

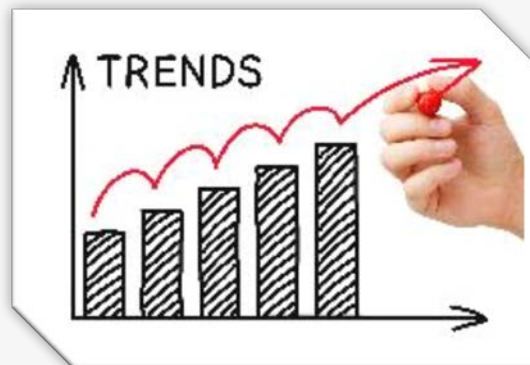


Adult Quality & Access Committee: HEDIS Measure Findings 4/13/17



Overview of Presentation

- What is HEDIS?
- What role does Health Equity and Disparities play in these measures?
- HEDIS Measure Performance:
 - Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
 - Adherence to Antipsychotic Medication for Individuals with Schizophrenia



What is HEDIS?

HEDIS

Healthcare **E**ffectiveness **D**ata and **I**nformation **S**et

A set of healthcare performance measures widely used in the United States

Developed by the **N**ational **C**ommittee for **Q**uality **A**ssurance (NCQA) beginning in late 1980's

Primarily utilized by Healthcare Organizations to demonstrate the quality of care provided to Employers

Initially focused on performance on measures concerning Medical Diagnoses (e.g., Diabetes care, Cardiovascular Care)

- Currently includes 88 measure; 10 have Behavioral Health orientation

What makes HEDIS measures special?



The measures lend themselves to healthcare quality improvement!

Annual publication of exacting specifications for each measure so that every organization measures performance in exactly the same way

Programming of measures is audited by NCQA before organizations can report their performance

NCQA reports National and Regional averages for each of the measures annually so that performance can be compared to those rates

NCQA reports Medicaid, Medicare and Commercial rates separately

Health Equity and Disparity: Definitions

Health Equity is defined as the realization of systems and conditions that provide all people with the opportunity to achieve good health through equitable access, quality, and outcomes of health care.



Health Disparities are differences in health care access, quality, or outcomes among distinct segments of the population that are systematic, avoidable, and unjust.

- Discrepancies are identified when the rate of service utilization by a subgroup (e.g. Asians, males, young adults) is either over or under the proportion of that group in the Medicaid Population
- Not all “discrepancies” are Necessarily “disparities”

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment



Identifies adults and adolescents with a new episode of alcohol or other drug dependence (AOD) who subsequently **initiated** and **engaged** in treatment for the AOD

The AOD diagnosis can be made during an outpatient, IOP, or PHP visit

No requirement that the provider be a Behavioral Health clinician

“New” is defined as no AOD diagnosis during the 60 days prior to the index diagnosis

Initiation and Engagement of Alcohol and Other Drug Dependence Treatment

What counts as **Initiation**?

- If the Index Episode was an inpatient stay, the stay counts as initiation
- If Index Episode was an outpatient, IOP, PHP, Detoxification or ED visit, need one additional inpatient, outpatient, IOP or PHP visit with an AOD diagnosis within 13 days to be considered as having *initiated* AOD treatment

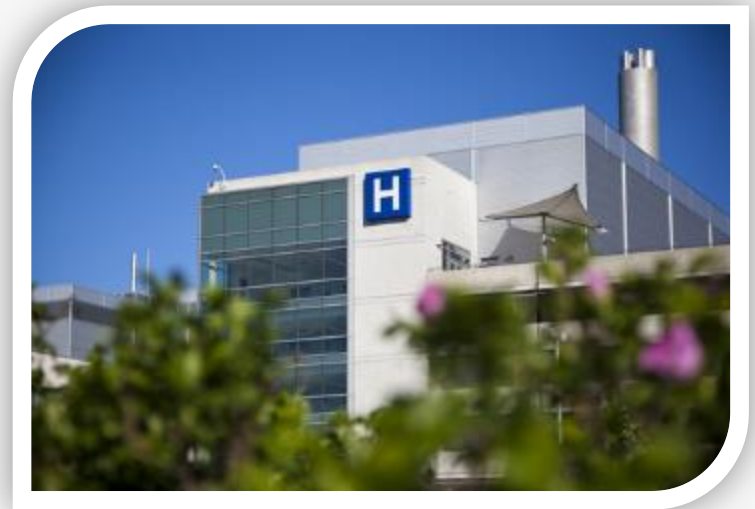
What counts as **Engagement**?

- Must have initiated AOD treatment AND
- Have two or more inpatient admissions, outpatient, IOP or PHP visits between the day after the initiation visit to 29 days after the initiation event
- Inpatient or outpatient detox treatment does not count

Adherence to Antipsychotic Medication for Individuals with Schizophrenia

Why is this measure important?

Research has shown that for people with schizophrenia, non-adherence to treatment with antipsychotics is common and significantly associated with admission/readmission to the hospital.



Measure description:

Assesses the percentage of individuals with schizophrenia, between the ages of 19 and 64, who were dispensed and remained on an antipsychotic medication for at least 80% of the treatment period.

Adherence to Antipsychotic Medication for Individuals with Schizophrenia

Inclusion/Exclusion Criteria for the Eligible Population:

- Diagnosed with Schizophrenia during an inpatient stay OR on claims for at least 2 dates of service of outpatient, IOP, PHP, ED or non-acute inpatient treatment during the measurement year
- Individuals with Dementia are excluded
- Individuals who did not have at least two antipsychotic dispensing events during the measurement year

Measure:

Among the individuals eligible for the measure:

- Identify the earliest dispensing event for any antipsychotic
- The “treatment period” equals the number of days from the first fill date to the end of the calendar year
- Count of the days in the treatment period covered by at least one antipsychotic
- Calculate percentage of days covered

