

HEDIS[®] Tips

Use of Opioids at High Dosage (HDO)

MEASURE DESCRIPTION

The proportion of patients 18 years or older who received prescription opioids at a high dosage (average morphine milligrams equivalent dose [MME] ≥ 90) for ≥ 15 days during the measurement year.

Note: A lower rate indicates better performance

MEDICATIONS

Description	Name		
Opioid Medications	Butorphanol	Hydromorphone	Oxycodone
	Codeine	Meperidine	Oxymorphone
	Dihydrocodeine	Methadone	Pentazocine
	Fentanyl	Morphine	Tapentadol
	Hydrocodone	Opium	Tramadol

The following opioid medications are excluded from the measure:

- Injectables
- Opioid cough and cold products
- Ionsys (fentanyl transdermal patch)
- Methadone for the treatment of opioid use disorder

HOW TO IMPROVE HEDIS SCORES

- Review the Prescription Monitoring Program Registry for your state.
- Prescribe the lowest effective dose for the shortest amount of time. The CDC recommends avoiding increasing the dosage above 120 morphine milligrams equivalents.
- Consider tapering to reduce the dose or making a plan to safely discontinue opioid therapy when dosage is exceeding 120 morphine milligram equivalents daily without functional benefit.
- Be prepared to refer the patient to an appropriate substance use provider if a patient shows signs of an opioid use disorder.
- Maximize the utilization of non-narcotic and non-pharmacologic measures to control pain as part of a comprehensive pain management plan.
- Provide patient educational materials and resources that include information on the treatment processes and options, including mutual support groups and other community-based programs.

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