

**MINUTES OF THE QUALITY IMPROVEMENT AND PATIENT
PROTECTION COMMITTEE**

Meeting of May 18, 2016

MASSACHUSETTS HEALTH POLICY COMMISSION

**THE QUALITY IMPROVEMENT AND PATIENT PROTECTION COMMITTEE OF THE
MASSACHUSETTS HEALTH POLICY COMMISSION**
Health Policy Commission
50 Milk Street, 8th Floor
Boston, MA

Docket: May 18, 2016, 9:30AM

PROCEEDINGS

The Massachusetts Health Policy Commission (HPC) held a meeting of the Quality Improvement and Patient Protection (QIPP) Committee on Wednesday, May 18, 2016, at the HPC's offices, 50 Milk Street, 8th Floor, Boston, MA.

Members present included Mr. Martin Cohen (Chair, QIPP), Dr. Donald Berwick, Dr. Wendy Everett, and Undersecretary Alice Moore, designee for Secretary Marylou Sudders.

The presentation from the committee meeting can be found [here](#).

Mr. Cohen called the meeting to order at 9:30 AM and offered a brief introduction.

ITEM 1: Approval of minutes

Mr. Cohen asked for a motion to approve the minutes from April 6, 2016. **Undersecretary Moore** motioned to approve the minutes. **Dr. Everett** seconded the motion. The members voted unanimously to approve the minutes.

ITEM 2: Discussion of Findings from HPC's Oral Health Brief

Mr. David Seltz, Executive Director, reviewed the day's agenda.

Mr. Seltz stated that the first item before the Committees was a presentation on the HPC's research around oral health related emergency department (ED) use. Mr. Seltz noted that the HPC's upcoming policy brief on oral health includes a variety of new analyses and findings. For key findings from the upcoming brief, please see slide 6.

Mr. Seltz thanked Senator Harriette Chandler for her work to advance oral health care in the State Senate.

Mr. Seltz introduced Dr. David Auerbach, Deputy Director for Research and Cost Trends and Ms. Natasha Reese-McLaughlin, Senior Research Associate for Research and Cost Trends.

Dr. Auerbach stated that the HPC has identified emergency department utilization as an area of ongoing research. For more information, see slide 7.

Ms. Reese-McLaughlin outlined the history of oral health care in Massachusetts. For more information, please see slides 8 to 9.

Ms. Reese-McLaughlin presented the HPC's findings related to ED use for preventable oral health conditions. For more information, see slides 10 to 14.

Ms. Reese-McLaughlin reviewed exemplar oral health interventions, including the use of mid-level dental providers and teledentistry. For more information, see slides 15 to 17.

Mr. Cohen asked whether the model of dental care (i.e. operating only under normal business hours with few practitioners in a given office) is contributing to the increase in avoidable oral health ED visits. Mrs. Reese-McLaughlin replied that 60% of ED visits for oral health conditions occur during normal business hours (9:00 AM – 5:00 PM, Monday through Friday) when regular dentist offices would be open.

Mr. Cohen asked whether community health centers could play a larger role in dental care for underserved areas. Ms. Reese-McLaughlin noted that the HPC is researching the potential role of community health centers.

Mr. Seltz noted that Minnesota allows mid-level dental practitioners (“dental therapists”) to provide services at community health centers, which augments the number of dentists and helps alleviate avoidable oral health ED visits. He further noted the role of dental therapists in private practices to augment their ability to serve patients, especially in the Medicare population.

Dr. Berwick noted that the Alaskan dentistry system has integrated dental therapists to effectively serve rural populations. Mr. Seltz added that the Alaska program requires clinical supervision by a fully licensed dentist. He noted that individuals must attend additional training to be certified as a dental therapist.

Dr. Berwick asked HPC staff for an update on Massachusetts legislation relative to dental reform. Mr. Seltz responded that Senator Chandler and Representative Pignatelli have introduced legislation, which is still pending this legislative session.

Dr. Everett asked for clarification on the position of the American Dentistry Association (ADA). She noted that the HPC's upcoming policy brief on oral health could be a useful tool when discussing potential legislation. Mr. Seltz responded that he could not comment on the position of the ADA.

Mr. Seltz stated that the HPC's research points to an opportunity to deliver care at the right location and right cost. He noted that various legislators and stakeholders have used the HPC's findings.

Undersecretary Moore noted that the MassHealth data included in the report is from 2014. Since then, MassHealth has participated in a variety of different health initiatives and

education programs on oral health. Undersecretary Moore highlighted various ongoing MassHealth programs in this area.

Mr. Cohen noted that the use of varnishes and dental sealants should be another area of focus for policymakers in their efforts to encourage prevention.

ITEM 3: Update on Regulations Governing the Office of Patient Protection

Mr. Seltz introduced Mr. Steven Belec, Director of Office of Patient Protection (OPP), and Ms. Kate McCann, Associate Counsel, to present on proposed updates to regulations governing OPP.

Ms. McCann noted that the day's presentation will introduce the need for the proposed changes and a draft timeline for the regulatory process.

Mr. Belec stated that carriers are currently required to submit information about their internal appeals process for denied insurance claims when a member is denied coverage based on a determination of medical necessity.

Mr. Belec stated that Chapter 58 of the Acts of 2016 mandates that OPP collect additional information on claims and claim denials. He noted that this additional information would be reported through existing annual carrier reports. For more information, see slide 19.

Mr. Belec further noted that new requirements will greatly expand the HPC's data on internal claims denials. He noted that, under Chapter 58, the HPC will collect data on claims adjudications that occur prior to the internal appeals process. With this information, the HPC will be able to determine the basis for coverage denial.

Ms. McCann reviewed considerations and next steps for the HPC. She stated the HPC is working to reduce the administrative burden on carriers from these additional requirements. For more information, see slide 20.

Ms. McCann noted that there is some jurisdictional overlap with regard to parity reporting. She stated that some of the information outlined in the statute is already reported to the Massachusetts Division of Insurance (DOI). She stated that HPC staff will be working closely with DOI on these topics.

Mr. Belec reviewed the proposed timeline for updated regulations. He noted that the HPC hopes to promulgate regulations by January 1, 2017. For more information, see slide 21.

Mr. Seltz asked Ms. Johnson to explain why this language was included in Chapter 58. Ms. Johnson responded that Chapter 58 was designed to broadly expand transparency so policymakers can better understand and more effectively address substance use disorder issues.

Undersecretary Moore noted that the Executive Office of Health and Human Services has completed studies on ED boarding to understand whether insurance companies have a “workaround,” to prior authorization. She asked whether the HPC was completing research in this area. Ms. Johnson replied that the HPC is working with DOI to ensure that reporting captures prior authorization. She stated that she would follow up with additional information in this area at a future meeting.

Ms. Johnson stated that the reporting requirements under Chapter 58 are similar to a statute in Vermont, which examines the range and magnitude of denials so that regulators can analyze the percentage of denials by carrier. Ms. McCann added that Connecticut has a similar claims denial framework and issues reports on those findings.

ITEM 4: Adjournment

Mr. Cohen adjourned the meeting at 10:13 AM.

At this point, the QIPP and Cost Trends and Market Performance Committees held a joint public listening session on Out-of-Network Billing. A recording of the session can be found [here](#).