



Toby Douglas, Director  
Department of Health Care Services

March 20, 2012

Dear Toby:

I am writing in response to your letter of March 7, 2012 regarding the implementation of expected, immediate actions and efforts to improve access to children in Sacramento County. Health Net Dental Plan is committed to working with other plans, the Department, advocates and all other stakeholders to improve the GMC program. Attached you will find our timeline and comprehensive implementation plan. You will also find multiple attachments detailing past and current successes achieved by Health Net. For your convenience, a brief synopsis of Health Net's implementation plan for each action item is listed below:

- **Beneficiary Letter:** Health Net has completed our beneficiary letter for members 6-21 years of age and will immediately begin working with First 5 to generate a letter for members 0-5 years of age. (Please note this is a draft of our letter, it is currently in our C&L department to assure the proper reading grade level and will also be translated into the appropriate threshold languages).
- **Phone Call Campaign:** Health Net has completed a call campaign to the parents/guardians of each member age 0-3 who have not had an office visit within the past 6 months in an effort to offer encouragement and information and hopefully set an appointment as soon as possible. During the current campaign, we **have helped 16% of the parents/guardians that we reached to make an appointment on the very same phone call.** Health Net regularly conducts Initial Dental Health Assessment (IDHA) campaigns in which members that have been enrolled for 90 days are contacted to encourage dental visits. Health Net also regularly conducts 'Recall' campaigns in which members are contacted 6 months following their previous visit to schedule a recall appointment.
- **Issue Resolution Reporting:** Utilizing a specialized business unit (SBU), Health Net Dental plan ensures immediate attention is given to members and providers who have expressed dissatisfaction. The unit is expected to resolve exempt grievances within 24 hours of notification. Attached is a desktop procedure that was recently created to support the Issue Resolution Process that has been in place for several years.
- **Informational Flyer:** Health Net will work in conjunction with the other plans to develop an information flyer. The first meeting to develop a draft has been scheduled for 3/21/2012.

- **Utilization Control with Enrollment:** Health Net generates a ‘Non-Reporting’ list monthly. This report instantly displays the utilization percentage for every office. Any office with a utilization percentage below 5% (annualized, this equates to a utilization percentage below 60%) receives a letter and a phone call from our Provider Relations team reminding them to submit all encounters and of their obligation to provide timely services to all members. Health Net is in the process of implementing a 'new enrollment halt' program for providers who do not meet utilization thresholds as of 3/15/2012.
- **Education Seminars:** Due to numerous barriers involved with conducting seminars, including the difficulty of scheduling a time convenient for all providers and their staff members, Health Net conducts office-by-office visits (provider sweeps). In the past 12 months, Health Net Provider Relation professionals have visited each contracted GMC office at least 3 times; during which educational materials were distributed to the providers. These materials were also left in the offices for the benefit of the parents/guardians.
- **Pay for Performance (P4P) & Withholds on Provider Payments:** Health Net currently utilizes our proprietary ‘Non Reporting’ list to monitor utilization at the provider and/or office level. Providers are incentivized to treat members through our pseudo fee-for-service reimbursement model which pays a fee for most performed procedures. A detailed definition of Health Net’s P4P program is attached.
- **Federally Qualified Health Centers:** Health Net is currently contracted with a FQHC in the Sacramento area, The Effort. The Effort will be opening additional locations in the future and will be part of our network. We are in contact with the other FQHC, Sacramento Native Health Center and anticipate contracting with them in the near future.
- **Timely Access Reports:** See Attachment 5.
- **Increase Provider & Specialist Enrollment:** Health Net will work in conjunction with the Department and the other plans to establish credentialing criteria that will be used to enroll potential providers without enrolling them into the fee for service program.
- **Specialty Referral Processes:** Health Net will work in conjunction with the Department and the other plans to develop a streamlined specialty referral process.

As of 2012, Health Net has added procedure code D0145 (Oral evaluation for a patient under three years of age and counseling with primary caregiver) to our supplemental fee schedule. The reimbursement for this procedure was set at \$100.00.

In addition to the programs Health Net has already introduced we offer the following:

- **Co-ordination of care between Health Net Medical and Dental Plan’s**  
Health Net initiated a program to coordinate care between the medical and dental plans utilizing the PM 160 form. A trial program is currently underway in Los Angeles. Dental screenings, recorded on the PM 160 form, are

completed by Physicians when seeing our members for their annual physical exams. When appropriate, a dental referral is given to the parent of guardian and a copy of the PM160 form is forwarded to Health Net Member Services allowing a follow up phone call to the member to ensure the member has a dental home or to check if they need help in locating a dentist. Health Net will make a commitment to do the same in the Sacramento area.

- **Health Net Retention Team**

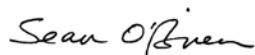
Health Net's retention team contacts medical members, to remind them of their upcoming annual renewal of benefits. This member outreach greatly reduces the number of members losing benefit from failure to renew. Our calls will help our dental members retain their eligibility as well which in turn will help to ensure that members have continuity of care which will help promote good oral health. Additionally, during this contact, the member may be educated about the importance of regular dental visits for their children beginning with the first tooth.

- **Health Net 21**

Health Net has established for our adult members over 21 who have lost their dental benefits, a program that provides basic preventative dental benefits at no cost to the State or the members. The members, who enroll with Health Net on the medical side, automatically are enrolled in the HN21 program. They receive dental x-rays, exam and prophylaxis, and these services are paid for by Health Net to the dentist on the member's behalf. If additional services are needed, those services are available at a low cost fee, which the member pays directly to the dentist and the time services are completed. This is already established in Sacramento County as well as Los Angeles County. Health Net feels that promoting the importance of good oral health care to our adults is important, this enables the parents to visit the dentist and studies have shown that parents who take care of their teeth and visit the dentist are the parents who will make sure their children also see the dentist. The children still have their coverage so that is not the barrier; oral health education to the adults will have an effect on how they see the importance of seeing the dentist on a regular basis.

Health Net looks forward to working with the Department of Health Care Services to implement improvements that ensure the children of Sacramento County receive the highest standard of care and quality of service possible.

Sincerely,



Sean O'Brien  
Director of Dental Operations  
Health Net Dental Plan



## Immediate Action Expectations: Implementation Plan Medi-Cal Dental Managed Care

Action Item		Description	Estimated Completion Date	Status
1	Beneficiary Letter: members 6-21 years of age	Develop and distribute beneficiary letter that provides information on benefits, importance of dental care for children and PCD info	Complete	See Attachment 1: Letter has been completed and mailing will commence on 3/26/2012
2	Beneficiary Letter: members 0-5 years of age	Develop and distribute beneficiary letter that provides information on benefits, importance of dental care for children and PCD info (to be completed in coordination with First 5)	3/21/2012	Meeting scheduled with First 5 on 3/21/2012
3	Phone Call Campaign	Conduct phone call campaign to proactively make appointments for beneficiaries who have not had an appointment in the last year	Current & Ongoing	See Attachment 2: Recently completed 0-3 phone campaign to GMC members and launched our latest IDHA and Recall Visit campaign as of 3/16/2012
4	Issue Resolution Reporting	Describe member services & G/A issue resolution process	Current & Ongoing	See Attachment 3: Health Net's resolution reporting process has been in place for over 3 years and was most recently documented
5	Informational Flyer (to be completed in coordination with other plans)	Develop information flyer to be distributed to beneficiaries, stakeholders, advocates and community programs. To include: 1. Dental Plan (Including grievance contact) 2. Plan and DHCS Ombudsman, and 3. HCO 4. Phone number 5. Short description of reasons you would call the number	3/21/2012	Meeting scheduled with other plans on 3/15/2012
6	Utilization Control with Enrollment	Review provider encounter data (non-reporting list). Halt new enrollments for providers who do not meet utilization thresholds	Current & Ongoing	See Attachment 4: Health Net's ongoing utilization control program has been in place for over two years. Health Net is in the process of implementing a 'new enrollment halt' program for providers who do not meet utilization thresholds as of 3/15/2012
7	Education Seminars	Conduct educational seminars for providers and provider staff. Educate on policies, benefits, requirements to treat assigned members, submitting encounter data and available incentive programs	Current & Ongoing	See Attachments 5 & 6: Health Net has conducted 3 provider 'sweeps' in the past 12 months to educate providers on policies, benefits and incentive programs. The next round of provider 'sweeps' will commence April 1, 2012.
8	Pay to Perform	Develop incentive program for providers (Centers of Excellence) based on performance		See Attachment 7:
9	Withholds on Provider Payments	Implement withholds from providers for not meeting utilization thresholds		See Attachment 7:



## Immediate Action Expectations: Implementation Plan Medi-Cal Dental Managed Care

Action Item		Description	Estimated Completion Date	Status
10	Federally Qualified Health Centers	Contract with FQHC's	Current & Ongoing	Health Net is currently contracted with a majority of the FQHC's in the Sacramento area, including 'The Effort'. We have contacted the one remaining FQHC 'Salud Clinic' regarding contracting. Updates to follow.
11	Timely Access Reports	Submit annual timely access reports (Please submit last annual timely access report with this implementation plan)	Current & Ongoing	<a href="#">See Attachment 5</a>
12	Increase Provider & Specialist Enrollment	Work together with the Department to establish credentialing criteria that will be used to enroll potential providers without enrolling into the fee for service program; outreach campaign:	3/21/2012	Meeting scheduled on 3/21/2012 to discuss
13	Specialty Referral Process	Work together with the Department and other plans to develop a streamlined specialty referral process	3/21/2012	<a href="#">See Attachment 8</a> : Meeting scheduled on 3/21/2012 to discuss
14	PM 160 Dental cross over from Medical to Dental	Follow up on dental referral given to member from their physician office to ensure member has a dental home.	Implement 4/30/2012	Health Net to contact Physician's office in Sacramento
15	Retention Team	Outreach to members for renewal to include dental information	Implement 4/30/2012	Retention team is assembled need to add dental info.
16	Health Net 21	Adults covered by HN21 will be reminded their children have coverage and need to see a dentist	Current & Ongoing	Will continue to work in the Sacramento Area.



March 20, 2012

Dear Health Net Sacramento Member:

Did you know that dental decay is the most common chronic disease in children and that 71% of California children suffer from tooth decay by the time they reach the third grade? How can your child do well in school if they are in pain?

Our records show that you have a child or children between the ages of 6 and 21 years old.

We want you to know the importance of bringing your child to the dentist for a first visit. Please call right away for a dental appointment so your child can get used to the dentist and receive an important fluoride treatment to help prevent tooth decay and avoid getting cavities.

Of course, if your child is in any kind of pain call us immediately, we will help you get your kids to the dentist as soon as possible.

Please call our Member Services number right away so we can set an appointment for you. Our toll-free number is:

- **Health Net Dental Services – (800) 977-7307**

Or if you need information you can visit our website at: [www.hndental.com](http://www.hndental.com)

Health Net Dental Plan will also help you find the right dentist for your children so please call.

If you should have any problems during or after you visit to the dentist please let us know, we can help.

Also, please know that we may be calling you in the near future to help set an appointment.

Thanks and remember to brush and floss.

Health Net Dental Plan



GMC 0-3 Call Campaign

<b>GMC Call Results</b>	<b># of Calls</b>	<b>%</b>
Left Voicemail	1059	55%
Complete (appointments made)	305	16%
Wrong Phone #	250	13%
Phone # Not Working	233	12%
Member Declined	60	3%
Member Hung up	15	1%
<b>Total</b>	<b>1922</b>	<b>100%</b>



Health Net - Desktop Policy and Procedure	
<b>Policy and Procedure Name:</b> SHP Dental Member Services Receipt of Complaints	<b>Desktop Procedure:</b> MS 18
<b>Responsible Department:</b> Health Net Dental	<b>Issue Date:</b> 03-13-12
<b>Approved By:</b> Robert E. Shechet DDS Senior Dental Director	<b>Revision Date:</b>

**I. POLICY:**

This policy is written to ensure Health Net is in compliance with regulatory requirements, which require that the Plan willingly accept complaints from its members and maintains a resolution process. The resolution process will help solve problems from a neutral standpoint to ensure that members receive all necessary covered services for which Health Net is contractually responsible.

**PURPOSE:** This policy will describe delegation of the process by which all Health Net Members Services calls are investigated if related to complaints, expeditiously resolved, and systemic issues identified. The process will delineate how and when complaints will be processed by the delegate, Liberty Dental Plan, or directed to Health Net Appeals and Grievances

**II. DEFINITIONS:**

1. Exempt Grievance

Exempt grievances are complaints received over the telephone that are not coverage disputes or disputed health care services involving dental necessity and that are resolved by the close of the next business day. Liberty Dental shall maintain an Exempt Grievances Log on all Health Net member exempt grievances containing:

- Date of call
- Name of complainant
- Member ID number
- Nature of the grievance
- Nature of the resolution
- Representative’s name taking call

2. Formal Grievance

Any written or oral expression of dissatisfaction regarding the plan and/or provider, including quality of care concerns and shall include a complaint, dispute, request for reconsideration or appeal made by a member or the member’s representative.

**DELEGATION:**

Health Net maintains a grievance system to which enrollees may submit in writing or by telephone their grievances to the plan. Health Net’s Appeals and Grievance Department ensures adequate consideration of enrollee grievances and rectification when appropriate. Formal appeals and grievances processing is not delegated.

Health Net does delegate Member Services to Liberty Dental Plan, including receipt of complaints. Determination of the status of a complaint as an exempt grievance or a formal grievance, following the guidelines of this policy, is also delegated to Liberty Dental Plan along with the appropriate resolution and record keeping of exempt grievance

Note: Delegation of member services to Liberty Dental Plan is transparent to the members and phones are always answered as Health Net.

### III. PROCEDURES:

#### 1. Telephone Call

- a) The Health Net Member Service Representative (MSR) receives a call regarding dissatisfaction. The MSR will attempt to resolve the issue and provide first call resolution. This may require the MSR to reach out to a dental office to gather details of a treatment plan or offer the caller an office/provider transfer. If the MSR is able to resolve the issue, and the complaint meets the requirement of an exempt grievance, the required log information is recorded and the case is closed.
- b) Members appealing denial of service/claim will be handled by the Health Net Appeals and Grievance Department. Providers appealing denial of service/claim will be handled by the Liberty Appeals and Grievance Department.
- c) If the MSR is unable to resolve the issue, or the requirements for an exempt grievance are not met, they will:
  - 1) Take the verbal grievance and follow the Liberty Dental Medi-Cal & Healthy Families Desktop Procedure, which states- *Appeals and Grievances received at Liberty are forwarded to Health Net by the end of the next business day. Liberty sends an encrypted email to the Health Net Appeals and Grievances SHP group email box including the Complaint Referral Form, (the member appeal/grievance documents(s), line of business, and the case identifier number.*
  - 2) MSR may also advise members that they may submit a grievance in writing by mailing, faxing or e-mailing the complaint or they may submit a complaint online
  - 3) Any complaint, written or verbal, that is not resolved during a phone call, or if 72 hours have elapsed without contact must be handled as a formal grievance by the Health Net Appeals and Grievance department.

**HIPAA ALERT:** Replies to written correspondence, including Email, must comply with Health Net's strict HIPAA guidelines to avoid penalties or breaches in confidentiality.

## VI. ISSUE IDENTIFICATION-

A written record of appeals and grievances is reviewed quarterly by the State Health Programs Dental UMQI Committee to assess emerging patterns of appeals and grievances, and to formulate potential plan policy/process changes and /or procedural improvements.

Exempt grievances and other call center statistics are reviewed periodically and reviewed at Joint Operations meetings. Patterns are looked for including:

- a) Multiple members requesting transfer out of the same office.
- b) The same provider appearing multiple times
- c) Repeat similar complaints
- d) Multiple access issues for a specific provider
- e) Multiple access issue in a geographic region
- f) Multiple issues regarding specialty referrals
- g) Repeat billing issues
- h) Repeat interpersonal comments.**





## Timely Access Report

Office Name	City	Zip	Last Service Visit	Hygiene Appt (Weeks)	Routine Appt (Weeks)	Initial Appt (Weeks)
Coast Dental of California	CITRUS HEIGHTS	956105992	01/06/2012	1	1	1
Coast Dental of California	ELK GROVE	956249510	01/06/2012	1	1	1
Coast Dental of California	FOLSOM	956304207	01/06/2012	1	1	1
Coast Dental of California	NORTH HIGHLANDS	956605095	01/06/2012	1	1	1
Zinfandel Dental Practice (North)	RANCHO CORDOVA	956704265	01/10/2012	3	3	3
Yolanda D Gonzales D.D.S.	SACRAMENTO	958223148	01/06/2012	2	2	2
RC Dental Office	RANCHO CORDOVA	956702152	01/09/2012	3	3	3
Dr. Vinh D Phan	SACRAMENTO	958216307	01/10/2012	1	3	3
James H Mucci D.D.S. Inc.	SACRAMENTO	958643153	01/10/2012	3	3	3
Pro Dental Group	SACRAMENTO	958165019	01/09/2012	3	3	3
Charles C Tran D.D.S.	SACRAMENTO	958244521	01/11/2012	3	3	3
Friz J. Diaz D.D.S.	SACRAMENTO	958255480	01/11/2012	1	1	1
Dr. Said Shaari	SACRAMENTO	958258338	01/11/2012	3	2	2
Geryoung Yang D.D.S.	SACRAMENTO	958224200	1/11/2012	1	1	1
Said Shaari D.D.S.	ROSEVILLE	956614129	1/11/2012	3	3	3
Judith J Vue D.D.S.	SACRAMENTO	958232609	1/11/2012	2	2	2
Cross Dental	CITRUS HEIGHTS	956107803	01/10/2012	1	1	1
U Smile Family Dentistry	SACRAMENTO	958232542	01/10/2012	3	3	3
Smileswest	SACRAMENTO	958213613	1/19/2012	2	2	2
Galt Plaza Dental	GALT	956321759	01/12/2012	1	1	1
Interdental Care	ROSEVILLE	956612915	1/6/2012	1	1	1
Kennedy Family Dentistry, Inc.	SACRAMENTO	958642665	1/10/2012	1	1	1
Zinfandel Dental Practice (South)	SACRAMENTO	958281291	1/4/2012	3	3	3
American Family Dentistry	ROSEVILLE	956614422	01/06/2012	1	1	1
Sacramento Community Clinic	SACRAMENTO	958232629	01/12/2012	1	1	1
Scripps Dental Group	SACRAMENTO	958256208	1/4/2012	3	3	3
Irvin Ramsey, DDS	SACRAMENTO	958313437	01/12/2012	1	1	1
The Effort Oak Park Community Health Center	SACRAMENTO	958173648	1/4/2012	3	3	3



## Timely Access Report

Office Name	City	Zip	Last Service Visit	Hygiene Appt (Weeks)	Routine Appt (Weeks)	Initial Appt (Weeks)
The Effort North Highlands Community Health Center	NORTH HIGHLANDS	956604294	1/4/2012	1	1	1
Elder Creek Dental Group	SACRAMENTO	958231818	01/06/2012	2	1	1
Santa Cruz Dental Office	SACRAMENTO	958232610	1/1/2012	1	1	1



## “Get It Done In Year One”

### Dental Care is Crucial During the First Year of Life

- Proper care for baby teeth is imperative as they serve several critical functions, including:
  - Fostering good nutrition by permitting proper chewing
  - Aiding speech development
  - Helping proper development of permanent teeth by saving space for them
- The American Academy of Pediatric Dentistry (AAPD), American Dental Association (ADA) and the American Academy of Pediatrics all recommend a dental visit for children by age one.
- Baby teeth are vulnerable to tooth decay from their very first appearance, on average between the ages of six and 12 months.
- The associative pain of tooth decay can prevent a child from eating correctly, impacting overall health and development. Additionally, undetected and untreated tooth decay can lead to infection, loss of teeth and expensive and mostly preventable emergency and restorative interventions.
- A scientific paper in the journal *Pediatric Dentistry* revealed that children who wait to have their first dental visit until age two or three are more likely to require restorative and emergency visits.

### Benefits of the Year One Dental Visit

- **1 + 1 = ZERO.** ONE dental visit when there's ONE tooth can equal ZERO cavities.
- Visiting a pediatric dentist by the time the first baby tooth appears enables the child to begin a lifelong preventive dental care program to minimize tooth decay and cavities.
- Pediatric dentists can detect early tooth decay, provide parents with information on proper oral and facial development, determine fluoride needs and more.
- The year one dental visit can actually *save* money. A study in the journal *Pediatrics* showed that children who have their first dental visit before age one have 40 percent lower dental costs in their first five years than children who do not, due to the cost of dental and medical procedures that may be necessary as a result of poor oral health.

### Recommended At-home Dental Care During Year One

Even before baby teeth appear, infants need proper oral care and fluoride supplements to help developing teeth grow strong and avoid early childhood caries.

- Parents should clean infant mouths and gums regularly with a soft infant toothbrush or cloth and water.
- Children older than six months need fluoride supplements if their drinking water does not contain enough fluoride. Fluoride supplementation in infants has been shown to reduce tooth decay by as much as 50 percent.
- Infants and young children have other unique caries-risk factors including development of dietary habits and childhood food preferences. Breast-feeding at will should be avoided after the first primary tooth begins to erupt and other dietary carbohydrates are introduced.
- Parents should be encouraged to have infants drink from a cup as they approach their first birthday. Infants should be weaned from the bottle by 12-14 months of age.
- Baby teeth should be brushed at least twice a day with an aged-appropriate sized toothbrush using a “smear” of fluoridated toothpaste.



**Pay to Perform:**

Based on:

- Overall number of enrollees being seen per month as a % - 4% is our minimum threshold, based on receipt of utilization data from office
- Office appointment availability - initial and routine visits
  - Optimal 0-1 week
  - Very Satisfactory 1-3 weeks
  - Satisfactory 3-4 weeks
  - Needs Improvement over 4 weeks
- Number of children in age 0-3 reported for D0145 compared to assigned

Health Net has the following P4P in place to encourage higher utilization, satisfactory appointment availability and seeing children 0-3

- Higher FFS reimbursement
- Assignment of members that come in to the plan without prior selection
- Open Network participation

For offices that trend below the threshold of 5% total membership seen per month we:

- counsel office in regard to low utilization and expectations

If trend continue past two cycles (quarterly cycle):

- Counsel, again discuss seriousness of low utilization
- Reduce FFS reimbursement to standard

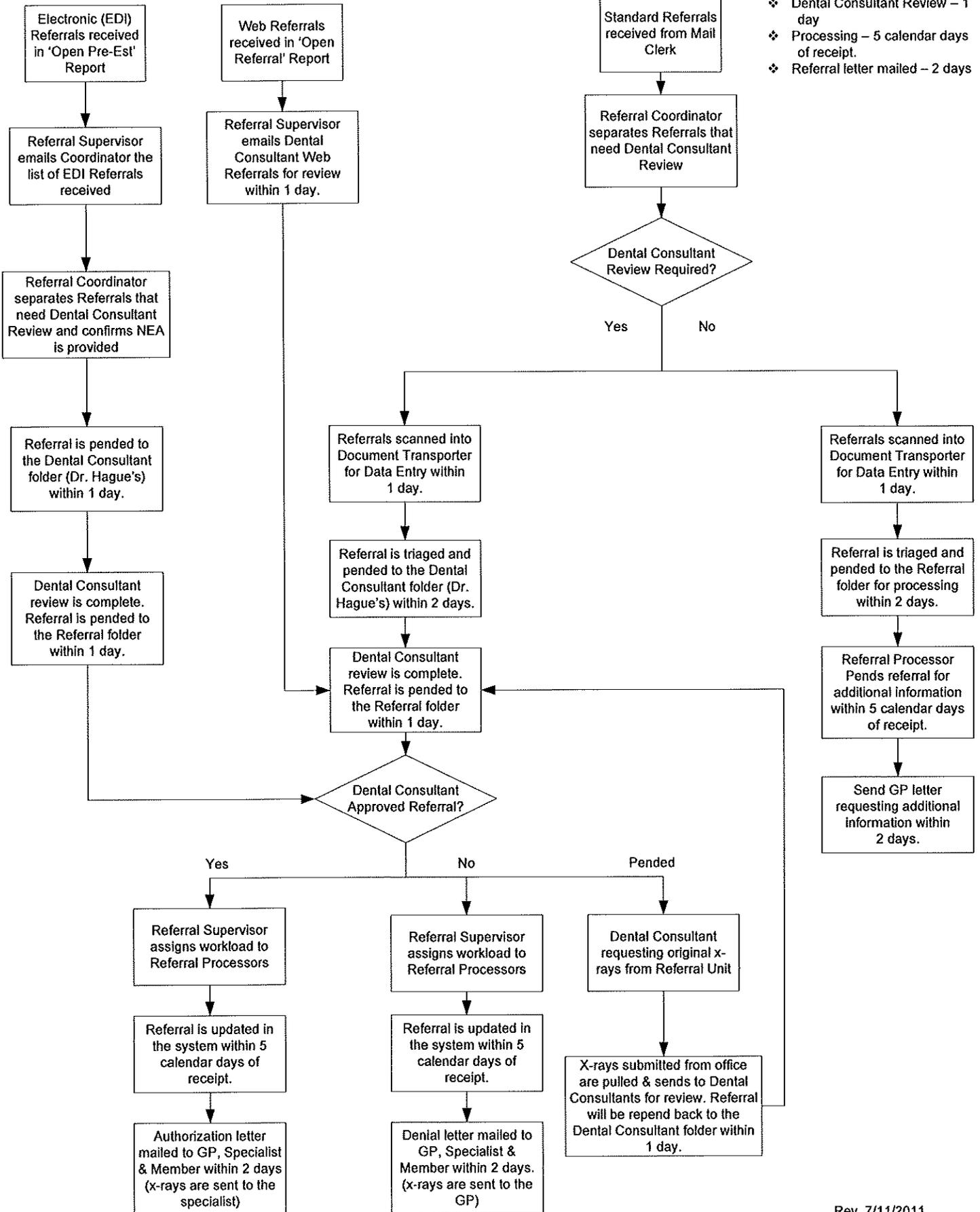
**Withholds on Provider Payments:**

If they continue past three cycles we:

- Reduction in FFS reimbursement for not meeting P4P
- Close to new enrollment
- Move enrollment to alternate location

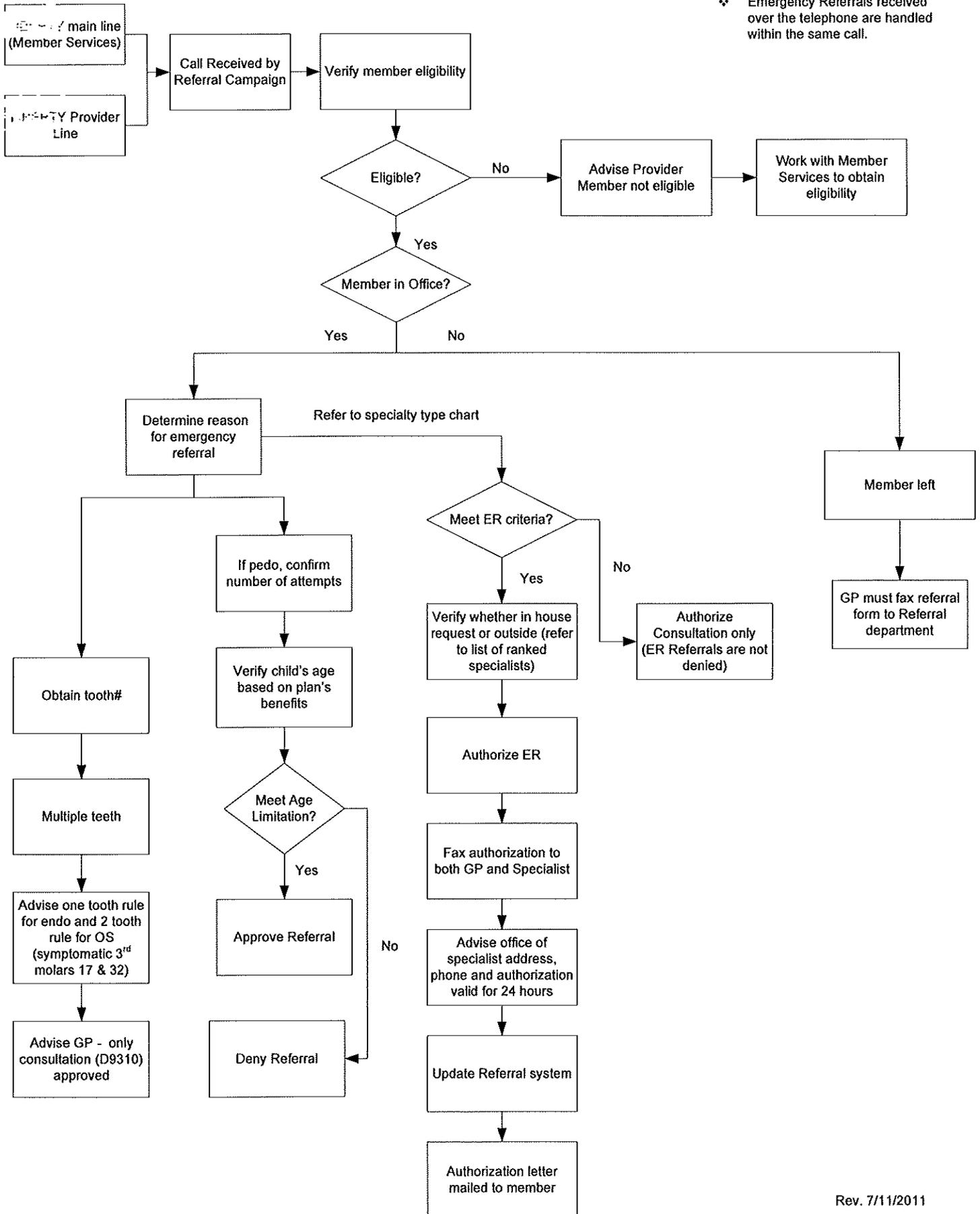
## Standard Referral Workflow

- ❖ Mail sorted and triaged – 1 to 2 days.
- ❖ Dental Consultant Review – 1 day
- ❖ Processing – 5 calendar days of receipt.
- ❖ Referral letter mailed – 2 days



# Emergency Referral (ER) Calls Workflow

❖ Emergency Referrals received over the telephone are handled within the same call.



# Emergency Referral (ER) Faxed Workflow

❖ Emergency Referrals that are submitted via fax or email are processed within 24 hours of receipt.

