Pharmacotherapy for Opioid Use Disorder (POD) HEDIS Tip Sheet MY 2024



Measure definition

The percentage of opioid use disorder (OUD) pharmacotherapy events that lasted at least 180 days among members 16 years of age and older with a diagnosis of OUD and a new OUD pharmacotherapy event

Plans(s)	Quality Program(s)	Collection and Reporting
Medicaid	NCQA Accreditation	Administrative:
Medicare	NCQA Health Plan Ratings Claim/Encounter	
		Pharmacy Data

Medications

To be included in this measure, a member must have been dispensed one of the following opioid medications:

Description	Prescription	
Antagonist	Naltrexone (oral or injectable)	
Partial agonist	Buprenorphine (sublingual tablet, injection or implant)	
Partial agonist	Buprenorphine/naloxone (sublingual tablet, buccal film or sublingual film)	
Agonist	Methadone (oral)	

Note: Methadone is not included on the medication lists for this measure. A pharmacy claim for methadone would be indicative of treatment for pain rather than OUD.

Best practices for quality care

- Educate members about the risks, benefits and alternative of pharmacotherapy.
- Follow CDC, state and federal guidelines for prescribing opioids for chronic pain.
- Help the member manage stressors and identify their triggers for opioid abuse.
- Schedule follow-up visits whenever engaging with the member to help ensure compliance with treatment regimens.
- Members who see multiple providers and use multiple pharmacies are at a higher risk of overdose.

Quality score improvement tips

- Submit claims and encounter data promptly.
- Track prescriptions and do not allow gaps in treatment of 8 or more consecutive days.

Exclusions

- Members who used hospice services or elected to use a hospice benefit any time during the measurement year.
- Members who died any time during the measurement year.

Numerator codes

There is a large list of approved NCQA codes used to identify services included in this measure. The following are the approved codes. For more information, please refer to the American Academy of Professional Coders (AAPC). CPT II codes can be accepted as supplemental data, reducing the need for chart collection and review during the HEDIS hybrid season.

CODES		DESCRIPTIONS		
HCPCS	G2068-G2070,	Medication assisted treatment		
	G2072			
HCPCS	G2079	Take-home supply of buprenorphine	Buprenorphine	
HCPCS	H0033	Oral medication administration		
HCPCS	J0570	Buprenorphine, implant		
HCPCS	J0571	Buprenorphine, oral		
HCPCS	J0572-J0575	Buprenorphine/naloxone, oral	-	
HCPCS	Q9991-Q9992	Injection, buprenorphine extended-release		
HCPCS	G2067	Medication assisted treatment	Methadone	
HCPCS	G2078	Take-home supply of methadone		
HCPCS	H0020	Alcohol and/or drug services		
HCPCS	S0109	Methadone, oral		
HCPCS	G2073	Medication assisted treatment	Naltrexone	
HCPCS	J0572-J0575	Buprenorphine/naloxone, oral		
HCPCS	J2315	Naltrexone, injection		
HCPCS	F11.10-F11.29	Opioid related disorders	Opioid abuse and	
			dependence	

How WellSense can help

HEDIS tip sheets are designed to help WellSense providers improve and report the quality of care delivered to WellSense members across key metrics.

If you have questions around HEDIS documentation and quality measures, please email the Quality Team at <u>WS_Quality_Dept@wellsense.org.</u>