

The Medi-Cal Dental Program

Advisory Panel for Medi-Cal Families



About the Dental Program

- The Medi-Cal Dental Program is responsible for the provision of dental services to Medi-Cal beneficiaries
- Delivery Systems
 - Fee-For-Service (FFS)
 - 9,912,061 Enrolled (as of July 2014)¹
 - Dental Managed Care (DMC)
 - 761,338 Enrolled (as of August 2014)²

¹FAM 110 Report, July 2014 and ACA Case Load Information, July 2014

²COPS-25 Health Care Options Monthly Plan Enrollment Status Report, August 2014

Fee-For-Service (FFS)

- Available Statewide
- Dental providers are paid on a fee-for-service basis based on a Schedule of Maximum Allowances
- Authorizations and claims are processed by the Medi-Cal Dental Fiscal Intermediary, Delta Dental
- Medi-Cal beneficiaries in FFS have the option to select any provider that is enrolled in the Denti-Cal network
- The FFS system follows the Denti-Cal Manual of Criteria (MOC)

Dental Managed Care (DMC)

- Available in Sacramento (Geographic Managed Care Program) and Los Angeles Counties (Prepaid Health Plan Program)
- There are three dental plans contracted in both counties:
 - Access Dental Plan
 - Health Net Dental Plan
 - LIBERTY Dental Plan
- Beneficiaries in DMC are assigned to a specific provider to establish a relationship, creating a “dental home”
- Dental plans must follow the Denti-Cal Manual of Criteria (MOC)

Dental Benefits

- Covered benefits available to all individuals enrolled into Medi-Cal with full scope coverage and to pregnant women with pregnancy only coverage.
- Benefits include: emergency, diagnostic, preventive, restorative, orthodontic, prosthodontics and other specialty services
- Limited restoration of Adult Dental Services on May 1, 2014

Orthodontic Services

- Available for both FFS and DMC delivery systems
- Orthodontic procedures are benefits for medically necessary handicapping malocclusion, cleft palate and facial growth management cases for patients under the age of 21 and shall be prior authorized
- Utilizes the Handicapping Labio-Lingual Deviation (HLD) Index to evaluate medical necessity for orthodontics

Medical Managed Care Plans (MCPs): Oral Health Provisions for Members < 21 Years of Age

DHCS dental contracts³ **require** that MCPs cover and ensure:

- Dental screenings/oral health assessments as part of every periodic assessment regardless of age
- Annual dental referrals to appropriate Medi-Cal dental providers
- Contractually covered prescription drugs, lab services, out-patient or in-patient pre-admission physical exams for a dental procedure

³Managed Care Boilerplate Contract-Exhibit A, Attachment 11

Medical Managed Care Plans (MCPs): Oral Health Provisions for Members < 21 Years of Age (cont'd)

DHCS contracts⁴ **encourage** Medi-Cal providers to:

- Apply fluoride varnishes for members <6 years of age, up to 3 times in a 12-month period.
- Promote fluoride varnishes via quality improvement strategies and provider trainings.

⁴MMCD All Plan Letter 07008 & Managed Care Boilerplate Contract-Exhibit A, Attachment 11

Program Monitoring and Oversight

- DHCS monitors utilization for both the FFS and DMC using 11 performance measures
- Access to care is also monitored for both FFS and DMC to ensure beneficiaries receive services timely

Performance Measures

- 11 Performance Measures and Benchmarks were added to the 2013 DMC contracts, developed from the measures previously used by Healthy Families Program and national measures used in the field of dentistry
- DHCS is required to report for FFS specific performance measures beginning October 1, 2014
 - 11 measures for children (under the age of 21)
 - 3 measures for adults (21 and over)

Utilization

For age category under 21

Performance Measures	Annual Dental Visit Percentage of members who had at least one (1) dental visit during the measurement period	Use of Preventive Services Percentage of members who received any preventive dental service during the measurement period
Denti-Cal (Dental Fee-For-Service)¹	46.1%	43.3%
DMC		
<i>Sacramento County²</i>	41.7%	34.5%
<i>Los Angeles County³</i>	40.9%	34.7%

Eligibility is based on 11 months of enrollment with no more than one month gap

Utilization

For age category under 21

Performance Measures	Use of Sealants Percentage of members ages 6-9 and 10-14 continuously enrolled in the same plan during the measurement period with no more than a one-month gap in eligibility who received a dental sealant on at least one permanent molar	
	Age Groups 6-9	10-14
Denti-Cal (Dental Fee-For-Service) ¹	19.6%	16.5%
DMC		
<i>Sacramento County</i> ²	15.9%	7.1%
<i>Los Angeles County</i> ³	13.7%	6.8%

Eligibility is based on 11 months of enrollment with no more than one month gap

Dental Utilization Rate by Plan Model

11+ mos. in same plan, CY 2013

	Ages 0-3		Ages 4-5		Ages 0-20	
<i>Plan Type</i>	Range (%)	Avg (%)	Range (%)	Avg (%)	Range (%)	Avg (%)
County Organized Health System	22.9-67.9	33.8	56.4-84.2	68.4	43.2-74.0	55.7
2-Plan Commercial	19.6-32.9	27.9	55.4-65.7	62.8	43.6-55.6	51.9
2-Plan Local Initiative	16.3-40.6	28.0	53.8-70.9	63.0	41.3-57.2	52.2
Geographic Managed Care	16.9-40.0	28.2	41.7-70.0	57.0	33.2-57.6	45.7
Fee-For-Service Medical		15.4		46.7		25.9
Dental PHP Plans	17.8-19.3	18.6	39.8-40.9	40.1	30.5-33.2	31.7
Dental GMC Plans	14.2-22.8	19.1	37.7-50.3	45.7	29.4-40.1	35.8
Denti-Cal (Dental Fee-For-Service) ¹		27.0		64.5		49.9

Dental Dashboard

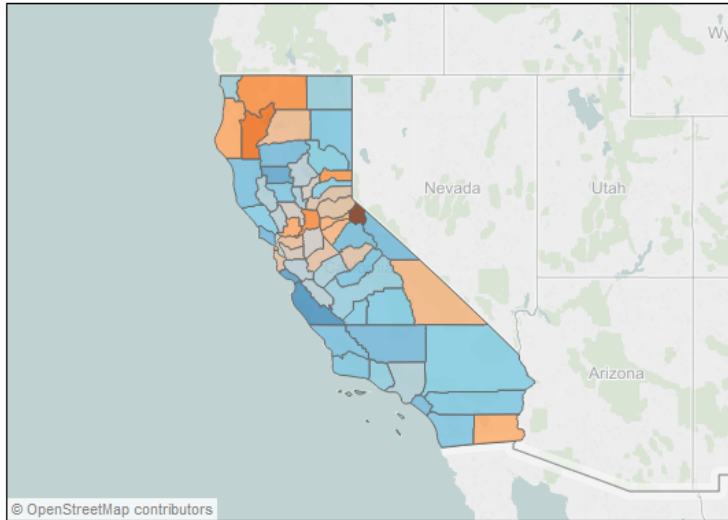
- The Dental Dashboard developed with Tableau Software is a work in progress and is intended to be an evolving tool for DHCS.
- Allows for more effective monitoring of utilization and performance, which is particularly important with many changes occurring in Medi-Cal.
- Provides access to a consistent source of information updated on a monthly basis. Allows staff to modify questions quickly and easily get answers for executive staff, legislators and other stakeholders.



Draft Dental Dashboard

Medi-Cal Dental Dashboard - EXAMPLE

Year End (M/Y)	Plan Type...	Abc
May 2011	FFS	Abc
	GMC	Abc
	PHP	Abc
June 2011	FFS	Abc
	GMC	Abc
	PHP	Abc
July 2011	FFS	Abc
	GMC	Abc
	PHP	Abc
August 2011	FFS	Abc
	GMC	Abc
	PHP	Abc
September 2011	FFS	Abc
	GMC	Abc
	PHP	Abc
October 2011	FFS	Abc
	GMC	Abc
	PHP	Abc



Year End (M/Y)
 (All) ▾

Dental Plan (current)
 (All) ▾

Plan Type: PHP GMC FFS
 (All)
 FFS
 GMC
 PHP

Aid Code by Group (MIS)
 (All) ▾

Age Adults/Children (<21)
 (All) ▾

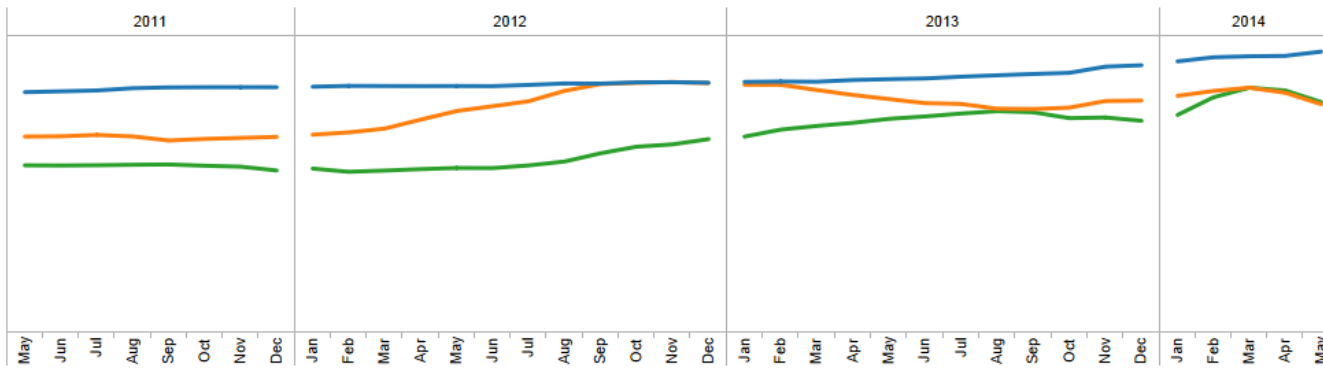
Age Breakout (<21)
 (All) ▾

Plan Type: PHP GMC FFS
 FFS
 GMC
 PHP

Instruction/Notes

Instructions

Hover over the question mark for important instructions and data notes.



Provider Network Adequacy

	# of Enrolled Rendering Providers	# Enrolled Service Office Locations	Percent Currently Accepting New Patients
Denti-Cal (Dental Fee-For-Service)	15,559	5,501	54.77%
Liberty Dental	1,053	543	81.22%
Health Net Dental	946	524	79.96%
Access Dental	1,193	662	92.15%

- All numbers provided above at statewide figures. Dental plans operate in two counties . Data from two counties were aggregated for this slide.
- DHCS is also currently monitoring timely access to care and distances traveled standards through the call centers

Oral Health Learning Collaborative

- California (CA) is 1 of 7 states selected
- Peer-to-peer learning, individual and group technical assistance from Center for Health Care Strategies (CHCS) and national experts
- Focuses on interventions aimed at achieving the Centers for Medicare & Medicaid Services (CMS) Oral Health Initiative goals

Oral Health Learning Collaborative (cont'd)

- DHCS Goals
 - Provide local Child Health & Disability Prevention (CHDP) programs with periodic report on children with no dental visit in the past year to facilitate follow-up to encourage regular dental visits (and similar one aimed at those not getting sealants)
 - Establish policy authorizing dental hygienists to provide preventive services in public health programs to be billing Denti-Cal providers

Oral Health Learning Collaborative (cont'd)

- Work with stakeholders to develop a protocol and guidelines for use by schools and School-Based Health Centers (SBHCs) interested in establishing a school-based sealant program
- Require all Federally Qualified Health Centers (FQHCs) providing dental services to Medi-Cal beneficiaries to report Current Dental Terminology (CDT) codes

Oral Health Learning Collaborative (cont'd)

- Work with other DHCS programs to provide guidance and technical assistance to California Primary Care Association (CPCA) and its members to facilitate smooth transition to reporting CDT codes.
- Develop policy and make system changes to allow Head Start and Women Infants & Children (WIC) program provision of fluoride varnish applications to be billed using supervising dentist's provider ID.

Oral Health Initiative Goals

- Centers for Medicare & Medicaid Services' (CMS) Oral Health Initiative has established goals for Medicaid programs to achieve:
 - Increase by ten percentage points, from FY 2011, the percentage of children ages 1-20 enrolled in Medicaid for at least 90 continuous days that received a preventive dental service. The target date for this goal is FY 2015.
 - Increase by ten percentage points the percentage of children ages 6-9 enrolled in Medicaid for at least 90 continuous days that received a sealant on a permanent molar.

Pediatric Dental Outreach

- The goal of the Pediatric Dental Outreach initiative is to increase dental utilization for children ages 0-3 through a targeted mailer
- DHCS is collaborating with First 5, Children Now and Children's Partnership
- DHCS will assess initiative success through monitoring of dental claims activity
- Pediatric Dental Outreach initiative implementation target date:
 - January 2015

Medical Dental Collaboration

- Los Angeles based pilot project that seeks to improve access to dental care for children aged 0-6
- Project partners include Children Now, CHCS, Medi-Cal medical and dental managed care plans, and DHCS
- Project success will be assessed through monitoring of dental billing activity for identified beneficiaries
- Medical Dental Collaboration Project implementation target date:
 - Winter 2014/2015

Value-Based Purchasing

- Concept was developed by Dr. Paul Glassman from the University of Pacific School of Dentistry
 - Allows for the creation of health plan contracts that include incentives based on the oral health outcomes of either target populations or the entire eligible population
 - This model would be compatible with other concepts DHCS is currently exploring
- DHCS is reviewing this concept more extensively for future efforts
 - Dr. Robert Isman has been representing DHCS on a small advisory group to help conceptualize the model

Assembly Bill 1174 & Teledentistry

- Assembly Bill (AB) 1174:
 - Stipulates that face-to-face contact between a health care provider and a patient is not required under the Medi-Cal program for teledentistry by store and forward
 - Would expand the scope of practice for dental assistants and hygienists by treating patients at the originating site, while a dentist or other specialist at the distant site reviews transmitted information for appropriate diagnosis and treatment
- DHCS will be implementing teledentistry in 2015 for use in the Medi-Cal program

General Anesthesia Services

- DHCS has undertaken a variety of steps to address the issues regarding access to general anesthesia (GA) and Sutter Medical Group's impending termination of GA services provided with dental services
- DHCS is working with many stakeholder groups to address the issues surrounding GA services in order to collaborate on creating solutions
- DHCS will be clarifying policies related to GA to inform both the DMC plans and Medical Managed Care plans of their responsibilities, requiring necessary changes to their processes for ensuring access to care

Role of the Advisory Panel for Medi-Cal Families to Dental Services

- The Advisory Panel for Medi-Cal Families provides expertise to advise DHCS on Medi-Cal health care services for children, including dental services.
- Collaboration with DHCS is vital for addressing challenges and issues facing the Medi-Cal Dental Program and the delivery of dental benefits.

Questions?