

Use of Preventive Dental Services

SUMMARY

- There is no established measure steward. The measure is not National Quality Forum endorsed. The measure is not risk adjusted.
- The Current Dental Terminology (CDT) codes listed in this specification align with the CDT 2022 publication that is published by the American Dental Association.
- The measure, which is constructed from Healthcare Evidence Initiative (HEI) data, is reported at the Qualified Dental Plan (QDP) product level.

Description

The percentage of adult members who received any preventive dental service during the measurement period.

Note: A higher rate indicates better performance.

Eligible Population

Product lines	Individual On-exchange (Covered California Small Business Excluded).
Age	19 years and older during the measurement year. Age is calculated if the subject meets the age criterion at the last day of the reporting year.
Continuous enrollment	At least 90 days or more of continuous enrollment in the same Qualified Dental Plan within the measurement period.
Allowable gap	Not Applicable.
Anchor date	None.
Benefit	Dental.

Administrative Specification

Denominator The eligible population.

Numerator

- Step 1** Using both professional and facility claims, determine the number of members within the measurement period who received:
- Any preventive dental service as CDT codes D1000-D1999 and CPT code 99188
- Periodontal scaling and root planing; full mouth debridement; periodontal maintenance: D4341, 4342, 4346, 4355, 4910
- OR
- ICD 10: K023, K0251, K0261, K036, K0500, K0501, K051, K0510, K0511, Z012, Z0120, Z0121, Z293, Z299, Z98810

Step 2 Calculate Percentage of Preventive Dental Services =

(Number of members who receive any preventive dental service) / (Eligible Population) * 100

Notes

- Do not include denied claims when assessing the numerator for this measure.
- This measure has been stratified by race and ethnicity. Refer to Appendix A for the Covered California Race Ethnicity Stratification Measure Specification for more information.
- DHCS uses: Number of members with at least 90 days continuous enrollment in the same plan within the measurement period who received any preventive dental service (D1000-D1999 and CPT Code 99188) or dental encounter at a SNC ICD 10: K023 K0251 K0261 K036 K0500 K0501 K051 K0510 K0511 Z012 Z0120 Z0121 Z293 Z299 Z98810 in the measurement period.