

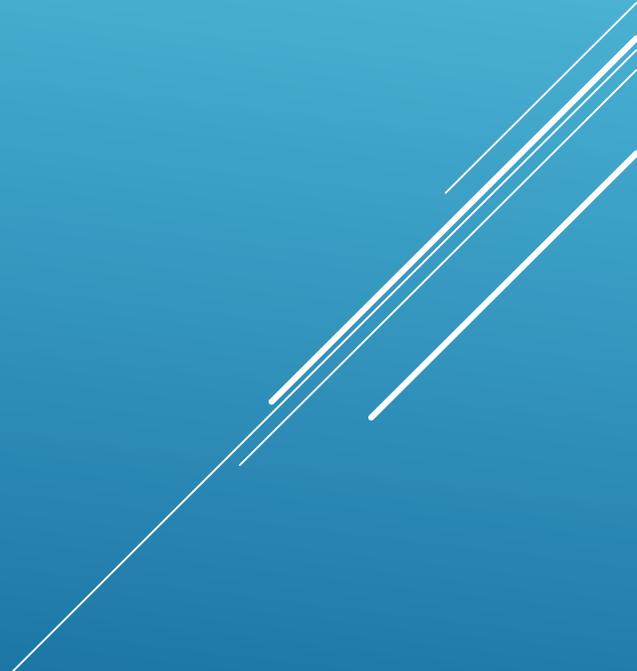
# ALABAMA MEDICAID AGENCY DENTAL STUDY WORKGROUP

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- ▶ Medicaid Dental Programs of Other States
  - ▶ Responses to Questions about Delivery Systems of Dental Services
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BEFORE THE AUGUST 14<sup>TH</sup> MEETING, 3 QUESTIONS POSED TO DENTAL PROGRAM MANAGERS/DIRECTORS OF OTHER STATES:

1. In your state, how are the dental services administered (MC, FFS, or combination)?
2. If your state has changed from FFS to MC, have you found it to be more cost effective than FFS delivery?
3. If your state has changed from FFS to MC, have you found it to be better for recipients and providers?

AS REPORTED AT THE PREVIOUS MEETING, 14 STATES RESPONDED:

Alaska

Arkansas

California

Colorado

Connecticut

Delaware

Georgia

Illinois

Kentucky

Maine

Nebraska

Oklahoma

Oregon

Washington State

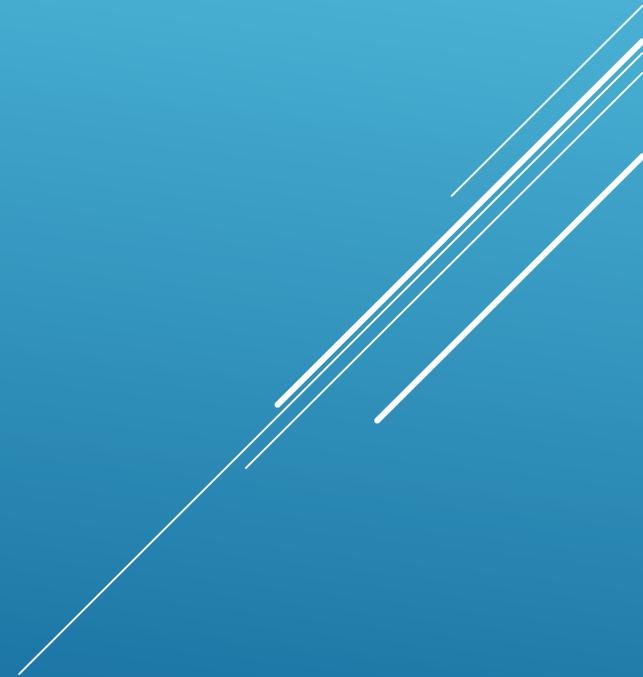
Louisiana, Pennsylvania, and Tennessee responded after the meeting.

FOLLOW UP QUESTIONS TO 9 STATES -  
IF YOUR STATE HAS FFS DELIVERY SYSTEM:

1. Has your state considered changing from FFS to MC for any eligible groups?
2. What was your experience and brief reasons the change did not occur?
3. What are the pros and cons for recipients/enrollees and providers in the FFS system?
4. Do you utilize any quality measures for recipients/enrollees and providers? If so, what general types are they?

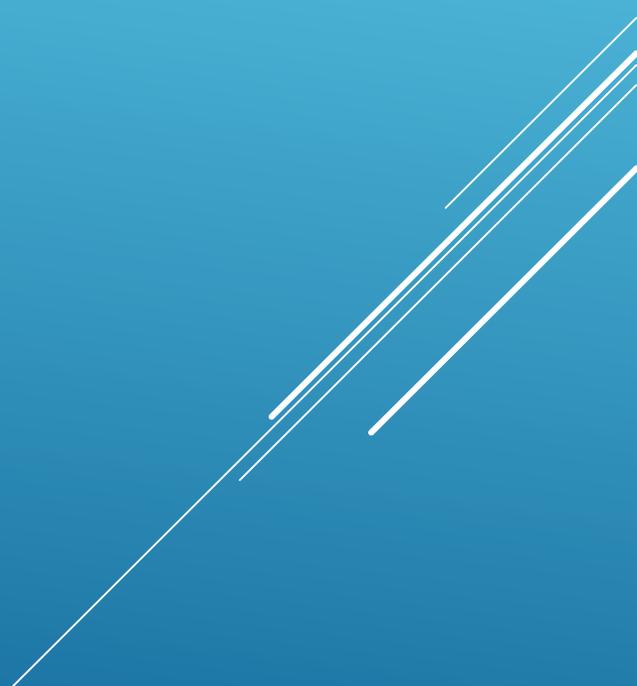
▶ One state has responded:

The state has considered including dental services in managed care, but has not found it cost effective at this time.



▶ FOLLOW UP QUESTIONS TO 10 STATES:  
IF YOUR STATE HAS MANAGED CARE DELIVERY SYSTEM:

1. Are your state dental services included in an integrated medical managed care organization (MCO) or separated in a dental MCO? Who bears the risk(s) in the MCO?
2. Have you seen an increase or decrease in the utilization rate and why do you think this has happened?
3. What pros and cons have resulted from dental being in a MCO for recipients? For providers?

4. Has the cost PMPM (per member, per month) increased or decreased since entering a MCO? What is the current PMPM rate?
  5. Have the number of dental providers increased or decreased since entering a MCO?
  6. Do you utilize any quality measures for providers and recipients/enrollees in the MCO? If so, what kind are they?
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## 2 STATES RESPONDED WITH ANSWERS:

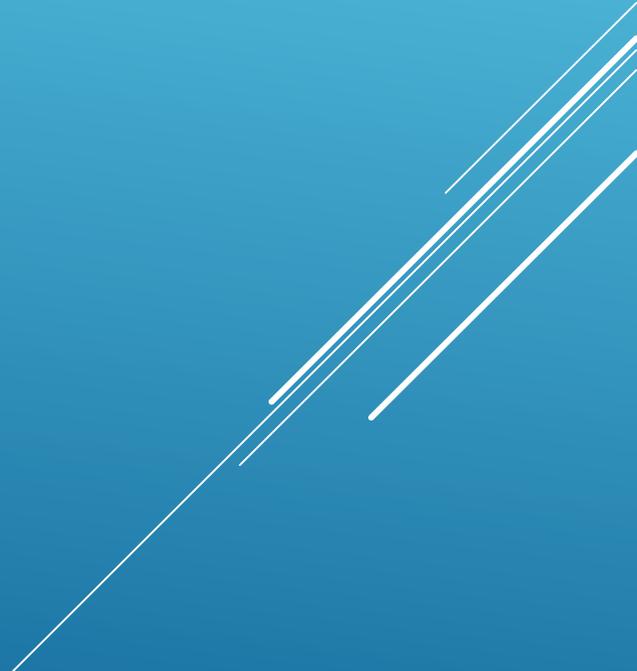
1. One state's Dental services were integrated with other medical services. The other state's Dental services were not integrated. In both states, the State and MCO shared the risk.
2. Both states have seen an increase in the utilization rate especially among the preventative services. Both states attributed the increase to the care coordination between recipients and dental providers.
3. Some pros:
  - Higher utilization rate in preventative services, thus has decreased cost in restorative and treatment procedures.

### 3. continued:

- Found better cost control
- One state answered having one MCO is easier to manage than multiple MCOs.

#### Some cons:

- Both states reported a 2-3 year learning curve for the state, providers, and recipients.
  - One state reported with fragmentation of multiple MCOs, management is complicated and confusing.
  - One state reports providers are paid differently between multiple MCOs, which causes some complaints.
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4. The state whose Dental services are in a MCO has seen a significant decrease in the PMPM (per member, per month) rate. The other state's Dental services are included with other medical programs and could not be broken out.
  5. Number of providers overall has significantly increased in one state and has stayed relatively consistent with a slow growth of number of providers in the other state.
  6. Both states use benchmarks as incentives for providers and in one state for recipients. Both also use quality measures and hold quarterly meetings between MCO and Dental program managers to reinforce the measures.
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- ▶ The two Dental MC reporting states have experienced more advantages than disadvantages with their current system.
  - ▶ The one FFS reporting state has more cost efficiency with their current system.
  - ▶ The state Medicaid Dental programs are in an ever changing environment.
  - ▶ Available information needs to be carefully weighed to find what is best for the children of Alabama.
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