

Preventive Services for Children at Elevated Caries Risk, Dental or Oral Health Services

Metric Information

Metric description: The percentage of Medicaid beneficiaries, aged 6-14 years of age, who are at elevated risk of caries who received a topical fluoride application and/or sealants at a dental or oral health service within the measurement year.

Metric specification version: Quality Alliance® Dental Quality Measure 2020.

Data collection method: Administrative only.

Data source: ProviderOne Medicaid claims/encounter and enrollment data.

Claim status: Include only final paid claims or accepted encounters in metric calculation.

Identification window: Measurement year and three years prior to the measurement year (to identify elevated caries risk).

Direction of quality improvement: Higher is better.

URL of specifications: <https://www.ada.org/en/science-research/dental-quality-alliance/dqa-measure-development-reports/dqa-dental-quality-measures>

DSRIP Program Summary

Metric utility: ACH Project P4P ACH High Performance DSRIP statewide accountability

ACH Project P4P – Metric results used for achievement value: Submetric results reported for two age groups: 6-9 years and 10-14 years. Weighted average of performance for each submetric is used to calculate overall AV; determined by number of Medicaid beneficiaries the ACH has in the denominator of each submetric.

ACH Project P4P – improvement target methodology: improvement over self (1.9% improvement over reference baseline performance).

ACH regional attribution: Residence in the ACH region for 7 out of 12 months in the measurement year.

DSRIP Metric Details

Eligible Population	
Age	6 - 14 years and older. Age is as of the last day of the measurement year.
Gender	N/A

Preventive Services for Children at Elevated Caries Risk, Dental or Oral Health Services

Minimum Medicaid enrollment	Continuous enrollment of 6 months. If individual has multiple enrollment spells, the longest enrollment spell is used to assess continuous eligibility.
Allowable gap in Medicaid enrollment	No allowable gap in enrollment.
Medicaid enrollment anchor date	No anchor date.
Medicaid benefit and eligibility	Includes Medicaid beneficiaries with comprehensive medical benefits. Excludes beneficiaries that are eligible for both Medicare and Medicaid and beneficiaries with primary insurance other than Medicaid.

Denominator:

Data elements required for denominator: Medicaid beneficiaries, aged 6-14 years old as of the last day of the measurement year, meeting the above eligibility criteria and meets the following criteria for elevated caries risk:

- Has a CDT code identifying elevated caries risk in the measurement year
- OR**
- Has a CDT code identifying elevated caries risk in any of the three years prior to the measurement year
- OR**
- Has a visit with a CDT code 'D0602' or 'D0603' in the measurement year.

Value sets required for denominator.

Name	Value Set
Elevated Caries Risk	D1354 D2393 D2620 D2712 D2790 D2950 D2140 D2394 D2630 D2720 D2791 D3110 D2150 D2410 D2642 D2721 D2792 D3120 D2160 D2420 D2643 D2722 D2794 D3220 D2161 D2430 D2644 D2740 D2799 D3221 D2330 D2510 D2650 D2750 D2930 D3222 D2331 D2520 D2651 D2751 D2931 D3230 D2332 D2530 D2652 D2752 D2932 D3240 D2335 D2542 D2662 D2780 D2933 D3310 D2390 D2543 D2663 D2781 D2934 D3320 D2391 D2544 D2664 D2782 D2940 D3330 D2392 D2610 D2710 D2783 D2941

Required exclusions for denominator.

- Eligible population exclusions are listed in the eligible population table above.
- Metric specific exclusions:
 - o Beneficiaries in hospice care.

Deviations from cited specifications for denominator.

Preventive Services for Children at Elevated Caries Risk, Dental or Oral Health Services

- None.

Numerator:

Beneficiaries must qualify for inclusion in the denominator to be eligible for inclusion in the numerator.

Data elements required for numerator: Medicaid beneficiaries, aged 6-14 years old as of the last day of the measurement year, meeting the above eligibility criteria, meets the above criteria for elevated caries risk, and meets the following criteria:

- Received a topical fluoride or a sealant as a dental or oral health service (as defined by the NUCC maintained Provider Taxonomy Codes Value Set) during the measurement year.

Value sets required for numerator.

Name	Value Set
Topical Fluoride or Sealant	D1206 D1208 D1351
NUCC maintained Provider Taxonomy Codes	122300000X 1223P0106X 1223X0008X 125Q00000X 1223D0001X 1223P0221X 1223X0400X 261QF0400X 1223D0004X 1223P0300X 124Q00000X 261QR1300X 1223E0200X 1223P0700X 125J00000X 1223G0001X 1223S0112X 125K00000X

Required exclusions for numerator.

- None

Deviations from cited specifications for numerator.

- None

Version Control

August 2020: Additional information about the decision to use this metric can be found [here](#).