

Oregon Dental Quality Metrics Workgroup
January 15, 2014 Minutes
1:00 – 3:00 pm
By phone

ITEM
<p>Welcome</p> <p>Attending: Deborah Loy, Eli Schwarz, Mike Shirtcliff, Robert Finkelstein, Bill Ten Pas, Janet Meyer, Amanda Cobb, Cathryn ?</p> <p>OHA: Dee Weston, Carole Romm, Geralyn Brennan, Lori Coyner, Sarah Bartelmann</p>
<p>Consent Agenda</p> <p>The workgroup agreed to submit any edits or comments to the November meeting notes via email.</p>
<p>December Metrics & Scoring Committee Debrief</p> <p>The workgroup discussed the presentation at the December 2013 Metrics & Scoring Committee meeting and the Committee’s initial response to the recommended dental metrics. Overall, the workgroup determined that:</p> <ul style="list-style-type: none">• Providing more information about why the recommended measures were selected and the deliberations the workgroup went through would have been helpful context for the Committee;• There is a gap between health care quality and dental quality measures, as well as the work occurring nationally to develop standardized dental measures, which was not well understood by the Committee. Providing more detail about this work would have better informed the recommendation;• Dentistry has a different delivery system with different coding options (dental lens) and it is not possible to measure in identical ways to the medical system (medical lens);• There is not yet a widespread understanding that CCOs need to integrate services that affect the overall health of the patient, inclusive of oral health (old belief: dentists fix teeth); and• Even if the recommended dental measures only result in increased access to dental care for Medicaid beneficiaries, this is still a big improvement. <p>The workgroup noted that the recommended measures are process measures used as proxies for good oral health outcomes, and that these first years of dental quality metrics are a testing phase. Recommended metrics must be revisited to help CCOs achieve goals and monitor population health.</p> <p>OHA staff will be meeting with Committee members before the February 21st meeting to address some of the concerns raised and provide more background information. Workgroup members also agreed to reach out to Committee members through other</p>

Oregon Dental Quality Metrics Workgroup
January 15, 2014 Minutes
1:00 – 3:00 pm
By phone

venues (e.g., CCO meetings).

The workgroup agreed to discuss prioritization in February to be able to clearly present the recommended measures in ranked order of importance (“if we are only adopting one measure, it should be x, because of y”) to the Committee. Ideally, this will make the recommendation less overwhelming to the Committee and stakeholders, who are being held accountable against multiple measure sets.

The upcoming presentation to the Committee in February will include:

- A discussion on the differences between medical and dental lenses;
- Additional background information on provider types, differences between sealants and fluoride varnishes, age groups, and ...
- Efforts to identify nationally recognized dental measures;
- The limitations of currently available dental measures; and
- Why the recommendation measures are important;

OHA staff will be compiling specification sheets for each of the recommended dental measures in advance of the February Committee meeting.

Metrics Alignment

The workgroup discussed initial attempts to align with existing measures (e.g., prenatal care, chronic disease) and the limitations with currently available data. The workgroup agreed that the recommendation should be reframed to better resonate with the Committee, potentially framed in the context of the seven quality improvement focus areas.

The workgroup also discussed including the dental modules in the Medicaid BRFSS survey to help align with CDC oral health surveillance programs.

Risk Assessments

The workgroup discussed the availability of risk assessment systems and the differences in medical and dental adoption and implementation of risk assessment tools.

The workgroup briefly discussed the existing evidence on implementing risk assessment tools in low-income populations, and agreed to review more background information on this topic before the February workgroup meeting.

Next Steps

The February DQM workgroup meeting will focus on:

- Re-aligning and prioritizing the recommended metrics in preparation for the

Oregon Dental Quality Metrics Workgroup
January 15, 2014 Minutes
1:00 – 3:00 pm
By phone

February Metrics & Scoring Committee meeting;

- Planning the presentation to the Committee;
- Follow up discussion: CMS national goal;
- Continued discussion: evidence-base for risk assessments.

Dee will send information about the CMS national goal for sealants to the workgroup.

Eli and Mike will send background information on risk assessments / evidence-base to the workgroup.

Eli and Deborah will draft 3-5 slides on the science of measurement for dentistry to include in the February presentation to Metrics & Scoring.

Next Meeting: February 5, 2014 from 2:00 – 4:00 p.m.

Salem – HSB Room 354

Portland – Lincoln, Mary Room

Call In: 1-888-398-2342

Participant Code: 5731389