



Methadone Maintenance Member Engagement: Methodology & Preliminary Data

Operations Committee, November 1, 2019

Background

- Per Sec. 311 of the implementer bill for the state budget ending June 30, 2021:
 - On or after July 1, 2020, any reimbursement to a chemical maintenance provider for methadone maintenance treatment shall be contingent upon meeting certain performance measures as determined by the commissioner
 - The initial evaluation period shall be based on the claims data for the quarter ending March 31, 2020
 - The performance measures and thresholds may be adjusted after the initial evaluation period.
 - Failure to meet department-identified standards on performance measures shall result in a rate reduction of (1) up to five per cent for the quarters ending September 30, 2020, and December 31, 2020, and (2) up to ten per cent beginning January 1, 2021. No provider shall receive a rate decrease under this subsection that is more than a ten per cent decrease annually.

Background

- First steps in developing metrics for methadone maintenance
 - $_{\circ}~$ Develop methodology for measurement
 - $_{\circ}~$ Episode start and stop dates
 - Review of engagement/days by episodes
- Today's focus
 - $_{\circ}~$ Review of 30-day methodology gap
 - Review of preliminary results of Statewide engagement

Step 1: Methadone Authorizations

- All initial Methadone authorizations with an episode effective date between February 1, 2018 December 31, 2018.
- February 1, 2018 was the start date of the new authorization parameters to be billed for a daily rate.
- Time frame allows for a claims lag and enough time has passed since the admission for a member to be considered 'engaged'.
- Allows for a grouping of episode ID numbers where there are different prior authorizations for the same member, provider combination.

• Step 2. Methadone Claims.

- Pull all the methadone claims where member number from authorization matches the member number in claims and prior authorization numbers match between authorization and claims.
- Use methadone provider type and specialty or procedure codes to ensure only pulling methadone claims.
- $_{\circ}~$ Only included paid claims with amount paid great than \$0.



Step 3. Authorization and Claims Joined

 $_{\circ}\,$ Joined the authorization and claims to get episode number.

Step 4. Take-home Date Spans

- $_{\circ}~$ Calculated the full date span for take homes.
- If there was an HG modifier, the date of first service and date of last service provided is a date span.
- This is in order to get an accurate number of days between these first and last dates of service



• Step 5. Episode Start and Stop Dates.

- Create an episode start and stop date, used the **30**-day claim gap methodology (or there was a change in provider with a new initial authorization).
- If there was a gap of **30**-days or more between one date of service and the next, the date of service before the gap would be considered the episode end date.
- Next date of service after the gap would be considered the episode start date of the next episode of care.
- A member/provider combination could have multiple episodes based upon this criteria.
- Filtered on episodes where the episode start date was between February 1, 2018 and December 31, 2018
- This was in order to prevent inflation of the lower-end episode range.
 - A member could have been on their 3rd episode with the same provider (i.e., had 2 previous 30-day claim gaps) and the start of that 3rd episode was in August, 2019.
 - Given this report ran in October, 2019, not enough time elapsed in order to capture an adequate engagement



• Step 6. Eligibility

- Only included members in the final analysis that were non-duals and were eligible for 95% of the episode days using the episode start and stop dates.
- There were paid claims that were one or two days outsides of the member's eligibility time span

• Step 7. Episode Range

 $_{\circ}~$ Bucketed the number of days by episode in 30-day increments

• Step 8. Age

 $_{\odot}~$ Calculated age of member at episode start date and only included those members that were 18 – 65

(e) beacon

Methadone Maintenance Episode Range Frequency Distribution (Episode Start Dates: February 1, 2018 - December 31, 2018)

Episode Range in Days	Distinct Members	Number of Episodes	Percent of Total	Cumulative Frequency	Cumulative Percent	Average Days	Median Days
331+	1,258	1,258	27.8%	1,258	27.8%	435	422
301-330	198	198	4.4%	1,456	32.2%	315	316
271-300	291	291	6.4%	1,747	38.6%	285	285
241-270	188	188	4.2%	1,935	42.8%	257	258
211-240	157	158	3.5%	2,093	46.3%	225	224
181-210	123	125	2.8%	2,218	49.0%	195	194
151-180	177	183	4.0%	2,401	53.1%	165	164
121-150	205	207	4.6%	2,608	57.7%	135	135
091-120	254	258	5.7%	2,866	63.4%	105	105
061-090	325	332	7.3%	3,198	70.7%	75	75
031-060	476	505	11.2%	3,703	81.9%	44	44
001-030	747	819	18.1%	4,522	100.0%	14	13
Grand Total	3,796	4,522	100.0%	4,522	100.0%	209	173



Methadone Maintenance Episode Range Pareto Chart



Methadone Maintenance Episode Range Frequency Distribution Excluding 1-30 Day Episodes (Episode Start Dates: February 1, 2018 - December 31, 2018)

Episode Range in Days	Distinct Members	Number of Episodes	Percent of Total	Cumulative Frequency	Cumulative Percent	Average Days	Median Days
331+	1,258	1,258	34.0%	1,258	34.0%	435	422
301-330	198	198	5.3%	1,456	39.3%	315	316
271-300	291	291	7.9%	1,747	47.2%	285	285
241-270	188	188	5.1%	1,935	52.3%	257	258
211-240	157	158	4.3%	2,093	56.5%	225	224
181-210	123	125	3.4%	2,218	59.9%	195	194
151-180	177	183	4.9%	2,401	64.8%	165	164
121-150	205	207	5.6%	2,608	70.4%	135	135
091-120	254	258	7.0%	2,866	77.4%	105	105
061-090	325	332	9.0%	3,198	86.4%	75	75
031-060	476	505	13.6%	3,703	100.0%	44	44
Grand Total	3,343	3,703	100.0%	3,703	100.0%	252	258



Methadone Maintenance Episode Range Pareto Chart Excluding 1-30 Day Episodes





- Run data by provider (not site)
- Review additional metrics to be included
 - Measure of multiple opioid prescribers/pharmacies as a quality indicator but not part of the payment methodology
- Scope out methodology and run preliminary data
- Establish performance improvement goals
- Finalize performance timeframes

