TENNDENT
2011 QUALITY MONITORING/IMPROVEMENT PROGRAM

Purpose

The purpose of the TennDent Quality Monitoring/Improvement Program (QMP) is to provide a systematic and ongoing review of our policies, procedures and business practices in order to accomplish our mission of improving oral health by providing quality programs that balance the needs of the members. The QMP will serve as an instrument to monitor, assess and improve the quality of services provided to members as well as promoting the accessibility of dental care available to members.

Scope

TennDent’s focus is to provide to its members access to quality, cost effective dental services in order to encourage improved oral health to various demographic groups across the state. The QMP shall be evaluated on an annual basis to access the overall effectiveness of the program while identifying opportunities for future improvement. The program shall incorporate the following:

- Quality Assessment
- Quality Improvement
- Ongoing Quality Improvement Review
- Quality Monitoring

The QMP shall utilize claim, demographic and interaction statistics to evaluate the various components of clinical service, quality of care, the availability and coordination of services and assistance, as well as continuity of care. The statistical data utilized within the QMP will also provide a measure to ensure that adequate and quality services are consistently provided across all demographic groups, care settings, and among all types of service.

The QMP shall promote the awareness and availability of services and programs that encourage overall oral health through:

i. Communicate the QMP and pertinent information in the Provider Office Reference Manual, Member handbooks and website in April of each year. Email and fax notification will be sent to providers in April to alert them to the annual QMP. Ensure updates are communicated to providers, staff and enrollees on a quarterly or more often as needed, via email, mail, fax or website documents.

ii. Include in one member newsletter and provider newsletter language regarding the availability of the QMP.
iii. Provide responses to Frequently Asked Questions via interactive voice response messages, email, mail or fax to enrollees to communicate available dental services as needed.

iv. Conduct well planned strategically located Outreach activities and programs focused on EPSDT goals & objectives as defined in the annual Outreach Program. Quarterly updates will be reviewed and submitted to TennCare.

v. Ensure TennDent Outreach Coordinator maintains a working knowledge of TennCare guidelines, policies, procedures and programs by attending pertinent meetings and maintaining relationships with the Bureau of TennCare, community leaders, and health department workers and associates to determine opportunities for outreach activities to encourage member participation in dental treatment on a monthly and quarterly basis.

vi. Ensure TennDent website, printed materials and communications will be reviewed and updated on a quarterly basis by TennDent Marketing department to ensure seamless, consistent transfer of pertinent information to staff, enrollees and providers.

**Methodology**

The QMP Program has been implemented as a mechanism to monitor and evaluate the quality of services and programs offered to our members. The methodology used to accomplish the purpose of this program is comprised of:

- Identification and definition of quality metrics on an ongoing basis
- Annual evaluation of the QMP
- Monthly analysis of statistical data
- Annual recommendation of Quality Monitoring/Improvement Program enhancements
- Ongoing monitoring of the Quality Monitoring/Improvement Program to ensure proper administration and oversight
- Communication of program results and findings to all necessary stakeholders

Specific quality of care studies will be identified by the Quality Monitoring/Improvement Committee and conducted through the Performance Improvement Projects methodology. The results of the studies will be reported annually to all providers. The TennCare QIA template will be used as a tool for the studies.

**Quality Monitoring Activities**

The Quality Monitoring Program (QMP) will provide a comprehensive evaluation focusing on the quality of clinical and non-clinical components of dental service.
To achieve effective monitoring of all activities a structure of oversight for all activities is developed and includes:

- The Executive Leadership Panel (ELP) of Delta Dental of Tennessee is responsible for the oversight of all quality monitoring and improvement activities. The ELP provides oversight, governance and strategic direction to all departments and committees in the QMP. The ELP will review minutes and summaries of the TennDent committees at its meetings.

The TennDent Department was staffed, developed and implemented under the direction of the ELP to administer the contract between TennCare and Delta Dental and the QMP.

The ELP includes:

- President and CEO
- Sr. Vice President of Operations (Chair)
- Sr. Vice President of Professional Services and Human Resources
- Chief Financial Officer
- Vice President of Information Services
- Additional designees as deemed appropriate by TennDent Director

- The Compliance Committee was formed to oversee the activities of the TennDent Department, the Quality Monitoring/Improvement Committee and all committees reporting to the QMCP. The committee is to ensure all policies and procedures are being enforced and adhered to. The Compliance Committee reports to the ELP.

The Compliance Committee includes:

- Director of Internal Control (Chair)
- Sr. V.P. of Operations
- Privacy Officer
- Security Officer
- Compliance Officer

- The Quality Monitoring/Improvement Committee (QMPC) was formed to assume direct responsibility of the implementation, enhancement and supervision of the Quality Monitoring/Improvement Program. The QMPC reports directly to the ELP on all decisions and status updates.

The QMPC includes:

- TennDent Dental Director (Chair)
- Sr. Vice President of Operations
- Sr. Vice President of Human Resources and Provider Services
- Manager of TennDent
- Quality Utilization Review Coordinator
- Grievances and Appeals Manager
- Quality Compliance Program Manager
- A TennDent Oral Surgeon, Pedodontist, General Dentist and Orthodontist
- TennCare
- Dental Director (non voting member)
- Other designee as appointed by Executive Leadership panel

The Peer Review Committee was formed to review matters concerning appropriateness of care, quality of care, member complaints, over and under utilization patterns and non compliance with the Medical Necessity Rule for matters related to TennDent Network Providers. The criteria used to determine quality of care is defined in the Provider Office Reference Manual. Through focus review, complaints and generated reports dental consultants will review a sampling of provider patient records to determine if quality of care and appropriateness of care was followed. If it determined that there is a question regarding the treatment rendered that case would be forwarded to the Peer Review Committee for appropriate action as defined the policies and procedures.

The Peer Review Committee makes recommendations and reports directly to the QMPC following each committee meeting. The QMPC appoints the members of the Peer Review Committee.

The Peer Review Committee includes:

- Five (5) TennDent Network Dentists who file at least 25 claims per year
- TennCare Dental Director

The Credentialing Committee was formed to ensure qualified dentists are properly credentialed and recredentialed to treat TennCare members. The Credentialing Committee reports to the QMPC on all activities.

The Credentialing Committee includes:

- Sr. V.P. of Professional Services and Human Resources (Chair)
- TennDent Dental Director
- Professional Relations Manager
- Additional dental professional resources as needed (licensed dentists and hygienists)

**Goals and Objectives**

**The QMP has as its main goals and objectives the following:**

a. To provide an effective tool in monitoring and improving the program’s efficiency and quality by implementing and monitoring the success of TennDent policies and procedures.

   i. By communicating new, updated and/or ongoing policies and procedures via member handbook updates, website alerts, provider communications (i.e. faxes, emails, training sessions and audits).
ii. Providing initial and routine staff training via email, one-on-one or classroom setting in regards to new, updated and/or ongoing policies and procedures.

iii. Scheduling at least quarterly or more often as needed QMP Committee meetings to discuss pending polices and/procedures, unresolved issues, provider and/or member concerns or recent regulatory decisions.

iv. Ensure that routine random site visits, phone audits and/ or enrollee surveys are conducted at least quarterly.

v. By addressing areas of non-compliance, complaints and/or unfavorable review findings with an urgent (3 business days or less from date of incident) QMP Committee meeting to discuss the nature of the finding, document the meeting, develop a corrective action plan and designate duties and follow-up timeline.

vi. By ensuring utilization control guidelines or other coverage limits are not permitted without considering the individual needs of the member.

vii. Ensuring that there is a Utilization Review Plan to establish accuracy of benefits prior to and post payment disbursement:

- TennDent claims processing system has an extensive history cross check and edits application that enforces our processing policies and prevents duplicate payments. New edits and crosscheck procedures will be implemented or modified based on patterns or abuse, over utilization or other pertinent occurrences deemed sufficient by the QMP Committee.

- Decisions to approve or deny treatment are based on the clinical criteria that is outlined in the Provider Office Reference Manual and the Medical Necessity criteria also listed in the Provider Office Reference Manual.

- The standard turnaround for claims submitted for payment is 90% of the claims processed in 30 days and 99.5% in 60 days.

- TennDent allows for emergency and urgent treatment approvals without delay to the patient. Emergency and urgent treatment reviews are completed and approved in the same day they are received. Prior authorizations are reviewed and authorized or denied in fourteen (14) calendar days or less for routine non -emergency services. Each prior authorization request is reviewed as an individual treatment based on the documentation submitted by the treating dentists. When treatment is denied the dentist is notified by an explanation of benefits and the member is sent a letter within 24 hours of the denial explaining why the treatment denied and instructions on how they can appeal.

- TennDent Focused Review process monitors claims prior to benefit payments. This process targets specific codes and/or providers for additional review by dental consultants to ensure compliance. Remedial/corrective action is taken for areas of non compliance.
- TennDent InFocus application allows the ability to detect aberrant billing and treatment patterns. The core of InFocus is IBM’s Fraud and Abuse Management System (FAMS), a software product developed to detect such patterns. Data extracts will be maintained and scheduled at least each calendar year. This allows the provider’s billing and treatment trends over several time periods.

b. To provide Provider corrective action procedures for instances where inappropriate or substandard services are furnished or when services that should have been furnished were not.

   i. Examples of instances for remedial/ corrective action are poor or substandard techniques, materials and/or dental practices.
      - Violation and/or disregard of any aspect of TennDent provider contract.
      - Willful or negligent submission of inaccurate, incomplete, or inconsistent documentation including but not limited to x-rays, claim forms, narratives and models and casts.
      - Abusive, retaliatory, inhumane, discriminatory and/or unprofessional treatment by provider, staff or designee of TennDent enrollee, family member or representative.
      - Substandard review findings, complaints or random survey results.
      - Additional instances or circumstances as deemed appropriate by QMP Committee or subcommittees.
      - Provider and office staff will be contacted via phone and writing for response to allegations or concerns by QMP designee.
      - Results of contact with Provider will be communicated to QMP Committee in an impromptu meeting that will be scheduled no more than 5 business days of findings or violation.
      - Written corrective action plan will be formulated during the meeting and communicated to all affected parties with timeline for resolution and/or modifications.
      - Non compliance with written action plan or insufficient response will be documented and communicated to QMP Committee within 15 business days of occurrence.
      - Intent to terminate provider will be communicated to provider and pertinent TennDent staff no less than 30 days of occurrence.
• TennCare Dental director will be notified, updated and will participate in the processes of the QMP committee in each instance where a corrective action plan is warranted.

• Executive Leadership Panel will be responsible for final majority vote of termination of provider.

c. To ensure patient access to safe, cost effective, quality dental care

  i. Working with TennCare Dental Advisory Committee (TDAC) to recommend improvements related to quality of care.

  ii. By issuing, updating and maintaining a Provider Office Reference Manual that is distributed to all contracted providers and will include information relating to member’s rights and responsibilities, provider’s rights and responsibilities as well as quality of care standards for diagnostic and treatment criteria and,

  iii. By providing coordination of care for special and/or emergency circumstances as needed.

  iv. By ensuring that there is utilization management where qualified dentists will review and make the necessary determination of treatment and appeals.

  v. By ensuring quarterly consultant review meetings are held with TennDent consultants that allows for discussion of recurrent issues or concerns, random review of cases to ensure consistent ratings and other issues as needed.

  vi. By requiring that the credentialing and re-credentialing practices utilized by TennDent assist in identifying and retaining qualified, profession and quality dental service providers.

  vii. By conducting monthly and as needed Clinical Quality Reviews with utilization data, grievance monitoring, on-site visits, phone call interviews and review of clinical records.

  viii. By addressing areas of non-compliance, complaints and/or unfavorable Clinical Quality Review findings with an urgent (3 business days or less from date of incident) QMP Committee meeting to discuss the nature of the finding, document the meeting, develop a corrective action plan and designate duties and follow-up timeline.

  ix. By providing a complaint and appeal process to ensure members are receiving quality care from the network providers.

d. To promote informative, receptive, and professional customer service encounters to all members

  i. By hiring, training and encouraging quality customer service staff for all TennDent departments.
ii. By maintaining a proactive, resolution focused approach to enrollee issues and concerns.

iii. By providing one-on-one follow-up training within 5 business days of incident for issues where less than quality service was provided.

iv. By recognizing and awarding, enrollee driven compliments, comments or accolades of TennDent staff.

e. To develop and communicate educational materials and programs for providers and members.

   i. By utilizing marketing materials that are innovative, creative and communicative at a 6th grade level.

   ii. By annually reviewing all materials for compliance, accuracy and feasibility.

f. To ensure that the program is administered within the limitations and scope identified in the contract.

   i. By maintaining an open, viable line of communication with the Bureau of TennCare.

   ii. By striving for optimal results on audits, requests and requirements of the TennDent program.

   iii. By questioning and requesting clarity on contract requirements and/or limitations as needed.

g. To enforce all HIPAA policies and procedures as related to the QMP Program.

   i. By maintaining up to date, contractually & regulatory compliant policies and procedures regarding HIPAA.

   ii. By communicating rights and responsibilities to enrollees and providers via internet, mail and on request as needed.

   iii. By educating TennDent staff and providers on HIPAA guidelines and appropriate actions to remain HIPAA compliant.

   iv. By reporting potential breaches of HIPAA data or files to appropriate regulatory agencies and Bureau of TennCare employees.

h. To designate and utilize all necessary resources for feasible, quality focused administration of the QMP.
i. By designating an Executive Leadership panel for the QMP Committee that is responsible for providing oversight, governance and strategic direction to all other committees included in the QMP.

ii. By ensuring, documenting and performing quarterly meetings of the Executive Leadership panel.

iii. By ensuring that the Quality Monitoring/Improvement Program Committee performs the following responsibilities:

- Determine and execute all necessary quality improvement activities in order to maximize the effectiveness of the Quality Improvement Plan and its impact on TennCare members.

- Identify, develop and create timelines as needed to target the goals for specific quality improvement activities as well as ensuring that all activities and initiatives are completed in a timely manner.

- Analyze all data and findings related to the outcome of services provided to members and make any necessary recommendations for plan improvement and respond in 10 business days or less.

- Contribute and assist in the development of training programs offered to providers relating to quality improvement and utilization management.

- Ensure that all quality improvement activities are compliant with all necessary accreditation and regulatory organizations.

- Report any recommendations for plan improvement as well as the annual work plan to the Executive Leadership.

- Work with all committees and sub-committees to ensure that all aspects of the Quality Improvement Program are recognized and enforced.

- Ensure that all functions within the Quality Monitoring Program are performed and that established goals have been achieved.

- Assist in the development of new policies and procedures.

- Monitor reports received from all other committees.

- Review policies, procedures, clinical guidelines and work plans on an annual basis.

- Identify quality improvement activities that do not achieve targeted results and implement a corrective action and improvement plan.

- Meet at least quarterly or as necessary to conduct business.
• Document all meetings, recording actions, reports and participation.

• Maintain and report all studies, reports, worksheets, minutes and corrective actions to the Bureau of TennCare through monthly, quarterly and annual reports.

iv. By ensuring a the Credentialing Committee oversees the following activities:

• The Credentialing Committee shall have oversight of all credentialing activities and functions. The committee shall be responsible for ensuring that all written policies and procedures are current, enforced and compliant with all necessary regulatory and accreditation organizations.

• All information obtained shall be reviewed to ensure that the practitioner is able to conform to the standards established by TennDent. The Credentialing Committee may decide based upon the information obtained in the credentialing/re-credentialing process to not contract with or decline renewal of a contract with a provider. The Credentialing Committee will report any quality related issues resulting in the suspension or termination of a provider to the QMPC as well as the appropriate authorities. The committee shall review any provider appeals and issue a recommendation of any corrective actions imposed.

• Provides a copy of the Committee minutes and a summary of any activities to the QMP following each meeting.

v. By ensuring the Compliance Committee oversees that all processes and procedures administered within the plan are compliant with all regulatory provisions as well as HIPAA privacy and security regulations. The Compliance Committee will provide the ELP with committee minutes and a summary of any activities following each meeting.

The QMP shall provide review by dentists and dental professionals to evaluate the processes necessary for the delivery of dental services and communicate the performance and patient results to dental professionals and administrative staff.