

Consensus Core Set: Behavioral Health

The Core Quality Measures Collaborative (CQMC) core measure sets (core sets) are intended for use in value-based payment (VBP) programs and may also be used to drive improvement in high-priority areas. The core sets can be used in their entirety to holistically assess quality or can serve as a starting point when selecting measures to meet specific goals. CQMC core sets are developed and maintained using a multistakeholder, consensus-based process and established [selection principles](#). The core sets focus primarily on ambulatory care measures at the clinician reporting level. This core set contains several measures NQF endorsed at the facility or health plan level as noted below; core set users should ensure adequate measure denominator size based on their patient population. Measure specifications and details are linked in the “NQF Number” column, and additional considerations for use are included in the “Notes” section of the table below.

Behavioral Health Measures

NQF Number	Measure	Steward	Notes
<i>Attention Deficit Hyperactivity Disorder</i>			
0108	Follow-Up Care for Children Prescribed ADHD Medication (ADD) [†]	National Committee for Quality Assurance	eCQM available* Telehealth eligible for CMS programs in 2022
<i>Depression</i>			
0418 / 0418e	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	Centers for Medicare & Medicaid Services	No longer NQF endorsed. Developer plans to maintain measure independently. eCQM available* Telehealth eligible for CMS programs in 2022
1884	Depression Response at Six Months- Progress Towards Remission	Minnesota Community Measurement	Telehealth eligible
1885	Depression Response at Twelve Months- Progress Towards Remission	Minnesota Community Measurement	Telehealth eligible
<i>Serious Mental Illness</i>			
1879	Adherence to Antipsychotic Medications for Individuals with Schizophrenia	Centers for Medicare & Medicaid Services	**
2800	Metabolic Monitoring for Children and Adolescents on Antipsychotics [†]	National Committee for Quality Assurance	**

NQF Number	Measure	Steward	Notes
1932	Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD) [†]	National Committee for Quality Assurance	**
<i>Tobacco, Alcohol, and Other Substance Use</i>			
2152	Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling	National Committee for Quality Assurance	Telehealth eligible for CMS programs in 2022
N/A	Pharmacotherapy for Opioid Use Disorder (POD) (HEDIS)	National Committee for Quality Assurance	Telehealth eligible
0028 / 0028e	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	National Committee for Quality Assurance	eCQM available* Telehealth eligible for CMS programs in 2022 The workgroup emphasized the importance of assessing tobacco/nicotine use and cessation in patients with mental illness.
<i>Other</i>			
0576	Follow-Up After Hospitalization for Mental Illness (FUH) [†]	National Committee for Quality Assurance	Telehealth eligible
3489	Follow-Up After Emergency Department Visit for Mental Illness [†]	National Committee for Quality Assurance	Telehealth eligible

*Separate benchmarks should be used based on reporting method.

[†]Measure NQF endorsed at the facility or health plan level.

** Cell intentionally left empty.

Gap Areas for Future Consideration and Measure Development

- Coordinated care, including bi-directional integrated behavioral healthcare and general healthcare, primary care
- Patient-reported measures, including patient experience with psychiatric care
- Suicide risk measures independent of a major depressive disorder diagnosis, specific age group, or care setting
- Anxiety disorder measures
- Depression remission measures that span beyond 6 months, but count remission if it is achieved earlier than 12 months
- Measure on opioid overdoses in the emergency department by the Wisconsin Collaborative for Healthcare Quality
- New CAHPS Mental Health Care Survey (once developed)
- APA measures related to measurement-based care (once developed)
- NCQA person-driven outcomes measure (once developed)

Core Set Updates for 2021

Updated notes related to telehealth eligibility for all measures

The Pharmacotherapy for Opioid Use Disorder (POD) measure has been adjusted by the steward to reflect accommodations for telehealth visits. Measures 0108, 0418/0418e, 2152, and 0028/0028e remain telehealth eligible for CMS programs in 2022; the notes on these measures have been updated to reflect this continued eligibility.

Added measure 1932: Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)

The Workgroup recommended diabetes screening for patients with schizophrenia or bipolar disorder who are on antipsychotics due to the increased risk within the subpopulation.

Updated note related to 0418/0418e: Preventative Care and Screening: Screening for Clinical Depression and Follow-Up Plan

This measure is no longer endorsed by NQF, as the developer did not resubmit for maintenance. However, the developer plans to maintain this measure independently.

Additional details about the discussion and measures not selected for inclusion are available at the CQMC website's [CQMC Workgroup Meeting Summaries](#) page.