

SCG7 Evaluation of High Risk Pain Medications for MME

Percentage of patients aged 18 years and older prescribed and actively taking one or more high risk pain medications and evaluated for clinical appropriateness of morphine milligram equivalents (MME)

2019 OPTIONS FOR INDIVIDUAL MEASURES:

SCG Health, Clinigence VIP QCDR

NATIONAL QUALITY STRATEGY DOMAIN: Effective Clinical Care

MEASURE TYPE: Process

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**. 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 performance period (CPT): 59400, 59510, 59610, 59618, 90791, 90792, 90832, 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, 96150, 96151, 96152, 97127, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168, 97802, 97803, 97804, 98960, 98961, 98962, 99024, 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99221, 99222, 99223, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, 99495, 99496, 99281, 99282, 99283, 99284, 99285, 99385, 99386, 99387, 99395, 99396, 99397, G0101, G0108, G0270, G0402, G0438, G0439, G0515

AND

All eligible instances when MIPS measure #130 (NQF 0419): Documentation of Current Medications is reported the same encounter (2018 specifications): G8427

OR

Patients 18 age and older on date of encounter

AND

Patient encounter during the performance period (CPT):

ANESTHESIA 00100, 00102, 00103, 00104, 00120, 00124, 00126, 00140, 00142, 00144, 00145, 00147, 00148, 00160, 00162, 00164, 00170, 00172, 00174, 00176, 00190, 00192, 00210, 00211, 00212, 00214, 00215, 00216, 00218, 00220, 00222, 00300, 00320, 00322, 00326, 00350, 00352, 00400, 00402, 00404, 00406, 00410, 00450, 00454, 00470, 00472, 00474, 00500, 00520, 00522, 00524, 00528, 00529, 00530, 00532, 00534, 00537, 00539, 00540, 00541, 00542, 00546, 00548, 00550, 00560, 00566, 00600, 00604, 00620, 00625, 00626, 00630, 00632, 00635, 00640, 00670, 00700, 00702, 00730, 00731, 00732, 00750, 00752, 00754, 00756, 00770, 00790, 00792, 00794, 00796, 00797, 00800, 00802, 00811, 00812, 00813, 00820, 00830, 00832, 00834, 00836,

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00840, 00842, 00844, 00846, 00848, 00851, 00860, 00862, 00864, 00865, 00866, 00868, 00870, 00872, 00873, 00880, 00882, 00902, 00904, 00906, 00908, 00910, 00912, 00914, 00916, 00918, 00920, 00921, 00922, 00924, 00926, 00928, 00930, 00932, 00934, 00936, 00938, 00940, 00942, 00944, 00948, 00950, 00952, 01112, 01120, 01130, 01140, 01150, 01160, 01170, 01173, 01200, 01202, 01210, 01212, 01214, 01215, 01220, 01230, 01232, 01234, 01250, 01260, 01270, 01272, 01274, 01320, 01340, 01360, 01380, 01382, 01390, 01392, 01400, 01402, 01404, 01420, 01430, 01432, 01440, 01442, 01444, 01462, 01464, 01470, 01472, 01474, 01480, 01482, 01484, 01486, 01490, 01500, 01502, 01520, 01522, 01610, 01620, 01622, 01630, 01634, 01636, 01638, 01650, 01652, 01654, 01656, 01670, 01680, 01710, 01712, 01714, 01716, 01730, 01732, 01740, 01742, 01744, 01756, 01758, 01760, 01770, 01772, 01780, 01782, 01810, 01820, 01829, 01830, 01832, 01840, 01842, 01844, 01850, 01852, 01860, 01922, 01924, 01925, 01926, 01930, 01931, 01932, 01933, 01935, 01936, 01951, 01952, 01958, 01960, 01961, 01962, 01963, 01965, 01966, 01992

BEHAVIORAL HEALTH 90875, 90876, 90880, 90887, 90901, 90911, 96150, 96151, 96152, 97110, 97112, 97116, 97150, 97530, 97535, 98968, 99443

DENTAL CARE D0120, D0140, D0150, D0160, D0170, D0171, D0180, D7140, D7210

AND

Eligible clinician attests to documenting in the medical record they obtained, updated, or reviewed the patient's current medications: G8427

DENOMINATOR EXCLUSIONS:

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

Current list of medications not documented as obtained, updated, or reviewed by the eligible clinician

NUMERATOR:

Numerator Criteria (Performance Met and Performance Not Met): Percentage of patients prescribed and actively taking one or more high risk pain medications.

Numerator Instructions: The eligible clinician must document in the medical record they obtained, updated, or reviewed a medication list on the date of the encounter. Eligible clinicians reporting this measure may document medication information received from the patient, authorized representative(s), caregiver(s) or other available healthcare resources. The MME must be documented in the medical record. Measure instructions reference CDC conversion factor equivalents and guidelines for calculation.

Definitions:

Accurate and complete medication list – List of current medications using all immediate resources available on the date of the encounter. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosage, frequency and route of administration. MIPS measure #130 (NQF #0419) or the equivalent performance met documentation must be on file for the encounter to be eligible.

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

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Anti-spastics: baclofen, carisoprodol, cyclobenzaprine, metaxolone, methocarbamol, tizanidine

NSAIDs: ibuprofen, indomethacin, ketorolac, meloxicam, naproxen

Excluded: Transdermal lidocaine.

SOURCE: Centers for Disease Control and Prevention, Atlanta, GA, May 2014.

Morphine milligram equivalents (MME) – Also called morphine equivalent daily dose, the conversion factors identified below were developed by the Centers for Disease Control and Prevention in May 2014. MME can be calculated using: $MME = (Drug\ Strength \times Drug\ Quantity \times MME\ Conversion\ Factor) / Days\ Supply$

Numerator Options:

Performance Met: Patient evaluated and current high risk pain medication, current pharmacologic treatment regimen less than or equal to 25 MME

OR

Performance Met: Patient evaluated and current high risk pain medication, current pharmacologic treatment regimen greater than or equal to 26 MME and less than 50 MME

OR

Performance Not Met: Patient evaluated and current high risk pain medication, current pharmacologic treatment regimen less than or equal to 50 MME and less than 90 MME

OR

Performance Not Met: Patient evaluated and current high risk pain medication, current pharmacologic treatment regimen greater than or equal to 90 MME

OR

Performance Not Met: Patient not evaluated for the MME of their current high risk pain medication pharmacologic treatment regimen, reason not given

NUMERATOR EXCLUSION: Patient not prescribed a high risk pain medication.

RATIONALE:

Having a history of a prescription for an opioid pain medication increases the risk for overdose and opioid use disorder (22–24), highlighting the value of guidance on safer prescribing practices for clinicians. For example, a recent study of patients aged 15–64 years receiving opioids for chronic noncancer pain and followed for up to 13 years revealed that one in 550 patients died from opioid-related overdose at a median of 2.6 years from their first opioid prescription, and one in 32 patients who escalated to opioid dosages >200 morphine milligram equivalents (MME) died from opioid-related overdose (25).

CLINICAL RECOMMENDATION STATEMENTS:

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

WORKS CITED:

Stagnitti MN. Trends in prescribed outpatient opioid use and expenses in the U.S. civilian noninstitutionalized population, 2002–2012. Statistical Brief No. 478. Agency for Healthcare Research and Quality; 2015.

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