DHCS Dashboard Initiative

Considerations for Reporting on the Health of Children in Medi-Cal

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Medi-Cal Children's Health Advisory Panel
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Alignment with National Guidelines

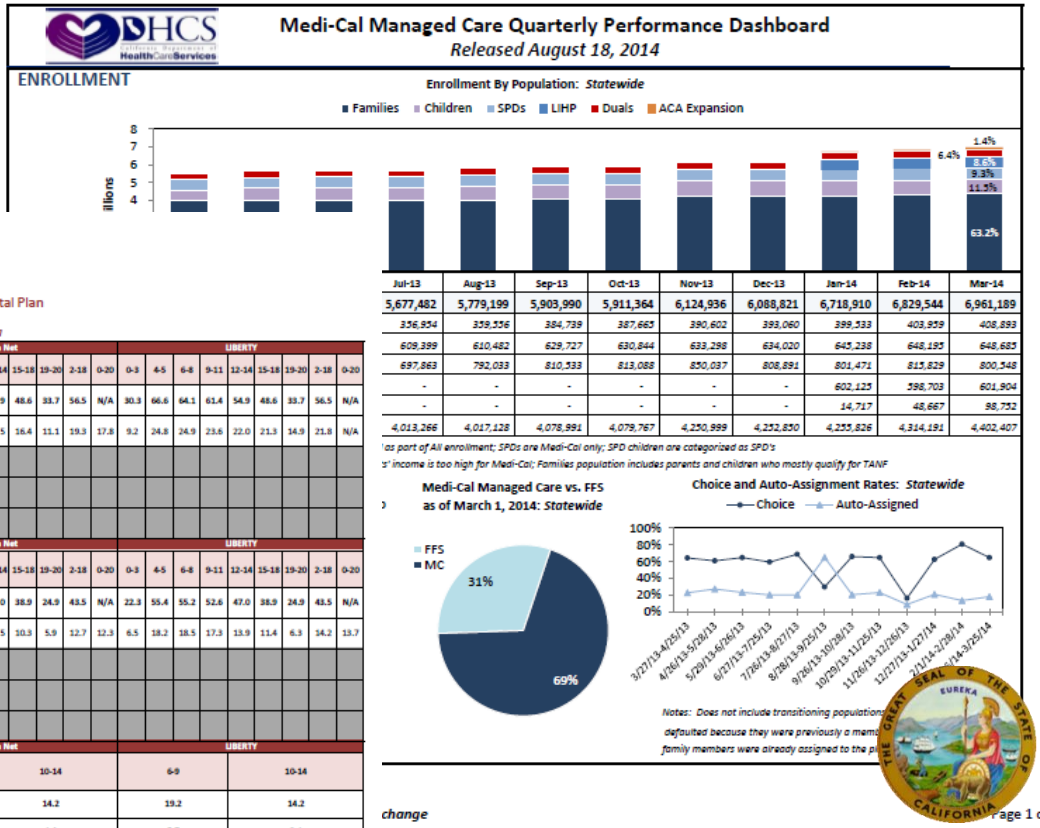
- National Quality Strategy
  - Implemented with the DHCS Strategy for Quality Improvement in Health Care
- National Quality of Care for the Children in Medicaid and CHIP Indicators
  - Reported to CMS via CMS Annual CARTS Report Indicators

CMS Core Children Measures

- Primary Care Access & Preventative Care
- Perinatal Health
- Management of Acute and Chronic Conditions
- Dental and Oral Health Services

Dashboard Examples

- **Managed Care**
  http://www.dhcs.ca.gov/services/Pages/MngdCarePerformDashboard.aspx
- **Dental Managed Care**
  http://www.denti-cal.ca.gov/WSI/ManagedCare.jsp?fname=d



Medi-Cal Managed Care Quarterly Performance Dashboard
Released August 18, 2014

ENROLLMENT

Enrollment By Population: *Statewide*

Families Children SPDs LIHP Duals ACA Expansion

Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14
5,677,482	5,779,199	5,903,990	5,911,364	6,124,936	6,088,821	6,718,910	6,829,544	6,961,189
356,954	359,556	384,739	387,665	390,602	393,060	399,533	403,959	408,893
609,399	610,482	629,727	630,844	633,298	634,020	645,238	648,195	648,685
697,863	792,033	810,533	813,088	850,037	808,891	801,471	815,829	800,548
-	-	-	-	-	-	602,125	598,703	601,904
-	-	-	-	-	-	14,717	48,667	98,752
4,013,266	4,017,128	4,078,991	4,079,767	4,250,999	4,252,850	4,255,826	4,314,191	4,402,407

as part of All enrollment; SPDs are Medi-Cal only; SPD children are categorized as SPD's
s' income is too high for Medi-Cal; Families population includes parents and children who mostly qualify for TANF

Medi-Cal Managed Care vs. FFS as of March 1, 2014: *Statewide*

FFS 31% MC 69%

Choice and Auto-Assignment Rates: *Statewide*

Choice Auto-Assigned

Notes: Does not include transitioning populations
defaulted because they were previously a memb
family members were already assigned to the p

change

Performance Measures & Benchmarks Reporting - 2014[1]
Geographic Managed Care - Sacramento County
Dental Plans Reporting: Access Dental Plan, Health Net Dental Plan, & LIBERTY Dental Plan
GMC Contracts began January 2013 and reporting is on the calendar year
Benchmarks were derived from 2010 statewide Denti-Cal Fee-For-Service data

Annual Dental Visits		Access										Health Net										LIBERTY									
Percentage of members who had at least one (1) dental visit during the measurement period.	Age Group	0-3	4-5	6-8	9-11	12-14	15-18	19-20	2-18	0-20		0-3	4-5	6-8	9-11	12-14	15-18	19-20	2-18	0-20		0-3	4-5	6-8	9-11	12-14	15-18	19-20	2-18	0-20	
Numerator: Number of members continuously enrolled in the same plan during the measurement period with no more than a one-month gap in eligibility who received any dental procedure (D0100-D9999) during the period.	Benchmark	30.3	66.6	64.1	61.4	54.9	48.6	33.7	56.5	N/A		30.3	66.6	64.1	61.4	54.9	48.6	33.7	56.5	N/A		30.3	66.6	64.1	61.4	54.9	48.6	33.7	56.5	N/A	
	Quarter 1	8.6	22.4	20.9	17.7	15.2	13.6	8.9	17.2	15.5		7.9	23.4	24.0	21.5	18.5	16.4	11.1	19.3	17.8		9.2	24.8	24.9	23.6	22.0	21.3	14.9	21.8	N/A	
Denominator: Number of members continuously enrolled in the same plan with no more than a one-month gap in eligibility.	Quarter 2																														
	Quarter 3																														
	Quarter 4																														

Use of Preventive Services		Access										Health Net										LIBERTY									
Percentage of members who received any preventive dental service during the measurement period.	Age Group	0-3	4-5	6-8	9-11	12-14	15-18	19-20	2-18	0-20		0-3	4-5	6-8	9-11	12-14	15-18	19-20	2-18	0-20		0-3	4-5	6-8	9-11	12-14	15-18	19-20	2-18	0-20	
Numerator: Number of members continuously enrolled in the same plan with no more than a one-month gap in eligibility who received any preventive dental service (D1000-D1999) in the measurement period.	Benchmark	22.3	55.4	55.2	52.6	47.0	38.9	24.9	43.5	N/A		22.3	55.4	55.2	52.6	47.0	38.9	24.9	43.5	N/A		22.3	55.4	55.2	52.6	47.0	38.9	24.9	43.5	N/A	
	Quarter 1	5.6	13.2	12.8	11.5	9.6	7.0	3.4	9.6	9.3		5.1	17.1	17.3	15.2	13.5	10.3	5.9	12.7	12.3		6.5	18.2	18.5	17.3	13.9	11.4	6.3	14.2	13.7	
Denominator: Number of members continuously enrolled in the same plan during the measurement period with no more than a one-month gap in eligibility.	Quarter 2																														
	Quarter 3																														
	Quarter 4																														

Use of Sealants		Access				Health Net				LIBERTY			
Percentage of members ages 6-9 and 10-14 continuously enrolled in the same plan during the measurement period with no more than a one-month gap in eligibility who received a dental sealant on at least one permanent molar.	Age Group	6-9		10-14		6-9		10-14		6-9		10-14	
Numerator: 1.) Number of members ages 6-9 continuously enrolled in the same plan during the measurement period with no more than a one-month gap in eligibility who received a dental sealant (D1351) on a permanent first molar (tooth number = 3, 14, 19, 30). 2) Numberof members ages 10-14 continuously enrolled in the same plan during the measurement period with no more than one-month gap in eligibility who recieved a dental sealant(D1351) on a permanent second molar(tooth number=2,15,18,31).	Benchmark	19.2		14.2		19.2		14.2		19.2		14.2	
	Quarter 1	3.0		1.6		4.0		1.4		5.7		2.1	
Denominator: Number of members ages 6-9 and 10-14, respectively, continuously enrolled in the same plan with no more than a one- month gap in eligibility	Quarter 2												
	Quarter 3												
	Quarter 4												

Data Updated as of July 10, 2014
Quarterly self-reported data uses the eligibility criteria of continuous enrollment with no gaps. Quarter 1 is cumulative data from January 1, 2014 through March 31, 2014.
[1]*Reporting is based on incomplete run-out; Plans are contractually allowed to report encounters for up to six months following the date of encounter.*
[2]*Report is unavailable at this time because the calculations of the performance measure require two years of continuous enrollment in a plan.*

De-Identification for Public Reporting

- Health Insurance Portability Accountability Act (HIPAA) De-Identification Standard
- Expert Determination used to support reporting at sub-state geographies (i.e. county) and at monthly or quarterly levels
- Balance between supporting transparency while protecting privacy

Considerations

- Use of Benchmarks, Targets, and Thresholds
- Change Management
  - Develop the Change Management Plan & Live by It
  - Adoption Progress
- Prioritization to Support Focused Improvements
  - Measurement and Reporting
  - Interventions for Improvement

DHCS Dashboard Initiative - Coming Soon

The Department of Health Care Services is developing a comprehensive dashboard initiative to strengthen public reporting practices throughout the department while improving transparency and accountability.

This effort will be carried out in conjunction with the department's ongoing Stakeholder Engagement Initiative, and will follow principles established in the DHCS Strategic Plan and the Strategy for Quality Improvement in Health Care.

DHCS will regularly consult with stakeholders throughout the development of this initiative. Over the long term this Dashboard Initiative will help the department consistently measure its progress toward goals, and more effectively communicate results and key information to department staff, providers/partners, and stakeholders.

Long-term goals of this comprehensive approach include:

1. Build on lessons learned from the ongoing dashboard efforts targeting managed care services, dental services, and mental health services.
2. Design an intuitive, overarching technical framework to provide a consistent display format for the array of useful data elements.
3. Develop a department-wide dashboard with information on cross-cutting issues and integrated care.
4. Provide useful links to other DHCS data sources and quality measures, as well as to the open data portal.
5. Work with the Medi-Cal Children's Health Advisory Panel (MCHAP) and stakeholders on a comprehensive children's health dashboard.

DHCS
California Department of
HealthCareServices