HEDIS® Tip Sheet

Pharmacotherapy for Opioid Use Disorder (POD)

Measure Description

The percentage of opioid use disorder (OUD) pharmacotherapy events that lasted at least 180 days among members 16 years of age and older with a diagnosis of OUD and a new OUD pharmacotherapy event.

Treatment Period: A period of 180 calendar days, beginning on the treatment period start date through 179 days after the treatment period start date. *Note*: Member can have multiple treatment period start dates and treatment periods during the measurement year. Treatment periods can overlap.

Product Lines: Commercial, Medicaid, Medicare

Intake Period: A 12-month period that begins on July 1 of the year prior to the measurement year and ends on June 30 of the measurement year.

2024					202						25					2026							
Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
	2025 MY Intake Period						2026 MY Intake Period																

Codes Included in the Current HEDIS® Measure

Description	Code					
Opioid Abuse and Dependence	ICD-10: F11.10, F11.120-F11.122, F11.129, F11.13, F11.14, F11.150, F11.151,					
	F11.159, F11.181, F11.182, F11.188, F11.19, F11.20, F11.220-F11.229, F11.23,					
	F11.24, F11.250, F11.251, F11.259, F11.281, F11.282, F11.288, F11.29					
Buprenorphine Implant	HCPCS: G2070, G2072, J0570					
Buprenorphine Injection	HCPCS : G2069, Q9991, Q9992					
Buprenorphine Naloxone	HCPCS: J0572, J0573, J0574, J0575					
Buprenorphine Oral	HCPCS : H0033, J0571					
Buprenorphine Oral Weekly	HCPCS : G2068, G2079					
Methadone Oral	HCPCS : H0020, S0109					
Methadone Oral Weekly	HCPCS : G2067, G2078					
Naltrexone Injection	HCPCS: G2073, J2315					

Medications

Description	Prescription
Opioid Use Disorder Treatment	Naltrexone (oral or injectable), Buprenorphine (sublingual tablet, injection,
Medications	implant), Buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film),
	Methadone (oral)

Ways Providers can Improve HEDIS® Performance

- Provide tools to the patients to help manage stressors and identify triggers for relapses.
- Refer to Molina Healthcare Case Management for targeted SUD case management and support.
- Only prescribe opioids when medically necessary, in the lowest effective dose, for the shortest duration necessary.

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- Identify alternatives to opioids for pain management.
- Consider Medication Assisted Treatment (MAT) for opioid abuse or dependence.

Ways Health Plans can Improve HEDIS® Performance

- Provide tools to members to help manage stressors and identify triggers for relapse.
- Refer to Molina Healthcare Case Management for targeted SUD case management and support.
- Provide culturally and linguistically appropriate information about medications to members, including but not limited to:
 - o Duration of the treatment.
 - Medication side effects and how to manage them.
 - o Proper use of naloxone in the event of emergency treatment of an opioid overdose.
 - o Potential interactions with other controlled substances.
 - Importance of continuing medication and the dangers of discontinuing suddenly.
 - Dangers of using benzodiazepines and opioids concurrently.
- Encourage coordination of care and communication between the physical and behavioral health providers.
- Offer and refer members to peer support services.

Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.



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