

### NQF-Endorsed Behavioral Health Measures

Measure Number	Title	Description	Steward
0003	Bipolar Disorder: Assessment for Diabetes	Percentage of patients treated for bipolar disorder who are assessed for diabetes within 16 weeks after initiating treatment with an atypical antipsychotic agent.	Center for Quality Assessment and Improvement in Mental Health
0004	Initiation and Engagement of Alcohol and other Drug Dependence Treatment: a. Initiation, b. Engagement	Percentage of adults aged 18 and over diagnosed with AOD abuse or dependence and receiving a related service who initiate treatment . Assessment of the degree to which members engage in treatment with two additional AOD treatments within 30 days after initiating treatment.	National Committee for Quality Assurance
0008	Experience of Care and Health Outcomes (ECHO) Survey	52- questions including patient demographic information. The survey measures patient experiences with behavioral health care (mental health and substance abuse treatment) and the organization that provides or manages the treatment and health outcomes. Level of analysis: health plan- HMO, PPO, Medicare, Medicaid, commercial	Agency for Healthcare Research and Quality
0103	Major Depressive Disorder: Diagnostic Evaluation	Percentage of patients aged 18 years and older with a new diagnosis or recurrent episode of MDD who met the DSM-IV criteria during the visit in which the new diagnosis or recurrent episode was identified during the measurement period	American Medical Association - Physician Consortium for Performance Improvement
0104	Major Depressive Disorder: Suicide Risk Assessment	Percentage of patients aged 18 years and older with a new diagnosis or recurrent episode of major depressive disorder (MDD) who had a suicide risk assessment completed at each visit during the measurement period	American Medical Association - Physician Consortium for Performance Improvement

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<b>0105</b>	New Episode of Depression: (a) Optimal Practitioner Contacts for Medication Management, (b) Effective Acute Phase Treatment, (c) Effective Continuation Phase Treatment	Percentage of patients who were diagnosed with a new episode of depression and treated with antidepressant medication, and who had at least three follow-up contacts with a practitioner during the 84-day (12-week) Acute Treatment Phase. b. Percentage of patients who were diagnosed with a new episode of depression, were treated with antidepressant medication and remained on an antidepressant drug during the entire 84-day Acute Treatment Phase. c. Percentage of patients who were diagnosed with a new episode of depression and treated with antidepressant medication and who remained on an antidepressant drug for at least 180 days.	National Committee for Quality Assurance
<b>0106</b>	Diagnosis of attention deficit hyperactivity disorder (ADHD) in primary care for school age children and adolescents	Percentage of patients newly diagnosed with attention deficit hyperactivity disorder (ADHD) whose medical record contains documentation of Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) or Diagnostic and Statistical Manual for Primary Care (DSM-PC) criteria being addressed.	Institute for Clinical Systems Improvement
<b>0107</b>	Management of attention deficit hyperactivity disorder (ADHD) in primary care for school age children and adolescents	Percentage of patients treated with psycho-stimulant medication for the diagnosis of attention deficit hyperactivity disorder (ADHD) whose medical record contains documentation of a follow-up visit at least twice a year.	Institute for Clinical Systems Improvement

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0108	ADHD: Follow-Up Care for Children Prescribed Attention Deficit Hyperactivity Disorder (ADHD) Medication.	a. Initiation Phase: Percentage of children 6 – 12 years of age as of the Index Prescription Episode Start Date with an ambulatory prescription dispensed for and ADHD medication and who had one follow-up visit with a practitioner with prescribing authority during the 30-Day Initiation Phase. b. Continuation and Maintenance (C&M) Phase: Percentage of children 6 – 12 years of age as of the Index Prescription Episode Start Date with an ambulatory prescription dispensed for ADHD medication who remained on the medication for at least 210 days and who in addition to the visit in the Initiation Phase had at least two additional follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ends.	National Committee for Quality Assurance
0109	Bipolar Disorder and Major Depression: Assessment for Manic or hypomanic behaviors	Percentage of patients treated for depression who were assessed, prior to treatment, for the presence of current and/or prior manic or hypomanic behaviors.	Center for Quality Assessment and Improvement in Mental Health
0110	Bipolar Disorder and Major Depression: Appraisal for alcohol or chemical substance use	Percentage of patients with depression or bipolar disorder with evidence of an initial assessment that includes an appraisal for alcohol or chemical substance use	Center for Quality Assessment and Improvement in Mental Health
0111	Bipolar Disorder: Appraisal for risk of suicide	Percentage of patients with bipolar disorder with evidence of an initial assessment that includes an appraisal for risk of suicide.	Center for Quality Assessment and Improvement in Mental Health
0112	Bipolar Disorder: Level-of-function evaluation	Percentage of patients treated for bipolar disorder with evidence of level-of-function evaluation at the time of the initial assessment and again within 12 weeks of initiating treatment	Center for Quality Assessment and Improvement in Mental Health

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0316	LBP: Mental Health Assessment	Percentage of patients with a diagnosis of back pain for whom documentation of a mental health assessment is present in the medical record prior to intervention or when pain lasts more than six weeks.	National Committee for Quality Assurance
0418	Screening for clinical depression	Percentage of patients aged 18 years and older screened for clinical depression using a standardized tool and follow up plan documented.	Centers for Medicare & Medicaid Services
0518	Depression Assessment Conducted	Percent of patients who were screened for depression (using a standardized depression screening tool) at start or resumption of home health care	Centers for Medicare & Medicaid Services
0544	Use and Adherence to Antipsychotics among members with schizophrenia	Assess the use of and the adherence of antipsychotics among members with schizophrenia during the measurement year	Health Benchmarks, Inc.
0552	HBIPS-4: Patients discharged on multiple antipsychotic medications	Patients discharged on multiple antipsychotic medications.	The Joint Commission
0557	HBIPS-6 Post Discharge continuing care plan created	Patients discharged from a hospital-based inpatient psychiatric setting with a continuing care plan created	The Joint Commission
0558	HBIPS -7 Post Discharge continuing care plan transmitted to next level of care provider upon discharge	Patients discharged from a hospital-based inpatient psychiatric setting with a continuing care plan provided to the next level of care clinician or entity.	The Joint Commission
0560	HBIPS-5 Patients discharged on multiple antipsychotic medication with appropriate justification	Patients discharged from a hospital-based inpatient psychiatric setting on two or more antipsychotic medications with appropriate justification	The Joint Commission

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0576	Follow-Up After Hospitalization for Mental Illness	This measure assesses the percentage of discharges for members 6 years of age and older who were hospitalized for treatment of selected mental health disorders and who had an outpatient visit, an intensive outpatient encounter or partial hospitalization with a mental health practitioner. Two rates are reported. Rate 1. The percentage of members who received follow-up within 30 days of discharge Rate 2. The percentage of members who received follow-up within 7 days of discharge.	National Committee for Quality Assurance
0580	Bipolar antimanic agent	This measure identifies the percentage of patients with newly diagnosed bipolar disorder who have received at least 1 prescription for a mood-stabilizing agent during the measurement year.	Resolution Health, Inc.
0595	Lithium Annual Lithium Test in ambulatory setting	This measure identifies the percentage of patients taking lithium who have had at least one lithium level test after the earliest observed lithium prescription during the measurement year.	Resolution Health, Inc.
0596	Lithium Annual Thyroid Test in ambulatory setting	This measure identifies the percentage of patients taking lithium who have had at least one thyroid function test after the earliest observed lithium prescription during the measurement year.	Resolution Health, Inc.
0609	Lithium Annual Creatinine Test in ambulatory setting	This measure identifies the percentage of patients taking lithium who have had at least one creatinine test after the earliest observed lithium prescription during the measurement year.	Resolution Health, Inc.
0640	HBIPS-2 Hours of physical restraint use	The number of hours that all patients admitted to a hospital-based inpatient psychiatric setting were maintained in physical restraint per 1000 psychiatric inpatient hours, overall and stratified by age group	The Joint Commission

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<b>Measure Number</b>	<b>Title</b>	<b>Description</b>	<b>Steward</b>
<b>0641</b>	HBIPS-3 Hours of seclusion use	The number of hours that all patients admitted to a hospital-based inpatient psychiatric setting were held in seclusion per 1000 psychiatric inpatient hours, overall and stratified by age group	The Joint Commission
<b>0690</b>	Percent of residents who have depressive symptoms (long stay)	This measure is based on data from MDS 3.0 assessments of nursing home residents. Either a resident interview measure or a staff assessment measure will be reported. The preferred version is the resident interview measure. The resident interview measure will be used unless either there are three or more missing sub-items needed for calculation or the resident is rarely or never understood, in which cases the staff assessment measure will be calculated and used. These measures use those questions in MDS 3.0 that comprise the Patient Health Questionnaire (PHQ-9) depression instrument. The PHQ-9 is based on the diagnostic criteria for a major depressive disorder in the DSM-IV.	Centers for Medicare & Medicaid Services
<b>0710</b>	Depression Remission at Twelve Months	Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at twelve months defined as a PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment. The Patient Health Questionnaire (PHQ-9) tool is a widely accepted, standardized tool [Copyright © 2005 Pfizer, Inc. All rights reserved] that is completed by the patient, ideally at each visit, and utilized by the provider to monitor treatment progress. This measure additionally promotes ongoing contact between the patient and provider as patients who do not have a follow-up PHQ-9 score at twelve months (+/- 30 days) are also included in the denominator.	MN Community Measurement

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0711	Depression Remission at Six Months	<p>Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score &gt; 9 who demonstrate remission at six months defined as a PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment. The Patient Health Questionnaire (PHQ-9) tool is a widely accepted, standardized tool [Copyright © 2005 Pfizer, Inc. All rights reserved] that is completed by the patient, ideally at each visit, and utilized by the provider to monitor treatment progress. This measure additionally promotes ongoing contact between the patient and provider as patients who do not have a follow-up PHQ-9 score at six months (+/- 30 days) are also included in the denominator.</p>	MN Community Measurement
0712	Depression Utilization of the PHQ-9 Tool	<p>Adult patients age 18 and older with the diagnosis of major depression or dysthymia (ICD-9 296.2x, 296.3x or 300.4) who have a PHQ-9 tool administered at least once during the four month measurement period. The Patient Health Questionnaire (PHQ-9) tool is a widely accepted, standardized tool [Copyright © 2005 Pfizer, Inc. All rights reserved] that is completed by the patient, ideally at each visit, and utilized by the provider to monitor treatment progress. This process measure is related to the outcome measures of “Depression Remission at Six Months” and “Depression Remission at Twelve Months”. This measure was selected by stakeholders for public reporting to promote the implementation of processes within the provider’s office to insure that the patient is being assessed on a routine basis with a standardized tool that supports the outcome measures for depression. Currently, only about 20% of the patients eligible for the denominator of remission at 6 or 12 months actually have a follow-up PHQ-9 score for calculating remission (PHQ-9 score &lt; 5).</p>	MN Community Measurement

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0719	Children Who Receive Effective Care Coordination of Healthcare Services When Needed	This is a composite measure used to assess the need and receipt of care coordination services for children who required care from at least two types of health care services which may require communication between health care providers, or with others involved in child's care (e.g. school).	Child and Adolescent Health Measurement Initiative on behalf of the Maternal and Child Health Bureau
0722	Pediatric Symptom Checklist (PSC)	The Pediatric Symptom Checklist (PSC) is a brief parent report questionnaire that is used to measure overall psychosocial functioning in children from 4 to 16 years of age. Originally developed to be a screen that would allow pediatricians and other health professionals to identify children with poor overall functioning who were in need of further evaluation or referral, the PSC has seen such wide use in large systems that it has been used as an outcome measure to assess changes in functioning over time. In addition to the original 35 item parent report form of the PSC in English, there are now many other validated forms including translations of the original form into more than a dozen other languages, a youth self report, a pictorial version, and a briefer 17 item version for both the parent and youth forms.	Massachusetts General Hospital
0726	Inpatient Consumer Survey (ICS) consumer evaluation of inpatient behavioral healthcare services	Inpatient Consumer Survey (ICS) consumer evaluation of inpatient behavioral healthcare services	National Assoc. of State Mental Health Program Directors Research Instit., Inc. (NRI)
1364	Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment	Percentage of patients aged 6 through 17 years with a diagnosis of major depressive disorder with documented evidence that they met the DSM-IV criteria [at least 5 elements with symptom duration of two weeks or longer, including 1) depressed mood (can be irritable mood in children and adolescents) or 2) loss of interest or pleasure] during the visit in which the new diagnosis or recurrent episode was identified	American Medical Association



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1365	Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment	Percentage of patient visits for those patients aged 6 through 17 years with a diagnosis of major depressive disorder with an assessment for suicide risk	American Medical Association
1385	Developmental screening using a parent completed screening tool (Parent report, Children 0-5)	<p>The measure assesses whether the parent or caregiver completed a developmental screening tool meant to identify children at-risk for developmental, behavioral and social delays. The items are age-specific and anchored to parent-completed tools (a majority of health care providers implementing the Bright Futures recommendations for standardized screening for all children utilize parent-completed tools due to their validity and feasibility). The age-specific items assess whether children 10-71 months are screened.</p> <p>The items assessing developmental screening in the National Survey of Children’s Health are meant to assess whether the parent or caregiver completed a standardized developmental screening tool. Developmental screening is defined as a standardized tool that assesses the child’s risk for developmental, behavioral and social delays. The American Academy of Pediatrics recommends standardized screening using an approved screening tool as the best method of identifying children at risk for developmental, behavioral and/or social delays.</p>	Maternal and Child Health Bureau, Health Resources & Services Administration
1394	Depression Screening by 13 years of age	The percentage of adolescents who turn 13 years of age in the measurement year who had a screening for depression using a standardized tool.	National Committee for Quality Assurance
1399	Developmental Screening by 2 Years of Age	The percentage of children who turned 2 years old during the measurement year who had a developmental screening performed between 12 and 24 months of age.	National Committee for Quality Assurance
1401	Maternal Depression Screening	The percentage of children who turned 6 months of age during the measurement year who had documentation of a maternal depression screening for the mother.	National Committee for Quality Assurance

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1406	Risky Behavior Assessment or Counseling by Age 13 years	Percentage of children with documentation of a risk assessment or counseling for risky behaviors by the age of 13 Years. Four rates are reported: Risk Assessment or Counseling for Alcohol Use, Risk Assessment or Counseling for Tobacco Use, Risk Assessment or Counseling for Other Substance Abuse, Risk Assessment or Counseling for Sexual Activity	National Committee for Quality Assurance
1448	Developmental Screening in the First Three Years of Life	The percentage of children screened for risk of developmental, behavioral and social delays using a standardized screening tool in the first three years of life. This is a measure of screening in the first three years of life that includes three, age-specific indicators assessing whether children are screened by 12 months of age, by 24 months of age and by 36 months of age.	National Committee for Quality Assurance; Child and Adolescent Health Measurement Initiative
1507	Risky Behavior Assessment or Counseling by Age 18 years	Percentage of children with documentation of assessment or counseling for risky behavior. Four rates are reported: assessment or counseling for alcohol use, tobacco use, other substance use, and sexual activity.	National Committee for Quality Assurance
1515	Depression Screening by 18 years of age	The percentage of adolescents who turn 18 years of age in the measurement year who had a screening for depression using a standardized tool.	National Committee for Quality Assurance