Nevada Medicaid Dentist Survey

This survey is designed to provide valuable feedback to the Division of Health Care Financing and Policy. The Division will be designing the contract language for both the Medical Managed Care Organizations(currently Anthem, HPN, Siliver Summit) and the Dental Managed Care Organization (currently LibertyDental Plan). Your honest perspective is greatly appreciated. Thank you!

1. Do you currently accept new Nevada Medicaid patients in your practice?

2. How seriously have you/your praction have you/your praction have your?	ce considered stopping acceptance of new Nevada Medicaid patien
Not at all seriously	Extremely seriously
Slightly seriously	Not sure/I am not responsible for this decision.
Moderately seriously	
Other (please specify)	
3. How seriously have you/your practic	ce considered starting to accept Nevada Medicaid patients in the pa
3. How seriously have you/your praction year?	
3. How seriously have you/your praction year? Not at all seriously	Extremely seriously
3. How seriously have you/your practic year? Not at all seriously Slightly seriously	
3. How seriously have you/your praction year? Not at all seriously	Extremely seriously
 3. How seriously have you/your practic year? Not at all seriously Slightly seriously Moderately seriously 	Extremely seriously
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 3. How seriously have you/your practic year? Not at all seriously Slightly seriously Moderately seriously 	Extremely seriously
 3. How seriously have you/your practic year? Not at all seriously Slightly seriously Moderately seriously 	Extremely seriously

4. Do any other dentists in your practice accept Nevada Medicaid patients?		
N/A – I am a solo practitioner		
YES, they accept some FFS Medicaid patients		
YES, they accept some Liberty Dental Plan patients		
YES, they accept all FFS Medicaid patients		
YES, they accept all Liberty Dental Plan patients		
No		
5. About what percentage of your office's patients are covered by Nevada Medicaid?		
0	100	
0		

6. Please read the following statements about the Nevada Medicaid program and circle the number that indicates the degree to which you disagree or agree with these statements.

	Strongly disagree	Disagree	Agree	Strongly Agree	Not sure/ Don't know
It is difficult to provide comprehensive treatment to Liberty Dental Plan Medicaid patients.	\bigcirc	0	\bigcirc	\bigcirc	0
The Liberty Dental Plan Medicaid program has been getting less complicated in the last few years.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Liberty Dental Plan's dental home model enables patients to access care.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Liberty Dental Plan supports our practice's vision and enhances our ability to treat patients.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Liberty Dental Plan respects my professional judgment concerning patient care.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
Liberty Dental Plan works with my office to resubmit denied claims.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

	Strongly disagree	Disagree	Agree	Strongly Agree	Not sure/ Don't know
Liberty Dental Plan's teledentistry after hours service enhances my practice mission.	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
I am concerned about having the only practice in the area that accepts Liberty Dental Plan patients.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Dentists have an ethical obligation to treat Medicaid patients.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Changes in the Liberty Dental Plan program are communicated effectively to my office.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Changes in the overall Nevada Medicaid program are communicated effectively to my office.	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Comments					

7. Please read the following statements about the Nevada Medicaid program and circle the number that indicates the degree to which you disagree or agree with these statements.

	Strongly disagree	Disagree	Agree	Strongly Agree	Not sure/ Don't know
Nevada Medicaid patients understand their dental benefits.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Overall, Liberty Dental Plan's dental home model is well communicated to members.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Most Liberty Dental Plan patients understand how to change their dental home.	0	0	\bigcirc	\bigcirc	\bigcirc

	Strongly disagree	Disagree	Agree	Strongly Agree	Not sure/ Don't know
Patients routinely use Liberty Dental Plan's value added services such as an adult prophy and teledentistry services.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Liberty Dental Plan's educational outreach has enhanced my patient's oral hygiene routines.	\bigcirc	0	0	\bigcirc	0
Liberty Dental Plan should explore coordination between pediatrician offices and dental practices.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Liberty Dental Plan should explore coordination between medical offices that serve chronic disease patients and dental practices.	\bigcirc	0	\bigcirc	\bigcirc	0
Changes in the Liberty Dental Plan program are communicated effectively to my patients.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Changes in the overall Nevada Medicaid program are communicated effectively to my patients.	\bigcirc	0	\bigcirc	\bigcirc	0
Comments					

8. The following is a list of commonly reported problems with the Nevada Medicaid program. Please indicate how important you considered each problem to be when deciding how much to participate in Nevada Medicaid.

	Not at all important	Slightly important	Moderately important	Extremely important	Not sure/ Don't know
Complicated paperwork	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Low reimbursement rates	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Intermittent eligibility of Nevada Medicaid patients	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Denial of payment	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Broken appointments	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Slow payment	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Patient non-compliance with recommended treatment	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Frequently changing Medicaid regulations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Not enough other practices in the area accepting Medicaid patients	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Fear of government investigation (e.g., chart audits)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Limited services covered by Nevada Medicaid for children	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Limited services covered by Nevada Medicaid for adults	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comments					

9. How would you best describe your practice during the past 12 months?			
Too busy to treat all requesting appointments.	Not busy enough, would have liked more patients.		
Provided care to all requesting it, but felt overworked.	Practice limited, no new patients taken.		
Provided care to all requesting it, but did not feel overworked			
Other (please specify)			
10. Do you have specific suggestion for the new dental M	ledicaid contract? ie. value added services or other		
methods to support the profession of dentistry in Nevada			

11. If you would like to be contacted for further comments, please provide your name, contact information, and practice location? Otherwise, skip this question.

Name	
Practice Name and specialty (if applicable)	
Practice Address	
Address 2	
City/Town	
State/Province	
ZIP/Postal Code	
Country	
Email Address	
Cell Phone Number	

12. Comments:

Is there anything else we should know?