

SCG6 Outcome of High Risk Pain Medications Prescribed in Last 6 Months

Percentage of patients aged 18 years and older prescribed and actively taking one or more high risk medications in the last 6 months meeting the following criteria:

- Evaluation of polypharmacy AND
- Reduction to the high risk medication where clinically appropriate (e.g., change pain medication, number of medications, dosage and/or frequency prescribed)

2019 OPTIONS FOR INDIVIDUAL MEASURES:

SCG Health, Clinigence VIP QCDR

NATIONAL QUALITY STRATEGY DOMAIN: Patient Safety

MEASURE TYPE: Outcome

HIGH PRIORITY STATUS: High Priority

SPECIALTY RECOMMENDATION: Substance Use/Management

MEANINGFUL MEASURE AREA: Prevention and Treatment of Opioid and Substance Use Disorders

NQF NUMBER: Not applicable

PERFORMANCE NOTES: Traditional (not inverse), single (1) proportional performance calculation

RISK ADJUSTMENT: Yes

INSTRUCTIONS:

This measure is to be reported a minimum of **once per performance period** for patients prescribed a high risk pain medication in the last 6 months and seen during the performance period. An accurate and complete medication list must be on file for each of the encounter date(s) of service. The most recent quality-data submitted will be used for performance calculation. This measure may be reported by eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

DENOMINATOR:

Denominator criteria (Eligible Cases):

Patients 18 age and older on date of encounter

AND

Patient encounter during the reporting period (CPT): 41899, 90791, 90792, 90834, 90837, 90839, 92002, 92004, 92012, 92014, 92507, 92508, 92526, 92537, 92538, 92540, 92541, 92542, 92544, 92545, 92547, 92548, 92550, 92557, 92567, 92568, 92570, 92585, 92588, 92626, 96116, 96121, 96130, 96131, 96132, 96133, 96136, 96137, 96138, 96139, 96146, 96150, 96151, 96152, 97127, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99221, 99222, 99223, 99236, 99241, 99242, 99243, 99244, 99245, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99318, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99339, 99340, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99495, 99496, 99281, 99282, 99283, 99284, 99285, 99385, 99386, 99387, 99395, 99396, 99397, D7140, D7210, G0101, G0108, G0270, G0402, G0438, G0439, G0515

DENOMINATOR EXCLUSIONS:

Trauma cases

Hospice services received by patient any time during the measurement period: G9692

Patients who are receiving comfort care only at the time of encounter: G9930

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NUMERATOR:

Patients prescribed and actively taking high risk pain medications in the last 6 months

Numerator Instructions: All components should be completed once per procedure per patient and should be documented in the medical record as having been performed during the measurement period.

Definitions:

High risk pain medications – Patients prescribed certain high risk pain medications including:

Opiates:	buprenorphine (Butrans not Suboxone), codeine, fentanyl, hydrocodone, hydromorphone, methadone, morphine, oxycodone, oxymorphone, tapentadol, tramadol
Benzodiazepines:	alprazolam, diazepam, clonazepam, lorazepam
Anti-spastics:	baclofen, carisoprodol, cyclobenzaprine, metaxolone, methocarbamol, tizanidine
NSAIDs:	ibuprofen, indomethacin, ketorolac, meloxicam, naproxen
Excluded:	Transdermal lidocaine.

Numerator Options:

Performance Met: Patient evaluated for polypharmacy resulting in a clinically appropriate reduction in the number of medications used in treatment

AND/OR

Performance Met: Patient evaluated for polypharmacy resulting in the patient prescribed a different pain management medication

AND/OR

Performance Met: Patient evaluated for polypharmacy resulting in a clinically appropriate change in dosage and/or frequency of the high risk pain medication

OR

Performance Exclusion: Patient not prescribed a high risk pain medication.

OR

Performance Not Met: Patient evaluated for polypharmacy resulting in no change in patient's pharmacologic treatment regimen

OR

Performance Not Met: Patient not evaluated for polypharmacy, reason not given

NUMERATOR EXCLUSION: Patient not prescribed a high risk pain medication

RATIONALE:

Approximately 2.5 million Americans have a substance use disorder (SUD) related to opioids and heroin (Rodolico. 2016). In 2014, there were approximately 29,000 drug overdose deaths linked to opioids and heroin in the United States, or about 80 people every day (Rudd et al. 2016). Yearly direct and indirect costs related to prescription opioids have been estimated (based on studies published since 2010) to be \$53.4 billion for nonmedical use of prescription opioids (Hansen RN, Oster G, Edelsberg J, Woody GE, Sullivan SD. Economic costs of nonmedical use of prescription opioids. Clin J Pain 2011;27:194–202); \$55.7 billion for abuse, dependence (i.e., opioid use disorder), and misuse of prescription opioids (Birnbaum HG, White AG, Schiller M, Waldman T, Cleveland JM, Roland CL. Societal costs of prescription opioid abuse, dependence, and misuse in the United States. Pain Med 2011;12:657–67); and \$20.4 billion for direct and indirect costs related to opioid-related overdose alone (Inocencio TJ, Carroll

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CLINICAL RECOMMENDATION STATEMENTS:

Centers for Disease Control and Prevention Guideline for Prescribing Opioids for Chronic Pain

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