

DENTAL PLAN VERSION 7.4

ORGANIZATIONAL STRUCTURE

CORE 1: Organizational Structure

CORE 2: Organization Documents

POLICIES AND PROCEDURES

CORE 3: Policy and Procedure Maintenance, Review and Approval

REGULATORY COMPLIANCE

CORE 4: Regulatory Compliance

INTER-DEPARTMENTAL COORDINATION

CORE 5: Inter-Departmental Coordination

OVERSIGHT OF DELEGATED FUNCTIONS

CORE 6-8: N/A

CORE 9: Delegation Management

MARKETING AND SALES COMMUNICATIONS

CORE 10: Review of Marketing and Sales Materials

BUSINESS RELATIONSHIPS

CORE 11: Written Business Agreements

CORE 12: Client Satisfaction

INFORMATION MANAGEMENT

CORE 13: Information Management

CORE 14: Business Continuity

CORE 15: Information Confidentiality and Security

CORE 16: Confidentiality of Individually-Identifiable Health Information

QUALITY MANAGEMENT

CORE 17: Quality Management Program

CORE 18: Quality Management Program Resources

CORE 19: Quality Management Program Requirements

CORE 20: Quality Management Committee

CORE 21: Quality Management Documentation

CORE 22: Quality Improvement Projects

CORE 23: Quality Improvement Project Requirements

CORE 24: Quality Improvement Projects: Consumer Organizations

STAFF QUALIFICATIONS

CORE 25: Job Descriptions

CORE 26: Staff Qualifications

STAFF MANAGEMENT

CORE 27: Staff Training Program

CORE 28: Staff Operational Tools and Support

CORE 29: Staff Assessment Program

CLINICAL STAFF CREDENTIALING & OVERSIGHT ROLE

CORE 30: Clinical Staff Credentialing

CORE 31: Senior Clinical Staff Requirements

CORE 32: Senior Clinical Staff Responsibilities

CORE 33: Financial Incentive Policy

CORE 34: Access to Services

CORE 35: Consumer Complaint Process

HEALTH CARE SYSTEM COORDINATION

CORE 36: Coordination with External Entities

CONSUMER PROTECTION AND EMPOWERMENT

CORE 37: Consumer Rights and Responsibilities

CORE 38: Consumer Safety Mechanism

CORE 39: Consumer Satisfaction

CORE 40: Health Literacy

NETWORK MANAGEMENT

- DP-NM 1: Scope of Services
- DP-NM 2: Provider Network Access and Availability
- DP-NM 3: Provider Selection Criteria
- DP-NM 4: Out-of-Network and Emergency Services
- DP-NM 5: Participating Provider Representation
- DP-NM 6: Participating Provider Relations Program
- DP-NM 7: Participating Provider Written Agreements
- DP-NM 8: Participating Provider Written Agreement Exclusions
- DP-NM 9: Written Agreement Inclusions
- DP-NM 10: Written Agreement Subcontracting
- DP-NM 11: Other Participating Provider Agreement Documentation
- DP-NM 12: Provider Network Disclosures
- DP-NM 13: Participating Provider Violation Mechanism
- DP-NM 14: General Requirements for Provider Dispute Resolution Mechanisms
- DP-NM 15: Disputes Concerning Professional Competence or Conduct
- DP-NM 16: Disputes Involving Administrative Matters
- DP-NM 17: Participating Provider Suspension Mechanism for Consumer Safety

CREDENTIALING

- DP-CR 1: Practitioner and Facility Credentialing
- DP-CR 2: Credentialing Program Oversight
- DP-CR 3: Credentialing Committee
- DP-CR 4: Credentialing Program Plan
- DP-CR 5: Credentialing Application
- DP-CR 6: Credentialing Confidentiality
- DP-CR 7: Review of Credentialing Information
- DP-CR 8: Credentialing Communication Mechanisms
- DP-CR 9: Primary Source Verification
- DP-CR 10: Consumer Safety Credentialing Investigation

- DP-CR 11: Credentialing Application Review
- DP-CR 12: Credentialing Time Frame
- DP-CR 13: Credentialing Determination Notification
- DP-CR 14: Participating Provider Credentials Monitoring
- DP-CR 15: Recredentialing
- DP-CR 16: Recredentialing and Participating Provider Quality Monitoring
- DP-CR 17: Credentialing Delegation

MEMBER RELATIONS

- DP-MR 1: Marketing Safeguards
- DP-MR 2: Consumer and Employer Purchaser Information Disclosure
- DP-MR 3: Consumer Input and Surveys
- DP-MR 4: Evaluation of Consumer Survey Data and Feedback
- DP-MR 5: Online Access
- DP-MR 6: Health Literacy Support for Consumers
- DP-MR 7: Consumer Communications Plan
- DP-MR 8: Covered Benefit Disclosure
- DP-MR 9-10: N/A

QUALITY MANAGEMENT

- DP-QM 1: Quality Management Program
- DP-QM 2: Quality Management Program Resources
- DP-QM 3: Quality Management Program Requirements
- DP-QM 4: Quality Management Committee
- DP-QM 5: Quality Improvement Process
- DP-QM 6: Selection and Prioritization of Quality Improvement Projects
- DP-QM 7: Three [3] Clinical Quality Improvement Projects for Dental Plans
- DP-QM 8: Data Management
- DP-QM 9: Quality Improvement Project Requirements

DENTAL PLAN OPERATIONS

DP-OPS 1: General Telephone Access to Customer Service
DP-OPS 2: Urgent Telephone Access to Customer Service
DP-OPS 3: One-on-One Customer Service
DP-OPS 4: Scope of Customer Service
DP-OPS 5: Provider Directory Updates
DP-OPS 6: Consumer Notification Regarding PCP Status
DP-OPS 7-11: N/A
DP-OPS 12: Breach Notification and Management

COMPLIANCE PROGRAM

DP-CP 1: Compliance Program: Internal Controls

MENTAL HEALTH PARITY

DP-MHP 1-3: N/A

HEALTH UTILIZATION MANAGEMENT

DP-HUM 1: Review Criteria Requirements
DP-HUM 2: Access to Review Staff
DP-HUM 3: Review Service Communication and Time Frames
DP-HUM 4: Review Service Disclosures
DP-HUM 5-6: N/A
DP-HUM 7: Limitations in Use of Non-Clinical Staff
DP-HUM 8: Pre-Review Screening Staff Oversight
DP-HUM 9: Preview-Review Screening Non-Certifications
DP-HUM 10: Initial Clinical Reviewer Qualifications
DP-HUM 11: Initial Clinical Reviewer Resources
DP-HUM 12: Initial Clinical Reviewer Non-Certifications
DP-HUM 13: Peer Clinical Review Cases
DP-HUM 14: Peer Clinical Reviewer Qualifications
DP-HUM 15: Drug Utilization Management Reviewer Qualifications
DP-HUM 16: Prospective, Concurrent and Retrospective Drug Utilization Management

DP-HUM 17: Peer-to-Peer Conversation Availability
DP-HUM 18: Peer-to-Peer Conversation Alternate
DP-HUM 19: Prospective Review Time Frames
DP-HUM 20: Retrospective Review Time Frames
DP-HUM 21: Concurrent Review Time Frames
DP-HUM 22: Certification Decision Notice and Tracking
DP-HUM 23: Continued Certification Decision Requirements
DP-HUM 24: Written Notice of Non-Certification Decisions and Rationale
DP-HUM 25: Clinical Rationale for Non-Certification Requirements
DP-HUM 26: Prospective Review Patient Safety
DP-HUM 27: Reversal of Certification Determinations
DP-HUM 28: Frequency of Continued Reviews
DP-HUM 29: Scope of Review Information
DP-HUM 30: Prospective and Concurrent Review Determinations
DP-HUM 31: Retrospective Review Determinations
DP-HUM 32: Lack of Information Policy and Procedures
DP-HUM 33: Non-Certification Appeals Process
DP-HUM 34: Appeals Process
DP-HUM 35: Appeal Peer Reviewer Qualifications
DP-HUM 36: Drug Utilization Management Appeals: Reviewer Qualifications
DP-HUM 37: Reviewer Attestation Regarding Credentials and Knowledge
DP-HUM 38: Expedited Appeal Process Time Frame
DP-HUM 39: Standard Appeal Process Time Frame
DP-HUM 40: Written Notice of Upheld Non-Certifications
DP-HUM 41: Appeal Record Documentation
DP-HUM 42: Independent (External) Review Process

MEASURES REPORTING

DP-RPT 1: Reporting Mandatory Performance Measures to URAC
DP-RPT 2: Reporting Exploratory Performance Measures to URAC