

Centers for Medicare & Medicaid Services DENTAL MANAGED CARE Network Adequacy Certification

Prepared by the California Department of Health Care Services

June 2018

Executive Summary

The Department of Health Care Services (DHCS) conducted a comprehensive review of contracted Dental Managed Care (DMC) plan provider networks and has concluded that all DMC plan provider networks are compliant with or received a conditional approval on the annual network certification requirements set forth in Title 42, Code of Federal Regulations, Section 438.207. Federal and state laws and regulations establish state-specified network adequacy standards, which DMC plans are required to meet as set forth under the DMC contracts. The DMC contracts are known as Geographic Managed Care (GMC) in Sacramento County, and Prepaid Health Plans (PHPs) in Los Angeles County. DHCS used the list of network providers and mapped them against the total Medi-Cal eligible beneficiaries that are enrolled in Sacramento and Los Angeles counties respectively. Additionally, DHCS collected survey data from each DMC plan depicting average appointment availability for enrolled beneficiaries.

Description of Sacramento County

Sacramento County is located in Northern California Central Valley at the base of the Sierra Nevada. Sacramento County has a total area of 994 square miles and borders Sutter County to the north, El Dorado County to the northeast, Amador County to the southeast, San Joaquin County to the south, Contra Costa County to the southwest, Solano County to the west and Yolo County to the northwest. As of July 1, 2016, the United States Census Bureau estimates that Sacramento County had a population of 1,514,460.

Description of Los Angeles County

Los Angeles County, officially the County of Los Angeles, is the most populous county in the United States, with more than 10 million inhabitants as of 2017. Its population is larger than that of 41 individual U.S. states. It has 88 incorporated cities and many unincorporated areas and at 4,083 square miles, it is larger than the combined areas of the U.S. states of Delaware and Rhode Island. The county is home to more than one-quarter of California residents and is one of the most ethnically diverse counties in the U.S.

Network Evaluation

DHCS evaluated DMC plan provider networks to assess sufficient access to primary care dentists (PCDs), specialty care dentists, and other providers of contractually

required covered services. The network evaluation took into account each plan's ability to serve the anticipated utilization of services by members in Sacramento and Los Angeles counties. In order for DMC plans to meet network access requirements, they must have sufficient providers to serve enrollees, meet service area needs with the geographic distribution of PCDs and specialists, and provide timely access to care.

Projected Enrollment

For DHCS to evaluate that DMC plans have a sufficient number of providers to meet the needs of the anticipated number of enrollees in July 2018, DHCS reviewed enrollment trends from the previous three fiscal years and assumed that enrollment within DMC plans would remain consistent with these trends.

Provider Network

DHCS reviewed each DMC plan's network within both Sacramento and Los Angeles counties to verify compliance with the DHCS contract as well as federal and state laws and regulations. Members are assigned a PCD when joining a DMC plan, either by choice or by automatic assignment. Members are able to change their PCD at any time. For the purposes of this certification, General Dentists are considered PCDs. DHCS reviewed the PCD network to ensure compliance with network capacity, provider-to-member ratios, and time and distance standards.

DMC plans must meet the following contractual requirements:

Network Capacity – Provider to Member Ratios

DMC plans must demonstrate compliance with provider to member ratios pursuant to the DMC contract, Exhibit A, Attachment 8.B (Provider to Member Ratios). All DMC plans must demonstrate there is one full-time equivalent PCD to every 2,000 beneficiaries, and one full-time equivalent network dentist to every 1,200 beneficiaries. DMC plans must maintain a provider network adequate to serve their member capacity within their service area. DMC plans must meet or exceed network capacity requirements and proportionately adjust the number of network providers to support any anticipated changes in enrollment. Currently, the DMC plans' reported networks far exceed the required provider to member ratios to where they would still have the capacity to serve members even with a substantial increase in projected enrollment. DHCS has not yet completed DMC plans' reported provider networks validations, but will validate this information by surveying a random sample of providers and will complete this assessment no later than September 2018.

Geographic Network Distribution – Time and Distance Standards

DMC plans must demonstrate compliance with the time and distance standards pursuant to the DMC contract, Exhibit A, Attachment 8.E (Time and Distance Standard) on an annual basis or at any time there has been a significant change in its operations that would affect the adequacy of capacity and services. DMC plans must maintain a network of PCDs that are located within ten miles or 30 minutes from a member's residence unless the DMC plan has an approved alternative time and distance standard. DHCS utilized Geographic Information Systems (GIS) software to validate

and evaluate the geographic distribution of PCD provider networks separately for both children and adults for DMC plans in Sacramento and Los Angeles counties. With the exception of one or two zip codes in each county for which DHCS is actively monitoring the DMC plans through the Corrective Action Plan (CAP) process to ensure additional contracts are secured, all other zip codes within these networks meet the contractual requirements for time and distance standards for eligible members, thereby demonstrating an adequate network. Furthermore, the DHCS-imposed CAP mandates out-of-network (OON) access for members residing in zip codes where the geographic standard has not been met if services cannot be provided within timely access standards in-network until additional contracts have been fully executed.

Timely Access Standards

DMC plans must demonstrate compliance with timely access standards pursuant to the DMC contract, Exhibit A, Attachment 11.B (Access Requirements). All Plan Letter (APL) 17-012¹ further requires all DMC plans to submit a quarterly Timely Access and Specialty Referrals Report to the Department to demonstrate compliance with the following appointment types:

- Initial Appointment – within four weeks
- Routine Appointment (non-emergency) – within four weeks
- Preventive Dental Care Appointment – within four weeks
- Specialist Appointment – within 30 **business** days for adults
- Specialist Appointment – within 30 **calendar** days for children
- Emergency Appointment – within 24 hours

State law and federal regulations establish DMC plans' timely access responsibility. DMC plans must ensure continual compliance by monitoring network providers regularly and requiring corrective action when compliance is not being met. Based on plans' reported compliance data, with the exception of four DMC plans who did not follow-up with non-responsive providers surveyed for timely access to specialist appointments for which DHCS is actively monitoring through the CAP process, all six DMC plans demonstrate compliance with timely access standards for all other appointment types. Furthermore, the DHCS-imposed CAP mandates OON access for members if services cannot be provided within timely access standards in-network until compliance has been fully met. In addition, DHCS will validate the network providers' reported ability to provide timely access to appointments by surveying a random sample of providers and will complete this assessment no later than September 2018.

Access to Out-of-Network Providers

DMC plans submitted policies and procedures to demonstrate how they will ensure member access to OON providers. Upon review, DHCS concluded that DMC plans meet all of their contractual requirements and have the ability, when required, to provide OON provider access to members. For DMC plans identified as non-compliant with any of the network adequacy standards, DHCS has mandated that OON access be

¹ Department of Health Care Services (2018). Dental Managed Care All Plan Letters. <http://www.dhcs.ca.gov/services/Pages/DentalAllPlanLetters.aspx>

authorized if services cannot be provided within timely access standards by in-network providers.

Specialist Network

To evaluate whether DMC plans meet the required ratio of one full-time equivalent network dentist to every 1,200 beneficiaries, DHCS incorporated the following provider types into its calculations: endodontists, oral surgeons, orthodontists, pedodontists, periodontists, and prosthodontists. While there are no established standards for specialist types delineated in either federal or state laws, DHCS evaluated the specialist network for each DMC plan. Based on the network evaluation, DHCS concluded that DMC plans have an adequate specialist network in place to ensure access to specialty services.

Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), and Indian Health Service (IHS) Facilities

DMC plans must conduct outreach to subcontract with FQHCs, RHCs, and IHS facilities and include them as part of their provider network pursuant to the DMC contract, Exhibit A, Attachment 8.L (Subcontracts with FQHC/RHC). DMC plans are contracted with FQHCs, RHCs, and IHS facilities in Sacramento and Los Angeles counties. DHCS monitors all DMC plans to ensure contracts are in place with existing facilities.

APPENDIX

Attachment A: Access Dental Plan

Attachment B: Health Net of California

Attachment C: Liberty Dental Plan

Figure 1: Provider to Member Ratios

Sacramento County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	226	136,500	1:604	1:2000	Yes
Total Dentists	258	136,500	1:529	1:1200	Yes

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs; Maximus Central Operations (COPS)-32 Dental Enrollment by Age Report (02/02/18).

Los Angeles County

Provider Type	Dentists	Enrollees	Provider to	Required	Standard
Primary Care Dentists	1,082	176,604	1:163	1:2000	Yes
Total Dentists	1,444	176,604	1:122	1:1200	Yes

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs; Maximus COPS-32 Dental Enrollment by Age Report (02/02/18).

Figure 2: Time and Distance Standards

Sacramento County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Conditioned ²
Children	10 miles/30 minutes	Conditioned ³

Data source: DHCS Geo Maps (June 2017); Plan Time & Distance Deliverable (01/30/18).

Los Angeles County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Conditioned ⁴
Children	10 miles/30 minutes	Conditioned ⁵

Data source: DHCS Geo Maps (June 2017); Plan Time & Distance Deliverable (01/30/18).

On March 30, 2018, Access submitted documentation indicating it will expand its network by contracting with additional adult and pediatric providers in Sacramento (95641) and Los Angeles (90704; 93536) counties. This action will ensure that all members have access to a PCD within the required time/distance standard. On May 25, 2018, DHCS approved Access' annual network certification but imposed a CAP mandating that contracting efforts be reported to DHCS on no less than a bi-weekly basis until all contracts have been fully executed, which shall take no longer than three months. Furthermore, during the interim period for which Access is in the process of securing additional contracts, the plan is required to provide access to OON providers if in-network providers cannot provide services within timely access standards for members residing in zip codes where the geographic standard has not been met.

² DHCS imposed a CAP which requires OON access if in-network providers cannot provide services within timely access standards.

³ DHCS imposed a CAP which requires OON access if in-network providers cannot provide services within timely access standards.

⁴ DHCS imposed a CAP which requires OON access if in-network providers cannot provide services within timely access standards.

⁵ DHCS imposed a CAP which requires OON access if in-network providers cannot provide services within timely access standards.

Figure 3: Timely Access Standards

Appointment Type	Required Standard	Standard Met (Sacramento County)	Standard Met (Los Angeles County)
Initial	4 weeks	Yes	Yes
Routine	4 weeks	Yes	Yes
Preventive	4 weeks	Yes	Yes
Specialist (adults)	30 business days	Yes	Yes
Specialist (children)	30 calendar days	Yes	Yes
Emergency	24 hours	Yes	Yes

⁵Data source: Plan Timely Access Deliverable (Q3 2017). A 90% threshold was used to determine compliance.

Figure 4: Contracted Specialists

Provider Type	Sacramento County	Los Angeles County
Specialists ⁶	55	526

⁶Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs.

Figure 5: Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), and Indian Health Service (IHS) Facilities

Type	Sacramento County	Los Angeles County
FQHCs/RHCs	10	58
IHS Facilities	1	0 ⁷

⁷Data source: Plan FQHCs, RHCs, and IHS Facilities Report Deliverable (March 2018).

⁶ Specialist network is comprised of: endodontists, oral surgeons, orthodontists, pedodontists, periodontists, and prosthodontists.

⁷ The plan must permit Indian enrollees to obtain covered services from OON Indian Health Care Providers (IHCPs) and pay for those services.

Figure 1: Provider to Member Ratios

Sacramento County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	150	129,289	1:862	1:2000	Yes
Total Dentists	211	129,289	1:613	1:1200	Yes

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs; Maximus COPS-32 Dental Enrollment by Age Report (02/02/18).

Los Angeles County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	807	189,506	1:235	1:2000	Yes
Total Dentists	1,061	189,506	1:179	1:1200	Yes

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs; Maximus COPS-32 Dental Enrollment by Age Report (02/02/18).

Figure 2: Time and Distance Standards

Sacramento County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Conditioned ⁸
Children	10 miles/30 minutes	Conditioned ⁹

Data source: DHCS Geo Maps (June 2017); Plan Time & Distance Deliverable (01/29/18; 04/06/18).

Los Angeles County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Conditioned ¹⁰
Children	10 miles/30 minutes	Conditioned ¹¹

Data source: DHCS Geo Maps (June 2017); Plan Time & Distance Deliverable (01/29/18; 04/06/18).

On April 9, 2018, Health Net submitted documentation indicating it will expand its network by contracting with additional adult and pediatric providers in Sacramento (95641; 95690) and Los Angeles (93536) counties. This action will ensure that all members have access to a PCD within the required time/distance standard. On May 25, 2018, DHCS approved Health Net’s annual network certification but imposed a CAP mandating that contracting efforts be reported to DHCS on no less than a bi-weekly basis until all contracts have been fully executed, which shall take no longer than three months. Furthermore, during the interim period for which Health Net is in the process of securing additional contracts, the plan is required to provide access to OON providers if in-network providers cannot provide services within timely access standards for members residing in zip codes where the geographic standard has not been met.

⁸ DHCS imposed a CAP which requires OON access if in-network providers cannot provide services within timely access standards.

⁹ DHCS imposed a CAP which requires OON access if in-network providers cannot provide services within timely access standards.

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Figure 3: Timely Access Standards

Appointment Type	Required Standard	Standard Met (Sacramento County)	Standard Met (Los Angeles County)
Initial	4 weeks	Yes	Yes
Routine	4 weeks	Yes	Yes
Preventive	4 weeks	Yes	Yes
Specialist (adults)	30 business days	No ¹²	No ¹³
Specialist (children)	30 calendar days	No ¹⁴	No ¹⁵
Emergency	24 hours	Yes	Yes

Data source: Plan Timely Access Deliverable (Q3 2017). A 90% threshold was used to determine compliance.

On April 27, 2018, DHCS imposed a CAP on Health Net for non-compliance with timely access requirements for specialist appointments (adults and children), mandating OON access for members if services cannot be provided within timely access standards in-network. DHCS will continue to monitor the CAP to ensure full compliance.

Figure 4: Contracted Specialists

Provider Type	Sacramento County	Los Angeles County
Specialists ¹⁶	67	257

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs.

Figure 5: Federally Qualified Health Centers (FQHC), Rural Health Clinic (RHC), and Indian Health Service (IHS) Facilities

Type	Sacramento County	Los Angeles County
FQHCs/RHCs	11	54
IHS Facilities	2	0 ¹⁷

Data source: Plan FQHCs, RHCs, and IHS Facilities Report Deliverable (March 2018).

¹² DHCS imposed a CAP which requires OON access if in-network providers cannot provide services within timely access standards.

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¹⁶ Specialist network is comprised of: endodontists, oral surgeons, orthodontists, pedodontists, periodontists, and prosthodontists.

¹⁷ The plan must permit Indian enrollees to obtain covered services from OON IHCPs and pay for those services.

Figure 1: Provider to Member Ratios

Sacramento County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	203	162,191	1:799	1:2000	Yes
Total Dentists	264	162,191	1:728	1:1200	Yes

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs; Maximus COPS-32 Dental Enrollment by Age Report (02/02/18)

Los Angeles County

Provider Type	Dentists	Enrollees	Provider to Member Ratio	Required Standard	Standard Met
Primary Care Dentists	1,604	64,306	1:40	1:2000	Yes
Total Dentists	2,034	64,306	1:32	1:1200	Yes

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs; Maximus COPS-32 Dental Enrollment by Age Report (02/02/18).

Figure 2: Time and Distance Standards

Sacramento County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Conditioned ¹⁸
Children	10 miles/30 minutes	Conditioned ¹⁹

Data source: DHCS Geo Maps (June 2017); Plan Time & Distance Deliverable (01/29/18; 04/06/18).

Los Angeles County

Population	Required Standard	Standard Met
Adults	10 miles/30 minutes	Conditioned ²⁰
Children	10 miles/30 minutes	Conditioned ²¹

Data source: DHCS Geo Maps (June 2017); Plan Time & Distance Deliverable (01/29/18; 04/06/18).

On April 9, 2018, Liberty submitted documentation indicating it will expand its network by contracting with additional adult and pediatric providers in Sacramento (95641) and Los Angeles (93536) counties. This action will ensure that all members have access to a PCD within the required time/distance standard. On May 25, 2018, DHCS approved Liberty’s annual network certification but imposed a CAP mandating that contracting efforts be reported to DHCS on no less than a bi-weekly basis until all contracts have been fully executed, which shall take no longer than three months. Furthermore, during the interim period for which the plan is in the process of securing additional contracts, Liberty is required to provide access to OON providers if in-network providers cannot provide services within timely access standards for members residing in zip codes where the geographic standard has not been met.

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Initial	4 weeks	Yes	Yes
Routine	4 weeks	Yes	Yes
Preventive	4 weeks	Yes	Yes
Specialist (adults)	30 business days	No ²²	No ²³
Specialist (children)	30 calendar days	No ²⁴	No ²⁵
Emergency	24 hours	Yes	Yes

Data source: Plan Timely Access Deliverable (Q3 2017). A 90% threshold was used to determine compliance.

On April 27, 2018, DHCS imposed a CAP on Liberty for non-compliance with timely access requirements for specialist appointments (adults and children), mandating OON access for members if services cannot be provided within timely access standards in-network. DHCS will continue to monitor the CAP to ensure full compliance.

Figure 4: Contracted Specialists

Provider Type	Sacramento County	Los Angeles County
Specialists ²⁶	67	256

Data source: Plan Provider Network Report (March 2018). All values are calculated using unduplicated NPIs.

Figure 5: Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), and Indian Health Service (IHS) Facilities

Type	Sacramento County	Los Angeles County
FQHCs/RHCs	11	39
IHS Facilities	2	0 ²⁷

Data source: Plan FQHCs, RHCs, and IHS Facilities Report Deliverable (March 2018).

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