

**Legislative Testimony
Human Services Committee
HB 5500 AAC Provider Audits Under The Medicaid Program
Thursday, March 13th, 2014
Carolyn J. Malon, DDS**

Senator Slossberg, Representative Abercrombie and members of the Human Services Committee, my name is Carolyn Malon. I practice dentistry in Farmington, Connecticut and I am a Medicaid provider. I currently serve as the Immediate Past-President of the Connecticut State Dental Association. I am writing to testify in support of House Bill 5500 An Act Concerning Provider Audits Under The Medicaid Program.

Over the course of the last several years, the leadership of the Connecticut State Dental Association has worked closely with the leadership of our state to develop a network of dental Medicaid providers that is the envy of other states in our country. We currently have over 1800 dental providers enrolled in the Medicaid program.

It is an unfortunate fact that there have been a small number of providers who have been found to have committed fraudulent activity in the course of their billings. The vast majority of dentists enrolled however, are honestly trying to follow the rules and provide quality dental care to their patients. The audit process which looks for fraud is now adversely affecting many of our CSDA member dentists, and those of us in leadership roles in our association have been hearing from them. We feel that the provisions in HB 5500 would be good start towards making the audit process more fair, while at the same time ensuring that those who are perpetuating fraud are appropriately reprimanded or penalized. There are however additional concerns.

There are currently no written standards for required documentation in patient charts. The CSDA leadership has offered to work with DSS to develop a list of standards, so that our members who are providers understand what they need to do to avoid penalties. We have not yet received any communication from the Department of Social Services in this regard. Many of the violations which have been found during audits do not comply with what is currently considered standard of care in dentistry. Among other problems, these violations include the requirement for dentists to sign their notes in patient charts and to document the rationale for the taking of routine x-rays. These procedures are not standard of care in dentistry, although they may be considered so in the medical field. Nonetheless, dental providers are being penalized for these violations.

There is currently no process wherein a dentist can appeal a decision by the auditors. The same auditors are the only body which will review a decision. There are no dentists involved in the auditing process, and in my opinion, there should be. I would strongly urge an independent appeals body, which would include dentists. The CT State dental Commission could be used as a resource in the process of deciding what care and charting is appropriate.

I had the honor of serving on the Dental Commission for six years. When a dentist has had a complaint against them, the Department of Public Health does an investigation. If the dentist disagrees with the DPH decision, a hearing is held, and members of the dental commission comprise the hearing panel. Most of the commissioners are dentists, and can best decide whether the dentist provided an appropriate standard of care. It would seem logical to me that Medicaid audits should follow a similar process.

I would respectfully suggest that the Department of Social Services work with the Connecticut State Dental Association to develop a list of guidelines for dental Medicaid providers to ensure that they are in compliance with requirements for documentation and billing. I would further recommend that consultant dentists or members of the dental commission be included in the audit process, to guide the auditors in their decisions regarding the appropriateness of care.

The leadership of the CSDA wishes to assist our members in complying with DSS guidelines and in protecting the public. We are most adamant that those committing fraud be penalized, while we desire that those who are merely making honest errors in charting or billing be treated fairly.

I urge your support of HB 5500, and suggest that there be further efforts to modify the Medicaid audit process to ensure fair treatment of all providers.

Thank you.

Respectfully submitted,

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Respectfully Submitted,

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