Survey: 2020 Network Administration Survey

2020 NADP Network Administration Survey

Contact Information

Name: ____________________________

Company: ____________________________

Phone: ____________________________

Email Address: ____________________________

Which type of Dental benefit products does your company currently offer? (Please check all that apply)

- [ ] DHMO
- [ ] DEPO
- [ ] Medicaid/CHIP
- [ ] Discount Dental/Dental Savings Plan

* Does your company own/manage its own proprietary network? (Please check all that apply)

- [ ] DHMO
- [ ] DPPO
- [ ] DEPO
- [ ] Discount Dental/Dental Savings Plan
- [ ] Medicaid/CHIP specific
- [ ] Medicare/Medicare Advantage
- [ ] Do not own/manage proprietary network

For each product type listed please provide the number of individual providers on your proprietary networks and the number of individual providers that are affiliated with a DSO (Dental Service Organization)

<table>
<thead>
<tr>
<th>Product Type</th>
<th>Total Number of Individual Providers</th>
<th>Number of Individual Providers Affiliated with a DSO</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHMO</td>
<td></td>
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<tr>
<td>DPPO</td>
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<tr>
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</tr>
</tbody>
</table>

2020 Network Administration Survey
* Does your company lease any provider networks from other dental plans or network management companies? (Please check all that apply)

- DHMO
- DPPO
- DEPO
- Discount Dental/Dental Savings Plan
- Medicaid/CHIP specific
- Medicare/Medicare Advantage
- Do not lease any provider networks

Please provide the number of networked individual providers on your leased networks are affiliated with a DSO (Dental Service Organization).

DHMO
DPPO
DEPO
Discount Dental/Dental Savings Plan
Medicaid/CHIP
Medicare/Medicare Advantage

* Do you offer your fully insured group customers a choice of DPPO networks such as a narrow network?

- Yes, to all groups
- Yes, but only to certain groups
- No

Which type of groups do you allow a choice of DPPO networks like narrow networks? (i.e. fully insured/self insured, group size, etc.)

In which states do you offer narrow networks (Select all that apply)?

- Alabama
- Alaska
- Arizona
- Arkansas
- California
- Colorado
- Connecticut
- Delaware
- Florida
- Georgia
- Hawaii
- Idaho
Credentialing

What is your target and actual percent for the annual recredentialing of your networks?

<table>
<thead>
<tr>
<th></th>
<th>Target %</th>
<th>Actual %</th>
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</thead>
<tbody>
<tr>
<td>DHMO</td>
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</tbody>
</table>

How often do you conduct a recredential process for your networks?

<table>
<thead>
<tr>
<th></th>
<th>More than twice a year</th>
<th>Twice a year</th>
<th>Once a year</th>
<th>Once every two years</th>
<th>Once every three years</th>
<th>Less than once every three years (10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHMO</td>
<td>o</td>
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<td>o</td>
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</table>

* Do you credential in house or outsource to a credentialing vendor?
  O Credential in house
  O Outsource to credential vendor

Who do you use as your outsourced credential vendor?

2020 Network Administration Survey
What documents do you require to credential a dentist on your network? Check all that apply.

- DHMO
- DPPO
- Discount Dental/Dental Savings Plan
- Medicaid/CHIP
- Medicare/Medicare Advantage
- License
- DEA (Drug Enforcement Administration)
- CPR card
- W-9
- Malpractice report
- Specialty certificate
- QA (Quality Assurance) certification for office standards
- Application

Do you require credentialing documents on all associates in a practice if they are all under one Tax Identification Number (TIN)?
- Yes
- No

How do you validate the credential documents (Select all that apply)?
- Request information via a phone call to the dentist’s office
- Request information through an email
- Request information by mail due to the state regulations
- Request information by mail even if it is not required by the state regulations
- Other

On average, how long does it take to verify credentials of a new contract?
- Within 5 business days
- Within 10 business days
- Within 15 business days
- Other

On average, what percent of provider applications have missing information?

2020 Network Administration Survey
If you are missing documents in an application, how do you obtain them (Select all that apply)?

- Request information via a phone call to the dentist’s office
- Request information through an email
- Request information by mail
- Other

What is the average percent of applications that are denied?

What percent of the network contracts are terminated based on recredentialing?

Of the providers you attempted to recredential for 2019, what percentage actually completed the recredentialing process?

Do you currently offer paperless electronic onboarding for network dentists?

- Yes
- No

When are you planning to offer electronic onboarding for network dentists?

- In the next 6 months
- In the next 12 months
- In the next 2 - 5 years
- Not planning to offer

What type of a system are you planning to implement and how will it be integrated?

What percentage of dentists are onboarded this way?

Have you expanded your credentialing to include hygienists (affiliated hygienists)?

- Yes
- No, and we do not plan to include hygienists
No, but we plan to include hygienists

When are you planning to include dental hygienists in your credentialing process?
- In the next 6 months
- In the next 12 months
- In the next 2 - 5 years
- Not planning to offer

Are you utilizing NCQA standards for commercial DPPO network provider credentialing?
- Yes
- No
- Don't Know

What types of additional or ongoing training do you provide your participating providers?
- Portal
- Claim Submission
- Other

Contracting

What is your primary duration of your provider contracts?
- Less than 1 year
- 1 year
- 2 years
- 3 years
- 4 years or longer

If a provider wishes to terminate his/her contract, what method of notification do you require? Check all that apply.
- By letter
- By email
- By fax
- By phone
- Other
How many days do you require providers to give notice of termination?

- 0 - 15 days
- 16-30 days
- 31-60 days
- 61-90 days
- longer than 90 days

If an associate is added or terminated at a location, what type of notification do you require to make changes in your system?
Check all that apply.

- Written notification
- Notification by email
- Notification by phone
- Other

DHMO

DPPO

Discount Dental/Dental Savings Plan

Medicaid/CHIP

Medicare/Medicare Advantage

To add a new contract

To add a new associate to an old contract

To add a new location to an old contract

To remove a terminated contract

To make file changes (for example, address or TIN)

What are you doing to comply with the growing attestation needs within the industry?
Directories

How frequently is your online provider search updated? Check all that apply.

- On demand
- Daily
- Once per week
- Once a month
- Once every 3 months
- Other

To add a new contract once it is activated within the system

To make file changes once they are processed within the system

To remove terminated contracts once the providers’ terminations have been processed within the system

Staffing

Do your recruiters recruit for?

- all products
- product specific segments
- Other

Please provide the total number of field recruiters that focus on: (enter 0 if you don’t have field recruiters)

<table>
<thead>
<tr>
<th>Category</th>
<th>New recruiters only</th>
<th>Retention only</th>
<th>Both new recruitment &amp; retention</th>
</tr>
</thead>
<tbody>
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Please provide the total number of telephone-based recruiters that focus on: (enter 0 if you don’t have telephone-based recruiters)

<table>
<thead>
<tr>
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<th>New recruitment only</th>
<th>Retention only</th>
<th>Both new recruitment &amp; retention</th>
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</table>

2020 Network Administration Survey
What is your compensation strategy for new business recruiters and retention recruiters?

- Salary
- Incentive
- Salary + Incentive

**Payments and Discounts**

**How do you calculate discounts for DPPO networks**

<table>
<thead>
<tr>
<th></th>
<th>Proprietary Networks</th>
<th>Leased Networks</th>
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</thead>
<tbody>
<tr>
<td>Based on Usual and Customary Fees</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Based on a Schedule of Fees</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**What percentage of your proprietary DPPO network is set at a standard fee schedule**

**What percentage of your proprietary DPPO network is set at a custom fee schedule?**

**What percent of claims filed for services provided in 2019 are in each of the following networks? (Do not include Medicaid, CHIP, Medicare or Medicare Advantage claims)**

<table>
<thead>
<tr>
<th>Network</th>
<th>Proprietary network(s)</th>
<th>All Leased networks</th>
<th>N/A</th>
</tr>
</thead>
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<tr>
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<tr>
<td>DEPO</td>
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</tbody>
</table>

**If you have government business, do the following programs have fee discounts that are the same, less than or greater than your commercial business:**

<table>
<thead>
<tr>
<th>Program</th>
<th>Greater</th>
<th>Same</th>
<th>Lower</th>
<th>N/A</th>
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<tbody>
<tr>
<td>Medicare/Medicare Advantage</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Tricare</td>
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<td>FEDVIP</td>
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<td>VADIP</td>
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<tr>
<td>Medicaid/CHIP</td>
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<td>☐</td>
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<tr>
<td>Other</td>
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<td>☐</td>
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</tbody>
</table>

**How do your members identify the provider network they are to be using for in-network benefits? (check all that apply)**

<table>
<thead>
<tr>
<th>Identification Method</th>
<th>DPPO</th>
<th>DHMO</th>
</tr>
</thead>
<tbody>
<tr>
<td>ID Cards</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Initial Benefit packet</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>Website member portal</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Customer Service</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Other</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**What percentage of all participating providers were utilized by your members in 2019?**
<table>
<thead>
<tr>
<th>Plan Type</th>
<th></th>
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<td>Advantage</td>
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