

The California State Auditor released the following report today:

California Department of Health Care Services

Weaknesses in Its Medi-Cal Dental Program Limit Children's Access to Dental Care

BACKGROUND

The California Medical Assistance Program (Medi-Cal), administered by the Department of Health Care Services (Health Care Services), provides health care services to the aged, disabled, and indigent. Federal regulations require Health Care Services to provide early and periodic screening, diagnostic, and treatment services—including dental services it provides through its Medi-Cal Dental Program (program)—for beneficiaries under the age of 21 years (child beneficiaries). Child beneficiaries can receive dental services under the program through either a fee-for-service or a managed care delivery system, or from federally qualified health centers, rural health clinics, and Indian Health Service clinics. Health Care Services contracts with Delta Dental of California (Delta Dental) to help administer the program.

KEY FINDINGS

During our review of the program, we noted the following:

- California's utilization rates are lower than those of many states. Federal data shows that nearly 56 percent of the 5.1 million children enrolled in Medi-Cal did not receive dental care through the program.
- While the number of active providers statewide appears sufficient to provide services to child beneficiaries, some counties may not have enough providers to meet the dental needs of child beneficiaries.
 - ✓ In 2013 five counties with at least 2,000 child beneficiaries may not have any active providers and no dental providers were willing to accept new Medi-Cal patients in 11 counties.
 - ✓ In 16 counties, the number of dental providers willing to accept new Medi-Cal patients appeared to be insufficient.
- California's reimbursement rates for Medi-Cal fee-for-service dental services have not increased since fiscal year 2000–01 yet the rates are significantly lower than national and regional averages and lower than those of other states.
- We estimate that recent changes in federal and state laws could increase the number of individuals using dental services through Medi-Cal from 2.7 million to as many as 6.4 million—children and adults—and thus affect their access to dental services.
- Health Care Services has inadequately monitored the program and has not fully complied with reporting requirements.
 - ✓ Although required to conduct annual reviews of the reimbursement rates for dental services and to periodically revise those rates, it has only performed two annual reviews since fiscal year 2000–01.
 - ✓ It did not comply with its 2011 state plan to monitor and report certain metrics related to access to services. Thus, it does not have the data needed to determine whether utilization rates are appropriate.
 - ✓ Its actions related to improving beneficiary utilization and provider participation have been ineffective and it has not enforced provisions related to improving utilization and provider participation in its contract with Delta Dental.
 - ✓ Because of data limitations, it cannot report on dental health access and availability and the effectiveness of preventive care and treatment.
- Health Care Services authorized reimbursements for services providers allegedly rendered to deceased beneficiaries.

KEY RECOMMENDATIONS

We made numerous recommendations to Health Care Services related to the program, including the following:

- Establish criteria for assessing and monitoring beneficiary utilization, access to services, and provider participation in the program, and take corrective action on any identified declining trends to ensure that the influx of beneficiaries is able to access services.
- Perform annual reimbursement rate reviews and ensure beneficiaries have reasonable access to dental services and ensure that Delta Dental performs all its contract-required outreach activities to improve participation.
- Establish the provider-to-beneficiary ratio statewide and in each county as a performance measure to evaluate access and availability of dental services and capture needed data about dental services for reporting purposes.