

# OHIC Aligned Measure Sets 2022 Annual Review

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Outpatient Behavioral Health Aligned Measure Sets

*August 15, 2022*

# Agenda

1. Summary of Recommendations from the July 18<sup>th</sup> Meeting
2. Review Outpatient Behavioral Health Mental Health and Substance Use Treatment Measure Set Measures
  - Discuss Measures with Significant Specification Changes and “Topped Out” Measures
  - Review Remaining Measures
  - Discuss Work Group Proposals
  - Discuss Follow-up Steps from the 2021 Annual Review
3. Public Comment
4. Next Steps

## Summary of Recommendations from July 18<sup>th</sup> Meeting

# Summary of Recommendations from July 18<sup>th</sup> Meeting

- During the July 18<sup>th</sup> meeting, the Work Group made the following recommendations:
  - Reviewed the **measure selection criteria** and recommended modifying measure selection criteria #11 to read “Sufficient denominator size *for the intended use.*”
  - Reviewed the **Developmental measures** and recommended:
    - Removing *Concurrent Use of Opioids and Benzodiazepines*
    - OHIC convene a work group to discuss the logistics of obtaining prescription fill reports for *Statin Therapy for Patients with Cardiovascular Disease*

# Summary of Recommendations from July 18<sup>th</sup> Meeting (Cont'd)

- During the July 18<sup>th</sup> meeting, the Work Group made the following recommendations (cont'd):
  - Reviewed **new HEDIS measures** of interest and recommended that *Prenatal Immunization Status*, *Pharmacotherapy for Opioid Use Disorder*, *Follow-up After High Intensity Care for Substance Use Disorder* and *Topical Fluoride for Children* be considered for 2023 for the applicable measure sets.
- The Work Group also began reviewing the **Acute Care Hospital Measure Set** (no measures added or removed).
  - The Work Group will finish discussing the Acute Care Hospital Measure Set on August 23<sup>rd</sup>, along with the Behavioral Health Hospital Measure Set.

# Review Outpatient Behavioral Health Mental Health Measure Set Measures

# Process for Gathering Data for the 2022 Annual Review

- For this year's annual review, Bailit Health updated its **equity review** research for each measure:
  - We primarily used the following sources to identify inequities in measure performance or related health outcome by race/ethnicity, disability status, language, socioeconomic status, and education:
    - [America's Health Rankings](#)
    - [Health in RI](#)
    - [AHRQ Quality and Disparities Reports](#)
    - RIDOH Reports
    - Literature review to identify any additional disparities

*Note: We have only included a summary of our equity review on each slide. All information from our review can be found in the Buying Value Tool distributed with the meeting materials.*

# Process for Gathering Data for the 2022 Annual Review (Cont'd)

- **Status/Measure Specification Changes:** We summarized if there were any changes made to the measure's NQF status and/or specifications in 2022.
- **Use by RI Payers:** We surveyed RI insurers and asked them to identify which measures they are using in 2022 contracts. The following slides include data for the four major insurers in RI.
  - **Note:** When measures are not in use, we have indicated whether payers have ever reported using the measure since OHIC began surveying payers in 2018 (OHIC did not survey insurers in 2020 due to COVID-19).



# Process for Gathering Data for the 2022 Annual Review (Cont'd)

– **Opportunity for Improvement:** We calculated weighted average plan performance from Quality Compass for Commercial and Medicaid and used hospital performance data from the CDC, CMS and The Joint Commission.

- **Commercial and Medicaid:** Weighted average plan performance from 2021 Quality Compass for Commercial and 2020 Quality Compass for Medicaid

Key:			
<50th	Between 50th and 75th	Between 75th and 90th	≥90th

- **RI and National:** Hospital performance data from the CDC (2020), CMS (2020-2021) and The Joint Commission (2020-2021)

Key:		
RI performance inferior to national performance	RI performance equal to national performance	RI performance superior to national performance

# Outpatient Behavioral Health Mental Health Aligned Measure Set

- The 2022 Outpatient Behavioral Health Mental Health Aligned Measure Set includes 11 total measures:
  - **zero Core measures**
  - **six Menu measures**
    - Adult Major Depressive Disorder (MDD): Suicide Risk Assessment
    - Antidepressant Medication Management
    - Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment
    - Depression Remission at Six Months
    - Follow-Up After Hospitalization for Mental Illness (7-Day)
    - Unhealthy Alcohol Use: Screening & Brief Counseling

# Outpatient Behavioral Health Mental Health Aligned Measure Set (cont'd)

- The 2022 Outpatient Behavioral Health Mental Health Aligned Measure Set includes 13 total measures:
  - **five Developmental measures:**
    - Depression Remission or Response for Adolescents and Adults\*
    - Depression Screening and Follow-Up for Adolescents and Adults\*
    - Social Determinants of Health Screening
    - Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults\*
    - Unhealthy Alcohol Use Screening and Follow-Up\*
  - **Note:** During the July 18<sup>th</sup> meeting, the Work Group recommended retaining the ECDS Developmental measures in the Measure Sets until they are more feasible to implement.

\*ECDS measure

# Discuss Measures with Major Specification Changes and/or that are “Topped Out”

- There are no measures that had major status or specification changes during the past year.
- There is one measure that is “topped out,” i.e., has an absolute rate of 90% or higher, and/or a statewide average rate that is above the national 90<sup>th</sup> percentile.
  1. *Follow-Up After Hospitalization for Mental Illness (7-Day)*

# Follow-Up After Hospitalization for Mental Illness (7-Day) (Menu)

## Equity Analysis: Race/Ethnicity

**U.S. study of follow-up treatment following inpatient psychiatric treatment:** Blacks were less likely than Whites to receive follow-up care (OR\* = 0.45 for 30-day follow-up)

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance (2021)	Medicaid Performance (2020)
Minor changes for MY 2023	ACO (Core); Acute Care Hospital (Core); Behavioral Health Hospital (Core)	3 (ACO Contracts) 2 (Acute Care Contracts) 3 (BH Hospital Contracts) 2 (Outpatient BH Contracts)	62.6% (above 90 <sup>th</sup> percentile)	56.9% (above 90 <sup>th</sup> percentile)

\*OR = odds ratio (value greater than 1 indicates higher odds; value less than 1 indicates lower odds)

# Review of Remaining Measures

- The following measures in the Outpatient Behavioral Health Mental Health Measure Set:
  - have either no or minor specification changes,
  - have opportunity for improvement or unknown opportunity due to lack of publicly available performance data.
- For each measure, consider whether you recommend:
  - retaining the measure,
  - removing the measure, or
  - changing the measure's status (e.g., move from Menu to Core).

# Adult Major Depressive Disorder (MDD): Suicide Risk Assessment (Menu)

Equity Analysis: Race/Ethnicity		Equity Analysis: Disability Status		
<p><b>RI depression diagnosis rates:</b> 22.1% for Blacks, 20.3% for Hispanics, and 20.3% for Whites</p> <p><b>U.S. study:</b> 33% of Whites, 25% of Latinos, 18.9% of Asians, and 10.4% of African-Americans accessed and received quality depression care</p>		<p><b>U.S. depression prevalence:</b> Higher in adults with disabilities (24.9-41%) than adults without disabilities (22.8-27.5%)</p>		
Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
Minor changes for MY 2023	None	None (payers have never reported using this measure)	NA	NA

# Antidepressant Medication Management (Menu)

## Equity Analysis: Race/Ethnicity

**U.S. study of antidepressant utilization:** Racial-ethnic minority groups less likely than Whites to use antidepressants among persons with private coverage.

**U.S. study of adequate depression care:** Blacks and Latinos less likely to fill an antidepressant prescription than Whites. No racial or ethnic disparities in the probability of receiving an adequate trial of antidepressant medication among patients who filled at least one prescription.

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance (2021)	Medicaid Performance (2020)
Minor changes for MY 2023	ACO (Menu)	3 (Outpatient BH Contracts*)	<b>Acute Phase:</b> 76.5% (below 50 <sup>th</sup> percentile)	<b>Acute Phase:</b> 60.1% (between 50 <sup>th</sup> and 75 <sup>th</sup> percentiles)
			<b>Continuation Phase:</b> 57.1% (below 50 <sup>th</sup> percentile)	<b>Continuation Phase:</b> 46.1% (between 75 <sup>th</sup> and 90 <sup>th</sup> percentiles)

\*One payer indicated that this measure is not currently tied to performance targets, but is being vetted for clinical data collection.

\*One payer indicated that they are using a proxy measure.



# Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment (Menu)

## Equity Analysis: Race/Ethnicity

**RI attempted suicide (high school):** 18.3% for Blacks, 17.7% for Hispanics, 12.1% for Whites  
**RI considered suicide (middle school):** 19.6% for Hispanics, 18.0% for Blacks, 15.3% for Whites

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
Minor changes for MY 2023	None	None (payers have never reported using this measure)	NA	NA

# Depression Remission at Six Months (Menu)

Equity Analysis: Race/Ethnicity		Equity Analysis: Disability Status		
<p><b>RI depression diagnosis rates:</b> 22.1% for Blacks, 20.3% for Hispanics, and 20.3% for Whites</p> <p><b>U.S. study:</b> 33% of Whites, 25% of Latinos, 18.9% of Asians, and 10.4% of African-Americans accessed and received quality depression care</p>		<p><b>U.S. depression prevalence:</b> Higher in adults with disabilities (24.9-41%) than adults without disabilities (22.8-27.5%)</p>		
Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
No changes	None	1 (Outpatient BH Contract*)	NA	NA

\*One payer indicated that this measure is not currently tied to performance targets, but is being vetted for clinical data collection.

# Unhealthy Alcohol Use: Screening & Brief Counseling (Menu)

## Equity Analysis: Race/Ethnicity

**RI excessive or chronic drinking rates:** 31.5% for Multiracial, 21.6% for Blacks, 20.5% for Whites, 18.5% for Hispanics, 12.3% for AI/AN\*

**U.S. study of treatment completion:** Blacks and Hispanics 3.5-8.1 percentage points and Native Americans 4.7 percentage points less likely than Whites to complete treatment for alcohol and drugs

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
No changes	None	None (payers have never reported using this measure)	NA	NA

\*AI/AN = American Indian or Alaska Native

# Depression Remission or Response for Adolescents and Adults (Developmental)

Equity Analysis: Race/Ethnicity		Equity Analysis: Disability Status		
<p><b>RI depression diagnosis rates:</b> 22.1% for Blacks, 20.3% for Hispanics, and 20.3% for Whites</p> <p><b>RI youth (0-17) unable to access mental health services:</b> 75% of Blacks, 74% Hispanics, 17.2% Whites</p> <p><b>U.S. study:</b> 33% of Whites, 25% of Latinos, 18.9% of Asians, and 10.4% of African-Americans accessed and received quality depression care</p>		<p><b>U.S. depression prevalence:</b> Higher in adults with disabilities (24.9-41%) than adults without disabilities (22.8-27.5%)</p>		
Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
Minor changes for MY 2023	ACO (Developmental); Primary Care (Developmental)	1 (Outpatient BH Contract*)	NA	NA

\*One payer indicated that this measure is not currently tied to performance targets, but is being vetted for clinical data collection.

# Depression Screening and Follow-Up for Adolescents and Adults (Developmental)

Equity Analysis: Race/Ethnicity		Equity Analysis: Disability Status		
<p><b>RI depression diagnosis rates:</b> 22.1% for Blacks, 20.3% for Hispanics, and 20.3% for Whites</p> <p><b>RI youth (0-17) unable to access mental health services:</b> 75% of Blacks, 74% Hispanics, 17.2% Whites</p> <p><b>U.S. study:</b> 33% of Whites, 25% of Latinos, 18.9% of Asians, and 10.4% of African-Americans accessed and received quality depression care</p>		<p><b>U.S. depression prevalence:</b> Higher in adults with disabilities (24.9-41%) than adults without disabilities (22.8-27.5%)</p>		
Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
Minor changes for MY 2023	ACO (Developmental); Primary Care (Developmental)	2 (ACO Contracts) 1 (Outpatient BH Contract*)	NA	NA

\*One payer indicated that this measure is not currently tied to performance targets, but is being vetted for clinical data collection.

# Social Determinants of Health Screening (Developmental)

## Equity Analysis

*Negative Social Determinants of Health contribute to health inequities.*

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance (AE Statewide Rate 2020)
No changes	ACO; Primary Care; Acute Care Hospital (Developmental)	3 (ACO Contracts)	NA	28.7%

**Note:** The measure specifications only include patients screened by a primary care clinician, thus it would not be applicable to the Outpatient Behavioral Health Mental Health Measure Set unless the denominator is modified.

# Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (Developmental)

Equity Analysis: Race/Ethnicity		Equity Analysis: Disability Status		
<p><b>RI depression diagnosis rates:</b> 22.1% for Blacks, 20.3% for Hispanics, and 20.3% for Whites</p> <p><b>RI youth (0-17) unable to access mental health services:</b> 75% of Blacks, 74% Hispanics, 17.2% Whites</p> <p><b>U.S. study:</b> 33% of Whites, 25% of Latinos, 18.9% of Asians, and 10.4% of African-Americans accessed and received quality depression care</p>		<p><b>U.S. depression prevalence:</b> Higher in adults with disabilities (24.9-41%) than adults without disabilities (22.8-27.5%)</p>		
Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
Minor changes for MY 2023	ACO (Developmental); Primary Care (Developmental)	1 (Outpatient BH Contract*)	NA	NA

\*One payer indicated that this measure is not currently tied to performance targets, but is being vetted for clinical data collection.

# Unhealthy Alcohol Use Screening and Follow-Up (Developmental)

## Equity Analysis: Race/Ethnicity

**RI excessive or chronic drinking rates:** 31.5% for Multiracial, 21.6% for Blacks, 20.5% for Whites, 18.5% for Hispanics, 12.3% for AI/AN\*

**U.S. study of treatment completion:** Blacks and Hispanics 3.5-8.1 percentage points and Native Americans 4.7 percentage points less likely than Whites to complete treatment for alcohol and drugs

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
Minor changes for MY 2023	ACO (Developmental); Primary Care (Developmental)	1 (Outpatient BH Contract*)	NA	NA

\*One payer indicated that this measure is not currently tied to performance targets, but is being vetted for clinical data collection.



# Outpatient Behavioral Health Mental Health Aligned Measure Set – Measures Not in Use

- There are three measures in the Outpatient Behavioral Health Mental Health Measure Set that payers reported are **not in use**:

Measure Not in Use	Consecutive Years Not in Use*
Adult Major Depressive Disorder: Suicide Risk Assessment	5
Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment	5
Unhealthy Alcohol Use Screening and Follow-Up	5

- For each of these measures, please consider:
  - Why are these measures not in use?
  - Why should these measures remain in the set?

\*Years since OHIC began surveying insurers about measure use in 2018 (OHIC did not survey insurers in 2020 due to COVID-19)

# Review Outpatient Behavioral Health Substance Use Treatment Measure Set Measures

# Outpatient Behavioral Health Substance Use Treatment Aligned Measure Set

- The 2022 Outpatient Behavioral Health Substance Use Treatment Aligned Measure Set includes three total measures:
  - **zero Core measures**
  - **one Menu measure:**
    - Initiation and Engagement of Substance Use Treatment
  - **two Developmental measures:**
    - Concurrent Use of Opioids and Benzodiazepines
    - Social Determinants of Health Screening

**Note:** No payers reported using any of these measures in Outpatient Behavioral Health Contracts. As we review the measures, please consider whether this Measure Set should be retained in MY 2023.

# Discuss Measures with Major Specification Changes and/or that are “Topped Out”

- There are no measures that had major status or specification changes during the past year.
- There are no measure that are “topped out,” i.e., have an absolute rate of 90% or higher, and/or a statewide average rate that is above the national 90<sup>th</sup> percentile.

# Review of Remaining Measures

- The following measures in the Outpatient Behavioral Health Substance Use Measure Set:
  - have either no or minor specification changes,
  - have opportunity for improvement or unknown opportunity due to lack of publicly available performance data.
- For each measure, consider whether you recommend:
  - retaining the measure,
  - removing the measure, or
  - changing the measure's status (e.g., move from Menu to Core).

# Initiation and Engagement of Substance Use Treatment (Menu)

## Equity Analysis: Race/Ethnicity

**RI excessive or chronic drinking rates:** 31.5% for Multiracial, 21.6% for Blacks, 20.5% for Whites, 18.5% for Hispanics, 12.3% for AI/AN\*

**U.S. study of treatment completion:** Blacks and Hispanics 3.5-8.1 percentage points and Native Americans 4.7 percentage points less likely than Whites to complete treatment for alcohol and drugs

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance (2021)	Medicaid Performance (2020)
Minor changes for MY 2023  <b>Note:</b> This measure was moved from Core to Menu during the 2021 Annual Review due to significant MY 2022 specification changes.	ACO (Menu)	None (payers have not reported using this measure since 2018)	<b>Engagement:</b> 13.3% (between 50 <sup>th</sup> and 75 <sup>th</sup> percentile)	<b>Engagement:</b> 16.4% (between 50 <sup>th</sup> and 75 <sup>th</sup> percentile)
			<b>Initiation:</b> 31.9% (below 50 <sup>th</sup> percentile)	<b>Initiation:</b> 42.1% (below 50 <sup>th</sup> percentile)

\*AI/AN = American Indian or Alaska Native

# Concurrent Use of Opioids and Benzodiazepines (Developmental)

## Equity Analysis: Race/Ethnicity

**RI opioid overdose death rates:** Blacks have higher overdose death rates (53.9 per 100,000 person-years) compared to Whites (36.0); overdose death rates are increasing fastest among Blacks and Hispanics

**U.S. study of co-prescription:** Whites and Hispanics had higher rates of co-prescription than Blacks

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance
No changes	ACO (Developmental); Primary Care (Developmental)	None (payers have not reported using this measure since 2018)	NA	NA

During Meeting #1, the Work Group recommended removing this measure from the Aligned Measure Sets due to denominator size.

# Social Determinants of Health Screening (Developmental)

## Equity Analysis

*Negative Social Determinants of Health contribute to health inequities.*

Status/Measure Specification Changes	Presence in Other RI Sets	Use by RI Payers	Commercial Performance	Medicaid Performance (AE Statewide Rate 2020)
No changes	ACO; Primary Care; Acute Care Hospital (Developmental)	3 (ACO Contracts)	NA	28.7%

**Note:** The measure specifications only include patients screened by a primary care clinician, thus it would not be applicable to the Outpatient Behavioral Health Substance Use Measure Set unless the denominator is modified.



# Outpatient Behavioral Health Substance Use Treatment Aligned Measure Set – Measures Not in Use

- There are two measures in the Outpatient Behavioral Health Mental Health Measure Set that payers reported are **not in use**:

Measure Not in Use	Consecutive Years Not in Use*
Initiation and Engagement of Substance Use Treatment	4
Concurrent Use of Opioids and Benzodiazepines	4

- For each of these measures, please consider:
  - Why are these measures not in use?
  - Why should these measures remain in the set?

\*Years since OHIC began surveying insurers about measure use in 2018 (OHIC did not survey insurers in 2020 due to COVID-19)

## Follow-up Steps from 2021 Annual Review

# Discuss Follow-up Step from the 2021 Annual Review – Adding an Outpatient Behavioral Health Equity Measure

- During the 2021 Annual Review, the Work Group did not select any measures from the Outpatient Behavioral Health Measure Sets to stratify by race, ethnicity and language (REL).
  - The Work Group recommended revisiting whether to stratify any of the Outpatient Behavioral Health Measures by REL during the 2022 Annual Review.
- Does the Work Group recommend stratifying any of the Outpatient Behavioral Health Measures by REL for the 2023 Aligned Measure Set? (see the next slide for a full list of measures)

# Discuss Follow-ups Steps from the 2021 Annual Review – Adding an Outpatient Behavioral Health Equity Measure (Cont'd)

- **Menu measures (8):**

- Adult Major Depressive Disorder (MDD): Suicide Risk Assessment\*
- Antidepressant Medication Management\*
- Child and Adolescent Major Depressive Disorder: Suicide Risk Assessment\*
- Depression Remission at Six Months\*
- Follow-Up After Hospitalization for Mental Illness (7-Day)\*
- Initiation and Engagement of Substance Use Treatment\*
- Unhealthy Alcohol Use: Screening & Brief Counseling\*

## Public Comment

## Next Steps

# Next Steps

**# 3**

**8/23, 1pm - 3pm  
Acute Care Hospital (Continued) &  
Behavioral Health Hospital Sets**

**# 4**

**8/29, 10am - 12:30 pm  
Primary Care Set**

**# 5**

**9/12, 10am - 12:30pm  
ACO Set  
Wrap-up**

# Appendix



# Selection Criteria Specific to Individual Measures

1. Evidence-based and scientifically acceptable
2. Has a relevant benchmark (use regional/community benchmark, as appropriate)
3. Not greatly influenced by patient case mix
4. Consistent with the goals of the program
5. Useable and relevant
6. Feasible to collect
7. Aligned with other measure sets
8. Promotes increased value
9. Presents an opportunity for quality improvement
10. Transformative potential
11. Sufficient denominator size for the intended use
12. Utilizes HEDIS specifications when multiple options exist

# Selection Criteria Specific to the Measure Set

1. Representative of the array of services provided by the program
2. Representative of the diversity of patients served by the program
3. Not unreasonably burdensome to payers or providers
4. Broadly address population health
5. Includes topics and measures for which there are known opportunities – based on RI data where available and national data otherwise – to promote health equity by race, ethnicity, language, disability status, economic status and other important demographic and cultural characteristics
6. Includes validated outcome measures, where they exist, including measures sourced from clinical, patient-reported, and administrative data