



## Complete Summary

---

### TITLE

Substance abuse: percentage of enrollees with substance abuse diagnosis receiving day/outpatient substance abuse treatment (MEDDIC-MS SSI).

### SOURCE(S)

Department of Health and Family Services, Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS SSI. Medicaid encounter data driven improvement core measure set for SSI managed care. Madison (WI): State of Wisconsin; 2002 Dec 1. 30 p.

## Brief Abstract

### DESCRIPTION

This measure assesses the percentage of enrollees with substance abuse diagnosis receiving day/outpatient substance abuse treatment.

### RATIONALE

Analysis of Office of Health Care Information (OHCI) (now known as Bureau of Health Information [BHI]) data indicated that access to mental health and substance abuse evaluations and treatment services are of high importance to overall health status for the individuals eligible for Supplemental Security Income (SSI). The measure is necessary to assess access to and effectiveness of behavioral health and substance abuse services in the SSI managed care program.

### PRIMARY CLINICAL COMPONENT

Substance abuse; day/outpatient substance abuse treatment

### DENOMINATOR DESCRIPTION

Supplemental Security Income (SSI) health maintenance organization (HMO) enrollees in each age cohort (age 15 to 20 years and age 21 years and older) continuously enrolled with the same HMO for at least ten months (304 days) immediately prior to the measure end date with no more than one gap in enrollment of not more than 45 days. The enrollee must have a total of not less than 259 enrolled days in the look-back period.

### NUMERATOR DESCRIPTION

The number of unduplicated enrollees in the denominator age cohorts with substance abuse diagnosis receiving day/outpatient substance abuse treatment. Include services provided by substance abuse specialists, general and/or family practitioners, or general internal medicine physicians (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary).

## Evidence Supporting the Measure

### PRIMARY MEASURE DOMAIN

Process

### SECONDARY MEASURE DOMAIN

Access

### EVIDENCE SUPPORTING THE MEASURE

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences

## Evidence Supporting Need for the Measure

### NEED FOR THE MEASURE

Unspecified

## State of Use of the Measure

### STATE OF USE

Current routine use

### CURRENT USE

Decision-making by consumers about health plan/provider choice  
External oversight/Medicaid  
External oversight/State government program  
Internal quality improvement

## Application of Measure in its Current Use

### CARE SETTING

Managed Care Plans

### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses  
Physicians  
Psychologists/Non-physician Behavioral Health Clinicians  
Social Workers

#### LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

#### TARGET POPULATION AGE

Age greater than or equal to 15 years\*

\*In Supplemental Security Income (SSI) expansion, the lower end of the age range may be 18 years, so the measure may be adjusted accordingly.

#### TARGET POPULATION GENDER

Either male or female

#### STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

### Characteristics of the Primary Clinical Component

#### INCIDENCE/PREVALENCE

Unspecified

#### ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

#### BURDEN OF ILLNESS

Unspecified

#### UTILIZATION

Unspecified

#### COSTS

Unspecified

### Institute of Medicine National Healthcare Quality Report Categories

#### IOM CARE NEED

Living with Illness

## IOM DOMAIN

Effectiveness  
Patient-centeredness

## Data Collection for the Measure

### CASE FINDING

Both users and nonusers of care

### DESCRIPTION OF CASE FINDING

Supplemental Security Income (SSI) health maintenance organization (HMO) enrollees in each age cohort (age 15 to 20 years and age 21 years and older) continuously enrolled with the same HMO for at least ten months (304 days) immediately prior to the measure end date\* with no more than one gap in enrollment of not more than 45 days. The enrollee must have a total of not less than 259 enrolled days in the look-back period.\*\*

\*Measure end date: The last date by which measured services can be rendered to be included in the measure numerator.

\*\*Measure look-back period: 12 months (365 days) from the measure end date. Services provided prior to enrollment in the HMO are not counted in the numerator.

Measure data extraction date: The date(s) determined by the department for extraction of data from the data warehouse for the purposes of reporting the measure. This will be at least 182 days after the measure end date.

### DENOMINATOR SAMPLING FRAME

Enrollees or beneficiaries

### DENOMINATOR (INDEX) EVENT

Patient Characteristic

### DENOMINATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

Supplemental Security Income (SSI) health maintenance organization (HMO) enrollees in each age cohort (age 15 to 20 years and age 21 years and older) continuously enrolled with the same HMO for at least ten months (304 days) immediately prior to the measure end date with no more than one gap in enrollment of not more than 45 days. The enrollee must have a total of not less than 259 enrolled days in the look-back period.

Exclusions  
Unspecified

#### NUMERATOR INCLUSIONS/EXCLUSIONS

##### Inclusions

The number of unduplicated enrollees in the denominator age cohorts with substance abuse diagnosis receiving day/outpatient substance abuse treatment.\* Include services provided by substance abuse specialists, general and/or family practitioners, or general internal medicine physicians.

\*Refer to the original measure documentation for Current Procedure Terminology (CPT) codes, Healthcare Common Procedure Coding System (HCPCS) codes, Uniform Billing (UB-92) revenue codes, and International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) codes.

##### Exclusions

Certain specified place of service codes are excluded. Refer to the original measure documentation for details.

#### DENOMINATOR TIME WINDOW

Time window precedes index event

#### NUMERATOR TIME WINDOW

Fixed time period

#### DATA SOURCE

Administrative data

#### LEVEL OF DETERMINATION OF QUALITY

Individual Case

#### PRE-EXISTING INSTRUMENT USED

Unspecified

### Computation of the Measure

#### SCORING

Rate

#### INTERPRETATION OF SCORE

Better quality is associated with a higher score

#### ALLOWANCE FOR PATIENT FACTORS

Analysis by subgroup (stratification on patient factors)

#### DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

Two age cohorts are reported:

- Age 15-20 years\*
- Age greater than or equal to 21 years

\*In Supplemental Security Income (SSI) expansion, the lower end of the age range may be 18 years, so the measure may be adjusted accordingly.

#### STANDARD OF COMPARISON

External comparison of time trends  
Internal time comparison

### Evaluation of Measure Properties

#### EXTENT OF MEASURE TESTING

This measure was tested and validated by an independent third party and subject to internal review in 2002 for Medicaid Encounter Data Driven Improvement Core Measure Set (MEDDIC-MS). Modifications made to base measure for Supplemental Security Income (SSI) do not affect measure accuracy or validity.

#### EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Innovative Resources Group (IRG). Measure testing/validation reports for MEDDIC-MS. Brookfield (WI): Innovative Resources Group (IRG); 2002.

### Identifying Information

#### ORIGINAL TITLE

Mental health and/or substance abuse: outpatient/day treatment for substance abuse specialty/non-specialty care.

#### MEASURE COLLECTION

[MEDDIC-MS \(Medicaid Encounter Data Driven Improvement Core Measure Set\). Rapid-cycle performance improvement measures system for Medicaid managed care.](#)

#### MEASURE SET NAME

[MEDDIC-MS SSI \(Medicaid Encounter Data Driven Improvement Core Measure Set for Supplemental Security Income\). Measures applicable to SSI managed care population.](#)

MEASURE SUBSET NAME

[Monitoring Measures -- SSI](#)

DEVELOPER

State of Wisconsin, Department of Health and Family Services

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2002 Dec

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Department of Health and Family Services, Division of Health Care Financing, Bureau of Managed Health Care Programs. MEDDIC-MS SSI. Medicaid encounter data driven improvement core measure set for SSI managed care. Madison (WI): State of Wisconsin; 2002 Dec 1. 30 p.

MEASURE AVAILABILITY

The individual measure, "Mental Health and/or Substance Abuse: Outpatient/Day Treatment for Substance Abuse Specialty/Non-Specialty Care," is published in "Medicaid Encounter Data Driven Improvement Core Measure Set for SSI Managed Care (MEDDIC-MS SSI)."

State of Wisconsin  
Department of Health and Family Services  
DHCF/BMHCP  
Gary R. Ilminen, RN, Nurse Consultant  
1 W. Wilson Street, PO Box 309  
Madison, WI 53701-0309

(608) 261-7839 Office  
(608) 261-7792 Fax  
[ilmingr@dhfs.state.wi.us](mailto:ilmingr@dhfs.state.wi.us)

NQMC STATUS

This NQMC summary was completed by ECRI on June 14, 2004. The information was verified by the measure developer on June 17, 2004.

COPYRIGHT STATEMENT

No copyright restrictions apply.

© 2004 National Quality Measures Clearinghouse

Date Modified: 11/1/2004

**FIRSTGOV**

