

1                   Delta Dental of West Virginia, Inc., Network Access Plan  
2                   Delta Dental PPO™ Network and Delta Dental Premier® Network

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**Introduction**

Delta Dental of West Virginia, Inc., (“DDWV”) is licensed by the West Virginia Office of the Insurance Commissioner (“WV OIC”) as a Dental Service Corporation. We offer stand-alone dental fee-for-service (“PPO”) products to West Virginia residents using the Delta Dental PPO™ Network (“PPO Network”) and the Delta Dental Premier® Network (“Premier Network.”) The WV OIC requires Us to provide and make public this Network Access Plan for each dental product We offer.

This Access Plan describes the PPO and Premier Networks and is available to any Enrollee, Contractholder, Dentist or other interested party by visiting [deltadentalins.com](http://deltadentalins.com) using the *Contact Us* feature or by request by contacting Our Customer Service Center at 800-422-4234. Our online Dentist directory includes a link to this Network Access Plan and will accompany any printed requests.

Terms such as “We,” “Us” and “Our” refers to DDWV. Additional terms have specific meanings and are described in the *Definitions* section of this Network Access Plan.

We offer the following stand-alone dental products in West Virginia:

- Delta Dental PPO Group Dental Service Plan
- Delta Dental PPO Preferred Plan for Families
- Delta Dental PPO Basic Plan for Families
- Delta Dental PPO Pediatric Basic Plan
- Delta Dental Individual and Family Delta Dental PPO Basic and Premium Plan

**Network Adequacy**

**Dentist Selection and Criteria - How We Build Our Networks**

We select Dentists through a consistently applied application procedure which evaluates established credentialing criteria and is focused on the safety and quality-of-care given to Enrollees.

The following types of Dentists in Our networks include:

- General Dentists, Endodontists, Oral Surgeons, Orthodontists, Pediatric Dentists

Our recruitment efforts are open to all Dentists interested in joining Our networks, and who agree to Our contracting terms and meet credentialing and recurring re-credentialing requirements. Our Network Development team’s outreach efforts include various forms of continuous recruitment approaches, including, but not

1 limited to, Our [deltadentalins.com](https://deltadentalins.com) website, field research, mailers, cold calls,  
2 contracted Dentist referrals, Enrollee communications, and onsite visits made to  
3 provide interested Dentists with recruitment information.

4 Factors used to build Our networks include:

- 5 • Number and type of Dentists needed to service where Our Enrollees live  
6 and work
- 7 • Professional training, experience, and licensure
- 8 • Facilities and equipment
- 9 • Medical malpractice and other liability insurance
- 10 • Time and distance
- 11 • Negotiated reimbursement/contracted rates
- 12 • Network adequacy needs

13 To assure high quality care is delivered by Our Dentists, We validate credentials  
14 through a credentialing procedure which is applied to all Our network/contracted  
15 Dentists.

16 We conduct initial credentialing efforts to determine whether Dentists have the  
17 appropriate professional licensing and relevant training and experience to provide  
18 quality oral healthcare. Our initial credential application evaluates Dentists using  
19 the following criteria: state dental licensure, education and training, board  
20 certification (if applicable), verification of Systems Award Management (“SAM”),  
21 Office of Inspector General and OFAC, DEA and CDS certificate (if applicable),  
22 malpractice claims history, and NPI verification via the NPPES NPI registry.  
23 Ongoing monitoring efforts by Our credentialing unit works in coordination with  
24 Our Quality Program to identify any issues that may impact the safety of  
25 Enrollees and to take any actions as needed. The Quality Program informs this  
26 unit of Dentists with excessive Enrollee grievances and potential quality issue  
27 scores.

28 We recredential all contracted Dentists within thirty-six (36) months of their initial  
29 credentialing or their last credentialing date, on a recurring basis.

### 30 **Dentist Access and Availability**

31 We adhere to Our Access and Availability policy standards for network adequacy  
32 that comply with West Virginia regulations. This is to monitor Our networks to  
33 make sure there are sufficient Dentists available to meet Enrollee needs.

34  
35 We recruit and manage Our networks in sufficient numbers to provide timely  
36 access to care and accessibility to Dentists. We endeavor to ensure dental office  
37 locations provide dental care within a reasonable proximity of the personal  
38 residences of Enrollees and are so located as to not result in unreasonable  
39 barriers to accessibility.  
40

1 We have established access and availability standards and mechanisms to assure  
2 the accessibility of primary dental care and specialty dental care. Standards  
3 include, but are not limited to:

- 4 • Enrollee proximity to Dentists
- 5 • Reasonable access to preventive care appointments, regular and routine  
6 care appointments, and Urgent Care appointments
- 7 • Emergency Care access twenty-four (24) hours a day, seven (7) days week,  
8 including vacations and holidays
- 9 • Follow up on missed/broken appointments
- 10 • Patient recall systems
- 11 • In office wait times
- 12 • Answering and telephone services/systems

13 **Appendix II** of this Network Access Plan provides a breakdown of Our Dentists  
14 by West Virginia county.

15 **Network Adequacy Exception:**

16 Enrollees may obtain benefits from any Dentist including a Non-Delta Dental  
17 Dentist and We will treat the benefits as if the services were obtained from Delta  
18 Dental contracted Dentist when:

- 19 • a Delta Dental contracted Dentist is not within Reasonable Proximity;
- 20 • an Enrollee is diagnosed with a condition or disease that requires  
21 specialized health care services or medical services, and We:
  - 22 ○ do not have a Delta Dental contracted Dentist with the required  
23 specialty, training, or expertise; or
  - 24 ○ cannot provide Reasonable Access to a Delta Dental Dentist with the  
25 required specialty, training or expertise without Unreasonable Travel  
26 or Delay.

27 For the purpose of this section, certain words have the following meaning:

- 28 • **Reasonable Proximity:** The distance from an Enrollee's home to a general  
29 Dentist that is no more than 30 miles and the distance from an Enrollee's  
30 home to a dental specialist that is no more than 50 miles. If there are no  
31 licensed Dentists, including non-participating Delta Dental Dentists within  
32 such distance, however, Reasonable Proximity will be defined as the  
33 distance to next closest, licensed Dentist.  
34
- 35 • **Reasonable Access:** The ability of an enrollee to obtain general and/or  
36 specialist dental care, based on the average wait time for appointment  
37 availability within a given geographical region.  
38
- 39 • **Unreasonable Travel or Delay:** A situation where an Enrollee does not  
40 have a general Dentist or specialist within Reasonable Proximity or does  
41 not have Reasonable Access to such Dentist(s).

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To receive the in-network benefit level, the Enrollee or Non-Delta Dental Dentist must contact Our Customer Service Center at 800-422-4234 to request authorization to obtain services from either a Delta Dental contracted Dentist (e.g., PPO Dentist, Premier Dentist) or a Non-Delta Dental Dentist, and We will:

- Upon receipt of a claim form:
  - Pay the Delta Dental contracted Dentist the agreed to contracted fees minus any Enrollee liability
  - Pay the Non-Delta Dental Dentist their submitted fee (or any otherwise negotiated fee between the Non-Delta Dental Dentist and Us) minus any Enrollee liability, or
  - Reimburse the Enrollee up to the Non-Delta Dental Dentist’s submitted fee minus any Enrollee liability
  
- Determine the Enrollee financial responsibility taking into consideration any coinsurance and other cost-sharing amounts including, but not limited to, annual maximums and deductibles calculated by using the in-network benefit level based on the Maximum Allowance for Our in-network Dentists.
  
- Calculate the Enrollee plan accumulators based on the in-network Dentist PPO Maximum Allowance. The remainder of the Dentist’s submitted fee paid by Us will not be included in any of the Enrollees’ plan accumulator(s).

**Monitoring and Assuring Network Sufficiency**

We have established a Quality Program (“Program”) to advance dental health and access through exceptional care, benefits, service, and professional support.

The purpose of the Quality Program is to:

- Optimize the dental health and well-being of Our Enrollees
- Continuously monitor and improve quality in administering the networks and support services

Our Program goals include quality outcome anchors to deliver quality care and services that are:

- Effective to provide Enrollees with the best treatment and care based on scientific knowledge and best practices of standard care
- Safe practices to avoid harm to Enrollees from the care intended to help them

- 1 • Efficient by providing affordable cost of care that is free from fraud, waste,  
2 and abuse
- 3 • Timely by reducing waits and delays for services
- 4 • Equitable to provide care and service that is easily accessible and does  
5 not vary in quality because of personal characteristics, gender, ethnicity,  
6 geographic location, or socio-economic status

7  
8 The Program also monitors and evaluates the quality and appropriateness of  
9 care/services delivered to Our Enrollees, objectively and systematically. In  
10 addition, the Program has mechanisms that continuously pursue opportunities for  
11 improvement and problem resolution. Monitoring consists of:

12  
13 **Enrollee Satisfaction Surveys:** We record and assess enrollee satisfaction  
14 survey results to build programs and action plans that address any issues  
15 raised.

16 **Dentist Satisfaction Surveys:** We assess and monitor Dentist satisfaction with  
17 Our delivery of services and to identify and pursue opportunities for  
18 improvement.

19 **Ongoing Monitoring:** The Quality Management Committee (QMC) monitors  
20 the Quality Program through quarterly reports that are reviewed by the QMC  
21 and Our Board of Directors.

22 **Annual Evaluation:** the QMC performs an annual formal evaluation of the  
23 Quality Program. These professional teams are responsible for the  
24 implementation, monitoring, and reporting on the quality improvement  
25 activities. Status and progress are tracked to goal reporting and delivered to  
26 the QMC on a quarterly basis.

## 27 **Quality Assurance**

28 We use a Quality Improvement Process to identify opportunities to improve both  
29 the quality of care and quality of service, continuity of care and access for all  
30 Enrollees. Quantitative and qualitative methods of data collection are helpful in  
31 quality improvement efforts. Examples of quantitative data include:

- 32  
33 • Finding the average number of procedures performed per office visit and  
34 calculating the frequencies of timely access to care
- 35 • Valuable information about patterns and relationships between systems.  
36 Examples in a dental setting include Enrollee satisfaction surveys and  
37 grievances and independent observations.

38  
39 Standards and measurements such as clinical guidelines, criteria, quality screens  
40 and other standards against which quality of care, access, and service are  
41 adopted and maintained. Our monitoring includes a variety of methods,  
42 including, but not limited to:

- 1 • Standards of dental practice, standards used to evaluate quality of care of  
2 Dentists, and standards incorporated into Our policies and procedures;
- 3 • Thresholds and targets derived from the standards/norms will be  
4 ○ Measurable, achievable, and consistent with national/community  
5 standards  
6 ○ Consistent with regulatory agencies and legal guidelines  
7 ○ Valuable to the assessment of quality and the potential improvement of  
8 quality for Our Enrollee population; and
- 9 • Communication of Our standards to Dentists via Our Dentist Handbook,  
10 notification mailings, online posts, and a Dentist blog

### 11 **Dentist Directory**

12 We maintain a Dentist directory on Our [deltadentalins.com](https://deltadentalins.com) website that supports  
13 Our dental products. The website includes a “*Find A Dentist*” feature where  
14 Enrollees are prompted to submit their location by address, city or ZIP code and  
15 select their plan’s network to view the Dentists available under their plan.

16  
17 The Dentist directory includes disclosure information indicating the most recent  
18 directory update and a statement indicating the information included in the  
19 directory is accurate to the best of Our knowledge as of a certain date and  
20 includes a telephone number to obtain the most current directory information as  
21 well as to report inaccurate Dentist information. The Dentist directory is updated  
22 every business day with updated listings appearing each week Tuesday through  
23 Saturday.

24 Requests for printed copies of the Dentist directory are fulfilled within five (5)  
25 business days of the request. Printed copies of the directory will also include a  
26 copy of this Network Access Plan. Our Customer Service Center handles requests  
27 for printed copies of the Dentist directory and Network Access plan.

28 We perform Dentist directory audits no less frequently than three (3) times a year  
29 by conducting a self-audit through a random sampling of 50% of the locations  
30 within the current directory at the time of the audit. Network Dentists are audited  
31 at least once (1) during each plan year. At least once every eighteen (18) months,  
32 all directory entries are subject to audits. We maintain a Dentist Directory policy  
33 that documents the audit process and maintains findings of all audits and  
34 information for no less than thirty-six (36) months. Audit results are available to  
35 the WV OIC upon request.

### 36 **Network Access Plan Standards**

#### 37 **Overview**

38 Enrollee plan documents, enrollment information, and Our website  
39 [deltadentalins.com](https://deltadentalins.com) include all the details for the chosen dental plan. Plan  
40 documents include an *Evidence of Coverage* for Enrollees covered under a group  
41 plan, or a *Combined Policy and Disclosure Form* for Enrollees who have

1 purchased individual coverage. Enrollees may also contact Our Customer Service  
2 Center at 800-422-4234 for additional dental plan information.

### 3 4 **Teledentistry**

5 We provide the same benefit for covered services whether Enrollees see a PPO  
6 Dentist or a Premier Dentist in a dental office setting or consult via Teledentistry.  
7 We do not use non-contracted Teledentistry Dentists to supplement Our  
8 networks.

### 9 **Referrals In Network and Out of Network**

10 Our plans are open-access plans which allows Enrollees to seek dental care and  
11 services from any Dentist at any time, including emergent-urgent and specialized  
12 care. Enrollees do not have to obtain a referral to receive benefits covered under  
13 the Enrollee's plan. However, We do recommend Enrollees obtain a Pre-  
14 Treatment Estimate for an estimate of allowable Benefits under their dental plan  
15 for the services proposed; however, it is not a guarantee of payment as requested  
16 services are subject to annual deductibles and maximums in addition to other  
17 limitations and exclusions outlined in the Enrollee's plan documents.

18  
19 Our ACA on-exchange and off-exchange plans require prior authorization for  
20 medical necessary orthodontic services for Our pediatric Enrollees under age 19.  
21 Enrollees may obtain prior authorization through their Dentist or by contacting  
22 Our Customer Service Center at 800-422-4234.

### 23 **Grievance and Appeals Procedure**

24 Enrollees are informed about complaint, grievance and appeal rights in enrollment  
25 materials, their plan documents, and Our [deltadentalins.com](https://deltadentalins.com) website. Enrollees  
26 may also contact Our Customer Service Center at 800-422-4234 for assistance.  
27 Enrollee plan documents include a process for Enrollees to express their concerns  
28 or complaints, and to request fair resolution that will correct perceived wrongs.  
29 The grievance and appeals process review and resolves Enrollee grievances and  
30 appeals in a manner that is timely, equitable and sensitive to the Enrollee's  
31 individual needs, including cultural, linguistic, and disability-related needs.

32  
33 We support the linguistic and cultural needs of Enrollees, as well as the needs of  
34 Enrollees with disabilities. We ensure Enrollees have access to, and can fully  
35 participate in, the complaint, grievance, and appeal process by aiding Enrollees  
36 with limited English proficiency or with a visual or other communicative  
37 impairment, regardless of their medical condition . Assistance can be provided in  
38 multiple ways by translating plan documents, complaint, grievance, and appeal  
39 procedures, forms, and responses to enrollees; access to interpreters; as well as  
40 telephone relay systems and other devices that aid disabled individuals.

### 41 **Choosing and Changing Dentists**

42 Enrollee plan documents include information about Our open-access fee-for-  
43 service plans, meaning that Enrollees may see any Dentist for covered services,



1 including services related to emergent-urgent and specialty care whether the  
2 Dentist is a PPO Dentist, Premier Dentist, or a Non-Delta Dental Dentist. Enrollees  
3 may also change their PPO Dentist or Premier Dentist at any time.

4  
5 To locate a PPO Dentist or Premier Dentist Enrollees may access Dentist  
6 participation information by visiting Our Dentist directory available through Our  
7 website at [deltadentalins.com](https://deltadentalins.com) and selecting the *Find A Dentist* feature or by  
8 contacting Our Customer Service Center at 800-422-4234. A disclosure in the  
9 Dentist directory informs Enrollees that it is updated every business day with  
10 updated listings appearing each week Tuesday through Saturday.

## 11 12 **Plan Features**

13 Enrollee plan documents contain information regarding the Enrollee's network  
14 options, plan benefits, any cost sharing features such as deductibles, annual  
15 maximums and waiting periods and limitations and exclusions applicable to their  
16 plan benefits. Any preventive care services offered are described in the  
17 Enrollee's plan documents (e.g., *Evidence of Coverage and Combined Policy and*  
18 *Disclosure Form*). Preventive dental services are not a mandated benefit in West  
19 Virginia. However, Our ACA related products include the required dental  
20 essential health benefit component which includes preventive dental care. Such  
21 preventive services are outlined in the plan documents.

22  
23 Our fee-for-service plans are supported by the following networks:

- 24 • The PPO Network
- 25 • The Premier Network

26 Delta Dental Dentists are reimbursed based on the PPO Maximum Allowance  
27 covered under their contract with Us. PPO Dentists have agreed to accept the  
28 PPO Maximum Allowance as payment in full for covered services. Claims are paid  
29 to PPO Dentists based on the PPO Maximum Allowance and the plan's benefit  
30 levels. Enrollees are encouraged to visit a PPO Dentist to reduce out-of-pocket  
31 costs.

32 A Premier Dentist is a contracted Dentist who has not agreed to accept the PPO  
33 Maximum Allowance as payment in full for covered services which in most cases  
34 is higher than the PPO Maximum Allowance. Claims are paid to Premier Dentists  
35 based on the Premier Maximum Allowance and the plan's benefit levels.

36 Under certain plan designs, regardless of whether an Enrollee receives services  
37 from a PPO Dentist or a Premier Dentist, claims are paid based only on the PPO  
38 Maximum Allowance and a Premier Dentist may bill the Enrollee for the difference  
39 between the PPO Maximum Allowance and the Premier Maximum Allowance. In  
40 such instances, the Enrollee's out-of-pocket expense will be higher than a visit to  
41 a PPO Dentist. Under other plan designs, claims for a Premier Dentist are paid  
42 based on the Premier Maximum Allowance. In these plans, the Enrollee's out-of-  
43 pocket expenses is their coinsurance amount.

1 When seeking services from a Premier Dentist, Enrollees are encouraged to verify  
2 their Dentist's in-network status by reviewing their plan documents or by  
3 contacting Our Customer Service Center at 800-422-4234.

4 Non-Delta Dental Dentist are not limited by PPO or Premier Maximum Allowances  
5 and may bill Enrollees their submitted fee. Enrollees are reimbursed for covered  
6 services provided by Non-Delta Dental Dentists based on the lesser of the  
7 Dentist's submitted fee, the PPO Maximum Allowance, or the Premier Maximum  
8 Allowance. Because these Dentists are not contracted, We cannot limit the  
9 amount charged to Enrollees. An Enrollee's out-of-pocket costs may be  
10 significantly higher when choosing a Non-Delta Dental Dentist. In this instance,  
11 the Enrollee's out-of-pocket expenses include the coinsurance amount, if any, and  
12 the difference between the Maximum Allowance and the Dentist's submitted fee  
13 subject to any coinsurance.

14 All services received from PPO, Premier or Non-Delta Dental Dentists are subject  
15 to Enrollee coinsurance, and any applicable deductibles or maximum benefit  
16 limits, limitations or exclusions, or any charges for services not covered by the  
17 Enrollee's plan.

18 Under any plan option, if there is no PPO or Premier Dentist available, in  
19 accordance with *Our Network Adequacy Exception*, We will treat the services as  
20 in-network and Enrollees will not be subject to balance billing. However, services  
21 may be subject to coinsurance and other terms of their plan documents.

## 22 **Emergent/Urgent Care**

23  
24 Plan documents inform Enrollees they may seek Emergent/Urgent treatment from  
25 a Dentist other than a PPO or Premier Dentist with no referral. Benefits provided  
26 for Emergent/Urgent Care provided by a non-Delta Dental Dentist are subject to  
27 the Enrollee's coinsurance amount, if applicable, and other cost-sharing terms of  
28 their plan. Enrollees seeking emergent-urgent care should consult their Dentist or  
29 contact Our Customer Service Center at 800-422-4234 for assistance in locating  
30 a Dentist.

31 See also *Our Network Adequacy Exception* section.

## 32 **Specialty Care**

33 Enrollee plan documents explain that Our Delta Dental PPO plans are considered  
34 open-access plans offering Enrollees a free choice of Dentist for all services,  
35 including specialty services. Enrollees do not have to obtain a referral for  
36 specialty care. Enrollees seeking specialty care should consult their Dentist or  
37 contact Our Customer Service Center at 800-422-4234 for assistance in locating  
38 a specialty care Dentist.

39  
40 Under Our ACA on-exchange and off-exchange plans, orthodontic treatment is a  
41 benefit for Enrollees under 19 years of age only when medically necessary. To  
42 obtain prior authorization for medically necessary pediatric orthodontic care,

1 Enrollees should contact their Dentist or Our Customer Service Center at 800-  
2 422-4234.

3 When necessary, and as detailed under the *Network Adequacy/Access Exception*  
4 section, We will treat specialty care from Non-Delta Dental Dentists as if the  
5 service was obtained from a PPO Dentist or Premier Dentist subject to  
6 coinsurance and other cost-sharing terms of the Enrollee's plan.

### 7 **Continuity of Care Plan**

8 The Quality Program outlines Our approach to the continuity of care that Our  
9 Enrollees receive. The Program utilizes routine dental record reviews, potential  
10 quality referrals, potential quality issue scoring, grievance reviews, medical  
11 necessity reviews, and Enrollee satisfaction surveys to measure continuity of care.  
12 The Program tracks and analyzes this information to identify opportunities for  
13 improvement.

### 14 **Enrollee Contract/Policy Termination**

15 Our contracts with PPO Dentists and Premier Dentists require a seamless  
16 transition in the event the Enrollee's group contract or individual policy ends.  
17 Our Dentists agree to continue in-process dental services to Enrollees for a  
18 limited time following termination for dental treatment initiated while  
19 coverage is still in place.  
20

### 21 **Dentist Termination**

22 In the event a PPO Dentist or Premier Dentist contract terminates, We will  
23 assist Enrollees in selecting a new Dentist. Our online Dentist directory is  
24 updated with the termination information in a timely fashion, and Our Dentists  
25 have contractually agreed to notify all Enrollees of their termination for a  
26 period of up to one (1) year. Our Customer Service Center at 800-422- 4234  
27 acts as resource for informing Enrollees about Dentist participation and will  
28 assist the Enrollee with locating a new PPO Dentist and/or Premier Dentist.  
29

30  
31 If, for any reason, the PPO Dentist or Premier Dentist is unable to complete  
32 treatment, We will make reasonable and appropriate provisions for the  
33 completion of such dental treatment by another PPO Dentist or Premier  
34 Dentist or other contracted Dentist.  
35

### 36 **Insolvency/Inability to Continue Operations**

37 We have implemented and maintain a Business Continuity Global Standard  
38 policy that includes a disaster recovery plan designed to ensure the  
39 restoration of critical business operations to affected company locations and  
40 functions (e.g., information technology) within targeted timeframes in the  
41 event of Our inability to continue operations. Should such an event occur, We  
42 will provide messaging to Enrollees and Dentists about continued access to  
43 care though Our Customer Service Center and any other communication  
44 means available during the business disruption event.

1  
2 As a licensed West Virginia Dental Service Organization, DDWV is a member  
3 of the West Virginia Life and Health Insurance Guaranty Association  
4 (“Guaranty Association”). The purpose of this association is to assure that  
5 Enrollees will be protected, within limits, in the unlikely event that We become  
6 financially unable to meet Our obligations. If this should happen, the Guaranty  
7 Association’s fund will assess other West Virginia member insurance  
8 companies for monies to pay Enrollee claims subject to the Guaranty  
9 Associations terms and, in certain instances, keep coverage in force.

10  
11 **Enrollees with Special communication needs**

12 We recognize the cultural, racial, and ethnic diversity of Our Enrollees. Since a  
13 diverse population may also have different language needs, vital documents and  
14 significant communications are translated into non-English languages to facilitate  
15 communication regardless of the Enrollee’s medical condition whether serious,  
16 chronic, or complex to facilitate the following:

- 17 • Communicate their dental needs to Dentists using face-to face interpretative  
18 services (e.g., sign language, large print, audio, and accessible electronic  
19 formats)
- 20 • Understand plan documents and Enrollee communications by providing free  
21 documentation translation services, including:
  - 22 ○ Our [deltadentalins.com](http://deltadentalins.com) web portal displays multiple links to  
23 Language Assistance Program (“LAP”) information.
  - 24 ○ We provide a LAP notice in multiple languages in all plan documents  
25 and on Our website
  - 26 ○ Our *Find a Dentist* website portal at [deltadentalins.com](http://deltadentalins.com) includes a  
27 convenient link to the LAP notice and is available in multiple  
28 languages
- 29 • Enhance Dentist-chair LAP experiences by PPO Dentists or Premier Dentists  
30 who have self-reported they or their staff speak languages other than  
31 English and can assist with language assistance. Self-reported language  
32 information is displayed on the *Find a Dentist* on-line directory available at  
33 [deltadentalins.com](http://deltadentalins.com)

34  
35 Our language assistance program (“LAP”) notice is attached to Enrollee plan  
36 documents and is available online at [deltadentalins.com](http://deltadentalins.com) landing page and  
37 conveniently located on our *Find a Dentist* online dentist directory portal page.

38 Additionally, the [deltadentalins.com](http://deltadentalins.com) landing page includes a disclosure under  
39 *About Delta Dental - Language Assistance* that provides Enrollees with a listing of  
40 available LAP services. Language assistance interpretive services are also  
41 available for documents distributed to Enrollees, for Enrollee calls to Our  
42 Customer Service Center at 800=422-3442, and during visits to dental offices.

1 We also provide free aids and services to people with disabilities to communicate  
2 effectively with Us, such as qualified sign language interpreters and written  
3 information in other formats ( e.g., sign language, large print, audio, and  
4 accessible electronic formats).

5 We aim to foster cultural competency among Our Dentists by promoting effective  
6 Dentist/Enrollee communications. We create educational materials for Dentists  
7 and incorporate these into Our Dentist training presentations.

8 Our Dentist directory includes language spoken by Our Dentists or their staff in  
9 the dental office. Because We acknowledge the importance of communication  
10 between the Enrollee and Dentist, Dentists are asked to self-report languages  
11 spoken in the office; however, We do not certify the Dentist's proficiency in  
12 reported languages. Written notification of changes to Dentist office languages  
13 are updated and published on Our online Dentist directory. Updates are made  
14 Monday through Friday and published Tuesday through Saturday.

## 15 **Enrollee Satisfaction**

16 We regularly assess Enrollee satisfaction with the plan, Our Dentists, benefits, and  
17 plan operations. We send satisfaction surveys to randomly selected Enrollees on a  
18 quarterly basis and record and assess the results to build programs and action  
19 plans to address any identified issues. To preserve confidentiality, individual  
20 Enrollees are not identified in any Enrollee satisfaction report.

21 We assess Enrollee satisfaction in the following categories:

- 22 • The quality of care received
- 23 • The information the dental office gave the Enrollee concerning needed  
24 treatment and its cost
- 25 • Appointment availability at the dental office
- 26 • Office wait-times
- 27 • The appearance, cleanliness, and maintenance of the dental office
- 28 • Wheelchair access or other needed accommodations
- 29 • The current Network Dentist, overall
- 30 • The range of dental benefits available to the Enrollee
- 31 • Service from Our Customer Service Center
- 32 • Printed Enrollee materials furnished by Us
- 33 • The choice of Dentists available to the Enrollee

## 34 **Network Access Plan Disclosures**

35  
36 We disclose to Enrollees, through enrollment materials, Our website  
37 [deltadentalins.com](https://deltadentalins.com), Enrollee communications, and plan documents (*Evidence of*  
38 *Coverage* for Enrollees covered under a group plan, or *Combined Policy and*  
39 *Disclosure Form* for Enrollees who purchased individual coverage), and by  
40 contacting Our Customer Service Center at 800-422-4234 of the following plan  
41 features:

- 1 • Grievance and appeals procedures
- 2 • Procedures for providing and approving emergency and non-emergency
- 3 care
- 4 • Process for choosing and changing network Dentists
- 5 • Process to address the needs, including access and availability of services,
- 6 of covered persons with limited English proficiency and illiteracy, with
- 7 diverse cultural and ethnic backgrounds, and with physical or mental
- 8 disabilities
- 9 • Documented process to identify the potential communication needs of
- 10 special populations via Our Language Assistance Program (LAP) notice
- 11 provided upon enrollment and on an
- 12 annual basis

### 13 **Definitions:**

14 **Delta Dental PPO Dentist (“PPO Dentist”):** A PPO Dentist agrees to accept the  
15 PPO Maximum Allowance as payment in full for covered benefits provided.  
16 Enrollees enjoy the lowest out-of-pocket costs when obtaining treatment from a  
17 PPO Dentist.

18 **Delta Dental Premier Dentist (“Premier Dentist”):** a Dentist who has agreed to  
19 accept the Premier Maximum Allowance as payment in full for covered benefits..

20 **Dentist:** a duly licensed Dentist legally entitled to practice dentistry at the time  
21 and in the state or jurisdiction in which services are performed.

22 **Emergent/Urgent Care:** dental services immediately required for alleviation of  
23 severe pain, swelling or bleeding, or immediately required to avoid placing  
24 Enrollees in serious jeopardy. Emergent/Urgent dental care is limited to palliative  
25 treatment for the elimination of dental pain.

26 **Enrollee:** an individual eligible to receive benefits under a group plan or individual  
27 policy.

28 **Non-Delta Dental Dentist or Non-participating Dentist (“Non-Delta Dental**  
29 **Dentist”):** a Dentist who has not signed a contract with Us to provide benefits as  
30 a contracted PPO Dentist or Premier Dentist or is not contractually bound to  
31 abide by Our administrative guidelines. These Dentists may balance bill up to  
32 their submitted fee, unless a negotiated fee has been agreed to by the Non-Delta  
33 Dental Dentist and Us.

34 **PPO Maximum Allowance:** the maximum fee for a covered service payable by Us  
35 to a PPO Dentist.

36 **Premier Maximum Allowance:** the maximum fee for a covered service payable  
37 by Us to a Premier Dentist. .

38 **Pre-Treatment Estimate:** an estimation of the allowable benefits for the services  
39 proposed, it is not a guarantee of payment.

1       **Teledentistry:** the delivery of dental services through telehealth or  
2       telecommunications that may include the use of real-time encounter; live video  
3       (synchronous) or information stored and forwarded for subsequent review  
4       (asynchronous)

5

6       **Appendix I – Online Dentist Directory Screenshots**

7       **Appendix II – Dentists by West Virginia County**

8               **PPO Network - Dentists by West Virginia County**

9               **Premier Network - Dentists by West Virginia County**

10



# Appendix I - Online Dentist Directory Screenshots

[Back to search results](#)

## Robert Hamrick

W. Va. Code 33-55-4 (b)(1)(A) Name

General Dentist

W. Va. Code 33-55-4 (b)(1)(D) Specialty, if applicable

### Networks [About these networks](#)

W. Va. Code 33-55-4 (a)(5)(A) Name of Network  
Plan

Delta Dental PPO, Delta Dental Premier

Accepting New Patients

W. Va. Code 33-55-4 (b)(1)(I) Whether accepting new patients

## Dentist Info

### Dentist speaks

English

W. Va. Code 33-55-4 (b)(1)(H) Languages spoken other than English, if applicable

### Education

Tufts University School of Dental Medicine, 06/1987

### Gender

Male

W. Va. Code 33-55-4 (b)(1)(B) Gender

### Licensing

Provider NPI: 1871662155

License: 2961, WV

### Specialized care

Treats children: Yes

Treats adults with cognitive disabilities: Yes

Treats children with cognitive disabilities: Yes

Inaccurate directory information?

[Let us know](#)

W. Va. Code 33-55-4 (5)(B) electronic link for inaccurate information

Feedback







# Office Info

0.1 mi [Get directions](#)

[R Augustus Hamrick II DMD](#)

1021 Quarrier St Ste 313  
Charleston, WV, 25301-2313

[\(304\) 343-1143](#)

Fax: (304) 352-1143

## Office hours

Mon: 08:00 AM - 04:00 PM  
 Tue: 08:00 AM - 04:00 PM  
 Wed: 08:00 AM - 04:00 PM  
 Thurs: 08:00 AM - 04:00 PM  
 Fri: 08:00 AM - 12:00 PM  
 Sat: Closed  
 Sun: Closed

## Office access

Free Parking: No  
 Wheelchair access: No  
 Public transit access: No  
 Network access: No

## Languages at this office

English

W. Va. Code 33-55-4(b)(1)

(E) Medical group affiliations, if applicable.

(F) Facility affiliations, if applicable

(G) Participating facility affiliations, if applicable

W. Va. Code 33-55-4(b)(1)(C) Participating office location(s)

W. Va. Code 33-55-4(d)(1)(A)(ii) Contact information

W. Va. Code 33-55-4(c)(1)(C) Languages spoken other than English by clinical staff, if applicable

Feedback

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**Need help?**    [Timely Access to Care \(CA\)](#)    [Legal notices](#)    [Language assistance](#)  
**844.847.9516**    [MD DeltaCare Referral Policy](#)    [Privacy](#)    [Contact us](#)    [WV Network Access Plans](#)

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Last Updated 10-14-2022.© Delta Dental.    [W. Va. Code 33-55-4\(a\)\(2\)](#)

The information on this page is accurate to the best of Our knowledge as of 10-14-2022. Please call 844.847.9516 to obtain the most current Dentist directory information and a copy of the WV Access Plan.

[W. Va. Code 33-55-4\(a\)\(6\)](#)

Directory information is gathered from information received from Our Dentist network credentialing data and is updated each business day with updates appearing Tuesday through Saturday.

[W. Va. Code 33-55-4\(a\)\(5\)\(B\)](#)

If You find that any of the information displayed in Our Dentist directory is inaccurate, please click on “Contact Us” to email Us or contact Our Customer Service Center at 844.847.9516. If You have questions or need current Dentist directory information, You may contact Our Customer Service Center.

[W. Va. Code 33-55-4\(a\)\(4\)\(A\)](#)

There are many factors We use to build Our networks, including the number and type of Dentists needed to service where Our Enrollees live and work; time and distance; professional licensure; training and experience; insurance; facilities and equipment; and network adequacy needs. Additional recruiting information is available via the WV Network Access Plans link above.

[W. Va. Legislative Rule 114-100.7.5.a](#)

[W. Va. Code 33-55-4\(a\)\(4\)\(D\)](#)

Note: Some dental services may require a referral or authorization prior to receiving the service. Enrollees should contact Our Customer Service Center for assistance or consult their plan documents.

PPO Dentist reimbursement is calculated based on the PPO Maximum Allowance.

Premier Dentist reimbursement is calculated based on the Premier Maximum Allowance.

#### West Virginia Network Access Plan

In accordance with West Virginia’s Health Benefit Plan Network Access and Adequacy Act, We created Access Plans for Our Dentist networks. These Access Plans describe Our strategies, and policies and procedures to create, maintain and administer adequate Dentist networks. You can access the Access Plans via the WV Network Access Plans link provided above. Dentist participation and requests for hard copies may be made by contacting Our Customer Service Center at 844.847.9516.

[W. Va. Legislative Rule 114-100.7.2.4](#)

Disclaimer: Please be advised that the links on this page contain information and material required by state and federal law that may not apply to ERS GBP.

This website is the home of Delta Dental of California; Delta Dental Insurance Company; Delta Dental of Pennsylvania; Delta Dental of New York, Inc.; Delta Dental of the District of Columbia; Delta Dental of Delaware, Inc.; Delta Dental of West Virginia, Inc. and their affiliated companies. For other Delta Dental Plans Association member companies, visit the Delta Dental Plans Association website.

Please note: Services from dental school clinics may be provided by students of dentistry or instructors who are not licensed by the dental board of your state. All enrollees are entitled to full and equal access to covered services, including enrollees with disabilities as required under the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973.

DeltaCare® USA is underwritten in these states by these entities: AL — Alpha Dental of Alabama, Inc.; AZ — Alpha Dental of Arizona, Inc.; CA — Delta Dental of California; AR, CO, IA, MA, ME, MI, MN, NC, ND, NE, NH, OK, OR, RI, SC, SD, VA, VT, WA, WI, WY — Dentegra Insurance Company; AK, CT, DC, DE, FL, GA, KS, LA, MS, MT, TN, WV — Delta Dental Insurance Company; HI, ID, IL, IN, KY, MD, MO, NJ, OH, TX — Alpha Dental Programs, Inc.; NV — Alpha Dental of Nevada, Inc.; UT — Alpha Dental of Utah, Inc.; NM — Alpha Dental of New Mexico, Inc.; NY — Delta Dental of New York, Inc.; PA — Delta Dental of Pennsylvania. Delta Dental Insurance Company acts as the DeltaCare USA administrator in all these states. These companies are financially responsible for their own products.

**Appendix II - Dentists by West Virginia County**  
**PPO Network**

County	General Dentistry	Pediatric General Dentistry	Endodontics	Periodontics	Oral Surgery	Orthodontics	Other
Barbour	Yes						
Berkeley	Yes	Yes			Yes		
Boone	Yes						
Braxton	Yes						
Brooke	Yes					Yes	
Cabell	Yes	Yes			Yes	Yes	
Calhoun	Yes						
Clay	Yes						
Doddridge	Yes						
Fayette	Yes						
Gilmer	Yes						
Grant	Yes						
Greenbrier	Yes	Yes					
Hampshire	Yes					Yes	
Hancock	Yes					Yes	
Hardy	Yes						
Harrison	Yes	Yes				Yes	
Jackson	Yes				Yes	Yes	
Jefferson	Yes						
Kanawha	Yes	Yes			Yes	Yes	
Lewis	Yes						
Lincoln	Yes						
Logan	Yes						
Marion	Yes					Yes	
Marshall	Yes				Yes		
Mason	Yes						
McDowell	Yes						
Mercer	Yes				Yes		
Mineral	Yes						
Mingo	Yes						
Monongalia	Yes	Yes	Yes			Yes	
Monroe							
Morgan							
Nicholas	Yes				Yes		
Ohio	Yes	Yes			Yes	Yes	

County	General Dentistry	Pediatric General Dentistry	Endodontics	Periodontics	Oral Surgery	Orthodontics	Other
Pendleton	Yes						
Pleasants							
Pocahontas	Yes						
Preston	Yes						
Putnam	Yes	Yes			Yes		
Raleigh	Yes	Yes	Yes		Yes		
Randolph	Yes					Yes	
Ritchie							
Roane							
Summers	Yes						
Taylor	Yes						
Tucker	Yes						
Tyler							
Upshur	Yes					Yes	
Wayne	Yes						
Webster							
Wetzel	Yes						
Wirt	Yes						
Wood	Yes				Yes	Yes	
Wyoming	Yes						

## Appendix II - Dentists by West Virginia County

### Premier Network

County	General Dentistry	Pediatric General Dentistry	Endodontics	Periodontics	Oral Surgery	Orthodontics	Other
Barbour	Yes						
Berkeley	Yes	Yes			Yes		
Boone	Yes						
Braxton	Yes						
Brooke	Yes					Yes	
Cabell	Yes	Yes			Yes	Yes	
Calhoun	Yes						
Clay	Yes						
Doddridge	Yes						
Fayette	Yes						
Gilmer	Yes						
Grant	Yes						
Greenbrier	Yes	Yes					
Hampshire	Yes					Yes	
Hancock	Yes					Yes	
Hardy	Yes						
Harrison	Yes	Yes				Yes	
Jackson	Yes				Yes	Yes	
Jefferson	Yes						
Kanawha	Yes	Yes			Yes	Yes	
Lewis	Yes						
Lincoln	Yes						
Logan	Yes						
Marion	Yes					Yes	
Marshall	Yes				Yes		
Mason	Yes						
McDowell	Yes						
Mercer	Yes				Yes		
Mineral	Yes						
Mingo	Yes						
Monongalia	Yes	Yes	Yes			Yes	
Monroe							
Morgan	Yes						
Nicholas	Yes				Yes		
Ohio	Yes	Yes			Yes	Yes	
Pendleton	Yes						
Pleasants	Yes						

County	General Dentistry	Pediatric General Dentistry	Endodontics	Periodontics	Oral Surgery	Orthodontics	Other
Pocahontas	Yes						
Preston	Yes						
Putnam	Yes	Yes			Yes		
Raleigh	Yes	Yes	Yes		Yes		
Randolph	Yes					Yes	
Ritchie	Yes						
Roane							
Summers	Yes						
Taylor	Yes						
Tucker	Yes						
Tyler							
Upshur	Yes					Yes	
Wayne	Yes						
Webster							
Wetzel	Yes						
Wirt	Yes						
Wood	Yes				Yes	Yes	
Wyoming	Yes						