

**Overview of CTDHP Services and Supports
Available to PCMH+ Provider Entities**

Jan 27, 2021

Marty Milkovic: Dir Community Engagement
Kate Parker-Reilly: Dir. Care Coordination &
Outreach



the dental plan for
HUSKY Health

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DENTAL PLANS

Agenda

- 1 **CT DENTAL HEALTH PARTERSHIP**
 - Overview of CTDHP Services
 - Member Engagement - Member Campaigns
 - Member Engagement- Care Coordination & Outreach
 - COVID 19 and Oral Health

- 2 **COLLABORATION AND SUPPORT- Opportunities**
 - Training and Education
 - Care Coordination
 - Member Engagement
 - Shared Reporting
 - Strategic Support

CTDHP AND PCMH+: OPPORTUNITIES FOR COLLABORATION & SUPPORT

- Dental Utilization rates among PEs appears to be dropping consistently over time.
- Compared to the statewide population which is incrementally rising.
- Recognizing the complexity of the population- we want to help and partner!
- Per CMS, CT is ranked 2nd in nation in percentage of Medicaid Eligible members aged 1-20 who received preventative dental services at 61.5% of population- 12.4% points over the median.

Wave 2, Year 2 Shared Savings Results Claims Utilization Summary

Category of Service (COS)	Claims per 1,000 Members Year Over Year Change	
	All Participating Entities	Statewide
Dental	-4.1%	0.2%
Durable Medical Equipment	3.2%	2.6%
Inpatient	-8.2%	-10.5%
Lab/Rad	-5.7%	-5.1%
Other	4.5%	6.8%
Other Practitioner	4.5%	3.5%
Outpatient	-3.6%	-4.9%
Outpatient — Emergency	-5.2%	-4.4%
Pharmacy	-1.5%	-1.7%
Professional	-7.5%	-9.0%
All COS	-3.2%	-3.0%

*The same cohort of members were used for the shared savings calculation and the claims utilization review and measured 2018 and 2019 claims.

**No adjustments were made for claims runout, risk adjustment or PCMH+ excluded fields.

***The Statewide members measured include all HUSKY members statewide that did not fall in a PCMH+ excluded category and met the minimum eligibility requirements and were not associated with a PCMH+ practice.

ABOUT THE CONNECTICUT DENTAL HEALTH PARTNERSHIP

- Connecticut Dental Health Partnership
 - One Provider Network
 - One Fee Schedule
 - One Set of Benefits
 - One Set of Administrative Rules
- CTDHP is comprised of:
 - Member Services - Local Call Center
 - Network Development/Provider Education
 - Dental Health Care Specialist- Care Coordination & Outreach
 - Prior Authorization & Utilization Management
 - Grievance and Appeals
- CTDHP's focus:
 - Timely and proximate access for members
 - Efforts to increase overall utilization and use of preventive services
 - Referral and intensive care coordination supports for members
 - Integration of oral health in primary care settings
 - Improved outcomes and controlled costs



CTDHP OPERATIONS

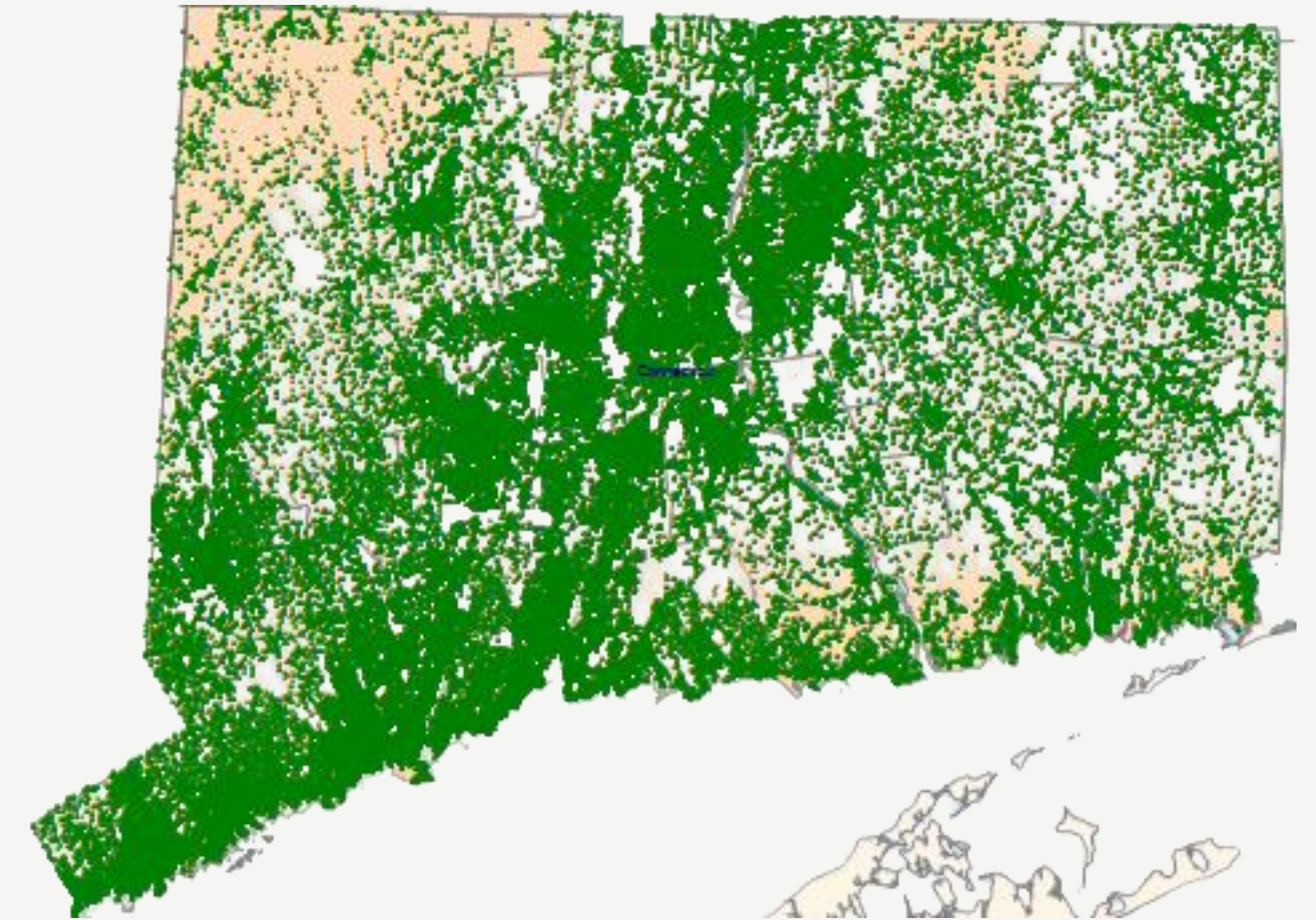
855-CT-DENTAL

(855-283-3682)

Monday-Friday 8am-5pm

www.ctdhp.com

- Operate local Call Center focused on member & provider services that are episodic in nature- locate dentist, plan benefits, appt. setting
- Provider Network provides support and education to robust network of dental providers ensuring network adequacy. Dental network has **remained above the contractual standard**
 - 100% of membership have access to **1 provider within 20 miles**
 - 98.79% of membership have access to **2 providers within 5 miles**
- Prior Authorization and Utilization Management team to process and inform clinical determinations of services and monitor utilization trends.
- Grievance/Appeals Teams to review, process, and comport with grievance and appeals processes set forth by DSS.
- Care Coordination and Outreach team that provides longitudinal care coordination services to members and conducts local based outreach.



Green highlight indicate Husky members with a provider within 20 Miles.

CTDHP Member Engagement- Campaigns

DON'T WAIT TILL IT HURTS CAMPAIGN

eNewsletter in English and Spanish sent to members with emails highlighting dental office safety practices during pandemic, ED avoidance, and promoting preventative care.

All members receiving care coordination received specialized COVID-19 letter articulating safety, expectations and precautions in dental service delivery

eNewsletter	Sent Volume
English	170,000
Spanish	23,500

TRUSTED PERSON MODEL OUTREACH

Outreach team presenting at established systems of care/collaborative groups, community based organizations that serve Medicaid population, reinforcing safety, expectations, and adaptations in dentistry service delivery to communicate to organizations' population/clients.

Examples: Our Piece of the Pie Youth Programs, Early Head Start, WIC, Christian Community Action, OB/GYN Offices

Outreach Type	Volume
Conference Calls	314
ePresentations	38
Oral Health Kits	135

Jan-October 2020

PHONE CAMPAIGNS *(Coming soon- text & email)*

Automated calls if:

- Members not compliant with preventative dental schedule
- Adult Members close to benefit limit max
- Members with problem- focused exam
- Members seen in ED for dental services

In-Person calls for:

- New members identified by CHN as not having established Dental Home
- Prenatal Members

Campaign Type	Successful Call Volume
Automated Calls	209,675
New Member	6,803
Prenatal	9,675

Jan-October 2020

MEMBER ENGAGEMENT - CARE COORDINATION & OUTREACH

- Dedicated team focused on collaborative process with member to assess, plan, remove/reduce barriers and meaningfully link members to oral health care services.
- Care Coordination is longitudinal in nature and focused on marshalling the resources needed to carry out member activities including working with dentists, specialists, care coordinators, other ASO services.
- Purposefully local. Our 6 Dental Health Care Specialists (DHCS) are assigned to six regions of the state to conduct both community based outreach and care coordination to support linkage of quality resources.
- Specialist in Complex Health Needs to support vulnerable populations navigate oral health and medical systems
- Referral sources to Care Coordination and Outreach include call center, emergency department claims, DSS, CHN CT, Beacon Health Options, Community-Based Orgs, providers, problem-focused exam claims, DCF, DDS, school based health offices.



MEMBER ENGAGEMENT - CARE COORDINATION & OUTREACH

Goals of Care Coordination

- Increased use of dental services
 - Movement from accumulated neglect to **preventative maintenance**
 - Adoption of a **dental home** where care is consistently delivered over time
- Improved oral health literacy
- **Reduction in emergency department visits & hospital based dentistry**
- Reduced barriers to accessing care - Internally and externally

Intervention and Tactics Used to Meet Goals

- Scheduling Appointments & Appointment Reminding
- Assessing comprehension of oral health instructions pre and post care
- Assistance in arranging transportation
- SDOH based referrals, support to reduce external barriers
- Identifying and working through internal barriers- dental anxiety phobia, beliefs/attitudes about oral health practices, lack of knowledge about oral health and prevention or low prioritization of oral health.

Care Coordination Snapshot - Jan 18

Active Cases: 126 - 44 Children, 82 Adults

Average Case Length:

0-6 Months: 8 Cases Per DHCS

7-12 Months: 2.7 Cases Per DHCS

13-24 Months: 2.7 Cases Per DHCS

25-26 Months: 1.1 Cases per DHCS

37+ Months: 1.2 Cases per DHCS

Top Three Referral Source:

- Emergency Dept. Claims
- DSS
- DCF

COVID-19 AND ORAL HEALTH

- Dentistry is safe, delaying care is not and could escalate to more serious dental issues and potentially impact overall health.
 - COVID-19 rate among dentists is less than 1% according to ADA.
 - CT State Dental Association commissioned survey indicates for patients that had visited the dentists in the months since COVID-19, more than 6 in 10 said they were extremely comfortable or very comfortable at their dentist appointments.
- Guidelines by the American Dental Association Advisory Task Force and CDC include:
 - Waiting Rooms closed
 - Prescreening in parking lot or at door with temperature check and exposure questions
 - Full PPE, changed for every patient and for every staff member that patient exposure.
 - Using high-speed evacuation for dental procedures producing an aerosol.
 - Having patients rinse with a 1% hydrogen peroxide solution before each appointment.
 - Cleaning and disinfecting public areas frequently, including door handles, chairs and bathrooms.

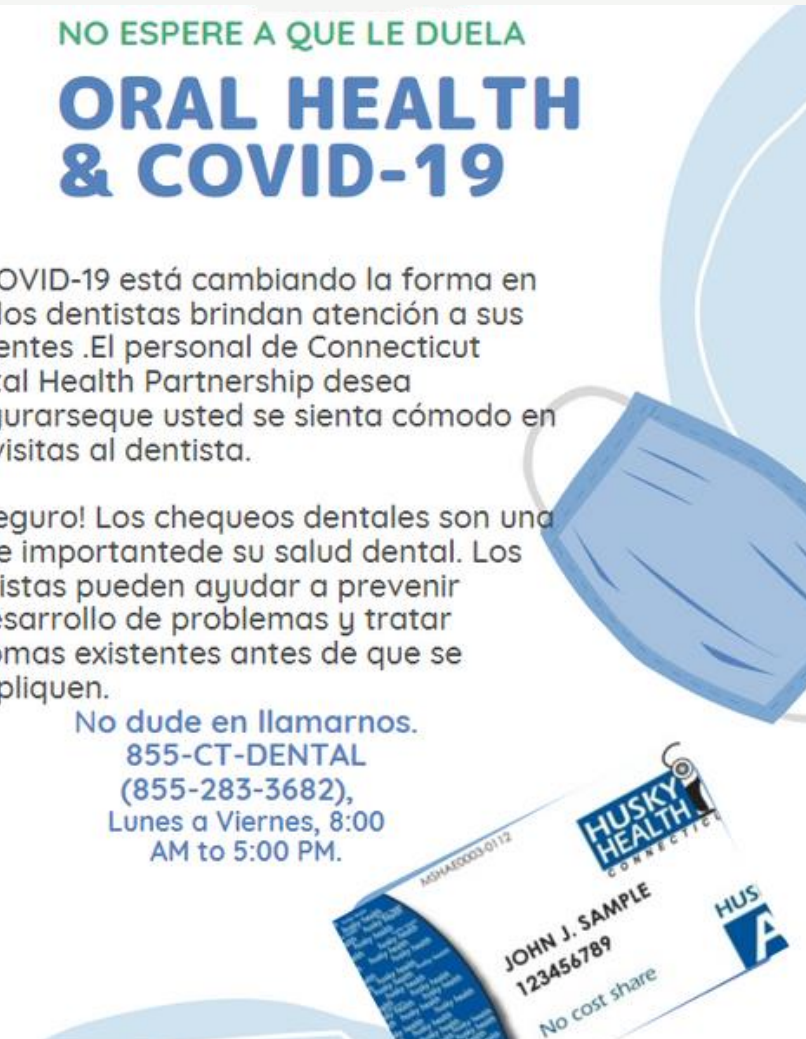
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ORAL HEALTH & COVID-19

El COVID-19 está cambiando la forma en que los dentistas brindan atención a sus pacientes. El personal de Connecticut Dental Health Partnership desea asegurarse que usted se sienta cómodo en sus visitas al dentista.

Es Seguro! Los chequeos dentales son una parte importante de su salud dental. Los dentistas pueden ayudar a prevenir el desarrollo de problemas y tratar síntomas existentes antes de que se compliquen.

No dude en llamarnos.
855-CT-DENTAL
(855-283-3682),
Lunes a Viernes, 8:00
AM to 5:00 PM.



The image shows a blue surgical mask on the right side. Below it is a dental insurance card for John J. Sample, ID number 123456789, with 'No cost share' indicated. The card also features the Husky Health logo and the text 'HUSKY HEALTH CONNECTICUT'.

CTDHP AND PCMH+: OPPORTUNITIES FOR COLLABORATION & SUPPORT

Mutual Goals

- Increase member engagement
- Coordinate and link to care
- Reduce internal and external barriers to care
- Increase dental utilization

Mutual Outcomes (PCMH+ Quality Measure Set)

- Increase in Annual Fluoride Treatment Ages 0<4
- Increase in Oral evaluation, dental services



CTDHP AND PCMH+: OPPORTUNITIES FOR COLLABORATION & SUPPORT

Training and Education:

- **Care Managers and Community Health Workers** on oral health, its connection to medical and behavioral health and CTDHP Services by Dental Health Care Specialists in assigned region.
- **Providers:**
 - **Pedi:** ABC Program Training enabling payment for oral health assessment and fluoride application during well-child visits.
 - **Adults:** How to conduct Caries Risk Assessment, "Prescription" referral to Dentists, Medication Dental Watch List
 - **Behavioral Health:** Connection between oral health and behavioral health, Medication Dental Watch List, CTDHP Services
 - **Specialists (Oncology, ENT, Endo):** CTDHP services, referrals to care to support treatment plans

CTDHP AND PCMH+: OPPORTUNITIES FOR COLLABORATION & SUPPORT

Care Coordination:

- CTDHP presence at PE Case Conferences, Case Consults, Collab Meetings
- CTDHP ingest PCMH+ attributed patients and tag in our system - all members can be immediately referred to care coordination based on flag, require case consult with PE for care plan development and ongoing collaboration.

Member Engagement:

- CTDHP provide PEs with collateral materials (posters, brochures, flyers, "prescription pads") and oral health kits (toothbrush, toothpaste, instructions on how to brush/floss) for distribution.
- CTDHP to develop a targeted member engagement campaign via omni-channel platform- automated calls, texts, emails, letters specific to PCMH+ population.



CTDHP AND PCMH+: OPPORTUNITIES FOR COLLABORATION & SUPPORT

Reporting Supports:

- CTDHP to ingest attributed patients by PE and produce actionable dashboards to push out at a determined interval

Strategic Supports:

- CTDHP can support establishing a work group specifically focused on addressing and monitoring oral health utilization with PEs.



Questions?



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Marty Milkovic: marty.milkovic@ctdhp.com

Kate Parker-Reilly: kate.parkerreilly@ctdhp.com