


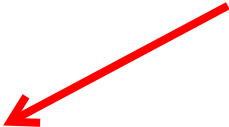
Orthodontic Policy Meeting Notes

Date: Monday, June 16, 2008 @ 3:00p

Location: TMHP Riata Building 6, Brady Conference Room

Attendees: TDSHS- Dr. Linda Altenhoff and Dr. Dianne Forbes; HHSC — Ray Acuña, Marianna Zolondek, Vivian LaFuente & Rene ?.

Items discussed:

- Trends identified by Ortho stakeholders 
 1. transfer ortho cases that they felt did not meet 26 point HLD scoring.
 2. children get full banding outside of TX Medicaid for cosmetic purposes at minimal cost, then obtain Medicaid eligibility and present to dentist for completion of treatment.
 3. stakeholders asked how or what TMHP requires to prior authorize Ortho treatment and Dr. Altenhoff discussed that she asked Dr. Felkner to explain the requirements to the stakeholders, in which he replied that TMHP dental clerks, by contract language, review the HLD scoring sheet to make sure the provider documented that the required 26 points were met. No measurements, models, radiographs or tracings are considered. Unless the dental clerk has a question, no dentist reviews the PA requests and it is not required by contract that a dentist or orthodontist review the PA requests.
- Stakeholders recommended changes be made to the prior authorization process and identification of qualified cases:
 1. do away with points system
 2. pay by performance throughout entire treatment, however, Dr. Altenhoff indicated this was not an option due to various eligibility issues, i.e.: migrant farm worker families, etc. 
 3. Dr. Altenhoff stated that Dr. Felkner at TMHP got HHSC OIG's authorization to do away with the requirements for plaster models and Cephalometric films & tracings to be mailed to TMHP by providers.
 4. industry standard is to take 8 intraoral photographs and Cephalometric film which may be brought back as a requirement and used by qualified staff for measurements to verify what was documented on the HLD scoring sheet by the provider.
- Vivian discussed three recent examples errors made by TMHP or questionable ortho authorizations:
 1. two cases in which no HLD scoring sheet was received by TMHP
 2. one case in which an 8 year old child was approved for full banding
- both Vivian and Dr. Altenhoff discussed an issue of TMHP dental clerks who are allowed to work from their home, which they question the availability to consult Dr. Felkner or any other TMHP management staff regarding authorizing ortho treatment.
- Dr. Altenhoff discussed that a request has been made by the Frew plaintiff's counsel regarding the Texas Medicaid Orthodontic Services process. Dr.

Altenhoff explained that an official Texas Medicaid interpretation of the orthodontic policy will be required based on a HCFA letter from 1993 or 94 as to whether ortho can be pre-paid when there is a loss of eligibility. as it is done in other States, however, Texas is not reimbursing in this manner.

Action Items:

- Priority, due to TMPPM deadlines, is for Dr. Altenhoff to work on making changes to the ortho policy.
 1. get stakeholder input regarding stricter guidelines
 2. payment options & criteria for TMHP placed into policy
 3. require radiographs, tracings, models, etc. in electronic media format
- work on making changes in TMHP provider enrollment
 1. payment tiers: such as a general dentist or orthodontist may bill for low level minimally complex cases and only certified orthodontists may be authorized for moderately to high complex cases such as cleft palate cases.
- Mariana asked to hear from me regarding OIG's perspective of the TMHP prior authorization process. I explained that historically OIG has reviewed very few Ortho cases, however, some investigators are beginning to work cases in which an OIG Orthodontic consultant has reviewed dental records obtained from providers. Mariana requested that OIG send Vivian some examples of patients, from investigations. who TMHP should have denied the initial prior authorization request from the provider due cosmetic reasons or failure to meet the 26 points after a review has been conducted. I explained that I did not know if OIG could comply with her request based on the active status of these cases, however, she asked me to request this from OIG management.

The meeting was adjourned