

Quality Measurement to Assess High-Risk Opioid Prescribing and Access to Opioid Use Disorder Treatment

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Objectives





Provide Background



Performance data

Review performance data for current quality measures



Key takeaways and future work

Summarize key takeaways and discuss future implications and work



NCQA HEDIS® Measure Set











Health care's most-used tool for improving performance

Asks how often insurers provide evidence-based care to support more than 70 aspects of health

Quality Measures in HEDIS must meet desirable attributes:



Relevance



Scientific Soundness



Feasibility

NCQA HEDIS® 2020 Measures

Substance Use

Topic	Measure	
Screening	Unhealthy Alcohol Use Screening & Follow-up (ASF)	
Overuse/ Appropriateness	Use Of Opioids At High Dosage (HDO)	
	Use Of Opioids From Multiple Providers (UOP)	
	Risk Of Chronic Opioid Use (COU)	
Coordination and Continuation of Care	Follow-Up After Emergency Department Visit For Alcohol & Other Drug Dependence (FUA)	
	Follow-Up After High Intensity Care for Substance Use Disorder (FUI) *New, HEDIS 2020	
	Pharmacotherapy for Opioid Use Disorder (POD) *New, HEDIS 2020	
Access To Care	Initiation & Engagement Of Alcohol & Other Drug Abuse Or Dependence Treatment (IET)	
Utilization	Identification Of Alcohol & Other Drug Services (IAD)	

Background and Importance



High-dose opioids and use of multiple providers puts individuals at increased risk for opioid-related overdose and death



Of the nearly **20 million** individuals in the U.S. with a SUD (including those with opioid use disorder), **less than 20 percent receive treatment**



Variation and room for improvement observed among health plans on quality measures that assess high-risk opioid prescribing practices and SUD treatment

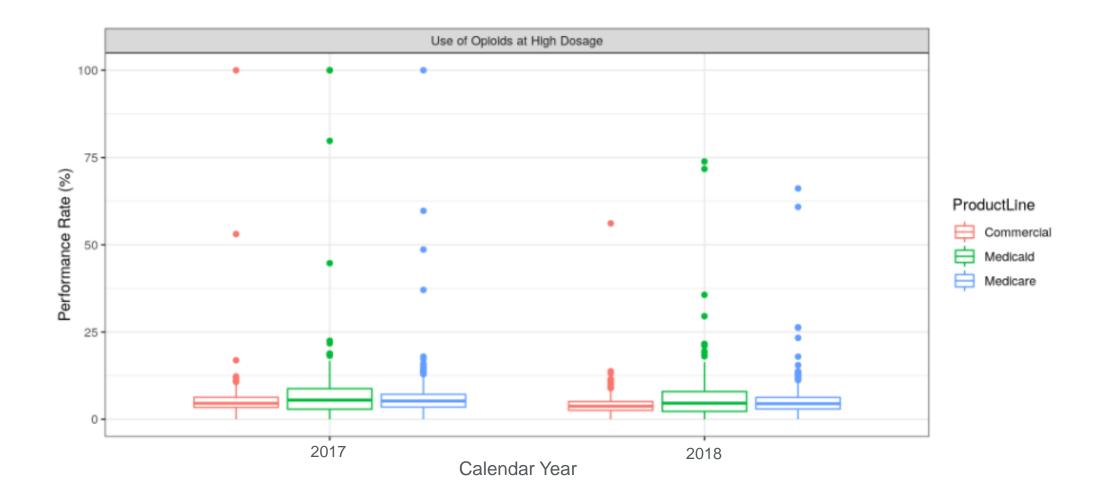
NCQA HEDIS® 2020 Measures

Opioid Overuse

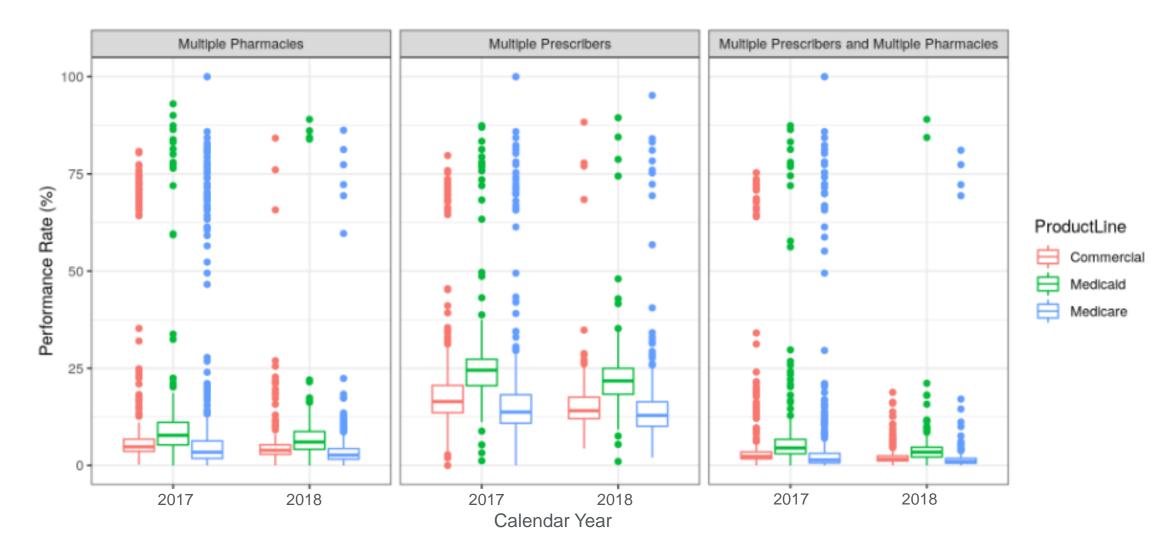
Measure	Use Of Opioids At High Dosage (HDO)	Use Of Opioids From Multiple Providers & Multiple Pharmacies (UOP)	
Denominator	Members 18 + Years Of Age Receiving 2+ Prescriptions For Opioids Lasting ≥15 Days During The Measurement Year		
Exclusions	Hospice, cancer, SCD	Hospice	
Numerator	Members With Average Morphine Milligram Equivalent (MME) ≥120 during treatment period Note: Measure updated for calendar	 Multiple Prescribers: Four Or More Prescribers Multiple Pharmacies: Four Or More Pharmacies 	
	year 2019 to look for average daily dosage ≥90 MME	3. Multiple Prescribers & Multiple Pharmacies	
Data Source	Administrative Claims		

Note: These measures have been adapted, with permission of the measure developer, Pharmacy Quality Alliance

Use of Opioids at High Dosage (Calendar Years 2017 and 2018)



Use of Opioids from Multiple Providers (Calendar Years 2017 and 2018)

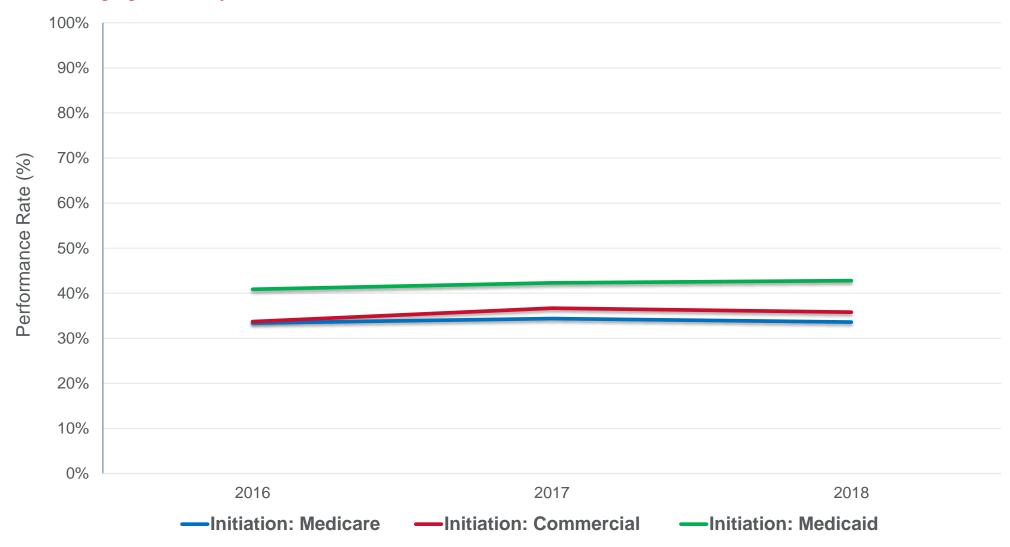


NCQA HEDIS® 2020 Measures

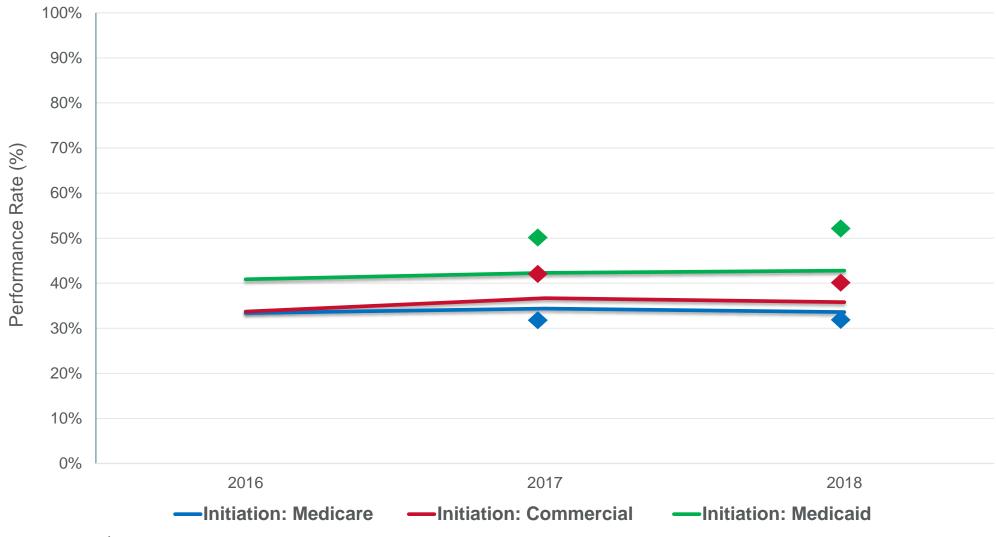
Substance Use Disorder Treatment

Initiation & Engagement Of Alcohol & Other Drug Abuse Or Dependence Treatment (IET)		
Denominator	Members 13+ with a new episode of alcohol or other drug (AOD) abuse or dependence during the measurement year	
Numerator	 Initiation Of AOD Treatment: Members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth or medication assisted treatment (MAT) within 14 days of the diagnosis 	
	 Engagement Of AOD Treatment: Members who initiated treatment and who had two or more additional AOD services with a diagnosis of AOD or MAT within 34 days of the initiation visit 	
Data Source	Administrative Claims	

Initiation and Engagement of Treatment: Initiation Rate (Calendar Years 2016-2018)

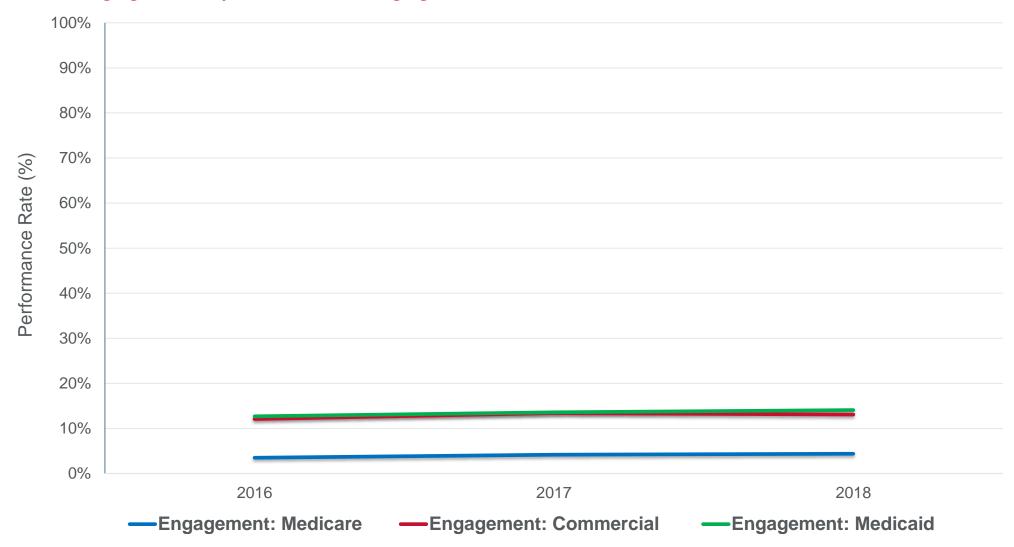


Initiation and Engagement of Treatment: Initiation Rate (Calendar Years 2016-2018)

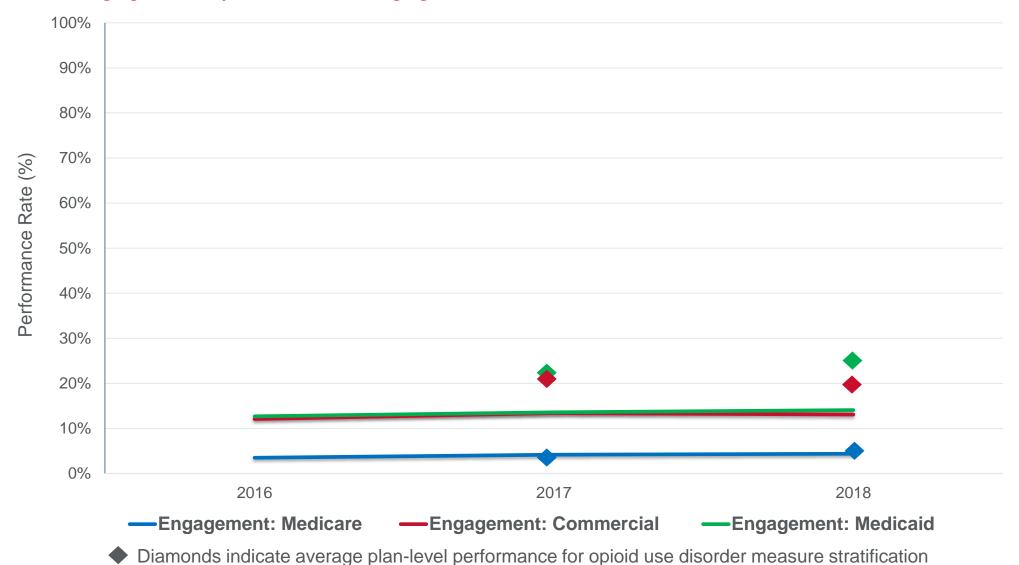


Diamonds indicate average plan-level performance for opioid use disorder measure stratification.

Initiation and Engagement of Treatment: Engagement Rate (Calendar Years 2016-2018)



Initiation and Engagement of Treatment: Engagement Rate (Calendar Years 2016-2018)



Conclusions and Key Takeaways

Room for Improvement

Performance on national health plan measures shows room for improvement and variation across payers and states

Unique Role of Health Plans

Health plans play important and unique role

Important part of larger accountability framework

NCQA Goals

Strengthen existing HEDIS measures, develop new measures

Participate in learning collaborative efforts to improve reporting of important quality measures

Use of data sources beyond administrative claims



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