



DENTAL PROGRAM UPDATE

SCDA Annual Convention

May 5, 2012

DentaQuest®

MUTUAL GOALS FOR THE HEALTHY CONNECTIONS DENTAL PROGRAM

- **Cost-Effective Administration**
 - DentaQuest's technology and processes deliver compliant and cost-effective administration of government-provided dental services.
- **Commitment to Improving Oral Health & Access to Quality Care**
 - Ensuring eligible beneficiaries access to appropriate dental care
 - Analyzing policy through data analysis, stakeholder input, and review of successful models elsewhere

INTRODUCTIONS

- **DENTAQUEST**

Rebekah Mathews, SC Executive Director

Ellen Rattey, Market Director

Tycie Sellers, Provider Relations Representative

Doyle Williams, Senior Dental Director

- **SC DEPARTMENT OF HEALTH & HUMAN SERVICES**

Valeria Williams, Director of Health Services

PROGRAM OVERVIEW AND OPERATIONAL DATA

MEDICAID OVERVIEW: ENROLLMENT

Approximately 50,000 new beneficiaries expected to join ***Healthy Connections*** before close of FY2012

Projected growth of 32,000 new beneficiaries in FY2013

Average monthly ***Healthy Connections*** membership at 900,000

Average monthly membership of dental eligibles:

533,000 Children and MR/RD Waiver members

282,000 Adults

MEDICAID OVERVIEW: FUNDING

SCDHHS allocating **\$98M** for dental program in FY2013

Funding is a Maintenance of Effort (MOE) Request

Represents 2% of overall agency Medicaid Assistance budget

MEDICAID OVERVIEW: POLICY

December 8, 2011 Dental Provider Bulletin

Issued to clarify:

1. Frequency limitations
2. Exceptions to Elimination of Adult Benefit
3. Availability of emergency medical services rendered by oral surgeons
4. Broken Appointment Tracking functionality on DQ Provider Web Portal

MEDICAID OVERVIEW: POLICY

Dental Advisory Council

Established Spring 2012

Diverse representation from participating providers, public health, organized dentistry and DentaQuest

Charged with reviewing policy to identify areas for quality improvement and cost savings

Led by SCDHHS

MEDICAID OVERVIEW: EHR INCENTIVES

Electronic Health Record (EHR) Incentive Program

Implemented by federal Center for Medicare and Medicaid Services (CMS)

Dentists are part of Eligible Professional providers who can participate

To date, **89** SC dentists receiving **\$1.9M** in EHR incentives

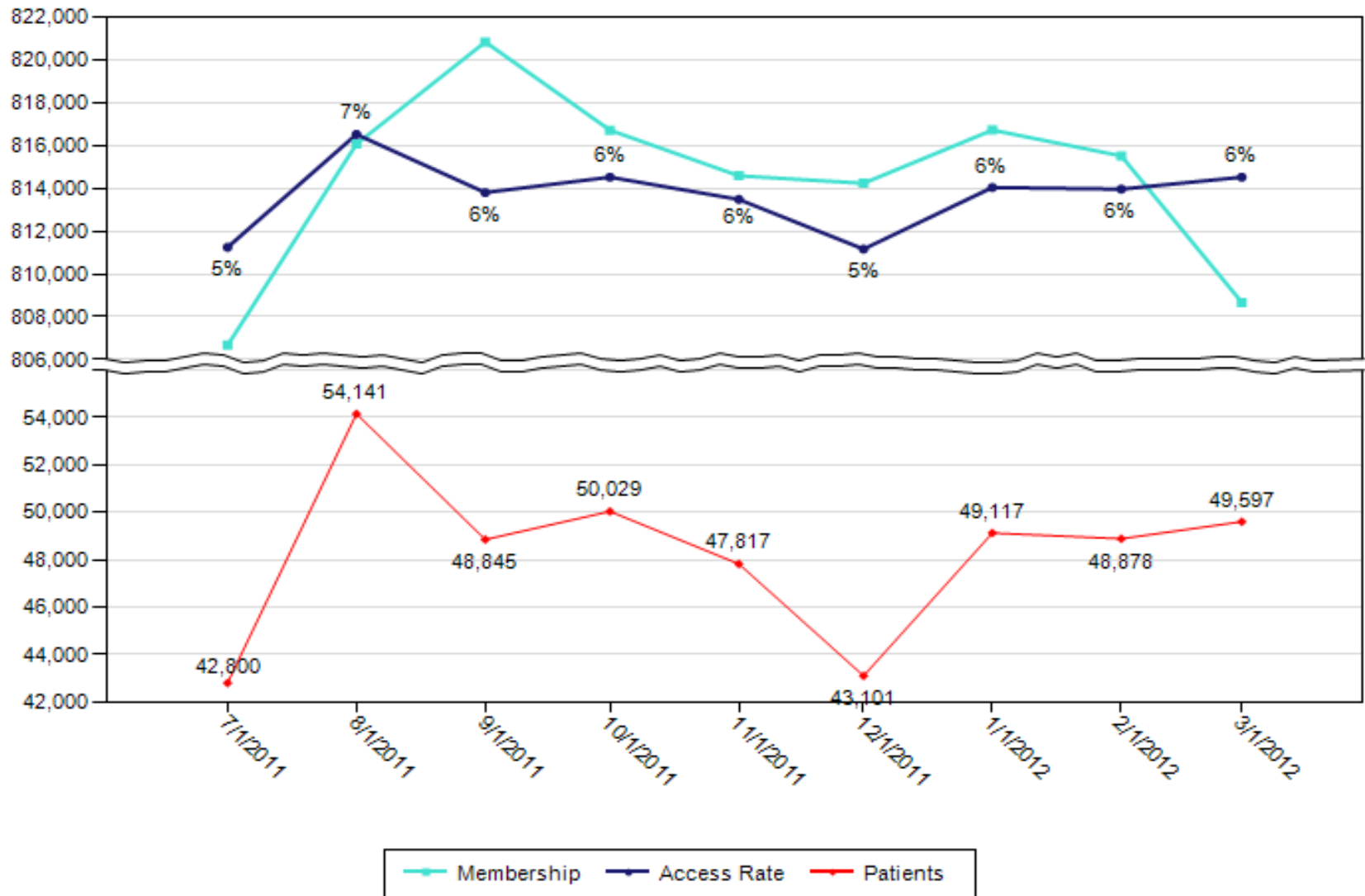
Questions?

Information available through www.scdhhs.gov/hit or HITSC@scdhhs.gov

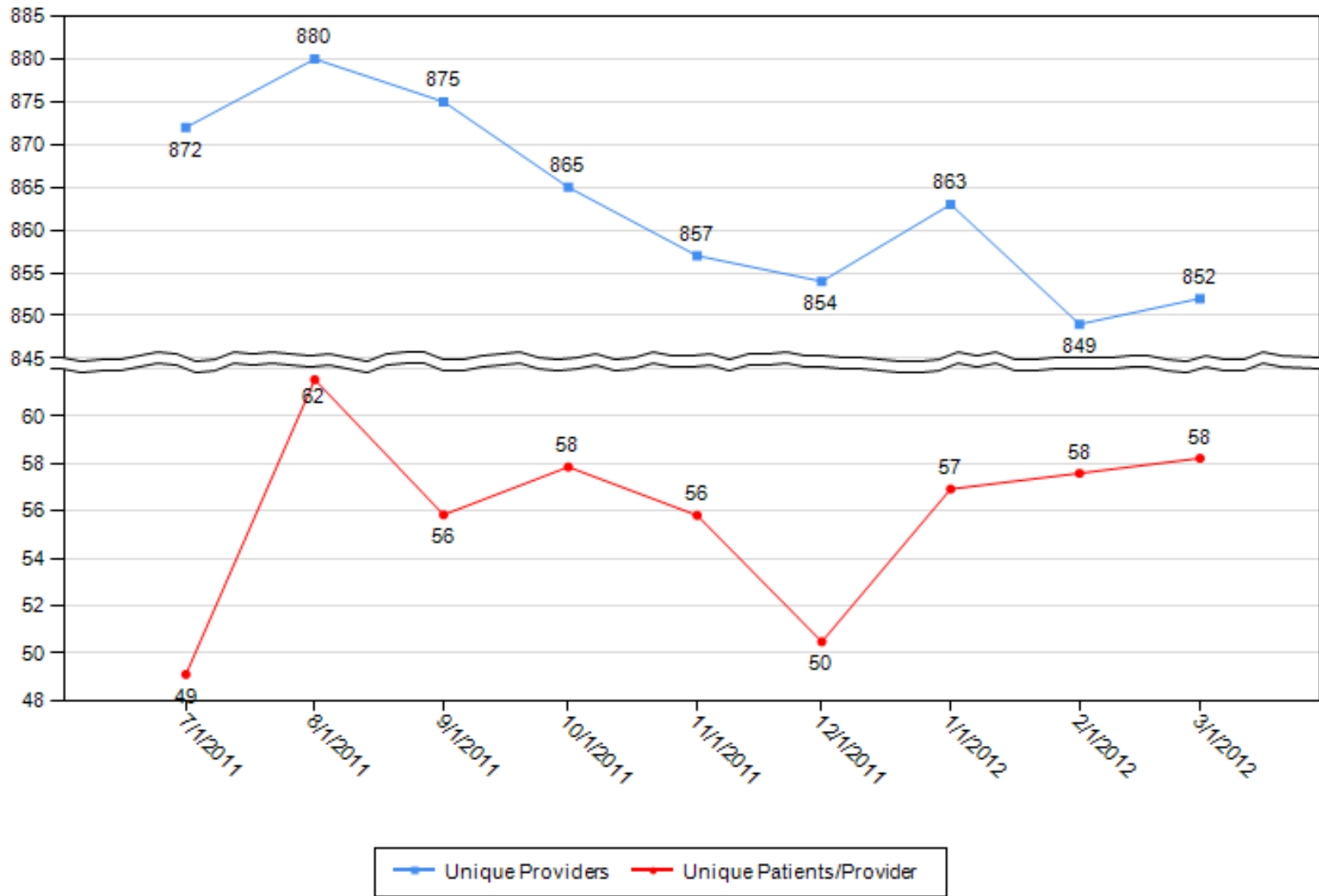
MEMBERSHIP SNAPSHOT

	March 2012	March 2011
South Carolina Healthy Connections Adult	278,156	277,869
South Carolina Healthy Connections Under 21 and MR/RD Waiver	530,512	521,721

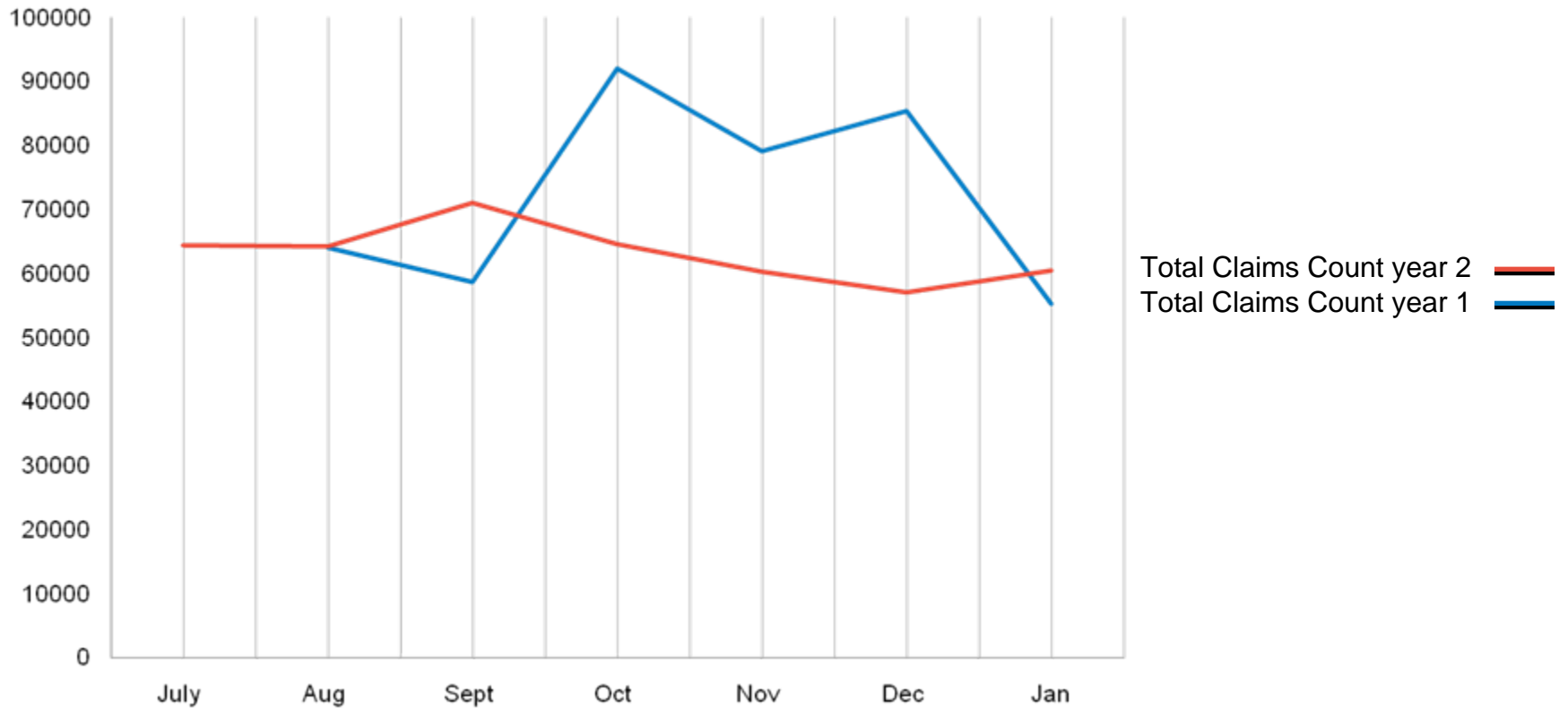
Membership, Access Rate and Patients



Billing Providers & Unique Patients/Provider

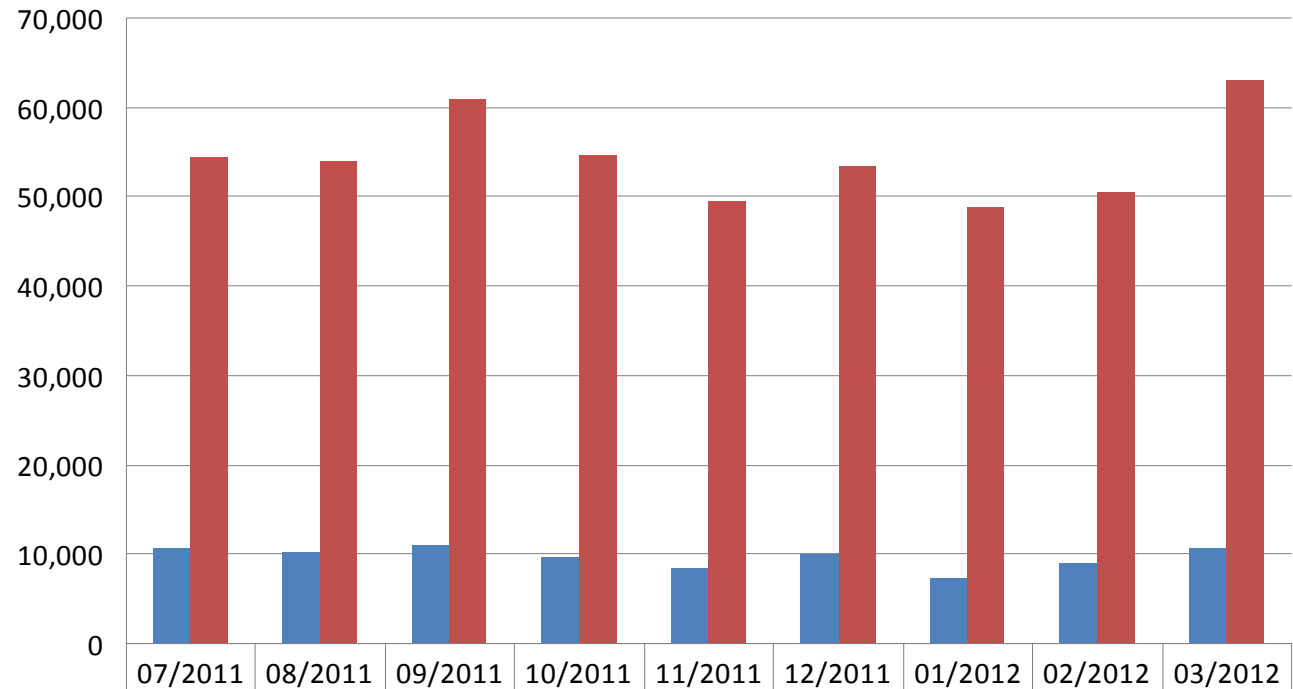


CLAIM VOLUME



64,431	64,203	70,917	64,462	60,312	56,943	60,351
0	63,951	58,597	91,911	79,095	85,272	55,227

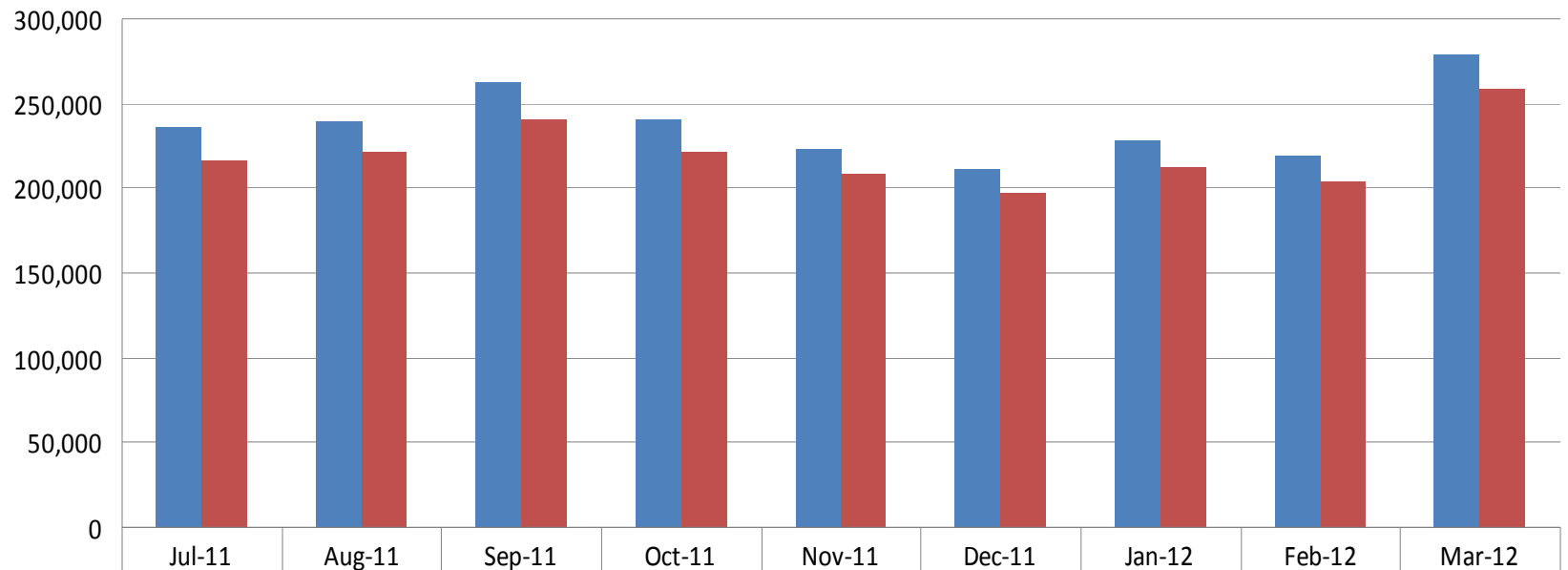
CLAIM RECEIPT BY SUBMISSION TYPE



■ Total Paper Claims for the Month	10,562	10,243	11,050	9,674	8,554	10,136	7,233	9,075	10,594
■ Total Electronic Claims for the Month	54,351	53,973	60,973	54,613	49,564	53,408	48,847	50,565	63,191

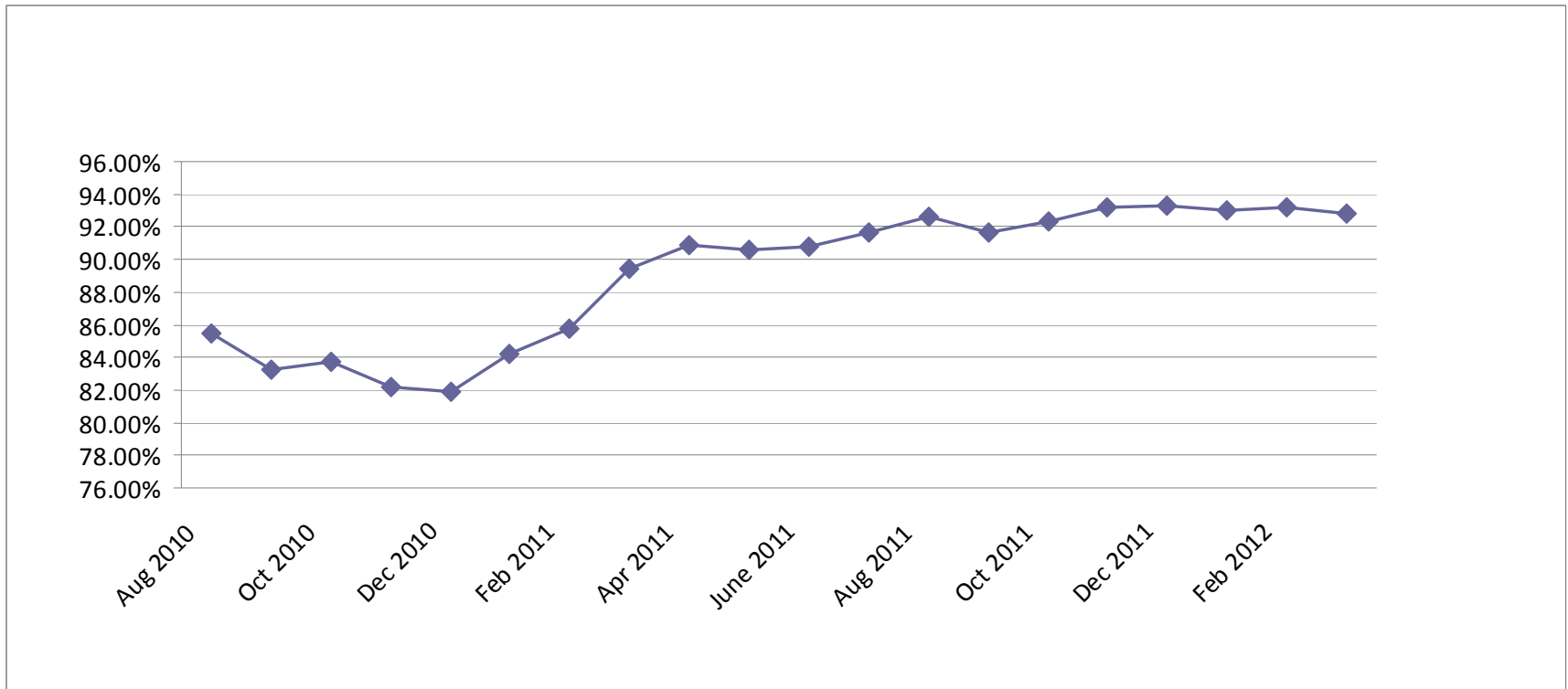
On average, **85%** of claims received are electronic submissions**

SERVICES RENDERED AND REIMBURSED



	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12
■ Total Services Count	236,675	239,361	262,614	240,312	223,195	211,049	228,262	218,967	278,536
■ Services Paid Count	216,831	221,607	240,666	221,912	207,908	196,934	212,364	204,022	258,553

RATIO OF SERVICES PAID TO SUBMISSIONS

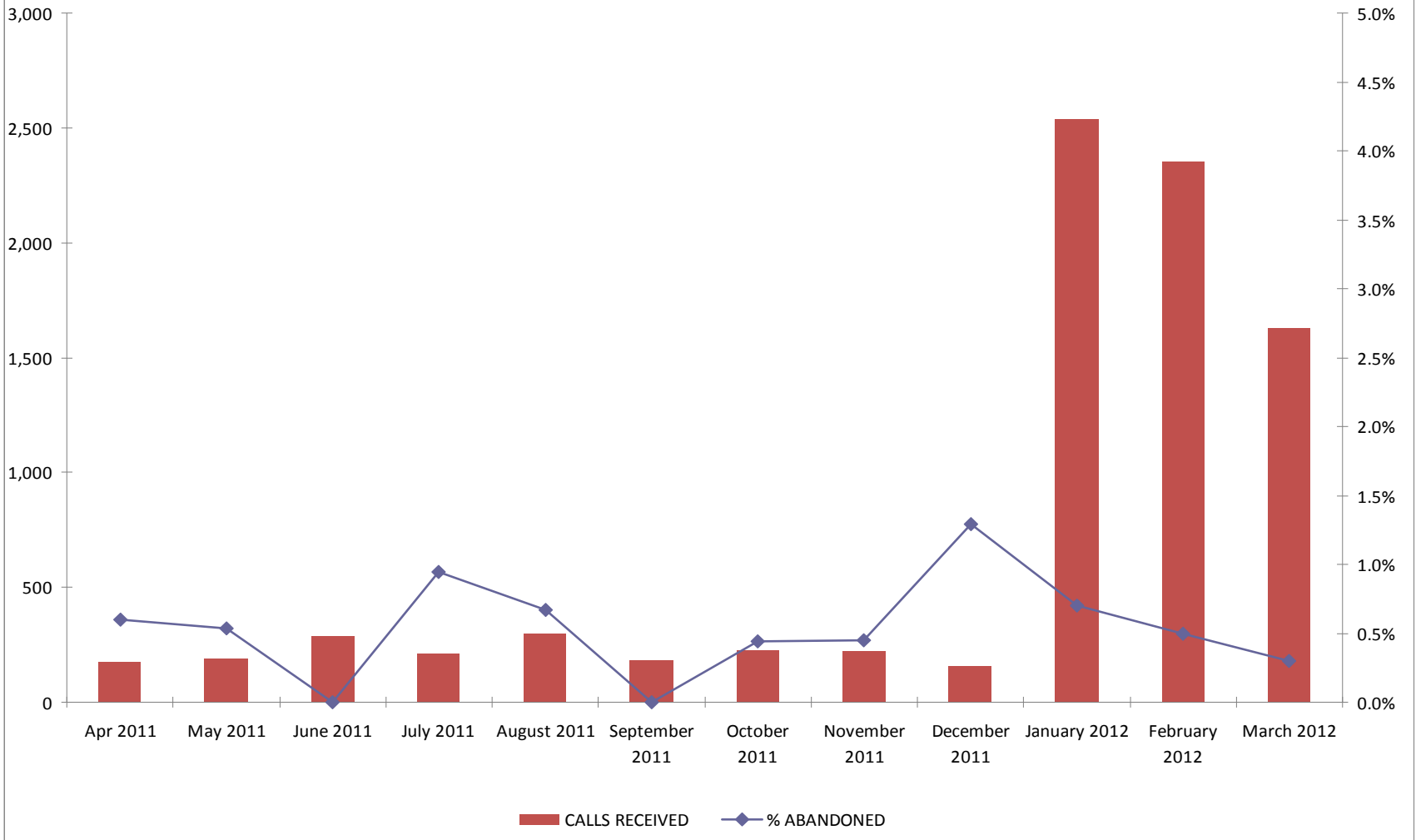


****Currently over 92% of services filed reimbursed****

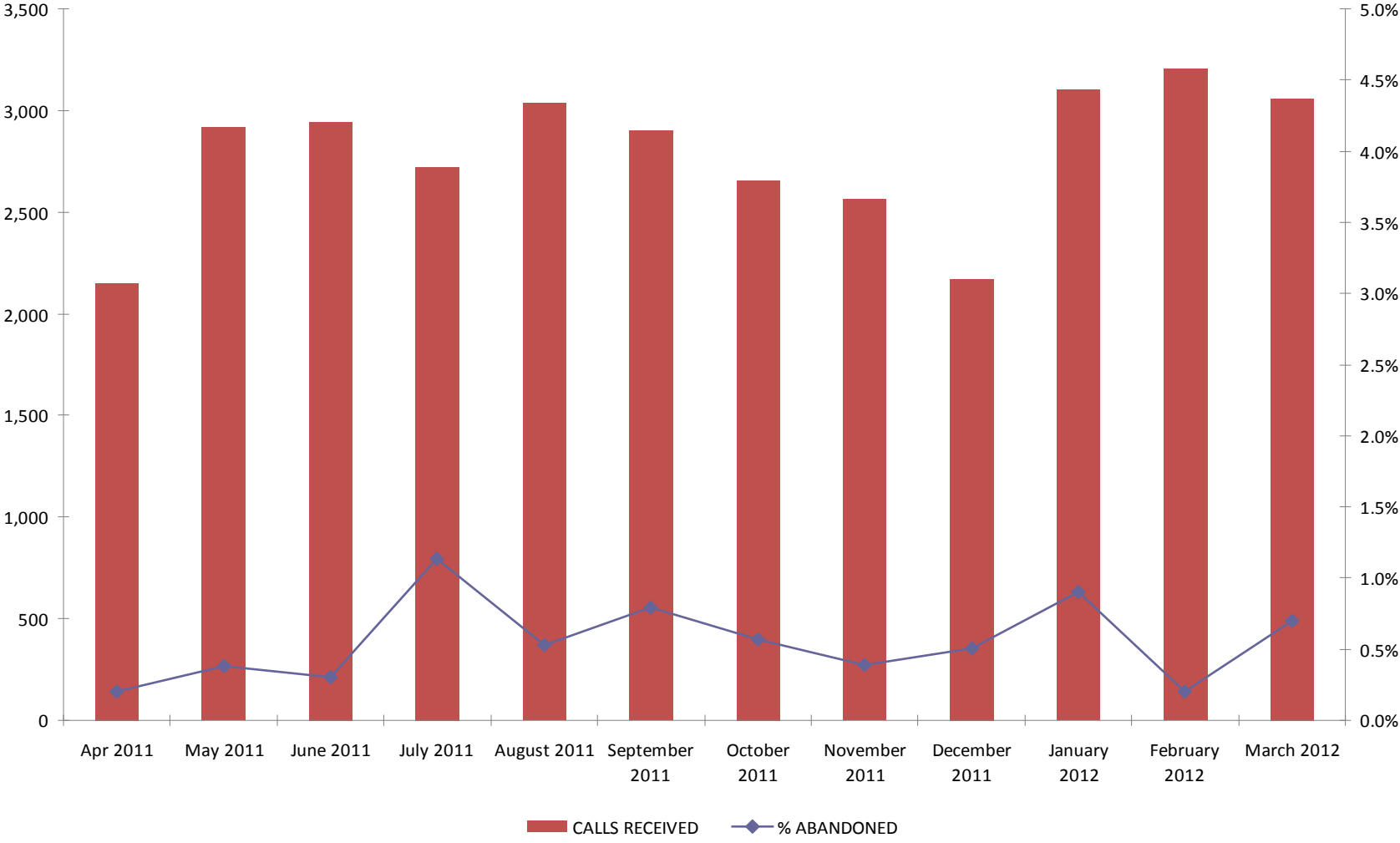
MOST COMMON DENIAL REASONS

Issue		Processing Policy
Duplicate Submission	2029	This procedure is a duplicate of a service previously processed.
Frequency Limitation	2090	Service exceeds benefit allowance. This service is allowed once every 6 months.
COB	2051	Member's enrollment file indicates other insurance coverage may be primary for these services. Please submit primary carrier's explanation of benefits showing payment or denial for these services.
Frequency Limitation	2098	Similar restorations are allowed once per 36 months per patient per tooth restored. The patient's history shows a similar restoration in the past 36 months.
COB	2001	The patient was covered on the date(s) of service by another insurance company which is the primary carrier. After the prime carrier has determined its liability, resubmit this claim with a copy of the prime carrier's EOB.

SC Healthy Connections Member Calls (Abandonment Objective <5%)



SC Healthy Connections Provider Calls (Abandonment Objective <5%)



PROVIDER WEB PORTAL

WEB PORTAL HOME PAGE

DentaQuest

This is user id:jprovider

Home | [FAQ](#) | [Sign Out](#)

Dentist

- Administration
- Claims/Pre-Authorizations
- Patient
- Tools
- Privacy Policy
- Terms of Use

Welcome

Welcome South Carolina Dentist!

Plan Messages

» [Network Rates](#)

Health News

» [Oral Health News - 12/17/2009](#)

My Health Tools / Resources

[American Dental Association](#)

[National Association of Dental Plans](#)

Contact

Provider Relations Telephone Numbers

All DentaQuest Providers: 1.800.341.8478

General Telephone Numbers

Toll Free
1.800.417.7140


Local
1.262.241.7140

Hearing Impaired Line
1.800.466.7566


Utilization Management
1.800.294.9650

Report Fraud
1.800.237.9139

Message Center

(Inbox)  You have 2 new messages!

From	Subject	Received
DentaQuest Customer Service	Your Inquiry Status	12/10/2009
DentaQuest Customer Service	Your message to Contact DentaQuest	12/10/2009



» [Event Calendar](#)

» [Related Documents](#)

MEMBER SERVICE HISTORY ENHANCEMENT

[Home](#) > [Member Eligibility Search](#) > [Member Eligibility List](#)

Member Detail

This page displays member-specific information. If applicable, you may view Eligibility History, Claims and Service History.

To Find a Dentist for the Member click on the View Provider Directory.

Search
*Service Date (mm/dd/yyyy)
*Required Fields

Client: **Illinois Health and Family Services - Medicaid - 7000541001**

Family

Member Name	Member Number
View Member Details	View Member Details

[View Benefit Maximums](#) [View Claims](#) [View Service History](#) [View Provider Directory](#)

Member Name **Smith John**
Member Number **991001775**
DOB **08/31/1994**
Address **1100 S. STATE ST. CHICAGO, IL 60605**
Home Phone **(773) 231-1994**
Work Phone
Fax

Eligibility Information

Plan
Illinois Medicaid - Children's Medicaid (Under 21)

Primary Care Dentist

Network Name	Dentist Effective Date
No Results Found	

Other Coverage

LOB Coverage Type	COB Code	Effective Dates	Insurer Name	Insurer Payment Order	ID Number	Policy No
No Results Found						

BROKEN APPOINTMENT TRACKING

- **150** unique offices using the Provider Web Portal broken appointment log as of April 30, 2012
- Reports will be shared with SCDHHS quarterly

Broken Appointment

Add Broken Appointment

Basic Information		Appointment Details	
Date*	<input type="text"/>	Type of Patient*	<input type="text" value="-Select a Patient Type-"/>
Service Office*	<input type="text"/>	Service Categories*	<input type="text" value="-Select a Service Category-"/>
Treating Dentist*	<input type="text"/>	Reason Code*	<input type="text" value="-Select a Reason-"/>

Member Eligibility		Notes	
DOB*	<input type="text"/>	Member Number	<input type="text"/>
Member Last Name	<input type="text"/>	Member First Name	<input type="text"/>
<input type="button" value="Clear"/>			

Broken Appointment History

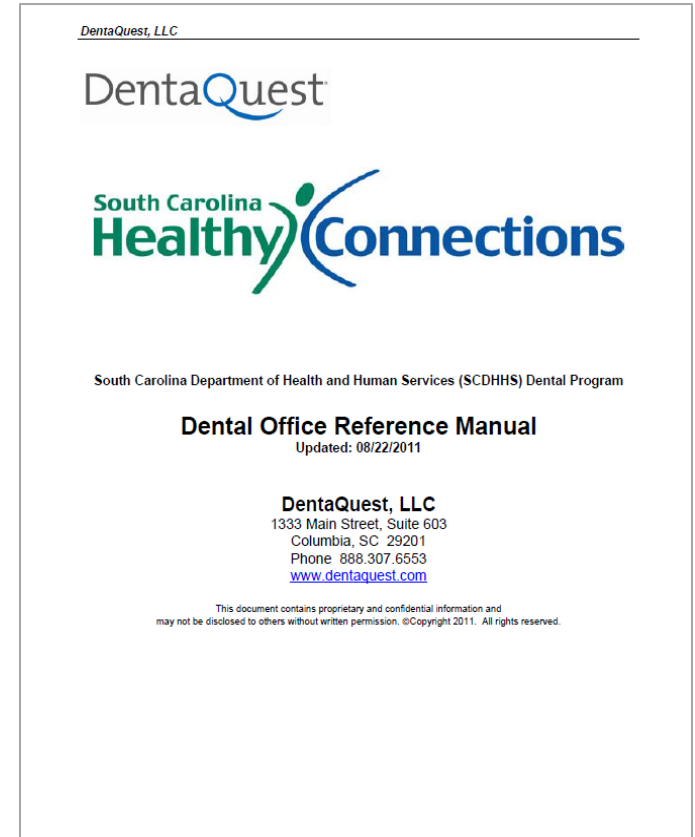
 Printer Friendly Format

Type of Patient	Service Category	Date Reported	Broken Appointment Date
<input type="button" value="Done"/>			

OFFICE REFERENCE MANUAL

UPDATE TO THE DENTAL ORM

- Latest version released 05/01/2012
- Recent Updates Include:
 - SCDHHS Dental Services Provider Manual as Appendix E
 - Availability of emergency CPT procedures for adults
 - Clarifications to policy
 - Broken appointment tracking reference
 - New design format for benefit tables
- Available: <https://govservices.dentaquest.com/> and www.scdhhs.gov



OUTREACH AND NEW PROGRAMS

INSURE KIDS NOW OUTREACH

Insure Kids Now- Federal initiative to connect kids to coverage

- Part of the Children's Health Insurance Program Renewal Act of 2009
 - Mandates state Medicaid agencies to supply quarterly provider directories that reflect up-to-date data on office locations and more detailed information on office hours, languages spoken, and special capabilities
 - www.insurekidsnow.gov
-
- DentaQuest issued outreach forms to each enrolled Healthy Connections dentist in fall 2011 and winter 2012

INSURE KIDS NOW OUTREACH RESULTS

- **46%** response rate to date

THANK YOU!

- If your office has not supplied this form back to DentaQuest, please do so as soon as possible.
- Additional copies available on Provider Web Portal and from customer service...and from Tycie today

SOUTH CAROLINA HEALTHY CONNECTIONS MEDICAID DENTAL PROVIDER INFORMATION FORM							
GENERAL INFORMATION							
Last Name		First Name			Middle Initial	Date of Birth (MM/DD/YY)	
Individual NPI	<input type="checkbox"/> Male <input type="checkbox"/> Female Provider Gender	<input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander Provider Race/Ethnicity	<input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> White	Provider Email Address			
BOARD CERTIFICATION							
Specialty Board(s) by which you are certified		Date Certified		Expiration Date		Recertification Date	
Name							
PRACTICE INFORMATION							
Practice Name				Practice website			
PRIMARY OFFICE INFORMATION							
If you have multiple offices within your practice, please provide additional information for other locations on Page 2							
Primary Location							
Address		City		State		Zip	
Primary Location Office Hours							
Monday		Tuesday		Wednesday		Thursday	
Friday		Saturday		Sunday			
Billing NPI (if different from Individual)		Medicaid ID (Legacy Number)		Office Email Address		Office Facsimile	
Languages spoken at office (check all that apply)							
<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Arabic <input type="checkbox"/> Chinese <input type="checkbox"/> French <input type="checkbox"/> German <input type="checkbox"/> Hmong <input type="checkbox"/> Hindi <input type="checkbox"/> Laotian <input type="checkbox"/> Philippine <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other _____							
Is your office accepting new Healthy Connections beneficiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No				Is your office capable of providing services (i.e., evaluation, treatment and anticipatory guidance) to patients in the following age ranges? (check all that apply)			
				<input type="checkbox"/> 0-6 months <input type="checkbox"/> 6-12 months <input type="checkbox"/> 12 - 24 months <input type="checkbox"/> 2 - 6 years <input type="checkbox"/> 6-12 years <input type="checkbox"/> 12 years and older			
Is your office handicapped accessible? <input type="checkbox"/> Yes <input type="checkbox"/> No				Is your office capable of accommodating hearing or visually impaired individuals? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is your office capable of accommodating individuals with special needs? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SUPPORTING THE SC BIRTH OUTCOMES INITIATIVE



Smiling Stork™
PROGRAM



South Carolina
Healthy Connections

DentaQuest



Questions?