

Proposed Changes to Existing Measure for HEDIS^{®1} 2020: Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)

NCQA seeks comments on proposed modifications to the HEDIS Health Plan *Adherence to Antipsychotic Medications for Individuals With Schizophrenia* measure.

- Add the Medicare and commercial product lines.
- Update the age range to include ages 19 and older.

The current measure assesses adherence to antipsychotic medication among members with schizophrenia or schizoaffective disorder and is presently only specified for Medicaid enrollees 18–64 years of age.

NCQA conducted testing to explore the feasibility and utility of expanding the measure to include the Medicare and commercial product lines. Based on results, our expert panels supported the addition of these two products lines to the measure. Panel members noted that although the prevalence of schizophrenia is low, its impact on health care utilization and quality of life is high.

There was concern that a small percentage of Medicare (34%) plans were able to report the measure in the testing sample because many were disqualified because of low denominator sizes. However, historical HEDIS data has shown that plans with low denominators resulting from an enrollment of less than 7,000 members (42%) represent only up to 4% of all members for whom Medicare plans report HEDIS measures. On the flip side, Medicare plans likely to have sufficient denominators (58%) represent 96% of all members for whom Medicare plans report HEDIS measures. Given this information, NCQA is confident that the measure will be reportable by most Medicare plans for HEDIS 2020.

This measure would continue to assess the Medicaid population for antipsychotic medication adherence, with no changes.

Supporting documents include the draft measure specification.

**NCQA acknowledges the contributions of the Geriatric Measurement Advisory Panel,
Behavioral Health Measurement Advisory Panel and Technical Measurement Advisory Panel**

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Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)

SUMMARY OF CHANGES TO HEDIS 2020

- Added the Medicare and Commercial product lines.
- Expanded the age range to 19 years of age and older.

Description

The percentage of members 19–~~64 years of age~~ years of age and older during the measurement year with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.

Definitions

IPSD	Index prescription start date. The earliest prescription dispensing date for any antipsychotic medication during the measurement year.
Treatment period	The period of time beginning on the IPSD through the last day of the measurement year.
PDC	Proportion of days covered. The number of days a member is covered by at least one antipsychotic medication prescription, divided by the number of days in the treatment period.
Oral medication dispensing event	<p>One prescription of an amount lasting 30 days or less. To calculate dispensing events for prescriptions longer than 30 days, divide the days supply by 30 and round down to convert. For example, a 100-day prescription is equal to three dispensing events.</p> <p>Multiple prescriptions for different medications dispensed on the same day are counted as separate dispensing events. If multiple prescriptions for the same medication are dispensed on the same day, use the prescription with the longest days supply. Use the Drug ID to determine if the prescriptions are the same or different.</p>
Long-acting injections dispensing event	Injections count as one dispensing event. Multiple J codes or NDCs for the same or different medication on the same day are counted as a single dispensing event.
Calculating number of days covered for oral medications	<p>If multiple prescriptions for the same or different oral medications are dispensed on the same day, calculate number of days covered by an antipsychotic medication (for the numerator) using the prescription with the longest days supply.</p> <p>If multiple prescriptions for different oral medications are dispensed on different days, count each day within the treatment period only once toward the numerator. If multiple prescriptions for the same oral medication are dispensed on different days, sum the days supply and use the total to calculate the number of days covered by an antipsychotic medication (for the numerator). For example, if three antipsychotic prescriptions for the same oral medication are dispensed on different days, each with a 30-day supply; sum the days supply for a total of 90 days covered by an oral antipsychotic (even if there is overlap).</p> <p>Use the Drug ID field in the Medication List Directory of NDC codes to determine if the prescriptions are the same or different.</p>

Calculating number of days covered for long-acting injections

Calculate number of days covered (for the numerator) for long-acting injections using the days supply specified for the medication in the medication list or in the value set name.

For multiple J Codes or NDCs for the same or different medications on the same day, use the medication with the longest days supply.

For multiple J Codes or NDCs for the same or different medications on different days with overlapping days supply, count each day within the treatment period only once toward the numerator.

Note

- *If an oral medication and a long-acting injection are dispensed on the same day, calculate number of days covered by an antipsychotic medication (for the numerator) using the prescription with the longest days supply.*
- *If an oral medication and long-acting injection are dispensed on different days, with some overlapping days of supply, count each day within the treatment period only once toward the numerator.*

Eligible Population

Note: *Members in hospice are excluded from the eligible population. Refer to General Guideline 17: Members in Hospice.*

Product lines Medicaid, Medicare, Commercial (report each product line separately)

Ages 19 years of age and older as of December 31 of the measurement year.

Continuous enrollment The measurement year.

Allowable gap No more than one gap in enrollment of up to 45 days during the measurement year. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, the member may not have more than a 1-month gap in coverage (i.e., a member whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).

Anchor date December 31 of the measurement year.

Benefits Medical and pharmacy.

**Event/
diagnosis**

Follow the steps below to identify the eligible population.

- Step 1** Identify members with schizophrenia or schizoaffective disorder as those who met at least one of the following criteria during the measurement year:
- At least one acute inpatient encounter with any diagnosis of schizophrenia or schizoaffective disorder. Either of the following code combinations meets criteria:
 - BH Stand Alone Acute Inpatient Value Set **with** Schizophrenia Value Set.
 - Visit Setting Unspecified Value Set **with** Acute Inpatient POS Value Set **with** Schizophrenia Value Set.
 - At least two visits in an outpatient, intensive outpatient, partial hospitalization, ED or nonacute inpatient setting, on different dates of service, with any diagnosis of schizophrenia or schizoaffective disorder. Two of any of the following, with or without a telehealth modifier (Telehealth Modifier Value Set), meets criteria:
 - An outpatient visit with any diagnosis of schizophrenia or schizoaffective disorder (Visit Setting Unspecified Value Set **with** Outpatient POS Value Set **with** Schizophrenia Value Set).
 - An outpatient visit with any diagnosis of schizophrenia or schizoaffective disorder (BH Outpatient Value Set **with** Schizophrenia Value Set).
 - An intensive outpatient encounter or partial hospitalization with any diagnosis of schizophrenia or schizoaffective disorder (Visit Setting Unspecified Value Set **with** Partial Hospitalization POS Value Set **with** Schizophrenia Value Set).
 - An intensive outpatient encounter or partial hospitalization with any diagnosis of schizophrenia or schizoaffective disorder (Partial Hospitalization/Intensive Outpatient Value Set **with** Schizophrenia Value Set).
 - A community mental health center visit with any diagnosis of schizophrenia or schizoaffective disorder (Visit Setting Unspecified Value Set **with** Community Mental Health Center POS Value Set **with** Schizophrenia Value Set).
 - Electroconvulsive therapy (Electroconvulsive Therapy Value Set) with any diagnosis of schizophrenia or schizoaffective disorder (Schizophrenia Value Set).
 - An observation visit (Observation Value Set) **with** any diagnosis of schizophrenia or schizoaffective disorder (Schizophrenia Value Set).
 - An ED visit (ED Value Set) **with** any diagnosis of schizophrenia or schizoaffective disorder (Schizophrenia Value Set).
 - An ED visit with any diagnosis of schizophrenia or schizoaffective disorder (Visit Setting Unspecified Value Set **with** ED POS Value Set **with** Schizophrenia Value Set).
 - A nonacute inpatient encounter (BH Stand Alone Nonacute Inpatient Value Set) **with** any diagnosis of schizophrenia or schizoaffective disorder (Schizophrenia Value Set).
 - A nonacute inpatient encounter with any diagnosis of schizophrenia or schizoaffective disorder (Visit Setting Unspecified Value Set **with** Nonacute Inpatient POS Value Set **with** Schizophrenia Value Set).
 - A telehealth visit with any diagnosis of schizophrenia or schizoaffective disorder (Visit Setting Unspecified Value Set **with** Telehealth POS Value Set **with** Schizophrenia Value Set).

Step 2: Required exclusions Exclude members who met at least one of the following during the measurement year.

- A diagnosis of dementia (Dementia Value Set).
- *Did not* have at least two antipsychotic medication dispensing events. There are two ways to identify dispensing events: by claim/encounter data and by pharmacy data. The organization must use both methods to identify dispensing events, but an event need only be identified by one method to be counted.
 - *Claim/encounter data.* An antipsychotic medication (Long-Acting Injections 14 Days Supply Value Set or Long-Acting Injections 28 Days Supply Value Set).
 - *Pharmacy data.* Dispensed an antipsychotic medication (Oral Antipsychotic Medications List; Long-Acting Injections 14 Days Supply Medications List or Long-Acting Injections 28 Days Supply Medications List) on an ambulatory basis.

Oral Antipsychotic Medications

Description	Prescription
Miscellaneous antipsychotic agents (oral)	<ul style="list-style-type: none"> • Aripiprazole • Asenapine • Brexpiprazole • Cariprazine • Clozapine • Haloperidol <ul style="list-style-type: none"> • Iloperidone • Loxapine • Lurisdone • Molindone • Olanzapine • Paliperidone <ul style="list-style-type: none"> • Quetiapine • Quetiapine fumarate • Risperidone • Ziprasidone
Phenothiazine antipsychotics (oral)	<ul style="list-style-type: none"> • Chlorpromazine • Fluphenazine <ul style="list-style-type: none"> • Perphenazine • Prochlorperazine <ul style="list-style-type: none"> • Thioridazine • Trifluoperazine
Psychotherapeutic combinations (oral)	<ul style="list-style-type: none"> • Amitriptyline-perphenazine
Thioxanthenes (oral)	<ul style="list-style-type: none"> • Thiothixene

Long-Acting Injections 14 Days Supply Medications

Description	Prescription
Long-acting injections 14 days supply	<ul style="list-style-type: none"> • Risperidone

Long-Acting Injections 28 Days Supply Medications

Description	Prescription
Long-acting injections 28 days supply	<ul style="list-style-type: none"> • Aripiprazole • Fluphenazine decanoate • Haloperidol decanoate <ul style="list-style-type: none"> • Olanzapine • Paliperidone palmitate

Administrative Specification

Denominator The eligible population.

Numerator The number of members who achieved a PDC of at least 80% for their antipsychotic medications (Oral Antipsychotic Medications List; Long-Acting Injections 14 Days Supply Medications List; Long-Acting Injections 28 Days Supply Medications List; Long-Acting Injections 14 Days Supply Value Set; Long-Acting Injections 28 Days Supply Value Set) during the measurement year.

Follow the steps below to identify numerator compliance.

- Step 1** Identify the IPSD. The IPSD is the earliest dispensing event for any antipsychotic medication (Oral Antipsychotic Medications List; Long-Acting Injections 14 Days Supply Medications List; Long-Acting Injections 28 Days Supply Medications List; Long-Acting Injections 14 Days Supply Value Set; Long-Acting Injections 28 Days Supply Value Set) during the measurement year.
- Step 2** To determine the treatment period, calculate the number of days beginning on the IPSD through the end of the measurement year.
- Step 3** Count the days covered by at least one antipsychotic medications (Oral Antipsychotic Medications List; Long-Acting Injections 14 Days Supply Medications List; Long-Acting Injections 28 Days Supply Medications List; Long-Acting Injections 14 Days Supply Value Set; Long-Acting Injections 28 Days Supply Value Set) during the treatment period. To ensure that days supply that extend beyond the measurement year are not counted, subtract any days supply that extends beyond December 31 of the measurement year.
- Step 4** Calculate the member's PDC using the following equation. Round (using the .5 rule) to the nearest whole number.

$$\frac{\text{Total Days Covered by an Antipsychotic Medication in the Treatment Period (step 3)}}{\text{Total Days in Treatment Period (step 2)}}$$

- Step 5** Sum the number of members whose PDC is $\geq 80\%$ for their treatment period.

Data Elements for Reporting

Organizations that submit HEDIS data to NCQA must provide the following data elements.

Table SAA-1/2/3: Data Elements for Adherence to Antipsychotic Medications for Individuals With Schizophrenia

	Administrative
Measurement year	✓
Data collection methodology (Administrative)	✓
Eligible population	✓
Number of required exclusions	✓
Numerator events by administrative data	✓
Numerator events by supplemental data	✓
Reported rate	✓