

MEASURE SAA-AD: ADHERENCE TO ANTIPSYCHOTIC MEDICATIONS FOR INDIVIDUALS WITH SCHIZOPHRENIA¹

National Committee for Quality Assurance

A. DESCRIPTION

Percentage of beneficiaries ages 18 and older during the measurement year with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period.

Data Collection Method: Administrative

Guidance for Reporting:

- 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.
- Include all paid, suspended, pending, and denied claims.
- Beneficiaries in hospice are excluded from the eligible population. For additional information, refer to the hospice exclusion guidance in Section II. Data Collection and Reporting of the Adult Core Set.
- NCQA's Medication List Directory (MLD) for Dementia Medications, Oral Antipsychotic Medications, and Long-Acting Injections is available to order free of charge in the NCQA Store (<http://store.ncqa.org/index.php/catalog/product/view/id/3763/s/hedis-my-2020-medication-list-directory/>). Once ordered, the Medication List Directory can be accessed through the NCQA Download Center (<https://my.ncqa.org/Downloads>).

The following coding systems are used in this measure: CPT, HCPCS, ICD-9-CM, ICD-10-CM, ICD-10-PCS, POS, SNOMED, and UB. Refer to the Acknowledgments section at the beginning of the manual for copyright information.

B. DEFINITIONS

IPSD	Index Prescription Start Date (IPSD). 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 beneficiary is covered by at least one antipsychotic medication prescription, divided by the number of days in the treatment period.

¹ Adapted by NCQA with permission of the measure developer, CMS.

<p>Oral medication dispensing event</p>	<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 medication lists (see Medication List table below and link to the Medication List Directory in Guidance for Reporting above) to determine if the drugs are the same or different. Drugs in different lists are considered different drugs.</p>
<p>Long-acting injections dispensing event</p>	<p>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.</p>
<p>Calculating number of days covered for oral medications</p>	<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.</p> <p>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 medication lists (see Medication List table below and link to the Medication List Directory in Guidance for Reporting above) to determine if the drugs are the same or different. Drugs in different lists are considered different drugs.</p>
<p>Calculating number of days covered for long-acting injections</p>	<p>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.</p> <p>For multiple J Codes or NDCs for the same or different medications on the same day, use the medication with the longest days supply.</p> <p>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.</p>

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.

C. ELIGIBLE POPULATION

Age	Ages 18 and older as of January 1 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 beneficiary for whom enrollment is verified monthly, the beneficiary may not have more than a 1-month gap in coverage (e.g., a beneficiary 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	<p>Follow the steps below to identify the eligible population.</p> <p>Step 1</p> <p>Identify beneficiaries with schizophrenia or schizoaffective disorder as those who met at least one of the following criteria during the measurement year:</p> <ul style="list-style-type: none"> • At least one acute inpatient encounter with any diagnosis of schizophrenia or schizoaffective disorder. Either of the following code combinations meets criteria: <ul style="list-style-type: none"> - <u>BH Stand Alone Acute Inpatient Value Set</u> with <u>Schizophrenia Value Set</u> - <u>Visit Setting Unspecified Value Set</u> with <u>Acute Inpatient POS Value Set</u> with <u>Schizophrenia Value Set</u> • 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 meets criteria: <ul style="list-style-type: none"> - An outpatient visit with any diagnosis of schizophrenia or schizoaffective disorder (<u>Visit Setting Unspecified Value Set</u> with <u>Outpatient POS Value Set</u> with <u>Schizophrenia Value Set</u>) - An outpatient visit with any diagnosis of schizophrenia or schizoaffective disorder (<u>BH Outpatient Value Set</u> with <u>Schizophrenia Value Set</u>) - An intensive outpatient encounter or partial hospitalization with any diagnosis of schizophrenia or schizoaffective disorder (<u>Visit Setting Unspecified Value Set</u> with <u>Partial Hospitalization POS Value Set</u> with <u>Schizophrenia Value Set</u>) - An intensive outpatient encounter or partial hospitalization with any diagnosis of schizophrenia or schizoaffective disorder (<u>Partial Hospitalization or Intensive Outpatient Value Set</u> with <u>Schizophrenia Value Set</u>) - A community mental health center visit with any diagnosis of schizophrenia or schizoaffective disorder (<u>Visit Setting Unspecified Value Set</u> with <u>Community Mental Health Center POS Value Set</u> with <u>Schizophrenia Value Set</u>)

<p>Event/ diagnosis (continued)</p>	<ul style="list-style-type: none"> - Electroconvulsive therapy (<u>Electroconvulsive Therapy Value Set</u>) with any diagnosis of schizophrenia or schizoaffective disorder (<u>Schizophrenia Value Set</u>) - An observation visit (<u>Observation Value Set</u>) with any diagnosis of schizophrenia or schizoaffective disorder (<u>Schizophrenia Value Set</u>) - An ED visit (<u>ED Value Set</u>) with any diagnosis of schizophrenia or schizoaffective disorder (<u>Schizophrenia Value Set</u>) - An ED visit with any diagnosis of schizophrenia or schizoaffective disorder (<u>Visit Setting Unspecified Value Set</u> with <u>ED POS Value Set</u> with <u>Schizophrenia Value Set</u>) - A nonacute inpatient encounter (<u>BH Stand Alone Nonacute Inpatient Value Set</u>) with any diagnosis of schizophrenia or schizoaffective disorder (<u>Schizophrenia Value Set</u>) - A nonacute inpatient encounter with any diagnosis of schizophrenia or schizoaffective disorder (<u>Visit Setting Unspecified Value Set</u> with <u>Nonacute Inpatient POS Value Set</u> with <u>Schizophrenia Value Set</u>) - A telehealth visit with any diagnosis of schizophrenia or schizoaffective disorder (<u>Visit Setting Unspecified Value Set</u> with <u>Telehealth POS Value Set</u> with <u>Schizophrenia Value Set</u>) - A telephone visit (<u>Telephone Visits Value Set</u>) with any diagnosis of schizophrenia or schizoaffective disorder (<u>Schizophrenia Value Set</u>) - An e-visit or virtual check-in (<u>Online Assessments Value Set</u>) with any diagnosis of schizophrenia or schizoaffective disorder (<u>Schizophrenia Value Set</u>) <p>Step 2: Required Exclusions</p> <p>Exclude beneficiaries who met at least one of the following during the measurement year:</p> <ul style="list-style-type: none"> • A diagnosis of dementia (<u>Dementia Value Set</u>) • 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 state must use both methods to identify dispensing events, but an event need only be identified by one method to be counted. <ul style="list-style-type: none"> - Claims/encounter data. An antipsychotic medication (<u>Long-Acting Injections 14 Days Supply Value Set</u>; <u>Long-Acting Injections 28 Days Supply Value Set</u>; <u>Long Acting Injections 30 Days Supply Value Set</u>) - Pharmacy data. Dispensed an antipsychotic medication on an ambulatory basis. Use all the medication lists in the Oral Antipsychotic Medications and Long-Acting Injections (see Medication List table below and link to the Medication List Directory in Guidance for Reporting above) to identify antipsychotic medication dispensing events
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Optional exclusions	<p>Exclude beneficiaries who meet any of the following criteria:</p> <p>Note: Supplemental and medical record data may not be used for the following exclusions.</p> <ul style="list-style-type: none"> • Beneficiaries ages 66 to 80 as of December 31 of the measurement year with frailty and advanced illness. Beneficiaries must meet both of the following frailty and advanced illness criteria to be excluded: <ol style="list-style-type: none"> 1. At least one claim/encounter for frailty (<u>Frailty Device Value Set</u>; <u>Frailty Diagnosis Value Set</u>; <u>Frailty Encounter Value Set</u>; <u>Frailty Symptom Value Set</u>) during the measurement year 2. Any of the following during the measurement year or the year prior to the measurement year (count services that occur over both years): <ul style="list-style-type: none"> ○ At least two outpatient visits (<u>Outpatient Value Set</u>), observation visits (<u>Observation Value Set</u>), ED visits (<u>ED Value Set</u>), telephone visits (<u>Telephone Visits Value Set</u>), e-visits or virtual check-ins (<u>Online Assessments Value Set</u>), nonacute inpatient encounters (<u>Nonacute Inpatient Value Set</u>), or nonacute inpatient discharges (instructions below; the diagnosis must be on the discharge claim) on different dates of service, with an advanced illness diagnosis (<u>Advanced Illness Value Set</u>). Visit type need not be the same for the two visits. To identify a nonacute inpatient discharge: <ol style="list-style-type: none"> 1. Identify all acute and nonacute inpatient stays (<u>Inpatient Stay Value Set</u>). 2. Confirm the stay was for nonacute care based on the presence of a nonacute code (<u>Nonacute Inpatient Stay Value Set</u>) on the claim. 3. Identify the discharge date for the stay. ○ At least one acute inpatient encounter (<u>Acute Inpatient Value Set</u>) with an advanced illness diagnosis (<u>Advanced Illness Value Set</u>) ○ At least one acute inpatient discharge with an advanced illness diagnosis (<u>Advanced Illness Value Set</u>) on the discharge claim. To identify an acute inpatient discharge: <ol style="list-style-type: none"> 1. Identify all acute and nonacute inpatient stays (<u>Inpatient Stay Value Set</u>). 2. Exclude nonacute inpatient stays (<u>Nonacute Inpatient Stay Value Set</u>). 3. Identify the discharge date for the stay. ○ A dispensed dementia medication (Dementia Medications List, see link to the Medication List Directory in Guidance for Reporting above) • Beneficiaries age 81 and older as of December 31 of the measurement year with frailty (<u>Frailty Device Value Set</u>; <u>Frailty Diagnosis Value Set</u>; <u>Frailty Encounter Value Set</u>; <u>Frailty Symptom Value Set</u>) during the measurement year.
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Oral Antipsychotic Medications

Description	Prescription	Medication Lists
Miscellaneous antipsychotic agents (oral)	Aripiprazole	Aripiprazole Oral Medications List
	Asenapine	Asenapine Oral Medications List
	Brexpiprazole	Brexpiprazole Oral Medications List
	Cariprazine	Cariprazine Oral Medications List
	Clozapine	Clozapine Oral Medications List
	Haloperidol	Haloperidol Oral Medications List
	Iloperidone	Iloperidone Oral Medications List
	Loxapine	Loxapine Oral Medications List
	Lurasadone	Lurasadone Oral Medications List
	Molindone	Molindone Oral Medications List
	Olanzapine	Olanzapine Oral Medications List
	Paliperidone	Paliperidone Oral Medications List
	Quetiapine	Quetiapine Oral Medications List
	Risperidone	Risperidone Oral Medications List
Ziprasidone	Ziprasidone Oral Medications List	
Phenothiazine antipsychotics (oral)	Chlorpromazine	Chlorpromazine Oral Medications List
	Fluphenazine	Fluphenazine Oral Medications List
	Perphenazine	Perphenazine Oral Medications List
	Prochlorperazine	Prochlorperazine Oral Medications List
	Thioridazine	Thioridazine Oral Medications List
	Trifluoperazine	Trifluoperazine Oral Medications List
Psychotherapeutic combinations (oral)	Amitriptyline-perphenazine	Amitriptyline Perphenazine Oral Medications List
Thioxanthenes (oral)	Thiothixene	Thiothixene Oral Medications List

Long-Acting Injections

Description	Prescription	Medication Lists
Long-acting injections 14 days supply	Risperidone (excluding Perseris®)	Long Acting Injections 14 Days Supply Medications List
Long-acting injections 28 days supply	Aripiprazole	Long Acting Injections 28 Days Supply Medications List
	Fluphenazine decanoate	
	Haloperidol decanoate	

Description	Prescription	Medication Lists
	Olanzapine	
	Paliperidone palmitate	
Long-acting injections 30 days supply	Risperidone (Perseris®)	Long Acting Injections 30 Days Supply Medications List

D. ADMINISTRATIVE SPECIFICATION

Denominator

The eligible population as defined above.

Numerator

The number of beneficiaries who achieved a PDC of at least 80 percent for their antipsychotic medications during the measurement year.

Follow the steps below to identify numerator compliance. Use the Long Acting Injections 14 Days Supply Value Set; Long Acting Injections 28 Days Supply Value Set; Long Acting Injections 30 Days Supply Value Set and all the medication lists in the Oral Antipsychotic Medications and Long-Acting Injections (see Medication List table above and link to the Medication List Directory in Guidance for Reporting above) to identify antipsychotic medication dispensing events.

Step 1

Identify the IPSD. The IPSD is the earliest dispensing event 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 medication 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 beneficiary’s PDC using the following equation. Multiply the equation by 100 and round (using the .5 rule) to the nearest whole number. For example, if a beneficiary has 291 total days covered by a medication during a 365-day treatment period, this calculates to 0.7972. Multiply this number by 100, convert it to 79.72% and round it to 80%, the nearest whole number.

$$\frac{\text{Total days covered by antipsychotic medication in the treatment period (Step 3)}}{\text{Total days in treatment period (Step 2)}}$$

Step 5

Sum the number of beneficiaries whose PDC is ≥ 80 percent for their treatment period.