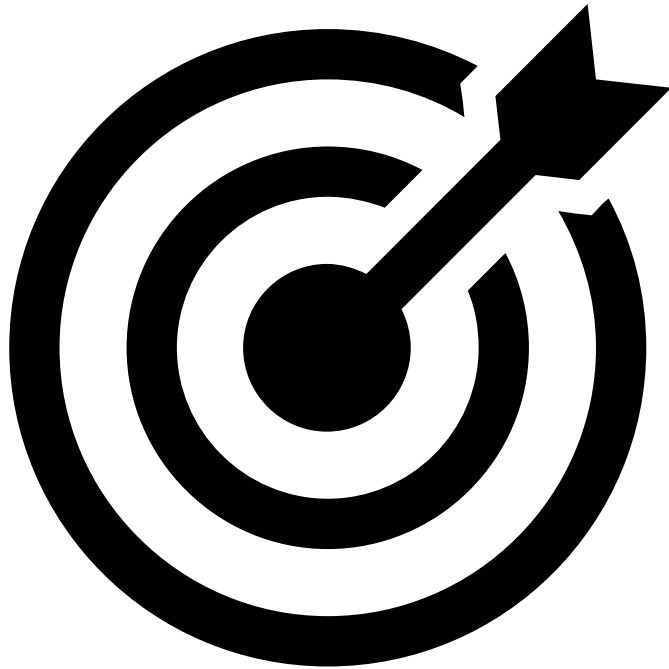




Employment and Community First (ECF) CHOICES & The 1915(c) Waivers

Understanding Your Role as a Provider

Health Equity



- ▶ **The goal:** Health equity, the attainment of the highest level of health for *all* people.
- ▶ **The barriers:** Currently, individuals across the United States from various cultural backgrounds are unable to attain their highest level of health for many reasons. One of the most modifiable barriers to health equity is the lack of Culturally and Linguistically Appropriate Services (CLAS).
- ▶ **The tools:** Cultural competency and linguistic competency.

Cultural Competency

What is it?

Cultural competency is a lifelong learning process of increasing awareness, knowledge and skills, which refers to the ongoing and intentional attainment of skills that allow an individual to function effectively when interacting with people who have different backgrounds and experiences.

- ▶ Valuing, embracing, and implementing cultural competency and diversity.

What is the goal?

The goal of cultural competency is not to change your core values or beliefs, but rather to provide you with the **skills** needed to work with and assist people who may have different life perspectives than you.

People who are well-versed in cultural competency can better assist Renaissance members, while at the same time maintaining their own personal identities.

Cultural Competency Skills

Awareness of your own culture

Self-knowledge increases your sensitivity to differences. Recognizing your own cultural uniqueness, and how that impacts your daily life, allows you to see the cultural uniqueness in others.

Learn to accept differences

Acceptance does not mean changing the way you see the world. Acceptance means understanding that other people may view the world differently than you do and being welcoming and accepting of people considering those differences.

Seek to understand the history and experience of others

Know and learn the history of others.

Know your stereotypes and biases

Knowledge and acceptance of personal stereotypes and biases reduces the likelihood of their use.

Recognize barriers to care

In some instances, individuals may not seek services due to their background and/or beliefs.

Understanding Nondiscrimination

Nondiscrimination means ensuring that every patient receives care that is fair, respectful, and free from bias or unequal treatment, regardless of their personal characteristics. This includes compliance with Section 1557 of the Affordable Care Act, which prohibits discrimination based on:

- ▶ Race
- ▶ Color
- ▶ National origin
- ▶ Sex
- ▶ Age
- ▶ Disability

Americans with Disabilities Act

- ▶ The **Americans with Disabilities Act (ADA)** is a landmark federal civil rights law enacted in 1990 that prohibits discrimination against individuals with disabilities in all areas of public life.
- ▶ Purpose: Prohibits discrimination against individuals with disabilities in all areas of public life.
- ▶ Who It Protects: Individuals with physical or mental impairments that substantially limit major life activities, those with a history of such impairments, or those perceived as having such impairments.

Title II of The ADA

Prohibits discrimination against individuals with disabilities in state and local government services.

- Disability is defined as a physical or mental impairment that substantially limits one or more major life activities.

Examples of impairments include:

Visual, speech, and hearing impairments

Learning disabilities, intellectual disabilities and emotional illness

Cerebral palsy, epilepsy

Muscular dystrophy, multiple sclerosis, orthopedic conditions

Cancer, heart disease, diabetes

Contagious and non-contagious diseases such as tuberculosis and HIV (symptomatic or asymptomatic)

The Rehabilitation Act of 1973

Section 504 is a federal law that protects qualified individuals from discrimination based on disabilities.

- ▶ Applies to employers and organizations receiving federal financial assistance.
- ▶ Prohibits exclusion or denial of equal opportunity to receive program benefits and services.
- ▶ Defines rights of individuals with disabilities to participate in and access program benefits and services

Equal Access for Individuals with Disabilities

An individual with a disability may need a reasonable accommodation/modification to be able to receive a service or benefit.

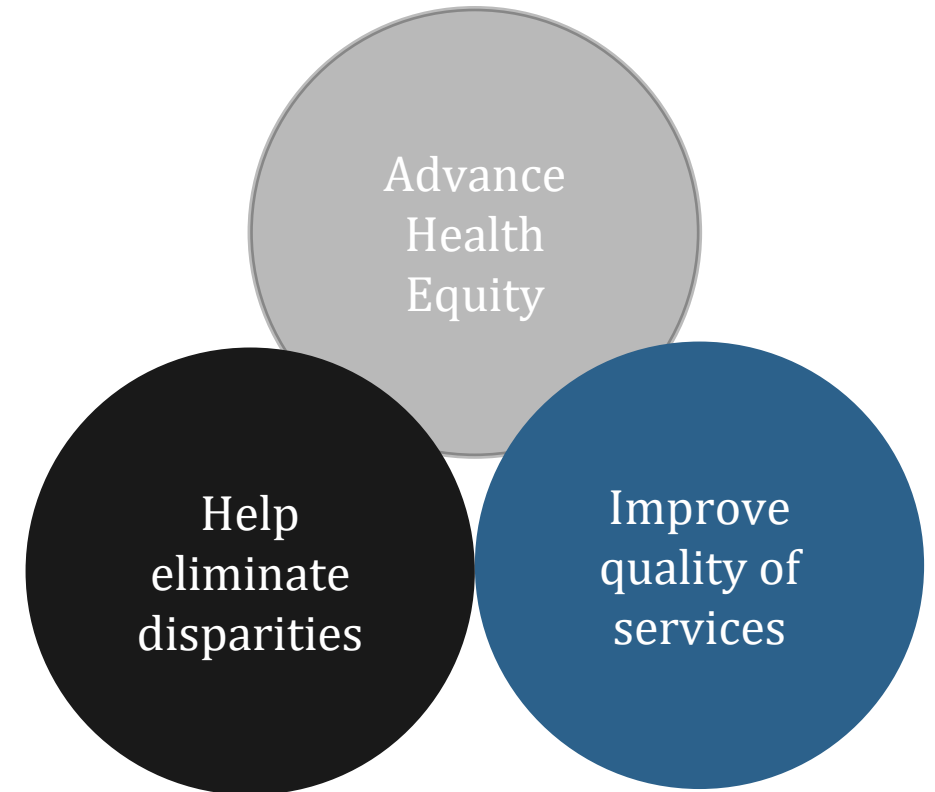
Examples of common accommodations:

- ▶ Accessible exam rooms: Free of clutter, wide door entry, space to maneuver wheelchairs, walkers, etc.
- ▶ Adjustable exam tables/chairs
- ▶ Accessible bathroom
- ▶ Wheelchair ramp
- ▶ Disabled parking spots



Culturally and Linguistically Appropriate Services (CLAS)

- ▶ The National CLAS Standards are a group of 15 separate guidelines that establish a blueprint for health and health care organizations.
- ▶ **Principle standard**—Provide effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.



Dental Services and IDD

- ▶ Both ECF CHOICES and the 1915(c) Waivers programs have dental services available to members.
 - ▶ ***These Dental Services offer a supplemental coverage for services not covered under the TennCare Adult benefit.***
 - ▶ Dental services within these programs are available to members 21 years of age and older.

Understanding the Waivers Programs

- ▶ **ECF CHOICES** provides home and community-based services to individuals with a qualifying Intellectual or Developmental Disability (I/DD).
 - ▶ This may also include physical disabilities or other complex needs.
- ▶ Tennessee's **1915(c) Waivers** programs provide Home and Community Based Services (HCBS) for people with Intellectual Disabilities as an alternative to institutional care which includes care in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID).

ECF CHOICES & 1915(c) Waivers Covered Services Table

The following slide will provide snapshots of the ECF CHOICES & 1915(c) Waivers Covered Services Table found in section 10 of the TennCare Adult Benefit Provider Manual. Please visit your provider manual for the full list.

CDT Code Series

- Diagnostic Codes
- Restorative Codes
- Endodontics Codes
- Periodontics Codes
- Prosthodontics, Removable Codes
- Oral & Maxillofacial Surgery Codes
- Adjunctive General Services

CDT Code/ Description	Benefit Limitations	Area of Mouth	Prior Authorization (PA) or Pre-Payment Review (PPR) Required	Documentation Required for Services Requiring Review
Diagnostic D0100–D0999				
D0170 re-evaluation, limited problem focused			PA	
Restorative D2000–D2999				
D2952 cast post and core in addition to crown		Teeth 1-32	PA	
Adjunctive General Services D9000–D9999				
D9920 behavior management, by report	To be billed in 15-minute increments - not billable with sedation of any kind.		PA	Narrative of medical necessity and description of attempts to treat without. Must be specific to patient and not generic.

Prior Authorizations



A full treatment plan must be submitted with the submission of all Prior Authorization submissions.



Remember: Failure to request required prior authorization before beginning treatment may result in rejection of reimbursement for a procedure.

Prior Authorization Process

PA Submission

Renaissance Review Period

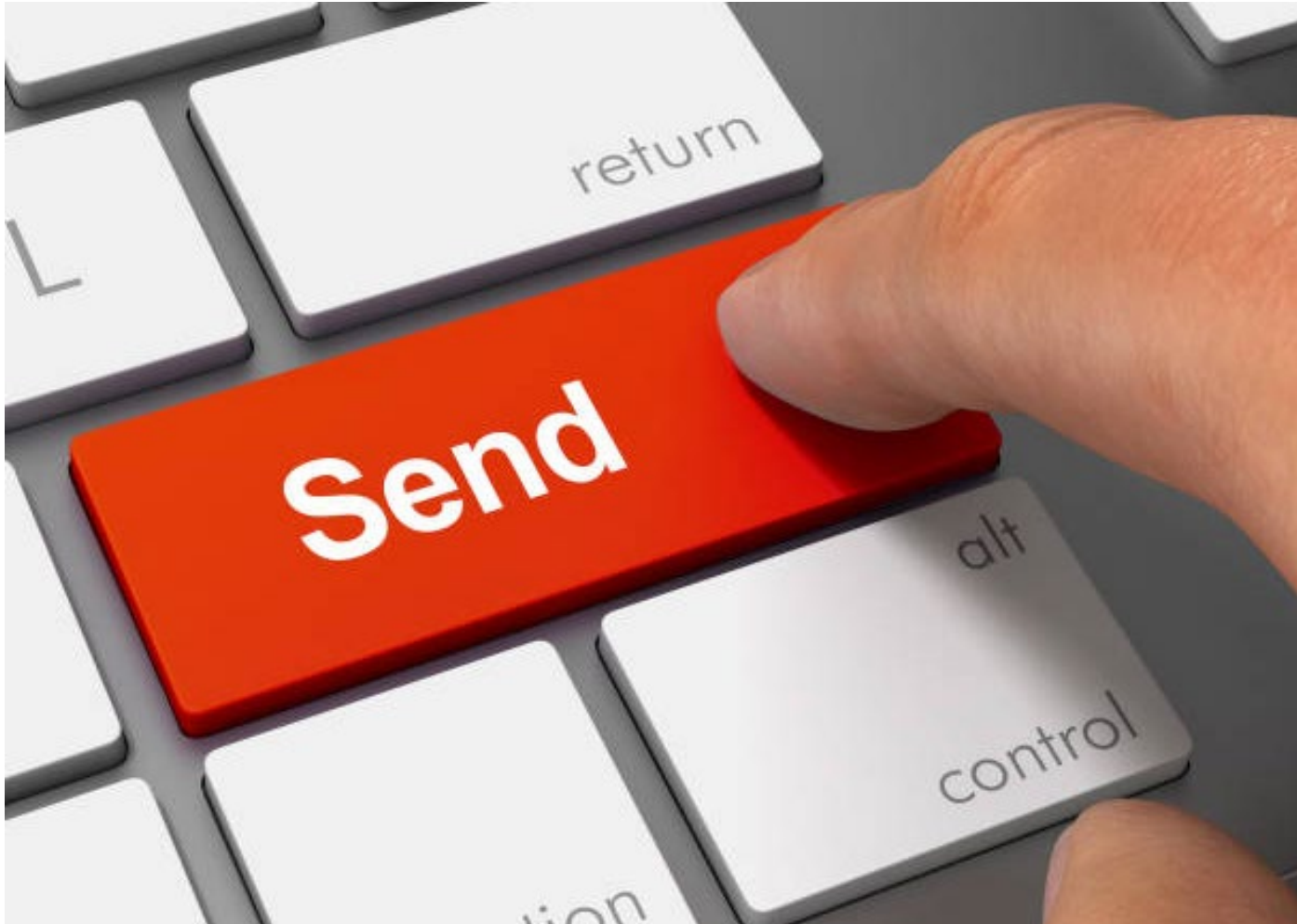
Renaissance Decision

Submitting a Prior Authorization

Prior authorization requests may be submitted electronically through a clearinghouse, or through Renaissance's Dental Office Toolkit®, using the current version of the ADA dental claim form, which can be found at: <https://www.ada.org/publications/cdt/ada-dental-claim-form>.

Non-Urgent PAs: In the Header Information box at the top left of the claim form, under "1. Type of Transaction", check the box labeled "Request for Predetermination/Preauthorization".

Urgent PAs: If a prior authorization request involves an urgent dental care procedure, write "*Urgent PA Request*" in the "35. Remarks" box on the claim form.



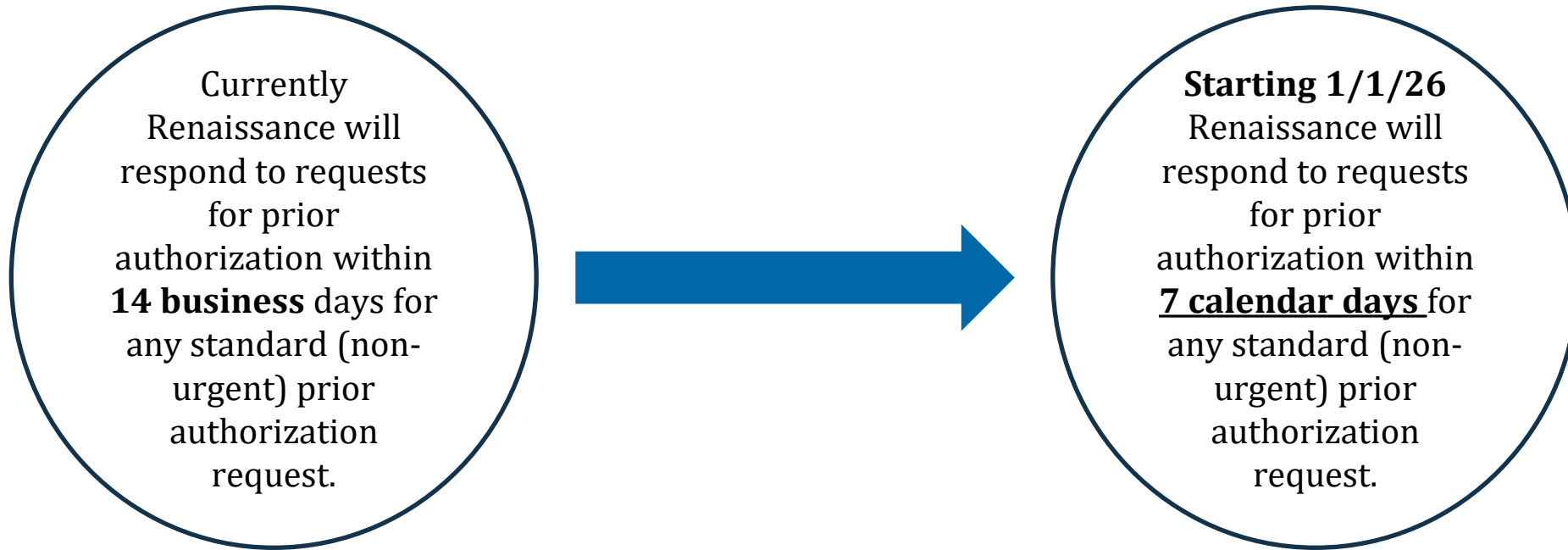
**REMEMBER: A FULL
TREATMENT PLAN
MUST BE SUBMITTED
WITH THE
SUBMISSION OF ALL
PRIOR
AUTHORIZATIONS.**

The Renaissance Review

- Renaissance will respond to requests for prior authorization within 14 business days for any request that is not for an urgent dental care procedure.
- In emergency situations, where oral health conditions involve severe pain, uncontrolled bleeding, traumatic injuries, or infections requiring immediate attention, providers are urged to render the appropriate treatment.
 - Providers should then contact Renaissance within 3 business days and submit the appropriate claim.
 - If such urgency is not required, Renaissance will respond to prior authorization requests for expedited dental care procedures within 72 hours of receiving the request.



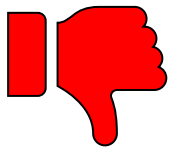
The Renaissance Review



The Renaissance Decision



Approved Prior Authorizations: Prior authorizations are valid for 180 calendar days after issuance, after which a new prior authorization request must be submitted



Denied Prior Authorizations: Renaissance will provide information explaining the reason(s) along with information on how to appeal the adverse decision.

- See section 12 of provider manual for information on appeal submissions

Equal Access for Individuals with Disabilities

An individual with a disability may need a reasonable accommodation/modification to be able to receive a service or benefit.



Examples of common accommodations:

Accessible exam rooms:
Free of clutter, wide door entry, space to maneuver wheelchairs, walkers, etc.

Adjustable exam tables/chairs

Accessible bathroom

Wheelchair ramp

Disabled parking spots

Going Deeper: Meeting Unique Needs

- You may find that a patient with I/DD needs accommodations to aid in a successful appointment.
- Pre-visit consider the following:
 - Offering appointment times at non-peak hours
 - Offering a pre-visit tour of the office
 - If not feasible provide photos of the office and staff to the caregiver in advance of the appointment
 - Requesting patient information in advance to review with dental team such as:
 - Medication list
 - Behavioral strategies
 - History of dental visits



Going Deeper: Meeting Unique Needs

- You may find that a patient with I/DD needs accommodations to aid in a successful appointment.
- In the visit consider the following:
 - Can our office dim the lighting or reduce the noise if asked?
 - If not, can we offer sunglasses?
 - Do we have or can we get some sensory-friendly tools?
 - Weighted blankets or fidget items.
 - Can we get some staff trained in serving this community? A free resource is [NICHE](#).
 - Can we extend appointment times to allow for a slower pace?



Claims Submissions



SUBMITTING CLAIMS ELECTRONICALLY CAN REDUCE PROCESSING TIME AND IS MORE COST-EFFICIENT. CLAIMS MAY BE SUBMITTED ELECTRONICALLY THROUGH A CLEARINGHOUSE OR THROUGH THE DENTAL OFFICE TOOLKIT (DOT). TO ACCESS DOT, VISIT [HTTP://WWW.RENENTALOFFICETOOLKIT.COM/](http://www.rendentalofficetoolkit.com/).



IF UNABLE TO SUBMIT CLAIMS ELECTRONICALLY, PAPER CLAIMS MAY BE MAILED TO: RENAISSANCE
ATTN: TENNCARE ADULT CLAIMS
RENAISSANCE CLAIMS
[P.O. BOX 2720](mailto:tenncareadultclaims@renaissance.com)
[FARMINGTON HILLS, MI 48333-2720](mailto:tenncareadultclaims@renaissance.com)



PLEASE CALL THE CUSTOMER SERVICE TEAM AT 866-864-2526 FOR MEMBER ELIGIBILITY, BENEFITS INFORMATION, AND CLAIMS INQUIRIES.

The Renaissance I/DD Team



I/DD Dental Directors:

Allen Wong, DDS, EdD

Dr. Allen Wong is a seasoned dental educator and clinician with over 35 years of experience having led postdoctoral programs at the University of the Pacific and UCSF and contributed significantly to hospital dentistry and care for individuals with special needs. He has held numerous leadership roles in national dental organizations, lectured globally on advanced dental practices, and now serves as an I/DD Dental Director at Renaissance.

Dr. Shanika Maddox, DDS

Dr. Shanika Maddox has extensive experience delivering dental care to individuals with intellectual and developmental disabilities through nursing home programs, mobile and at-home services, and telehealth. Her work has focused on increasing access to care by bringing comprehensive dental treatment directly to patients in residential, long-term care, and home settings.

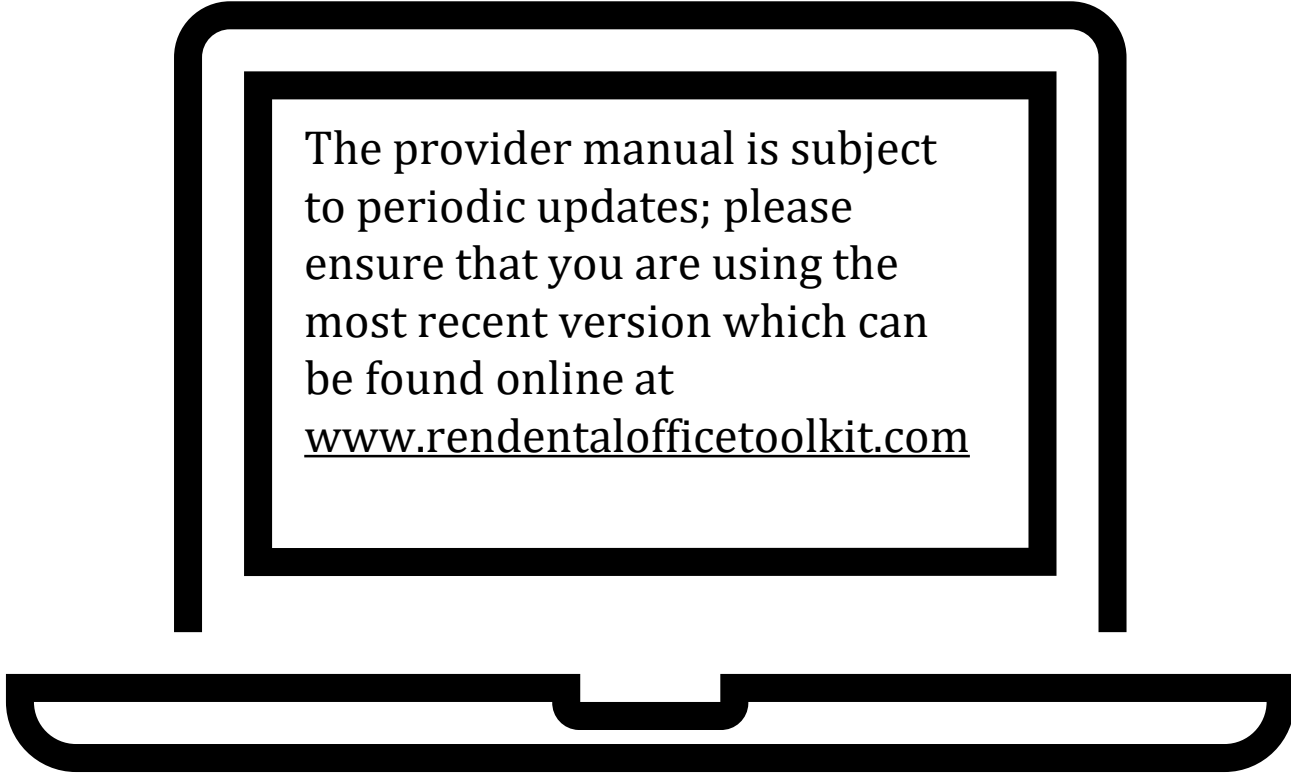
I/DD DBM MCO Coordinator: Crystal Collins

- ▶ This coordinator will work alongside the MCO to coordinate care and use of the supplemental dental service offered in the waivers programs.

Adult DBM MCO Coordinator: Jen Sanchez

- ▶ This coordinator serves as a backup to the I/DD DBM MCO Coordinator.

Please email Renaissance_IDDquestions@renaissancefamily.com if you have requests for trainings or if in need of support serving this community.



The provider manual is subject to periodic updates; please ensure that you are using the most recent version which can be found online at www.rendentalofficetoolkit.com

Resources

- ▶ [The Americans with Disabilities Act | ADA.gov](#)
- ▶ [NICHE](#) (National Institute for inclusive Curriculum) Provides foundational knowledge in preparing health professions for treating patients with intellectual and developmental disabilities (I/DD)
- ▶ [Treating Patients with Mild-Moderate Special Needs Online Course - UW School of Dentistry](#)

Supportive Articles

- ▶ [Behavior-Based Strategies to Support Oral Health](#)
- ▶ [Oral Care for Adults with Disabilities](#)
- ▶ [Practical Oral Care for People With Intellectual Disability](#)
- ▶ [Developmental Disabilities and Oral Health | NIDCR](#)

Questions

