

## Dominion Dental USA, Inc. and Subsidiaries

<b>POLICY TITLE</b>	<b>SPECIALIST REFERRAL PROCEDURES FOR MARYLAND MEMBERS</b>
<b>POLICY NUMBER</b>	<b>COMPLIANCE-032</b>

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### I. DESCRIPTION/BACKGROUND

This policy outlines the requirements of Dominion Dental Services, Inc. and its applicable affiliates (hereinafter referred to as “Dominion” or “Plan”) to establish procedures allowing Maryland members to obtain certain types of specialist referrals, in accordance with Maryland insurance laws applicable to dental plan organizations.

### II. DEFINITIONS

The definitions in this policy are also included in the *Individual Dental Policy and Group Certificate of Coverage* issued to Subscribers.

**“Adverse Decision”** shall mean a utilization review determination by the Plan, a private review agent or a dentist acting on behalf of the Plan that: (i) a proposed or delivered dental service covered under the Contract is or was not medically necessary, appropriate, or efficient; and (ii) may result in no coverage of the dental service.

**“Member”** shall mean any individual Subscriber or eligible family Dependent entitled to receive services by reason of the Contract.

**“Participating Dentist”** shall mean those independent licensed dentists who have contracted with the Plan to provide dental services at negotiated fees for Members of the Plan. Participating Dentists are not employees of, nor supervised by the Plan.

**“Plan Specialist”** shall mean those independent licensed specialists who have contracted with the Plan to provide dental services of the Plan that are of such a degree of complexity as not to be normally performed by a Participating Dentist. Plan Specialists are not employees of, nor supervised by the Plan.

**“Subscriber”** shall mean an individual in good standing who has paid the Subscription Dues or Premiums for services of the Plan prior to the period of eligibility, including payments for Dependents.

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### III. POLICY

It is the policy of Dominion to require compliance with § 15-830 of the Annotated Code of Maryland, Insurance Article, which requires carriers including dental plan organizations, to establish procedures allowing Members to obtain referrals to specialists under certain circumstances.

Dominion will file with the Maryland Insurance Commissioner, as required, a copy of its specialist referral procedures and make them available to its members and post them on the online network directory. When applicable, such procedures will include:

- Steps Dominion requires of a Member to request a referral;
- Dominion’s timeline for decisions; and
- Dominion’s grievance procedures for denials.

Dominion’s *Individual Dental Policy* and *Group Certificate of Coverage* contain the following provisions for the types of specialist referrals covered in this policy:

**Participating Standing Referral (Select/DHMO Plans only)**

Referrals to a Plan Specialist must be made by the Member’s Participating Dentist, except in the case of orthodontics and palliative emergency pain treatment. If the Member’s Participating Dentist determines, in consultation with the Plan Specialist, that the Member needs continuing care from the Plan Specialist or the Member has a condition that is life threatening, degenerative, chronic, or disabling, and requires specialized care, a standing referral shall be made in accordance with a written treatment plan developed by the Member’s Participating Dentist, the Plan Specialist, and the Member.

**Nonparticipating Referral (All Plans)**

A Participating Dentist may refer a Member to a nonparticipating specialist if the Member is diagnosed with a condition or disease that requires treatment by a specialist, and Plan does not have a Plan Specialist with the professional training and expertise to treat the condition or disease, or the Plan cannot provide reasonable access to a Plan Specialist with the professional training and expertise to treat the condition or disease without unreasonable delay or travel. For purposes of calculating any amount payable under the Plan by the Member, Plan will treat services received as if services were provided by a Plan Specialist. Plan shall be responsible for payment of the specialist’s charges to the extent the charges exceed the Copayments specified in the Description of Benefits and Member Copayments or Coverage Schedule.

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#### IV. PROCEDURE

##### **Standing Referral (Select/DHMO Plans only)**

1. A Dominion Member may receive a standing referral if the Member's Participating Dentist determines, in consultation with a Plan Specialist that:
  - a. the Member needs continuing care from a Plan Specialist, or the Member has a disease or condition that is life threatening, degenerative, chronic, or disabling, and requires specialized care;
  - b. the Plan Specialist has expertise in treating the life-threatening, degenerative, chronic, or disabling disease or condition; and
  - c. the services required to treat the Member's condition are covered services under the Member's Plan.
  
2. A standing referral shall be made in accordance with a written treatment plan for a covered service developed by:
  - a. the Participating Dentist;
  - b. the Plan Specialist; and
  - c. the Member or the Member's Representative.
  
3. A treatment plan may:
  - a. limit the number of visits to the Plan Specialist;
  - b. limit the period of time in which visits to the Plan Specialist are authorized; and
  - c. require the Plan Specialist to communicate regularly with the Member's Participating Dentist regarding the treatment and dental health status of the Member.
  
4. Participating Dentists can locate Plan Specialists on Dominion's website at [DominionNational.com](http://DominionNational.com) by selecting "Find a Provider," then "Dental," and then completing the fields to conduct a search.
  
5. The Member's Participating Dentist will complete a referral form for the treatment plan. Maryland Participating Dentist's must complete the Maryland Uniform Dental Consultation Form. These forms are located on Dominion's website [DominionNational.com](http://DominionNational.com) by accessing the Provider Portal, or through the IVR System.
  
6. There is no pre-authorization of the referral required by the Plan.
  
7. The Plan Specialist will submit the referral form to the Plan with his/her claim, if applicable. (Specialists only submit claims under certain Select Plans including those with an "S", "XS" or "SC" plan code and medically necessary Pediatric Services.)

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8. The foregoing information is included in Dominion’s *Specialty Care Referral Guidelines*, which are made available to all Participating Dentists and Plan Specialists.

**Non-Participating Referral (All Plans)**

1. A Dominion Member may receive a referral to a nonparticipating specialist if:
  - a. the Member is diagnosed with a condition or disease that requires treatment by a specialist;
  - b. Dominion does not have, or cannot provide reasonable access to without unreasonable delay or travel, a Plan Specialist with the professional training and expertise to treat the Member’s condition or disease; and
  - c. the services required to treat the Member’s condition are covered services under the Member’s Plan.
  
2. To request a referral to a nonparticipating specialist, the Member’s Participating Dentist will complete a referral form. Maryland Participating Dentist’s must complete the Maryland Uniform Dental Consultation Form. These forms are located on Dominion’s website [DominionNational.com](http://DominionNational.com) by accessing the Provider Portal, or through the IVR System.
  
3. Referral forms should be submitted to the Plan’s administrative office at: Dominion National, 251 18<sup>th</sup> Street South, Suite 900, Arlington, Virginia 22202, ATTN: Claims Dept. – Referral Unit.
  
4. In reviewing the referral request, the Plan will determine reasonableness of access to a Plan Specialist in accordance with its network access standards.
  
5. The Member and Participating Dentist will receive written notification of the approval or denial of the referral request from the Plan within fifteen (15) days of receipt of the request. If the referral is approved by the Plan, the notification will include instructions for submission of the claim to the Plan’s administrative office at: Dominion National, 251 18<sup>th</sup> Street South, Suite 900, Arlington, Virginia 22202, ATTN: Claims Dept. – Referral Unit. A copy of the referral form should be submitted with the claim.
  
6. The Member may appeal the Plan’s denial of a request for a referral to a nonparticipating specialist by following the process described in the Appeals and Grievances section of the *Individual Dental Policy* or *Group Certificate of Coverage*. If the referral is denied based on a finding that the proposed service is not medically necessary, appropriate, or efficient, the denial will constitute an Adverse Decision.

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7. Upon receipt of the claim, for purposes of calculating any deductible, copayment amount, or coinsurance payable by the Member, Dominion will treat the request as if the services were provided by a Plan Specialist.
8. Dominion’s Claims dept. will maintain processing guidelines for nonparticipating referrals and the associated claims. The processing guidelines may be modified from time to time, provided that they must implement all requirements of this policy, and may not contradict this policy.

**V. RELATED INFORMATION**

Specialty Care Referral Guidelines (provided to all Participating Dentists and Plan Specialists)

Individual Dental Policy

Group Certificate of Coverage

Claims Dept. Processing Guidelines for Nonparticipating Specialist Referrals