

## Overview of Substance Use Disorder Measures in the 2022 Child, Adult, and Health Home Core Sets

### Introduction

Improving outcomes for Medicaid beneficiaries with substance use disorders (SUDs) is a top priority for the Centers for Medicare & Medicaid Services (CMS). The opioid epidemic in particular continues to highlight the need for both preventing inappropriate prescribing and providing access to high quality treatment.

In keeping with these objectives, the Child, Adult, and Health Home Core Sets include several measures that focus on SUD. This technical assistance resource provides an overview of the SUD measures in the 2022 Child, Adult, and Health Home Core Sets.

The 2022 Child Core Set includes one SUD measure, the 2022 Adult Core Set includes five SUD measures, and the 2022 Health Home Core Set includes three SUD measures (see Table 1). These measures are also included in the Behavioral Health Core Set that CMS has identified to improve behavioral health in Medicaid and the Children’s Health Insurance Program (CHIP).<sup>1</sup>

CMS added the Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA) measure to the 2022 Child Core Set to address a gap in quality of care for adolescents diagnosed with SUD, allow for comparative analyses across various populations, and allow health systems to identify opportunities for care coordination.<sup>2</sup>

This technical assistance resource provides an overview of the SUD measures in the 2022 Child, Adult, and Health Home Core Sets. Successful reporting of these measures will help CMS and states to continue their quality improvement efforts across the continuum of

care for SUDs and to monitor progress in combatting the opioid crisis.

**Table 1. SUD Measures Included in the 2022 Child, Adult, and Health Home Core Sets**

NQF#	Measure Name	Child	Adult	Health Home
0004	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD / IET-HH)		✓	✓
2940	Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)		✓	
3389	Concurrent Use of Opioids and Benzodiazepines (COB-AD)		✓	
3400	Use of Pharmacotherapy for Opioid Use Disorder (OUD-AD / OUD-HH)		✓	✓
3488	Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA-CH / FUA-AD / FUA-HH)	✓	✓	✓

### SUD Treatment Measures in the Child, Adult, and Health Home Core Sets

The 2022 Child, Adult, and Health Home Core Sets include several measures of treatment for substance use disorder, including opioid use disorder and alcohol and other drug abuse or dependence (AOD) (see Table 2).

<sup>1</sup> The list of 2022 Core Set of Behavioral Health measures for Medicaid and CHIP is available at <https://www.medicare.gov/medicaid/quality-of-care/downloads/2022-bh-core-set.pdf>.

<sup>2</sup> More information is available in the Center for Medicaid and CHIP Services (CMCS) Informational Bulletin at <https://www.medicare.gov/federal-policy-guidance/downloads/cib121021.pdf>.

■ This technical assistance resource is a product of the Technical Assistance and Analytic Support for the Medicaid and CHIP Quality Measurement and Improvement Program, sponsored by the Center for Medicaid and CHIP Services. The technical assistance team is led by Mathematica, in collaboration with the National Committee for Quality Assurance, Center for Health Care Strategies, AcademyHealth, and Aurrera Health Group. This communication was printed, published, or produced and disseminated at U.S. taxpayer expense.

**Table 2. Overview of SUD Treatment Measures in the 2022 Child, Adult, and Health Home Core Sets**

	IET-AD / IET-HH	FUA-CH / FUA-AD / FUA-HH	OUAD-AD / OUAD-HH
<b>Measure steward</b>	National Committee for Quality Assurance	National Committee for Quality Assurance	Centers for Medicare & Medicaid Services
<b>Description</b>	<p>Percentage of beneficiaries<sup>a</sup> with a new episode of AOD abuse or dependence who received:</p> <ul style="list-style-type: none"> <li>• Initiation of AOD treatment within 14 days of diagnosis</li> <li>• Engagement of AOD treatment, defined as engaged in ongoing AOD treatment within 34 days of initiation visit</li> </ul> <p>Each rate is stratified by the following AOD diagnosis cohorts:</p> <ul style="list-style-type: none"> <li>• Alcohol abuse or dependence</li> <li>• Opioid abuse or dependence</li> <li>• Other drug abuse or dependence</li> <li>• Total AOD abuse or dependence</li> </ul>	<p>Percentage of emergency department (ED) visits for beneficiaries<sup>b</sup> with a principal diagnosis of AOD abuse or dependence who had a follow-up visit with a corresponding principal diagnosis for AOD abuse or dependence.</p> <p>Two rates are reported:</p> <ul style="list-style-type: none"> <li>• A follow-up visit within 30 days of the ED visit</li> <li>• A follow-up visit within 7 days of the ED visit</li> </ul>	<p>Percentage of Medicaid beneficiaries ages 18 to 64 with an opioid use disorder (OUD) who filled a prescription for or were administered or dispensed an FDA-approved medication for the disorder during the measurement year.</p> <p>This measure includes a total rate as well as four separate rates representing the following four types of Food and Drug Administration (FDA)-approved drug products:</p> <ul style="list-style-type: none"> <li>• Buprenorphine</li> <li>• Oral naltrexone</li> <li>• Long-acting, injectable naltrexone</li> <li>• Methadone</li> </ul>
<b>Index Episode Start Date (IESD)</b>	The earliest date of service for an eligible encounter between January 1 and November 14 with a diagnosis of AOD abuse or dependence	None	None
<b>Numerator</b>	<p>Beneficiaries who received AOD treatment:</p> <ul style="list-style-type: none"> <li>• Within 14 days of the IESD (Initiation of AOD treatment)</li> <li>• Within 34 days of the initiation event (Engagement of AOD treatment) where: <ul style="list-style-type: none"> <li>– The beneficiary had an opioid treatment service that bills monthly or a visit that included medication administration (Note: This criterion is only applicable for beneficiaries with an IESD for a diagnosis of opioid abuse or dependence), OR</li> <li>– The initiation of AOD treatment event was a medication treatment event, and the beneficiary received two or more engagement events, only one of which was a medication treatment event, OR</li> <li>– The initiation of AOD treatment event was not a medication treatment event, and the beneficiary received at least one engagement medication treatment event or at least two engagement visits</li> </ul> </li> </ul>	<p>Number of ED visits for beneficiaries with a principal diagnosis of AOD abuse or dependence who had a follow-up visit with any practitioner with a principal diagnosis of AOD abuse or dependence:</p> <ul style="list-style-type: none"> <li>• Within 30 days of the ED visit</li> <li>• Within 7 days of the ED visit</li> </ul>	<p>Beneficiaries with evidence of at least one prescription filled or who were administered or dispensed a FDA-approved medication for OUD during the measurement year</p>

	IET-AD / IET-HH	FUA-CH / FUA-AD / FUA-HH	OU-AD / OU-HH
<b>Denominator</b>	Beneficiaries with a new episode of AOD abuse or dependence. For this measure, a 'new' episode requires a lookback period of 60 days where no SUD treatment took place.	ED visits with a principal diagnosis of AOD abuse or dependence.	Beneficiaries who had at least one encounter with a diagnosis of opioid abuse, dependence, or remission (primary or other) at any time during the measurement year.
<b>Exclusions</b>	Beneficiaries who use hospice services or who die during the measurement year	Beneficiaries who use hospice services or who die during the measurement year	None
<b>Data source</b>	Administrative or electronic health record	Administrative	Administrative

<sup>a</sup> The IET-AD measure is reported for beneficiaries age 18 and older. The IET-HH measure is reported for Health Home enrollees age 13 and older.

<sup>b</sup> The FUA-CH measure is reported for beneficiaries ages 13 to 17. The FUA-AD measure is reported for beneficiaries age 18 and older. The FUA-HH measure is reported for Health Home enrollees age 13 and older.

### Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET-AD / IET-HH)

The “Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment” (IET-AD / IET-HH) measure examines the percentage of beneficiaries with a new episode of AOD abuse or dependence who received treatment. This measure includes two rates: one for the initiation of timely AOD treatment and one for the continuation (engagement) of AOD treatment. In addition to the total initiation and engagement rates, the measure is stratified by three diagnosis cohorts: (1) alcohol abuse or dependence, (2) opioid abuse or dependence, and (3) other drug abuse or dependence.

For the 2022 Adult and Health Home Core Sets, guidance was added indicating that states should exclude beneficiaries who die during the measurement year if the state can identify these beneficiaries. The state should attempt to remove these beneficiaries as it determines the eligible population.

### Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA-CH / FUA-AD / FUA-HH)

The “Follow-up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence” (FUA-CH / FUA-AD / FUA-HH) measure examines the percentage of emergency department (ED) visits for beneficiaries with a principal diagnosis of AOD abuse or dependence who had a follow-up visit with a corresponding principal diagnosis for AOD abuse or dependence. The measure includes two rates: (1) follow-up within 30 days of the ED visit, and (2) follow-up within 7 days of the ED visit.

The Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence (FUA) measure was added to the Child Core Set for 2022.

In addition, for all three Core Sets, guidance was added indicating that states should exclude beneficiaries who die during the measurement year if the state can identify these beneficiaries. The state should attempt to remove these beneficiaries as it determines the eligible population.

### Use of Pharmacotherapy for Opioid Use Disorder (OU-AD / OU-HH)

The “Use of Pharmacotherapy for Opioid Use Disorder” (OU-AD / OU-HH) measure examines the use of medication-assisted treatment for opioid use disorders to improve understanding of the quality of care across the continuum of care for SUDs. For states that operate a SUD-focused Health Home Program, this measure supports reporting requirements under the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Community (SUPPORT) Act.

The measure assesses the percentage of beneficiaries who filled a prescription for or were administered or dispensed a Food and Drug Administration (FDA)-approved medication for the disorder during the measurement year. The measure includes a total rate capturing any medication used in the medication-assisted treatment of opioid dependence and addiction as well as four separate rates representing the following types of FDA-approved drug products: (1) buprenorphine, (2) oral naltrexone, (3) long-acting, injectable naltrexone, and (4) methadone.

For the 2022 Adult Core Set, the measure steward updated the technical specifications for the OUD-AD measure, most notably including:

- Updated value set directory with revised codes for approved pharmacotherapy for Opioid Use Disorder (OUD).

### Opioid Use Measures in the Adult Core Set

As part of CMS’s effort to combat the opioid crisis, two Adult Core Set measures assess potentially inappropriate prescribing of opioids: Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD) and Concurrent Use of Opioids and Benzodiazepines (COB-AD) (see Table 3).

#### Use of Opioids at High Dosage in Persons Without Cancer (OHD-AD)

The “Use of Opioids at High Dosage in Persons Without Cancer” (OHD-AD) measure examines the percentage of beneficiaries who were prescribed opioids with a high average daily dosage over a period of 90 days or more, which is a measure of potential overuse and is linked to an increased risk of morbidity and mortality.<sup>3</sup> For the 2022 Adult Core Set, the measure steward updated the technical specifications for the OHD-AD measure, most notably including:

- Updated exclusion criteria to specify that beneficiaries in palliative care are excluded from the denominator.

#### Concurrent Use of Opioids and Benzodiazepines (COB-AD)

The “Concurrent Use of Opioids and Benzodiazepines” (COB-AD) measure addresses two measurement areas: early opioid use and polypharmacy. This measure examines the percentage of beneficiaries with concurrent use of prescriptions for opioids and benzodiazepines, which is linked to an increased risk of morbidity and mortality. For the 2022 Adult Core Set, the measure steward updated the COB-AD technical specifications, most notably including:

- Updated exclusion criteria to specify that beneficiaries in palliative care are excluded from the denominator.

**Table 3. Overview of Opioid Use Measures in the 2022 Adult Core Set**

	OHD-AD	COB-AD
<b>Measure steward</b>	Pharmacy Quality Alliance	Pharmacy Quality Alliance
<b>Description</b>	Percentage of beneficiaries age 18 and older who received prescriptions for opioids with an average daily dosage greater than or equal to 90 morphine milligram equivalents (MME) over a period of 90 days or more	Percentage of beneficiaries age 18 and older with concurrent use of prescription opioids and benzodiazepines for 30 or more cumulative days
<b>Numerator</b>	Beneficiaries who received prescriptions for opioids with an average daily dosage greater than or equal to 90 MME over a period of 90 days or more	Beneficiaries with two or more prescription claims for any benzodiazepine and concurrent use of opioids and benzodiazepines for 30 or more cumulative days
<b>Denominator</b>	Beneficiaries with two or more opioid prescription claims, for which the sum of the days’ supply is greater than or equal to 15	Beneficiaries with two or more opioid prescription claims, for which the sum of the days’ supply is greater than or equal to 15
<b>Index Prescription Start Date</b>	Beneficiary must have an index prescription start date between January 1 and October 3 of the measurement year and have an opioid episode of 90 days or more	Beneficiary must have an index prescription start date between January 1 and December 2 of the measurement year
<b>Exclusions</b>	Beneficiaries with a cancer diagnosis, sickle cell disease diagnosis, or in hospice or palliative care	Beneficiaries with a cancer diagnosis, sickle cell disease diagnosis, or in hospice or palliative care
<b>Data source</b>	Administrative	Administrative

<sup>3</sup> Centers for Disease Control and Prevention. “CDC Guideline for Prescribing Opioids for Chronic Pain.” 2019. Available at <https://www.cdc.gov/drugoverdose/prescribing/guideline.html>.

## Technical Assistance Resources for Calculating the SUD Measures

Several resources are available to help states calculate the SUD measures for Child, Adult, and Health Home Core Set reporting:

- The FFY 2022 technical specifications for all eight SUD measures are in the Child, Adult, and Health Home Core Set Resource Manuals.
- The FFY 2022 Core Set Measurement Period Tables include the date ranges that should be used for the denominators and numerators for the SUD measures.
- The FFY 2022 Child, Adult, and Health Home Core Set Reporting: Data Quality Checklist for States contains additional guidance to help states improve the completeness, accuracy, consistency, and documentation of the data reported.
- The OHD-AD and COB-AD value sets that include the National Drug Codes (NDC) for opioid and benzodiazepine medications. The only opioids and benzodiazepines that should be included when calculating these measures are those in the NDC lists. The file also contains guidance on MME conversion factors.

Child Core Set resources are available at:

<https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/child-core-set-reporting-resources/index.html>.

Adult Core Set resources are available at:

<https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/adult-core-set-reporting-resources/index.html>.

Health Home Core Set resources are available at:

<https://www.medicaid.gov/state-resource-center/medicaid-state-technical-assistance/health-home-information-resource-center/quality-reporting/index.html>.

### For More Information

For technical assistance related to calculating and reporting SUD measures, or other Child, Adult, and Health Home Core Set measures, please contact the TA mailbox at [MACQualityTA@cms.hhs.gov](mailto:MACQualityTA@cms.hhs.gov).