Los Angeles Dental Stakeholder Meeting – June 20, 2019 Department of Health Care Services (DHCS) Follow-up Items

Telephone Service Center (TSC):

- a. Interactive Voice Response (IVR) Update- Can the dial menu of the TSC include recording in the Medi-Cal threshold language?
- a. DHCS is currently working with its contractor on the capability to update the IVR. Multiple options are being explored for capability and costing. Costing is currently being finalized and an update will be provided at the October 2019 LA Stakeholder meeting.
- b. Re: the TSC, in addition to the two webinars the Department will be conducting this quarter, can an LA stakeholder call to discuss specific issues be coordinated with appropriate TSC staff?
- b. DHCS is currently working with its contractor to conduct the first webinar by late August 2019 and the second webinar in early September. Feedback and questions were received and are being incorporated. DHCS will also develop an FAQ after the webinar that will be accessible online. The FAQ will address questions covered during the webinar and questions that were asked during the webinar but were not addressed during that time.

Treatment Authorization Request (TAR) and TARNOTs (Notice of Denti-Cal Action):

- a. Update on issuing TARNOTs to Medi-Cal Dental program beneficiaries when a dental provider fails to provide additional information/respond to request for additional information (RTD) is this possible?
- a. Members are only notified when the TAR is denied, not for an RTD. Once a dental provider submits a TAR to DHCS, it is either approved, denied or returned for additional information with a 7-day average turnaround. The dental provider then has up to 45 days to respond. The member can call the TSC at any time for an update and to determine if there was a RTD. DHCS is evaluating system edits to allow for notification to be issued to members when an RTD is issued to a dental provider. DHCS will provide an update at the October LA Stakeholder meeting.
- b. Explain TARNOTs share a copy of a TARNOT, who receives a TARNOT and when? What information is included in a TARNOT? Can you provide a list of the codes that may be referenced in a TARNOT? Does information provided in a TARNOT differ depending on the recipient of the notice?
- b. TARNOTs or a Notice of Denti-Cal Action are system-generated notices mailed by the dental fiscal intermediary directly to the member and/or their authorized representatives when a procedure has been denied or deferred on a TAR. A TARNOT indicates the status of the TAR and explains why the requested service was denied, modified or deferred. Each TARNOT generated is member specific depending on the type of dental treatment they need. A list of adjudication reason codes can be found in the Provider Handbook page 7-2 and a sample of a TARNOT can be found in the Provider Handbook page 6-20.

- c. Overview of the 45-day allowance for RTDs - How does this work for providers and beneficiaries? Essentially, we're asking for a breakdown, process by process, of a TAR request. For example, if a TAR is incomplete what day is a request sent out for additional information? Is that an RTD request? If an RTD request is initiated, when does the 45-day period start? The day the TAR was submitted or the day the RTD request was sent out? Once all necessary information is submitted. does the department have the remaining 45 days to approve the treatment or does it revert to the 5 days needed to process a TAR?
- c. A provider's response to an RTD could delay the processing of a TAR, which delays a member's treatment. However, a TAR denial in most instances will generate a TARNOT to the member. The RTD process and how to complete the form is described in page 6-22 through page 6-24 and offered in the provider basic and advance seminars. For the majority of TARs the information required is a onetime submission (i.e., all required information included with the original TAR submission). The DHCS contractor reviews the TAR to determine if all information is included. If there is missing information, the TAR is generated at the time of review. TAR reviews are done in an average of 3.5 days, with the exception of orthodontic TARs. Although providers are allowed 45 days to respond to the RTD, the system does not take any action for lack of response until the 51st day. On the 51st day the document will auto deny (invalid response to the RTD or, if applicable, failure to provide radiographs/attachments).
- d. What is the criteria for the services to require a Treatment Authorization Request?
- d. Please refer to the <u>MATRIX</u> presented in the June 2019 LA Stakeholder meeting. Most dental services do not require a TAR. Historically, TARs are required for the more invasive procedures such as root canal treatment, invasive periodontal procedures, general anesthesia, etc. TARs are a tool to determine medical necessity before an invasive treatment is completed.
- e. Why are Treatment Authorization Requests necessary?
- e. Please refer to the MATRIX presented in the June 2019 LA Stakeholder meeting. DHCS has a duty to protect our patients from unnecessary procedures and to make sure procedures are medically necessary and that the most appropriate treatment is being done.
- f. How long does it take to get a response from a TAR? Does the timeline vary depending on the service or the request?
- f. Please refer to the MATRIX presented in the June 2019 LA Stakeholder meeting. DHCS contractors are contractually required to process TARs within 5 days. The timeline does not vary depending on the service or the request.

Provider Directory Update:

Is it possible to add the ability to search by language?

DHCS has implemented this search feature and anticipates it will be available on the Provider Directory by the end of September 2019.

Authorize Representatives (AR):

Clarify the specific process the Dept. has to establish authorized representatives for Medi-Cal Dental program beneficiaries – what AR form does the Medi-Cal Dental program use? Where is it located? Can an authorized representative be established by phone through a telephonic signature or is a written signature required?

Requests to be an AR can be submitted on the phone or by written correspondence; however, the Authorization for Release of PHI must be submitted before accepting the authorized representative. When the Authorization for Release of PHI form is received, signed and proper ID included, the AR request is processed within 48 hours. The Medi-Cal Dental Program uses the Authorization for Release of PHI form, located on the Medi-Cal Dental website here. More information about ARs can be found in the February 2019 follow up MATRIX.

Complaint Form:

- a. Provide more information about and a copy of the Title 22 letter referenced in the meeting--- e.g. when is it issued, to whom, is the letter available in other languages, etc. The letter is mentioned in the, "Complaints or Grievances Related to Fee-for-Service Providers" chart under "Provider Billed Beneficiary" Is the letter unique to each beneficiary?
- a. The Title 22 letter is a reminder notice issued to a provider when a member contacts the TSC stating that he/she was billed for services that are identified as covered services. The Title 22 letter is sent to both the member and provider office and is available for verbal translation in the 16 threshold languages by calling the TSC. However, DHCS intends to get this document translated in the 16 threshold languages and posted to the Medi-Cal Dental website for easy access. The letter is tracked as a complaint category and it is not specific to a member's case.
- b. If the department can accept telephonic signatures, can TSC reps assist with filling out and submitting a complaint form through the phone without having to mail out the complaint form? At the last meeting, the health plans said they did this with their complaints.
- b. DHCS is currently working with its contractor to determine whether written complaints can be completed by phone on behalf of the member. Wet signatures are only required when the release of Dental records are needed. An update will be provided during the October 2019 LA Stakeholder meeting.