correct this finding:</p> <p>Policies and Procedures</p> <ul style="list-style-type: none"> ● 1.1.2_1a – Coverage of EPSDT Services_RED LINED <ul style="list-style-type: none"> ○ Evidence that the ASO has updated their P&P to include updates from APL 19-001 ● 1.1.2_1b – Coverage of EPSDT Services – Appendix C – CA MEDICAID V.2_RED LINED2 <ul style="list-style-type: none"> ○ Evidence that the ASO has updated their P&P to include updates from APL 19-001 <p>Trainings</p> <ul style="list-style-type: none"> ● UM 1.1.2_2a E.P.S.D.T. Presentation ● UM 1.1.2_2b EPSDT sign in sheet <ul style="list-style-type: none"> ○ Evidence that the ASO provided EPSDT training to clinical staff <p>Monitoring and Oversight</p>

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	review. A line item for EPSDT applicability was added to the audit tool.	4. UM 1.1.2_4c Clinical QA audit Review Sample Snip		<ul style="list-style-type: none"> • UM 1.1.2_4c Clinical QA audit Review Sample Snip <ul style="list-style-type: none"> ○ Evidence that the ASO added an EPSDT line item for review on the clinical audit tool
4.1.1 The Plan's membe QOC resolutiers did not contain a ar and concise expl of the Plan's decsion.	1. Staff training on letter writing to ensure that all letters contain clear and concise explanation of the Plan's decision about grievances.	1. Attendance and training materials.	1. 10/31/2021	
4.1.2 The Plan in included refero the State Fair Hearing in grievance res letters.	1. Update Grievance templates to remove State Fair Hearing reference an State Fair Hearing form from letter template.	1. Grievance Quality of Care QOC Dental LA County No 804; Grievance Quality of Service Dental LA County No 809; Grievance Quality of Care QOC Dental Sacramento County No 814; Grievance Quality of Servi	1. 12/01/2021	

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		Dental Sacramento County No 810		
<p>5.2.1 The Plan delegate training to the A The training requir the Plan’s ASO California Providr Reference G newly contracted providers did not contract requirents.</p>	<p>1. Health Net’s delegate, LIBERTY Dental Provider Relations team, made an update to the California Provider Reference Guide language to ensure provider training requirements comply with the CA Medicaid contract.</p>	<p>1. “Excerpt from the Liberty Dental California Provider Reference Guide”</p>	<p>1. 9/30/2021</p>	<p>The following documentation supports the plans efforts to correct this finding:</p> <p>Policies and Procedures</p> <ul style="list-style-type: none"> • “<i>Excerpt from the Liberty Dental California Provider Reference Guide</i>” as evidence that the plan updated their provider reference guide to reflect the 10 day timeframe required by the contract • “<i>Health Net Dental Policy and Procedure Oversight-11-16-2021-Draft.doc</i>” as evidence that the plan will conduct an assessment of the ASO vendors policies and procedures to ensure they meet all contractual requirements on a annual basis, and will review updates made to the provider reference guide and vendor p&p’s during the quarterly quality improvement meetings. • “<i>5.2.1 Policy and Procedure Assessment 2021 Milestone Timeline.docx</i>” to demonstrate the plans timeline for review of the ASO vendors P&P’s • “<i>5.2.1 Health Net Dental Policy and Procedure Oversight_12_3_2021 Revised.doc</i>” as evidence

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				<p>that the P&P has been updated to include the Milestone Timeline</p> <p>This finding is closed.</p>
<p>5.2.2 The Plan conduct and train newly added subcontractors.</p>	<p>1. Health Net's delegate, LIBERTY Dental, will add a training attestation form to the provider credentialing packet to track new provider orientation is completed in person by a Liberty Network Manager or the self-directed training/orientation within 10 days of contract activation including providers linked to a previously contracted office. The date will be logged into the MIS system for tracking purposes.</p> <p>2. A system enhancement will be added to capture training/orientation dates at the individual provider level. Any provider that fails to attest they have completed training will be routed back to the Network Managers for follow-up prior to contract activation.</p> <p>3. To track and monitor compliance with provider training/orientation requirements the Plan's delegate, LIBERTY Dental Provider Relations team will submit a quarterly report to the Plan of newly contracted providers that have</p>	<p>1.5.2.2.1a Provider Orientation Attestation – CA MEDICAID</p> <p>1. "5.2.2.1b Attestation of New Provider Orientation_Final"</p> <p>2. PR 5.2.2_2 Snip of Orientation Tab</p> <p>3. PR 5.2.2_3 HN CA Network Activity Report</p>	<p>1. 10/01/2021</p> <p>2. 12/30/2021</p> <p>3. 12/30/2021</p>	<p>The following documentation supports the plan's efforts to correct this finding:</p> <p>Policies and Procedures</p> <ul style="list-style-type: none"> "5.2.2.1a Provider Orientation Attestation - CA MEDICAID" as evidence that the plan created a policy and procedure to track provider training to ensure it is complete within 10 business days of a provider's active status. <p>Monitoring and Oversight</p> <ul style="list-style-type: none"> "PR 5.2.2_2 Snip of Orientation Tab" as evidence that the plan has implemented a system enhancement to record and monitor initial training dates. "5.2.2.1b Attestation of New Provider Orientation_Final" as evidence that the plan

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	completed orientation within 10 days of contract effective date			<p>requires providers to sign an attestation form after completing the initial training.</p> <ul style="list-style-type: none"> • "PR 5.2.2_3 HN CA Network Activity Report" as evidence that the plan is conducting a quarterly review of network additions to ensure training was completed within 10 days of the contract effective date. <p>This finding is closed.</p>

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