

Dental Quality Alliance Request for Proposals Testing Patient-Reported Outcome Performance Measures (PRO-PMs) based on Oral Health-Related Quality of Life (OHRQoL)

Frequently Asked Questions

Which OHIP instrument is the basis for measure development and testing?

OHIP-5 (Naik A, John MT, Kohli N, Self K, Flynn P. Validation of the English-language version of 5-item Oral Health Impact Profile. J Prosthodont Res. 2016 Apr;60(2):85-91. doi: 10.1016/j.jpor.2015.12.003. Epub 2016 Jan 11. PMID: 26795728; PMCID: PMC4841723.) Please refer to the [RFP](#) for additional details.

Should both cross-sectional and longitudinal outcomes be included in the study methodology?

The primary focus of the project is a point-in-time comparison between reporting entities rather than assessing performance over time. However, the DQA wishes to understand the feasibility of assessments of performance over time. If the respondent wishes to further validate measures to assess performance over time, such proposals are welcome; however, the budgetary and time frame impacts [needed for repeated surveys] should be clearly indicated.

Is there a dollar amount associated with the RFP?

No specific budget is included in this RFP. Each proposal will be evaluated independently based on data collection needs, appropriateness and completeness of testing methodology, and experience of identified project personnel. Proposed budget should be aligned with effort noted in proposal. The DQA does not support indirect costs.

What should be the volume in terms of data points?

Data from at least 4 program- and plan-level entities should be included. Both program-level (e.g., Colorado Medicaid or North Carolina Medicaid or Medicare population in North Carolina etc.) and plan-level (e.g. BlueCross of Michigan) data should be included with separate testing at each level. The sample size of patients within each program and plan should be proposed by the respondent as part of the testing methodology based on power calculations or other statistical support.

Can you collaborate with other academic institutions: would you be eligible?

Yes. The role and experience of collaborators should be described. Letters of support from collaborators should be included.

Does this project need to start from scratch in terms of collecting the data for surveys?

No. Data previously collected may be considered if it is demonstrated to meet testing criteria. Respondents proposing to use previously collected data should describe the methods used to collect the data (addressing the considerations detailed in the RFP related to sampling methodology, modes of administration, response rates, data quality control, etc.) and the applicability of these data for a program/plan level measure focused on adults.

Can you provide additional clarification on what is meant by entities, programs and plans?

An entity can be any program (e.g., Colorado Medicaid or North Carolina Medicaid or Medicare population in North Carolina etc.) or plan (e.g., BlueCross of Michigan) level organization. The PRO-PMs are to be tested as program and plan population health status quality measures for the adult population. Testing must demonstrate the ability to make comparisons at the program and plan levels (i.e., not at a clinic or clinician level). The DQA is interested in receiving proposals that reflect a diversity of entities, such as those that include commercially- insured and publicly- insured populations. Respondents should describe how the included entities and populations will demonstrate the ability to make comparisons at the program and plan levels as well as the implications for representativeness and generalizability to other organizations and populations.