**Medicaid Innovation Accelerator Program (IAP) Children's Oral Health Initiative (OHI)
Webinar Resource List:** *Medicaid Value-Based Payment Approaches for Children's Oral Health*

Description

Intended to accompany the IAP OHI *Medicaid Value-Based Payment Approaches for Children's Oral Health* webinar, this resource list provides hyperlinks and brief descriptions of relevant Value-Based Payment articles and toolkits.

Value-Based Payment: Overview

Description of Value-Based Payment

Value-Based Payment (VBP), also known as an Alternative Payment Model (APM), refers to a broad set of performance-based payment strategies that link financial incentives for health care to the quality and value of services provided.

General VBP 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 VBP Resources

Medicaid Contracting Strategies to Improve Children's Oral Health Care Access
The 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 Oral Health Initiative (OHI) through a data-driven quality improvement (QI) process that can be tailored to each state's needs and priorities.

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.

Description of Bundled Payments

Bundled payments for oral health services in Medicaid and CHIP focus on enhanced reimbursement to a single provider for a set of services administered in an episode of care. Bundled payments present a greater financial incentive to providers than a typical fee-for-service arrangement.

General Bundled Payment Resources

Episode of Care or Bundled Payments – Health Cost Containment
This website provides links to resources on bundled payments, including examples of federal, state, and local initiatives.

Bundled Payments: Case Studies

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 payment 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.

Pay-for-Performance

Description

In a pay-for-performance (P4P) system, providers or health plans earn financial rewards if they meet predetermined benchmarks of health care quality, performance, or efficiency. P4P programs also can carry financial penalties for failure to achieve specified performance levels.

General P4P Resources

Pay-for-Performance
This brief discusses P4P in the context of the Affordable Care Act. Concerns and next steps also are outlined.

Key Design Elements of Pay-For-Performance Programs
This paper provides an overview of key issues in the design of P4P programs.

P4P: Case studies

The Preventistry℠ Incentive
DentaQuest's commercial Preventistry program provided financial incentives to dentists to increase the proportion of age-appropriate children who received a dental sealant or fluoride varnish application.

Texas Dental Pay-for-Quality (P4Q) Program
The Dental 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

Also referred to as *global payment* or *total cost of care payment* models, population-based models (PBPs) incentivize and reward health care providers for delivering high-quality, person-centered care within a defined or overall budget.

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 models. It features information and resources on patient attribution, financial benchmarking, and strategies to accelerate PBP models.

Oral Health and Patient-Centered Health Home
This action guide from the National Network for Oral Health Access (NNOHA) assists organizations interested in integrating oral health into Patient-Centered Health Homes (PCHH).

PBP: 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 (FQHC) clinic sites with co-located dental and primary care services in Los Angeles County.

Oregon's Coordinated Care Model
Coordinated care organizations (CCOs) 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.

Supplemental Reform Strategies

Description

Supplemental reform strategies represent initiatives outside of payment or delivery reform that are intended to improve quality (including patient experience), reduce cost, or improve access to care.

Supplemental Reform Strategies: Case Studies

New Hampshire Pay-for-Prevention 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.