# 2014 MDSA National Medicaid and CHIP Oral Health Symposium

## State Contracting: Improving Program Quality and Value

<table>
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<th><strong>2014 Symposium Goals</strong></th>
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<td>To empower Medicaid and CHIP dental program administrators and stakeholders with knowledge;</td>
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<td>To build leadership and collaboration to improve oral health, oral health care services, and reduce costs associated with oral health care delivery.</td>
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<th><strong>2014 Symposium Strategy</strong></th>
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<td>The 2014 MDSA National Oral Health Symposium will address the administrative changes states are making, and the increasing trend of contracting with non-governmental administrators such as Health Maintenance Organizations, Managed Care Organizations, Accountable Care Organizations, Community Care Organizations, and Dental Benefits Administrators. These new administrative models claim to offer states improvement in the administration of their programs resulting in improved oral health, oral healthcare and lowered costs for beneficiaries.</td>
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<td>Representatives from state Medicaid and CHIP programs, contractors, providers and others who have experience with these new kinds of administrative models will share information and provide key information for those thinking about contracting and those who wish to improve their programs through state contracting.</td>
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<td>The agenda will include sessions that represent key aspects of value based contracting for state Medicaid and CHIP Oral Health programs. Attention will be given to those areas considered most critical to designing, developing and implementing a state Medicaid and/or CHIP oral healthcare delivery services contract.</td>
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<td>State Medicaid Oral Health Program Directors will discuss lessons learned in their state and offer the do’s and don’ts of the state contracting process.</td>
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Sunday, June 8th, 2014

9:00-12:00 pm  MSDA Board Meeting
   Room: Congressional Room

3:00-5:00 pm  On-site Registration/ Materials Pick-up
   Room: NE Foyer

6:00-10:00 pm  MSDA 10th Anniversary and Welcoming Reception
   Location: Washington Marriott Wardman Park Outdoor Patio

Monday, June 9th, 2014

7:00  Members Only Breakfast and MSDA Business Meeting
   
   W. Ken Rich, DDS, MSDA President and Board of Directors
   Room: Madison

7:30  On-site Registration/Continental Breakfast
   Continental Breakfast for Non-Member Registrants/Exhibits
   Room: NE Foyer

   State Contracting: Improving Program Quality and Value

Symposium Agenda
Room: Thurgood Marshall Ballroom, NE

9:30  Welcome and Introduction of Special Guests
   
   W. Ken Rich, DDS, MSDA President
   Room: Thurgood Marshall Ballroom, NE

9:35  Keynote Address:  Ms. Marilyn B. Tavenner
   Administrator, Centers for Medicare and Medicaid Services

10:15  Opening Plenary: Introduction to State Contracting

   Panel:
   James Gillcrist, DDS, Dental Director, Tennessee Health Care Financing and Administration;
   Bob Isman, DDS, Dental Program Consultant, California Department of Health Care Services;
   David Fischer, Contract Administrator, Oregon Medicaid

   This session will provide an overview of the emerging administrative models currently used by Medicaid and CHIP dental programs. Presenters will discuss the various payment models being implemented between states and contractors and between contractors and dental providers. The session will explore "carve-in" versus "carve out," as well as "risk-sharing" models and how these various models affect the
states' and the contractors' roles and responsibilities.

CEUs: 2.0

12:00  Lunch/Exhibits

1:00  Session 1: Getting Started and General Obligations of the State

Panel:
Kim Elliott, PhD, CPHQ, Administrator, Arizona Health Care Cost Containment System;
Susie Scott, WY Children’s Health Insurance Program Manager, Wyoming Children’s Health Insurance Program

State Medicaid and CHIP programs must comply with a variety of federal and state regulations associated with the administration of the healthcare benefits. All states have specific obligations that they must undertake. This session will explore the state obligations and discuss contract oversight as well as performance objectives and measurement.

CEUs: 1.5

2:30  Break / Exhibits

2:30  Session 2: Scope of Services Related to Providers

Panel:
David Weeks, JD, Attorney, TennCare Office of General Counsel;
Robyn Olson, PhD, Management Consultant, Boston Benefit Partners;
Tom Underwood, DDS, General Dentist, Tennessee Medicaid Advisory Committee;
R. Mike Shirtcliff, DMD, President & CEO, Advantage Dental (Oregon)

All states must create and document in their contracts, a scope of services for the vendor, which delineates the specific responsibilities of the contractor. In addition, all states and contractors must create a scope of services for participating dental providers. This session will address both kinds of contracts and include the following: Access and Availability to Care and Network Development; Provider Agreements; Provider Services; Training, Manual and Guidelines; Provider Payment; Performance Objectives and Utilization Review

CEUs: 2.0

4:30  Adjourn

Tuesday, June 10th, 2014
Room: Thurgood Marshall Ballroom, NE

7:00  Continental Breakfast/Exhibits

8:00  Session 3: Scope of Services Related to Beneficiaries

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Federal law creates the mandate for Medicaid eligibility and state Medicaid programs have the flexibility to expand and define it for their programs. As such, states must carefully assess the need in their state and consider their policies and protocols as they relate to EPSDT, medical necessity, the enrollment of beneficiaries, covered benefits, and enrollee communication, education, and guidelines. Contractors often play a role in carrying out these processes and contracts must carefully detail those roles and responsibilities. This session will highlight the key areas related to beneficiary enrollment, benefits, and communication as they relate to state contracting.

CEUs: 2.0

10:00 Break / Exhibits

10:15 Session 4: Program Administration and Management

Panel:
Nancy Gurzick, RDH, MA, Dental Policy Specialist, Michigan Department of Community Health;
Nance Orsbon, Vice President of Professional Services, Delta Dental of South Dakota;
Jerry Caudill, DMD, Kentucky State Dental Director, Avesis;
David Weeks, JD, Attorney, TennCare Office of General Counsel

The administration and management of Medicaid and CHIP dental programs have changed vastly over the last few years. Several kinds of models exist and new ones are emerging. States are contracting with Managed Care Organizations (MCO) that, either directly or indirectly, manage their dental programs. In some cases, Dental Benefits Administrators (DBA) or Administrative Service Organizations (ASO) administer and manage their dental programs. Each of these models has nuances that potentially affect utilization management, claims processing, data and information management systems, quality of care, and performance monitoring, among other tasks. This session will discuss these distinctions and address how they may vary when risk sharing is involved.

CEUs: 2.0

12:00 Lunch / Exhibits

1:00 Session 5: Program Integrity

Panel:
David Weeks, JD, Attorney, TennCare Office of General Counsel

Federal and State Medicaid and CHIP Programs are responsible for administering quality driven, cost-effective oral health care delivery services. As part of this responsibility, these programs must develop and implement program integrity measures or mechanisms for detecting and preventing fraud, waste, and abuse. Contractors and providers that participate in Medicaid share this responsibility. This session will
highlight some of the roles and responsibilities that state Medicaid programs have allocated to dental program contractors, as well as key information for dental providers who participate in the program. 

**CEUs: 1.0**

**2:00 Session 6: Reporting Requirements, Lessons Learned, Do’s and Don’ts, Carve in or Carve Out**

**Panel:**
- R. Thielen, DDS, MBA, Aetna National Dental Director
- R. Mike Shirtcliff, DMD, President & CEO, Advantage Dental (Oregon);
- David Weeks, JD, Attorney, TennCare Office of General Counsel;
- David Fischer, Contract Administrator, Oregon Medicaid

Medicaid programs must comply with Federal and State reporting regulations. In recent years, State programs have been challenged to comply with these regulations as contracts with MCOs and other program administrators have fallen short of requiring contractors to supply necessary information and data. This session will highlight the reporting regulations, information and data requirements, recommendations for states developing contracts, and lessons learned. 

**CEUs: 1.0**

**3:00 Adjourn**

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**Continuing Education Disclaimer:**

This continuing education activity has been planned and implemented in accordance with the standards of the ADA Continuing Education Recognition Program (ADA CERP) through joint efforts between the American Dental Association and the Medicaid-CHIP State Dental Association.

The American Dental Association is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry.

The American Dental Association designates this activity for 12 continuing education credits.