HRSA Oral Health Measures

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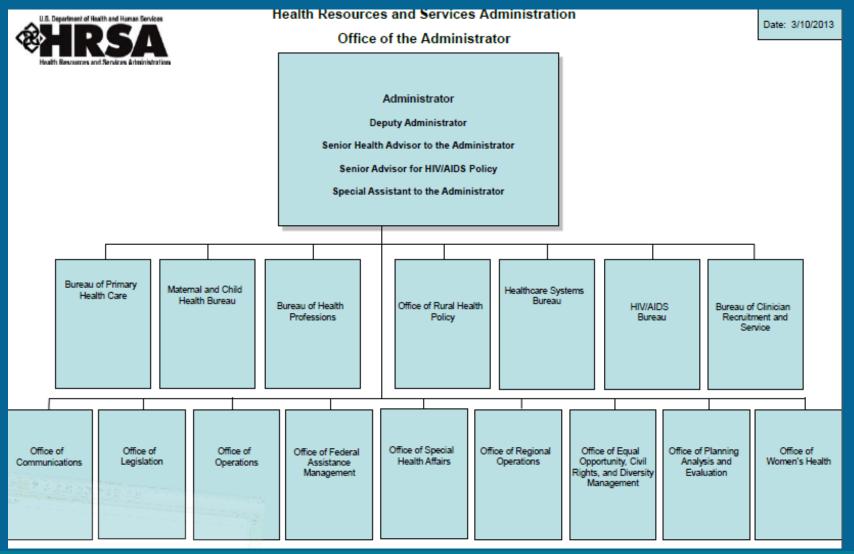
Topics Include

- HRSA Measure Activities
- HRSA Resources
- Performance Measure examples
 - Maternal and Child Health Bureau
 - HIV/AIDS Bureau





HRSA Oral Health







HRSA Measures Activities





HRSA Measures Management Review Board (MMRB)

MMRB Process

- Consensus of measure selection criteria
 - HRSA identified >200 quality measures
- Starter set of 44 measures in 13 topic areas





Topic areas

- Behavioral Health
- Cardiovascular Conditions
- Cancer Screening
- Diabetes
- Environment and Public/Population Health
- Infectious Disease—HIV/AIDS•

- Infrastructure/Workforce
- Insurance Coverage
- Maternal and Child Health
- Oral Health
- Patient
 Experience/Patient
 Satisfaction
- Respiratory Conditions
- Immunization





HRSA Starter Set

- Children Who Received Preventive Dental Care (NQF # 1334)
- Children Who Have Dental Decay or Cavities (NQF # 1335)







Four NQF endorsed oral health measures

- Annual dental visit
- Children who received preventive dental care
- Children who have dental decay or cavities
- Primary caries prevention intervention as part of well/ill child care as offered by primary care medical providers (PCMP)





HRSA Resources





http://www.hrsa.gov/healthit/

Webinars and **Toolboxes**

Online Health IT and Quality Improvement resources to improve patient care.

Learn More







Grantee Spotlight



Building a **Medical Home** for Patients with HIV/AIDS

People diagnosed with HIV/AIDS have complex health care needs. They require closely

coordinated care that may include multiple providers. an expensive medication regimen, the need to

News

Meaningful use for Eligible Professionals FAQs (04/04/2013)

Using an EHR for Health Information Exchange and Interoperability webinar. Friday, April 26, 2 pm

Interoperability and Health Information Exchange Basics Course (03/17/13)

Meaningful Use Interactive Resource on State 2 and the 2014 Clinical Quality Measures (PDF - 6 MB) (03/17/13)

eNewsletter and Comments



Current Health IT and Quality eNewsletter

Comments? F-mail the HealthIT e-mail box: healthit@hrsa.gov







Oral Health Toolkit

HRSA Home > Health IT > Toolbox > Oral Health IT Toolbox

Oral Health IT Toolbox

Introduction

Health IT and Oral Health

Meaningful Use and Oral Health

Opportunities for Health IT and Oral Health in the Safety Net and for Special Populations

Oral Health IT Oshare Share Sh

Oral health care is an important component of overall health and wellness. There is a growing recognition about the importance of integrating oral health and primary care. The use of health information technology (health IT) provides an unprecedented opportunity to enhance the intersection of oral health and primary care. The goal of this toolbox module is to provide stakeholders with information, tools, and resources regarding oral health and health IT. The module seeks to illustrate:

- Health Resources and Services Administration (HRSA) and U.S.
 Department of Health and Human Services (HHS) oral health priorities;
- · The importance of oral health in the safety net;
- · Integration of oral health primary care through health IT;
- Health IT and facilitation of the delivery of high quality oral health care; and
- Meaningful Use and its applications to oral health providers, including primary care providers delivering preventive oral health care.

Health IT offers the potential to expand and improve quality and access to care, enhance reporting and accountability, engage patients in their own care, and enhance care coordination among providers

About

Health Information Technology
Toolboxes help health centers, safety
net providers, and ambulatory care
providers with electronic and online
resources and technical assistance to
improve patient care. More>

Stay Informed

Register for the HealthIT and Quality Improvement eNewsletter

Comments?

E-mail the HealthIT e-mail box: healthit@hrsa.gov

Meaningful Use



U.S. Department of Health and Human Services

Health Information Technology and Quality
Improvement

Advanced Search









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HRSA Home

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About HRSA



What is "Meaningful Use"?

Simply put, "meaningful use" means providers need to show they're using certified EHR technology in ways that can be measured significantly in quality and in quantity.

What is Meaningful Use?

Case Studies

Meaningful Use Resources for Safety Net Providers

Federal and Non-Federal EHR Medicaid Incentive Program Resources for safety net providers.

Meaningful Use Resources for Safety Net Providers

News and Announcements

Guide to Privacy and Security of Health Information (PDF – 758 KB) (08/01/2012)

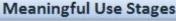
Achieving Meaningful Use of Health Information Technology: A Guide for Physicians to the EHR Incentive Programs (05/14/2012)

California Regional Extension Center Helping More Than 7,700 Health Care Providers Adopt EHRs (705/10/2012)

Multi-State Medicaid HITECH Conference Materials (04/12/2012)

Webinars









Performance Measures

EXAMPLES







Health Resources and Services Administration

Maternal and Child Health



MCH Home

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About Us

State and National Data

Title V Information System

Title V Information System (TVIS) is a web-based system that serves as the Health Resources and Services Administration's (HRSA) portal for the submission of the State Title V Maternal and Child Health Block Grant Applications/Annual Reports and five-year Needs Assessments, which electronically captures the data submitted by States, serves as a searchable database on key financial, program and performance/indicator data and provides State-by-State, Regional and National composite data.

Discretionary Grants Information System

Discretionary Grants Information (DGIS) captures program and performance data from the more than 900 maternal and child health grants HRSA makes each year. These grants help to ensure that the Nation's women, infants, children, adolescents, and their families, including fathers and children with special health care needs, have access to quality health care.





Maternal and Child Health Bureau



http://www.hrsa.gov/about/organization/bureaus/mchb/index.html





MCH Home

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Publications

All States are required to report on a core set of measures. These measures include performance and outcome measures. States also are required to report on health systems capacity indicators. These data are broken into national

Find out how National MCH needs are being met in each State. All States must report on the 18 national performance

Each State also reports on 9 health systems capacity indicators and 12 health status indicators that are considered key

About Us

Title V Information System

Home - Measurement and Indicator Data



Search

| TVIS Home |
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| Financial Data |
| Program Data |
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| State MCH Application & Contact Information |
| Data Summary Reports |
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State Needs Assessment

State Snapshots

measures; reporting on the six national outcome measures is required in the year of the needs assessment and optional in the interim years.

and state data. National Data

Health Status Indicators

National Performance Measures National Outcome Measures Health Systems Capacity Indicators

Find out about your state select state Go

State Data

Take a look at MCH needs that each State has identified as additional priority areas. These data measures are chosen by each State. States develop performance and outcome measures to gauge their progress toward achieving goals that are specific to the State.

State Priority Needs - 2010 - 2015 Needs Assessment Cycle

indicators of maternal and child health systems and program capacity.

State Priority Needs for the Current Application Year State Priority Needs Keyword Search

State Priority Needs Text Search

State Priority Needs - Needs Assessment Years

:: Quick Links ::





National Performance Measures

Performance Measure #9:

-Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

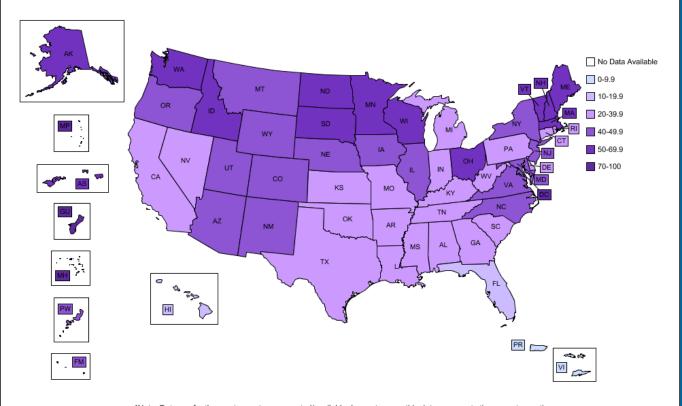




Maternal and Child Health Bureau Title V Block Grant 2013 Application Data

National Performance Measure 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.



*Note: Data are for the most recent year reported/available. In most cases, this data represents the current reporting year: 2011. However, for some states, the data may be from prior years. To see data by year for any state, click on the state.





TVIS Home Financial Data Program Data Measurement & Indicator Data Narrative State MCH Application & Contact Information Data Summary Reports State Needs Assessment



State Snapshots



Special Reports: Comparison of the Annual Indicators for the Nine Most Populous States

All States are required to report on a core set of National Performance Measures. The reports below are generated for the 9 most populus states that includes California (CA), Florida (FL), Illinois (IL), Michigan (MI), New Jersey (NJ), New York (NY), Ohio (OH), Pennsylvania (PA), Texas (TX).

Special Reports - Comparison of Selected Performance Measures for the 9 Most Populous States

- The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.
- The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)
- The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)
- The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)
- Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)
- The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.
- Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.
- 8. The rate of birth (per 1,000) for teenagers aged 15 through 17 years.
- Percent of third grade children who have received protective sealants on at least one permanent molar tooth.
- 10. The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.
- 11. The percent of mothers who breastfeed their infants at 6 months of age.
- Percentage of newborns who have been screened for hearing before hospital discharge.





Discretionary Grant Information System

- PM03: The percent of completed MCHB supported projects publishing findings in peer-reviewed journals.
- PM07: The degree to which MCHB-funded programs ensure family, youth, and consumer participation in program and policy activities.
- PM08: The percent of graduates of MCHB long-term training programs who demonstrate field leadership after graduation.
- PM09: The percentage of participants in MCHB long-term training programs who are from underrepresented racial and ethnic groups.
- PM10: The degree to which MCHB-funded programs have incorporated cultural and linguistic competence elements into their policies, guidelines, contracts and training.
- PM14: The degree to which States and communities use "morbidity/mortality" review processes in MCH needs assessment, quality improvement, and/or data capacity building.
- PM16: The degree to which grantees have assisted in increasing the percentage of pregnant women and percentage of children whose families have continuous and adequate private and/or public insurance, or other financing to pay for needed services.
- PM17: The percent of all children from birth to age 18 participating in MCHB supported programs who have a medical home.
- PM20: The percent of women participating in MCHB supported programs who have an ongoing source of primary and preventive care services for women.
- O PM21: The percentage of women participating in MCHB supported programs requiring a referral, who receive a completed referral.
- PM22: The degree to which MCHB-funded programs facilitate health providers' screening of women participants for risk factors.
- PM24: The degree to which MCHB-funded initiatives contribute to infrastructure development through core public health assessment, policy development and assurance functions.
- PM26: The extent of training and technical assistance (TA) provided and the degree to which grantees have mechanisms in place to ensure quality in their training and TA activities.
- PM27: The degree to which grantees have mechanisms in place to ensure quality in the design, development, and dissemination of new information resources that they produce each year.
- PM31: The degree to which grantees have assisted States and communities in planning and implementing comprehensive, coordinated care for MCH populations.
- PM33: The degree to which MCHB-funded initiatives work to promote sustainability of their programs or initiatives beyond the life of MCHB funding.
- PM35: The degree to which States and Communities have implemented comprehensive systems for women's health services.



https://perf-data.hrsa.gov/MCHB/DGISReports/ PerfMeasure/PerfMeasureReports.aspx?Report= PMsByTopic



Discretionary Grant Information System

- Healthy Tomorrows Partnership for Children Program
- Hemophilia Treatment Centers
- Heritable Disorders
- Improving the System of Services for Children and Youth with Special Health Care Needs
- Innovative Approaches to Promoting a Healthy Weight and Mental Wellness in Women
- Innovative Strategies in Serving Children and Youth with Epilepsy
- Innovative Strategies in Serving Children and Youth with Epilepsy (National Center)
- Maternal and Child Oral Health Resource Center
- MCH Distance Learning
- MCH Epidemiology Doctoral Training
- MCH Knowledge to Practice (formerly Continuing Education)
- MCH Leadership Certificate in Public Health
- MCH Library
- MCH Oral Health Cooperative Agreement Program
- MCH Pipeline Training Program
- National Fetal and Infant Mortality Review (FIMR) Resource Center
- National Healthy Tomorrows Technical Assistance Resource Center
- National Maternal and Child Health Data Resource Center
- National Newborn Screening and Genetics Resource Center
- Oral Health: Children's Oral Healthcare Access Program
- Sickle Cell Diseases and Newborn Screening Program





HIV/AIDS Bureau (HAB)



Health Resources and Services Administration HIV/AIDS Programs









About HAB

Deliver HIV/AIDS Care

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Manage Your Grant

Data

News & Publications

Global HIV/AIDS

Ryan White & the Affordable Care Act

The Affordable Care Act (ACA) is an historic opportunity for people living with HIV. (PLWH)

Learn More







Ryan White HIV/AIDS Program

The Rvan White HIV/AIDS Program provides HIV-related



HIV/AIDS Services



Find HIV/AIDS

News

ACA Plans Offered Through Marketplace Known as QHPs and



http://hab.hrsa.gov/



HAB Performance Measures

- Core Clinical category includes Oral Exam
- Oral Health Services category includes

Oral Health

- Dental and Medical History
- Dental Treatment Plan
- Oral Health Education
- Periodontal Screening or Examination
- Phase I Treatment Plan Completion





Contact Information

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QUESTIONS?



