



Institute for Child Health Policy at the University of Florida
Texas External Quality Review Organization

Annual Quality of Care Report

Fiscal Year 2007

The Children's Health Insurance Program (CHIP) Dental in Texas

Prepared by

**The Institute for Child Health Policy
University of Florida**

**The Texas External Quality Review Organization
for Medicaid Managed Care and CHIP**

**Measurement Period:
September 1, 2006 through August 31, 2007**

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Introduction

Studies in disparities in oral health and access to care have found that children from low-income families experience the greatest amount of oral disease, the most extensive disease, and the most frequent use of dental services for pain relief.¹ However, these children also have the fewest overall dental visits. To address unmet dental care needs among children in the Texas Children's Health Insurance Program (CHIP), dental services were added to CHIP coverage, effective beginning on April 1, 2006. All CHIP enrollees are eligible for dental benefits. The Health and Human Services Commission (HHSC) selected Delta Dental as the sole dental benefit contractor for CHIP. Benefits include preventative services, such as check-ups, cleanings, x-rays, and sealants, and therapeutic services, such as fillings, extractions, crowns/caps, and root canals.

This report provides results for the Healthcare Effectiveness Data and Information Set (HEDIS®) Annual Dental Visit measure among children enrolled in Texas CHIP from September 1, 2006 to August 31, 2007. This measure calculates the percentage of members who had at least one dental visit during the measurement year. Comparisons are provided to other Medicaid programs nationally, using data submitted by Medicaid Managed Care plans to the National Committee for Quality Assurance (NCQA).

Data Sources

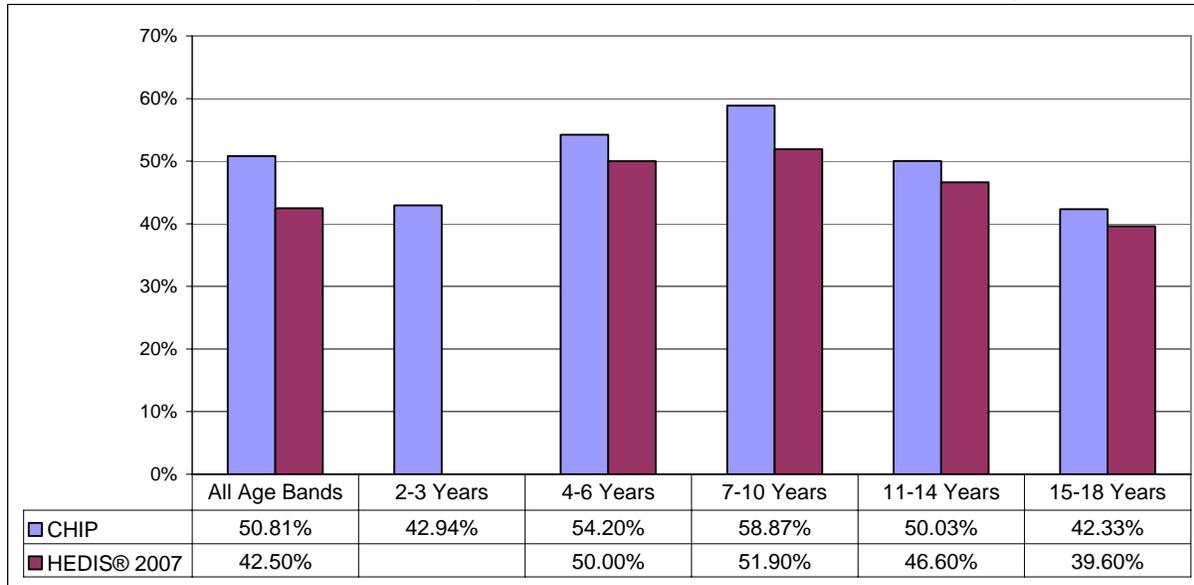
Two data sources were used to calculate the Annual Dental Visit measure: (1) person-level enrollment information and (2) person-level healthcare claims and encounter data. The enrollment files contain information about the person's age, gender, the MCO in which the person is enrolled, and the number of months the person has been enrolled in the program. The person-level claims and encounter data contain Current Procedural Terminology (CPT) codes, place of service (POS) codes, and other information necessary to calculate quality of care indicators.

¹ Edelstein, B.L. 2002. "Disparities in Oral Health and Access to Care: Findings of National Surveys." *Ambulatory Pediatrics* 2(2 suppl): 141-147.

Chart 1. HEDIS® Annual Dental Visit

CHIP MCO – September 1, 2006 to August 31, 2007

CHIP Eligibles = 109,845



Key Points:

1. **Chart 1** provides the percentage of CHIP members 2 to 18 years of age who had at least one dental visit during the measurement year. While HEDIS® specifications for this measure extend to members 21 years old, results for members 19 to 21 years of age are not shown here. Members in this age group are considered outliers because CHIP members phase out of the program after age 18. However, they are included in the calculation of the overall measure mean rate.
2. The percentage of CHIP members who had at least one dental visit exceeded the HEDIS® national mean for all age groups. HEDIS® national results for children two to three years old were not available for comparison.
3. The highest quality of dental care rate in Texas was observed among children seven to 10 years old; 59 percent of CHIP Dental members had at least one dental visit during the measurement period, compared with 52 percent nationally.
4. The total number for CHIP Eligibles includes only those members who were continuously enrolled during the measurement period with no more than one month gap in coverage.