Suggested Enhancement to Measure 13: Percentage of Eligibles That Received Preventive Dental Services (to use when linking prevention and treatment services)

DESCRIPTION

The percentage of individuals ages to 18 that are enrolled in Medicaid or CHIP Medicaid Expansion programs, are eligible for EPSDT services¹, and that received preventive dental services.

ELIGIBLE POPULATION

Age Individuals ages 1 to 18

Continuously enrolled eligibles in Medicaid or CHIP Medicaid Expansion programs for EPSDT services for at least 12 Continuous months.

DEFINITIONS

Unduplicated. An individual may only be counted once for each line of data.

DATA SOURCE

Administrative Data Specifications

Numerator

The unduplicated number of children receiving at least one preventive dental service (See Appendix for Codes).

Numerators for each of the following: Number of children with at least one Well Child Exam; Number of children with at least 1 dental prophylaxis; Number of children with at least one fluoride treatment; Number of children with sealants; Number of children with dental prophylaxis with fluoride treatment on the same date of service; Number of children with dental prophylaxis and sealant on the same date of service (See Appendix for Codes).

By age groups:

Dental Age
Groups in
years

1
2
3-4
5
6-8
9
10-11
12-18

¹ Note, we were not able to apply this eligibility to our feasibility testing using MarketScan Medicaid data. Our testing population was Medicaid enrollees.

As a special component of the analysis, the unduplicated number of children receiving fluoride services performed by or under the supervision of a medical (Provider type: 200-Medical Doctor, 206-Mutispecialty Physician Group, 240-Family Practice, 360-Preventive Medicine) or dental provider (100-MD & DDS, 105-Dental Specialist, 805-Dental Technician).

Denominator

The total unduplicated number of individuals ages to 1 that have been continuously enrolled in Medicaid or CHIP Medicaid Expansion programs for at least 12 months and are eligible to receive EPSDT services.²

Services may be provided under both fee-for-service and managed care arrangements and through any other private health plans that contract with the state.¹

Exclusions³

Do not include in this count the following groups of individuals:

Medically needy individuals ages 1 to 20 if you do not provide EPSDT services or the medically needy population; Individuals eligible for Medicaid only under a §1115 waiver as part of an expanded population for which the full complement of EPSDT services is not available; Undocumented aliens who are eligible only for emergency Medicaid services; Groups of individuals ages to 2 who are eligible only for limited services as part of their Medicaid eligibility (for example, pregnancy-related services).

_

² EPSDT eligibility was not applied in feasibility testing for this measure. This variable was not available.

³ No exclusions were applied in feasibility testing for this measure. These criteria were not available in the MarketScan Medicaid database.

Appendix:

Differences Between Calculations of Core Set and PMCoE Revision for use with linking prevention and treatment

Table 1 Age Groups

Demographics			
Variable	Label	Values	Value
			Description
AGE	Age of		
	Patient	1-18	
DENT_AGEGRP	Dental Age Groups in years	1	1
		2	2
		3	3-4
		4	5
		5	6-8
		6	9
		7	10-11
		8	12-18
	Gender of	1	Male
	Patient	2	Female

Table 2 Prevention Services and Codes

Service	Codes
At Least One Dental Prophylaxis	D1120
At Least one Fluoride Treatment	D1203, D1206, D1208, or
	9942 (w/DX V07.31)
Sealants	D1351
Dental Prophylaxis with Fluoride	Se above
Treatment on the same date of service	
Dental Prophylaxis with Sealant on the	Se above
same date of service	
Well Child Exam	99381, 99391, 99382, 99392, 99383, 99393, 99384,
	99394, 99385, 99395

Suggested Enhancement to Measure 17: Percentage of Enrollees That Received Dental Treatment Services (to use when linking prevention and treatment services)

DESCRIPTION

The percentage of individuals ages to 18 that are enrolled in Medicaid or CHIP Medicaid Expansion programs, are eligible for EPSDT services⁴, and that received dental treatment services.

ELIGIBLE POPULATION

Age Individuals ages 1 to 18

Continuously enrollment eligible for EPSDT services for at least 12 continuous months.

DEFINITIONS

Unduplicated. An individual may only be counted once for each line of data.

DATA SOURCE

Administrative Data Specifications.

Numerator

The unduplicated number of individuals receiving at least one dental treatment service (See Appendix for Codes.)

Dental Age	1
Groups in	2
years	3-4
	5
	6-8
	9
	10-11
	12-18

Numerators defined for each of the following treatment severity groups: Restorative care (at least one surface); Restorative Care (number of treated); Extractions; Sealants; Endodontics.

⁴ Note, we were not able to apply this eligibility to our feasibility testing using MarketScan Medicaid data. Our testing population was Medicaid enrollees.

PMCoE Dental – Attachment 2.1

Denominator

The total unduplicated number of individuals ages to 18 that have been continuously enrolled in Medicaid or a CHIP Medicaid Expansion program for at least 12 months and are eligible to receive EPSDT services.⁵

Exclusions⁶

Exclude children that are not eligible to receive dental service through Medicaid or CHIP. Examples may include undocumented aliens that are eligible only for emergency Medicaid services or those that are eligible only for limited services as part of their Medicaid/CHIP eligibility (e.g., pregnancy-related services).

.

⁵ We did not apply EPSDT eligibility criteria in measure testing. This variable was not available.

⁶ No exclusions were applied in feasibility testing for this measure. These criteria were not available in the MarketScan Medicaid database.

Appendix:

Differences between Calculations of Core Set and PMCoE Revision for use with linking prevention and treatment

Table 1 Demographics

Demographics			
Variable	Label	Values	Value Description
AGE	Age of Patient	1-18	
DENT_AGEGRP	Dental Age	1	1
	Groups in years	2	2
		3	3-4
		4	5
		5	6-8
		6	9
		7	10-11
		8	12-18
	Gender of Patient	1	Male
		2	Female

Table 2 Treatment Services and Codes, by Severity

Treatment Variables Definition – by Severity		
Variable	Proc. Code	Description
RESTORATIVE CARE:	D2140, D2330	Surface Amalgam or Resin - 1 surface
At least 1 Surface		
	D2150, D2331	Surface Amalgam or Resin - 2 surfaces
	D2160, D2332	Surface Amalgam or Resin - 3 surfaces
	D2161, D2335	Surface Amalgam or Resin - 4 surfaces
	See above	One or more Surface Amalgams
	See above	Two or more Surface Amalgams
	D2390	Anterior Resin-based Composite Crown

Table 2 Treatment Services and Codes, by Severity (cont'd)

Treatment Variables Definition – by Severity		
Variable	Proc. Code	Description
RESTORATIVE CARE: Posts and Crowns	D2391	Post One Surface Resin-based Composite
1 03t3 and Crowns	D2392	Post Two Surface Resin-based Composite
	D2393	Post Three Surface Resin-based Composite
	D2394	Post >/=4 Surface Resin-based Composite
	Se above	One or more Surface Resin Composites
	Se above	Two or more Surface Resin Composites
	D2930	Prefab Stainless Steel Crown Primary
	Se above	Any Crown
	D2931	Prefab Stainless Steel Crown Permanent
	D2932	Prefab Resin Crown
	D2933	Prefab Stainless Steel Crown
	D2934	Prefab Steel Crown Primary
	D2940	Protective Restoration
	D2950	Core Build u Including Pins
EXTRACTIONS	D7111, D7140	Partial Pulpectomy
	D7210, D7220, D7230, D7240	Complete Pulpectomy
	D3120	Pulp Cap Indirect
	D3220	Therapeutic Pulpotomy
	D3240	Pulpal therapy Posterior Primary
	D3310 , D3320,	End Therapy (Root Canals), Anterior Bicuspid and Posterior
	D3330	Tooth
ENDODONTICS	D3120	Pulp Cap Indirect
	D3220	Therapeutic Pulpotomy
	D3240	Pulpal therapy Posterior Primary
		End Therapy (Root Canals), Anterior Bicuspid and Posterior Tooth