

**2024 Humana Insurance Company
DENTAL PPO ACCESS PLAN
With
RESULTS AND ANALYSIS**

INTRODUCTION:

Provider access plans are an integral part of Humana Insurance Company's (HIC) dental care service system, as well as a regulatory requirement. Implementation of an access plan facilitates member access to care through an adequate network of providers. Expanding sales and RFP requests also require an overall knowledge of provider access standards and current status. This Access Plan provides a format and content for meeting legislative and regulatory needs, as well as the service expectations of our membership.

I. PURPOSE

The purpose of HIC's Dental Access Plan is to facilitate member access to dental providers and dental services. The Access Plan activities are designed to:

- Facilitate a sufficient number of dentists in the delivery system and align geographic distribution with the member population
- Facilitate timeliness of appointments and dental care both during and after office hours
- Meet the cultural and linguistic needs of the member population
- Measure performance against HIC's standards for provider access and availability
- Identify opportunities for improvement

II. SCOPE

HIC has established standards for the number and geographic distribution of dental providers as well as standards for appointment access. Performance against these standards is measured at least annually.

Compliance with dental provider access is measured by:

- The ratio of dentists to members
- The geographic distribution of dentists

Compliance with appointment access standards are measured by:

- The rate of member complaints regarding lack of providers in certain locations

III. DEFINITIONS:

- **Endodontics**
A branch of dentistry concerned with diagnosis, treatment and prevention of diseases of the dental pulp and its surrounding tissues.
- **Oral & Maxillofacial**
A field of dentistry concerned with the upper jaw and associated teeth particularly with reference to specialized surgery of this region.
- **Orthodontics**
The division of dentistry dealing with the prevention and correction of abnormally positioned or aligned teeth.
- **Pediatric Dentistry**
A branch of dentistry concerned with the dental care and treatment of patients from birth through the teen years. Also known as known as pedodontics.

- **Periodontics**

The branch of dentistry concerned with the study of the normal tissues and the treatment of abnormal conditions of the tissues immediately about the teeth.

- **Prosthodontics**

A field of dentistry concerned with the science and art of providing suitable substitutes for the coronal portions of teeth, or for one or more lost or missing teeth and their associated parts, in order that impaired function, appearance, comfort, and health of the patient may be restored.

- **Urgent Care**

Is defined as services required from a dentist, for the palliative relief of a sudden, or unexpected acute condition, involving severe pain that require immediate dental services to alleviate suffering, or prevent imminent loss of teeth from accident or injury (fever, swelling, infection, bleeding, or other conditions)

- **Routine Care**

Is defined as non-urgent care for symptomatic issues (Cleanings, fillings, crowns, bridges, etc.)

IV. SPECIFIC ACCESS and AVAILABILITY MEASUREMENTS

A. Member Cultural and Linguistic Needs and the Provider Network

Purpose:

Humana complies with all applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. We also provide free language interpreter services. See our full [accessibility rights information and language options](https://www.humana.com/accessibility-resources).
<https://www.humana.com/accessibility-resources>

B. Network Adequacy

Purpose:

To facilitate an adequate number and geographic distribution of dentists in the HIC network to meet member needs.

Provider Availability

Standard: Annually, the ratio of dental providers to members is calculated and compared to goals. Targets are to have 90% of our members within these standards.

Measurements/Results:

Table 1: Target Provider-to-Member Ratios

Geographic Area	General Dentists
Statewide	1:2000 1.67:1,000

Table 2: Actual Performance 2024

Geographic Area	General Dentists
Statewide	1:0.7 Members

Table 3: Target Provider-to-Member Ratios

Geographic Area	All Dentists
Statewide	1:1,200

Table 4: Actual Performance 2024

Geographic Area	All Dentists
Statewide	1:0.6 Members

Total Membership: 4,330

Provider Accessibility

Standard: Geographic access studies are done on an annual basis. The software produces maps and analytical summaries of members with desired access and members without desired access. The access standard targets are listed in the tables below.

Service Area:

Dental PPO

Statewide/All Counties

Measurements/Results:

Table 5: 2024 Dental PPO Targets

Geographic Area	All Dentists
Large Metro	90% 1 in 15 miles/30 minutes
Metro	90% 1 in 30 miles/45 minutes

Table 6: 2024 Dental PPO Results

Geographic Area	All Dentists
Large Metro	100% 1 in 15 miles/30 minutes
Metro	100% 1 in 30 miles/45 minutes

Total Membership: Large Metro: 54 Metro: 4,276

Findings/Recommendations:

We are meeting or exceeding all access targets.

Actions:

Continue to monitor on an annual basis.

C. Accessibility of Services

Purpose: To facilitate timely access to routine care appointments, specialty consultations and urgent care services.

Policy: When an in-network provider is not available or the member is outside the service area, HIC will ensure that the covered person obtains the covered benefit at no greater cost to the covered person than if the benefit were obtained from participating providers, or shall make other arrangements acceptable to the state insurance commissioner. In the event an in-network provider is not available within our access standards, members are advised to contact Humana customer service to make arrangements to see another provider.

- Humana Dental PPO members are not required to select a primary care dentist and may self-refer to any general dentist or specialty dentist in the network to receive the in-network level of benefits.
- Members are informed of the plans grievance and appeals policies in the member certificate of coverage. Most complaints can be resolved informally over the phone by Humana's Customer Care Representatives. In the event the Customer Care Representative cannot resolve the complaint to the member's satisfaction, the Customer Care Representative advises the member of Humana's Grievance and Appeals Policy and explains the process of submitting the complaint.

Table 7: Access Complaints

Time Period	# of Complaints	Complaints/ 1000 members
1 st QTR 2024	0	0
2 nd QTR 2024	0	0
3 rd QTR 2024	0	0
4 th QTR 2019	0	0

Source: Grievance and Appeals Reports and complaints received

VI. REPORTING

The Specialty Quality Improvement Committee (SQIC) monitors the Access and Availability activities as described. Opportunities for improvement, development of action plans, follow up and documentation of improvement is overseen by the SQIC. Analysis of the Access and Availability Plan is performed annually.