

# Medi-Cal Dental LA Stakeholder Meeting

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## Meeting Agenda

Date: Thursday, January 10, 2013

Time: 10:00 AM – 12:30 PM

Location: Community Health Council

3731 Stocker Street, Suite 201

Los Angeles, CA 90008

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Toll Free Call-In Number 1-877-952-6960

Participant Passcode 8035226

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**Welcome**      **Alisha Sipin, Chief, Dental Managed Care Contract & Analysis Unit**

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**Introductions**      **All**

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The purpose of the Medi-Cal Dental Los Angeles Stakeholder Meeting is to: 1) identify barriers to dental care access to dental services in the Medi-Cal Dental program in Los Angeles County and 2) identify and implement solutions to improve access to dental care for these beneficiaries, including: children, pregnant women and those receiving services in an ICF/SNF

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### Discussion

- Immediate Action Expectations
    - Plan/Stakeholder Feedback
  - Healthy Families Program
    - DHCS Update
    - Plan/Stakeholder Feedback
  - Medical/Dental Collaboration
    - DentaQuest Update
  - Increasing Provider Choice
    - Choice Form revisions
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### Conclusion

- Additional Items
    - Children and Pregnant Women
      - Utilization Reporting
      - Increase Access
  - Recap
  - Next steps
  - Meeting Minutes
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**Next Meeting: Thursday, February 14, 2013 (10:00 AM – 12:30 PM)**

**Medi-Cal All Plan Dental Meeting – Los Angeles County  
November 8, 2012 - Meeting Summary Notes**

Topics	Discussion	Action Items
<b>Immediate Action Expectations</b>	<p>Changes</p> <ul style="list-style-type: none"> <li>- Table 1 and 2 are roll ups</li> <li>- Table 7, % of no show instead of actual numbers</li> </ul>	Please email Alisha if there are any questions
<b>Healthy Families Program</b>	<p>Update</p> <ul style="list-style-type: none"> <li>- LA transition will begin March 1, 2013. Beneficiaries in LA have received general notice. 60 and 30 day notices have not gone out yet. Will be Medi-Cal transition</li> <li>- Provider bulletin to pull up letters the families will be receiving</li> </ul> <p>Certified Application Assistants</p> <ul style="list-style-type: none"> <li>- Educational documents and develop workgroup</li> </ul> <p>Los Angeles Department of Public Social Services</p>	Alisha will send out bulletin with 30 and 60 day notice to everyone
<b>Children and Pregnant Women</b>	<p>Utilization Reporting</p> <ul style="list-style-type: none"> <li>- LA utilization data for under 21, pregnant women difficult due to aid codes</li> <li>- Data may have a lag in utilization because providers do not submit right away</li> </ul> <p>Increasing Access</p> <ul style="list-style-type: none"> <li>- Look into starting a workgroup for pediatric oral health</li> <li>- Start a baseline assessment and where to make changes by looking at geographic pockets</li> <li>- Beneficiaries are unaware of their dental benefits.</li> <li>- What are some educational issues that lead to access?</li> </ul>	DHCS will try to have pregnant women utilization data by next meeting
<b>Medical/Dental Collaboration</b>	<p>Planning advisory committee looking to add dental and medical representatives. Provide feedback with MRMIB. Children Now are looking for providers' feedback on implementation strategies developed last year. Create medical bulletin for providers to provide information on pregnant women and that they have benefits, this was done previous. More information on prenatal bulletin and how often it will be updated with be provided.</p>	Please email questions to Eileen Espejo at <a href="mailto:eespejo@childrennow.org">eespejo@childrennow.org</a>
<b>Informing Materials</b>	<p>Informing materials located on Denti-Cal website.</p>	<p>Alisha will send out Educational Brochure</p> <p>Alisha will send out Informational Brochure for feedback and finalization</p>
<b>Increasing Provider Choice</b>	<p>Insert is added in a different color if there are changes in the booklet that could not be made on time.</p> <p>LA County provides personal providers list</p> <p>MAXIMUS is not authorized to make any changes to submitted information</p> <p>Online options</p>	

	<p>Changing the actual form is not likely to happen  Directions on the back to better fill out the medical choice forms  Cambodian language is Khmer  Educational brochure was sent to all members along with the letters from the dental plans  Information Brochure is directed towards providers, stakeholders, community members  Something that should be highlighted out throughout the packet  Have people select their dental plan and dentist  More information about what families were getting  Welcome packet went out to stakeholders for review  One form of selecting provider is through the choice packet  Packet not county specific, goes out to all enrollees</p>	
<p><b>Additional Items</b></p>	<p>Pediatric Oral Health Access Strategy</p> <ul style="list-style-type: none"> <li>- The department is moving ahead to satisfy CMS directives. CMS taking steps to improve access to dental services. Goal is to increase proportion children from age 1-20 by 10% point over a 5 year period. All states are required to submit annual treatment of utilization. CMS is focusing on 1-20 year olds continuously enrolled for 90 days. CA reported 40.3%. CMS wants CA to increase goal to 50.3% points over a 5 year period. Increase proportion age 6-9 who received sealants to 26.1%. Template provides background info. CMS hopes to make this mandatory requirement for states but due to Affordable Care Act has made it voluntary. CMS interested in CA because it has been one of the poor performing states.</li> </ul> <p>Provider Referral list online</p> <ul style="list-style-type: none"> <li>- Changes to Denti-Cal website</li> <li>- Interface where information is entered in and will bring you to the website</li> <li>- Website will allow you to search all Denti-cal providers</li> </ul> <p>Beneficiary Provider Customer Service Line  HFP Webinar is next week</p> <p>November 9 – Hearing in Culver City from 2-5pm on Children’s Oral Issues in Los Angeles County  9770 Culver Boulevard  Culver City, CA</p> <p>NEXT MEETING DECEMBER 13, 2012 (10:00AM-12:30PM)</p>	<p>State and Stakeholders work to come up with ideas to help encourage access to dental care and receiving sealants. Please send ideas to Dr. Isman  <a href="mailto:Robert.Isman@dhcs.ca.gov">Robert.Isman@dhcs.ca.gov</a></p>

Immediate Action Expectation Reporting  
Prepaid Dental Health Plan - Los Angeles  
December 2012 Stakeholder Meeting Report

Table #	Report Title	Reporting Period
1	Beneficiary Letter Campaign	November-12
2	Outbound Call Campaign	November-12
3	Pay for Performance Summary	October-12
4	Provider and Specialist Enrollment	November-12
5	Provider Education	November-12
6	FQHC Enrollment Tracking	November-12
7	Timely Access Report Summary	October-12

**Dental Plans Reporting**

Access Dental Plan  
Care 1st Dental Plan  
Health Net Dental Plan  
LIBERTY Dental Plan  
Safeguard Dental Plan  
Western Dental Plan

**Next Reporting Due Date**

December 2012 Immediate Action Reporting DUE Jan 7, 2013  
November 2012 Utilization Reporting DUE Jan 22, 2012

**Questions about reporting please email:**

[dentalmanagedcare@dhcs.ca.gov](mailto:dentalmanagedcare@dhcs.ca.gov)

**TABLE 1**

Plans are expected to develop and distribute a beneficiary letter that provides information on the benefits available, a short narrative on the importance of dental care for children, and information on their assigned primary care dentist, including office location and telephone number. The letter should also include the plan's contact information as well as contact information for Medi-Cal Dental Managed Care. It is expected that the plans send two separate letters for the 0-5 year old members and the 6-21 year old members. The 0-5 year old letter should be developed and worked on in coordination with First 5. This table reflects the results of the letters.

<b>Beneficiary Letter Campaign - November</b>	<b>Access</b>		<b>Care 1st</b>		<b>HealthNet</b>		<b>LIBERTY</b>		<b>Safeguard</b>		<b>Western</b>	
Total calls received referencing letter/flyer	116		8		23		7		N/A		0	
Appointments Set	2		1		1		0		N/A		0	
Other Info Given/Questions Answered	114		7		18		6		N/A		0	
Grievances/Complaints Received	0		0		0		1		N/A		0	
Total # of Undeliverable Mail	2,671	3%	186	2%	898	3%	952	15%	N/A	N/A	524	2%
Total number mailed	89,127		10,741		31,781		6,512		19,636		27,821	

**NOTES:**

Access - Mailing of Plan Brochure completed July 2012

Care 1st - Mailing of Plan Brochure completed August 2012

LIBERTY - Mailing of Plan Brochure completed August 2012

Safeguard - Mailing of Plan Brochure completed August 2012

Western - Mailing of Plan Brochure completed July 2012

**Report is a roll-up of data since the beginning of the Beneficiary Letter Campaign.**

If a section is marked n/a it means the plans did not capture information during reporting period or information not available

*December data is due to DHCS 1-7-13.*

*Updated with 12-5-12 plan data submissions.*

***JP Updated 12-5-2012***

**TABLE 2**

Plans are expected to conduct a phone call campaign that will involve making a phone call to beneficiaries who have not been seen by their primary care dentist in the last year. The purpose of the call will be to set up an appointment for the beneficiary with their primary care dentist. In addition, the beneficiary should be educated on their right to timely access to care and what to do in situations where the beneficiary is having trouble accessing services. This table reflects the results of the phone calls that were made in the reporting month. Once the initial campaign is over the total results will be reported.

<b>Outbound Call Campaign - November</b>	<b>Access</b>		<b>Care 1st</b>		<b>Health Net</b>		<b>LIBERTY</b>		<b>Safeguard</b>		<b>Western</b>	
# of Eligible (0-20) for month reporting	101,247		10,614		31,760		12,570		9,838		26,646	
# of Calls Made	34,110		1,549		8,642		3,204		N/A		33,068	
Wrong # and/or Phone # Out of Service	1,271	4%	197	13%	1,308	15%	497	16%	N/A	N/A	1,927	6%
Appt Scheduled	2,465	7%	180	12%	785	9%	81	3%	N/A	N/A	1,200	4%
Left Message	8,312	24%	636	41%	3,611	42%	1,451	45%	N/A	N/A	23,540	71%
Member Declined	5,343	16%	213	14%	1,089	13%	543	17%	N/A	N/A	0	0%
Member Hung Up	8,470	25%	213	14%	972	11%	543	17%	N/A	N/A	0	0%
No Answer	2,178	6%	323	21%	1,583	18%	632	20%	N/A	N/A	1,558	5%

**NOTES:**

All calls made were to beneficiaries under 21 who had not had an appointment within the last 12 months.

Safeguard is not performing a Call Campaign for their members.

If a section is marked n/a it means the plans did not capture information during reporting period or information not available

**Report is a roll-up of data since the beginning of the Beneficiary Letter Campaign.**

**BEST PRACTICES:**

- The Customer Service Representative (CSR) was able to provide focused/ one-on-one assistance for members who had concerns and needed appointments.
- CSRs were able to educate the members with small children regarding 1st birthday/1st tooth and the importance of the dental home.
- Bilingual representatives to make the calls.
- Making calls during the day, rather than after hours, was helpful when conducting 3-way calls to schedule appointments with dental offices.
- Developing scripts for the CSRs to follow when introducing the subject to the member.
- Following up with members, who were initially unavailable, helped to increase utilization.

*December data is due to DHCS 1-7-13.*

***JP Updated as of 12-5-12***

*Updated with 12-5-12 plan data submissions.*

**TABLE 3**

Plans are expected to develop an incentive program for providers. Performance measures should be defined by the Plan, and based on the percentage of your assigned members that actually receive services. Plans should include in the incentive program a specific measure for preventative services. The program should apply to all enrolled Medi-Cal children (ages 0-21 years) assigned to the plan. Plans are expected to review provider encounter data to identify beneficiaries that have not been seen in their dental office in a year. Plans are expected to halt all new enrollments for a provider who does not meet certain thresholds of utilization. This table reflects the summary results of the monthly provider utilization and the actions taken.

<b>Pay for Performance Summary - October</b>	<b>Access</b>	<b>Care 1st</b>	<b>HealthNet</b>	<b>LIBERTY</b>	<b>Safeguard*</b>	<b>Western</b>
Total Provider Offices:	233	104	288	189	N/A	103
# of Provider Offices 4.0% or Above:	167	35	96	66	N/A	39
% of Total Provider Offices:	71.6%	33.7%	33.3%	34.9%	N/A	37.9%
# of Providers between 3.33% - 4.0%	9	1	10	0	N/A	4
% of Total Providers	3.8%	1.0%	3.5%	0.0%	N/A	3.9%
# of Provider Offices Below 3.33%:	57	68	182	123	N/A	60
% of Total Provider Offices:	24.4%	65.4%	63.2%	65.1%	N/A	58.3%
# of Provider Offices on Corrective Action Plan:	0	0	0	0	N/A	0
# of Provider Offices Under Review:	57	19	65	41	N/A	9
# of Provider Offices w/closed enrollment:	0	1	8	70	N/A	0
# of Provider Offices w/ reinstated enrollment:	0	N/A	N/A	N/A	N/A	0

\*SafeGuard will not be participating in Pay for Performance reporting.

NOTES:

"Providers" reflects provider offices.

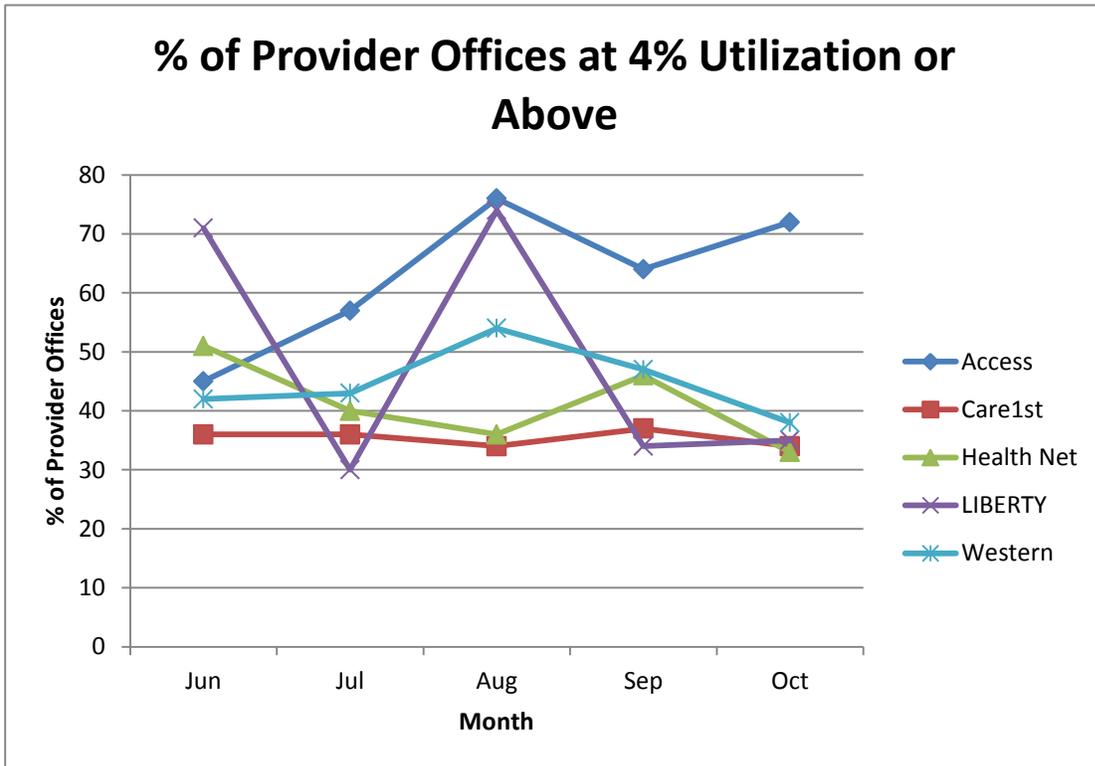
Percentages (%) are stand alone monthly utilization percentages.

November data is due to DHCS 1-22-13.

**JP Updated as of 12-20-12**

Updated with 12-20-12 plan data submissions.

% of Provider Offices at 4% Utilization or Above					
Month	PHP Dental Plans				
	Access	Care1st	Health Net	LIBERTY	Western
Jun	45	36	51	71	42
Jul	57	36	40	30	43
Aug	76	34	36	74	54
Sep	64	37	46	34	47
Oct	72	34	33	35	38



**TABLE 4**

Plans should create an outreach campaign to increase provider and specialist enrollment into the DMC program. This table reflects the monthly results of that outreach campaign.

<b>Provider &amp; Specialist Enrollment - November</b>	<b>Access</b>	<b>Care 1st</b>	<b>HealthNet</b>	<b>LIBERTY*</b>	<b>Safeguard</b>	<b>Western</b>
Total # of General Providers Enrolled:	652	218	658	1,354	475	447
New General Providers Enrolled:	32	0	14	651	8	9
Total General Providers Disenrolled:	30	3	0	37	9	0
Total # of Specialists Enrolled:	450	70	70	70	213	946
New Specialists Enrolled:	5	10	10	10	4	9
Total # of Specialist Disenrolled:	4	6	6	6	4	1

\*LIBERTY Provider and Specialist Enrollment includes Community Dental Plan and American Health Guard.

December data is due to DHCS 1-7-2013.

**JP updated as of 12-5-2012**

Updated with 12-5-12 plan data submissions.

**TABLE 5**

Plans are expected to conduct educational seminars for both providers and providers' staff. Plans are expected to educate their provider community because it has come to the attention of the department that some providers are not in line with all Medi-Cal Dental policies. In addition, because of the low utilization DHCS wants to ensure providers are aware of the requirements to treat assigned members. This table reflects the dental plans monthly summary of educated provider offices.

Provider Education November	Access	Care 1st	Health Net	LIBERTY	Safeguard	Western
# Of Providers Educated	71	89	89	89	In Progress	15
Provider Concerns	The providers are concerned that the 48% utilization is still not practical considering the no show rate that the program experiences. They are calling patients to get them scheduled and even when they are able to get a hold of them, the patients are scheduled but do not show.	Providers are concerned with the impact on their offices with the Healthy Families transition and Western Dental no longer contracting for Dental Managed Care.	Providers are concerned with the impact on their offices with the Healthy Families transition and Western Dental no longer contracting for Dental Managed Care.	Providers are concerned with the impact on their offices with the Healthy Families transition and Western Dental no longer contracting for Dental Managed Care.	In Progress	Member no shows; no response to provider outreach efforts.
Educational Materials and Education Strategy	Appointment accessibility was reviewed. Wait time in the office and operator were reviewed. Reviewed and discussed importance of encounter submission possibly on a weekly basis. Discussed utilization requirements and the importance of follow up on broken/missed appointments. Collected average percentage of no show appointments and discussed ways to possibly reduce the amount of no shows. Discussed and reviewed changes in compensation for 2013 benefit year and the implementation of the penalty withhold. Also reviewed and discussed the Q3 P4P results.	Conducted on-site orientations for new Geographic Dental Managed Care (GMC) Providers to review GMC and Federally Required Adult Dental Services (FRADS). Provided Denti-Cal Guidelines Books to new GMC Providers.	Conducted on-site orientations for new Geographic Dental Managed Care (GMC) Providers to review GMC and Federally Required Adult Dental Services (FRADS). Provided Denti-Cal Guidelines Books to new GMC Providers.	Conducted on-site orientations for new Geographic Dental Managed Care (GMC) Providers to review GMC and Federally Required Adult Dental Services (FRADS). Provided Denti-Cal Guidelines Books to new GMC Providers.	In Progress	Healthy Families Program transition; Language Assistance Program; Utilization Expectations.

December data is due to DHCS 1-7-13  
Updated with 12-5-12 plan data submissions.

JP Updated as of 12-5-12

**TABLE 6**

<b>FQHC's and Dental Clinics in Los Angeles County</b>	<b># FTE</b>	<b>Access</b>	<b>Care 1st</b>	<b>Health Net</b>	<b>LIBERTY</b>	<b>SafeGuard</b>	<b>Western</b>
Alta Med Medical and Dental Group - Bell	4						
Alta Med Medical and Dental Group - Boyle Heights	3						
Alta Med Medical and Dental Group - El Monte	1						
Antelope Valley Community Clinic Health and Wellness Center	n/a						
Arroyo Vista Family Health Center - Highland Park	4						
Arroyo Vista Family Health Center - Lincoln Heights	4						
Chinatown Service Center Family Health Clinic	1						
Clinica Monsenor Oscar A. Romero - Boyle Heights/East LA	n/a						
Clinica Monsenor Oscar A. Romero - Pico-Union/Westlake	n/a						
Community Health Alliance of Pasadena	n/a						
Comprehensive Community Health Centers, Inc. - Glendale	3						
Comprehensive Community Health Centers, Inc. - Eagle Rock	1						
East Valley Community Health Center	4						
Eisner Pediatric and Family Medical Center	4						
El Proyecto Del Barrio, Inc. - Canoga Park	1						
Herald Christian Health Center	n/a						
JWCH Institute, Inc. - Medical Clinic/Weingart Center	n/a						
Los Angeles Christian Health Centers	n/a						
Pico Aliso Community Clinic	n/a						
M.E.N.D	0						
Mission City Community Network, Inc.	n/a						
Northeast Valley Health Corporation - Van Nuys	n/a						
Northeast Valley Health Corporation - Sun Valley	n/a						
Northeast Valley Health Corporation - San Fernando	n/a						
QueensCare Family Clinic - East LA	2						
QueensCare Family Clinic - Eastside	1						
QueensCare Family Clinic - Eagle Rock	1						
QueensCare Family Clinic - Echo Park	1						
QueensCare Family Clinic - Hollywood	1						
Queens Dental Group - West Covina	3						
South Bay Family Health Care Center - Redondo Beach	n/a						
South Bay Family Health Care Center - Gardena/Harbor Gateway	n/a						
St. Anthony Medical Centers - Hollywood	1						
St. Anthony Medical Centers - Pico	1						
St. John's Well Child & Family Center - Lincoln High	1						
St. John's Well Child & Family Center - Compton	2						
St. John's Well Child & Family Center - East Compton	1						
St. John's Well Child & Family Center - Hyde Park Elementary	1						
St. John's Well Child & Family Center - Magnolia	2						
St. John's Well Child & Family Center - Dr. Louis	2						
The Saban Free Clinic - Hollywood Wilshire Health Center	n/a						
The Saban Free Clinic - Beverly Health Center	n/a						
Valley Community Clinic	n/a						
Venice Family Clinic - Colen Family Health Center	n/a						
Venice Family Clinic - Simms/Mann Health and Wellness	n/a						
Venice Family Clinic	n/a						
Watts HealthCare - Dental	5						

**Notes:**

FTE - Number of Equivalent Full Time Providers

n/a - information was not captured during reporting period

Reached Out (contacted)
Currently Enrolled

JP updated as of 11-30-12

**TABLE 7**

Plans are expected to submit monthly timely access reports to monitor the access and availability with each contracted dental office to ensure the provider network meets or exceeds the access standards. This table reflects plans summary data for the month reporting. Timely Access Reporting is typically annual however in order to monitor the dental plans monthly they report the information for the providers surveyed in that month.

Timely Access Report Summary - October		Access	Care 1st	HealthNet	LIBERTY	Safeguard	Western
Month Total Enrollee Count:		122,685	16,916	60,259	20,759	18,433	45,814
Month Total Under 21 Enrollee Count:		104,455	10,651	31,777	12,571	9,838	26,646
Month Total Over 21 Enrollee Count:		18,230	6,265	28,482	8,188	8,595	19,168
Avg # of Days to Schedule	Initial Appt:	6	10	8	7	7	8-14
	Routine Appt:	7	10	8	8	7	8-14
	Preventive Appt:	6	10	8	8	7	8-14
	Emergency Appt:	1	1	1	1	1	1
% of No Show Appt:		40%	45%	45%	45%	N/A	60%
Are Interpreter Services Available:		Yes	Yes	Yes	Yes	Yes	Yes
Answering Services Available:		Yes	Yes	Yes	Yes	Yes	Yes
Avg. Ratio of Member to Primary Care Dentist for under 21 ONLY:		82	51	51	19	21	N/A
Total # of Members who are assigned to a PCD who is more than 30 min. or more than 10 miles from their		760	0	0	0	179	372
# of Routine Authorizations Received (under 21)		132	100	359	131	34	42
% of Routine Authorizations Approved	Within 5 business days	100%	100%	100%	99%	N/A	100%
	Within 10 business days	100%	0%	0%	1%	58%	100%
	Outside of 10 business days	0%	0%	0%	0%	7%	0%
Total Claims Received (under 21)		6,976	496	2,035	527	773	76
% Claims Paid	Within 90 days	100%	100%	100%	100%	100%	100%
	Outside of 90 days	0%	0%	0%	0%	0%	0%
Specialist Referrals for the Month (under 21)	Received:	185	85	307	118	76	58
	Approved:	144	78	276	108	59	52
	Denied (clinical):	3	3	3	1	N/A	4
	Denied (administrative):	38	75	28	9	17	1
	Completed:	11	72	231	53	N/A	57
	Expired:	107	3	11	8	N/A	9

**LEGEND:**

n/a means the plan did not capture this information during the reporting period

**NOTES:**

•Specialist Referrals expire after 90 days from date of issue with the exception of Western (45 days). There are always exceptions for extensions.

**JP Updated as of 12-5-12**

November data is due to DHCS 1-7-13

Updated with 12-5-12 plan data submissions.

# IMPORTANT NOTICE

## You Have Choices:

Please read the booklet to understand your choices and then complete the worksheet to get the most out of your dental services with Medi-Cal!

STEPS	INSTRUCTIONS	QUESTIONS	YOUR CHOICE (Fill-in or Check Off)
1	First choose Dental Managed Care (DMC) or Denti-Cal by reading the DMC vs. Denti-Cal page on (ADD PAGE). If you choose DMC, you need to select one of the three dental Plans. A dental Plan is responsible for assisting you with selecting a dentist.	DMC (go to step 2-3) or Denti-Cal (go to step 4)?	<input type="checkbox"/> Completed
2	If you choose to select a dentist on your own go to the back of this booklet and select the dentist you want in the Preferred Provider Directory.	Which dentist did you select?	
	<p>Certain dentist may not contract with all the Plans. Right below the providers' address in bold is the name of the available dental plans. Go to the Medi-Cal Dental Plan Comparison Chart on page (ADD PAGE) to figure out which dental plan you want. If you have questions call Health Care Options (HCO) at 1-800-322-6384.</p> <p><b>Example:</b>  <b>EMANUEL, DONNY DDS</b>  <b>DENTIST CODE: 2MF6EMH</b>            906 N Vermont Ave            Los Angeles, CA 90029            (323)953-7700            LANGUAGES: Spanish            ACCESSIBILITY: P, B, W, E, R  <b>ACCESS DENTAL PLAN</b>  <b>LIBERTY DENTAL PLAN OF CA</b>  <b>HEALTH NET</b></p>	<p>Which dental plan did you select?</p> <p><input type="checkbox"/> Access Dental</p> <p><input type="checkbox"/> Health Net</p> <p><input type="checkbox"/> LIBERTY Dental</p>	<input type="checkbox"/> Completed
3	Complete the Choice Form by following the directions on page (ADD PAGE).	Did you complete the Choice Form?	<input type="checkbox"/> Completed

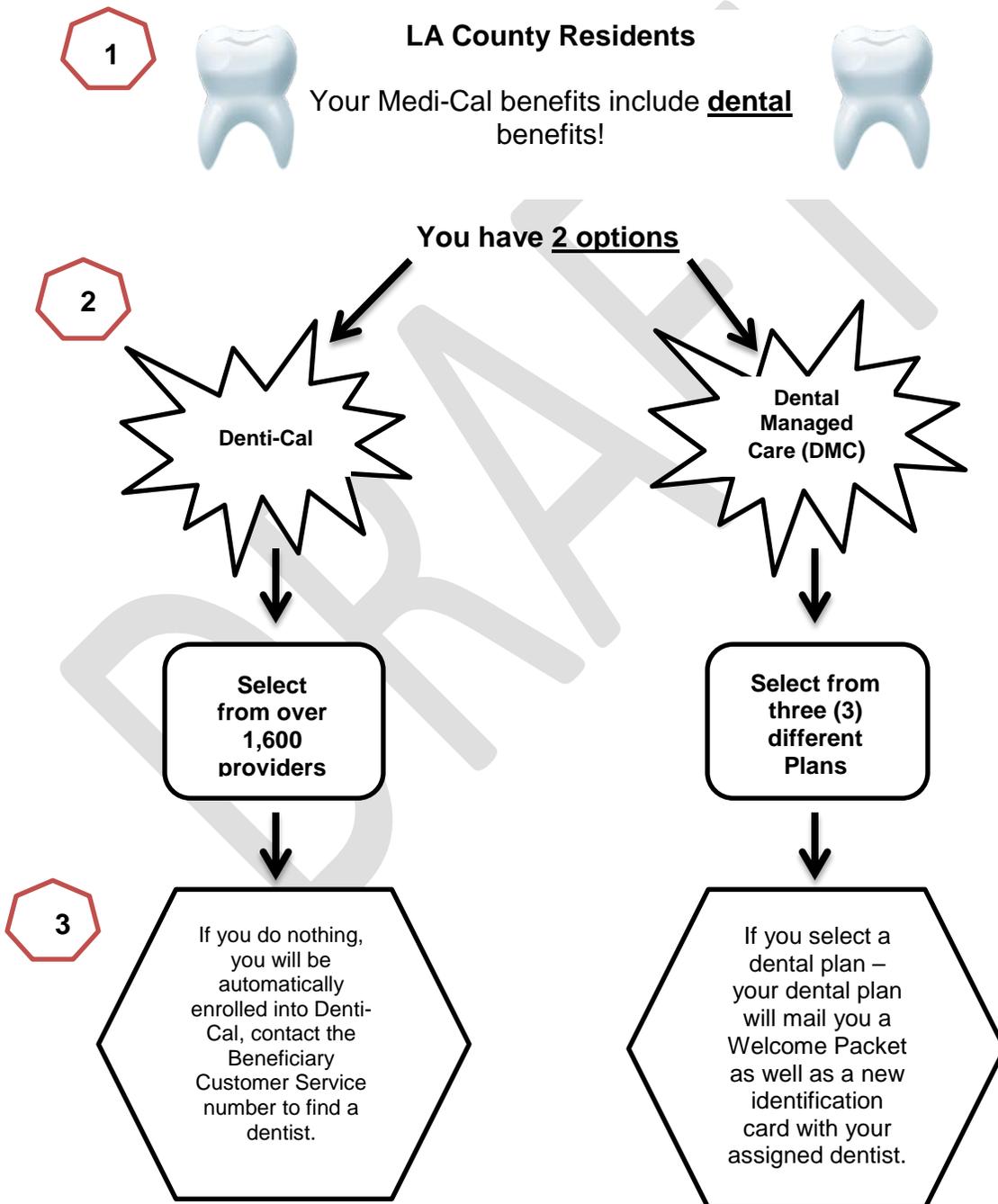
	Send completed Medi-Cal Dental Choice Form in the Postage-Paid Envelope provided or you have the option to call Health Care Options (HCO) at 1-800-430-4263 to make a selection.	Did you send in the completed Choice Form or called HCO to make a selection?	<input type="checkbox"/> Completed
4	Once enrolled, call the Denti-Cal Beneficiary Customer Service line at 1-800-322-6384 to find a dentist who accepts Denti-Cal.	Which dentist did you select?	

DRAFT

# LOS ANGELES COUNTY MEDI-CAL DENTAL PROGRAM

## What is the Medi-Cal Dental Program?

The Medi-Cal Dental program is the part of the Medi-Cal program that will provide you dental benefits.



4

**Who is covered?**

You qualify for Medi-Cal coverage if you are any of the following:

- ✓ Pregnant
- ✓ An Intermediate Care Facility (ICF)/Skilled Nursing Facility (SNF) patient
- ✓ Under the age of 21 (ages 0-20)

You may also be eligible for emergency dental services after your 21<sup>st</sup> birthday. To find out if you are eligible for dental services through Medi-Cal please contact the Los Angeles County Social Services Office Toll Free Line at 1-877-597-4777.

5

**What should you do?**

**Complete the Worksheet on page (ADD PAGE) to help you make a choice. This Worksheet is not required; it is a tool to assist you.**

**IMPORTANT NOTICE**  
**You Have Choices:**

Please read the booklet to understand your choices and then complete the worksheet to get the most out of your dental services with **MyDentiCal**.

ITEM	INSTRUCTIONS	QUESTION	YOUR CHOICE FOR THE DENTAL PLAN
1	<p><b>OPTION 1: No dental services plan</b></p> <p>If you do not want dental services, you can choose the "No dental services" option on page 10 of the booklet. This option is available to all Medi-Cal beneficiaries.</p>	Do you want to be in the "No dental services" category?	<input type="checkbox"/> Employee
2	<p><b>OPTION 2: Choose a dental plan</b></p> <p>If you want dental services, you can choose one of the dental plans listed on page 11 of the booklet. Each plan has different benefits and costs. You may want to compare the plans to see which one is best for you. You may also want to ask a dentist for advice.</p>	<p>Which dental plan do you want?</p> <p><input type="checkbox"/> No dental services  <input type="checkbox"/> Health Plan  <input type="checkbox"/> MyDentiCal</p>	<input type="checkbox"/> Employee
3	<p><b>OPTION 3: Choose a dental plan and a dentist</b></p> <p>If you want dental services and a dentist, you can choose a dental plan and a dentist on page 12 of the booklet. You may want to ask a dentist for advice.</p>	Do you complete the Choice Plan?	<input type="checkbox"/> Employee

If you choose a dental plan, your dental plan will assign you to a dentist in their network and mail you a Welcome Packet with a new identification card. Your dental plan is required to assist you with scheduling an appointment to see a dentist. If you would like to change the dentist you are assigned to, you can call the dental plan you selected and change it over the phone.

If you do not want a dental plan, or do not choose one, you will be enrolled into Denti-Cal. If you need help to find a dentist, call the Beneficiary Customer Service line at 1-800-322-6384. After you find a dentist, you will need to call their office to schedule an appointment.

# WHAT DENTAL BENEFITS ARE YOU ELIGIBLE FOR?

All benefits are exactly the same in Dental Managed Care (DMC) & Denti-Cal. Emergency dental services for the relief of pain, infection, or trauma are provided for everyone.

DENTAL BENEFITS	
<p><b>Adults (21 and up) are Eligible for the following benefits:</b></p> <ul style="list-style-type: none"> <li>- Emergency Services</li> <li>- Extractions</li> <li>- X-rays</li> </ul>	<p><b>Children (under 21) are Eligible for the following benefits:</b></p> <ul style="list-style-type: none"> <li>- Emergency Services</li> <li>- Exams</li> <li>- X-rays</li> <li>- Fillings</li> <li>- Teeth Cleaning</li> <li>- Dental Sealants</li> <li>- Fluoride Treatment</li> <li>- Extractions</li> <li>- Crowns</li> <li>- Root Canals</li> <li>- Medically Necessary Orthodontics</li> <li>- Sedation/General Anesthesia</li> </ul>
<p><b>Pregnant Women (21 and up) are Eligible for the following benefits:</b></p> <ul style="list-style-type: none"> <li>- Emergency Services</li> <li>- Exams</li> <li>- X-rays</li> <li>- Teeth Cleaning</li> <li>- Fluoride Treatment</li> <li>- Deep Teeth Cleaning</li> <li>- Other services are provided depending on Eligibility</li> </ul>	<p><b>Intermediate Care Facility (ICF)/Skilled Nursing Facility (SNF) are Eligible for the following benefits:</b></p> <ul style="list-style-type: none"> <li>- Emergency Services</li> <li>- Exams</li> <li>- X-rays</li> <li>- Fillings</li> <li>- Teeth Cleaning</li> <li>- Deep Teeth Cleaning</li> <li>- Fluoride Treatment</li> <li>- Extractions</li> <li>- Crowns</li> <li>- Root Canals</li> <li>- Dentures</li> <li>- Sedation/General Anesthesia</li> </ul>

# DENTAL MANAGED CARE (DMC) VS. DENTI-CAL

Unless you choose a dental managed care plan, you will be automatically enrolled into Denti-Cal.

	<b>Dental Managed Care (DMC)</b>	<b>Denti-Cal</b>
<b>How do I get "my" dentist?</b>	The dental plan automatically assigns you to a dentist in their network.	You can choose any Denti-Cal dentist. If you need help finding a dentist, call the Denti-Cal Beneficiary Customer Service Line at 1-800-322-6384.
<b>How often can I change dentist?</b>	Monthly.	Daily.
<b>How do I change dentists?</b>	Call your dental plan's Member Services Line to help you find a new assigned dentist.	You are free to make an appointment with any Denti-Cal provider. If you need help finding a dentist, call the Denti-Cal Beneficiary Customer Service Line at 1-800-322-6384.
<b>How do I get a children's dentist (pedodontist) for my child?</b>	Ask your primary care dentist for a referral to a pedodontist. The dentist must agree to refer you.	Find a pedodontist who accepts Denti-Cal or call the Denti-Cal Beneficiary Customer Service Line at 1-800-322-6384. You do not have to get permission.
<b>What if I want to make a complaint?</b>	Call your dental plan's Member Services Line and a member services worker may be able to help you with your complaint.	Call Denti-Cal's Beneficiary Customer Service Line at 1-800-322-6384 and a member services worker may be able to help you with your complaint.
<b>Does my provider have to see me in a specific time?</b>	Emergency - 24 hours Urgent - 72 hours(3 days) Routine - 4 weeks Specialist - 30 days from referral	There are no requirements for providers to see patients in a specific time, but you can call the Denti-Cal Beneficiary Customer Service Line at 1-800-322-6384 at any time for help.
<b>Who can I call for help?</b>	Call your dental plan's Member Services Line.	Call Denti-Cal's Beneficiary Customer Service Line at 1-800-322-6384.
<b>Will someone remind me to go to the dentist?</b>	Yes	Many dentist provide this service. Ask your dentist.
<b>Will I get a referral to a dental specialist if needed?</b>	Yes	Not guaranteed.
<b>Is transportation provided?</b>	Yes	No

# Worksheet Instructions

- ✓ **Select a Medi-Cal Dental Program for your dental services:**

**Denti-Cal or Dental Managed Care (DMC)**

See page (ADD PAGE) for comparison chart for these two dental programs. If you select Denti-Cal, please call the Denti-Cal Customer Service Line at 1-800-322-6384 for further instructions. If you select Dental Managed Care Plans please continue to the next section or call one of the three DMC Plans listed below and ask for assistance.

**If you select DMC complete the following:**

- ✓ **Pick your dentist in the Preferred Provider Directory using a way that works for you and/or your family**

**By language:** If you have a language preference, you can check to see what languages are listed in this book and the dental groups that offer those languages.

**By dentist's name:** To find a dentist you already know and like, go to the "Primary Care Dentists" section of this book starting on page (ADD PAGE) and look up their name.

**By location:** This directory is a list of dentists near your home. For a list of dentists near work, school, or other locations, call Health Care Options, toll free at 1-800-430-4263 (TTY/TDD 1-800-430-7077).

**By dental group:** You can get your dental services from a dental group. To pick a dental group, go to the "Dental Groups" section on page (ADD PAGE). *Remember, each member of your family can have a different dentist!*

- ✓ **Pick your dental plan by seeing what available plans are right below the providers' address or by going to the Medi-Cal Dental Plan Comparison Chart**

Once you pick a dentist, look at the dental plans that work with that dentist. Some dentists work with more than one dental plan. To contact a dental plan for additional information, use one of the following phone numbers or websites:

<b>Access Dental Plan</b> 1-888-414-4110 www.accessdental.com	<b>Health Net Community Solutions</b> 1-800-977-7307 www.healthnet.com	<b>LIBERTY Dental Plan of California</b> 1-888-703-6999 www.libertydentalplan.com
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- ✓ **Fill out and complete the Medi-Cal Dental Choice Form**  
Instructions on how to fill out the Medi-Cal Dental Choice Form on (ADD PAGE).
- ✓ **Send completed Medi-Cal Dental Choice Form in the Postage-Paid Envelope provided.**  
If mailed in the United States no postage is necessary.

**If you select Denti-Cal complete the following:**

- ✓ **If you don't already know a Denti-Cal dentist, call the Denti-Cal Beneficiary Customer line to help you find one in your area.**
- ✓ **Send completed Medi-Cal Dental Choice Form in the Postage-Paid Envelope provided.**  
If mailed in the United States no postage is necessary.

**Medi-Cal All Plan Dental Meeting – Los Angeles County  
January 10, 2013 - Meeting Summary Notes**

Topics	Discussion	Action Items
<b>Immediate Action Expectations</b>	<ul style="list-style-type: none"> <li>- No comments or questions.</li> </ul>	Please email Alisha if there are any questions
<b>Healthy Families Program</b>	<ul style="list-style-type: none"> <li>- Analysis on first eight (8) counties</li> <li>- 1b analysis shall be completed shortly</li> <li>- Provider bulletin on Denti-Cal internet website</li> <li>- Provider referral list updated and posted, added ~800 providers</li> <li>- Preferred Provisional Provider (PPP) has been released and posted online</li> <li>- Call center, warm transfer implemented mid December</li> <li>- Providers can be added to Provider list by phone, email, fax, mail</li> <li>- Beneficiary survey workgroup started please email to be added to the workgroup</li> <li>- Healthy Families Transition tab is available online with updated information on the Denti-Cal internet website</li> </ul>	Please email <a href="mailto:dentalhfptransition@dhcs.ca.gov">dentalhfptransition@dhcs.ca.gov</a> to be added to the Beneficiary survey workgroup.
<b>Medical/Dental Collaboration</b>	<ul style="list-style-type: none"> <li>- Planning phase engagement model to engage Primary Care Physicians to identify non-utilizing dental services by plan</li> <li>- Vision: Every child in Medi-Cal will have their dental record on file for their PCP to access. Their PCP will have the tools to make sure the child sees a dentist. Once engagement model is finalized, it will be brought to providers to discuss the potential challenges.</li> </ul>	
<b>Increasing Provider Choice</b>	<ul style="list-style-type: none"> <li>- Choice Forms are subject to change. Next version of edited Choice Forms will be released once changes have been made.</li> <li>- If you have any comments/questions/suggestions on the Choice Forms please email Jenny Phun (jenny.phun@dhcs.ca.gov)</li> </ul>	Jenny from DHCS will send out the new version of edited Choice forms in addition to the order of the pages.
<b>Additional Items</b>	<p>Children and Pregnant Women</p> <ul style="list-style-type: none"> <li>- Working on pulling aid codes</li> <li>- Will have to manually pull claims</li> </ul> <p>Medical Bulletin</p> <ul style="list-style-type: none"> <li>- Working on it with medical side</li> </ul> <p>Pedo Oral Health Strategies</p> <ul style="list-style-type: none"> <li>- Will let stakeholders know when the process begins</li> </ul> <p>Care 1<sup>st</sup></p> <ul style="list-style-type: none"> <li>- Care 1<sup>st</sup> beneficiaries will be transitioned to LIBERTY as of February 1, 2013. LIBERTY purchased Care 1st</li> </ul> <p>Recap</p> <ul style="list-style-type: none"> <li>- Los Angeles Medi-Cal Dental Stakeholder Meetings will be every other month. February was agreed to be skipped.</li> </ul> <p>NEXT MEETING: THURSDAY, MARCH 14, 2013 (10:00AM-12:30PM)</p>	