

**Performance Measure 6:** Assess the contribution of safety net providers in meeting the need for primary care, mental health, and dental services

**Last Year's Accomplishments**

This is a process measure that will be measured by the extent to which three benchmarks can be reached. The target for Calendar Year 2007 was that one benchmark: "Method is developed to measure access to care" would be reached. Ohio did meet its objective.

A. Develop a methodology that can be used across the Division of Family and Community Health Services to measure gaps in access to primary care, mental health, and dental services and the contribution of safety net providers in meeting these needs.

This infrastructure-level strategy included the following activities: 1) conduct literature review to identify existing methodologies to measure gaps in access to primary care, mental health, and dental services and the contribution of safety net providers in meeting these needs; 2) develop consensus on the definitions of terms such as access, safety net providers, unmet need, primary care services, mental health services, dental services, medical home, medically handicapping conditions, and children with special health care needs; 3) access technical assistance from MCHB on approaches to development of the methodology; 4) develop/adapt a methodology to pilot (see strategy C.).

Activities 1(literature search) and 2 (definition of terms) have been completed (see attached). Activity 3 (accessing TA) was not necessary as the workgroup was not at a stage to best utilize TA. The ODH Bureau of Oral Health Services (BOHS) was successful in initiating the steps needed to begin the development of a planning model (activity 4) through a collaborative effort with Anthem Foundation of Ohio, Osteopathic Heritage Foundations, and Sisters of Charity of Canton.

B: Increase ODH capacity to measure the efficiency and productivity of safety net dental clinics.

This infrastructure-level strategy included the following activities: 1) develop capacity to analyze Medicaid data for safety net dental clinics; 2) assess federal Uniform Data System (UDS) data for Federally Qualified Health Centers (FQHCs); 3) develop and implement a plan to conduct in-depth analyses of BOHS subgrantee safety net dental clinics; 4) collaborate with Anthem on the development and evaluation of its safety net dental clinic technical assistance project, especially the front-end assessment portion; and 5) assess the need for an ODH survey of all safety net dental clinics in Ohio.

Activities 1, 2 and 3 have been completed or are currently underway. A collaboration was formed among BOHS, Anthem and Osteopathic Heritage Foundations, and Sisters of Charity to contract with a consulting firm to conduct an in-depth assessment of financial and operational activities of six Ohio safety net dental clinics. Once the assessment is complete, the firm will provide technical assistance to improve efficiencies and sustainability. BOHS is serving on the advisory committee of

this project with an interest in replicating this model with ODH-funded safety net dental clinics. Once the assessment is complete, the firm will provide technical assistance to improve efficiencies and sustainability. BOHS is serving on the advisory committee of this project with an interest in possibly replicating this model with ODH-funded safety net dental clinics. Site visits to the selected clinics are under way.

Activities 4 and 5 have been completed or are currently underway. BOHS, in collaboration with Anthem Foundation and Georgetown University, will develop a "one-stop shop" web-based information center for Ohio dental safety net clinics. An advisory committee consisting of representation from Ohio and national experts has met to discuss the make-up of this site. A distance learning component will be housed on this site and pertinent subjects of interest will be developed for clinical and non-clinical staff. Distance learning will allow clinical staff to obtain needed credit hours for licensure without a major disruption in service to patients. This project will be linked to the web-based "how-to start a dental clinic" manual.

C. Assess capacity to measure gaps in access to primary care and the contribution of safety net providers in meeting these needs.

This infrastructure-level strategy proposed the application of the model identified in strategy A to be used in a pilot for primary care services. The model under development by BOHS may be applied to primary care when it is complete. Whether the model can be applied is unknown at this time.