NATIONAL QUALITY FORUM

Measure Evaluation 4.1
January 2010

This form contains the measure information submitted by stewards. Blank fields indicate no information was provided. Attachments also may have been submitted and are provided to reviewers. The sub-criteria and most of the footnotes from the evaluation criteria are provided in Word comments and will appear if your cursor is over the highlighted area (or in the margin if your Word program is set to show revisions in balloons). Hyperlinks to the evaluation criteria and ratings are provided in each section.

TAP/Workgroup (if utilized)**:** Complete all yellow highlighted areas of the form. Evaluate the extent to which each sub-criterion is met. Based on your evaluation, summarize the strengths and weaknesses in each section.

Note: *If there is no TAP or workgroup, the SC also evaluates the* sub-criteria *(yellow highlighted areas)*.

Steering Committee: Complete all pink highlighted areas of the form. Review the workgroup/TAP assessment of the sub-criterion, noting any areas of disagreement; then evaluate the extent to which each major criterion is met; and finally, indicate your recommendation for the endorsement. Provide the rationale for your ratings.

Evaluation ratings of the extent to which the criteria are met
C = Completely (unquestionably demonstrated to meet the criterion)
P = Partially (demonstrated to partially meet the criterion)
M = Minimally (addressed BUT demonstrated to only minimally meet the criterion)
N = Not at all (NOT addressed; OR incorrectly addressed; OR demonstrated to NOT meet the criterion)
NA = Not applicable (only an option for a few sub-criteria as indicated)

(for NQF staff use) **NQF Review** #: ACP-042-10 **NQF Project:** Ambulatory Care - Additional Outpatient Measures 2010

MEASURE DESCRIPTIVE INFORMATION
De.1 **Measure Title:** Patient(s) with frequent ER migraine encounters or frequent acute migraine medication use that had an office visit in last 6 reported months.
De.2 **Brief description of measure***:* This measure identifies patients with frequent migraine ER encounters or frequent migraine abortive medication use that had an office visit within the last 6 reported months.
1.1-2 **Type of Measure:** process De.3 **If included in a composite or paired with another measure, please identify composite or paired measure** Does not apply
De.4 **National Priority Partners Priority Area:** care coordination De.5 **IOM Quality Domain**: patient-centered De.6 **Consumer Care Need:** Living With Illness

CONDITIONS FOR CONSIDERATION BY NQF	
Four conditions must be met before proposed measures may be considered and evaluated for suitability as voluntary consensus standards:	**NQF Staff**
A. The measure is in the public domain or an intellectual property (measure steward agreement) is signed. *Public domain only applies to governmental organizations. All non-government organizations must sign a measure steward agreement even if measures are made publicly and freely available.* A.1 **Do you attest that the measure steward holds intellectual property rights to the measure and the right to use aspects of the measure owned by another entity (e.g., risk model, code set)?** Yes A.2 **Indicate if Proprietary Measure** (*as defined in measure steward agreement*)**:** proprietary measure A.3 **Measure Steward Agreement:** agreement signed and submitted A.4 **Measure Steward Agreement attached:** Measure steward addendum_Ingenix 012510-	**A** **Y**☐ **N**☐

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B. The measure owner/steward verifies there is an identified responsible entity and process to maintain and update the measure on a schedule that is commensurate with the rate of clinical innovation, but at least every 3 years. Yes, information provided in contact section	**B** Y☐ N☐
C. The intended use of the measure includes both public reporting and quality improvement. ►**Purpose:** public reporting, quality improvement Payment Incentive, Accountability	**C** Y☐ N☐
D. The requested measure submission information is complete. Generally, measures should be fully developed and tested so that all the evaluation criteria have been addressed and information needed to evaluate the measure is provided. Measures that have not been tested are only potentially eligible for a time-limited endorsement and in that case, measure owners must verify that testing will be completed within 12 months of endorsement. D.1**Testing:** Yes, fully developed and tested D.2 **Have NQF-endorsed measures been reviewed to identify if there are similar or related measures?** Yes	**D** Y☐ N☐
(for NQF staff use) **Have all conditions for consideration been met?** **Staff Notes to Steward** (*if submission returned*)**:**	**Met** Y☐ N☐
Staff Notes to Reviewers (*issues or questions regarding any criteria*)**:** **Staff Reviewer Name(s):**	

TAP/Workgroup Reviewer Name:	
Steering Committee Reviewer Name:	
1. IMPORTANCE TO MEASURE AND REPORT	
Extent to which the specific measure focus is important to making significant gains in health care quality (safety, timeliness, effectiveness, efficiency, equity, patient-centeredness) and improving health outcomes for a specific high impact aspect of healthcare where there is variation in or overall poor performance. *Measures must be judged to be important to measure and report in order to be evaluated against the remaining criteria.* (evaluation criteria) **1a. High Impact**	Eval Rating
(for NQF staff use) Specific NPP goal:	
1a.1 **Demonstrated High Impact Aspect of Healthcare:** patient/societal consequences of poor quality, affects large numbers 1a.2 1a.3 **Summary of Evidence of High Impact:** Migraine is a very common disorder. An estimated 18% of women and 6% of men experience migraine, but many go undiagnosed and undertreated (1). 1a.4 **Citations for Evidence of High Impact:** 1. American Academy of Neurology. Practice parameter: evidence-based guidelines for migraine headaches (an evidence-based review). Report on the Quality Standards Subcommittee of the American Academy of Neurology. Neurology 2000;55:754-63.	**1a** C☐ P☐ M☐ N☐
1b. Opportunity for Improvement 1b.1 **Benefits (improvements in quality) envisioned by use of this measure:** This measure will identify patients with evidence of poor disease control who would benefit from a face-to-face provider encounter. This evaluation is an opportunity to review of behavioral and medication interventions that could improve disease control, improve quality of life, and reduce ER/hospital admissions or other adverse events.	**1b** C☐ P☐ M☐ N☐

Comment [KP1]: 1a. The measure focus addresses:
- a specific national health goal/priority identified by NQF's National Priorities Partners; OR
- a demonstrated high impact aspect of healthcare (e.g., affects large numbers, leading cause of morbidity/mortality, high resource use (current and/or future), severity of illness, and patient/societal consequences of poor quality).

Comment [KP2]: 1b. Demonstration of quality problems and opportunity for improvement, i.e., data demonstrating considerable variation, or overall poor performance, in the quality of care across providers and/or population groups (disparities in care).

1b.2 Summary of data demonstrating performance gap (variation or overall poor performance) across providers:
Using a geographically diverse 15 million member benchmark database (this database represents predominately a commercial population less than 65 year of age) the compliance rate was 66.0 percent, indicating a clear gap in care and opportunity for care improvement.

1b.3 Citations for data on performance gap:
Ingenix EBM Connect benchmark results, September 2009

1b.4 Summary of Data on disparities by population group:
None

1b.5 Citations for data on Disparities:

1c. Outcome or Evidence to Support Measure Focus

1c.1 Relationship to Outcomes (*For non-outcome measures, briefly describe the relationship to desired outcome. For outcomes, describe why it is relevant to the target population*)**:** This measure will identify patients with evidence of poor disease control who would benefit from a face-to-face provider encounter. This evaluation will result in a review of behavioral and medication interventions that could improve disease control, improve quality of life, and reduce ER/hospital admissions or other adverse events.

1c.2-3. Type of Evidence: evidence based guideline, expert opinion

1c.4 Summary of Evidence (*as described in the criteria; for outcomes, summarize any evidence that healthcare services/care processes influence the outcome*)**:**
According to an AAN migraine guideline, it is appropriate to link the intensity of care with the level of disability and symptoms; it is not appropriate to continue ineffective or poorly tolerated medication(1). Identification of patients with poor disease control provide an opportunity to review migraine triggers, acute management options, and prophylactic/preventive treatment regimens (1,2). Appropriate pharmacological or analgesic treatment of acute headache should generally not exceed more than two days per week on a regular basis (2).

1c.5 Rating of strength/quality of evidence (*also provide narrative description of the rating and by whom***):**
This is an expert panel consensus recommendation from the American Academy of Neurology and the Institute for Clinical Systems Improvement (ICSI).

1c.6 Method for rating evidence: This is an expert consensus recommendation from the Quality Standards Subcommittee (QSS) of the American Academy of Neurology (AAN) in collaboration with The US Headache Consortium which includes the following organizations: the American Academy of Family Physicians, AAN, American Headache Society (formerly the American Association for the Study of Headache), American College of Emergency Physicians, American College of Physicians—American Society of Internal Medicine, American Osteopathic Association, and National Headache Foundation.

In addition, our definition of frequent medication use for acute headache treatment is based on an ICSI expert panel consensus recommendation.

1c.7 Summary of Controversy/Contradictory Evidence: The frequency of health care visits and assessments depends upon the patient's initial clinical severity and migraine control. There are no clinical trials that define ideal follow up care when someone has poor migraine control. Therefore, this measure is based on expert panel consensus, including two published migraine guidelines.

This specific measure identifies a small, select subset of patients with evidence of poorly controlled migraines. A patient was defined as having poor migraine control if there was evidence of two or more emergency room (ER) encounters for migraine/headache care or frequent use of acute migraine medications. Of more than 78,000 patients that we identified as having migraines, only 4 percent met the denominator definition for this measure (i.e., poor migraine control).

1c
C ☐
P ☐
M ☐
N ☐

Comment [k3]: 1 Examples of data on opportunity for improvement include, but are not limited to: prior studies, epidemiologic data, measure data from pilot testing or implementation. If data are not available, the measure focus is systematically assessed (e.g., expert panel rating) and judged to be a quality problem.

Comment [k4]: 1c. The measure focus is:
•an outcome (e.g., morbidity, mortality, function, health-related quality of life) that is relevant to, or associated with, a national health goal/priority, the condition, population, and/or care being addressed;
OR
•if an intermediate outcome, process, structure, etc., there is **evidence** that supports the specific measure focus as follows:
oIntermediate outcome – evidence that the measured intermediate outcome (e.g., blood pressure, Hba1c) leads to improved health/avoidance of harm or cost/benefit.
oProcess – evidence that the measured clinical or administrative process leads to improved health/avoidance of harm and
if the measure focus is on one step in a multi-step care process, it measures the step that has the greatest effect on improving the specified desired outcome(s).
oStructure – evidence that the measured structure supports the consistent delivery of effective processes or access that lead to improved health/avoidance of harm or cost/benefit.
oPatient experience – evidence that an association exists between the measure of patient experience of health care and th ... [1]

Comment [k5]: 4 Clinical care processes typically include multiple steps: assess → identify problem/potential problem → choose/plan intervention (with patient input) → provide intervention → evaluate impact on health status. If the measure focus is one step in such a multi-step process, the step with the greatest effect on the desired outcome should be selected as the focus of measurement. For example, although assessment of immunization status and recommending immunization are necessary steps, they are not sufficient to achieve the desired impact on health status – patients must be vaccinated to achieve immunity. This does not preclude consideration of measures of preventive screening interventions where there is a ... [2]

Comment [k6]: 3 The strength of the body of evidence for the specific measure focus should be systematically assessed and rated (e.g., USPSTF grading system http://www.ahrq.gov/clinic/uspstf07/methods/benefit.htm). If the USPSTF grading system was not used, the grading system is explained including how it relates to the USPSTF grades or why it does not. However, evidence is not limited to quantitative studies and the best type of evidence depends upon the question being studied (e.g., randomized controlled trials appropriate for studying drug efficacy are not well suited for complex system changes). When qualitative studies are used, appropriate qualitative research criteria are used to judge the strength of the evidence.

1c.8 Citations for Evidence (*other than guidelines***):** see 1c.10

1c.9 Quote the Specific guideline recommendation (*including guideline number and/or page number***):**
AAN, pages 2-3 (1): Treatment of migraine. Migraine varies in frequency, duration, and disability among sufferers and between attacks. It is appropriate to link the intensity of care with the level of disability and symptoms such as nausea and vomiting (stratified care) for the acute treatment of symptoms of an ongoing attack. It is not appropriate to continue ineffective or poorly tolerated medication in a sequential and arbitrary manner (step care). Consider preventive treatment (given on an ongoing basis whether or not an attack is present) for those patients whose migraine has a substantial impact on their lives and have not responded to acute care, or where the frequency of migraine attacks is such that the reliance on acute care medications would increase the potential for drug-induced (rebound) headache. The goals of long-term migraine treatment, both pharmacologic and nonpharmacologic, are to:
•?Reduce attack frequency, severity, and disability
•?Reduce reliance on poorly tolerated, ineffective, or unwanted acute pharmacotherapies
•?Improve quality of life
•?Avoid acute headache medication escalation
•?Educate and enable patients to manage their disease to enhance personal control of their migraine
•?Reduce headache-related distress and psychological symptoms

Guard against medication-overuse headache ("rebound headache" or "drug-induced headache"). Frequent use of acute medications (ergotamine [not DHE], opiates, triptans, simple analgesics, and mixed analgesics containing butalbital, caffeine, or isometheptene) is generally thought to cause medication-overuse headache. Many experts limit acute therapy to two headache days per week on a regular basis. Patients with medication overuse should use preventive therapy.

ICSI, page 12 (2): Appropriate pharmacological or analgesic treatment of acute headache should generally not exceed more than two days per week on a regular basis. More treatment other than this may result in medication-overuse chronic daily headaches.
Criteria for Prophylactic Treatment:
- Three or more severe migraine attacks per month that fail to respond adequately to symptomatic therapy.
- Less frequent but protracted attacks that impair the patient's quality of life.
- Patient is interested in prophylactic treatment.

1c.10 Clinical Practice Guideline Citation: 1. American Academy of Neurology. Practice parameter: evidence-based guidelines for migraine headaches (an evidence-based review). Report on the Quality Standards Subcommittee of the American Academy of Neurology. Neurology 2000;55:754-63.
2. Institute for Clinical Systems Improvement (ICSI). Health Care Guideline: Diagnosis and Treatment of Headache (Released March 2009). Accessed February 2, 2010. URL: http:www.icsi.org

1c.11 National Guideline Clearinghouse or other URL:
http://www.neurology.org/cgi/content/full/55/6/754 and http:www.icsi.org

1c.12 Rating of strength of recommendation (*also provide narrative description of the rating and by whom***):**
This is an expert panel consensus recommendation from the American Academy of Neurology and ICSI.

1c.13 Method for rating strength of recommendation (*If different from* USPSTF system*, also describe rating and how it relates to USPSTF*)**:**
This is an expert consensus recommendation from the Quality Standards Subcommittee (QSS) of the American Academy of Neurology (AAN) in collaboration with The US Headache Consortium which includes the following organizations: the American Academy of Family Physicians, AAN, American Headache Society (formerly the American Association for the Study of Headache), American College of Emergency Physicians,

Comment [k7]: USPSTF grading system **http://www.ahrq.gov/clinic/uspstf/grades.htm**: **A -** The USPSTF recommends the service. There is high certainty that the net benefit is substantial. **B -** The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial. **C -** The USPSTF recommends against routinely providing the service. There may be considerations that support providing the service in an individual patient. There is at least moderate certainty that the net benefit is small. Offer or provide this service only if other considerations support the offering or providing the service in an individual patient. **D -** The USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits. **I -** The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined.

American College of Physicians—American Society of Internal Medicine, American Osteopathic Association, and National Headache Foundation. This would be equivalent to the USPSTF grade B/C classification.

In addition, our definition of frequent acute medication use is based on an ICSI expert panel consensus recommendation.

1c.14 Rationale for using this guideline over others:
This AAN guideline, producted in collaboration with several other specialty organizations, is the main nationally recognized guideline that addresses evaluation and management of migraines.

ICSI is an independent, non-profit organization that helps its members provide evidence-based health care services to people in Minnesota and surrounding states. ICSI is comprised of 53 medical groups representing 9,000 physicians. Its demonstrated collaborative and innovative processes enable ICSI to unite diverse stakeholders in the health care system to deliver patient-centered and value-driven care. This ICSI guideline is used to define a threshold for frequent acute migraine prophylaxis use.

TAP/Workgroup: What are the strengths and weaknesses in relation to the sub-criteria **for** *Importance to Measure and Report*? — **1**

Steering Committee: Was the threshold criterion, *Importance to Measure and Report*, **met? 1**
Rationale:
Y☐ N☐

2. SCIENTIFIC ACCEPTABILITY OF MEASURE PROPERTIES

Extent to which the measure, as specified, produces consistent (reliable) and credible (valid) results about the quality of care when implemented. (evaluation criteria) — Eval Rating

2a. MEASURE SPECIFICATIONS

S.1 Do you have a web page where current detailed measure specifications can be obtained?
S.2 If yes, provide web page URL:

2a. Precisely Specified

2a.1 Numerator Statement (*Brief, text description of the numerator - what is being measured about the target population, e.g. target condition, event, or outcome***):**
Patients who are diagnosed with migraine and who have had frequent ER encounters or frequent acute medication use, who had an office visit during the following time period: last 180 days prior to the end of the report period through 90 days after the end of the report period

2a.2 Numerator Time Window (*The time period in which cases are eligible for inclusion in the numerator***):**
Last 180 days prior to the end of the report period through 90 days after the end of the report period

2a.3 Numerator Details (*All information required to collect/calculate the numerator, including all codes, logic, and definitions***):**
Patients who have had an ambulatory visit (code sets PR0111, RV0111) with a diagnosis of migraine (code set DX0101) during the following time period: last 180 days prior to the end of the report period through 90 days after the end of the report period

Cd. Set Cd St Descrp.	DX Code	DX Code Description
DX0101 Migraine	346	MIGRAINE
DX0101 Migraine	346.0	MIGRAINE WITH AURA
DX0101 Migraine	346.00	MIGRAINE W/AURA W/O INTRACT W/O STATUS MIGRNOSUS
DX0101 Migraine	346.01	MIGRAINE W/AURA W/INTRACT W/O STATUS MIGRAINOSUS
DX0101 Migraine	346.02	MIGRAINE W/AURA W/O INTRACT W/STATUS MIGRAINOSUS
DX0101 Migraine	346.03	MIGRAINE W/AURA W/INTRACTBL W/STATUS MIGRAINOSUS
DX0101 Migraine	346.1	MIGRAINE WITHOUT AURA
DX0101 Migraine	346.10	MIGRAINE W/O AURA W/O INTRACT W/O STAT MIGRNOSUS

2a-specs C☐ P☐ M☐ N☐

Comment [KP8]: 2a. The measure is well defined and precisely specified so that it can be implemented consistently within and across organizations and allow for comparability. The required data elements are of high quality as defined by NQF's Health Information Technology Expert Panel (HITEP) .

DX0101 Migraine	346.11	MIGRAINE W/O AURA W/INTRACT W/O STATUS MIGRNOSUS
DX0101 Migraine	346.12	MIGRAINE W/O AURA W/O INTRACT W/STATUS MIGRNOSUS
DX0101 Migraine	346.13	MIGRAINE W/O AURA W/INTRACT W/STATUS MIGRAINOSUS
DX0101 Migraine	346.2	VARIANTS OF MIGRAINE NOT ELSEWHERE CLASSIFIED
DX0101 Migraine	346.20	VAR MIGRAINE NEC W/O INTRACT W/O STAT MIGRNOSUS
DX0101 Migraine	346.21	VAR MIGRAINE NEC W/INTRACT W/O STATUS MIGRNOSUS
DX0101 Migraine	346.22	VAR MIGRAINE NEC W/O INTRACT W/STATUS MIGRNOSUS
DX0101 Migraine	346.23	VAR MIGRAINE NEC W/INTRACT W/STATUS MIGRAINOSUS
DX0101 Migraine	346.3	HEMIPLEGIC MIGRAINE
DX0101 Migraine	346.30	HEMI MIGRAINE W/O INTRACT W/O STATUS MIGRAINOSUS
DX0101 Migraine	346.31	HEMI MIGRAINE W/INTRACTBL W/O STATUS MIGRAINOSUS
DX0101 Migraine	346.32	HEMI MIGRAINE W/O INTRACTBL W/STATUS MIGRAINOSUS
DX0101 Migraine	346.33	HEMI MIGRAINE W/INTRACTABLE W/STATUS MIGRAINOSUS
DX0101 Migraine	346.5	PERSISTENT MIGRAINE AURA W/O CEREBRAL INFARCTION
DX0101 Migraine	346.50	PERSIST MIGRAINE AURA W/O CI W/O INTRACT W/O SM
DX0101 Migraine	346.51	PERSISTENT MIGRAINE AURA W/O CI W/INTRACT W/O SM
DX0101 Migraine	346.52	PERSISTENT MIGRAINE AURA W/O CI W/O INTRACT W/SM
DX0101 Migraine	346.53	PERSISTENT MIGRAINE AURA W/O CI W/INTRACTBL W/SM
DX0101 Migraine	346.6	PERSISTENT MIGRAINE AURA WITH CEREBRAL INFARCT
DX0101 Migraine	346.60	PERSISTENT MIGRAINE AURA W/CI W/O INTRACT W/O SM
DX0101 Migraine	346.61	PERSISTENT MIGRAINE AURA W/CI W/INTRACTBL W/O SM
DX0101 Migraine	346.62	PERSISTENT MIGRAINE AURA W/CI W/O INTRACTBL W/SM
DX0101 Migraine	346.63	PERSISTENT MIGRAINE AURA W/CI W/INTRACTABLE W/SM
DX0101 Migraine	346.7	CHRONIC MIGRAINE WITHOUT AURA
DX0101 Migraine	346.70	CHRONIC MIGRAINE W/O AURA W/O INTRACTABLE W/O SM
DX0101 Migraine	346.71	CHRONIC MIGRAINE W/O AURA W/INTRACTABLE W/O SM
DX0101 Migraine	346.72	CHRONIC MIGRAINE W/O AURA W/O INTRACTABLE W/SM
DX0101 Migraine	346.73	CHRONIC MIGRAINE W/O AURA W/INTRACTABLE W/SM
DX0101 Migraine	346.8	OTHER FORMS OF MIGRAINE
DX0101 Migraine	346.80	OTH MIGRAINE W/O INTRACT W/O STATUS MIGRAINOSUS
DX0101 Migraine	346.81	OTH MIGRAINE W/INTRACTABL W/O STATUS MIGRAINOSUS
DX0101 Migraine	346.82	OTH MIGRAINE W/O INTRACTABL W/STATUS MIGRAINOSUS
DX0101 Migraine	346.83	OTH MIGRAINE W/INTRACTABLE W/STATUS MIGRAINOSUS
DX0101 Migraine	346.9	MIGRAINE UNSPECIFIED
DX0101 Migraine	346.90	MIGRAINE UNSP W/O INTRACT W/O STATUS MIGRAINOSUS
DX0101 Migraine	346.91	MIGRAINE UNSP W/INTRACTBL W/O STATUS MIGRAINOSUS
DX0101 Migraine	346.92	MIGRAINE UNSP W/O INTRACTBL W/STATUS MIGRAINOSUS
DX0101 Migraine	346.93	MIGRAINE UNSP W/INTRACTABLE W/STATUS MIGRAINOSUS

Code Set	Code Set Description	Procedure Code
PR0111	Ambulatory visit codes	99201
PR0111	Ambulatory visit codes	99202
PR0111	Ambulatory visit codes	99203
PR0111	Ambulatory visit codes	99204
PR0111	Ambulatory visit codes	99205
PR0111	Ambulatory visit codes	99211
PR0111	Ambulatory visit codes	99212
PR0111	Ambulatory visit codes	99213
PR0111	Ambulatory visit codes	99214
PR0111	Ambulatory visit codes	99215
PR0111	Ambulatory visit codes	99241
PR0111	Ambulatory visit codes	99242
PR0111	Ambulatory visit codes	99243
PR0111	Ambulatory visit codes	99244
PR0111	Ambulatory visit codes	99245
PR0111	Ambulatory visit codes	99271
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PR0111 Ambulatory visit codes99402
PR0111 Ambulatory visit codes99403
PR0111 Ambulatory visit codes99404
PR0111 Ambulatory visit codes99411
PR0111 Ambulatory visit codes99412
PR0111 Ambulatory visit codes99420
PR0111 Ambulatory visit codes99429

Code Set	Code Set Description	Revenue Code
RV0111	Ambulatory visit codes	0983

2a.4 Denominator Statement (*Brief, text description of the denominator - target population being measured***):**
Patients 6 years of age or older who are diagnosed with migraine and who have had frequent ER encounters or frequent acute medication use

2a.5 Target population gender: Female, Male
2a.6 Target population age range: Patients 6 years of age or older at the end of the report period

2a.7 Denominator Time Window (*The time period in which cases are eligible for inclusion in the denominator***):**
The 24 months prior to the end of the report period for confirmation that the patient had migraine; 180 days prior to the end of the report period to determine whether the patient had frequent ER encounters; 120 days prior to the end of the report period frequent acute medication use

2a.8 Denominator Details (*All information required to collect/calculate the denominator - the target population being measured - including all codes, logic, and definitions***):**
Criteria for inclusion in the denominator are as follows:
1. All males or females that are 6 years of age or older at the end of the report period
2. Patient must have been continuously enrolled in medical benefits throughout the 12 months prior to the end of the report period AND pharmacy benefit plan for 6 months prior to the end of the report period. The standard EBM Connect® enrollment break logic allows unlimited breaks in coverage of no more than 45

days and no breaks greater than 45 days.
3. The patient is listed in the Disease Registry Input File for this condition.
OR
The patient fulfilled at least one of the following two criteria (A or B):
A. During the 24 months prior to the end of the report period, the patient had two or more of the following services or events, at least 14 days apart, with a diagnosis of migraine (code set DX0101):
- Professional Encounter code set (PR0107 or RV0107)
- Professional Supervision code set (PR0108)
- Facility Event – Confinement/Admission (i.e., hospital admission)
- Facility Event – Emergency Room
- Facility Event – Outpatient Surgery

AND
During the 12 months prior to the end of the report period, the patient had one or more of the following services or events with a diagnosis of migraine (code set DX0101):
- Professional Encounter code set (PR0107 or RV0107)
- Professional Supervision code set (PR0108)
- Facility Event – Confinement/Admission (i.e., hospital admission)
- Facility Event – Emergency Room
- Facility Event – Outpatient Surgery

OR
B. During the 24 months prior to the end of the report period, the patient had one or more of the following services or events with a diagnosis of migraine (code set DX0101):
- Professional Encounter code set (PR0107 or RV0107)
- Professional Supervision code set (PR0108)
- Facility Event – Confinement/Admission (i.e., hospital admission)
- Facility Event – Emergency Room
- Facility Event – Outpatient Surgery

AND
Patient had one or more prescriptions for the any of the following medications during the 12 month report period:
- Dihydroergotamine mesylate (nasal only) (code set RX-42)
- Midrin-type medication (code set RX-76)
- Triptan (nasal only) (code set RX-121)
- Triptan (oral only) (code set RX-122)
- Triptan (subcutaneous only) (code set RX-123)
- Dihydroergotamine mesylate (injection only) (code set RX-174)

4. The patient must fulfill at least one of the following criteria (A or B):
A. The patient had two or more facility events – emergency room visit with a diagnosis of migraine (code set DX0101) during the last 180 days of the report period.
B. The patient had frequent medication use (defined further in Appendix 1); fulfilling at least one of the following criteria (i, ii, iii, iv, v, vi, or vii)
i. The sum of the Equivalent Doses (EqDose) for triptan (oral only) (code set RX-122) was greater than a threshold of 36 tablets during the following time period: last 120 days of the report period. EqDose is a defined determination function. Note: Exclude the last claim within this time period.
ii. The sum of the Equivalent Doses (EqDose) for triptan (subcutaneous only) (code set RX-123) was greater than a threshold of 24 dose equivalents during the following time period: last 120 days of the report period. Note: Exclude the last claim within this time period.
iii. The sum of the Equivalent Doses (EqDose) for triptan (nasal only) (code set RX-121) was greater than a threshold of 24 spray bottles during the following time period: last 120 days of the report period. Note: Exclude the last claim within this time period.
iv. The sum of the Equivalent Doses (EqDose) for butorphanol tartrate (nasal only)(code set RX-29) greater than a threshold of 12.5 ml during the following time period: last 120 days of the report period. Note: Exclude the last claim within this time period.
v. During the following time period: last 120 days of the report period, the sum of the Equivalent Doses (EqDose) for dihydroergotamine mesylate (nasal only) (code set RX-42) was greater than a threshold of 12 ml OR the sum of the Equivalent Doses (EqDose) for dihydroergotamine mesylate (injection only) (code set RX-174) was greater than a threshold of 12 ml (calculate EqDose for pharmacy claims) OR there were more than 12 procedures for dihydroergotamine mesylate (injection only) (code set RX-174).

Calculate the total number of procedures in medical claims. Note: Exclude the last claim within this time period.

vi. The sum of the Equivalent Doses (EqDose) for butalbital containing medication (code set RX-28) was greater than a threshold of 100 tablets/ capsules during the following time period: last 120 days of the report period. Note: Exclude the last claim within this time period.

vii. The sum of the Equivalent Doses (EqDose) for midrin-type medication (code set RX-76) was greater than a threshold of 150 capsules during the following time period: last 120 days of the report period. Note: Exclude the last claim within this time period.

Cd. Set	Cd St Descrp.	DX Code	DX Code Description
DX0101	Migraine	346	MIGRAINE
DX0101	Migraine	346.0	MIGRAINE WITH AURA
DX0101	Migraine	346.00	MIGRAINE W/AURA W/O INTRACT W/O STATUS MIGRNOSUS
DX0101	Migraine	346.01	MIGRAINE W/AURA W/INTRACT W/O STATUS MIGRAINOSUS
DX0101	Migraine	346.02	MIGRAINE W/AURA W/O INTRACT W/STATUS MIGRAINOSUS
DX0101	Migraine	346.03	MIGRAINE W/AURA W/INTRACTBL W/STATUS MIGRAINOSUS
DX0101	Migraine	346.1	MIGRAINE WITHOUT AURA
DX0101	Migraine	346.10	MIGRAINE W/O AURA W/O INTRACT W/O STAT MIGRNOSUS
DX0101	Migraine	346.11	MIGRAINE W/O AURA W/INTRACT W/O STATUS MIGRNOSUS
DX0101	Migraine	346.12	MIGRAINE W/O AURA W/O INTRACT W/STATUS MIGRNOSUS
DX0101	Migraine	346.13	MIGRAINE W/O AURA W/INTRACT W/STATUS MIGRAINOSUS
DX0101	Migraine	346.2	VARIANTS OF MIGRAINE NOT ELSEWHERE CLASSIFIED
DX0101	Migraine	346.20	VAR MIGRAINE NEC W/O INTRACT W/O STAT MIGRNOSUS
DX0101	Migraine	346.21	VAR MIGRAINE NEC W/INTRACT W/O STATUS MIGRNOSUS
DX0101	Migraine	346.22	VAR MIGRAINE NEC W/O INTRACT W/STATUS MIGRNOSUS
DX0101	Migraine	346.23	VAR MIGRAINE NEC W/INTRACT W/STATUS MIGRAINOSUS
DX0101	Migraine	346.3	HEMIPLEGIC MIGRAINE
DX0101	Migraine	346.30	HEMI MIGRAINE W/O INTRACT W/O STATUS MIGRAINOSUS
DX0101	Migraine	346.31	HEMI MIGRAINE W/INTRACTBL W/O STATUS MIGRAINOSUS
DX0101	Migraine	346.32	HEMI MIGRAINE W/O INTRACTBL W/STATUS MIGRAINOSUS
DX0101	Migraine	346.33	HEMI MIGRAINE W/INTRACTABLE W/STATUS MIGRAINOSUS
DX0101	Migraine	346.5	PERSISTENT MIGRAINE AURA W/O CEREBRAL INFARCTION
DX0101	Migraine	346.50	PERSIST MIGRAINE AURA W/O CI W/O INTRACT W/O SM
DX0101	Migraine	346.51	PERSISTENT MIGRAINE AURA W/O CI W/INTRACT W/O SM
DX0101	Migraine	346.52	PERSISTENT MIGRAINE AURA W/O CI W/O INTRACT W/SM
DX0101	Migraine	346.53	PERSISTENT MIGRAINE AURA W/O CI W/INTRACTBL W/SM
DX0101	Migraine	346.6	PERSISTENT MIGRAINE AURA WITH CEREBRAL INFARCT
DX0101	Migraine	346.60	PERSISTENT MIGRAINE AURA W/CI W/O INTRACT W/O SM
DX0101	Migraine	346.61	PERSISTENT MIGRAINE AURA W/CI W/INTRACTBL W/O SM
DX0101	Migraine	346.62	PERSISTENT MIGRAINE AURA W/CI W/O INTRACTBL W/SM
DX0101	Migraine	346.63	PERSISTENT MIGRAINE AURA W/CI W/INTRACTABLE W/SM
DX0101	Migraine	346.7	CHRONIC MIGRAINE WITHOUT AURA
DX0101	Migraine	346.70	CHRONIC MIGRAINE W/O AURA W/O INTRACTABLE W/O SM
DX0101	Migraine	346.71	CHRONIC MIGRAINE W/O AURA W/INTRACTABLE W/O SM
DX0101	Migraine	346.72	CHRONIC MIGRAINE W/O AURA W/O INTRACTABLE W/SM
DX0101	Migraine	346.73	CHRONIC MIGRAINE W/O AURA W/INTRACTABLE W/SM
DX0101	Migraine	346.8	OTHER FORMS OF MIGRAINE
DX0101	Migraine	346.80	OTH MIGRAINE W/O INTRACT W/O STATUS MIGRAINOSUS
DX0101	Migraine	346.81	OTH MIGRAINE W/INTRACTABL W/O STATUS MIGRAINOSUS
DX0101	Migraine	346.82	OTH MIGRAINE W/O INTRACTABL W/STATUS MIGRAINOSUS
DX0101	Migraine	346.83	OTH MIGRAINE W/INTRACTABLE W/STATUS MIGRAINOSUS
DX0101	Migraine	346.9	MIGRAINE UNSPECIFIED
DX0101	Migraine	346.90	MIGRAINE UNSP W/O INTRACT W/O STATUS MIGRAINOSUS
DX0101	Migraine	346.91	MIGRAINE UNSP W/INTRACTBL W/O STATUS MIGRAINOSUS
DX0101	Migraine	346.92	MIGRAINE UNSP W/O INTRACTBL W/STATUS MIGRAINOSUS
DX0101	Migraine	346.93	MIGRAINE UNSP W/INTRACTABLE W/STATUS MIGRAINOSUS

Code Set	Code Set Description	Procedure Code

PR0107	Professional encounter	99201
PR0107	Professional encounter	99202
PR0107	Professional encounter	99203
PR0107	Professional encounter	99204
PR0107	Professional encounter	99205
PR0107	Professional encounter	99211
PR0107	Professional encounter	99212
PR0107	Professional encounter	99213
PR0107	Professional encounter	99214
PR0107	Professional encounter	99215
PR0107	Professional encounter	99217
PR0107	Professional encounter	99218
PR0107	Professional encounter	99219
PR0107	Professional encounter	99220
PR0107	Professional encounter	99221
PR0107	Professional encounter	99222
PR0107	Professional encounter	99223
PR0107	Professional encounter	99231
PR0107	Professional encounter	99232
PR0107	Professional encounter	99233
PR0107	Professional encounter	99234
PR0107	Professional encounter	99235
PR0107	Professional encounter	99236
PR0107	Professional encounter	99238
PR0107	Professional encounter	99239
PR0107	Professional encounter	99241
PR0107	Professional encounter	99242
PR0107	Professional encounter	99243
PR0107	Professional encounter	99244
PR0107	Professional encounter	99245
PR0107	Professional encounter	99251
PR0107	Professional encounter	99252
PR0107	Professional encounter	99253
PR0107	Professional encounter	99254
PR0107	Professional encounter	99255
PR0107	Professional encounter	99261
PR0107	Professional encounter	99262
PR0107	Professional encounter	99263
PR0107	Professional encounter	99271
PR0107	Professional encounter	99272
PR0107	Professional encounter	99273
PR0107	Professional encounter	99274
PR0107	Professional encounter	99275
PR0107	Professional encounter	99281
PR0107	Professional encounter	99282
PR0107	Professional encounter	99283
PR0107	Professional encounter	99284
PR0107	Professional encounter	99285
PR0107	Professional encounter	99301
PR0107	Professional encounter	99302
PR0107	Professional encounter	99303
PR0107	Professional encounter	99304
PR0107	Professional encounter	99305
PR0107	Professional encounter	99306
PR0107	Professional encounter	99307
PR0107	Professional encounter	99308
PR0107	Professional encounter	99309
PR0107	Professional encounter	99310

PR0107	Professional encounter	99311
PR0107	Professional encounter	99312
PR0107	Professional encounter	99313
PR0107	Professional encounter	99315
PR0107	Professional encounter	99316
PR0107	Professional encounter	99318
PR0107	Professional encounter	99341
PR0107	Professional encounter	99342
PR0107	Professional encounter	99343
PR0107	Professional encounter	99344
PR0107	Professional encounter	99345
PR0107	Professional encounter	99347
PR0107	Professional encounter	99348
PR0107	Professional encounter	99349
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PR0107	Professional encounter	99383
PR0107	Professional encounter	99384
PR0107	Professional encounter	99385
PR0107	Professional encounter	99386
PR0107	Professional encounter	99387
PR0107	Professional encounter	99391
PR0107	Professional encounter	99392
PR0107	Professional encounter	99393
PR0107	Professional encounter	99394
PR0107	Professional encounter	99395
PR0107	Professional encounter	99396
PR0107	Professional encounter	99397
PR0107	Professional encounter	99401
PR0107	Professional encounter	99402
PR0107	Professional encounter	99403
PR0107	Professional encounter	99404
PR0107	Professional encounter	99411
PR0107	Professional encounter	99412
PR0107	Professional encounter	99420
PR0107	Professional encounter	99429
PR0107	Professional encounter	S0270
PR0107	Professional encounter	S0271
PR0107	Professional encounter	S0272
PR0107	Professional encounter	S0273

Code Set	Code Set Description	Procedure Code
PR0108	Professional supervision	99321
PR0108	Professional supervision	99322
PR0108	Professional supervision	99323
PR0108	Professional supervision	99324
PR0108	Professional supervision	99325
PR0108	Professional supervision	99326
PR0108	Professional supervision	99327
PR0108	Professional supervision	99328
PR0108	Professional supervision	99331
PR0108	Professional supervision	99332
PR0108	Professional supervision	99333
PR0108	Professional supervision	99334
PR0108	Professional supervision	99335
PR0108	Professional supervision	99336
PR0108	Professional supervision	99337

PR0108	Professional supervision	99339
PR0108	Professional supervision	99340
PR0108	Professional supervision	99371
PR0108	Professional supervision	99372
PR0108	Professional supervision	99373
PR0108	Professional supervision	99374
PR0108	Professional supervision	99375
PR0108	Professional supervision	99377
PR0108	Professional supervision	99378
PR0108	Professional supervision	99379
PR0108	Professional supervision	99380
PR0108	Professional supervision	99441
PR0108	Professional supervision	99442
PR0108	Professional supervision	99443
PR0108	Professional supervision	99444
PR0108	Professional supervision	G0179
PR0108	Professional supervision	G0180
PR0108	Professional supervision	G0181
PR0108	Professional supervision	G0182

Code Set	Code Set Description	Revenue Code
RV0107	Professional encounter	0510
RV0107	Professional encounter	0511
RV0107	Professional encounter	0512
RV0107	Professional encounter	0513
RV0107	Professional encounter	0514
RV0107	Professional encounter	0515
RV0107	Professional encounter	0516
RV0107	Professional encounter	0517
RV0107	Professional encounter	0519
RV0107	Professional encounter	0520
RV0107	Professional encounter	0521
RV0107	Professional encounter	0522
RV0107	Professional encounter	0523
RV0107	Professional encounter	0524
RV0107	Professional encounter	0525
RV0107	Professional encounter	0526
RV0107	Professional encounter	0528
RV0107	Professional encounter	0529
RV0107	Professional encounter	0981
RV0107	Professional encounter	0983

cd. set	RX code set description	ndc
RX-28	Butalbital-containing medication	00002065002
RX-28	Butalbital-containing medication	00002065003
RX-28	Butalbital-containing medication	00002065102
RX-28	Butalbital-containing medication	00002065103
RX-28	Butalbital-containing medication	00002065133
RX-28	Butalbital-containing medication	00002066702
RX-28	Butalbital-containing medication	00002204202
RX-28	Butalbital-containing medication	00002204203
RX-28	Butalbital-containing medication	00002204902
RX-28	Butalbital-containing medication	00002204903
RX-28	Butalbital-containing medication	00002311202
RX-28	Butalbital-containing medication	00002311203
RX-28	Butalbital-containing medication	00002311302
RX-28	Butalbital-containing medication	00002311303
RX-28	Butalbital-containing medication	00002311333

RX-28	Butalbital-containing medication	00002311402
RX-28	Butalbital-containing medication	00002406602
RX-28	Butalbital-containing medication	00002406603
RX-28	Butalbital-containing medication	00002406702
RX-28	Butalbital-containing medication	00002406703
RX-28	Butalbital-containing medication	00009068603
RX-28	Butalbital-containing medication	00009071601
RX-28	Butalbital-containing medication	00009071603
RX-28	Butalbital-containing medication	00013130117
RX-28	Butalbital-containing medication	00013130118
RX-28	Butalbital-containing medication	00013130121
RX-28	Butalbital-containing medication	00047004924
RX-28	Butalbital-containing medication	00047004930
RX-28	Butalbital-containing medication	00047010624
RX-28	Butalbital-containing medication	00047011424
RX-28	Butalbital-containing medication	00063128006
RX-28	Butalbital-containing medication	00071079232
RX-28	Butalbital-containing medication	00071079332
RX-28	Butalbital-containing medication	00071079340
RX-28	Butalbital-containing medication	00078008405
RX-28	Butalbital-containing medication	00078008406
RX-28	Butalbital-containing medication	00078008408
RX-28	Butalbital-containing medication	00078008465
RX-28	Butalbital-containing medication	00078010305
RX-28	Butalbital-containing medication	00078010308
RX-28	Butalbital-containing medication	00078010313
RX-28	Butalbital-containing medication	00078010405
RX-28	Butalbital-containing medication	00078010406
RX-28	Butalbital-containing medication	00078010409
RX-28	Butalbital-containing medication	00078010465
RX-28	Butalbital-containing medication	00078010505
RX-28	Butalbital-containing medication	00078010605
RX-28	Butalbital-containing medication	00078010705
RX-28	Butalbital-containing medication	00078010713
RX-28	Butalbital-containing medication	00078010765
RX-28	Butalbital-containing medication	00078024305
RX-28	Butalbital-containing medication	00078024313
RX-28	Butalbital-containing medication	00081034355
RX-28	Butalbital-containing medication	00081034375
RX-28	Butalbital-containing medication	00081035655
RX-28	Butalbital-containing medication	00081035675
RX-28	Butalbital-containing medication	00081036955
RX-28	Butalbital-containing medication	00081036975
RX-28	Butalbital-containing medication	00086005010
RX-28	Butalbital-containing medication	00086005050
RX-28	Butalbital-containing medication	00086005510
RX-28	Butalbital-containing medication	00086005610
RX-28	Butalbital-containing medication	00086005650
RX-28	Butalbital-containing medication	00093057001
RX-28	Butalbital-containing medication	00093057010
RX-28	Butalbital-containing medication	00093085401
RX-28	Butalbital-containing medication	00095024001
RX-28	Butalbital-containing medication	00095024005
RX-28	Butalbital-containing medication	00102220201
RX-28	Butalbital-containing medication	00102220301
RX-28	Butalbital-containing medication	00102307501
RX-28	Butalbital-containing medication	00102373501
RX-28	Butalbital-containing medication	00117130202

RX-28	Butalbital-containing medication	00117130205
RX-28	Butalbital-containing medication	00117202802
RX-28	Butalbital-containing medication	00117202805
RX-28	Butalbital-containing medication	00117204202
RX-28	Butalbital-containing medication	00117204205
RX-28	Butalbital-containing medication	00143111501
RX-28	Butalbital-containing medication	00143111505
RX-28	Butalbital-containing medication	00143178501
RX-28	Butalbital-containing medication	00143178510
RX-28	Butalbital-containing medication	00143178525
RX-28	Butalbital-containing medication	00143178530
RX-28	Butalbital-containing medication	00143178552
RX-28	Butalbital-containing medication	00143178701
RX-28	Butalbital-containing medication	00143178705
RX-28	Butalbital-containing medication	00143300001
RX-28	Butalbital-containing medication	00150389160
RX-28	Butalbital-containing medication	00150389180
RX-28	Butalbital-containing medication	00157043101
RX-28	Butalbital-containing medication	00157043110
RX-28	Butalbital-containing medication	00157074901
RX-28	Butalbital-containing medication	00157074905
RX-28	Butalbital-containing medication	00166034303
RX-28	Butalbital-containing medication	00166034306
RX-28	Butalbital-containing medication	00166088015
RX-28	Butalbital-containing medication	00166088111
RX-28	Butalbital-containing medication	00166088115
RX-28	Butalbital-containing medication	00172399660
RX-28	Butalbital-containing medication	00172399680
RX-28	Butalbital-containing medication	00172480260
RX-28	Butalbital-containing medication	00172480270
RX-28	Butalbital-containing medication	00182003601
RX-28	Butalbital-containing medication	00182014001
RX-28	Butalbital-containing medication	00182127401
RX-28	Butalbital-containing medication	00182127405
RX-28	Butalbital-containing medication	00182156205
RX-28	Butalbital-containing medication	00182163101
RX-28	Butalbital-containing medication	00182163110
RX-28	Butalbital-containing medication	00182173401
RX-28	Butalbital-containing medication	00182173410
RX-28	Butalbital-containing medication	00182265901
RX-28	Butalbital-containing medication	00182265905
RX-28	Butalbital-containing medication	00182269301
RX-28	Butalbital-containing medication	00182269401
RX-28	Butalbital-containing medication	00184021260
RX-28	Butalbital-containing medication	00187084201
RX-28	Butalbital-containing medication	00187084301
RX-28	Butalbital-containing medication	00187084401
RX-28	Butalbital-containing medication	00217281101
RX-28	Butalbital-containing medication	00217281103
RX-28	Butalbital-containing medication	00228202310
RX-28	Butalbital-containing medication	00228202396
RX-28	Butalbital-containing medication	00228202510
RX-28	Butalbital-containing medication	00228209510
RX-28	Butalbital-containing medication	00247018505
RX-28	Butalbital-containing medication	00247018510
RX-28	Butalbital-containing medication	00247018512
RX-28	Butalbital-containing medication	00247018520
RX-28	Butalbital-containing medication	00247018524

RX-28	Butalbital-containing medication	00247018525
RX-28	Butalbital-containing medication	00247018530
RX-28	Butalbital-containing medication	00247021400
RX-28	Butalbital-containing medication	00247021406
RX-28	Butalbital-containing medication	00247021409
RX-28	Butalbital-containing medication	00247021412
RX-28	Butalbital-containing medication	00247021415
RX-28	Butalbital-containing medication	00247021420
RX-28	Butalbital-containing medication	00247021425
RX-28	Butalbital-containing medication	00247021428
RX-28	Butalbital-containing medication	00247021430
RX-28	Butalbital-containing medication	00247033700
RX-28	Butalbital-containing medication	00247033706
RX-28	Butalbital-containing medication	00247033710
RX-28	Butalbital-containing medication	00247033712
RX-28	Butalbital-containing medication	00247033715
RX-28	Butalbital-containing medication	00247033716
RX-28	Butalbital-containing medication	00247033720
RX-28	Butalbital-containing medication	00247033724
RX-28	Butalbital-containing medication	00247033725
RX-28	Butalbital-containing medication	00247033730
RX-28	Butalbital-containing medication	00247033750
RX-28	Butalbital-containing medication	00247084520
RX-28	Butalbital-containing medication	00247084525
RX-28	Butalbital-containing medication	00247105320
RX-28	Butalbital-containing medication	00247105324
RX-28	Butalbital-containing medication	00247105330
RX-28	Butalbital-containing medication	00258365701
RX-28	Butalbital-containing medication	00258366501
RX-28	Butalbital-containing medication	00258366505
RX-28	Butalbital-containing medication	00259036201
RX-28	Butalbital-containing medication	00259039201
RX-28	Butalbital-containing medication	00259125601
RX-28	Butalbital-containing medication	00259127801
RX-28	Butalbital-containing medication	00259225601
RX-28	Butalbital-containing medication	00259329001
RX-28	Butalbital-containing medication	00281019817
RX-28	Butalbital-containing medication	00281038953
RX-28	Butalbital-containing medication	00281130117
RX-28	Butalbital-containing medication	00298297511
RX-28	Butalbital-containing medication	00298298505
RX-28	Butalbital-containing medication	00302028701
RX-28	Butalbital-containing medication	00302049001
RX-28	Butalbital-containing medication	00302049005
RX-28	Butalbital-containing medication	00302353010
RX-28	Butalbital-containing medication	00302353501
RX-28	Butalbital-containing medication	00302353510
RX-28	Butalbital-containing medication	00304016100
RX-28	Butalbital-containing medication	00304016101
RX-28	Butalbital-containing medication	00304016111
RX-28	Butalbital-containing medication	00304016200
RX-28	Butalbital-containing medication	00304116401
RX-28	Butalbital-containing medication	00304116405
RX-28	Butalbital-containing medication	00304166201
RX-28	Butalbital-containing medication	00304194001
RX-28	Butalbital-containing medication	00304194005
RX-28	Butalbital-containing medication	00304194011
RX-28	Butalbital-containing medication	00304196901

RX-28	Butalbital-containing medication	00304196905
RX-28	Butalbital-containing medication	00306251080
RX-28	Butalbital-containing medication	00306251085
RX-28	Butalbital-containing medication	00306289080
RX-28	Butalbital-containing medication	00306289090
RX-28	Butalbital-containing medication	00306289590
RX-28	Butalbital-containing medication	00314222901
RX-28	Butalbital-containing medication	00314222910
RX-28	Butalbital-containing medication	00339406312
RX-28	Butalbital-containing medication	00339584312
RX-28	Butalbital-containing medication	00349829901
RX-28	Butalbital-containing medication	00349829910
RX-28	Butalbital-containing medication	00349830101
RX-28	Butalbital-containing medication	00349830105
RX-28	Butalbital-containing medication	00349835201
RX-28	Butalbital-containing medication	00349835210
RX-28	Butalbital-containing medication	00349879301
RX-28	Butalbital-containing medication	00349879305
RX-28	Butalbital-containing medication	00349879310
RX-28	Butalbital-containing medication	00359050610
RX-28	Butalbital-containing medication	00359050640
RX-28	Butalbital-containing medication	00359050710
RX-28	Butalbital-containing medication	00359050740
RX-28	Butalbital-containing medication	00359054450
RX-28	Butalbital-containing medication	00359054550
RX-28	Butalbital-containing medication	00364057202
RX-28	Butalbital-containing medication	00364065601
RX-28	Butalbital-containing medication	00364067701
RX-28	Butalbital-containing medication	00364067702
RX-28	Butalbital-containing medication	00364072601
RX-28	Butalbital-containing medication	00364072602
RX-28	Butalbital-containing medication	00364229701
RX-28	Butalbital-containing medication	00364229705
RX-28	Butalbital-containing medication	00364233901
RX-28	Butalbital-containing medication	00367202310
RX-28	Butalbital-containing medication	00403089130
RX-28	Butalbital-containing medication	00403089140
RX-28	Butalbital-containing medication	00403089220
RX-28	Butalbital-containing medication	00403089230
RX-28	Butalbital-containing medication	00403089915
RX-28	Butalbital-containing medication	00403363915
RX-28	Butalbital-containing medication	00403363930
RX-28	Butalbital-containing medication	00405002601
RX-28	Butalbital-containing medication	00405002602
RX-28	Butalbital-containing medication	00405002801
RX-28	Butalbital-containing medication	00405002901
RX-28	Butalbital-containing medication	00406097001
RX-28	Butalbital-containing medication	00406097005
RX-28	Butalbital-containing medication	00436014601
RX-28	Butalbital-containing medication	00436014610
RX-28	Butalbital-containing medication	00440720510
RX-28	Butalbital-containing medication	00440720518
RX-28	Butalbital-containing medication	00440720520
RX-28	Butalbital-containing medication	00440720530
RX-28	Butalbital-containing medication	00440720560
RX-28	Butalbital-containing medication	00440721010
RX-28	Butalbital-containing medication	00440721018
RX-28	Butalbital-containing medication	00440721030

RX-28	Butalbital-containing medication	00440721130
RX-28	Butalbital-containing medication	00456054601
RX-28	Butalbital-containing medication	00456054602
RX-28	Butalbital-containing medication	00456063001
RX-28	Butalbital-containing medication	00456063002
RX-28	Butalbital-containing medication	00456063101
RX-28	Butalbital-containing medication	00456067701
RX-28	Butalbital-containing medication	00456067801
RX-28	Butalbital-containing medication	00456067802
RX-28	Butalbital-containing medication	00456067901
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RX-28	Butalbital-containing medication	66267003960
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RX-28	Butalbital-containing medication	66336070394
RX-28	Butalbital-containing medication	66813007316
RX-28	Butalbital-containing medication	66813007401
RX-28	Butalbital-containing medication	67544001130
RX-28	Butalbital-containing medication	67544001153

RX-28	Butalbital-containing medication	67544012030
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RX-28	Butalbital-containing medication	67544038360
RX-28	Butalbital-containing medication	67544038370
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RX-28	Butalbital-containing medication	67544039453
RX-28	Butalbital-containing medication	67544039460
RX-28	Butalbital-containing medication	67544039470
RX-28	Butalbital-containing medication	67544104530
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RX-28	Butalbital-containing medication	68084011400
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RX-28	Butalbital-containing medication	68084039601
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RX-28	Butalbital-containing medication	68115005460
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RX-28	Butalbital-containing medication	68115005715
RX-28	Butalbital-containing medication	68115049948
RX-28	Butalbital-containing medication	68115062700
RX-28	Butalbital-containing medication	68387052012
RX-28	Butalbital-containing medication	68387052020
RX-28	Butalbital-containing medication	68387052030
RX-28	Butalbital-containing medication	68387052060
RX-28	Butalbital-containing medication	68387052090
RX-28	Butalbital-containing medication	68453007410
RX-28	Butalbital-containing medication	68453017010

cd. set	RX code set description	ndc
RX-29	Butorphanol Tartrate (nasal only)	00054309036
RX-29	Butorphanol Tartrate (nasal only)	00087565041
RX-29	Butorphanol Tartrate (nasal only)	00378963943
RX-29	Butorphanol Tartrate (nasal only)	00403479118
RX-29	Butorphanol Tartrate (nasal only)	54569368100
RX-29	Butorphanol Tartrate (nasal only)	54569598800
RX-29	Butorphanol Tartrate (nasal only)	54868320900
RX-29	Butorphanol Tartrate (nasal only)	54868458300
RX-29	Butorphanol Tartrate (nasal only)	55175441601

RX-29	Butorphanol Tartrate (nasal only)	58016483301
RX-29	Butorphanol Tartrate (nasal only)	59723010201
RX-29	Butorphanol Tartrate (nasal only)	59911594401
RX-29	Butorphanol Tartrate (nasal only)	60505081301

cd. set	RX code set description	ndc
RX-42	Dihydroergotamine Mesylate (nasal only)	00078024598
RX-42	Dihydroergotamine Mesylate (nasal only)	00187024502
RX-42	Dihydroergotamine Mesylate (nasal only)	00187024503
RX-42	Dihydroergotamine Mesylate (nasal only)	00187024504
RX-42	Dihydroergotamine Mesylate (nasal only)	66490024598

cd. set	RX code set description	ndc
RX-76	Midrin-type medication	00086012005
RX-76	Midrin-type medication	00086012010
RX-76	Midrin-type medication	00086012025
RX-76	Midrin-type medication	00182123401
RX-76	Midrin-type medication	00247014500
RX-76	Midrin-type medication	00247014510
RX-76	Midrin-type medication	00247014515
RX-76	Midrin-type medication	00247014520
RX-76	Midrin-type medication	00247014525
RX-76	Midrin-type medication	00247014550
RX-76	Midrin-type medication	00254427028
RX-76	Midrin-type medication	00254427033
RX-76	Midrin-type medication	00304165301
RX-76	Midrin-type medication	00349878301
RX-76	Midrin-type medication	00349878305
RX-76	Midrin-type medication	00349891401
RX-76	Midrin-type medication	00364234201
RX-76	Midrin-type medication	00392051268
RX-76	Midrin-type medication	00403134701
RX-76	Midrin-type medication	00403134718
RX-76	Midrin-type medication	00405403901
RX-76	Midrin-type medication	00440781010
RX-76	Midrin-type medication	00440781028
RX-76	Midrin-type medication	00440781060
RX-76	Midrin-type medication	00516042401
RX-76	Midrin-type medication	00516042405
RX-76	Midrin-type medication	00516042425
RX-76	Midrin-type medication	00536393201
RX-76	Midrin-type medication	00536393205
RX-76	Midrin-type medication	00555036402
RX-76	Midrin-type medication	00603466421
RX-76	Midrin-type medication	00603466424
RX-76	Midrin-type medication	00677112501
RX-76	Midrin-type medication	00677112503
RX-76	Midrin-type medication	00677173901
RX-76	Midrin-type medication	00677174501
RX-76	Midrin-type medication	00677194901
RX-76	Midrin-type medication	00719146810
RX-76	Midrin-type medication	00781232601
RX-76	Midrin-type medication	00814486014
RX-76	Midrin-type medication	00839714804
RX-76	Midrin-type medication	00839756104
RX-76	Midrin-type medication	00839756106
RX-76	Midrin-type medication	00839756109
RX-76	Midrin-type medication	00879067901

RX-76	Midrin-type medication 00904158860
RX-76	Midrin-type medication 00904158870
RX-76	Midrin-type medication 00904549160
RX-76	Midrin-type medication 00904549170
RX-76	Midrin-type medication 00904762260
RX-76	Midrin-type medication 00904762270
RX-76	Midrin-type medication 14508030408
RX-76	Midrin-type medication 17236022901
RX-76	Midrin-type medication 18837026330
RX-76	Midrin-type medication 21695027500
RX-76	Midrin-type medication 21695027530
RX-76	Midrin-type medication 23490576501
RX-76	Midrin-type medication 23490576503
RX-76	Midrin-type medication 35356044704
RX-76	Midrin-type medication 35356044730
RX-76	Midrin-type medication 35356044760
RX-76	Midrin-type medication 35356044790
RX-76	Midrin-type medication 46672025310
RX-76	Midrin-type medication 46672025325
RX-76	Midrin-type medication 47202266901
RX-76	Midrin-type medication 49326022790
RX-76	Midrin-type medication 49326032710
RX-76	Midrin-type medication 49326032750
RX-76	Midrin-type medication 49727029402
RX-76	Midrin-type medication 49884081201
RX-76	Midrin-type medication 49884081204
RX-76	Midrin-type medication 49999080230
RX-76	Midrin-type medication 50564050801
RX-76	Midrin-type medication 50564050805
RX-76	Midrin-type medication 51081042405
RX-76	Midrin-type medication 51081042410
RX-76	Midrin-type medication 51081042425
RX-76	Midrin-type medication 51285036402
RX-76	Midrin-type medication 51285036404
RX-76	Midrin-type medication 51655045129
RX-76	Midrin-type medication 51655045153
RX-76	Midrin-type medication 51991039501
RX-76	Midrin-type medication 51991039502
RX-76	Midrin-type medication 51991039505
RX-76	Midrin-type medication 52152003902
RX-76	Midrin-type medication 52152003903
RX-76	Midrin-type medication 52152003904
RX-76	Midrin-type medication 52152003905
RX-76	Midrin-type medication 52446057321
RX-76	Midrin-type medication 52446057324
RX-76	Midrin-type medication 52959044700
RX-76	Midrin-type medication 52959044720
RX-76	Midrin-type medication 52959044730
RX-76	Midrin-type medication 52959044750
RX-76	Midrin-type medication 52959044760
RX-76	Midrin-type medication 53002054520
RX-76	Midrin-type medication 53002054530
RX-76	Midrin-type medication 53002054550
RX-76	Midrin-type medication 53159042401
RX-76	Midrin-type medication 53159042405
RX-76	Midrin-type medication 53159042425
RX-76	Midrin-type medication 53506015620
RX-76	Midrin-type medication 53746014101

RX-76	Midrin-type medication 53746014102
RX-76	Midrin-type medication 53746014105
RX-76	Midrin-type medication 53746014150
RX-76	Midrin-type medication 54124050924
RX-76	Midrin-type medication 54124050950
RX-76	Midrin-type medication 54274079910
RX-76	Midrin-type medication 54274093810
RX-76	Midrin-type medication 54569034300
RX-76	Midrin-type medication 54569034301
RX-76	Midrin-type medication 54569034302
RX-76	Midrin-type medication 54569034303
RX-76	Midrin-type medication 54569034304
RX-76	Midrin-type medication 54569034317
RX-76	Midrin-type medication 54569034327
RX-76	Midrin-type medication 54569287500
RX-76	Midrin-type medication 54569364300
RX-76	Midrin-type medication 54569364301
RX-76	Midrin-type medication 54569466500
RX-76	Midrin-type medication 54569466501
RX-76	Midrin-type medication 54569700600
RX-76	Midrin-type medication 54569714200
RX-76	Midrin-type medication 54569715200
RX-76	Midrin-type medication 54868143500
RX-76	Midrin-type medication 54868143501
RX-76	Midrin-type medication 54868143502
RX-76	Midrin-type medication 54868143503
RX-76	Midrin-type medication 54868151400
RX-76	Midrin-type medication 54868151401
RX-76	Midrin-type medication 54868151403
RX-76	Midrin-type medication 54868151404
RX-76	Midrin-type medication 54868151405
RX-76	Midrin-type medication 54868151406
RX-76	Midrin-type medication 54979014401
RX-76	Midrin-type medication 54979014405
RX-76	Midrin-type medication 55045288802
RX-76	Midrin-type medication 55045288805
RX-76	Midrin-type medication 55045288806
RX-76	Midrin-type medication 55045288808
RX-76	Midrin-type medication 55045288809
RX-76	Midrin-type medication 55053042001
RX-76	Midrin-type medication 55053051201
RX-76	Midrin-type medication 55081034900
RX-76	Midrin-type medication 55081034901
RX-76	Midrin-type medication 55081078700
RX-76	Midrin-type medication 55081078701
RX-76	Midrin-type medication 55084012320
RX-76	Midrin-type medication 55153108601
RX-76	Midrin-type medication 55175210803
RX-76	Midrin-type medication 55289035517
RX-76	Midrin-type medication 55289035520
RX-76	Midrin-type medication 55289038317
RX-76	Midrin-type medication 55289038320
RX-76	Midrin-type medication 55289038360
RX-76	Midrin-type medication 55289038390
RX-76	Midrin-type medication 55289084230
RX-76	Midrin-type medication 55887026520
RX-76	Midrin-type medication 55887026560
RX-76	Midrin-type medication 55887026590

RX-76	Midrin-type medication 55887077630
RX-76	Midrin-type medication 55887077660
RX-76	Midrin-type medication 55887077690
RX-76	Midrin-type medication 57362060711
RX-76	Midrin-type medication 57664017908
RX-76	Midrin-type medication 57664017910
RX-76	Midrin-type medication 57866020001
RX-76	Midrin-type medication 57866020801
RX-76	Midrin-type medication 57866304702
RX-76	Midrin-type medication 57866304703
RX-76	Midrin-type medication 57866304704
RX-76	Midrin-type medication 57866304705
RX-76	Midrin-type medication 58016028800
RX-76	Midrin-type medication 58016028812
RX-76	Midrin-type medication 58016028814
RX-76	Midrin-type medication 58016028815
RX-76	Midrin-type medication 58016028818
RX-76	Midrin-type medication 58016028820
RX-76	Midrin-type medication 58016028821
RX-76	Midrin-type medication 58016028824
RX-76	Midrin-type medication 58016028825
RX-76	Midrin-type medication 58016028828
RX-76	Midrin-type medication 58016028830
RX-76	Midrin-type medication 58016028840
RX-76	Midrin-type medication 58016028850
RX-76	Midrin-type medication 58016028860
RX-76	Midrin-type medication 58016028890
RX-76	Midrin-type medication 59075057610
RX-76	Midrin-type medication 59618046015
RX-76	Midrin-type medication 59879010601
RX-76	Midrin-type medication 60346062508
RX-76	Midrin-type medication 60346062510
RX-76	Midrin-type medication 60346062520
RX-76	Midrin-type medication 60346062530
RX-76	Midrin-type medication 60346062560
RX-76	Midrin-type medication 62584013900
RX-76	Midrin-type medication 62584013901
RX-76	Midrin-type medication 62584013911
RX-76	Midrin-type medication 62584013918
RX-76	Midrin-type medication 63874050401
RX-76	Midrin-type medication 63874050404
RX-76	Midrin-type medication 63874050420
RX-76	Midrin-type medication 63874050428
RX-76	Midrin-type medication 63874050430
RX-76	Midrin-type medication 63874050440
RX-76	Midrin-type medication 63874050460
RX-76	Midrin-type medication 63874050475
RX-76	Midrin-type medication 63874050490
RX-76	Midrin-type medication 64125010101
RX-76	Midrin-type medication 64125010102
RX-76	Midrin-type medication 64248012005
RX-76	Midrin-type medication 64248012010
RX-76	Midrin-type medication 65162014110
RX-76	Midrin-type medication 66116047630
RX-76	Midrin-type medication 66267035410
RX-76	Midrin-type medication 66267035420
RX-76	Midrin-type medication 66267035430
RX-76	Midrin-type medication 66336062520

RX-76	Midrin-type medication	66336062530
RX-76	Midrin-type medication	66336062590
RX-76	Midrin-type medication	66993060102
RX-76	Midrin-type medication	66993060125
RX-76	Midrin-type medication	68115024230
RX-76	Midrin-type medication	68115024240
RX-76	Midrin-type medication	68115024260
RX-76	Midrin-type medication	68308083010

cd. set	RX code set description	ndc
RX-121	Triptan (nasal only)	00037720860
RX-121	Triptan (nasal only)	00173052300
RX-121	Triptan (nasal only)	00173052400
RX-121	Triptan (nasal only)	00310020860
RX-121	Triptan (nasal only)	00781652306
RX-121	Triptan (nasal only)	00781652386
RX-121	Triptan (nasal only)	00781652406
RX-121	Triptan (nasal only)	00781652486
RX-121	Triptan (nasal only)	49999082206
RX-121	Triptan (nasal only)	54569458800
RX-121	Triptan (nasal only)	54868460600
RX-121	Triptan (nasal only)	54868476400
RX-121	Triptan (nasal only)	54868536100
RX-121	Triptan (nasal only)	55045350201
RX-121	Triptan (nasal only)	55045373206
RX-121	Triptan (nasal only)	58016123101
RX-121	Triptan (nasal only)	63874089706
RX-121	Triptan (nasal only)	68115072506

cd. set	RX code set description	ndc
RX-122	Triptan (oral only)	00006026606
RX-122	Triptan (oral only)	00006026609
RX-122	Triptan (oral only)	00006026612
RX-122	Triptan (oral only)	00006026706
RX-122	Triptan (oral only)	00006026709
RX-122	Triptan (oral only)	00006026712
RX-122	Triptan (oral only)	00006380001
RX-122	Triptan (oral only)	00006380006
RX-122	Triptan (oral only)	00006380009
RX-122	Triptan (oral only)	00006380012
RX-122	Triptan (oral only)	00006380101
RX-122	Triptan (oral only)	00006380106
RX-122	Triptan (oral only)	00006380109
RX-122	Triptan (oral only)	00006380112
RX-122	Triptan (oral only)	00025208006
RX-122	Triptan (oral only)	00025208506
RX-122	Triptan (oral only)	00037720920
RX-122	Triptan (oral only)	00037721020
RX-122	Triptan (oral only)	00037721125
RX-122	Triptan (oral only)	00037721321
RX-122	Triptan (oral only)	00049233034
RX-122	Triptan (oral only)	00049233045
RX-122	Triptan (oral only)	00049234005
RX-122	Triptan (oral only)	00049234034
RX-122	Triptan (oral only)	00049234045
RX-122	Triptan (oral only)	00062208006
RX-122	Triptan (oral only)	00062208506
RX-122	Triptan (oral only)	00062208512

RX-122	Triptan (oral only)	00093022219
RX-122	Triptan (oral only)	00093022290
RX-122	Triptan (oral only)	00093022390
RX-122	Triptan (oral only)	00093022490
RX-122	Triptan (oral only)	00173045003
RX-122	Triptan (oral only)	00173045900
RX-122	Triptan (oral only)	00173046002
RX-122	Triptan (oral only)	00173056100
RX-122	Triptan (oral only)	00173056200
RX-122	Triptan (oral only)	00173073500
RX-122	Triptan (oral only)	00173073601
RX-122	Triptan (oral only)	00173073602
RX-122	Triptan (oral only)	00173073701
RX-122	Triptan (oral only)	00173073702
RX-122	Triptan (oral only)	00173075000
RX-122	Triptan (oral only)	00310020920
RX-122	Triptan (oral only)	00310021020
RX-122	Triptan (oral only)	00310021125
RX-122	Triptan (oral only)	00310021321
RX-122	Triptan (oral only)	00378563059
RX-122	Triptan (oral only)	00378563159
RX-122	Triptan (oral only)	00378563259
RX-122	Triptan (oral only)	12280028909
RX-122	Triptan (oral only)	16252059099
RX-122	Triptan (oral only)	16252059199
RX-122	Triptan (oral only)	16252059299
RX-122	Triptan (oral only)	16590012709
RX-122	Triptan (oral only)	16590012809
RX-122	Triptan (oral only)	16590014409
RX-122	Triptan (oral only)	16590014509
RX-122	Triptan (oral only)	16590020112
RX-122	Triptan (oral only)	21695015409
RX-122	Triptan (oral only)	21695022209
RX-122	Triptan (oral only)	21695087112
RX-122	Triptan (oral only)	21695087209
RX-122	Triptan (oral only)	21695087309
RX-122	Triptan (oral only)	21695087409
RX-122	Triptan (oral only)	35356016909
RX-122	Triptan (oral only)	35356025212
RX-122	Triptan (oral only)	35356025309
RX-122	Triptan (oral only)	35356025318
RX-122	Triptan (oral only)	35356025409
RX-122	Triptan (oral only)	35356027512
RX-122	Triptan (oral only)	35356039512
RX-122	Triptan (oral only)	35356041203
RX-122	Triptan (oral only)	35356043809
RX-122	Triptan (oral only)	35356043909
RX-122	Triptan (oral only)	52959042209
RX-122	Triptan (oral only)	52959047709
RX-122	Triptan (oral only)	52959078606
RX-122	Triptan (oral only)	52959090909
RX-122	Triptan (oral only)	54569419000
RX-122	Triptan (oral only)	54569419100
RX-122	Triptan (oral only)	54569419101
RX-122	Triptan (oral only)	54569461200
RX-122	Triptan (oral only)	54569522200
RX-122	Triptan (oral only)	54569542600
RX-122	Triptan (oral only)	54569542601

RX-122	Triptan (oral only)	54868008500
RX-122	Triptan (oral only)	54868008501
RX-122	Triptan (oral only)	54868377700
RX-122	Triptan (oral only)	54868385200
RX-122	Triptan (oral only)	54868408600
RX-122	Triptan (oral only)	54868421500
RX-122	Triptan (oral only)	54868425100
RX-122	Triptan (oral only)	54868425101
RX-122	Triptan (oral only)	54868425102
RX-122	Triptan (oral only)	54868425103
RX-122	Triptan (oral only)	54868449900
RX-122	Triptan (oral only)	54868449901
RX-122	Triptan (oral only)	54868511800
RX-122	Triptan (oral only)	54868552700
RX-122	Triptan (oral only)	54868552701
RX-122	Triptan (oral only)	54868552800
RX-122	Triptan (oral only)	54868559300
RX-122	Triptan (oral only)	54868597800
RX-122	Triptan (oral only)	54868602300
RX-122	Triptan (oral only)	55045225009
RX-122	Triptan (oral only)	55045304009
RX-122	Triptan (oral only)	55045373109
RX-122	Triptan (oral only)	55111073609
RX-122	Triptan (oral only)	55111073709
RX-122	Triptan (oral only)	55111073809
RX-122	Triptan (oral only)	55175405509
RX-122	Triptan (oral only)	55887018712
RX-122	Triptan (oral only)	55887018809
RX-122	Triptan (oral only)	55887021009
RX-122	Triptan (oral only)	55887044109
RX-122	Triptan (oral only)	55887051206
RX-122	Triptan (oral only)	55887051309
RX-122	Triptan (oral only)	55887051318
RX-122	Triptan (oral only)	55887051327
RX-122	Triptan (oral only)	55887051330
RX-122	Triptan (oral only)	57866018702
RX-122	Triptan (oral only)	58016024609
RX-122	Triptan (oral only)	58016083801
RX-122	Triptan (oral only)	58016093800
RX-122	Triptan (oral only)	58016093806
RX-122	Triptan (oral only)	58016093830
RX-122	Triptan (oral only)	58016093860
RX-122	Triptan (oral only)	58016093890
RX-122	Triptan (oral only)	58016487701
RX-122	Triptan (oral only)	58016557409
RX-122	Triptan (oral only)	58016571100
RX-122	Triptan (oral only)	58016571103
RX-122	Triptan (oral only)	58016571130
RX-122	Triptan (oral only)	58016571160
RX-122	Triptan (oral only)	58016571190
RX-122	Triptan (oral only)	58016571206
RX-122	Triptan (oral only)	59075074089
RX-122	Triptan (oral only)	59762185009
RX-122	Triptan (oral only)	59762185109
RX-122	Triptan (oral only)	59762185209
RX-122	Triptan (oral only)	62756052069
RX-122	Triptan (oral only)	62756052088
RX-122	Triptan (oral only)	62756052169

RX-122	Triptan (oral only)	62756052188
RX-122	Triptan (oral only)	62756052269
RX-122	Triptan (oral only)	62756052288
RX-122	Triptan (oral only)	63304009719
RX-122	Triptan (oral only)	63304009819
RX-122	Triptan (oral only)	63304009919
RX-122	Triptan (oral only)	63481002509
RX-122	Triptan (oral only)	63874089809
RX-122	Triptan (oral only)	65862014636
RX-122	Triptan (oral only)	65862014736
RX-122	Triptan (oral only)	65862014836
RX-122	Triptan (oral only)	68071026206
RX-122	Triptan (oral only)	68084033911
RX-122	Triptan (oral only)	68084033997
RX-122	Triptan (oral only)	68084034011
RX-122	Triptan (oral only)	68084034097
RX-122	Triptan (oral only)	68084034111
RX-122	Triptan (oral only)	68084034197
RX-122	Triptan (oral only)	68115069609
RX-122	Triptan (oral only)	68115070506
RX-122	Triptan (oral only)	68115073712
RX-122	Triptan (oral only)	68115077906
RX-122	Triptan (oral only)	68115088206
RX-122	Triptan (oral only)	68115090709
RX-122	Triptan (oral only)	68258300801
RX-122	Triptan (oral only)	68258300901

cd. set	RX code set description	ndc
RX-123	Triptan (subcutaneous only)	00173044901
RX-123	Triptan (subcutaneous only)	00173044902
RX-123	Triptan (subcutaneous only)	00173044903
RX-123	Triptan (subcutaneous only)	00173047800
RX-123	Triptan (subcutaneous only)	00173047900
RX-123	Triptan (subcutaneous only)	00173073900
RX-123	Triptan (subcutaneous only)	00173073902
RX-123	Triptan (subcutaneous only)	00703735101
RX-123	Triptan (subcutaneous only)	00703735102
RX-123	Triptan (subcutaneous only)	00781317307
RX-123	Triptan (subcutaneous only)	00781317414
RX-123	Triptan (subcutaneous only)	00781317471
RX-123	Triptan (subcutaneous only)	00781323147
RX-123	Triptan (subcutaneous only)	43376010606
RX-123	Triptan (subcutaneous only)	49884048252
RX-123	Triptan (subcutaneous only)	49884048299
RX-123	Triptan (subcutaneous only)	49884048352
RX-123	Triptan (subcutaneous only)	49884048399
RX-123	Triptan (subcutaneous only)	54569370400
RX-123	Triptan (subcutaneous only)	54569370500
RX-123	Triptan (subcutaneous only)	54569370600
RX-123	Triptan (subcutaneous only)	54569450500
RX-123	Triptan (subcutaneous only)	54569451100
RX-123	Triptan (subcutaneous only)	54868265200
RX-123	Triptan (subcutaneous only)	54868265201
RX-123	Triptan (subcutaneous only)	54868318000
RX-123	Triptan (subcutaneous only)	54868318100
RX-123	Triptan (subcutaneous only)	54868395900
RX-123	Triptan (subcutaneous only)	54868396000
RX-123	Triptan (subcutaneous only)	55045327101

RX-123	Triptan (subcutaneous only)	55045351201
RX-123	Triptan (subcutaneous only)	55390031510
RX-123	Triptan (subcutaneous only)	63323027301
RX-123	Triptan (subcutaneous only)	64679072801
RX-123	Triptan (subcutaneous only)	66860002206
RX-123	Triptan (subcutaneous only)	68115077002

cd. set	RX code set description	ndc
RX-174	Dihydroergotamine Mesylate (injection only)	00078004101
RX-174	Dihydroergotamine Mesylate (injection only)	00078004103
RX-174	Dihydroergotamine Mesylate (injection only)	00247093001
RX-174	Dihydroergotamine Mesylate (injection only)	00574085005
RX-174	Dihydroergotamine Mesylate (injection only)	00574085010
RX-174	Dihydroergotamine Mesylate (injection only)	54569233000
RX-174	Dihydroergotamine Mesylate (injection only)	55390001310
RX-174	Dihydroergotamine Mesylate (injection only)	66490004101

2a.9 Denominator Exclusions (*Brief text description of exclusions from the target population***):** Does not apply

2a.10 Denominator Exclusion Details (*All information required to collect exclusions to the denominator, including all codes, logic, and definitions***):**
Does not apply

2a.11 Stratification Details/Variables (*All information required to stratify the measure including the stratification variables, all codes, logic, and definitions***):**
Does not apply

2a.12-13 Risk Adjustment Type: no risk adjustment necessary

2a.14 Risk Adjustment Methodology/Variables (*List risk adjustment variables and describe conceptual models, statistical models, or other aspects of model or method***):**

2a.15-17 Detailed risk model available Web page URL or attachment:

2a.18-19 Type of Score: rate/proportion
2a.20 Interpretation of Score: better quality = higher score
2a.21 Calculation Algorithm (*Describe the calculation of the measure as a flowchart or series of steps***):**
1. Exclude members who meet denominator exclusion criteria
2. Assign a YES or NO result to remaining members based on numerator response
3. Rate = YES/[YES+NO]

2a.22 Describe the method for discriminating performance *(e.g., significance testing)***:**
Over 3.600 patients met the denominator from a geographically diverse 15 million member benchmark database. More than 1900 patients did not meet numerator compliance, indicating a significant population with a gap in care. The subsequent compliance rate was 66.0 percent.

2a.23 Sampling (Survey) Methodology *If measure is based on a sample (or survey), provide instructions for obtaining the sample, conducting the survey and guidance on minimum sample size (response rate)*:
A 15 million patient population sample was chosen to analyze the potential patient safety gap in care. The sample was derived from more than 60 million patients based on criteria including national geographic representation, commercial health coverage and patient age less than 65.

2a.24 Data Source (*Check the source(s) for which the measure is specified and tested)*
pharmacy data, Electronic adminstrative data/claims

2a.25 Data source/data collection instrument (*Identify the specific data source/data collection instrument, e.g. name of database, clinical registry, collection instrument, etc.***):**
Our data source is a proprietary Ingenix provider database that includes more than 60 million patients, over

Comment [k9]: 11 Risk factors that influence outcomes should not be specified as exclusions.
12 Patient preference is not a clinical exception to eligibility and can be influenced by provider interventions.

multiple years. It includes data from multiple payors. This measure specifically uses the following data from this database: member demographics, ICD-9 codes, revenue codes, CPT codes, and place of service codes. Pharmacy lab data is can be used in this measure but it not required.

2a.26-28 **Data source/data collection instrument reference web page URL or attachment:**

2a.29-31 **Data dictionary/code table web page URL or attachment:** Attachment Input Guide_NQF-634007901545951692.doc

2a.32-35 **Level of Measurement/Analysis** (*Check the level(s) for which the measure is specified and tested)*
Population: states, Population: counties or cities, Program: Disease management, Program: QIO, Multi-site/corporate chain, Integrated delivery system, Health Plan, Facility/Agency, Clinicians: Group, Clinicians: Individual, Can be measured at all levels

2a.36-37 **Care Settings (***Check the setting(s) for which the measure is specified and tested)*
nursing home (NH) /Skilled Nursing Facility (SNF), Rehabilitation Facility, Ambulatory Care: Clinic, Ambulatory Care: Emergency Dept, Ambulatory Care: Hospital Outpatient

2a.38-41 **Clinical Services** (*Healthcare services being measured, check all that apply*)
Clinicians: PA/NP/Advanced Practice Nurse, Clinicians: Physicians (MD/DO)

TESTING/ANALYSIS

2b. Reliability testing

2b.1 **Data/sample** *(description of data/sample and size)***:** Reliability is tested by using multiple databases. There are three primary databases that we use: 1) a customer acceptance (CAT) database that includes approximately 4000 members who satisfy the condition confirmation criteria; 2) a one million member face validity testing (FVT) database that is geographically diverse; and 3) a 15 million member benchmark database that is geographically diverse. All databases represent predominately a commercial population less than 65 year of age.

2b.2 **Analytic Method** *(type of reliability & rationale, method for testing)***:**
Quality assurance of each measure is accomplished through the testing using multiple methods and databases. Types of testing, data samples and volume vary to ensure the integrity of the measure. Rigorous development, analysis and testing processes are deployed for creating measure specifications. Software testing ensures the software is working as designed. Reliability and validity testing of measures is based on differing data samples and volume of members. National benchmarks are created on a large volume set of data representing members throughout the United States. All quality checks for all measure results must have consistent results and meet expected outcomes based on industry knowledge and experience.

Customer Acceptance Testing (CAT) is an important quality process. CAT ensures that the clinical measures are functioning as intended and that they generate accurate results for typical billing patterns. Using actual claims data a team of business analysts, nurses, and health services researchers conducts a detailed analysis of the output. For each clinical condition in the product (e.g., Diabetes Mellitus, Coronary Artery Disease, etc.) there is a set of CAT data with at least 4000 members who satisfy the condition confirmation criteria. This data is extracted from a large (50+ million member) multi-payer benchmark database and contains inpatient, outpatient, pharmacy, and laboratory data. The testing team analyzes claims from individual members and compares the creation of denominators (target population), numerators, and exclusions from this manual review process to output results from the quality measure.

Regression testing is the part of CAT that verifies the reliability of the product across software releases. For a new release the testing team confirms that every unchanged measure produces the same results as in previous releases, accounting for systematic changes to the software (e.g., code updates, logic changes, etc). Regression testing is conducted at multiple points throughout the software development cycle.

2b.3 **Testing Results** *(reliability statistics, assessment of adequacy in the context of norms for the test*

2b
C☐
P☐
M☐
N☐

Comment [KP10]: 2b. Reliability testing demonstrates the measure results are repeatable, producing the same results a high proportion of the time when assessed in the same population in the same time period.

Comment [k11]: 8 Examples of reliability testing include, but are not limited to: inter-rater/abstractor or intra-rater/abstractor studies; internal consistency for multi-item scales; test-retest for survey items. Reliability testing may address the data items or final measure score.

conducted):
Given the size of our benchmark database, it is the most reliable source for compliance results. Over 4,000 members from the benchmark database met the denominator definition for this measure. The overall compliance rate was 66.0 percent.

2c. Validity testing

2c.1 **Data/sample** *(description of data/sample and size)*: Our data sample for face validity testing includes a geographically diverse one million member database. Our data sample for benchmark testing includes a geographically diverse 15 million member database. Both databases represent predominately a commercial population less than 65 year of age.

2c.2 **Analytic Method** *(type of validity & rationale, method for testing)*:
Face Validity Testing (FVT) is the final testing step in the software release cycle. One million members are randomly selected from the large multi-payer benchmark database and their claims data is processed through the software. The Medical Director reviews the results to verify that:
1. Prevalence rates for a condition are comparable to nationally published rates
2. Compliance rates for a measure are comparable to the rates reported in the published literature or by other national sources (e.g. HEDIS). If no comparable sources are available, the rates are judged based on what is clinically reasonable.
In addition, all results are reviewed for face validity by members of an external physician clinical consultant panel.

A similar review of benchmark test results occurs in conjunction with a software release. With benchmark testing, 15 million members are randomly selected from the large multi-payer benchmark database and their claims data is processed through the software.

Our claims-based measures have been validated using a chart review comparison process. This validation project is summarized below:
Goal: evaluate the reliability of claims-based measure results using chart review as the gold standard
Methods:
The charts of 100 members from two clinics in one city were reviewed. Results from our claims-based measures were compared to information present in the chart. During this process, 726 measures were evaluated.
Results:
The overall error rate was less than 5%. The error rate varied depending on the type of claim required for numerator compliance and is summarized as follows:
o The error rate was highest with medications, with an 11 percent error rate (2/18). From chart review, it was difficult to tell if this represented a real error, a medication sample was provided, or the prescription was never filled).
o The error rate was 4 percent (14/318) for measures that required labs for numerator compliance. It was noted that a claims-based measure approach sometimes identified labs that were missing in chart review.
o The error rate for office visit and specialty appointments was 2 percent (8/390). Of note, administrative claims was more likely than chart review to identify relevant office and specialty visits, particularly for appointments that occurred outside the clinic or network.
o Errors were found related to coding in claims data, not due to the claims-based measures or methodology. These errors were not quantified.

2c.3 **Testing Results** *(statistical results, assessment of adequacy in the context of norms for the test conducted)*:
Summarized in 2b3

2c
C☐
P☐
M☐
N☐

2d. Exclusions Justified

2d.1 **Summary of Evidence supporting exclusion(s):**
This measure does not include any exclusions.

2d.2 **Citations for Evidence:**

2d
C☐
P☐
M☐
N☐
NA☐

Comment [KP12]: 2c. Validity testing demonstrates that the measure reflects the quality of care provided, adequately distinguishing good and poor quality. If face validity is the only validity addressed, it is systematically assessed.

Comment [k13]: 9 Examples of validity testing include, but are not limited to: determining if measure scores adequately distinguish between providers known to have good or poor quality assessed by another valid method; correlation of measure scores with another valid indicator of quality for the specific topic; ability of measure scores to predict scores on some other related valid measure; content validity for multi-item scales/tests. Face validity is a subjective assessment by experts of whether the measure reflects the quality of care (e.g., whether the proportion of patients with BP < 140/90 is a marker of quality). If face validity is the only validity addressed, it is systematically assessed (e.g., ratings by relevant stakeholders) and the measure is judged to represent quality care for the specific topic and that the measure focus is the most important aspect of quality for the specific topic.

Comment [KP14]: 2d. Clinically necessary measure exclusions are identified and must be:
•supported by evidence of sufficient frequency of occurrence so that results are distorted without the exclusion;
AND
•a clinically appropriate exception (e.g., contraindication) to eligibility for the measure focus;
AND
•precisely defined and specified:
–if there is substantial variability in exclusions across providers, the measure is specified so that exclusions are computable and the effect on the measure is transparent (i.e., impact clearly delineated, such as number of cases excluded, exclusion rates by type of exclusion);
if patient preference (e.g., informed decision-making) is a basis for exclusion, there must be evidence that it strongly impacts performance on the measure and the measure must be specified so that the information about patient preference and the effect on the measure is transparent (e.g., numerator category computed separately, denominator exclusion category computed separately).

Comment [k15]: 10 Examples of evidence that an exclusion distorts measure results include, but are not limited to: frequency of occurrence, sensitivity analyses with and without the exclusion, and variability of exclusions across providers.

2d.3 Data/sample *(description of data/sample and size)*:

2d.4 Analytic Method *(type analysis & rationale)*:

2d.5 Testing Results *(e.g., frequency, variability, sensitivity analyses)*:

2e. Risk Adjustment for Outcomes/ Resource Use Measures

2e.1 Data/sample *(description of data/sample and size)*: This measure does not include risk adjustment.

2e.2 Analytic Method *(type of risk adjustment, analysis, & rationale)*:

2e.3 Testing Results *(risk model performance metrics)*:

2e.4 If outcome or resource use measure is not risk adjusted, provide rationale:

2e
C☐
P☐
M☐
N☐
NA☐

2f. Identification of Meaningful Differences in Performance

2f.1 Data/sample from Testing or Current Use *(description of data/sample and size)*: Our benchmark data sample includes a geographically diverse 15 million member benchmark database. The database represents predominately a commercial population less than 65 year of age.

2f.2 Methods to identify statistically significant and practically/meaningfully differences in performance *(type of analysis & rationale)*:
During benchmark testing, 15 million members are randomly selected from the large multi-payer benchmark database and their claims data is processed through the software. The Medical Director reviews the results to verify that:
1. Prevalence rates for a condition are comparable to nationally published rates
2. Compliance rates for a measure are comparable to the rates reported in the published literature or by other national sources (e.g. HEDIS). If no comparable sources are available, the rates are judged based on what is clinically reasonable.

In addition, all results are systematically reviewed for face validity by members of an external physician clinical consultant panel.

2f.3 Provide Measure Scores from Testing or Current Use *(description of scores, e.g., distribution by quartile, mean, median, SD, etc.; identification of statistically significant and meaningfully differences in performance)*:
Summarized in 2b3

2f
C☐
P☐
M☐
N☐

2g. Comparability of Multiple Data Sources/Methods

2g.1 Data/sample *(description of data/sample and size)*:

2g.2 Analytic Method *(type of analysis & rationale)*:

2g.3 Testing Results *(e.g., correlation statistics, comparison of rankings)*:

2g
C☐
P☐
M☐
N☐
NA☐

2h. Disparities in Care

2h.1 If measure is stratified, provide stratified results *(scores by stratified categories/cohorts)*:

2h
C☐
P☐

Comment [KP16]: 2e. For outcome measures and other measures (e.g., resource use) when indicated:
•an evidence-based risk-adjustment strategy (e.g., risk models, risk stratification) is specified and is based on patient clinical factors that influence the measured outcome (but not disparities in care) and are present at start of care;[Error! Bookmark not defined.] OR rationale/data support no risk adjustment.

Comment [k17]: 13 Risk models should not obscure disparities in care for populations by including factors that are associated with differences/inequalities in care such as race, socioeconomic status, gender (e.g., poorer treatment outcomes of African American men with prostate cancer, inequalities in treatment for CVD risk factors between men and women). It is preferable to stratify measures by race and socioeconomic status rather than adjusting out differences.

Comment [KP18]: 2f. Data analysis demonstrates that methods for scoring and analysis of the specified measure allow for identification of statistically significant and practically/clinically meaningful differences in performance.

Comment [k19]: 14 With large enough sample sizes, small differences that are statistically significant may or may not be practically or clinically meaningful. The substantive question may be, for example, whether a statistically significant difference of one percentage point in the percentage of patients who received smoking cessation counseling (e.g., 74% v. 75%) is clinically meaningful; or whether a statistically significant difference of $25 in cost for an episode of care (e.g., $5,000 v. $5,025) is practically meaningful. Measures with overall poor performance may not demonstrate much variability across providers.

Comment [KP20]: 2g. If multiple data sources/methods are allowed, there is demonstration they produce comparable results.

Comment [KP21]: 2h. If disparities in care have been identified, measure specifications, scoring, and analysis allow for identification of disparities through stratification of results (e.g., by race, ethnicity, socioeconomic status, gender);OR rationale/data justifies why stratification is not necessary or not feasible.

2h.2 If disparities have been reported/identified, but measure is not specified to detect disparities, provide follow-up plans:	**M☐ N☐ NA☐**
TAP/Workgroup: What are the strengths and weaknesses in relation to the sub-criteria **for** *Scientific Acceptability of Measure Properties?*	**2**
Steering Committee: Overall, to what extent was the criterion, *Scientific Acceptability of Measure Properties*, **met?** **Rationale:**	*2* **C☐ P☐ M☐ N☐**
3. USABILITY	
Extent to which intended audiences (e.g., consumers, purchasers, providers, policy makers) can understand the results of the measure and are likely to find them useful for decision making. (evaluation criteria)	Eval Rating
3a. Meaningful, Understandable, and Useful Information **3a.1 Current Use:** in use **3a.2 Use in a public reporting initiative (disclosure of performance results to the public at large)** (*If used in a public reporting initiative, provide name of initiative(s), locations, Web page URL(s). If not publicly reported, state the plans to achieve public reporting within 3 years*)**:** Health plans, physicians (individuals and groups), care management, and other vendors/customers are using this measure on a national level. However, we do not know if this specific measure is being used as part of a public reporting initiative. **3a.3 If used in other programs/initiatives (***If used in quality improvement or other programs/initiatives, name of initiative(s), locations, Web page URL(s). If not used for QI, state the plans to achieve use for QI within 3 years***):** Health plans, physicians (individuals and groups), care management, and other vendors/customers use many of our measures on a national level for quality improvement, disease management, and physician sharing programs. Customers are able to select their measures depending on their business needs. As such, we do not know which specific measures are used by our customers. **Testing of Interpretability** (*Testing that demonstrates the results are understood by the potential users for public reporting and quality improvement*) **3a.4 Data/sample** *(description of data/sample and size)***:** Results are summarized and reported by users/customers depending on their business need - we do not have access to this information. Because of us my multiple users/customers, there is no single data sample, methodology, or public reporting format. **3a.5 Methods** *(e.g., focus group, survey, QI project)***:** **3a.6 Results** *(qualitative and/or quantitative results and conclusions)***:**	**3a C☐ P☐ M☐ N☐**
3b/3c. Relation to other NQF-endorsed measures **3b.1 NQF # and Title of similar or related measures:** EC-093-08 Adult(s) with Frequent Use of Acute Medications that also Received Prophylactic Medications	
(for NQF staff use) **Notes on similar/related** endorsed **or submitted measures:**	
3b. Harmonization If this measure is related to measure(s) already endorsed by NQF (e.g., same topic, but different target population/setting/data source or different topic but same target population): **3b.2 Are the measure specifications harmonized? If not, why?** We are the author of EC-093-08. These measures are fully harmonized.	**3b C☐ P☐ M☐ N☐ NA☐**

Comment [KP22]: 3a. Demonstration that information produced by the measure is meaningful, understandable, and useful to the intended audience(s) for both public reporting (e.g., focus group, cognitive testing) and informing quality improvement (e.g., quality improvement initiatives). An important outcome that may not have an identified improvement strategy still can be useful for informing quality improvement by identifying the need for and stimulating new approaches to improvement.

Comment [KP23]: 3b. The measure specifications are harmonized with other measures, and are applicable to multiple levels and settings.

Comment [k24]: 16 Measure harmonization refers to the standardization of specifications for similar measures on the same topic (e.g., *influenza immunization* of patients in hospitals or nursing homes), or related measures for the same target population (e.g., eye exam and HbA1c for *patients with diabetes*), or definitions applicable to many measures (e.g., age designation for children) so that they are uniform or compatible, unless differences are dictated by the evidence. The dimensions of harmonization can include numerator, denominator, exclusions, and data source and collection instructions. The extent of harmonization depends on the relationship of the measures, the evidence for the specific measure focus, and differences in data sources.

3c. Distinctive or Additive Value

3c.1 **Describe the distinctive, improved, or additive value this measure provides to existing NQF-endorsed measures:**
This measure addresses a different aspect of migraine care. Specifically, it identifies patients with poor migraine control who would benefit from a provider encounter to access the management plan.

5.1 **Competing Measures If this measure is similar to measure(s) already endorsed by NQF (i.e., on the same topic and the same target population), describe why it is a more valid or efficient way to measure quality:**
see 3c.1

TAP/Workgroup: What are the strengths and weaknesses in relation to the sub-criteria **for** *Usability*?

3c
C☐
P☐
M☐
N☐

3

Steering Committee: Overall, to what extent was the criterion, *Usability*, **met?**
Rationale:

3
C☐
P☐
M☐
N☐

4. FEASIBILITY

Extent to which the required data are readily available, retrievable without undue burden, and can be implemented for performance measurement. (evaluation criteria)

Eval Rating

4a. Data Generated as a Byproduct of Care Processes

4a.1-2 **How are the data elements that are needed to compute measure scores generated?**
coding/abstraction performed by someone other than person obtaining original information,

4a
C☐
P☐
M☐
N☐

4b. Electronic Sources

4b.1 **Are all the data elements available electronically?** (*elements that are needed to compute measure scores are in defined, computer-readable fields, e.g., electronic health record, electronic claims*)
Yes

4b.2 **If not, specify the near-term path to achieve electronic capture by most providers.**

4b
C☐
P☐
M☐
N☐

4c. Exclusions

4c.1 **Do the specified exclusions require additional data sources beyond what is required for the numerator and denominator specifications?**
No

4c.2 **If yes, provide justification.**

4c
C☐
P☐
M☐
N☐
NA☐

4d. Susceptibility to Inaccuracies, Errors, or Unintended Consequences

4d.1 **Identify susceptibility to inaccuracies, errors, or unintended consequences of the measure and describe how these potential problems could be audited. If audited, provide results.**
Given the high threshold set in this measure to identify patients with poor migraine control, this measure will not identify all patients who would benefit from a provider encounter to review the migraine management plan. We are willing to accept this potential error rather than lowering the threshold and possibly identifying patients incorrectly as having poor control.

4d
C☐
P☐
M☐
N☐

4e. Data Collection Strategy/Implementation

4e.1 **Describe what you have learned/modified as a result of testing and/or operational use of the measure regarding data collection, availability of data/missing data, timing/frequency of data**

4e
C☐
P☐
M☐

Comment [KP25]: 3c. Review of existing endorsed measures and measure sets demonstrates that the measure provides a distinctive or additive value to existing NQF-endorsed measures (e.g., provides a more complete picture of quality for a particular condition or aspect of healthcare).

Comment [k26]: 5. Demonstration that the measure is superior to competing measures – new submissions and/or endorsed measures (e.g., is a more valid or efficient way to measure).

Comment [KP27]: 4a. For clinical measures, required data elements are routinely generated concurrent with and as a byproduct of care processes during care delivery. (e.g., BP recorded in the electronic record, not abstracted from the record later by other personnel; patient self-assessment tools, e.g., depression scale; lab values, meds, etc.)

Comment [KP28]: 4b. The required data elements are available in electronic sources. If the required data are not in existing electronic sources, a credible, near-term path to electronic collection by most providers is specified and clinical data elements are specified for transition to the electronic health record.

Comment [KP29]: 4c. Exclusions should not require additional data sources beyond what is required for scoring the measure (e.g., numerator and denominator) unless justified as supporting measure validity.

Comment [KP30]: 4d. Susceptibility to inaccuracies, errors, or unintended consequences and the ability to audit the data items to detect such problems are identified.

Comment [KP31]: 4e. Demonstration that the data collection strategy (e.g., source, timing, frequency, sampling, patient confidentiality, etc.) can be implemented (e.g., already in operational use, or testing demonstrates that it is ready to put into operational use).

collection, patient confidentiality, time/cost of data collection, other feasibility/ implementation issues: No modifications have been made based on testing or operational use of the measure. 4e.2 **Costs to implement the measure** (*costs of data collection, fees associated with proprietary measures*)**:** We do not have access to this information. This would vary based on the customer/vendor, patient population, and programs/interventions associated with measure use. 4e.3 **Evidence for costs:** 4e.4 **Business case documentation:**	**N**☐
TAP/Workgroup: What are the strengths and weaknesses in relation to the sub-criteria **for** *Feasibility*?	**4**
Steering Committee: Overall, to what extent was the criterion, *Feasibility*, **met?** **Rationale:**	**4** **C**☐ **P**☐ **M**☐ **N**☐
RECOMMENDATION	
(for NQF staff use) **Check if measure is untested and only eligible for time-limited endorsement.**	**Time-limited** ☐
Steering Committee: Do you recommend for endorsement? **Comments:**	**Y**☐ **N**☐ **A**☐

CONTACT INFORMATION

Co.1 **Measure Steward (Intellectual Property Owner)**
Co.1 **Organization**
Ingenix | 12125 Technology Drive | Eden Prairie | Minnesota | 55344

Co.2 **Point of Contact**
Kay | Schwebke, Medical Director | kay.schwebke@ingenix.com | 952-833-7154

Measure Developer If different from Measure Steward
Co.3 **Organization**
Ingenix | 12125 Technology Drive | Eden Prairie | Minnesota | 55344

Co.4 **Point of Contact**
Kay | Schwebke, Medical Director | kay.schwebke@ingenix.com | 952-833-7154

Co.5 **Submitter If different from Measure Steward POC**
Kay | Schwebke, Medical Director | kay.schwebke@ingenix.com | 952-833-7154- |Ingenix

Co.6 **Additional organizations that sponsored/participated in measure development**
This measure has been reviewed and supported by the American Academy of Family Physicians.

ADDITIONAL INFORMATION

Workgroup/Expert Panel involved in measure development
Ad.1 **Provide a list of sponsoring organizations and workgroup/panel members' names and organizations. Describe the members' role in measure development.**
We have an external consultant panel that participates in the original literature search process, measure development, code set review, testing review, and maintenance processes. Panel members include the following:

NAME & Title Employer/Position

Alexander, Beth Pharm D, BCPS Assistant Professor, Augsburg College
Ayenew, Woubeshet, MD Hennepin Faculty Associates; Hennepin County Medical Center
Becker, Keith, MD Fairview Medical Center
Betcher, Susan, MD Allina Medical Clinic
Bruer, Paul, MD Comprehensive Ophthamology, LLC
Capecchi, Joseph, MD Allina Medical Clinic
Giesler, Janell, MD Allina Medical Clinic
Grabowski, Carol, MD Allina Medical Clinic
Hansen, Calvin, MD Iowa Health Physicians
Hargrove, Jody, MD Arthritis and Rheumatology Consultants
Hermann, Richard, MD Tufts - New England Medical Center
Jemming, Brian, Pharm D CentraCare Health System
Kohen, Jeffrey, MD Veterans Affairs Medical Center
McCarthy, Teresa, MD University of Minnesota, Department of Family Medicine & Community Health
McEvoy, Charlene, MD, MPH HealthPartners & HealthPartners Research Foundation; Assistant Professor of Medicine, University of Minnesota
McGee, Deanna, Pharm D, BCPS Retail Pharmacy
Ogle, Kathleen, MD Hennepin Faculty Associates; Hennepin County Medical Center: Assistant Professor of Medicine, University of Minnesota Medical School
Peter, Kathleen, MD Park Nicollet Medical Center
Pieper-Bigelow, Christina, MD Allina Medical Clinic
Redmon, Bruce, MD University of Minnesota Physicians
Scharpf, Steven, MD Mountain Valleys Health Centers
Weitz, Carol, MD Independent

Ad.2 **If adapted, provide name of original measure:**
Ad.3-5 **If adapted, provide original specifications URL or attachment**

Measure Developer/Steward Updates and Ongoing Maintenance
Ad.6 **Year the measure was first released:** 2006
Ad.7 **Month and Year of most recent revision:** 2007-08
Ad.8 **What is your frequency for review/update of this measure?** every three years at minimum
Ad.9 **When is the next scheduled review/update for this measure?** 2010-02

Ad.10 **Copyright statement/disclaimers:**

Ad.11 -13 Additional Information web page URL or attachment: Attachment Migraine appendix.doc

Date of Submission (*MM/DD/YY*)**:** 02/05/2010

Page 3: [1] Comment [k4] **Karen Pace** **10/5/2009 8:59:00 AM**

1c. The measure focus is:

- an outcome (e.g., morbidity, mortality, function, health-related quality of life) that is relevant to, or associated with, a national health goal/priority, the condition, population, and/or care being addressed;

OR

- if an intermediate outcome, process, structure, etc., there is **evidence** that supports the specific measure focus as follows:
  - Intermediate outcome – evidence that the measured intermediate outcome (e.g., blood pressure, Hba1c) leads to improved health/avoidance of harm or cost/benefit.
  - Process – evidence that the measured clinical or administrative process leads to improved health/avoidance of harm and
    if the measure focus is on one step in a multi-step care process, it measures the step that has the greatest effect on improving the specified desired outcome(s).
  - Structure – evidence that the measured structure supports the consistent delivery of effective processes or access that lead to improved health/avoidance of harm or cost/benefit.
  - Patient experience – evidence that an association exists between the measure of patient experience of health care and the outcomes, values and preferences of individuals/ the public.
  - Access – evidence that an association exists between access to a health service and the outcomes of, or experience with, care.
  - Efficiency – demonstration of an association between the measured resource use and level of performance with respect to one or more of the other five IOM aims of quality.

Page 3: [2] Comment [k5] **Karen Pace** **10/5/2009 8:59:00 AM**

4 Clinical care processes typically include multiple steps: assess → identify problem/potential problem → choose/plan intervention (with patient input) → provide intervention → evaluate impact on health status. If the measure focus is one step in such a multi-step process, the step with the greatest effect on the desired outcome should be selected as the focus of measurement. For example, although assessment of immunization status and recommending immunization are necessary steps, they are not sufficient to achieve the desired impact on health status – patients must be vaccinated to achieve immunity. This does not preclude consideration of measures of preventive screening interventions where there is a strong link with desired outcomes (e.g., mammography) or measures for multiple care processes that affect a single outcome.

INGENIX®

Input Guide

Release 7.0, Technical Guide for Windows, February 2008

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What Input Files to Prepare

The following list specifies what input files you prepare for processing:

- The claims data file (required)
- The member data file (required)
- The member term data file (required)

Field Type Definitions and Input File Requirements

This chapter lists the field requirements for your input files. One of the attributes listed among the requirements is defined as "Type". There are four field types used to describe a field's value, and they are defined below.

Field Type	Definition
AlphaNum	A value made of letters and/or numbers. If a value of this type is made of numbers only, it will not be a value that can be operated on mathematically. For example, it would be inappropriate to subtract one procedure code from another procedure code even though both values may contain only numbers.
Num	A value made of numbers only, and which can logically be operated on mathematically. Age is an example of this type. One particular field, while not used in mathematical calculations, is defined in the EBM Connect software as such that it accepts only numeric values. (To enter a non-numeric value would cause EBM Connect processing to stop.) Therefore, this field is defined as Num. It is the Case ID field in the optional disease registry input file.
Date	A value which can be interpreted as a date value. Values should always use four-digit years but the format may vary otherwise.
DecNum	A value made of numbers and a decimal point. These values can also logically be operated on mathematically.

Claims Input File

The claims file contains detailed information on services that were billed or performed or otherwise rendered. The claims file includes:

- Medical claims, including medical services, facility services and clinic services
- Pharmacy claims, including billed prescriptions and drugs
- Lab claims, including lab test and results information

Field Name	Type	Length	Required or Optional
Family ID	AlphaNum	1-30	Always required for all claims
Patient ID	AlphaNum	0-2	Optional
Amount Paid	DecNum	1-11	Required for all claims
Amount Allowed	DecNum	0-11	Required for all claims
Procedure Code	AlphaNum	5	Required if there is no revenue code, NDC, or LOINC® code
Procedure Code Modifier	AlphaNum	2	Required for medical claims
Revenue Code	AlphaNum	0 or 4	Optional (applies to medical claims when used)
First Diagnosis Code	AlphaNum	5 or 6	Required for medical claims
Second Diagnosis Code	AlphaNum	0, 5 or 6	Optional (applies to medical claims when used)
Third Diagnosis Code	AlphaNum	0, 5 or 6	Optional (applies to medical claims when used)
Fourth Diagnosis Code	AlphaNum	0, 5 or 6	Optional (applies to medical claims when used)
First Date of Service	Date	8 or 10	Always required for all claims
Last Date of Service	Date	8 or 10	Required for all claims

Paid Date	Date	0, 8 or 10	Optional
Type of Service	AlphaNum	0-10	Optional
Provider ID	AlphaNum	1-20	Required for medical claims
Ordering Provider ID	AlphaNum	0-20	Optional
Provider Type	AlphaNum	1-10	Required for medical claims
Provider Specialty Type	AlphaNum	1-10	Required for medical claims
Provider Key	AlphaNum	1-20	Required for medical claims
NDC	AlphaNum	0 or 11	Required for Rx claims
Day Supply	Num	0-4	Required for Rx claims
Quantity Count	DecNum	0-10	Required for Rx claims
LOINC®	AlphaNum	0 or 7	Required for lab claims
Lab Test Result	AlphaNum	0-18	Required for lab claims
Place of Service	AlphaNum	1-10	Required for medical claims
Unique Record ID	AlphaNum	1-28	Required for all claims
Claim Number	AlphaNum	1-28	Required for all claims
Bill Type Frequency Indicator	Num	0 or 1	Optional
Patient Status	AlphaNum	1-2	Required for facility claims (involving admission or confinement).
Facility Type	AlphaNum	0-2	Optional
Bed Type	AlphaNum	0-1	Optional
First ICD-9 Procedure Code	AlphaNum	0, 4 or 5	Optional, but will impact results (applies to medical claims when used)
Second ICD-9 Procedure Code	AlphaNum	0, 4 or 5	Optional (see above)
Third ICD-9 Procedure Code	AlphaNum	0, 4 or 5	Optional (see above)
Fourth ICD-9 Procedure Code	AlphaNum	0, 4 or 5	Optional (see above)

Field Descriptions

Instructions for each input field are as follows:

Family ID

This field identifies all members of a family and can be any alphanumeric string.

Note: Remember that each Family ID (and Patient ID) listed in your claims input file must have a corresponding record in your member input data file and your member term data file.

Patient ID

This field identifies individual members within a family. If present, this field must be sorted within Family ID, so that all records for an individual are contiguous. If the Family ID uniquely identifies an individual, this field need not be specified (that is, its length in the dictionary will be zero).

Amount Paid

The amount paid for this claim line.

Amount Allowed

The allowed amount for this claim line. This amount typically represents the total amount reimbursed including deductibles, copays, coinsurance, insurer paid, etc.

Procedure Code

The procedure code must be one of:

- A procedure code specified in the Physician's Current Procedure Terminology, 4th Edition (CPT®-4 codes) defined by the American Medical Association, for the years 1997 and later.
- A procedure code specified by the HCFA Common Procedure Coding System, Level II code (HCPCS) defined by the Centers for Medicare and Medicaid Services (CMS) for the years 1999 and later.
- A National Uniform Billing Committee (NUBC) revenue code.

Note: When the NUBC code is entered in the Procedure Code field, it should be padded to the right with blanks because the Procedure Code field always occupies five characters.

- If your organization defines its own procedure codes and/or revenue codes, they must be mapped to standard procedure and revenue codes.

Procedure Code Modifier

Use this field to specify any procedure code modifier that accompanies the procedure code.

Revenue Code

The revenue code, if one was entered for the claim. Supported values in this field are NUBC revenue codes. If your organization defines its own revenue codes, they must be mapped to standard revenue codes.

The revenue code is an optional field, allowing you to define your input records so that you can place an NUBC revenue code and a CPT/HCPCS procedure code on a single record line.

For claim records that do not have a revenue code, leave the revenue code field blank.

First Diagnosis Code Through Fourth Diagnosis Code

Up to four diagnoses may be entered for each claim, but only the first is required.

If your organization defines its own diagnosis codes, they must be mapped to standard ICD-9 diagnosis codes.

First Date of Service and Last Date of Service

The first date and last date represented by the claim line. If you choose to use a date format with separators (such as YYYY/MM/DD or YYYY-MM-DD), the separators are ignored on input, so you can use any character as a separator. Valid formats include: YYYYMMDD, MMDDYYYY, DDMMYYYY, YYYY/MM/DD, MM/DD/ YYYY, and DD/MM/YYYY, where the separator can be any character.

Paid Date

This field is optional. This is the date the claim was paid. The format of the paid date must be the same as that used in the First and Last Date of Service.

Type of Service

This is an optional code which represents the type of service (TOS) performed for this claim. If no specific value is available for this field, it should be filled with blanks. If this field is not used (i.e., its length is set to zero in the configuration), non-pharmaceutical claims with no procedure code will be treated as ancillary records.

Provider ID

Provider identification number from the claim. Used to identify who performed the service.

Ordering Provider ID

This is an optional field. This is the identification number of the provider who ordered the service.

Provider Type

This code represents the type of provider who performed the service. Examples of provider types would be chiropractor, nurse practitioner, medical doctor, counselor, pharmacy, hospital or treatment facility.

Provider Specialty Type

This code represents the specialty of the provider who performed the service.

Provider Key

Unique number or code for a physician who has multiple provider IDs or specialties. A single health care provider may have multiple provider IDs in your input claims data, but this person or entity should have only one provider key.

NDC

If this is a pharmaceutical claim, this field should contain the drug's NDC code. For non-pharmaceutical claim records, the NDC field should be filled with blanks.

Day Supply

For pharmacy records, the number of days a filled prescription is expected to last. If you have no pharmacy records, the Days Supply is an optional field.

Quantity Count

Quantity of drug dispensed in metric units:

Each - solid oral dosage forms (tablet, capsule), powder filled (dry) vials, packets, patches, units of use packages, suppositories, bars.

Milliliter - (cc) liquid oral dosage forms, liquid filled vials, ampules, reconstituted oral products.

Grams - ointments, bulk powders (not IV).
If you have no pharmacy records, the Quantity Count is an optional field.

LOINC®

Logical Observation Identifiers Names and Codes (LOINC®). The LOINC Code is a universal identifier for a lab test for a particular analyte. The LOINC User's Guide and database can be found at www.regenstrief.org.

Enter a LOINC code if the record is a lab record. For non-lab records, leave the LOINC field blank.

If you have no lab records in your claims input, the LOINC code is optional.

Notes:

(1) When using lab results data that has not been mapped to a LOINC code, map the comparable vendor-specific test number provided by the laboratory vendor(s) to one of these default codes.

(2) This is a retired code which may be present on historical data, or which some laboratories may be continuing to use. Input record data with this code is included in the definition of this test.

Lab Test Result

If the record is a lab record, use this field to enter the result value of lab test. For non-lab records, this field should be blank.

If you have no lab records in your claims input, the Lab Test Result is optional.

Place of Service

Place of service (POS). You must map your internal POS codes to Centers for Medicare and Medicaid Services (CMS) standard POS codes.

Unique Record ID

This required field contains a unique identifier representing the service line from the claim. For medical services, this ID typically represents the service row from the CMS 1500 or CMS 1450/UB92 claim form.

Claim Number

A unique identifier used to link service lines for a specific claim submitted for a member. If a claim has multiple service lines, each service will have a unique record ID and the same claim number to represent the claim.

Bill Type Frequency Indicator

This optional field is used to indicate the disposition of confinements.

Patient Status

This field is required for facility claims. The contents will be the patient status indicator field from the NUBC UB-92 form. This field can denote whether the member died during a confinement.

Facility Type

This field is optional. Space for it is provided to allow for additional post grouping analysis. The contents will typically be the UB-92 facility type data value. This would allow records to be easily selected for diagnosis related grouping (DRG) based on the facility type.

Bed Type

If a value is present, this field acts as an additional discriminator in determining whether a Facility record extends an existing confinement or starts a new confinement.

First ICD-9 Procedure Code Through Fourth ICD-9 Procedure Code

If your claims have ICD-9 procedure codes, include them in your claims input file.

If a decimal point will appear in this field in your claim records, the length should be given as 5. If the decimal separator is not used, the length is 4. If these fields are unused, the length is zero.

Member Input File

The member data file contains the most current information about the member.

Field Descriptions

Field	Type	Length	Required or Optional
Family ID	AlphaNum	1-30	Required
Patient ID	AlphaNum	0-2	Optional
Patient Gender	AlphaNum	1	Required
Date of Birth	Date	8 or 10	Required
Member Beginning Eligibility Date	Date	0, 8 or 10	Optional
Member Ending Eligibility Date	Date	0, 8 or 10	Optional

Instructions for each input field are as follows:

Family ID

This field identifies all members of a family and can be any alphanumeric string. The records in the member file must be sorted first on the Family ID (together with Patient ID, if available) so that all records for an individual are contiguous.

Patient ID

This field identifies individual members within a family. If present, this field must be sorted within Family ID, so that all records for an individual are contiguous. If the Family ID uniquely identifies an individual, this field need not be specified (that is, its length in the dictionary will be zero).

Patient Gender and Date of Birth

The member's gender (F or M) and date of birth. If you choose to use a date format with separators (such as YYYY/MM/DD or YYYY-MM-DD), the separators are ignored on input, so you can use any character as a separator. Valid date formats include: YYYYMMDD, MMDDYYYY, DDMMYYYY, YYYY/MM/DD, MM/DD/YYYY, and DD/MM/YYYY, where the separator can be any character.

Member Beginning Eligibility Date and Ending Eligibility Date

The first date on which the member became covered under the plan and the last date of the member's coverage. If you choose to use a date format with separators (such as YYYY/MM/DD or YYYY-MM-DD), the separators are ignored on input, so you can use any character as a separator. Valid formats include: YYYYMMDD, MMDDYYYY, DDMMYYYY, YYYY/MM/DD, MM/DD/YYYY, and DD/MM/YYYY, where the separator can be any character.

Member Term Input File

The member term data file contains member coverage and term activity information. Plan coverage begin and end dates are required in order to correctly calculate the other fields in the member term file. There may be more than one record per individual member.

Field Descriptions

Field	Type	Length	Required or Optional
Family ID	AlphaNum	1-30	Required
Patient ID	AlphaNum	0-2	Optional
Member Beginning Eligibility Date	Date	8 or 10	Required
Member Ending Eligibility Date	Date	8 or 10	Required
Primary Care Provider	AlphaNum	20	Required
Provider Specialty Type	AlphaNum	1-10	Required
Medical Flag	AlphaNum	1	Required
Pharmacy Flag	AlphaNum	1	Required

Instructions for each input field are as follows:

Family ID

This field identifies all members of a family and can be any alphanumeric string. The records in the member term file must be sorted first on the Family ID (together with Patient ID, if available) so that all records for an individual are contiguous.

Patient ID

This field identifies individual members within a family.

Member Beginning Eligibility Date and Member Ending Eligibility Date

The first date on which the member became covered under the plan and the last date of the member's coverage. If you choose to use a date format with separators (such as YYYY/MM/DD or YYYY-MM-DD), the separators are ignored on input, so you can use any character as a separator. Valid formats include: YYYYMMDD, MMDDYYYY, DDMMYYYY, YYYY/MM/DD, MM/DD/YYYY, and DD/MM/YYYY, where the separator can be any character.

Primary Care Provider

The provider key for the member's primary care physician. A single health care physician may have multiple provider IDs in your input claims data, but this person should have only one provider key.

Provider Specialty Type

This code represents the specialty of the primary care physician.

Medical Flag

Identifies whether the member has medical coverage (Y or N).

Pharmacy Flag

Identifies whether the member has pharmacy coverage (Y or N).

Appendix

The purpose of the following methodology is to identify patients that have frequent migraine headaches. It is not possible to directly identify headaches; therefore, quantification of acute migraine medications against a threshold is used as a proxy for frequent headaches. Frequent migraine headaches are defined as 4 per month. Five types of migraine headache medications will be analyzed separately to determine whether or not a patient has frequent migraine headaches.

Thresholds were defined based on 12 headaches during a 90-day period

1. Triptan contain medications
   - Oral – 36 tablets within 90 days
   - Subcutaneous – 24 dose equivalents within 90 days
   - Nasal spray – 24 spray bottles within 90 days

2. Butorphanol Tartrate (e.g., Stadol NS)
   - Nasal Squeeze Bottle – 12.5 mL within 90 days

3. Dihydroergotamine Mesylate
   - Ampule – 12 mL within 90 days

4. Butalbital (e.g., Fioricet and Fiorinal)
   - Oral – 100 tablets or capsules within 90 days

5. Midrin type medication
   - Oral – 150 capsules within 90 days

1. ORAL TRIPTAN

a. Quantity count for this drug is in tablets
b. Two-three tablets treat one headache. For the purpose of calculation, assume three tablets per headache.
c. <u>Threshold: 36 tablets Oral Triptan</u>
d. Methodology:
   i. Sum Quantity Count where Drug Concept ID = 122
   ii. Compare the result from i to threshold of 36 tablets

2. SUBCUTANEOUS TRIPTAN

i. Create a SUMATRIPTAN SUCCINATE dose equivalent

A. SUMATRIPTAN SUCCINATE KIT PACKAGES

a. Quantity count for this drug is in kits
b. One kit contains two single dose syringe cartridges
c. Two single dose syringes are used to treat one headache
d. <u>One kit SUMATRIPTAN SUCCINATE = 2 SUMATRIPTAN SUCCINATE dose equivalent</u>

B. SUMATRIPTAN SUCCINATE VIAL PACKAGES

a. Quantity count for this drug is in mLs
b. Packed in 0.5 mL single dose vials in cartons of 5 vials. Each vial contains 6 mg of active ingredient.
c. One – two 0.5 mL vials are used to treat one headache.
d. <u>1 mL SUMATRIPTAN SUCCINATE = 2 SUMATRIPTAN SUCCINATE dose equivalent</u>

ii. **Threshold: 24 dose equivalents SUMATRIPTAN SUCCINATE**

iii. Methodology:
   a. Sum Quantity Count where Drug Concept ID = 123
   b. Multiply Sum of Quantity Count by 2
   c. Compare to threshold of 24 dose equivalents

3. NASAL TRIPTAN (SUMATRIPTAN Nasal Spray)
   a. Quantity count for this drug is in bottles
   b. Packed in six single use spray bottles
   c. Two spray bottles are used to treat one headache
   d. Threshold: 24 spray bottles SUMATRIPTAN
   e. Methodology:
      i. Sum Quantity Count where Drug Concept ID = 121
      ii. Compare the result from i to threshold of 24 spray bottles

4. **BUTORPHANOL TARTRATE (e.g., Stadol NS)**
   a. Quantity count for this drug is in mLs
   b. Packed in 2.5 ml squeeze bottles
   c. One 2.5 mL squeeze bottle is used to treat 2 to 3 headaches.
   d. Threshold: 12.5 mL BUTORPHANOL TARTRATE
   e. Methodology:
      i. Sum Quantity Count where Drug Concept ID = 29
      ii. Compare the result from i to threshold of 12.5 mL

5. DIHYDROERGOTAMINE MESYLATE NASAL SPRAY (e.g., Migranal)
   a. Quantity count for this drug is in mLs
   b. Packed in 4 mL kits
   c. One 4 mL kit is used to treat 4 headaches.
   d. Threshold: 12 mL DIHYDROERGOTAMINE MESYLATE NASAL SPRAY
   e. Methodology:
      i. Sum Quantity Count where Drug Concept ID = 42
      ii. Compare the result from i to threshold of 12 mL

6. DIHYDROERGOTAMINE MESYLATE INJECTION (e.g., D.H.E.45)
   a. Quantity count for this drug is in mLs
   b. Packed in 1 mL ampules
   c. One 1 ml ampule is used to treat 1 headache.
   d. Threshold: 12 mL DIHYDROERGOTAMINE MESYLATE INJECTION
   e. Methodology:
      i. Sum Quantity Count where Drug Concept ID = 174
      ii. Compare the result from i to threshold of 12 mL

7. BUTALBITAL containing Medication (e.g., Fioricet and Fiorinal)
   a. Quantity count for this drug is in tablets/capsules
   b. 8 tablets/capsules are used to treat one headache
   c. Threshold: 100 tablets/capsules BUTALBITAL
   d. Methodology:
      i. Sum Quantity Count where Drug Concept ID = 28
      ii. Compare the result from i to threshold of 100 tablets/capsules

8. Midrin-type Medication
   a. Quantity count for this drug is in capsules
   b. 12 capsules are used to treat one headache
   c. Threshold: 150 capsules Midrin-type Medication
   d. Methodology:

i. Sum Quantity Count where Drug Concept ID = 76
ii. Compare the result from i to threshold of 150 capsules

Acute Migraine Medications

No.	Code Set Name	Drug Concept ID	Conversion Factor (ConFactor)	Conversion Formula (1, 2, 3)	Threshold
1.	Oral Triptan	122	1.0	Qty Ct * ConFactor = Eq Dose	36
2.	Subcutaneous Triptan	123	2.0	Qty Ct * ConFactor = Eq Dose	24
3.	Nasal Triptan	121	1.0	Qty Ct * ConFactor = Eq Dose	24
4.	BUTORPHANOL TARTRATE	29	1.0	Qty Ct * ConFactor = Eq Dose	12.5
5.	DIHYDROERGOTAMINE MESYLATE NASAL SPRAY	42	1.0	Qty Ct * ConFactor = Eq Dose	12
6.	DIHYDROERGOTAMINE MESYLATE INJECTION	174	1.0	Qty Ct * ConFactor = Eq Dose	12
7.	BUTALBITAL containing Medication	28	1.0	Qty Ct * ConFactor = Eq Dose	100
8.	Midrin-type Medication	76	1.0	Qty Ct * ConFactor = Eq Dose	150

1. Qty Ct - Quantity Count, a field on the pharmacy claim record
2. ConFactor - Conversion Factor, a value defined in the Clinical Definition Library (CDL)
3. Eq Dose - Equivalent Dose, a computed value

i. Include pharmacy claims, as defined by the above code set(s), with a fill date during the last 120 days of the report period. (Note: Use 120 days rather than 90 days, because the last script is excluded.)
ii. Within each code set, exclude the last (most current) script (Rationale: Each subsequent script indicates the patient has used the medication from the previous script. This methodology strengthens the likelihood that patients identified are frequent users.) Note: If there is only one eligible script within a code set, that drug will be excluded.
iii. Within each code set, compute TOTAL Equivalent Dose by summing the Equivalent Dose across all eligible claims within that code set. Compare TOTAL Equivalent Dose for this code set to the corresponding Threshold.
iv. Repeat for each code set.