



State of Louisiana Department of Health

2022 Healthy Louisiana EQRO Compliance Audit MCNA Dental

Period of Review: January 1, 2021 – December 31, 2021

ISSUED NOVEMBER 2022

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FINAL



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Introduction and Audit Overview

Introduction

The Balanced Budget Act of 1997 established that state agencies contracting with Medicaid managed care organizations (MCOs) provide for an annual external, independent review of the quality outcomes, timeliness of, and access to the services included in the contract between the state agency and the MCO. Subpart E – External Quality Review of 42 Code of Federal Regulations (CFR) sets forth the requirements for annual external quality review (EQR) of contracted PAHPs. Further, 42 CFR 438.350 requires states to contract with an external quality review organization (EQRO) to perform an annual EQR for each contracted Prepaid Ambulatory Health Plan (PAHP). States must further ensure that the EQRO has sufficient information to carry out the EQR, that the information be obtained from EQR-related activities, and that the information provided to the EQRO be obtained through methods consistent with the protocols established by the Centers for Medicaid and Medicare Services (CMS).

To meet the federal requirements, the Louisiana Department of Health (LDH) has contracted with IPRO, an EQRO, to conduct annual compliance audits every 3 years. The 2022 annual compliance audit was a full audit of MCNA's compliance with contractual requirements during the period of January 1, 2021 through December 31, 2021.

During the review period, LDH contracted with two Dental Benefit Program Managers: DentaQuest and MCNA Dental. This report presents IPRO's findings of the 2022 annual compliance audit for MCNA Dental (MCNA).

Audit Overview

The purpose of the audit was to assess MCNA's compliance with federal and state regulations regarding access to care; structure and operations; grievance policies; provider network relations and network adequacy; quality measurement; fraud, waste and abuse; and utilization management (UM).

The audit included an evaluation of MCNA's policies, procedures, files, and other materials corresponding to the following ten contractual domains:

1. 438.206 Availability of Services
2. 438.207 Assurances of Adequate Capacity and Services
3. 438.210 Coverage and Authorization of Services – UM
4. 438.214 Provider Selection
5. 438.224 Enrollee Rights and Protection
6. 438.228 Grievance and Appeal Systems
7. 438.236 Practice Guidelines
8. 438.242 Health Information Services
9. 438.330 Quality Assessment and Performance Improvement Program (QAPI)
10. 438.608 Fraud, Waste and Abuse

The file review component assessed the MCNA's implementation of policies and its operational compliance with regulations related to complaints and grievances, member appeals, informal reconsiderations, care management (physical and behavioral health), utilization management, and provider credentialing and re-credentialing.

Specifically, file review consisted of the following four areas:

1. Appeals
2. Credentialing/re-credentialing
3. Member Grievances
4. UM Denials

Sample sizes for each file review type are presented in **Table 1**.

Table 1: File Review Sample Sizes

File Type	Sample Size
Appeals	15
Credentialing/Re-credentialing	5
Member grievances	10
Utilization management denials	10

The period of review was January 1, 2021 through December 31, 2021. All documents and case files reviewed were active during this time period.

For this audit, determinations of “met,” “partially met,” and “not met” were used for each element under review. A determination of “NA” was used if the requirement was not applicable to MCNA. The definition of each of the review determinations is presented in **Table 1**.

Table 2: Review Determination Definitions

Review Determination	Definition
Met	The PAHP is compliant with the standard.
Partially Met	The PAHP was compliant with most of the requirements of the standard, but had minor deficiencies.
Not Met	The PAHP is not in compliance with the standard.
Not applicable	The requirement was not applicable to the PAHP.

PAHP: Prepaid ambulatory health plan.

The 2022 annual compliance audit consisted of three phases: 1) pre-onsite documentation review, 2) remote interviews, and 3) post-onsite report preparation.

Pre-onsite Documentation Review

To ensure a complete and meaningful assessment of MCNA’s policies and procedures, IPRO prepared ten review tools to reflect the areas for audit. These tools were submitted to the LDH for approval at the outset of the audit process in April 2022. The tools included the review elements drawn from the state contract and federal regulations. Based upon LDH’s suggestions, some tools were revised and issued as final. These final tools were submitted to MCNA in advance of the onsite audit.

Once LDH approved the methodology, IPRO sent MCNA a packet that included the review tools, along with a request for documentation and a guide to help MCNA staff understand the documentation that was required. The guide also included instructions for submitting the requested information using IPRO’s secure File Transfer Protocol (FTP) site.

To facilitate the audit process, IPRO provided MCNA with examples of documents that MCNA could furnish to validate its compliance with the regulations. Instructions regarding the file review component of the audit were also provided, along with a request for the universe of cases for each file review area under review. From the universe of cases, IPRO selected a sample for each area, which was reviewed onsite.

Prior to the onsite visit, MCNA submitted written policies, procedures and other relevant documentation to support its adherence to the state contract and federal requirements. MCNA was given a period of approximately four weeks to submit documentation to IPRO. To further assist MCNA staff in understanding the requirements of the audit process, IPRO convened a conference call for all PAHPs undergoing the audit, with LDH staff in attendance, approximately two weeks after the request packet was sent to MCNA. During the conference call, IPRO detailed the steps in the audit process, the audit timeline, and answered any questions posed by MCNA staff.

After MCNA submitted the required documentation, a team of three experienced IPRO auditors was convened to review MCNA’s policies, procedures, and materials, and to assess MCNA’s concordance with the state’s contract requirements.

This review was documented using audit tools IPRO developed to capture the review elements and record the findings. These review tools with IPRO's initial findings were used to guide the remote review discussion.

Remote Interviews

The remote interviews were conducted on July 26, 2022. Interviews discussed elements in each of the review tools that were considered less than fully compliant based upon the initial review. Interviews were used to further explore the written documentation and to allow MCNA to provide additional documentation, if available. MCNA staff were given two days from the close of the onsite review to provide any further documentation.

Post-onsite Report Preparation

Following the remote interviews, draft reports were prepared. These draft reports included an initial review determination for each element reviewed, and either evidence that MCNA is compliant with the standard or a rationale for why MCNA was not compliant and what evidence was lacking. For each element that was deemed not fully compliant, IPRO provided a recommendation for MCNA to consider in order for them to attain full compliance.

Each draft report underwent a second level of review by IPRO staff members who were not involved in the first level of review. Once completed, the draft reports were shared with LDH staff for review. Upon LDH approval, the draft reports were sent to MCNA with a request to provide responses for all elements that were determined to be less than fully compliant. MCNA was given one week to respond to the issues noted on the draft reports.

After receiving MCNA's response, IPRO re-reviewed each element for which MCNA provided a response. When appropriate, review scores were updated based on the response of MCNA.

MCNA Summary of Findings

Summary of Findings

Table 3 below provides a summary of the review results by audit domain. Detailed findings for each of the elements that were less than “fully compliant” follow within this section of the report.

Table 2: Audit Results by Domain

Domain	Total Elements	Met	Partially Met	Not Met	N/A	Score ¹
Availability of Services	24	22	0	0	2	100%
Assurances of Adequate Capacity and Services	57	57	0	0	0	100%
Coordination and Continuity of Care						
Coverage and Authorization of Services-UM	80	79	0	0	1	100%
Provider Selection	30	30	0	0	0	100%
Enrollee Rights and Protection	77	76	0	0	1	100%
Grievance and Appeal Systems	70	69	0	0	1	100%
Subcontractual Relationships						
Practice Guidelines	9	9	0	0	0	100%
Health Information Services	8	8	0	0	0	100%
QAPI	101	74	0	0	27	100%
Fraud Waste and Abuse	102	100	0	0	1	100%
	558	524	0	0	33	100.0%

¹ Each met element receives 1 point, each partially met element receives 1/2 point, and each not met element receives zero points. Not Applicable (N/A) elements are removed from the denominator. Score is equal to the sum of all points earned/applicable elements.

UM: utilization management.

As presented in **Table 3**, 558 elements were reviewed for compliance. Of the 558, 524 were determined to fully meet the regulations and 33 were determined to be “not applicable.” The overall compliance score for MCNA was 100%.

Each of the ten review tools and review determinations for each of the elements can be found in the ZIP file below.



MCNA 2022
Compliance Final Find