

**HEALTH SERVICE SYSTEM
Vendor Report Card**

Pacific Union Dental

Vendor Presentation Date: August 14, 2008
Period Evaluated: July 1, 2006 – June 30, 2008

COMPOSITE RATINGS

Criterion	Composite Rating	Rating Standards
<i>A. Quality and Value</i>		
1. Overall NCQA Rating	N/A	1. "Denied" or not accredited 2. "Provisional" 3. "Accredited" 4. "Commendable" 5. "Excellent"
2. Quality of written communication materials	3.8	1 - Consistently incomplete, confusing and unattractive. 2 - Significant problems in quality, but usually of a good quality of content, clarity, attractiveness and accessibility to diverse members. 3 - Rarely compelling, and some unevenness in quality, but usually of a good quality of content, clarity, attractiveness and accessibility to diverse members. 4 - Sometimes compelling, but always of a high quality of content, clarity, attractiveness and accessibility to diverse members. 5 - Consistently compelling; outstanding content, clarity, attractiveness and accessibility to diverse members.
3. Quality of website	3.4	Same as item 2 above.
4. Members' view of access to health care services	3.3	1 - Consistently long waits to see providers; most providers not accepting new patients; extremely difficult to access specialists. 2 - Often long waits to see providers, with some exceptions; many providers not accepting new patients; some difficulty in accessing specialists. 3 - Occasional long waits to see providers, but most waits are reasonable; some providers not accepting new patients; occasional difficulty accessing specialists. 4 - Almost all waits to see providers are reasonable, with infrequent exceptions; most providers are accepting new patients; infrequent difficulty accessing specialists. 5 - Waits to see providers are consistently short; rarely is a provider not accepting new patients; rarely any difficulty in accessing specialists.
5. Members' view of provider quality	4.5	Use any number from 1 to 5, where 1 is the worst provider quality and 5 is the best provider quality to rate the overall quality of the provider(s) accessed through the vendor's plan. Please include supporting comments for your rating.
6. Members' view of vendor's customer service	4.2	Use any number from 1 to 5, where 1 is the worst customer service and 5 is the best customer service to rate the overall quality of the

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		customer service received through the vendor's plan. Please include supporting comments for your rating.
7. Overall quality of service to members	3.3	Use any number from 1 to 5, where 1 is the worst quality of both care and service and 5 is the best quality of care and service to rate the overall quality of the care and service provided through the vendor's plan. Please include supporting comments for your rating.
8. Overall value delivered	3.4	Use any number from 1 to 5, where 1 is the worst ratio of cost to quality and 5 is the best ratio of cost to quality to rate the overall value provided by the vendor's plan. Please include supporting comments for your rating.
<i>B. Responsiveness to HSS Needs and Concerns</i>		
1. Attendance and level of participation at relevant Health Service Board meetings	4.8	Use any number from 1 to 5, where 1 is the worst level of attendance and participation and 5 is the best level of attendance and participation to rate the overall attendance and participation of the vendor's plan representative(s). Please include supporting comments for your rating.
2. Responsiveness and flexibility in interactions with Board	4.5	Use any number from 1 to 5, where 1 is the worst level of responsiveness and flexibility and 5 is the best level of responsiveness and flexibility to rate the overall responsiveness and flexibility of the vendor's plan representative(s). Please include supporting comments for your rating.
3. Responsiveness and flexibility in interactions with HSS Staff	2.8	Use any number from 1 to 5, where 1 is the worst level of responsiveness and flexibility and 5 is the best level of responsiveness and flexibility to rate the overall responsiveness and flexibility of the vendor's plan representative(s). Please include supporting comments for your rating.
<i>C. Contracting and Performance Guarantees</i>		
1. Written contract in place?	2.0	1 – Written contract executed and delivered more than 90 days after effective date. 2 – Written contract executed and delivered within 90 days after effective date. 3 – Written contract executed and delivered within 60 days after effective date. 4 – Written contract executed and delivered within 30 days after effective date. 5 – Written contract executed and delivered prior to effective date.

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2. Adherence to City's social policy legislation	5.0	1 – Contract omits more than two requested provisions. 2 – Contract omits two requested provisions. 3 – Contract omits one requested provision. 4 – Contract includes all requested provision with minor modifications. 5 – Contract includes all requested provisions without modification.
3. Inclusion of performance guarantees	N/A	1 – Contract contains no performance guarantees. 2 – Contract contains performance guarantees, but none includes monetary penalties. 3 – Contract contains performance guarantees, but more than one does not include monetary penalties. 4 – Contract contains performance guarantees, but one does not include monetary penalties. 5 – Contract contains performance guarantees with monetary penalties attached to each guarantee.
4. Comprehensiveness and sufficiency of performance guarantees	N/A	Use any number from 1 to 5, where 1 is the worst level of comprehensiveness (i.e., omits major components of vendor's contractual performance requirements) and 5 is the best level of comprehensiveness (i.e., includes all major components of vendor's contractual performance requirements).
5. Adherence to performance guarantees	N/A	1 – Failed to reach three or more of the guaranteed performance levels specified below. 2 – Failed to reach two of the guaranteed performance levels specified below. 3 – Failed to reach one of the guaranteed performance levels specified below. 4 – Exceeded or reached all guaranteed performance levels specified below. 5 – Exceeded all guaranteed performance levels specified below.
6. Prompt reporting and payment for breaches of performance guarantees	N/A	1 – Vendor failed to report performance or pay any applicable penalties within 30 days of applicable due dates under contract. 2 – Vendor reported performance and paid any applicable penalties within 30 days of applicable due dates under contract. 3 – Vendor reported performance and paid any applicable penalties within 15 days of applicable due dates under contract. 4 – Vendor reported performance and paid any applicable penalties within five days of applicable due dates under contract. 5 – Vendor reported performance and paid any applicable penalties on or prior to applicable due dates under contract.

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Rating Panel Participants (Individual Ratings and Comments Follow Below):

Vendor Self-Rating:	Jacqueline M. Cienfuegos, Account Manager National Accounts
HSS Operations Staff:	Jeffrey Hildebrant, Assistant Director
HSS Finance Staff:	Tess Navarro, CFO
Retiree Member:	Charles Mitchell
Active Member:	Gary Gentry
HSS Board Member:	Sharon Johnson, HSS Board Commissioner

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INDIVIDUAL PANELIST RATINGS AND COMMENTS

Criterion	Vendor's Self-Rating	HSS Operations Staff	HSS Finance Staff	Active Member	Active Member	Board Member	Overall Rating
<i>A. Quality and Value</i>							
1. Overall NCQA Rating	N/A						N/A
2. Quality of written communication materials	4.5 1 – We provide a customized benefit package of the plan and brochure for the City and County of San Francisco. 2 – We have one brochure for Actives and Retirees. 3 – Our Materials are easy to read and to the point. 4 – Member's receive ID cards with a welcome notice.	3	3 During the evaluation discussion, PUD was notified of the need to revise brochures to (a) emphasize that member's should require pre-treatment full information on procedures, plan coverage, out of pocket and all associated costs and (b) provider staff should focus on reviewing sample cases and files during onsite audits of dentists to assess compliance.	5 Slide show and written communication has been easier to decipher; visual quality has been improved.	3.5 Not always clear what is/isn't covered – a bit too dense/wordy sometimes. They could use some short bullet style publications/FAQ type materials.	3.5 The written material was easy to read and follow. However, there seems to be a glitch in providing patient with all information when there is an emergency.	3.8
3. Quality of website	5	1	3.5 PUD did not have a	4.5	3.5 Once one figures	3 The website was	3.4

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	We have a great website, it is user friendly and you can look up just about anything in regards to your plan. We have a great service called "eServices" where the administrator for the City and County of San Francisco can make real time updates, terminations and deletions. They can also see if a member is eligible for benefits and the effective date versus having to call PUD/United Healthcare. The administrator can also look up billing information and many other reports pertaining to the City and County. Member's can go to myuhcdental.com and view their claims, EOB's,	Vendor did not have a website available to our members for a very long time including the period under review.	website for many years. PUD established a website which our members find to be very useful. However, it still needs to be enhanced to have a HS "landing page" to ensure our members find only information that is specific to their plan.	Website is new; obviously better than not having a website. A little plain and generic. Better with time.	out how to get in, it is not terribly difficult – but login isn't that intuitive.	also quite helpful.	

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	print out an ID card for themselves, look up their dental plan information and also go in there and nominate a dentist of their choice. We are always working on improving our website and keeping it up to date. We have just added a treatment cost calculator, which produces a detailed view of benefit information and precise network cost for any specific procedure. This way the patient goes to the dentist knowing exactly how much they have to pay out of pocket for the work that is being done to them at the time of service.						

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4. Members' view of access to health care services				3 It is still a hidden crow. There seems to be a missing link between Providers and Dentist with member in between.	3.5 No comments.		3.3
5. Members' view of provider quality				4 After presentation, I feel that provider is making strides to improve member perception and quality.	5 They seem to cover anything that is allowable and not to limit providers.		4.5
6. Member's view of vendor's customer service				4.5 There are some customer service representatives that are better and more informed. I think the overall service will improve.	4 They are fairly responsive – even if they don't tell you what you want to hear.	4 No comments.	4.2

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7. Overall quality of service to members	4.5 Pacific Union Dental/United Healthcare provides comprehensive benefits at low member co-payments, if any at all. We provide access to dental facilities, 95% of all enrollees will have contracted general dentists available to them within a fifteen (15) mile radius, or within thirty minutes travel time of their residence or place of business. And if there is no dental office within a 50 mile radius then we will pay an out of network dentist and the member will only pay their same co-payment as they would an in-network provider. We also provide	2 Difficult to reach the vendor. Unclear who exactly is in charge.	3 Members receiving services report they were not fully informed of upgrades that result in additional out-of-pocket expenditures. Members report that dentists are not experienced. However, the vendor network is sizeable.	4 Very good. Improving with time and care.	4 No comments.	2.5 It appears there is a long wait for dentists to receive payment. There is a concern of hidden fees. Responsibility for patients' needs is minimal. The patient must be FULLY aware of their "covered" costs.	3.3

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	<p>emergency coverage of \$100.00. We have a dental panel that will see our patients right away, due to the fact that the City and County of San Francisco has a Direct Compensation plan with PUD. We have put together a dedicated PUD dental team to help members and administrators with any issues they may have in a timely manner. Considering the size of this group, we have not had many escalated service issues. We also took part in the City and County Wellness fair last year and made sure our booth was always staffed and available to respond</p>						

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	to all of the member's questions.						

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8. Overall value delivered	<p>5</p> <p>1 – With the well publicized of the high cost of benefits today, we gave the City and County of San Francisco a rate pass for two years from 7/1/08 through 6/30/2010.</p> <p>2 – We are very flexible in working with the City and County of San Francisco. We are willing to make any changes necessary to satisfy the members as well as the HSS staff of the City and County of San Francisco.</p> <p>3 – We are constantly recruiting new dental offices in the area and are willing to recruit any dentist that a</p>	2	<p>3</p> <p>Because members are not consistently being provided with full information on the procedures provided including costs, recommended upgrades, out of pocket expenses, and plan coverage the value delivered is not considered exceptional.</p>	<p>4</p> <p>Overall value is good and will improve with care and time.</p>	<p>4</p> <p>Claims seem to be processed fairly quickly (once you understand system; i.e. payment of tuition is not the service, so payment is at end of month).</p>	<p>2.5</p> <p>As above.</p>	3.4

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	<p>member requests to have on our panel list.</p> <p>4 – We do monthly visits to our dental offices to make sure they are up to code and in compliance.</p> <p>5 – Our HMO is unique, in that it is a Direct Compensation plan instead of a Capitated Plan. This means that we pay our dentists just like we would a PPO dentist. The dentist must see the patient in order to get paid. All other HMO's the dentist gets paid regardless if they see the patient or not. Therefore, our plan makes it easier for the member to get an appointment sooner.</p>						

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<i>B. Responsiveness to HSS Needs and Concerns</i>							
1. Attendance and level of participation at relevant Health Service Board meetings	4.5 We always try to have someone represent PUD/United Healthcare at the monthly board meetings. We try to make contact with members of the Board when appropriate.					5 I don't recall their attendance on a regular basis.	4.8
2. Responsiveness and flexibility in interactions with Board	4.5 PUD/United Healthcare representative have always been prepared to answer any questions that the Board presents.					4.5 They want to please the Board in any presentation. At the Vendor Report Card meeting; they aimed to please. That was my only interaction with them.	4.5
3. Responsiveness and flexibility in interactions with HSS Staff	4.5 PUD/United Healthcare works closely with the HSS staff to get the	2 Vendor has been unresponsive to calls and emails. Spends a lot of time	2 Although the assigned Billing Analyst resolves Finance issues				2.8

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	<p>most updated benefit materials to the members. We have also been flexible and worked together with HSS staff during the time of the migration with PUD and United Healthcare.</p>	<p>on the road at open enrollment events without access to voicemail and email.</p>	<p>timely and is responsive to Finance staff emails, questions and inquiries (we would give her a 4), the overall grade has been reduced due to the lack of responsiveness in other areas. Vendor is frequently unavailable for a week at a time and as a policy does not assign back up to certain aspects of her job including the contracts. This results in leaving ongoing projects on hold. Responses to calls and emails are often not timely.</p>				

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<i>C. Contracting and Performance Guarantees</i>							
1. Written contract in place?		2 Vendor was difficult to reach; unclear who was in charge.	2 Although improvements were made overall, vendor fails to provide timely contract renewals, is often not available during long portions of the contract renewal process and as a policy does not assign backup during these absences.				2
2. Adherence to City's social policy legislation		5 No comments.	5 No comments.				5
3. Inclusion of performance guarantees		N/A The vendor did not have any performance guarantees in effect during the period under review.	N/A PUD did not have performance guarantees during the period under review. However, beginning in FY 2008-09, PUD adopted a series of robust performance				N/A

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			guarantees similar to our fully-insured dental provider including penalties for non-performance.				
4. Comprehensiveness and sufficiency of performance guarantees	N/A The City and County of San Francisco does not have any performance guarantees with us.	N/A The vendor did not have any performance guarantees in effect during the period under review.	N/A				N/A
5. Adherence to performance guarantees	N/A	N/A	N/A				N/A
6. Prompt reporting and payment for breaches of performance guarantees	N/A	N/A	N/A				N/A

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ADDITIONAL COMMENTS OF INDIVIDUAL PANELISTS

Active Member Comments:

My hope is that the new Providers are not complacent with their acceptance reward of the new contract. Hopefully, they will stay fully staffed and promote genuine customer service. I think they will need to provide a better panel of dentists for us to choose from. I have actually been to the dentist in the program who were less than informed.

My statements are critical but will show evidence of certain areas that can be improved.

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ADDITIONAL COMMENTS OF FULL HEALTH SERVICE BOARD

