This document is a compilation of frequently asked questions (FAQs) and responses regarding the Medi-Cal Dental Data Reporting Stakeholder Webinar presented on September 21, 2017. This document will be updated as necessary.

1. Is the slide deck available from the webinar? Is an audio recording available? Where can I find the dental data reports referenced in the webinar?

Answer: The presentation slides are available on the DHCS Dental Stakeholder information page and the Dental Data Reports page; however DHCS will not provide an audio recording of this webinar. The new data reports highlighted in the presentation are available on the DHCS Dental Data Reports webpage, which can be found on the DHCS Medi-Cal Dental Program website. DHCS is also actively adding Medi-Cal dental data on the California Health and Human Services Agency’s Open Data Portal.

DHCS will post additional data reports as they become available. Please send any further questions or feedback to dental@dhcs.ca.gov.

2. Where can I find disaggregated data (i.e. by county, race, ethnicity, age group, type of dental service, etc.)?

Answer: Much of this data is currently available on the DHCS Dental Data Reports webpage and, will soon be posted to the Open Data Portal. Currently, the Open Data Portal has disaggregated data on dental sealants utilization, and DHCS intends to continue expanding on the type of data as it becomes available.

For county-specific information, many of the data reports already posted on the DHCS website have information by county. Going forward, the Open Data Portal offers access to standardized data that can be easily retrieved, combined, downloaded, sorted, searched, analyzed, redistributed and re-used, by county or by other demographic factors.
3. Can DHCS provide county-specific claim and beneficiary data upon request?

Answer: DHCS has published a number of county-specific and demographic breakout reports of data across several years. Before DHCS is able to provide any additional ad hoc reports, we must first complete our statutorily required reports.

4. What type of information will be captured by the Per-Provider Report?

Answer: DHCS will display the number of providers with a specified number of claims in a given year, based on our analysis of the frequency of provider claiming. For example, the report may indicate the number of providers had fewer than five dental claims in a twelve-month period. The statute requires that DHCS publishes the frequency of provider claiming for each of these areas: annual dental visits, annual preventive dental services, annual dental treatment services, and annual examinations and oral health evaluations.

DHCS is considering whether to publish data based on rendering or billing providers. Billing providers are dental providers, by service office location, who submit claims on behalf of their associated rendering providers who rendered the billed services. Rendering providers are defined as dental providers who perform or render dental services and may have to be associated with a billing provider to participate in the Medi-Cal Dental Program.

5. Will FQHC data be included in these AB 2207 reports?

Answer: DHCS does not currently publish data reports that are only limited to FQHCs. Several dental data reports include FQHC data, such as the Quarterly Performance Measures for Fee For Service (FFS), Dental Managed Care (DMC), and the Dental Transformation Initiative (DTI) reports. FQHC data is a new addition to the performance measure reports and Annual Dental Visit is the only measure that includes FQHC encounters at this time.