Corrective Action Plan Response Form

DMC Plan: Liberty Dental Plan

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 and Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comme nts
Liberty did not comply with APL 21-001 in the timely and accurate submission of all discrimination grievances to DHCS and the appropriate remediation of any previously unsubmitted	Liberty followed all required member facing grievance and appeal procedures to include making members whole. Liberty, however, did not independently forward the case copies to the State within 10 calendar days after resolution due to a breakdown in communication and inadequate policies and procedures.	 GA SOP_Memo_Signed Attestations_04.11.20 25 West Coast Team Huddle - Attendance report 4-17-25 	 Complete d 04/11/20 25 Complete d 04/17/20 25 	



Finding and Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comme nts
discrimination Grievances to make all affected members Whole.	 A memo was issued to the CA Grievance and Appeals Team with the SOP "GA SOP - Anti Discrimination Process", requiring attestation of understanding & immediate implementation. A training was conducted with the CA G&A team to review the SOP in detail and provide team opportunity to ask questions. All grievances with a discrimination allegation component resolved between October 1, 2024 - April 11, 2025 were forwarded to the DHCS OCR's designated discrimination grievance email box (DHCS.DiscriminationGrieva nces@dhcs.ca.gov). Oversight procedure to be implemented to ensure all 	 Reporting of Q4 24 _Q1 25 DiscrimGriev_DHCS Weekly Oversight_CA DHCS_Discrimination Cases PENDING; To be provided upon update/approval PENDING; To be provided upon update PENDING; To be provided upon implementation 	 Complete d 04/24/20 25 Continuo us, Started 04/28/25 Estimated 06/06/20 25 Estimated 06/13/20 25 Estimated 06/30/20 25 	



Finding and Summary	Action Taken	Supporting Documentation	Implementation Date	DHCS Comme nts
	discrimination grievances that are closed the week prior are reviewed by the Lead/Supervisor to confirm timely forward to DHCS.			
	Formal grievance policy for CA Medicaid market to be updated to reference the sop "GA SOP - Anti Discrimination Process".			
	» Grievance training materials for CA Medicaid LOB to up updated to ensure it includes requirements/references to "GA SOP - Anti Discrimination Process".			
	» Update to the MIS to includes a reportable field to capture the date the resolution details were forwarded to the DHCS inbox for all discrimination grievances.			

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