

COUNCIL ON DENTAL BENEFIT PROGRAMS

March 23, 2016

OFFICIAL MINUTES

Jhaveri, Viren, Chair Cooper, Ada (NY) Buchalter, Alyson (2) Hosoyama, Shig (3) Korkosz, Adrienne (4) Bozek, Walter (5) Lacey, Frederick (6) Keating, Michael (7)
Hoddick, James (8)
Cuomo, Christopher (9)
Porcelli, Eugene (N)
Guariglia, John (S)
Samuels, Jacqueline (B)
Shreck, Michael (BOT Liaison)

The Council on Dental Benefit Programs met on Wednesday, March 23, 2016, via video conference. All members participated with the exception of Dr. Samuels. Dr. Vincent Filanova, chairman of the Special Committee on Dental Medicaid, presented the committee's report to the Council. Dr. Steven Snyder attended as the Second Trustee Caucus Representative to the ADA Council on Dental Benefit Programs. Dr. Mark Feldman, NYSDA Executive Director, Judith Shub, NYSDA Assistant Executive Director, and Ms. Jacquie Donnelly, NYSDA staff, also participated.

The chairman called the meeting to order at 10:07 a.m. He began with a roll call of the members present. He then asked for additions or corrections to the minutes of the council's previous meeting on November 20, 2015. Dr. Keating pointed out that the minutes state that the scheduled time for the spring meeting is 9:30 a.m. Subsequent to the fall 2015 meeting, the chairman rescheduled the time from 9:30 to 10:00 a.m. Because this change did not occur at the fall meeting, it would not require a change to the meeting minutes. Following a motion by Dr. Keating, the council approved the minutes as written.

Chairman's Report

The chairman's report included information on the delayed implementation in the Medicare enrollment requirements, the upcoming electronic prescription implementation and the change in the CDT codes for general anesthesia and conscious sedation. He cited Cigna's recent announcement that it will not pressure participating dentists to extend discounts for uninsured services. Dr. Feldman added that the Department of Financial Services may have influenced Cigna's action. Dr. Snyder reported that there is a lobbying effort in Congress to pass legislation barring ERISA plans from requiring participating providers to extend discounts for non-covered services.

The chairman ended his report with comments on the NYS Medicaid Global Cap Report from 2015 and a requirement by the NYS Legislature to require a warning label on sweetened beverages.

Dr. Cuomo reported that he believes a member was dropped as a participating provider by the Guardian for not discounting uninsured services.

The chairman changed the order of the agenda to allow Dr. Filanova to report on the Special Committee on Dental Medicaid.

Medicaid

Dr. Filanova summarized the report submitted by the Special Committee on Dental Medicaid, mentioning concerns about delayed credentialing by MCOs, delayed payments pending the recovery of prior payments from earlier providers, and the need for oversight by DOH's dental staff. Dr. Shub informed the council that NYSDA is in the process of scheduling meetings with DOH to address the issues raised.

ADA Council on Dental Benefit Programs

Dr. Snyder began his report by pointing out that the ADA Council has not yet held its spring meeting. He explained the rationale for the change to the CDT codes for general anesthesia and conscious sedation and the impact it has had on reimbursement. Dr. Cuomo complained about a company that is applying its own "interpretation" to a CDT code. He was asked to forward documentation. The chairman asked Dr. Snyder about the status of the "universal explanation of benefits form". The form is available but has not been adopted by the payers.

He also pointed out that dentists are reluctant to participate in the Medicaid program due to inadequate reimbursement. The ADA is trying to encourage more dentists to become Medicaid providers. The ADA found that Medicaid reimbursement nationally represents 60% of the average third party payer payment. Most states do not cover adult Medicaid.

<u>Delta Dental Policy for Reimbursement for D7282: Mobilization of erupted or malpositioned tooth to aid eruption</u>

Drs. Guariglia and Snyder discussed the impact of the elimination of the D7281 code. Dr. Snyder described Delta's policy of incorporating reimbursement for this procedure with the fee for an extraction as a contractual issue.

Managed Care Issues

Drs. Snyder and Shub discussed current issues involving coordination of benefits. Dr. Porcelli asked about the status of NYSDA's efforts to seek legislation requiring companies to coordinate benefits by compelling secondary payers to provide a benefit even in situations where the primary benefit is equivalent to the secondary's allowable benefit. Dr. Feldman explained that

NYSDA continues to advocate for this legislation but it has not made it out of committee for a vote before the full legislature.

Dr. Buchalter asked about post-payment audits. Dr. Porcelli has been speaking with a member who is a Delta Dental participating provider who is afraid that he will be dropped by Delta if he does not comply. Dr. Feldman suggested that NYSDA contact Delta regarding this issue.

Dr. Shub discussed recent questions from members who are participating providers about whether they can utilize "private pay waivers" with their patients to charge higher fees than those in their contracts for covered procedures.

Component Reports

The chairman asked each representative to discuss activity and issues in their respective component dental society.

Dr. Hoddick reported that HealthPlex is the dental IPA for Independent Health for its Medicare Advantage plans. Dr. Porcelli discussed the issue of companies conducting post-payment audits. He asked about the staff feedback requested on the feasibility of forming an IPA.

Dr. Keating asked about whether a dentist could balance bill a patient treated in a No Fault case. He thanked Dr. Shub for her help with a Guardian claim and a complaint about Excellus.

Dr. Buchalter informed the council that Aetna adjudicated claims in December and January using an incorrect fee schedule. Aetna now is requesting that dentists refund the over-payments. As a result, offices have to send new, adjusted bills to patients with a larger copayment. Dr. Feldman suggested that NYSDA write a letter to Aetna.

Dr. Bozek had been asked about down-coding and non-covered services from members in his component but needs to get the related documentation. He also asked about Medicare enrollment. There were no additional reports presented.

Cigna Brighter Rating System

Dr. Feldman updated the council advising that the state attorney general has reviewed the issue and does not have any problems with it. Dr. Snyder added that a large part of the rating system will be based on patient out-of-pocket expenses. The ADA has not received complaints recently about Cigna's revised rating system.

New Business

The council considered a resolution from Dr. Cooperman, a member of the Special Committee on Dental Medicaid, calling for NYSDA to advocate with DOH to have greater oversight over the MCOs and require that only specialists in orthodontics and dentofacial orthopedics review patient records to minimize the number of erroneous patient eligibility determinations based on the HLD Index.

The members requested contact information for Medicare enrollment and asked about electronic prescribing exceptions.

Dr. Snyder advised that Cigna and Aetna are making "enhanced" benefits available to patients with special treatment needs.

Election of New Council Chair Nominee

The council selected Dr. James Hoddick as its nominee to replace Dr. Jhaveri as chairman. Dr. Hoddick discussed his qualifications and experience and thanked Dr. Jhaveri.

Dr. Jhaveri stated it has been an honor serving as chair for the past two years and thanked the members and NYSDA staff for their contributions and assistance.

Adjournment

There being no additional business before the Council, following a motion by Dr. Porcelli, the chairman adjourned the meeting at 12:30 p.m.

Respectfully submitted,

Viren L. Jhaveri, DDS

Chairman