

Florida Healthy Kids

Attachment 11

Databook

ITN 2021-300-01

– Dental Services

and Coverage

Florida Healthy Kids Corporation
June 11, 2021

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Introduction

The purpose of this databook is to outline relevant background information to Respondents to the Florida Healthy Kids Corporation (FHKC) Invitation to Negotiate (ITN) 2020-300-01 for Dental Services and Coverage. Summarized service data for populations served by the Florida Healthy Kids (FHK) program are provided to support premium development and other aspects of Respondents' proposals. This document provides information on the sources of historical data and provides an overview of the process used to summarize the data.

1.1 Program Background

The FHK program provides a comprehensive dental package that includes diagnostic, preventative, restorative, endodontics, periodontics, prosthodontics, oral and maxillofacial surgery, orthodontics, and other services to children ages 5 years through 18 years. The program offers coverage on a subsidized or full-pay basis depending on the covered family's income and household size. FHKC currently contracts with three carriers for the coverage of all populations across the 11 Regions: DentaQuest of Florida (DentaQuest), MCNA Dental (MCNA), and Argus Dental and Vision (Argus).

Additional information regarding the populations served and the services included in each program can be found in Section 2.

1.2 Purpose of ITN

The purpose of this ITN is to explore the various questions identified in the ITN and to determine through the negotiation process the insurers best qualified to assume the underwriting risk and provide dental services and coverage through the FHK Children's Health Insurance Program (CHIP) Plan and the FHK Full-Pay Plan (together, the Program).

The purpose of this databook is to outline relevant background information to Respondents to the FHKC ITN 2021-300-01 for Dental Services and Coverage. Summarized service data for populations served by the FHK program are provided to support premium development and other aspects of Respondents' proposals. This document provides information on the sources of historical data and provides an overview of the process used to summarize the data.

1.3 Overview of Databook Contents

The databook contains combined historical experience for both the FHK CHIP Plan and the FHK Full-Pay Plan populations offered through the Program from July 2018 through June 2020. The

databook reflects member months, claim payments and units as reported by the dental carriers. These reported figures are converted into per member per months (PMPMs) and Units per 1,000 members.

Caveats

Mercer has used and relied upon eligibility and financial data supplied by FHKC and the current FHK insurers in their quarterly experience reports. They are solely responsible for the validity and completeness of these supplied data and information. Mercer has reviewed the summarized data in compliance with the Actuarial Standard of Practice (ASOP) on data quality (ASOP 23), but did not perform a complete audit.

The databook assumes the reader is familiar with the Program, CHIP eligibility rules, and actuarial rating techniques. It is intended for FHKC and potential vendors, and should not be relied upon by other parties. Other readers should seek the advice of actuaries or other qualified professionals competent in the area of actuarial rate projections to understand the technical nature of these data. This document should be reviewed in its entirety. Users of this databook are cautioned against relying solely on the data contained herein, as it is largely based on unaudited insurer submissions. FHKC and Mercer provide no guarantee, either written or implied, that this databook is 100% accurate or error free.

This document is being provided for informational purposes only. FHKC and Mercer reserve the right to refine it as they see fit at any time.

The actuary listed below is a member of the American Academy of Actuaries and meets the qualification standards for performing the analyses described in this document.

Stacey Lampkin, FSA, MAAA
Partner

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Covered Population, Services, and Service Areas

2.1 Overview of Covered Populations

Children eligible for the FHK CHIP Plan must meet financial (Title XXI) requirements to participate and be between the ages of 5 years and 18 years. Title XXI eligible children who meet the statutory definition of “children with special health care needs” are able to choose between FHK and the Children’s Medical Services Managed Care Plan (CMS Plan) administered by the Florida Department of Health. ITN 2021-300-001 for Dental Services and Coverage reflects coverage and services for FHK populations, and does not include dental services for members enrolled in the CMS Plan.

To be clinically eligible for the CMS Plan, children must have a condition that meets the statutory definition of “children with special health care needs”. In Section 391.021(2), F.S., children with special health care needs are, “...children under age 21 years whose serious or chronic physical or developmental conditions require extensive preventive and maintenance care beyond that required by typically healthy children. Health care utilization by these children exceeds the statistically expected usage of the normal child adjusted for chronological age. These children often need complex care requiring multiple providers, rehabilitation services and specialized equipment in a number of different settings.”

2.2 Overview of Covered Services

Covered services are included in Attachment 11 FHK Databook.xlsx, within the worksheet titled Procedure Code List. The summary outlines the list of procedure codes and service groupings provided by current vendors.

The CHIP and Full-Pay Plan populations reflect the same benefit coverage.

2.3 Service Areas (Regions)

FHKC has adopted the Florida Medicaid Regions as geographic areas in which to administer its program. County assignment to the 11 regions is shown in the subsequent table and a map of the Regions is available at

https://ahca.myflorida.com/medicaid/statewide_mc/pdf/SMMC_Region_Map.pdf.

Eligibility and service data in this databook are provided at the regional level; statewide summaries are also included.

Service Areas

Region #	Counties
1	Escambia, Okaloosa, Santa Rosa, and Walton
2	Bay, Calhoun, Franklin, Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla, and Washington
3	Alachua, Bradford, Citrus, Columbia, Dixie, Gilchrist, Hamilton, Hernando, Lafayette, Lake, Levy, Marion, Putnam, Sumter, Suwannee, and Union
4	Baker, Clay, Duval, Flagler, Nassau, St. Johns, and Volusia
5	Pasco and Pinellas
6	Hardee, Highlands, Hillsborough, Manatee, and Polk
7	Brevard, Orange, Osceola, and Seminole
8	Charlotte, Collier, DeSoto, Glades, Hendry, Lee, and Sarasota
9	Indian River, Martin, Okeechobee, Palm Beach, and St. Lucie
10	Broward
11	Miami-Dade and Monroe

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Dental Experience Report Data

Contracted insurers submit quarterly and annual dental experience reports to FHKC. These reports document financial results and performance against medical loss ratio (MLR) requirements. FHKC provides these reports to Mercer when they are received. In order to provide Respondents with additional information pertaining to service provision and cost, Mercer has compiled Schedule B from these experience reports reflecting services provided during the 24-month period from July 1, 2018 through June 30, 2020. This information is summarized in the accompanying MS Excel file – Attachment 11 FHK Databook.xlsx. In addition to the dental experience, a separate worksheet within Attachment 11 includes Full-Pay Plan enrollment from July 2014 through May 2021.

3.1 Category of Service Logic

Historical program experience is presented using service categories from the experience report template. Category of service (COS) is based on the nine categories of service outlined in the dental experience report instructions. A full list of COS can be found within the Procedure Code List worksheet in Attachment 11 FHK Databook.xlsx.

Dental COS

COS	Procedure Code Range
01. Diagnostic	D0100 - D0999
02. Preventative	D1000 - D1999
03. Restorative	D2000 - D2999
04. Endodontics	D3000 - D3999
05. Periodontics	D4000 - D4999
06. Prosthodontics	D5000 - D6999
07. Oral And Maxillofacial Surgery	D7000 - D7999
08. Orthodontics	D8000 - D8999
09. Other Services	Procedure Codes not in the range listed above

Dental Databook Source Documentation

Experience Quarters	Calendar Experience	Paid Through Date
SFY 2019 Q4 (201807–201906)	July 2018 through June 2019	July 31, 2019
SFY 2020 Q4 (201907–202006)	July 2019 through June 2020	November 30, 2020

3.2 Financial Data Limitations

Mercer performed high-level reviews and metrics on the financial experience submitted by carriers for the two fiscal years noted above. Mercer’s reviews have been for reasonableness and outlier experience and do not constitute audits of the experience.

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