

TEXAS ROUNDUP



Program Updates for Texas Dentists

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Public Health Emergency (PHE)

In response to the COVID-19 pandemic, the federal government declared a public health emergency (PHE); which allowed Medicaid recipients to have continuous coverage. The continuous coverage will end on May 11, 2023. Coverage will end for Medicaid recipients that fails to respond to the renewal notices or submits requested information to HHSC.

Member Appeals and Fair Hearings

Effective 4/1/2023, the timeframe for members, legally authorized representatives, or authorized representatives to request an appeal will change from 90 days to 60 days.

Effective May 11, 2023, the number of days to request a fair hearing will change from 150 days to 120 days. In addition, HHSC's timeframe to make a determination on a fair hearing will change from 120 days to 60-90 days.

Provider Network & Directory Audit

DentaQuest would like to remind all providers that provider directory information must be updated when a change in your office is made. This includes, but is not limited to the following information:

Provider joins/leaves practice





- Telephone and/or fax number
- Office hours
- Ages treated
- Languages spoken
- Handicap accessible (yes/no)
- Plan participation
- · Accepting new patients' status

Failure to provide current information can result in termination from the DentaQuest network. If you have any questions regarding directory updates, please call your local Provider Relations Representative.

Performance Management

DentaQuest routinely monitors dental service utilization and analyzes costs among providers to ensure that all dental services are appropriately provided and billed in accordance to the guidelines of the State Medicaid Program. In addition, we want to help network providers take the appropriate steps to assure that all rendered treatment is appropriate, deemed medically necessary, and has a good long-term prognosis. The overall objective with Performance Management is to build and strengthen our relationship with the provider community, with emphasis to gain an understanding about their membership base and approach with treatment. Based on the review of the dental offices utilization and cost analysis, your local Provider Relations Representative will meet with the office to discuss results of the review of the cost analysis, performance quality, provide education on program policies and procedures and implement a plan to address deficiencies and compliance concerns.

Reminder: Online Main Dental Home Change Form

TX Medicaid and TX CHIP members can now change their Main Dental Home provider online at www.dentaquest.com/texas. As a reminder, Main Dentist changes can only be made by the Member's Head of Household.

- Make changes online, faster than a call, 24/7
- No need to log in to the Member portal
- Use the same system our Member Services team uses
- Members show up on your patient roster within minutes
- 16-digit reference number provided on the confirmation page







Access and Availability Standards

DentaQuest Dentists are expected to meet minimum standards with regards to appointment availability. Dental appointments are to be made during normal business hours and within a reasonable time from the date of the Member's request. Appointment Standards are:

- Preventive 14 calendar days
- Therapeutic/diagnostic- 14 calendar days
- Urgent- 24 hours

Surveys are performed quarterly to ensure standards are being met. If you receive a call, please remember that you are required to complete the survey.

Important Reminders

Provider Resource Documents	The following documents are listed on the Provider Resources tab on the Texas Provider microsite. • Office Reference Manuals (ORM) • Provider Training Schedule • Quarterly Newsletters https://dentaquest.com/texas/providers/provider-resources
Contact Your Regional Provider Partner	To locate the Provider Partner for your region, visit https://dentaquest.com/texas/providers/provider-resources/provider-relations-contacts