

National Consensus Standards for Behavioral Health and Substance Use

Standing Committee Post-Comment Web Meeting

Kyle Cobb, MS, Senior Director Shaconna Gorham, MS, PMP, Senior Project Manager Kirsten Reed, Project Manager Desmirra Quinnonez, Project Analyst

September 20, 2018

Welcome

Project Team



Kyle Cobb, MS Senior Director



Kirsten Reed Project Manager

Shaconna Gorham, MS, PMP Senior Project Manager



Desmirra Quinnonez Project Analyst

Agenda for Today's Web Meeting September 20, 2018

- Welcome and Attendance
- Review and Discuss Comments
- Related/Competing Discussion
- Member and Public Comment
- Next Steps
- Adjourn

Welcome and Attendance

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
- 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, MBA
- Lisa Shea, MD, DFAPA
- Andrew Sperling, JD
- Jeffery Susman, MD
- Michael Trangle, MD
- Bonnie Zima, MD, MPH
- Leslie S. Zun, MD, MBA

Review and Discussion of Comments

Related/Competing Measures

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Related or 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 focus and same target population), the measures are compared to address harmonization and/or selection of the best measure.
- 5a. The measure specifications are harmonized with related measures OR the differences in specifications are justified.
- 5b. The measure is superior to competing measures (e.g., more valid or efficient way to measure) OR multiple measures are justified.

Comparison of Related Measures: NQF #0104e and NQF #1365e

NQF # Title	0104e Adult Major Depressive Disorder (MDD): Suicide Risk Assessment	1365e Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment	
Steward/ Developer	PCPI	PCPI	
Measure Focus	Percentage of patients with a diagnosis of major depressive disorder (MDD) with a suicide risk assessment completed during the visit in which a new diagnosis or recurrent episode was identified	Percentage of patient visits for those patients with a diagnosis of major depressive disorder with an assessment for suicide risk	
Population	Patients 18 years and older	Patients 6 through 17 years	
Data Source	Electronic Health Records	Electronic Health Records	
Level of Analysis	Clinician : Group/Practice, Clinician : Individual	Clinician : Group/Practice, Clinician : Individual	
Setting	Emergency Department and Services, Outpatient Services, Behavioral Health Day Treatment	Outpatient Services	

Related NQF-endorsed measures

- NQF #0104e Adult Major Depressive Disorder (MDD): Suicide Risk Assessment
- NQF #1365e Child and Adolescent Major Depressive Disorder (MDD): Suicide Risk Assessment

Both measures were developed by PCPI and are harmonized to the extent possible.

Comparison of Related Measures: NQF #0105 and NQF #1880

NQF # Title	0105 Antidepressant Medication Management (AMM)	1880 Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder
Steward/ Developer	NCQA	CMS / NCQA
Measure Focus	% of members who were treated antidepressant medication, had a diagnosis of major depression, and who remained on an antidepressant medication treatment.	% of individuals with bipolar I disorder who had at least 2 prescription drug claims for mood stabilizer medications and had a Proportion of Days Covered of at least 0.8 for mood stabilizer medications during the measurement period
Population	Patients 18 years of age and older	Patients at least 18 years of age as of the beginning of the measurement period
Data Source	Claims, Electronic Health Data	Claims
Level of Analysis	Health Plan, Integrated Delivery System	Clinician : Group/Practice, Health Plan, Integrated Delivery System, Population : Regional and State
Setting	Outpatient Services	Outpatient Services

Related NQF-endorsed measures

- NQF #0105 Antidepressant Medication Management (AMM)
- NQF #1880 Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder

Measure developer has harmonized 0105 to the extent possible.

Comparison of Related NQF #1879 and NQF #1880, and NQF #0541

NQF # Title	1879 Adherence to Antipsychotic Medications for Individuals with Schizophrenia	1880 Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder	0541 Proportion of Days Covered (PDC): 3 Rates by Therapeutic Category
Steward/ Developer	CMS / NCQA	CMS/NCQA	PQA
Measure Focus	% of individuals who had at least 2 prescription drug claims for antipsychotic medications and had a Proportion of Days Covered of at least 0.8 for antipsychotic medications during the measurement period	% of individuals who had at least 2 prescription drug claims for mood stabilizer medications and had a Proportion of Days Covered of at least 0.8 for mood stabilizer medications during the measurement period	% of patients 18 years and older who met the proportion of days covered threshold of 80% during the measurement year.
Population	18 years of age as of the beginning of the measurement period with schizophrenia or schizoaffective disorder	18 years of age as of the beginning of the measurement period with bipolar I disorder	18 years and older who were dispensed at least 2 prescriptions in a specific therapeutic category on 2 unique dates of service during the measurement year.
Data Source	Claims	Claims	Claims
Level of Analysis	Clinician : Group/Practice, Health Plan, Population : Regional and State	Clinician : Group/Practice, Health Plan, Integrated Delivery System, Population : Regional and State	Clinician : Group/Practice, Health Plan
Setting	Outpatient Services	Outpatient Services	Outpatient Services

Three related NQF-endorsed measures

- NQF #1879 Adherence to Antipsychotic Medications for Individuals with Schizophrenia
- NQF #1880 Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder
- NQF #0541 Proportion of Days Covered (PDC): 3 Rates by Therapeutic Category

Measure developer has harmonized 1879 to the extent possible.

Comparison of Related Measures NQF #1880, NQF #0541, NQF #1879, and NQF #1932

NQF # Title	1880 Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder	0541 Proportion of Days Covered (PDC) 3 Rates by Therapeutic Category	1879 Adherence to Antipsychotic Medications for Individuals with Schizophrenia	1932 Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)
Steward/ Developer	CMS / NCQA	PQA	CMS / NCQA	NCQA
Measure Focus	% of individuals who had at least 2 prescription drug claims for mood stabilizer medications and had a Proportion of Days Covered of at least 0.8 for mood stabilizer medications during the measurement period	% of patients 18 years and older who met the proportion of days covered threshold of 80% during the measurement year.	% of individuals who had at least 2 prescription drug claims for antipsychotic medications and had a Proportion of Days Covered of at least 0.8 for antipsychotic medications during the measurement period	% of patients who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year.
Populati on	18 years of age as of the beginning of the measurement period with bipolar I disorder	18 years and older who were dispensed at least 2 prescriptions in a specific therapeutic category on 2 unique dates of service	18 years of age as of the beginning of the measurement period with schizophrenia or schizoaffective disorder	18 – 64 years of age with schizophrenia or bipolar disorder
Data Source	Claims	Claims	Claims	Claims
Level of Analysis	Clinician : Group/Practice, Health Plan, Integrated Delivery System, Population : Regional and State	Clinician : Group/Practice, Health Plan	Clinician : Group/Practice, Health Plan, Population : Regional and State	Health Plan, Integrated Delivery System, Population : Regional and State
Setting	Outpatient Services	Outpatient Services	Outpatient Services	Outpatient Services,

Four related NQF-endorsed measures

- NQF #1880 Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder
- NQF #1879 Adherence to Antipsychotic Medications for Individuals with Schizophrenia
- NQF #0541 Proportion of Days Covered (PDC): 3 Rates by Therapeutic Category
- NQF #1932 Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

Measure developer has harmonized 1880 to the extent possible.

Comparison of Related Measures NQF #1932 and NQF #1933, and NQF #1934

NQF # Title	1932 Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)	1933 Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)	1934 Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)
Steward	NCQA	NCQA	NCQA
Measure Focus	% of patients who were dispensed an antipsychotic medication and had a diabetes screening test during the measurement year	% of patients who had an LDL-C test during the measurement year	% of patients who had both an LDL-C test and an HbA1c test during the measurement year
Population	18 – 64 years of age with schizophrenia or bipolar disorder	18 – 64 years of age with schizophrenia and cardiovascular disease	18 – 64 years of age with schizophrenia and diabetes
Data Source	Claims	Claims	Claims
Level of Analysis	Health Plan, Integrated Delivery System, Population : Regional and State	Health Plan, Integrated Delivery System, Population : Regional and State	Health Plan, Integrated Delivery System, Population : Regional and State
Setting	Outpatient Services	Outpatient Services	Outpatient Services

Three related NQF-endorsed measures

- NQF #1932 Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)
- NQF #1933 Cardiovascular Monitoring for People With Cardiovascular Disease and Schizophrenia (SMC)
- NQF #1934 Diabetes Monitoring for People With Diabetes and Schizophrenia (SMD)

Measure developer has harmonized 1932 to the extent possible.

Comparison of Related Measures NQF #3389, NQF #3316, NQF #2940, NQF #2950, and NQF #2951

NQF# Title	3389 Concurrent Use of Opioids and Benzodiazepines (COB)	3316e Safe Use of Opioids – Concurrent Prescribing	2940 Use of Opioids at High Dosage in Persons Without Cancer.	2950 Use of Opioids from Multiple Providers in Persons Without Cancer	2951 Use of Opioids from Multiple Providers and at High Dosage in Persons Without Cancer
Steward	PQA	CMS / MPR	PQA	PQA	PQA
Measure Focus	% of individuals with concurrent use of prescription opioids and benzodiazepines during the measurement year	Pts 18 years and older prescribed 2 or more opioids or an opioid and benzodiazepine concurrently at discharge from a hospital-based encounter	Proportion of individuals without cancer receiving prescriptions for opioids with a daily dosage >120mg morphine equivalent dose for 90 consecutive days or longer	Proportion of individuals without cancer receiving prescriptions for opioids individuals from 4 or more prescribers AND 4 or more pharmacies	Proportion of individuals without cancer receiving prescriptions for opioids with a daily dosage >120mg morphine equivalent dose for 90 consecutive days or longer, AND who received opioid prescriptions from 4 or more prescribers AND 4 or more pharmacies
Population	18 years and older	18 years and older prescribed an opioid or a benzodiazepine at discharge from a hospital-based encounter during the measurement period.	Any member with 2 or more prescription claims for opioids filled on at least 2 separate days, for which the sum of the days supply is greater than or equal to 15.	Any member with 2 or more prescription claims for opioids filled on at least 2 separate days, for which the sum of the days supply is greater than or equal to 15.	Any member with 2 or more prescription claims for opioids filled on at least 2 separate days, for which the sum of the days supply is greater than or equal to 15.
Data Source	Claims	Electronic Health Record	Claims	Claims	Claims
Level of Analysis	Health Plan	Facility	Health Plan, Population: Regional and State	Health Plan, Population: Regional and State	Health Plan, Population: Regional and State
Setting	Ambulatory, skilled nursing facility, pharmacy	Inpatient/Hospital, Emergency Department and Services	Outpatient Services	Outpatient Services	Outpatient Services

- Five related NQF-endorsed measures
 - NQF #3389 Concurrent Use of Opioids and Benzodiazepines (COB)
 - NQF #3316e Safe Use of Opioids Concurrent Prescribing
 - NQF #2940 Use of Opioids at High Dosage in Persons Without Cancer
 - NQF #2950 Use of Opioids from Multiple Providers in Persons Without Cancer
 - NQF #2951 Use of Opioids from Multiple Providers and at High Dosage in Persons Without Cancer

Measure developer has harmonized 3389 to the extent possible.

Comparison of Related NQF #3400 and NQF #3175

NQF # Title	3400 Use of pharmacotherapy for opioid use disorder (OUD)	3175 Continuity of Pharmacotherapy for Opioid Use Disorder
Steward/ Developer	CMS / MPR	University of Southern California
Measure Focus	% of Medicaid beneficiaries who filled a prescription for or were administered or ordered an FDA-approved medication for the disorder during the measure year	% of adults with pharmacotherapy for OUD who have at least 180 days of continuous treatment
Population	18 to 64 with an OUD	18-64 years with OUD & one claim for an OUD medication
Data Source	Claims	Claims, Electronic Health Record
Level of Analysis	Population : Regional and State	Health Plan, Population : Regional and State
Setting	Emergency Department and Services, Inpatient/Hospital, Outpatient Services	Outpatient Services

- Two related NQF-endorsed measures
 - NQF #3400 Use of pharmacotherapy for opioid use disorder (OUD)
 - NQF #3175 Continuity of Pharmacotherapy for Opioid Use Disorder

Measure developer has harmonized 3400 to the extent possible.

NQF Member and Public Comment

Next Steps

Spring 2018/Cycle 2

Meeting	Date/Time	
CSAC Review	October 23, 2018	
Appeals Period	October 30, 2018 – November 28, 2018	

Project Contact Info

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- Project page: <u>http://www.qualityforum.org/Behavioral Health and S</u> <u>ubstance Use.aspx</u>

