Medicaid Innovation Accelerator Program (IAP) Children’s Oral Health Initiative (OHI) Webinar Resource List—*Value-Based Payment and Contracting Approaches for Caries Management: Implications for State Medicaid Programs*

**Description**

Intended to accompany the Innovation Accelerator Program (IAP) Children’s Oral Health Initiative (OHI) *Value-Based Payment and Contracting Approaches for Caries Management: Implications for State Medicaid Programs* webinar, this resource list provides hyperlinks and brief descriptions of relevant value-based payment (VBP) articles and toolkits, as well as other resources pertinent to the presentation.

**Value-Based Payment: Overview**

**Description of Value-Based Payment**

VBP refers to “payment models that range from rewarding for performance in fee-for-service (FFS) to capitation, including alternative payment models and comprehensive population-based payment.”¹

**General Value-Based Payment Resources**

*MEDICAID DELIVERY SYSTEM AND PAYMENT REFORM: A GUIDE TO KEY TERMS AND CONCEPTS*

This guide defines key terms and concepts in Medicaid health care delivery and payment systems. The guide is designed for individuals who want to understand the diversity of Medicaid reform initiatives underway or in development in states across the country.

*MEASURING SUCCESS IN HEALTH CARE VALUE-BASED PURCHASING PROGRAMS*

This report summarizes VBP program goals and provides recommendations for the design, implementation, monitoring, and evaluation of VBP programs.

*THE ROAD TO VALUE-BASED CARE*

This brief discusses considerations for implementing VBP models and implications of different VBP models for stakeholders.

*VALUE-BASED PAYMENTS IN MEDICAID MANAGED CARE: AN OVERVIEW OF STATE APPROACHES*

This brief explores state options for using managed care contracts to accelerate VBP adoption at the provider level.

**Oral Health Value-Based Payment Resources**

*MEDICAID CONTRACTING STRATEGIES TO IMPROVE CHILDREN’S ORAL HEALTH CARE ACCESS*

This brief explores contract-based options for improving oral health for children in Medicaid, as well as how states with managed care delivery systems can use contracting mechanisms and incentives.

*IMPROVING ORAL HEALTH CARE DELIVERY IN MEDICAID AND CHIP: A TOOLKIT FOR STATES*

This Centers for Medicare & Medicaid Services (CMS) toolkit is designed to help states achieve the goals of the CMS OHI through a data-driven quality improvement process that can be tailored to each state’s needs and priorities.

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Medicaid Oral Health Performance Improvement Project Resources

This document lists resources to support state Medicaid agencies and health plans in developing and implementing Medicaid oral health performance improvement projects.

Value-Based Payment in Caries Management

**Bundled Payments**

*Description of Bundled Payments*

“A payment structure in which different health care providers who are treating you for the same or related conditions are paid an overall sum for taking care of your condition rather than being paid for each individual treatment, test, or procedure. In doing so, providers are rewarded for coordinating care, preventing complications and errors, and reducing unnecessary or duplicative tests and treatments.”

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*Texas First Dental Home*

This website provides information on the Texas First Dental Home, a state Medicaid initiative aimed at improving the oral health of children aged 6 months to 3 years through bundled payments for a predefined set of preventive dental services, caregiver and parent counseling, and provision of educational materials.

*California Dental Transformation Initiative Domain 2 Resources*

This website provides resources on California’s Dental Transformation Initiative (DTI), which seeks to improve dental health for children enrolled in Medi-Cal by increasing the use of preventive dental services, preventing and treating early childhood caries, and increasing continuity of care for children.

Nonpayment

*Description of Nonpayment*

Denial of payment for certain services deemed to be of low clinical value unless strict criteria are met.

*Nonpayment Resource*

**Using Education, Collaboration, and Payment Reform to Reduce Early Elective Deliveries: A Case Study of South Carolina’s Birth Outcomes Initiative**

This report presents a case study highlighting the experience of South Carolina’s efforts to improve birth outcomes through, among other things, use of a nonpayment policy for early elective deliveries. Although nonpayment is not yet prominent in children’s oral health, this resource provides insight into the effects of nonpayment in the maternal and infant health field.

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Pay-for-Performance

**Description**
“The use of incentives (usually financial) to providers to achieve improved performance by increasing the quality of care and/or reducing costs. Incentives are typically paid on top of a base payment, such as fee-for-service or population-based payment. In some cases, if providers do not meet quality of care targets, their base payment is adjusted downward the subsequent year.”

**General Pay-for-Performance Resource**
**Key Issues in the Design of Pay-for-Performance Programs**
This paper provides an overview of key issues in the design of P4P programs.

**Pay for Performance: Case study**
**Texas Dental Pay-for-Quality (P4Q) Program**
The Dental Pay-for-Quality (P4Q) Program in Texas, active from 2014 through 2016, aimed to improve plan-level performance on four Medicaid dental measures and three CHIP dental measures.

Population-Based Payment Models

**Description**
For conditions: “A per-member per-month (PMPM) payment to providers for inpatient and outpatient care that a patient population may receive for a particular condition in a given time period, such as a month or year, including inpatient care and facility fees.”

Not condition specific: “A per-member per-month (PMPM) payment to providers for outpatient or professional services that a patient population may receive in a given time period, such as a month or year, not including inpatient care or facility fees. The services for which the payment provides coverage is predefined and could be, for example, primary care services or professional services that are not specific to any particular condition.”

**General Population-Based Payment Model Resources**
**Population-Based Payment Models: Overcoming Barriers, Accelerating Adoption**
This blog post from the Health Care Payment Learning and Action Network provides a brief introduction to population-based payment (PBP) models. It features information and resources on patient attribution, financial benchmarking, and strategies to accelerate PBP models.

**Oral Health and the Patient-Centered Health Home**
This action guide from the National Network for Oral Health Access assists organizations interested in integrating oral health into patient-centered health homes.

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4 Ibid.

5 Ibid.
Population-Based Payment: Case Studies

UCLA-First 5 LA 21st Century Dental Homes
This brief describes the University of California, Los Angeles, UCLA-First 5 LA 21st Century Dental Homes Project, which was designed to improve oral health care for children in 12 Federally Qualified Health Center clinic sites with collocated dental and primary care services in Los Angeles County.

Oregon’s Coordinated Care Model
Coordinated care organizations in Oregon provide integrated, patient-focused health care for Oregon Health Plan (Medicaid) beneficiaries and state employees. This report describes the model and its benefits for organizations and stakeholders.

Integrating Oral Health Into Oregon Medicaid’s Coordinated Care Model: Lessons for State Policymakers
This report from the National Academy for State Health Policy reviews the development and implementation of Oregon’s oral health incentive measures, explores partnerships critical to the success of oral health integration and future directions, and demonstrates how other states can use Oregon’s model to integrate oral health into their Medicaid programs.

State Perspective

Advancing Oral Health Through the Women, Infants, and Children Program: A New Hampshire Pilot Project
This report describes Pay-for-Prevention, a pilot project offering preventive dental services for children and pregnant women at Women, Infants, and Children (WIC) offices in New Hampshire. The report outlines early results and offers considerations for those interested in integrating oral health care with community-based services.

Effects of WIC Participation on Children’s Use of Oral Health Services
This article estimates the effects of the WIC program among Medicaid-enrolled children in North Carolina on oral health service utilization. Findings include that WIC participation is associated with increased likelihood of visiting a dentist and using preventive and restorative services and with decreased likelihood of emergency service utilization.

Clinical Insight

Oral Health Quality Improvement in the Era of Accountability
This report by Dr. Paul Glassman reviews trends and efforts to enhance oral health quality measurement and improvement and describes opportunities to use oral health measurement and quality improvement systems to improve and maintain oral health in the United States.

Dental Quality Alliance Measure Information
This website contains documentation of the Dental Quality Alliance’s measure development and maintenance process, as well as reports of measure use and updates in recent years.

Teledentistry: Improving Oral Health Using Telehealth-Connected Teams
This report aims to educate readers on the policy environment and methods needed to implement a telehealth-based oral health care system by reviewing recent changes to physical and oral health care systems and providing national recommendations to address them.