# 2nd Statewide PIP: Opioid Reduction

Measure Basic Information

**Name and date of specifications used:**

**URL of Specifications:**

**Measure Type:**

HEDIS  PQI  Survey  Other ✓ Specify: OHA-modified (see links above)

**Measure Utility:**

CCO Incentive  Core Performance CMS Adult Set  CHIPRA Set  State Performance✓

Other ✓ Specify: CMS waiver requirement

**Data Source**:

The Pharmacy Quality Alliance: <http://pqaalliance.org/images/uploads/files/PQA%20measuresJuly2015.pdf>

Washington State Agency Medical Directors’ Group: 2015 Interagency Guideline on Prescribing Opioids for Pain: <http://www.agencymeddirectors.wa.gov/Files/2015AMDGOpioidGuideline.pdf>

CDC Guideline for Prescribing Opioids for Chronic Pain — United States, 2016: <http://www.cdc.gov/drugoverdose/prescribing/guideline.html>

**Measurement Period:**

January 1, 2014 – December 31, 2014 (baseline)

January 1, 2016 – December 31, 2016 (PIP Year 1)

January 1, 2017 – December 31, 2017 (PIP Year 2)

**Benchmark (if applicable):** Not applicable

**Denied claims:** Included  Not included ✓

**Member type:** CCO A ✓CCO B ✓CCO G 

Measure Details

**Denominator:** Any OHP enrollee, age 12+ as of the last day of the measurement year, who meets continuous enrollment criteria, with at least one OHA-paid prescription for an opioid filled in the measurement year. Inclusive of dual eligible population.

**Required exclusions for denominator:**

* Enrollees with the following diagnoses in the measurement year or in the year prior to the measurement year: neoplasm-related pain (ICD9 338.3, ICD10 G89.3), end-of-life care, palliative care, or hospice care (see attached table for codes)
* Any opioid prescription not paid for by OHA (e.g. cough suppressants)
* Enrollees with medication claims for buprenorphine/buprenorphine products

**Deviations from cited specifications for denominator:**

Opioids: Include all drugs in the “narcotic analgesics” therapeutic class Standard Code 40. – (Refer to attached table Opioid Class40 for a complete drug list.) This therapeutic class includes transdermal patches and injectable buprenorphine products because they are not used for MAT. This therapeutic class excludes buprenorphine tablet or sublingual film alone or in combination with naloxone.

**Numerator:** Enrollees in the denominator with one or more days with an MME/day ≥120 or an MME/day ≥90

**Required exclusions for numerator:**  None

**Deviations from cited specifications for numerator:**Morphine milligram equivalents (MME) /day is calculated as: MME = drug strength \* (quantity / days supply) \* conversion factor. MME should first be calculated per prescription, then summed to reach patient total. Any patient with one or more days with an MME ≥120 or an MME ≥90 will be counted in the numerator. – (Refer to attached table CDC conversion factor to calculate Daily MME.)

**What are the continuous enrollment criteria:** Themeasurement year  
 **What are allowable gaps in enrollment:** No more than one gap in enrollment of up to 45 days during the year of continuous enrollment.

**Define Anchor Date (if applicable):** The last day of the measurement year

Version Control