Initiation and engagement of substance use disorder treatment (IET)

OHA technical specifications[1]

Who: Members aged 18 years and older* with a new SUD episode between November 15, 2022–November 14, 2023. An episode is considered "new" if the member has not had a diagnosis of (or received medication for) alcohol or other drug use in the previous 194 days.

***Note on incentivized components:** only the adult 18 and above age groups and its 'total cohort' rate is incentivized. *CCOs must meet benchmark or improvement target for both Initiation and Engagement for ages 18+ to achieve measure.*

Why: Access to treatment for substance use disorder is a critical aspect of a person's health and their journey through recovery. The IET metric is a tool to encourage coordination across the network of care providers for substance use treatment and helps ensure people have timely access to appropriate care.

What: Two rates are reported for this measure: Initiation and Engagement (NQF 0004). Both measures use the same denominator.

How: Two rates are reported for this measure using EHR-based data:

1. **Initiation -** For members with a new episode of alcohol or other drug use (diagnosis on a claim with no other diagnosis in the previous 194 days), this metric measures the percentage of those who initiated treatment within 14 days through either medication dispensing or a SUD visit with a provider.

   a. Initiation of treatment can be on the same day as the new alcohol or other drug use diagnosis if the services are with different providers.

2. **Engagement -** For members with a new episode of alcohol or other drug use (diagnosis on a claim with no other diagnosis in the previous 194 days), this metric measures the percentage of those who had two treatment events, either medication dispensing or a SUD visit with a provider, within 34 days from their initial treatment event.

   a. If treatment was initiated through a medication dispensing event, only one of the two required engagement events can be through medication and the other must be through a SUD visit with a provider.

   b. Both engagement events can be on the same day if the services are with different providers; the exception being if one event is for medication assisted treatment (MAT) there is no requirement that they be different providers.

There are over 230 codes that count toward numerator criteria through a visit with a provider; please see IET Guide for Primary Care in the "Resources" section for additional information. In general, initiation and engagement events can be through medication dispensing events, inpatient, outpatient, observation, or telemedicine visits.

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Some ideas to improve IET performance:

- Utilization of medication to treat AUD and OUD
- Common codes saved to provider preferences
- IET cohort is monitored in Collective and outreach is performed to identified patients
- Care coordination with Specialty Behavioral Health
- Person centered language
- Utilize Behavioral Health Clinician (BHC) for SBIRT, this is the start of initiation/identification: BHC can screen during BHC and PCP appointments

Please reach out to your Quality Improvement Analyst or Innovation Specialist for additional support or technical assistance.

Note on methadone: Methadone is not included in the medication lists for this measure because Methadone for opioid use disorder does not show up in pharmacy claims data. However, Methadone for opioid use disorder treatment does count as treatment for this metric and would be captured on medical claims.

Exclusions:
Exclusions include-

- Members in hospice or using hospice services during any point in the year.
- Members who died any time during the measurement year.

Continuous enrollment: Members must be continuously enrollment for 242 days: 194 days prior to the qualifying SUD episode date through 47 days after the qualifying date.

Telehealth: This measure is telehealth eligible. For details on the allowance of telehealth encounters, view:
Expanded telehealth coverage for behavioral health services (oregon.gov)

Link to OHA CCO measure specification:
https://www.oregon.gov/oha/HPA/ANALYTICS/CCOMetrics/Final-2023-Initiation-and-Engagement-of-SUD-Treatment-Specifications.pdf

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Frequently asked questions

Q: Is tobacco use included in this metric?

A: No. The OHA specifications do not include tobacco use.

Q: Is cannabis use included in this metric?

A: Yes. The OHA specifications do include cannabis use.

Q: What is considered as "other drugs" in this metric?

A: The IET measure is looking for substance use disorder diagnosis including alcohol, opioid and other drugs such as cocaine, cannabis, methamphetamine, hypnotics, sedatives, inhalants, etc. See OHA specifications for full list.

Q: How are initial alcohol or other drug use diagnoses identified?

A: Alcohol or other drug use disorder diagnosis codes are identified using claims for services that occurred in the following visit types:

- Outpatient visits
- Telehealth
- E-visit or virtual check-in
- Intensive outpatient visits
- Partial hospitalization
- Withdrawal management visits
- Ed visits or observation
- Acute or non-acute inpatient admits
- Online assessment
- Opioid treatment services

[1]*https://www.oregon.gov/oha/HPA/ANALYTICS/CCOMetrics/Final-2023-Initiation-and-Engagement-of-SUD-Treatment-Specifications.pdf*