

# Maternity Preventive Dental Pay-for-Performance (P4P) Program



**As part of our ongoing commitment to improving maternal health, we are offering the Maternity Preventive Dental P4P Program to our network dental providers who participate in delivering these essential services.**

## PROGRAM GOALS

The goals of this program are to assist our pregnant members 21 years of age and older by:

- Reducing risks for dental caries
- Increasing quality oral health services
- Reducing risks related to poor dental hygiene
- Providing early intervention in the disease prevention process
- Improving birth outcomes

## POPULATION INCLUDED IN THIS PROGRAM

- Pregnant members 21 years of age or older who have been continuously enrolled with the plan for 90 days within the measurement year

## EPISODES OF CARE INCLUDED IN THIS PROGRAM

**The episode of care must include one of the following oral evaluation procedures:**

- D0120 Periodic oral evaluation – established patient
- D0150 Comprehensive oral evaluation – new or established patient

**And** the episode of care must also include:

- D1110 Dental prophylaxis – adult

*(continued on side 2)*



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In most cases, the two components of the episode of care will be completed on the same date of service. When this is not possible, the provider will have 30 days to complete the episode of care. **For example:** If the oral evaluation is completed on the first day of the month, then the office will have until the end of the month to perform a prophylaxis.

### Payment methodology\*

Claims submitted following the criteria listed earlier will be reimbursed as follows:

Patient type	Fee	Limitations
21 years and older	\$10	Once per member per calendar year

\*The sum of the incentive payments for the Quality Performance component of the program will not exceed 33% of the total compensation for dental and administrative services. Only fee-for-service payments are considered part of the total compensation for dental and administrative services.

### Payment schedule

Payments will be paid quarterly as follows:

Calculation and payment date	July	October	January	April
Reporting period	January 1 to March 31	April 1 to June 30	July 1 to September 30	October 1 to December 31

We are pleased to offer this unique opportunity to assist you in making a significant impact on early intervention, and improvements in the oral health of our pregnant membership. Thank you for your participation in our network, and for your continued commitment to the care of our members.

For more information about our dental programs, visit [www.keystonefirstpa.com](http://www.keystonefirstpa.com) > **Providers** > **Resources** > **Dental program**.

**Please note: Pregnant members younger than 21 will continue to be included in our Pediatric Preventive Dental Pay-for Performance (P4P) Program.**

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