

Children's Oral Health Initiative Value-Based Payment Technical Support Program Overview

There are pockets of innovation around the country where providers deliver dental care in ways that improve children's oral health outcomes, yet provider payment does not always align with the care delivery approaches. The Centers for Medicare & Medicaid Services' (CMS) Medicaid Innovation Accelerator Program (IAP) is launching a new technical support opportunity for state Medicaid/CHIP agencies to select, design, and test Value-Based Payment approaches that will sustain children's oral health care delivery models that are showing results. Value-Based Payment approaches refer to payment models that range from rewarding for performance in Fee-For-Service (FFS) to capitation and include Alternative Payment Models (APM) and comprehensive population-based payments. This opportunity complements CMS's existing children's Oral Health Initiative (OHI), which aims to support children's oral health by increasing the proportion of children receiving preventive dental services.¹

Two to four state Medicaid/CHIP programs will be selected to participate in this opportunity. Interested states will be expected to identify, and be prepared to partner with, a care delivery model site in their state that has data demonstrating its success in producing improvements in oral health for the children it serves. When selecting sites, states should, for example, look for sites emphasizing early intervention and prevention, practicing evidence-based and interprofessional care, and implementing principles of disease management not yet widely utilized within Medicaid. In addition, the partner sites should have results in areas such as: improvement in caries risk status; reduction in new caries; and reduction in the need for referrals to the operating room for restorations performed under general anesthesia. To assist states in the search process, IAP conducted an environmental scan to capture examples of care delivery models (see Appendix). The examples listed in the Appendix are a starting point for states and should not be considered an exhaustive list of existing care delivery models.

The Medicaid IAP works with states by providing targeted technical support (no funding is provided). Selected states will benefit from:

- Individualized technical support to select, design, and test Value-Based Payment approaches in partnership with children's oral health care delivery model sites in their state.
- Better understanding of how financing mechanisms can be used to shift oral health care toward better patient experience, improved outcomes, and lower per capita costs by reducing the need for more costly restorative or hospital-based care.
- Virtual peer-to-peer support for sharing successes and barriers to implementation.
- Changes in care delivery that could boost performance on the state's OHI preventive dental services goal.
- Moving more payments to be based on value and quality to meet the state's payment reform goals.
- The opportunity to spread innovation by offering more broadly the tested Value-Based Payment approaches.

About the Medicaid Innovation Accelerator Program

The [Medicaid Innovation Accelerator Program](#) is a collaboration between the Center for Medicaid and CHIP Services (CMCS) and the Center for Medicare and Medicaid Innovation (CMMI) designed to build state capacity and support ongoing innovation in Medicaid and CHIP by providing targeted support to states' Medicaid delivery system reform efforts. IAP provides support in four functional areas, which IAP sees as the building blocks to delivery system reform: (1) data analytics, (2) quality measurement, (3) Value-Based Payment and financial simulations, and (4) performance improvement. With the Children's Oral Health VBP opportunity, IAP seeks to offer targeted technical support to state Medicaid/CHIP programs within the Value-Based Payment and financial simulations functional area.

¹ Dental Care, <https://www.medicaid.gov/medicaid/benefits/dental/index.html>

Overview of Technical Support

Each selected state will receive individualized technical support to strategically select, design, and test a Value-Based Payment approach intended to sustain the care delivery model at the original site and, eventually, to spread it to more sites in the state. This opportunity is open to states at all levels of expertise in Value-Based Payment approaches.

IAP will provide technical support with strategic selection, design, and testing of one or more of a range of Value-Based Payment approaches and related activities. Examples of additional topics for technical support include, but are not limited to:

- Shared savings and shared risk methodologies;
- Bundled payments and episodes of care (e.g., enhanced reimbursement to individual providers for a bundle of preventive services);
- Pay-for-performance approaches (e.g., bonus payments for evidence-based preventive services);
- Inclusion of children’s dental services in global payment models;
- Use of contractual vehicles to advance implementation of Value-Based Payment;
- Monitoring of Value-Based Payment approach outcomes;
- Factors for consideration in implementing a Value-Based Payment approach within Medicaid/CHIP managed care, including appropriate levels of risk, and contracting approaches;
- Alignment with the HHS VBP goals² and HHS Health Care Payment Learning and Action Network’s APM framework.³

Components of Technical Support

Technical support will be offered to participating states for up to two years. The individualized support will be based upon each state’s specific needs as identified through an Expression of Interest form, a pre-selection office hour conference call with IAP, and a goal setting process that each selected state will complete. Each selected state will be provided a technical support team comprised of Medicaid/CHIP policy experts, subject-matter experts, data management experts, and financial simulation experts. In addition to individualized support, states will have access to group technical support and peer-to-peer learning throughout the two years.

The content and method of technical support for selected states will be refined based on each state’s specific needs. The technical support process will involve the three steps outlined below with financial simulation support available throughout the process.

1. Select a Value-Based Payment approach by exploring in detail the state’s children’s oral health Value-Based Payment goals, objectives, and technical support needs, including:
 - a) Assessing children’s oral health Value-Based Payment options to match the state’s needs. This includes, for example, assessing the appropriateness of approaches such as bundled payments or gain- or risk-sharing approaches.
 - b) Understanding whether other payers (e.g., commercial) use children’s oral health Value-Based Payment approaches with which Medicaid/CHIP should align.
 - c) Aligning with the HHS VBP goals and HHS Health Care Payment Learning and Action Network’s APM framework.

² Better Care, Smarter Spending, Healthier People: Improving Our Health Care Delivery System, <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2015-Fact-sheets-items/2015-01-26.html>.

³ HHS Health Care Payment Learning and Action Network’s APM Framework White Paper, <https://hcp-lan.org/groups/apm-fpt/apm-framework/>.

2. Design a Medicaid/CHIP children’s oral health Value-Based Payment approach by, as needed:
 - a) Understanding the cost dimensions of the care delivery model with which the state is partnering.
 - b) Aiding in the design or development of the selected Value-Based Payment approach, including specific features.
 - c) Identifying children’s oral health outcomes of interest, potential data sources for data collection, and quality measures needed to test and implement the selected approach.
 - d) Understanding the health information technology, health information exchange, or interoperability infrastructure needed to support the selected Value-Based Payment approach and the extent to which it is already in place in the state or needs to be developed.
 - e) Helping to identify the appropriate Medicaid/CHIP authority for implementing the approach in FFS or managed care.
 - f) Assisting with the design of contract language, Requests for Information, incentive/penalty structures, or other state documents pertaining to the selected Value-Based Payment approach.
 - g) Aiding with the refinement of clinical protocols such as caries risk assessment, fluoride application, setting of self-management goals for patients, and motivational interviewing.

3. Test the selected and designed children’s oral health Value-Based Payment approach with the partner care delivery model site, including:
 - a) Identifying and helping to plan for what the site needs in order to participate in the test of the Value-Based Payment approach, such as data collection, tracking and reporting, decision-support tools, electronic health records, and performance improvement tools.
 - b) Assisting the state to design and implement appropriate monitoring and accountability mechanisms, including, but not limited to, strategies to guard against under-treatment, to improve oral health outcomes data quality, and to improve state oversight in managed care.
 - c) Testing the approaches through multiple iterations, as needed.
 - d) Supporting the state to engage with other relevant stakeholders in order to promote and eventually spread the care delivery model as supported by the selected Value-Based Payment model.

During the design and testing phases, the IAP technical support team will be available to provide assistance in developing financial simulations to, for example:

- a) Develop a methodology for beneficiary attribution.
- b) Characterize the type and strength of incentives.
- c) Identify how much risk providers can undertake.
- d) Simulate targets and overall performance.
- e) Estimate potential impacts on per capita costs and state spending.

CMCS, IAP, and CMMI will collaborate to ensure activities undertaken in this technical support opportunity align with lessons learned from other Value-Based Payment approaches and quality improvement projects, such as the State Innovation Model and children’s Oral Health Initiative.

State Selection Criteria

The Medicaid IAP seeks to engage with two to four state Medicaid/CHIP programs that meet the project’s selection criteria:

1. Ability to partner with a care delivery model site in the state.
 - a) A letter of commitment from the care delivery model site stating a willingness to partner with the state on this project must be included in the Expression of Interest.
 - b) The care delivery model must show evidence, through data, of an improvement in children’s oral health (e.g., reduced caries experience; reduced pain and infection; reduced caries risk status,

reduction in need for restorative care and/or hospital-based care) at the specific site with which the state proposes to partner.

See the Appendix for examples of care delivery models (not an exhaustive list). To learn more about the examples of care delivery models listed in the Appendix, contact Laurie Norris at laurie.norris@cms.hhs.gov.

2. State readiness, as demonstrated by:
 - a) Ability to clearly articulate specific technical support needs.
 - b) Capacity to begin work shortly after selection for technical support.
 - c) Ability to implement a Value-Based Payment approach with existing Medicaid/CHIP authorities or, alternatively, to amend an existing Medicaid/CHIP authority or to seek a relevant new Medicaid/CHIP authority (e.g., waiver or State Plan Amendment) within the timeframe of the IAP project.
3. Level of state's commitment to advancing children's oral health Value-Based Payment, as demonstrated by:
 - a) Support of the state Medicaid/CHIP Director.
 - b) Identification of a team lead. The team lead will oversee and be accountable for the day-to-day work in connection with this technical support.
 - c) Assurance from the state's Medicaid agency leadership that the team has or will have sufficient staff time and resources for this effort.

During the technical support timeframe (up to two years), participating states will be expected to engage in regularly scheduled meetings with the IAP and to contribute to agreed-upon deliverables.

How Can Interested States Apply to Participate?

Interested states can attend the informational webinar session on March 8, 2017, 3:00 PM-4:00 PM ET. IAP will accept state Medicaid/CHIP program Expressions of Interest, submitted to MedicaidIAP@cms.hhs.gov, through April 12, 2017, midnight ET. Additional information about the program can be found on the [Medicaid IAP](#) website. Direct questions to laurie.norris@cms.hhs.gov, subject line "Children's Oral Health."

IAP will host national webinars as well as make available tools and lessons learned to all states interested in learning more about Medicaid/CHIP children's oral health Value-Based Payment approaches.