

# Medi-Cal Dental LA Stakeholder Meeting

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## Meeting Agenda

Date: Thursday, October 11, 2012

Time: 1:00 PM – 3:00 PM

Location: Maternal and Child Health Access  
1111 6<sup>th</sup> Street, 3<sup>rd</sup> Floor, Los Angeles, CA 90017

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

Participant Passcode 8035226

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<b>Welcome</b>	<b>Rene Mollow, Deputy Director, Health Care Benefits and Eligibility</b>
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<b>Introductions</b>	<b>All</b>
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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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<b>Discussion</b>	<ul style="list-style-type: none"><li>• Immediate Action Expectations (DHCS)</li><li>• Healthy Families Program Update (DHCS)</li></ul>
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<b>Additional Items</b>	<ul style="list-style-type: none"><li>• Children and Pregnant Women (FFS)</li><li>• Medical/Dental Collaboration (Sean O'Brien- HN)<ul style="list-style-type: none"><li>• General Anesthesia/OR Access</li><li>• Authorizations</li></ul></li><li>• Plan Issue</li><li>• FFS Issue</li></ul>
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<b>Conclusion</b>	<ul style="list-style-type: none"><li>• Recap</li><li>• Next steps</li><li>• Meeting Minutes</li></ul>
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**Next Meeting: TBD**

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

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

**Dental Plans Reporting**

Access Dental Plan  
Care 1st Dental Plan  
Health Net Dental Plan  
LIBERTY Dental Plan  
Safeguard Dental Plan \* Reporting for the month of July  
Western Dental Plan

**Next Reporting Due Date**

September 2012 Immediate Action Reporting DUE Oct 5, 2012  
August 2012 Utilization **and Timely Access** Reporting DUE Oct 19., 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 - August</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		3		12		3		N/A		0	
Appointments Set	2		1		1		0		N/A		N/A	
Other Info Given/Questions Answered	114		2		7		2		N/A		0	
Grievances/Complaints Received	0		0		0		1		N/A		0	
Total # of Undeliverable Mail	2,671	3%	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	98	0%
Total number mailed	89,127		10,741		31,781		6,512		19,636		27,821	

**NOTES:**

Access - Mailing of Plan Brochure completed

Care 1st - Mailing of Plan Brochure August 2012

Health Net - Mailing of Plan Brochure August 2012

LIBERTY - Mailing of Plan Brochure August 2012

Safeguard - Mailing of Plan Brochure August 2012

Western - Mailing of Plan Brochure completed

N/A - plan did not capture information during reporting period

*September data is due to DHCS 10-5-12.*

*Updated with 9-5-12 plan data submissions.*

**JP Updated 9-20-2012**

**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 - August</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	112,381		10,618		31,542		6,416		10,087		26,881	
# of Calls Made	7,869		N/A		1,253		N/A		N/A		14,035	
Wrong # and/or Phone # Out of Service	1,130	14%	N/A	N/A	225	18%	N/A	N/A	N/A	N/A	581	4%
Appt Scheduled	533	7%	N/A	N/A	75	6%	N/A	N/A	N/A	N/A	627	4%
Left Message	1,927	24%	N/A	N/A	326	26%	N/A	N/A	N/A	N/A	10,491	75%
Member Declined	1,007	13%	N/A	N/A	127	10%	N/A	N/A	N/A	N/A	0	0%
Member Hung Up	247	3%	N/A	N/A	266	21%	N/A	N/A	N/A	N/A	0	0%
No Answer	643	8%	N/A	N/A	234	19%	N/A	N/A	N/A	N/A	1,296	9%
# of Appt. kept from Scheduled	170		N/A		N/A		N/A		N/A		N/A	
# of Appts. Missed from Scheduled	51		N/A		N/A		N/A		N/A		0	

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

**NOTES:**

- All calls made were to beneficiaries under 21 who had not had an appointment within the last 12 months.
- Care 1st and LIBERTY has not began their PHP Call Campaign, will begin starting 10-15-12.
- Safeguard is not performing a Call Campaign for their members.

**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
- 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
- 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.

September data is due to DHCS 10-5-12.

**JP Updated as of 9-20-12**

Updated with 9-5-12 plan data submissions.

**TABLE 3**

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 - July</b>	<b>Access</b>	<b>Care 1st</b>	<b>HealthNet</b>	<b>LIBERTY</b>	<b>Safeguard</b>	<b>Western</b>
Total Provider Offices:	220	104	267	186	N/A	106
# of Provider Offices 4.0% or Above:	124	37	107	56	N/A	46
% of Total Provider Offices:	56%	36%	40%	30%	N/A	43%
# of Providers between 3.33% - 4.0%:	19	3	12	6	N/A	3
% of Total Providers:	9%	3%	4%	3%	N/A	3%
# of Provider Offices Below 3.33%:	77	64	148	127	N/A	57
% of Total Provider Offices:	35%	62%	55%	68%	N/A	54%
# of Provider Offices on CAP:	96	0	0	0	N/A	0
# of Provider Offices Under Review:	96	0	0	0	N/A	57
# of Provider Offices w/closed enrollment:	0	0	0	0	N/A	1
# of Provider Offices w/reinstated enrollment:	0	0	0	0	N/A	0

**NOTES:**

"Providers" reflects provider offices.

Percentages (%) are stand alone monthly utilization percentages.

*August data is due to DHCS 10-19-12.*

***JP Updated as of 9-20-12***

*Updated with 9-20-12 plan data submissions.*

**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 - August</b>	<b>Access</b>	<b>Care 1st</b>	<b>HealthNet</b>	<b>LIBERTY</b>	<b>Safeguard</b>	<b>Western</b>
Total # of GP's Enrolled:	1,219	214	611	593	467	385
New GP's Enrolled:	18	12	14	27	0	0
Total GP's Disenrolled:	11	0	2	4	0	0
Total # of Specialists Enrolled:	1,209	69	69	69	203	1,019
New Specialists Enrolled:	17	1	1	1	10	48
Total # of Specialist Disenrolled:	15	0	0	0	4	0

**Suggestion:**

Plan Disenrollment - By plan by provider

*September data is due to DHCS 10-5-2012.*

*Updated with 9-5-12 plan data submissions.*

***JP updated as of 9-20-2012***

**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 - August	Access	Care 1st	Health Net	LIBERTY	Safeguard	Western
# Of Providers Educated	63	129	129	129	In Progress	0
Provider Concerns	Providers are concerned with the number of no shows and the amount of phone numbers that have been disconnected or no longer valid. They feel this works against them when trying to contact patients and schedule appointments.	0	0	0	In Progress	0
Educational Materials and Education Strategy	Appointment accessibility was reviewed. Overall LAPHP appointments scheduled, canceled and rescheduled. Wait time in the office and operatory were reviewed. Call campaign and member follow-up (reschedule/no shows). Reviewed and discussed importance of Encounter submission possibly on a weekly basis. Reviewed Q2 utilization results and performed corrective actions on those offices that scored below the required utilization for both Q1 & Q2.	0	0	0	In Progress	0

*n/a - did not capture information during reported period*

*September data is due to DHCS 10-5-12  
Updated with 9-5-12 plan data submissions.*

**JP Updated as of 9-20-12**

**TABLE 6**

Plans should conduct concentrated outreach to Federally Qualified Health Centers (FQHC's) and work to enroll them as providers in order to partner together to ensure access to services for plan members. Plans should also ensure that enrollment capacities of the FQHC's are capitalized. This table reflects the summary data of the monthly changes in contacted and newly enrolled FQHC's.

<b>FQHC Enrollment Tracking - August</b>	<b>Access</b>	<b>Care 1st</b>	<b>Health Net</b>	<b>Liberty</b>	<b>Safeguard</b>	<b>Western</b>
# Currently Enrolled:	17	12	12	12	5	3
# Contacted:	7	1	1	1	0	7
Newly Enrolled:	6	0	0	0	0	0

*September data is due to DHCS 10-5-12.  
Updated with 9-5-12 plan data submissions.*

***JP updated as of 9-20-2012***

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

<b>Legend:</b>
Reached Out
Contracted

**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.

<b>Timely Access Report Summary - July</b>		<b>Access</b>	<b>Care 1st</b>	<b>HealthNet</b>	<b>LIBERTY</b>	<b>Safeguard</b>	<b>Western</b>
Month Total Enrollee Count:		130,548	16,818	58,856	12,347	18,599	45,701
Month Total Under 21 Enrollee Count:		112,381	10,627	31,534	6,416	10,087	26,881
Month Total Over 21 Enrollee Count:		18,167	6,191	27,322	5,931	8,512	18,820
Avg # of Days to Schedule	Initial Appt:	7	10	8	7	6	7-14
	Routine Appt:	7	11	9	8	7	7-14
	Preventive Appt:	7	11	9	8	7	7-14
	Emergency Appt:	1	1	1	1	1	1
# of	No Show Appt:	459	N/A	N/A	N/A	N/A	63
	Rescheduled Appt:	187	N/A	N/A	N/A	N/A	N/A
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:		109	64	69	20	18	115
Total # of Members who are assigned to a PCD who is more than 30 min. or more than 10 miles from their		789	227	164	61	135	422
# of Routine Authorizations Received (under 21)		105	79	278	75	N/A	21
% of Routine Authorizations Approved	Within 5 business days	99%	99%	100%	98%	N/A	100%
	Within 10 business days	100%	100%	100%	100%	100%	100%
	Outside of 10 business days	0%	0%	0%	0%	0%	0%
Total Claims Received (under 21)		6,964	344	1,922	366	N/A	135
% 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:	201	75	242	61	54	65
	Approved:	145	67	219	55	45	58
	Denied (clinical):	2	1	4	1	0	4
	Denied (administrative):	54	7	19	5	9	0
	Completed:	16	64	195	37	N/A	62
Expired:		106	4	16	4	N/A	N/A

**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 9-20-12**

September data is due to DHCS 10-5-12

Updated with 9-5-12 plan data submissions.

**Medi-Cal All Plan Dental Meeting – Los Angeles County  
October 11, 2012 - Meeting Summary Notes**

Topics	Discussion	Action Items
<b>Immediate Action Expectations</b>	<p>FFS Data</p> <ul style="list-style-type: none"> <li>- Request to add child and pregnant women utilization.</li> <li>- DHCS committed to children and women in pregnant aid codes.</li> <li>- Research on women in other aid codes receiving services because of pregnancy.</li> </ul> <p>Outbound Call Campaign</p> <ul style="list-style-type: none"> <li>- # of appointments kept from scheduled, not all plans will be able to report because many contract with private providers and reporting will be a burden</li> </ul> <p>Provider Education</p> <ul style="list-style-type: none"> <li>- Plans will submit provider concerns going forward</li> </ul>	<p>DHCS will no longer use acronyms in reporting</p> <p>All plans will submit provider concerns and educational materials and education strategies going forward.</p>
<b>Healthy Families Program Update</b>	<ul style="list-style-type: none"> <li>- Provider referral form and process is changing</li> <li>- Researching the ability to be able to call into provider services line to be added or deleted</li> <li>- Currently researching the ability of the customer service line to warm transfer benes to provider office to make appointments</li> <li>- Currently researching using the ikn.gov website on the Denti-Cal site.</li> </ul>	<p>DHCS will send out information for Healthy Families providers in LA on specifics of keeping their beneficiaries</p>
<b>Children and Pregnant Women</b>	<p>Pregnant women’s utilization is difficult to track because not all women who receive services are in a specific aid code that identifies them as pregnant.</p>	<p>DHCS is committed to researching how this can be done. In the meantime DHCS will report on the pregnant specific aid codes.</p>
<b>Medical/Dental Collaboration</b>	<p>The MRMIB Healthy Families Denti-Quest grant has been transitioned to Children’s Now for the Implementation Phase. MRMIB had an advisory committee to better strengthen medical/dental collaboration. The Implementation Grant will focus on LA County. Grant to begin November 1<sup>st</sup>. Goals to educate the public and discuss information on policy barriers and create a center of Health Care Strategies. CMS pediatric Oral Health Plan. Will hold off on Medical/Dental workgroups.</p>	<p>Children’s Now will have a place to report the efforts at each LA Stakeholder Meeting.</p>
<b>Additional Items</b>	<p>‘Plan Issue’ &amp; ‘FFS Issue’</p> <ul style="list-style-type: none"> <li>- Are beneficiary mailing addresses and email addresses on provider rosters sent by dental plans?</li> </ul> <p>November 9 – Hearing in Culver City on Children’s Oral Issues in LA County</p> <p>Discussion for next meetings</p> <ul style="list-style-type: none"> <li>- Don’t go over data by table. Allow for questions and then move on.</li> <li>- Informing Materials workgroup will be placed into the larger meeting</li> <li>- Discussion on Choice Packets and Increasing Provider Choice</li> </ul>	<p>MDSO to find out about mailing choice packets to the group in LA for discussion.</p>