



# National Consensus Standards for Behavioral Health and Substance Use

## Standing Committee Meeting

*Michael Abrams, MPH, PhD, Senior Director*

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*February 5, 2019*

# Introductions

# Behavioral Health Standing Committee

- Peter Briss, MD, MPH, (Co-Chair)
- Harold Pincus, MD (Co-Chair)
- Mady Chalk, PhD, MSW
- David Einzig, MD
- Julie Goldstein Grumet, PhD
- Charles Gross, PhD
- Constance Horgan, ScD
- Lisa Jensen, DNP, APRN
- Dolores (Dodi) Kelleher, MS, DMH
- Kraig Knudsen, PhD
- Michael R. Lardieri, LCSW
- Tami Mark, PhD, MBA
- Raquel Mazon Jeffers, MPH, MIA
- Bernadette Melnyk, PhD, RN, CPNP/PMHNP, FAANP, FNAP, FAAN
- Laurence Miller, MD
- Brooke Parish, MD
- David Pating, MD
- Vanita Pindolia, PharmD
- Lisa Shea, MD, DFAPA
- Andrew Sperling, JD
- Jeffery Susman, MD
- Michael Trangle, MD
- Bonnie Zima, MD, MPH
- Leslie S. Zun, MD, MBA

# Agenda for Today's Web Meeting

## February 5, 2019

- Welcome and Review of Meeting Objectives
- Harmonization Discussion
- Portfolio Gap Discussion
- Member and Public Comment
- Next Steps
- Adjourn

# Related and Competing Measures

# Related and Competing Measures

If a measure meets the four criteria and there are endorsed/new related measures (same measure focus or same target population) or competing measures (both the same measure focus and same target population), the measures are compared to address harmonization and/or selection of the best measure.

# Related and Competing Measures for 3451

NQF #	3451	0576
<b>Title</b>	3451 Non-Acute Mental Health Services Utilization for Dual Eligible Beneficiaries	Follow-Up After Hospitalization for Mental Illness (FUH)
<b>Steward</b>	CMS	NCQA
<b>Measure focus</b>	Dual eligible beneficiaries with a mental health service need who received a non-acute mental health service	Patients discharged from hospitalization for treatment of mental illness who had a follow-up with a mental health practitioner
<b>Patient population</b>	Dual eligible beneficiaries ages 21 and older	Ages 6 and older
<b>Exclusions</b>	N/A	initial discharge and the readmission/direct transfer discharge if the readmission/direct transfer discharge occurs after December 1 of the measurement year; discharges followed by readmission or direct transfer to a nonacute facility within the 30-day follow-up period regardless of principal diagnosis; discharges followed by readmission or direct transfer to an acute facility within the 30-day follow-up period if the principal diagnosis was for non-mental health; hospice
<b>Measure timing</b>	12-month measurement year	Follow-up within 7 days and 30 days after discharge
<b>Level of analysis</b>	Health Plan	Health Plan, Integrated Delivery System
<b>Setting</b>	Home Care, Outpatient Services, Post-Acute Care	Inpatient/Hospital, Outpatient Services
<b>Data source</b>	Claims	Claims

# Related and Competing Measures for 2152

NQF #	2152	2599
<b>Title</b>	Preventive Care and Screening: Unhealthy Alcohol Use: Screening and Brief Counseling	Alcohol Screening and Follow-up for People with Serious Mental Illness
<b>Steward</b>	PCPI	National Committee for Quality Assurance
<b>Measure focus</b>	Screening for unhealthy alcohol use AND receiving brief counseling if identified as an unhealthy user	Screening for unhealthy alcohol use in patients with SMI and 2 events of counseling if identified as an unhealthy user
<b>Patient population</b>	18 years and older	18 years and older
<b>Exclusions</b>	Documentation of medical reason(s) for not screening for unhealthy alcohol use	Active diagnosis of alcohol abuse or dependence during the first nine months of the year prior to the measurement year
<b>Measure timing</b>	At least once in 24 mo. period	Screened for unhealthy alcohol use during the last 3 months of the year prior to the measurement year through the first 9 months of the measurement year and received two events of counseling if identified as an unhealthy alcohol user
<b>Level of analysis</b>	Clinician : Group/Practice, Clinician : Individual	Health Plan
<b>Setting</b>	Home Care, Outpatient Services	Outpatient Services
<b>Data source</b>	Registry Data	Claims, Electronic Health Records, Paper Medical Records



# Related and Competing Measures for 3453

NQF #	3453	0004	0576	2605	3312
Title	Continuity of Care After Inpatient or Residential Treatment for SUD	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment	Follow-Up After Hospitalization for Mental Illness (FUH)	Follow-Up After Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence	Continuity of Care for Medicaid Beneficiaries after Detoxification (Detox) From Alcohol and/or Drugs
Steward	CMS	NCQA	NCQA	NCQA	CMS
Measure focus	discharges from an inpatient or residential treatment for SUD followed by a treatment service for SUD within 7 and 14 days after discharge.	initiation within 14 days of diagnosis and engagement of AOD treatment within 34 days of initiation	Patients discharged from hospitalization for treatment of mental illness who had a follow-up with a mental health practitioner	discharges for patients who had a visit to the emergency department with a primary diagnosis of mental health or alcohol or other drug dependence AND who had a follow-up visit with any provider with a corresponding primary diagnosis of mental health or alcohol or other drug dependence within 7- and 30-days of discharge	Discharges from a detoxification episode followed by a treatment service for SUD (including pharmacotherapy) within 7 or 14 days after discharge
Patient population	Medicaid beneficiaries ages 18-64	13 years and older	Ages 6 and older	18 years and older	Medicaid beneficiaries, 18-64 years

# Related and Competing Measures for 3453 (Continued)

NQF #	3453	0004	0576	2605	3312
<b>Title</b>	Continuity of Care After Inpatient or Residential Treatment for SUD	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment	Follow-Up After Hospitalization for Mental Illness (FUH)	Follow-Up After Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence	Continuity of Care for Medicaid Beneficiaries after Detoxification (Detox) From Alcohol and/or Drugs
<b>Exclusions</b>	Both the initial discharge and the admission/direct transfer discharge if admission/direct transfer discharge occurs after Dec. 15 of the measurement year; Discharges followed by admission or direct transfer to inpatient or SUD residential treatment setting within 7 or 14-day period (exception is admission to residential treatment following inpatient); hospice	Individuals with a claim/encounter with a diagnosis of AOD abuse or dependence, AOD medication treatment, alcohol or other drug dependency medication dispensing during the 60 days before the IESD; hospice	initial discharge and the readmission/direct transfer discharge if the readmission/direct transfer discharge occurs after Dec. 1 of the measurement year; discharges followed by readmission or direct transfer to a nonacute facility within the 30-day follow-up period regardless of principal diagnosis; discharges followed by readmission or direct transfer to an acute facility within the 30-day follow-up period if the principal diagnosis was for non-mental health; hospice	If the discharge is followed by readmission or direct transfer for mental health or AOD dependence within 30 day follow-up period, count only the readmission discharge or discharge from ED to which pt was transferred	N/A
<b>Measure timing</b>	7 days and 14 days	14 days and 34 days	Follow-up within 7 days and 30 days after discharge	7 days and 30 days	7 days or 14 days
<b>Level of analysis</b>	Population : Regional and State	Health Plan	Health Plan, Integrated Delivery System	Health Plan, Population : Regional and State	Population : Regional and State
<b>Setting</b>	Emergency Department and Services, Home Care, Inpatient/Hospital, Outpatient Services	Emergency Department and Services, Inpatient/Hospital, Outpatient Services	Inpatient/Hospital, Outpatient Services	Inpatient/Hospital, Outpatient Services	Inpatient/Hospital, Outpatient Services
<b>Data source</b>	Claims	Claims	Claims	Claims	Claims

# Related and Competing Measures for 0004

NQF #	0004	2599	3312	2605	2152
<b>Title</b>	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment	Alcohol Screening and Follow-up for People with Serious Mental Illness	Continuity of Care for Medicaid Beneficiaries after Detoxification (Detox) From Alcohol and/or Drugs	Follow-Up After Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence	Preventive Care and Screening: Unhealthy Alcohol Use: Screening and Brief Counseling
<b>Steward</b>	NCQA	NCQA	CMS	NCQA	PCPI
<b>Measure focus</b>	Initiation within 14 days of diagnosis and engagement of AOD treatment within 34 days of initiation	Screening for unhealthy alcohol use in patients with SMI and 2 events of counseling if identified as an unhealthy user	Discharges from a detoxification episode followed by a treatment service for SUD (including pharmacotherapy) within 7 or 14 days after discharge	discharges for patients who had a visit to the emergency department with a primary diagnosis of mental health or alcohol or other drug dependence AND who had a follow-up visit with any provider with a corresponding primary diagnosis of mental health or alcohol or other drug dependence within 7- and 30-days of discharge	Screening for unhealthy alcohol use AND receiving brief counseling if identified as an unhealthy user
<b>Patient population</b>	13 years and older	18 years and older	Medicaid beneficiaries, 18-64 years	18 years and older	18 years and older
<b>Exclusions</b>	Individuals with a claim/encounter with a diagnosis of AOD abuse or dependence, AOD medication treatment, alcohol or other drug dependency medication dispensing during the 60 days before the IESD; hospice	Active diagnosis of alcohol abuse or dependence during the first nine months of the year prior to the measurement year	N/A	If the discharge is followed by readmission or direct transfer for mental health or AOD dependence within 30 day follow-up period, count only the readmission discharge or discharge from ED to which pt was transferred	Documentation of medical reason(s) for not screening for unhealthy alcohol use

# Related and Competing Measures for 0004 (Continued)

NQF #	0004	2599	3312	2605	2152
<b>Title</b>	Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment	Alcohol Screening and Follow-up for People with Serious Mental Illness	Continuity of Care for Medicaid Beneficiaries after Detoxification (Detox) From Alcohol and/or Drugs	Follow-Up After Emergency Department Visit for Mental Illness or Alcohol and Other Drug Abuse or Dependence	Preventive Care and Screening: Unhealthy Alcohol Use: Screening and Brief Counseling
<b>Measure timing</b>	14 and 34 days	Screened for unhealthy alcohol use during the last 3 months of the year prior to the measurement year through the first 9 months of the measurement year and received two events of counseling if identified as an unhealthy alcohol user	7 or 14 days	7 and 30 days	At least once in 24 mo. period
<b>Level of analysis</b>	Health Plan	Health Plan	Population : Regional and State	Health Plan, Population : Regional and State	Clinician : Group/Practice, Clinician : Individual
<b>Setting</b>	Emergency Department and Services, Inpatient/ Hospital, Outpatient Services	Outpatient Services	Inpatient/Hospital, Outpatient Services	Inpatient/Hospital, Outpatient Services	Home Care, Outpatient Services
<b>Data source</b>	Claims	Claims, Electronic Health Records, Paper Medical Records	Claims	Claims	Registry Data

# Behavioral Health and Substance Use Portfolio Gaps

# Gaps Identified in 2016-2017

- Outcome measures for psychotic disorders, including schizophrenia
- Overprescription of opiates
- Setting-specific measures (e.g., jails)
- Proximal outcome measures
- Measures specific to child and adolescent behavioral health needs
- Measures that encompass multiple settings to better assist in the push towards integrated behavioral health and physical health
- Measures that focus on substance use disorders in the primary care setting
- Composite measures that incorporate myriad mental illnesses (e.g., bipolar disorder, depression, and schizophrenia) rather than separate screening measures for each illness
- Patient-reported outcome measures
- Measures that examine the period of time between screening and remission. For example, after screening patients on tobacco use, what percentage actually stopped smoking, and what was the duration?
- Measures that address access to behavioral health facilities, or lack thereof.
- Measures that focus not only on treatment and prevention but also on recovery

# Portfolio Gaps Discussion

- Which areas previously identified are no longer gaps? Which areas still represent opportunities for measure development and endorsement?
- Which new topic areas have emerged as priorities for measurement and quality improvement?
- Any additional considerations for future measurement in the area of behavioral health and substance use?

# Behavioral Health-Related NQF Initiatives and Updates



# Related NQF Initiatives

- Medicaid Scorecard  
([http://www.qualityforum.org/MAC\\_Scorecard.aspx](http://www.qualityforum.org/MAC_Scorecard.aspx))
- Measure Applications Partnership (Clinician)  
([http://www.qualityforum.org/MAP\\_Clinician\\_Workgroup.aspx](http://www.qualityforum.org/MAP_Clinician_Workgroup.aspx))
- Opioid Prescribing Playbook  
(<https://store.qualityforum.org/products/national-quality-partners-playbook™-opioid-stewardship>)
- SMI Action Team  
([http://www.qualityforum.org/NQP\\_Serious\\_Mental\\_Illness.aspx](http://www.qualityforum.org/NQP_Serious_Mental_Illness.aspx))
- Telebehavioral Health...

# NQF's Medicaid and CHIP (MAC) Scorecard Project

## Promote Effective Communication and Coordination of Care Domain

^0576 Follow-Up After Hospitalization for Mental Illness

\*1517 Prenatal and Postpartum Care: Postpartum Care

## Make Care Safer by Reducing Harm Caused in the Delivery of Care Domain

^Use of Multiple Concurrent Antipsychotics: Ages 1-17

## Promote Effective Px and Tx of Chronic Diseases Domain

1392 Well-Child Visits: First 15 Months

1516 Well-Child Visits: Ages 3-6

Adolescent Well-Care Visits: Ages 12-21

1407 Immunization for Adolescent: (13 years)

Percentage of Eligibles Who Received Preventive Dental Services: Ages 1-20

^2940 Use of Opioids at High Dosage in Persons Without Cancer

^0004 Initiation & Engagement of Alcohol & Other Drug Dependence Treatment: Age 18 & Older

0018 Control High Blood Pressure: Ages 18-85

## Strengthen Engagement in Care Domain

Getting care quickly (Consumer Assessment of Healthcare Provider and Systems (CAHPS) survey)

Getting needed care (CAHPS)

## Make Care Affordable Domain

0272 Diabetes short term complication admission rate

## Scorecard Committee Recommendations for MAC Scorecard 1.0

^Use of Multiple Concurrent Antipsychotics: Ages 1-17 (RECOMMENDED FOR REMOVAL)

^Adherence to Antipsychotic Medications for Individuals with Schizophrenia (RECOMMENDED FOR ADDITION)

^1448 Developmental Screening in First Three Years of Life (RECOMMENDED FOR ADDITION)

0038 Childhood immunization status (RECOMMENDED FOR ADDITION)

1768 Plan All-Cause Readmissions (RECOMMENDED FOR ADDITION)

^ Red text highlights Behavioral Health/Substance Use related measures

\* Denotes NQF endorsement removed

# Public Comment

# Next Steps

# Fall 2018 Cycle

Meeting	Date/Time
Commenting Period with Member Support	November 29, 2018 – April 9, 2019
Measure Evaluation Web Meeting #1	January 30, 2019
Measure Evaluation Web Meeting #2	January 31, 2019
Post-Meeting Web Meeting	February 5, 2019
Post-Comment Web Meeting	May 3, 2019
CSAC Review Period	May 22, 2019 – June 12, 2019
Appeals Period	June 14, 2019 – July 15, 2019

# Spring 2019 Cycle Updates

- Intent to submit deadline – January 7, 2019
- 8 measures were submitted
  - ▣ *6 maintenance measures*
  - ▣ *2 new measures*
  - ▣ *1 measures considered “complex” and will be reviewed by NQF Scientific Methods Panel for scientific acceptability criterion.*
- ▣ *Topics:*
  - » multiple antipsychotic use
  - » physical restraint or seclusions use
  - » screening for violence, substance use, or trauma history
  - » follow-up after emergency department admission
  - » monitoring long-term opioid use
  - » acute care due to overdose

# Project Contact Info

- Email: [Behavioralhealth@qualityforum.org](mailto:Behavioralhealth@qualityforum.org)
- NQF phone: 202-783-1300
- Project page:  
[http://www.qualityforum.org/Behavioral Health and Substance Use.aspx](http://www.qualityforum.org/Behavioral_Health_and_Substance_Use.aspx)
- SharePoint site:  
<http://share.qualityforum.org/Projects/Behavioralhealthandsubstanceuse/SitePages/Home.aspx>

# Adjourn