

**Department of Health Care Services**  
**Medi-Cal Dental AB 2207 Reporting Requirements**

December 12, 2018

Item #	Delivery System*			Age Group	Measure	Current Measure	Frequency
1	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Overall utilization of dental services over an extended period of time	Yes	Quarterly
2	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Annual dental visits	Yes	Quarterly
3	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Use of preventive services	Yes	Quarterly
4	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Use of dental treatment services	Yes	Quarterly
5	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Use of examinations and oral health evaluations	Yes	Quarterly
6	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Use of diagnostic services	Yes	Quarterly
7	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	Children	Use of dental sealants	Yes	Quarterly
8	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	Children	Number of applications of dental sealants and fluoride varnishes	Yes	Quarterly
9	FFS	GMC	PHP	Children	Sealant to Restoration ratio**	Yes	Quarterly
10	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Filling to preventive services ratio	Yes	Quarterly
11	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Treatment to caries prevention ratio	Yes	Quarterly
12	<a href="#">FFS</a>	<a href="#">GMC</a>	<a href="#">PHP</a>	All	Continuity of care	Yes	Quarterly
13	<a href="#">FFS &amp; DMC</a>			All	Summary report of the nature and types of complaints and grievances	Yes	Annual
14	FFS	GMC	PHP	All	Number of beneficiaries who received general anesthesia services	No	Annual
15	FFS	GMC	PHP	All	Number of patients seen on a per-provider basis	No	Annual
16	FFS	GMC	PHP	All	Number of dental services rendered by each provider	No	Annual
17	FFS & DMC			All	For each rendering provider:	No	Annual
17a					Annual preventive dental services	No	
17b					Annual dental treatment services	No	
17c					Annual examinations and oral health evaluations	No	
18	FFS & DMC			All	For each billing provider/dental office and rendering provider:	No	Annual
18a					Annual dental visits	No	
18b					Annual preventive dental services	No	
18c					Annual dental treatment services	No	
18d					Annual examinations and oral health evaluations	No	
19		<a href="#">DMC</a>		All	Provider network adequacy	Yes	Annual
20		<a href="#">Access</a>	Children	All	Survey of member satisfaction with plans and providers	Yes	Annual
		<a href="#">LIBERTY</a>					
		<a href="#">Health Net</a>					
21		DMC		All	DMHC Reports on DMC Plans	Yes	Annual
22		DMC		All	External Quality of Care Review	Yes	Annual

\* Medi-Cal Dental Fee-for-Service (FFS) and Dental Managed Care (DMC) including Geographic Managed Care (GMC) and Prepaid Health Plans (PHP)

\*\* Methodology of Sealant to Restoration Ratio is under review