

## MAC Binder Section 8 – MCO Initiatives

Table of Contents with Document Summary - Jan. 2016

Located online at <http://chfs.ky.gov/dms/mac.htm>

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After a review of binder documents, the Department made the decision to incorporate several changes that would make the binder content more useful to the efforts of the Council. The MAC binder will no longer include good news stories, formally found in this section. Instead, this section will include MCO Initiatives. Each MCO will submit an MCO Initiative (this could be health, education, etc.) for the MAC. This is an opportunity for the MCO to showcase their good works in the community.

In an effort to provide for proper planning, the Department has devised the following schedule. Additionally, attached is the template which the MCO's will use for their report submission.

Date	Time	Room	MCO Initiative	Network Adequacy
1/28/16	10am – 12:30pm	125 Annex	None Assigned	None Assigned
3/24/16	10am – 12:30 pm	125 Annex	Anthem due on or before 3/1/16.	Due from each MCO on or before 3/1/16.
5/26/16	10am – 12:30 pm	125 Annex	Coventry due on or before 5/1/16.	Due from each MCO on or before 5/1/16.
7/28/16	10am – 12:30 pm	125 Annex	Humana due on or before 7/1/16.	Due from each MCO on or before 7/1/16.
9/22/16	10am – 12:30 pm	125 Annex	Passport due on or before 9/1/16.	Due from each MCO on or before 9/1/16.
11/17/16	10am – 12:30 pm	125 Annex	WellCare due on or before 11/1/16.	Due from each MCO on or before 11/1/16.

**MCO Initiatives for the Medicaid Advisory Council (MAC)**

**Title of Initiative** \_\_\_\_\_

**MCO Name** \_\_\_\_\_

**Date Submitted to DMS** \_\_\_\_\_

**Please ensure your Narrative includes, but is not limited to the following:  
Description of Initiative including: Population Being Targeted, Date of Implementation (past, current, future), Status, Region(s), and Funding Source. Use as much space as necessary  
(this will supplant your presentation).**

## MAC Binder Section 8 – MCO Initiatives

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### **1 – Anthem Initiative\_March2016**

Anthem Blue Cross Blue Shield Medicaid has outlined an initiative regarding dental services for the EPSDT (2-20 years of age) population. Their goal is to increase the instances of annual dental visits among these members. Dental care for this population represents a serious health issue for Kentucky and is a health priority. This initiative is being addressed through our performance improvement project (PIP) with a target date range of 2016-2018. This performance improvement project was submitted to DMS on 9/1/2015 and is currently active.

**MCO Initiatives for the Medicaid Advisory Council (MAC)**

**Title of Initiative:** Dental Initiatives

**MCO Name:** Anthem BlueCross BlueShield Medicaid

**Date Submitted to DMS:** 03/01/2016

**INCREASE DENTAL VISITS IN THE EPSDT POPULATION**

**Population**

Anthem Blue Cross Blue Shield Medicaid has outlined an initiative regarding dental services for the EPSDT (2-20 years of age) population. Our goal is to increase the instances of annual dental visits among these members. Dental care for this population represents a serious health issue for Kentucky and is a health priority. This initiative is being addressed through our performance improvement project (PIP) with a target date range of 2016-2018.

**Implementation Date**

This performance improvement project was submitted to DMS on 9/1/2015 and is currently active.

**Data Source**

Anthem is utilizing HEDIS® data and rates for measure years (MY) 2015-2017 (calendar years [CY] 2016-2018), with MY 2015 being a baseline measurement, 2016 an interim measurement year and 2017 the final measurement year. Anthem's HEDIS® 2015 rate was 21.49% and reflects current performance, while HEDIS® 2016 (not yet reported) will be the baseline rate. The end goal is to increase the Annual Dental Visit HEDIS® measure rate (Total Members) to meet the NCQA 25th percentile by HEDIS® CY 2018.

**Barriers**

In conjunction with Anthem's dental vendor, DentaQuest, potential barriers to obtaining dental care have been identified. These barriers included lack of access, lack of time, and lack of knowledge. Anthem has identified members affected by these potential barriers and is working to locate dental providers in their geographical area. One such identification method is regarding those members seen in an emergency department setting for dental procedures. Member and provider's lack of knowledge regarding the benefits for oral health care coverage and managed care processes has been identified as a contributing factor to decreased utilization.

**Interventions**

- 1) DentaQuest will work to improve dental visits by collaborating with school based dental sealant programs, expanding the availability for school age children.

- 2) Anthem began in August 2015 targeting Public Health Departments by adding reimbursement for oral health screenings and providing education regarding referrals after an oral health screening is performed.
- 3) DentaQuest performed an initial analysis in April 2015 of the provider network to identify providers that offer weekend or evening hours. This will enable Anthem/DentaQuest to readily assist members who are faced with the inability to make arrangements during normal business hours and reduce travel time for members, aiding in the availability of services for members. Additional analysis is slated to be performed in May 2016.
- 4) Anthem and DentaQuest are increasing outreach efforts for the targeted population who do not have claims data or other evidence of receiving dental services within the prior year. This will be accomplished through phone calls to these members and mailings; Telephonic outreach efforts will be conducted upon receipt of approved call scripts.
- 5) Established code and fee schedule enhancements to retain existing specialists and recruit new ones (oral surgeons and pediatric dentists specifically).
- 6) Anthem is tracking broken appointments through the addition of missed and broken appointment codes to covered dental visits. The implementation of this code was in November 2015, with a preliminary review of data in February 2016.
  - a. DentaQuest identified 114 broken or cancelled appointments with 39 members who presented for subsequent treatment. Additional outreach for these instances is planned for Q2 2016.
- 7) Expand Dental Benefit coverage as of March 1, 2016 for periodontal procedures for all eligible members.
- 8) Anthem has lifted the review requirements on certain services, i.e. Nitrous Oxide; effective March 1, 2016.
- 9) Provider education webinar on common Medicaid myths and realities to be conducted in Q2 of 2016.
- 10) Recognition for provider offices that have provided quality services will be conducted in Q2/Q3 of 2016.
- 11) DentaQuest will attend the quarterly QMAC meetings to educate members and member advocates beginning with the March 2016 meeting.
- 12) Maintaining an ongoing partnership with the Oral Health Coalition efforts to support the state wide dental initiatives.
- 13) Utilized Oral Surgery Advisory Group to ensure competitiveness and build relationships.

### **Continue Assessment**

Anthem conducts monthly Dental PIP meetings to review data analysis and intervention progress in addition to weekly strategic meetings with DentaQuest. While initial information is gathered for all regions, each month the regions with the highest percentage of non-compliance are the focus. For November 2015, region 5 was identified as having the highest non-compliance rate and four counties within this region were noted to have the highest non-compliance rates: Fayette, Clark, Scott and Franklin. The highest non-compliance is also identified by age group; for November 2015, this group was the 18-20 year olds. Anthem and DentaQuest plan on conducting a focus group in region 5 to obtain insight into the additional barriers that prevent members from receiving dental care. This is tentatively scheduled to be completed by Q3 2016.

### **Funding Source**

This dental initiative is being driven and funded by the Quality Management department with assistances from Operations/Vendor Compliance and DentaQuest. Quality Management participants include the EPSDT Coordinator, the QM Director, the QM Manager, the Member Liaison, the QM data analyst, and other members as necessary.