

**DENTAL ADVISORY COMMITTEE (DAC) MEETING
December 6, 2018**

DAC Members Present via Conference Call:

Nick Pfannenstiel, DDS, Jordan Valley, Springfield, MO
Alan Stoll, DDS, Oral Surgeon, Hannibal, MO
Dennis Thousand, DDS, Springfield, MO
Matthew Tinnel, DDS, Truman Medical Center
Linda Wells, DDS, UMKC School of Dentistry
Nicole White, DDS, Northwest Health Services, Chief

DAC Members Absent:

Vicki Wilbers, Missouri Dental Association (MDA)
Ron Wilkerson, DMD, St. James Dental Center

Consultants Present via Conference Call:

Robert Waxler, DMD, Manchester, MO

MO HealthNet Division (MHD) Staff Present:

John Dane, DDS
De'Nel Holliday
Julie Phillips

Guests Present via Conference Call:

Dr. DePorter, Envolve Health Plan
Jill Scullion, Envolve Health Plan
Judy Bowlby, Liberty Dental
Kelly Pulliam, Liberty Dental
Katy Goecker, United Healthcare
Rachel Irby, United Healthcare
Shantel Smith, MDA

MMAC Staff Present via Conference Call:

Ashley Logan

WELCOME/INTRODUCTIONS

Dr. Dane took roll call and welcomed all to the meeting.

REVIEW OF MEETING MINUTES

A motion was made to approve the minutes of the September 13, 2018 meeting. The motion received a second and was approved by all members.

OLD BUSINESS

Behavior Guidance (CDT code D9920)

It was reported that MHD is still working on the fiscal impact of adding this code. MHD will report on this at the next meeting.

Silver Diamine Fluoride (nursing home patients)

It was reported that MHD is still working on the fiscal impact of adding this service for the nursing home population. MHD will report on this at the next meeting.

NEW BUSINESS

Dental Provider Credentialing

Dr. Pfannenstiel expressed his concern regarding delays his practice is experiencing getting new dentists credentialed with the health plans. He stated that he has one new dentist that was hired in October and has not been able to treat any patients yet. He added that he understands there is a process to be followed; however, the length of time it takes is burdensome on the providers and MHD participants aren't receiving care/treatment when needed. He asked if there was anything that could be done to help streamline this process.

Dr. White also stated that her practice is having the same issue. She said it takes 90 days to get a new provider credentialed. This becomes a burden on the practice as well as an issue with access to care.

Dr. Dane asked the health plans what their annual percentage is on credentialing denials as he suspects that it's very low. MHD allows for backdating when the provider is credentialed; however, the managed care plans do not.

Dr. Dane asked Kelly, with Liberty Dental, what their policy is. She stated they do not allow backdating but they will work with the provider to pay them as out-of-network providers while they are in the credentialing process. She stated that she understands it's a problem and offered to work with the providers on this issue to make it better.

Dr. Pfannenstiel suggested that all plans need to work together to come to a reasonable solution on this issue. He stated United Healthcare is allowing his practice to bill for the one provider that is still waiting for credentialing, but they are the only health plan doing that. He expressed a need to have a consistent process in place to make this less burdensome for the providers.

Kelly, with Liberty Dental, suggested meeting with the committee members off-line to discuss this issue further. Dr. Dane stressed that HEDIS measures are very low so anything that can be done to get patients seen more effectively and efficiently would help increase those numbers.

Managed Care Claim Denials/Appeals

Dr. Pfannenstiel asked if reports are run frequently to monitor how many managed care claim denials are happening and whether or not they are happening for a specific reason. If so, are there any patterns? When his practice receives denials, they reach out to the health plan to work with them and even appeal the denial, and then the denial eventually gets overturned. He referred to this process as a cat-and-mouse type game that seems unnecessary. Dr. Dane asked the managed care plans how comfortable they feel about being more transparent regarding denials and why they are happening. Rachel from United Healthcare stated that the denials they issue mirror the state's policy and limitations so they do not receive a lot of appeals from their providers. She added that they have a peer-to-peer process in place for those cases that require clinical review, but they have not seen any drastic trends from providers asking them to review denials or appeals request. Dr. Pfannenstiel agreed with Rachel and stated his main concern has been with DentaQuest and Envolve. Dr. White added that her practice has not had a lot of issues with United Healthcare, but has had numerous issues with DentaQuest that do not seem to get resolved. It was noted that DentaQuest will be replaced by Liberty Dental April 1, 2019. Kelly from Liberty Dental was on the call and stated that she was glad to be on the call to gather this information so they can adequately address any issues providers are having and in turn make it

less burdensome for the providers. She stated that if there are any other issues, to please let her know.

Sedation Units (maximum allowed)

Dr. Pfannenstiel stated there is no consistency between the plans regarding how many units of sedation are allowed and having enough units allowed to perform a service. MHD allows for four (4) units per procedure, as does United Healthcare, but the other plans vary. Dr. Pfannenstiel inquired as to whether a general allowance could be established so that the allowance would be the same across all plans.

Dr. Dane stated that the limitation on sedation units was put in to place a few years ago due to provider fraud and abuse of these codes. MHD requires a record to be filed for more than three (3) units per procedure. Dr. Dane acknowledged that Dr. Pfannenstiel's practice is set up slightly different because there is an operating room on the premise and he may encounter issues that other providers may not. Dr. Dane asked Dr. Pfannenstiel to forward documentation to him regarding cases he has had problems with and suggested they meet to discuss a possible solution for the problems he is encountering.

Replacement of Dentaquest for Missouri Care Health Plan

Dr. Dane advised the committee that there will be a transition from DentaQuest to Liberty Dental effective April 1, 2019. DentaQuest will be responsible for claims up to March 31, 2019. Aaron Washburn will be available through April to assist with questions and/or issues that providers may have.

2019 CDT Code Additions/Changes

A list of new CDT codes for 2019 was presented to the committee. Dr. Dane advised the new codes would be effective in our system January 1, 2019.

2019 Meeting Dates

MHD provided a list of meeting dates for 2019. The dates were approved as presented.

Selection of a New Chairperson

With the resignation of Dr. Purk from the committee and thus, as chairperson, MHD asked for nominations from the committee to appoint a new chairperson. Dr. Thousand provided some insight as to what being chairperson involves as he has served in this capacity previously. Dr. Pfannenstiel nominated himself as a candidate. The committee voted and all approved.

NEXT MEETING DATE

The next meeting is scheduled for February 14, 2019.

ADJOURNMENT

A motion was made to adjourn the meeting and all approved.