

Objectives, Indicators, Measures and Metrics

Payers Involvement with
Quality Measurement & Improvement



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Medicaid-CHIP State Dental Association

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Acknowledgements

Rob Compton, DDS
DentaQuest Institute

Congress Mandates Quality Assessment & Improvement

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- The Children's Health Insurance Plan Re-Authorization Act of 2009 (CHIPRA), **mandates that quality assessment programs be implemented to assess and improve the **quality of care for children** that receive **oral health care** under Medicaid and CHIP programs.**

4 Cornerstones of Value Driven Health Care

Introduced by the Bush Administration USDHHS Sec Leavitt

- Measure & Publish *Quality* Information
[In order] to make confident decisions about *health care providers and treatment options*, consumers need quality of care information
- Measure & Publish *Price* Information
[In order] to make confident decisions about their *health care providers and treatment options*, consumers need price information
- Promote *Quality & Efficiency* of Care
All parties should *participate in arrangements* that reward both those who offer and those who purchase high-quality, competitively-priced health care... including pay-for-performance methods for reimbursement
- Promote Interoperable *Health Information Technology*
[HIT] has the potential to create greater efficiency (improved costs) in health care delivery

Quality of Care

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- Quality of care is the degree to which health services for individuals and populations increase the likelihood of desired *health outcomes* and are consistent with *current professional knowledge*
- This prescript contains just two concepts: *measurement and knowledge*.

Medicare: A Strategy for Quality Assurance. IOM, 1990, p.21

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Problems in Quality

- “Quality problems are reflected today in the wide variation in the use of health care services, the underuse and overuse of some services, and the misuse of others.”
- *Evidence of Quality Problems*
 - Variation in services
 - Underuse of services
 - Overuse of services
 - Misuse of services
 - Disparities in quality

IOM Recommendations - 2001

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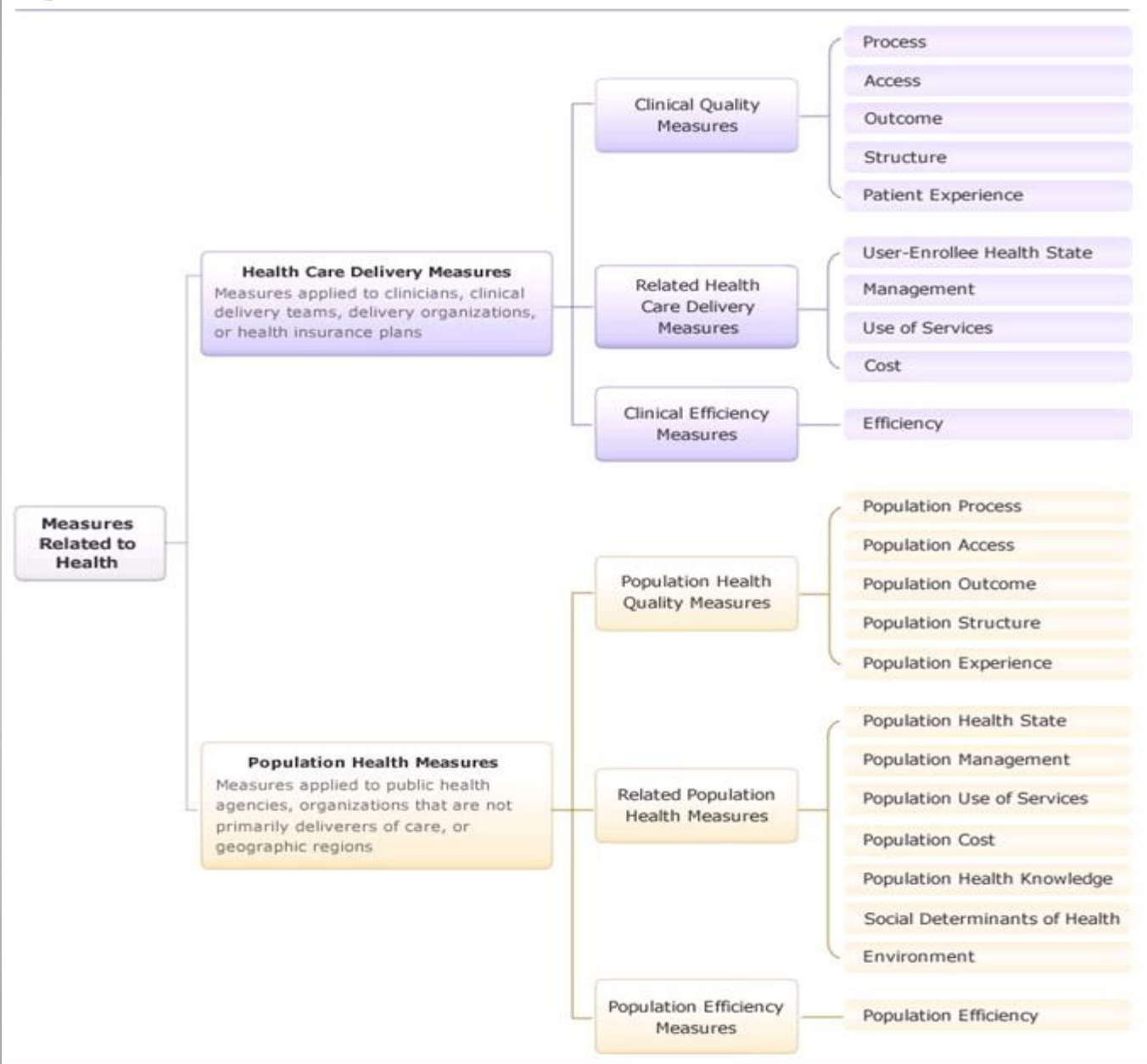
- **Evidence-based decision making.**
 - Patients should receive care based on the best available scientific knowledge.
 - ***Care should not vary illogically from clinician to clinician or from place to place.***

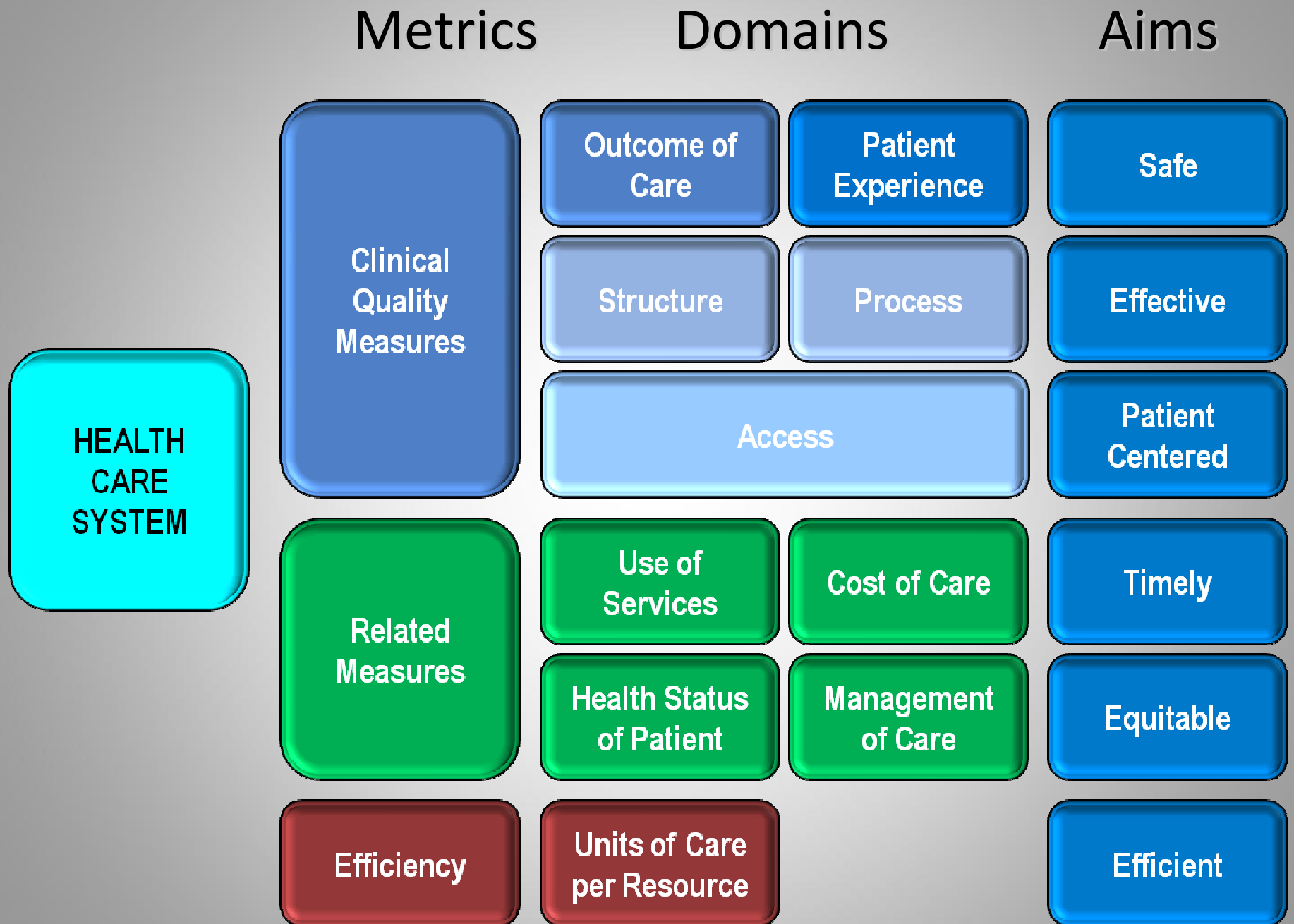
Crossing the Quality Chasm. Institute of Medicine 2001

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NQMC Domain Framework

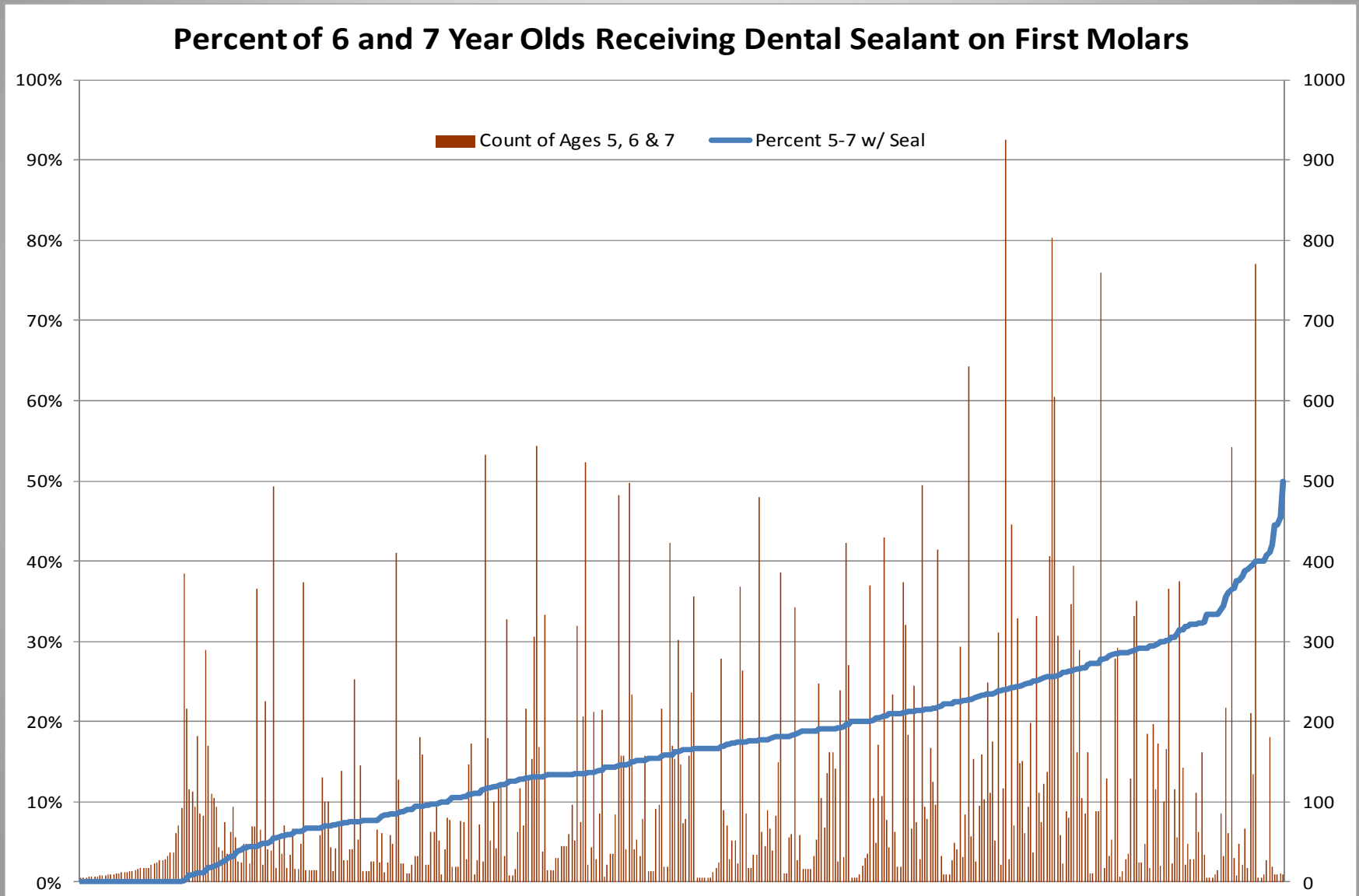




Clinical Quality – Process

- A **process of care is a health care-related activity** performed for, on behalf of, or by a patient
- Process measures are supported by **evidence** that the **clinical process**—that is the focus of the measure—has led to **improved outcomes**
- These measures are generally calculated using patients eligible for a particular service in the denominator, and the patients who either do or do not receive the service in the numerator

Example #1 - Variation in Provider Performance Dental Sealants



Example of a Process of Care Measure Program for Provider Performance Measurement



PreventistrySM
Sealant Program
Plan:

Preventistry Member Roster

Members Who May Benefit from Sealants

During the Period of

Age Measurement: Children Ages 6 and 7*
Member Must Turn 6 By: XXXXXX
Sealant Measurement: Tooth ID 3, 14, 19, 30

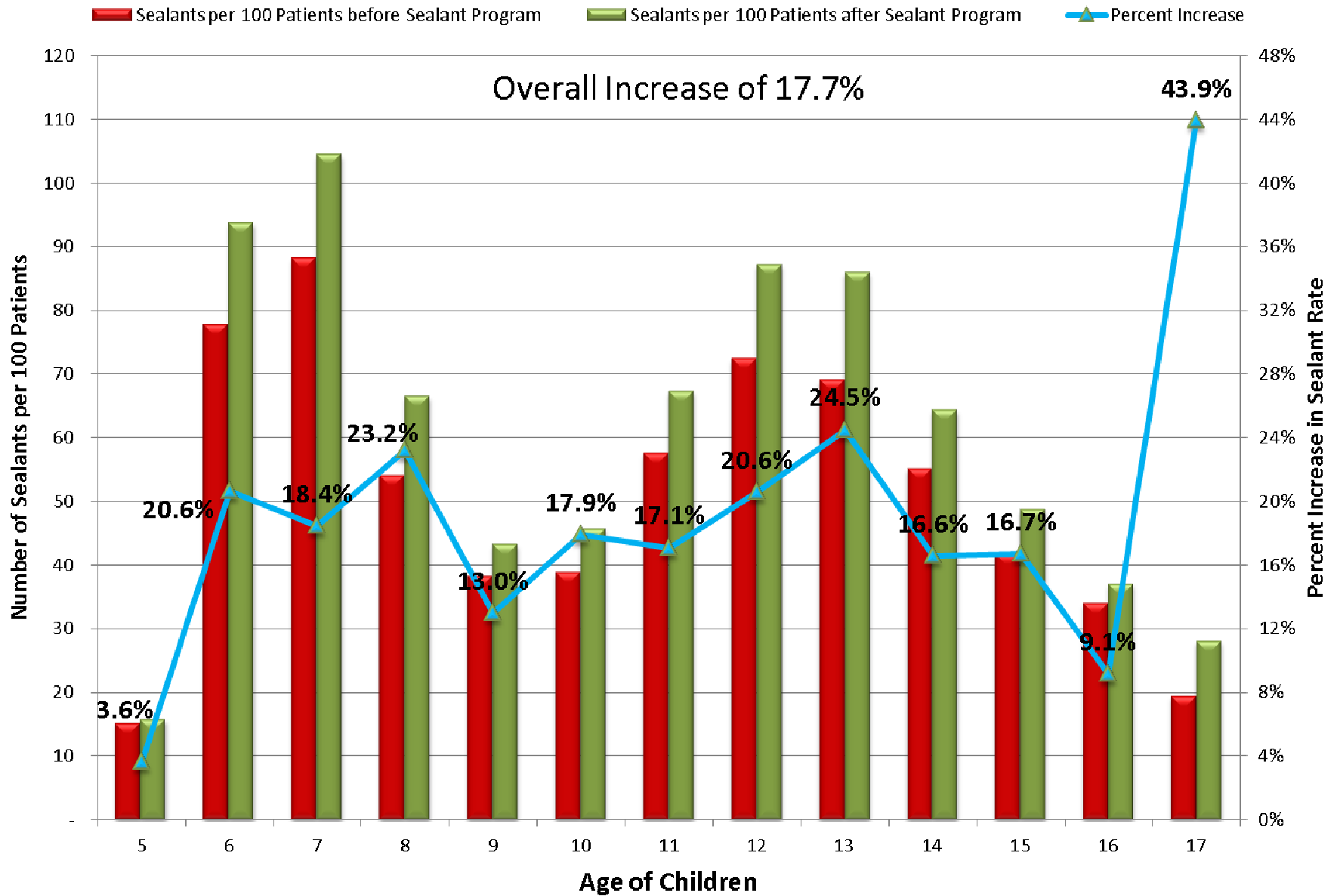
These members may benefit from having dental sealants placed on their first molars.

Member ID	Name	DOB	Potential Revenue
xxxxxxxx01	Child 1	xx/xx/20xx	\$ 100.00
xxxxxxxx02	Child 2	xx/xx/20xx	\$ 100.00
xxxxxxxx03	Child 3	xx/xx/20xx	\$ 100.00
xxxxxxxx04	Child 4	xx/xx/20xx	\$ 100.00
xxxxxxxx05	Child 5	xx/xx/20xx	\$ 100.00
xxxxxxxx06	Child 6	xx/xx/20xx	\$ 100.00
xxxxxxxx07	Child 7	xx/xx/20xx	\$ 100.00
xxxxxxxx08	Child 8	xx/xx/20xx	\$ 100.00
xxxxxxxx09	Child 9	xx/xx/20xx	\$ 100.00
xxxxxxxx10	Child 10	xx/xx/20xx	\$ 100.00
xxxxxxxx11	Child 11	xx/xx/20xx	\$ 100.00
xxxxxxxx12	Child 12	xx/xx/20xx	\$ 100.00
xxxxxxxx13	Child 13	xx/xx/20xx	\$ 100.00
xxxxxxxx14	Child 14	xx/xx/20xx	\$ 100.00
xxxxxxxx15	Child 15	xx/xx/20xx	\$ 100.00
xxxxxxxx16	Child 16	xx/xx/20xx	\$ 100.00
xxxxxxxx17	Child 17	xx/xx/20xx	\$ 100.00
xxxxxxxx18	Child 18	xx/xx/20xx	\$ 100.00
xxxxxxxx19	Child 19	xx/xx/20xx	\$ 100.00
xxxxxxxx20	Child 20	xx/xx/20xx	\$ 100.00
			\$ 2,000.00

If you have questions about your Preventistry Member Roster, please contact your DentaQuest Professional Relations representative at 800-516-0124.

* Patients with at least one dental sealant placed on their first molars (ages 6-7) or second molars (ages 12-13) are not included.

Impact of Preventistry Sealant Program on Sealant Placement Rates



PREVENTISTRY INCENTIVE RESULTS

FOR THE PERIOD JANUARY 1 THRU JUNE 30, 2012

TOPICAL FLUORIDE FOR HIGHER RISK CHILDREN

Number of Higher Risk Children	152
Number Treated	105
Percentage Treated	69.1%

BONUS CALCULATION

	Goal	Potential	Awarded
Level 1	45%	\$684.00	\$684.00
Level 2	65%	\$684.00	\$684.00
FLUORIDE BONUS		\$1,368.00	\$1,368.00

PERIO MAINTENANCE FOR ADULTS WITH PERIODONTAL DISEASE

Number of Adults with Perio Disease	20
Number Treated	14
Percentage Treated	70.0%

BONUS CALCULATION

	Goal	Potential	Awarded
Level 1	50%	\$200.00	\$200.00
Level 2	75%	\$200.00	\$0.00
PERIO BONUS		\$400.00	\$200.00

	Potential	Awarded
Total Bonus	\$1,768.00	\$1,568.00
Percent of Potential		88.7%

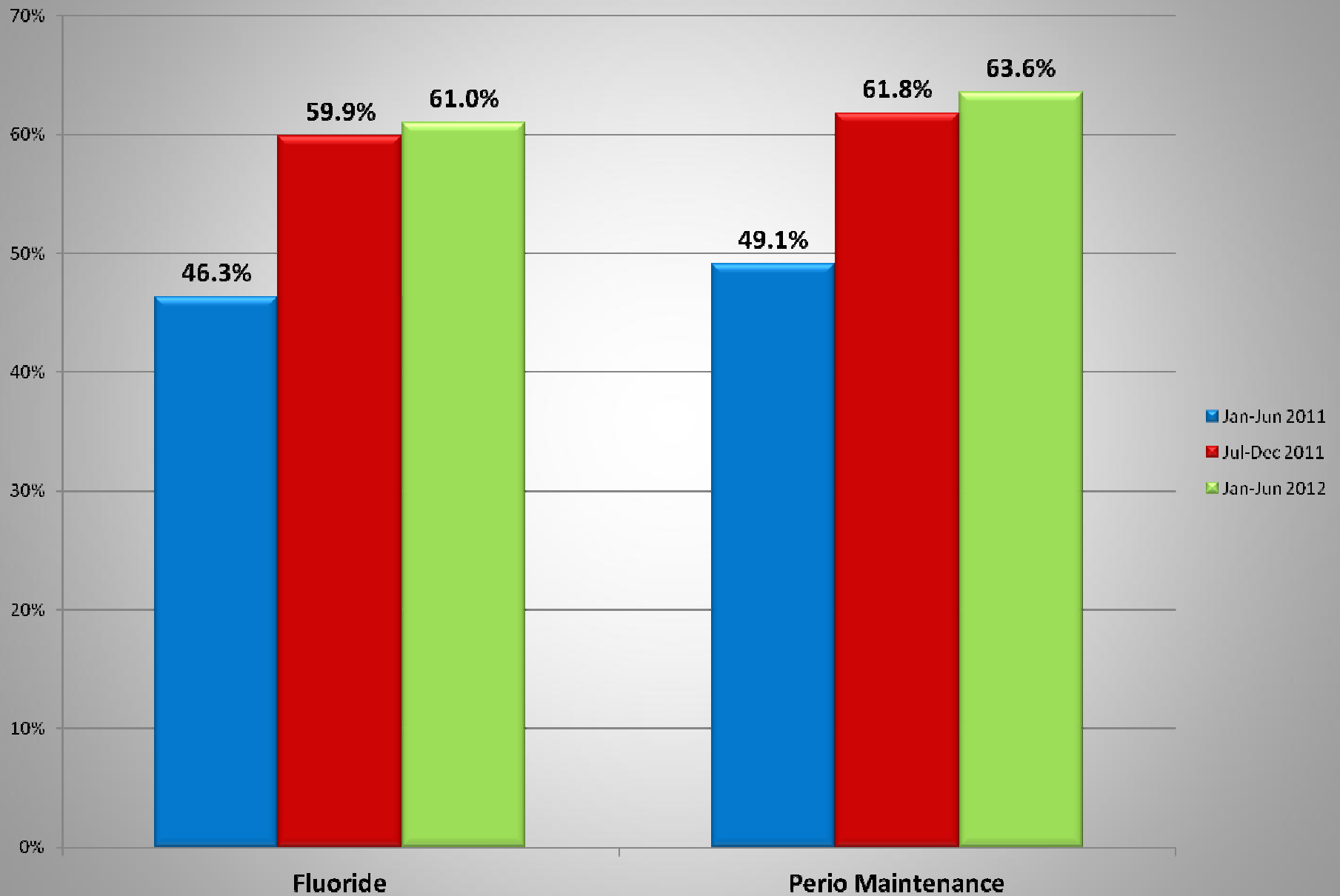
The Preventistry Program rewards dentists with financial incentives for achieving or exceeding specific goals based on the percentage of higher risk children and/or adults with periodontal disease who received the recommended preventive treatment. The results for your practice are above. Please note that we respect the confidentiality of your office's data and will not share this information.

We would like to thank you for your participation in and dedication to the Preventistry Program. Our goal is to ensure that our higher risk members receive the preventive care that will help to keep them healthy. With your continued support we can achieve that goal. We look forward to sharing your results for the next six month time frame with you.

A check is enclosed in the amount of

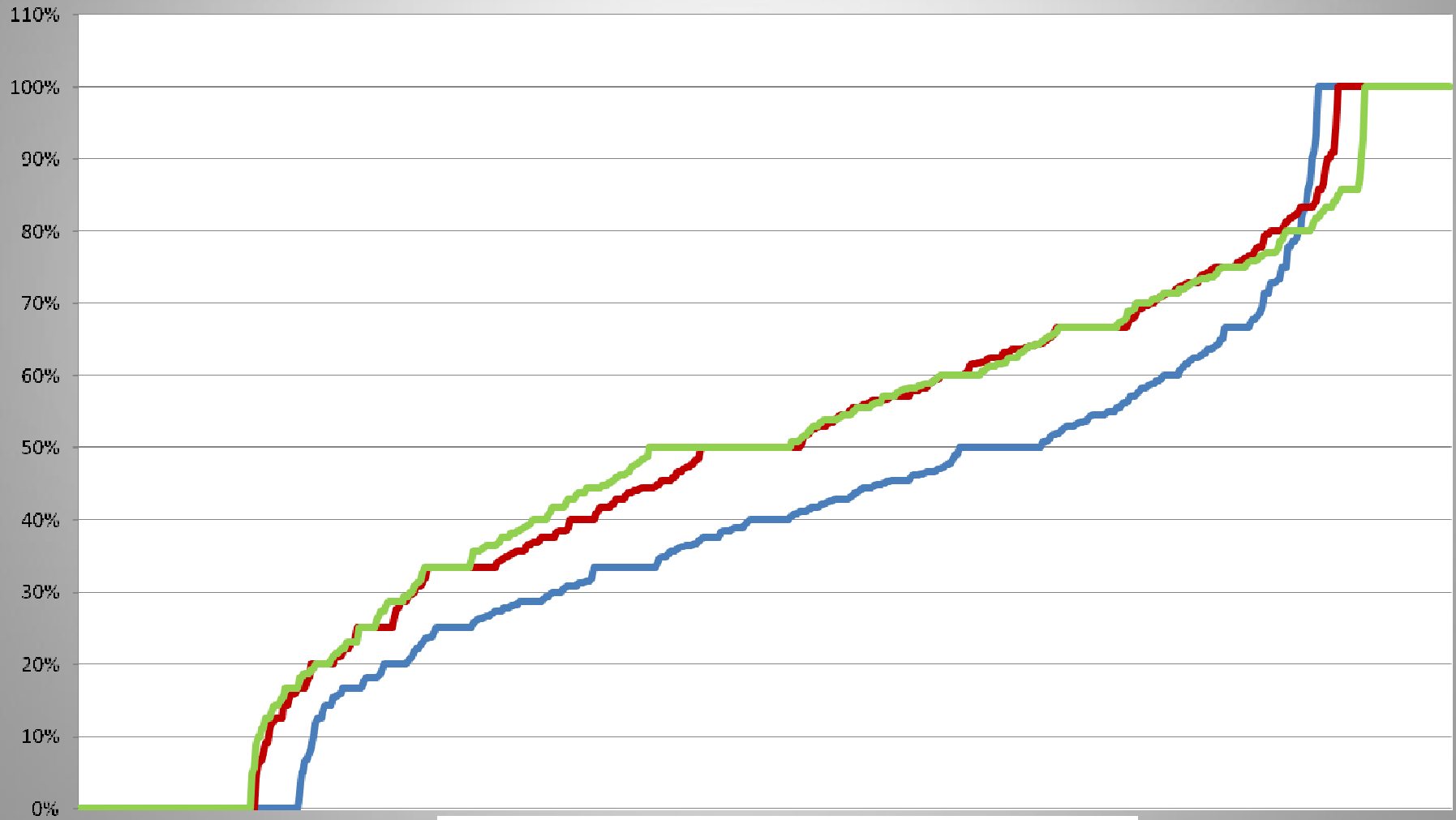
\$1,568.00

PROGRAM Performance for Fluoride and Perio Maintenance



Provider Performance for Fluoride on Higher Risk Children

— Jan-Jun 2011 — Jul-Dec11 — Jan-Jun 2012



Names of Providers on X Axis

What does all this mean for Medicaid and CHIP Programs?

- Medicaid-CHIP program administration is changing
- >60% programs contract with HMOs and MCOs
 - Interest in quality of care
 - Interest in utilization and cost of services in OR and ER
- Dental services are subcontracted to dental specialty payers

Contact Information

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