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	EFFECTIVE DATE July 1, 2015	
Texas Medicaid Dental Pay for Quality (P4Q) Program Measures		Version 2.4

DOCUMENT HISTORY LOG

STATUS ¹	DOCUMENT REVISION ²	EFFECTIVE DATE	DESCRIPTION ³
Baseline	2.0	March 1, 2012	Initial version Uniform Managed Care Manual Chapter 6.2.7, "Medicaid Dental Performance Measures for Capitation Payment At-Risk Premium." Chapter 6.2.7 applies to contracts issued as a result of HHSC RFP number 529-12-0003.
Revision	2.1	June 1, 2012	Chapter name is changed from "Medicaid Dental Performance Measures for Capitation Payment At-Risk Premium" to "Performance-Based Capitation Rate At-Risk Measures for Medicaid Dental Contractors." Item 2 Member Call Timelines clarifies that results will be taken from the Hotline Summary Reports and not the Claims Summary Reports.
Revision	2.2	January 1, 2014	Calendar Year 2014 measures have been added.
Revision	2.3	February 1, 2015	Chapter name is changed from "Performance-Based Capitation Rate At-Risk Measures for Medicaid Dental Contractors" to "Texas Medicaid Dental Pay for Quality (P4Q) Program Measures." Calendar Year 2015 measures have been added. Calendar Year 2014 Measures # 2 and 4 are clarified.
Revision	2.4	July 1, 2015	Calendar Year 2016 measures have been added.



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			Calendar Year 2015 measures #2, 3 and 4 have been clarified. Calendar Year 2014 measures #2, 3 and 4 have been clarified.
<p>¹ Status should be represented as “Baseline” for initial issuances, “Revision” for changes to the Baseline version, and “Cancellation” for withdrawn versions.</p> <p>² Revisions should be numbered according to the version of the issuance and sequential numbering of the revision—e.g., “1.2” refers to the first version of the document and the second revision.</p> <p>³ Brief description of the changes to the document made in the revision.</p>			



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Calendar Year 2016 (January 1, 2016 – December 31, 2016)

Measure	Data Collection Period	Definition
1. Preventive Dental Services	January 2016 – December 2016	Percent of members (1 year - 20 years) enrolled for at least 11 of the past 12 months who had at least one preventive dental service during the measurement year.
2. TH Steps Checkups	January 2016 – December 2016	Percent of members (1 year - 20 years) receiving exactly one THSteps Dental Checkup per year (50% of weight of 2 checkups)
	January 2016 – December 2016	Percent of members (1 year - 20 years) receiving at least two THSteps Dental Checkup per year <i>Based on recommended standards of THSteps dental checkup visits (2 visits per year), the sub-measure of one checkup will receive 50% of the weight of the sub-measure of two checkups.</i>
3. TH Steps Checkups after Enrollment	January 2016 – December 2016	Percent of new members (1 year - 20 years) receiving at least one THSteps Dental Checkup within 90 days of enrollment <i>New members will be excluded from the eligible population if they had a qualifying check-up in the past 6 months while enrolled with a different plan</i>
4. Sealant Measure	January 2016 – December 2016	Sealant Measure (each sub-measure weighted equally) <ul style="list-style-type: none"> • % of members (6 years - 9 years) enrolled for at least 6 continuous months who had at least one sealant services on one of the permanent first molars during the measurement year • % of members (10 years - 14 years) enrolled for at least 6 continuous months who had at least one sealant services on one of the permanent second molars during the measurement year <i>Members who have all their applicable teeth previously sealed, restored or extracted will be excluded from the measure</i>



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Calendar Year 2015 (January 1, 2015 – December 31, 2015)

Measure	Data Collection Period	Definition
1. Preventive Dental Services	January 2015 – December 2015	Percent of members (1 year - 20 years) enrolled for at least 11 of the past 12 months who had at least one preventive dental service during the measurement year.
2. TH Steps Checkups	January 2015 – December 2015	Percent of members (1 year - 20 years) receiving exactly one THSteps Dental Checkup per year (50% of weight of 2 checkups)
	January 2015 – December 2015	Percent of members (1 year - 20 years) receiving at least two THSteps Dental Checkup per year <i>Based on recommended standards of THSteps dental checkup visits (2 visits per year), the sub-measure of one checkup will receive 50% of the weight of the sub-measure of two checkups.</i>
3. TH Steps Checkups after Enrollment	January 2015 – December 2015	Percent of new members (1 year - 20 years) receiving at least one THSteps Dental Checkup within 90 days of enrollment <i>New members will be excluded from the eligible population if they had a qualifying check-up in the past 6 months while enrolled with a different plan</i>
4. Sealant Measure	January 2015 – December 2015	Sealant Measure (each sub-measure weighted equally) <ul style="list-style-type: none"> • % of members (6 - 9 years) enrolled for at least 6 continuous months who had at least one sealant services on one of the permanent first molars during the measurement year • % of members (10- 14 years) enrolled for at least 6 continuous months who had at least one sealant services on one of the permanent second molars during the measurement year <i>Members who have all their applicable teeth previously sealed, restored or extracted will be excluded from the measure</i>



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Calendar Year 2014 (January 1, 2014 – December 31, 2014)

Measure	Data Collection Period	Measure Details
1. Preventive Dental Services	Jan 2014 – Dec 2014	Percent of members (1 year - 20 years old) enrolled for at least 11 of the past 12 months who had at least one preventive dental service during the measurement year.
2. THSteps Checkups	Jan 2014 – Dec 2014	<p>THSteps Care Measures</p> <ul style="list-style-type: none"> a. Percent of members (1 year - 20 years) receiving exactly one THSteps Dental Checkup per year b. Percent of members (1 year - 20 years) receiving at least two THSteps Dental Checkup per year <p><i>Based on recommended standards of THSteps dental checkup visits (2 visits per year), the sub-measure of one checkup will receive 50% of the weight of the sub-measure of two checkups.</i></p>
3. THSteps Checkups after Enrollment	Jan 2014 – Dec 2014	<p>Percent of new members (1 year - 20 years) receiving at least one THSteps Dental Checkup within 90 days of enrollment</p> <p><i>New members will be excluded from the eligible population if they had a qualifying check-up in the past 6 months while enrolled with a different plan</i></p>
4. Sealant Measure	Jan 2014 – Dec 2014	<p>Sealant Measure (each sub-measure weighted equally)</p> <ul style="list-style-type: none"> • % of members (6 – 9 years) enrolled for at least 6 continuous months who had at least one sealant services on one of the permanent first molars during the measurement year • % of members (10 – 14 years) enrolled for at least 6 continuous months who had at least one sealant services on one of the permanent second molars during the measurement year <p><i>Members who have all their applicable teeth previously sealed, restored or extracted will be excluded from the measure</i></p>



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Calendar Year 2012 (March 1, 2012 – December 31, 2012)

Measure	Data Collection Period	Data Collection Method / Methodology	Medicaid Dental Point Value
1. 64% of enrollees receiving at least one THSteps dental checkup per year.	Mar – Dec 2012	The EQRO will calculate this measure using the encounter data.	25
2. Member Call timelines <ul style="list-style-type: none"> • Calls answered by a live person (80% within 30 seconds) • Number of calls abandoned (\leq 7%) • Average hold time (\leq 2 minutes) 	Mar – Dec 2012	HHSC will average the results from the quarterly Hotline Summary Reports submitted by the Dental Contractor to identify the percentage achieved.	10 5 10
3. 95 % enrollees in designated urban area with access to a Primary Dentist within 30 miles.	Mar – Dec 2012	HHSC will calculate these percentages quarterly using data from the last business day of the quarter from the G92 and G20 files submitted to HHSC's Administrative Services Contractor and the enrollment file using Geographical Information Systems (GIS) software. HHSC will average the quarterly results to identify the percentage achieved.	25
4. 98% of clean claims are adjudicated within 30 calendar days of receipt.	Mar – Dec 2012	HHSC will average the results from the quarterly Claims Summary Reports submitted by the Dental Contractor to identify the percentage achieved.	25