



# Quality Measures for Patient Opioid Use



A variety of administrative data measures assess problematic opioid medication use. Health Net\* uses Healthcare Effectiveness Data and Information Set (HEDIS®) quality measures to monitor patient risk pertaining to opioid use. Although Health Net formally reports results for only the first measure at this time, all of the measures below are helpful tools for providers who want to monitor their patient population's opioid use.

Together we can successfully combat alcohol, other drug and opioid misuse.

## ➔ Initiation and Engagement of Alcohol and Other Drug Treatment (IET)

Measures the percentage of adolescent and adult members with a new episode of alcohol or other drug (AOD) abuse or dependence who received the following (measurement period is January 1–November 14 of the calendar year):

- **Initiation of AOD treatment:** Percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth, or medication treatment within 14 days of the diagnosis.
- **Engagement of AOD treatment:** The percentage of members who initiated treatment and who had two or more additional AOD services or medication treatment within 30 days of the initiation visit.

Two age stratifications and a total rate are reported: ages 13–17, ages 18 and over, and total. The IET quality measure also reports the following diagnosis cohorts for each age stratification and the total rate: alcohol abuse or dependence, opioid abuse or dependence, other drug abuse or dependence, and total.

## ➔ Use of Opioids<sup>1</sup> at High Dosage (UOD)

Measures the proportion of members ages 18 and older receiving prescription opioids for ≥15 days during the measurement year (calendar year) at a high dosage (average milligram morphine equivalent [MME] >120 mg). Refer to the following links for information about calculating total daily dosages and opioid oral MME conversion factors:



*(continued)*

<sup>1</sup>Excluded:

- Members diagnosed with cancer or sickle cell disease.
- The UOD opioid medication list excludes injectables; opioid cough and cold products; and single-agent and combination buprenorphine products used to treat opioid use disorder for medication assisted treatment (buprenorphine sublingual tablets, buprenorphine subcutaneous implant and all buprenorphine/naloxone combination products), and Ionsys® (fentanyl transdermal patch; for inpatient use only and is available only through a restricted program under a Risk Evaluation and Mitigation Strategy [REMS]).

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- [www.cdc.gov/drugoverdose/pdf/calculating\\_total\\_daily\\_dose-a.pdf](http://www.cdc.gov/drugoverdose/pdf/calculating_total_daily_dose-a.pdf)
- [www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Downloads/Opioid-Morphine-EQ-Conversion-Factors-vFeb-2018.pdf](http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/Downloads/Opioid-Morphine-EQ-Conversion-Factors-vFeb-2018.pdf)

➔ **Use of Opioids from Multiple Providers (UOP) and Pharmacies**

Measures the proportion of members ages 18 and older receiving prescription opioids for ≥15 days during the measurement year (calendar year) and who received opioids from multiple providers and pharmacies. Three rates are reported:

1. **Multiple prescribers:**

The proportion of members receiving prescriptions for opioids from four or more different prescribers during the measurement year.



2. **Multiple pharmacies:** The proportion of members receiving prescriptions for opioids from four or more different pharmacies during the measurement year.

3. **Multiple prescribers and multiple pharmacies:** The proportion of members receiving prescriptions for opioids from four or more different prescribers and four or more different pharmacies during the measurement year (the proportion of members who are numerator-compliant for both the multiple prescribers and multiple pharmacies rates).

➔ **Risk of Continued Opioid Use (COU)**

Measures the percentage of members ages 18 and older who have a new episode of opioid use that puts them at risk for continued opioid use (measurement period is from November 1 of the prior calendar year through October 31 of the current calendar year). Two rates are reported:

1. The percentage of members whose new episode of opioid use lasts at least 15 days in a 30-day period.
2. The percentage of members whose new episode of opioid use lasts at least 31 days in a 62-day period.

The measure includes two reported age stratifications and a total rate: ages 18–64, ages 65 and older, and total.

For further information, email the Health Net Quality Improvement Department at [cqi\\_dsm@healthnet.com](mailto:cqi_dsm@healthnet.com).

**References:**

Sample of code descriptions taken from the HEDIS 2019 Value Set.  
NCQA's HEDIS 2019 Technical Specifications for Health Plans, Volume 2, Washington, D.C., 2018.