

State of California—Health and Human Services Agency Department of Health Care Services



EDMUND G. BROWN JR. GOVERNOR

DATE: March 13, 2018

TO: ALL MEDI-CAL DENTAL MANAGED CARE PLANS

SUBJECT: APL 18-006: MODIFICATIONS TO THE PERFORMANCE MEASURES AND BENCHMARKS FOR THE MEDI-CAL DENTAL MANAGED CARE PROGRAM (SUPERCEDES APL 16-017)

PURPOSE:

The purpose of this Dental All Plan Letter (APL) is to inform the Medi-Cal Dental Managed Care (DMC) plans that effective February 28, 2018, DMC plans must use a new Performance Measure template. This new template provides clarifications on the calculations of several performance measures, expands the age range and stratifications for data submissions, and refines the reporting period for plan data reporting submissions.

BACKGROUND:

APL 16-017 clarified the performance measure reporting requirements that were originally outlined in Attachment 6, Performance Measures and Benchmarks, of the current DMC contract. It provided an updated Performance Measures and Benchmark Template that defined the performance measures and age stratifications used for reporting.

Assembly Bill (AB) 2207 (Chapter 613, Statutes of 2016) added quarterly and annual Medi-Cal dental data reporting requirements. In accordance with these requirements, in 2017 the Department of Health Care Services (Department) modified its data reporting processes and began publishing dental data quarterly on a rolling 12-month basis.

APL 18-002 clarified that the DMC plans' required Quality Improvement System include the collection and submission of performance measures. The Department has also determined a Preventive Service Performance Measure Benchmark that should be used to develop the Quality Improvement Annual Report and one of the Quality Improvement Projects. DENTAL ALL PLAN LETTER 18-006 PAGE 2 March 13, 2018

This APL supersedes the template established by APL 16-017, refines the reporting period to align the Performance Measure deliverable measurement periods, and clarifies all the performance measures and the benchmark as indicated by APL 18-002.

POLICY AND REQUIREMENTS:

Performance Measures

The definition for the Preventive Services to Fillings measure is expanded to include dental code D1208, to be consistent with the definition of its calculation.

The description on the template for the Overall Utilization of Dental Services measure is updated to refer to the number of beneficiaries continuously enrolled for one (1) year with no gap in coverage instead of the number of beneficiaries enrolled at least 90 days continuously. This corrects an inconsistency between the description of the measure and the definition of its calculation.

The description on the template for the Usual Source of Care measure has been updated to refer to the number of beneficiaries continuously enrolled for two (2) years with no gap in coverage instead of the number of beneficiaries enrolled at least 90 days continuously. This corrects an inconsistency between the description of the measure and the definition of its calculation.

Age Stratifications

The template age stratifications are increased from a total of seven stratifications to eight. The existing stratifications align with the age stratifications in the CMS 416 Report and were established in APL 16-017. The new, additional age stratification expands the age range to include adults age 21 and above, consistent with the restoration of adult dental benefits, effective January 1, 2018.

The existing age stratifications are as follows:

- Ages less than one
- Ages one through two;
- Ages three through five;
- Ages six through nine;
- Ages 10 through 14;
- Ages 15-18; and
- Ages 19-20

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The new, additional age stratification is as follows:

• Ages 21+.

The Department will continue to evaluate age stratifications and make changes as necessary to facilitate achievement of program goals.

Reporting Period

The prior performance measure instructions called for cumulative quarterly reports within a given contract year (PHP in fiscal year and GMC in calendar year). The first quarterly report contained data for three months, the second quarterly report contained data for six months, etc. To provide ongoing, consistent comparisons over time, and comparable data reporting for Dental Fee-for-Service and federal reporting, the reporting period will be updated to a rolling 12-month basis. Every quarterly report will contain data from the most recent quarter and the previous three quarters.

Submission Schedule

Per APL 17-012, DMC plans are required to submit to the Department quarterly selfreported performance measures no later than thirty calendar days after the end of the reporting quarter. This remains unchanged as indicated by the table below:

Submission Deadline	Reporting Period
April 30, 2018	April 2017 – March 2018
July 30, 2018	July 2017 – June 2018
October 30, 2018	October 2017 – September 2018
January 30, 2019	January 2018 – December 2018

(Due to Run-Out, DMC plans are allowed an additional 20 days after the deadline for submission.)

Performance Measures and Benchmarks

DMC plans are obligated to submit to the Department performance measure data in accordance with the performance measures defined in APL 16-017. The Benchmark row has been removed for most measures, and the template has been renamed accordingly. Please note that the Department has established that a performance measure benchmark for DMC plans shall be calculated based on delivery of preventive services, per APL 18-002. The use of preventive services performance is a measure of the percentage of beneficiaries who received any preventive dental service during the measurement period. Each DMC plan should aim to increase its preventive dental

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service performance measure by a minimum of 2 percentage points each fiscal year among children ages 1 to 20, beginning with fiscal year 2017-18. The ultimate goal, at minimum, is to increase the measure by 10 percentage points over a five year period from the baseline fiscal year 2016-17¹².

If you have any questions, please contact <u>dmcdeliverables@dhcs.ca.gov</u>.

Sincerely,

Original signed by:

Alani C. Jackson, MPA Chief, Medi-Cal Dental Services Division Department of Health Care Services

¹http://www.dhcs.ca.gov/services/Documents/MDSD/Dental%20Managed%20Care%20Performance%20Measures/Copy_of_G MC_FY_16-17_PM_Report.xls;

²http://www.dhcs.ca.gov/services/Documents/MDSD/Dental%20Managed%20Care%20Performance%20Measures/Copy_of_PH P_FY_16-17_PM_Report.xls