

# Adherence to Antipsychotic Medications for Individuals With Schizophrenia (SAA)

## Measure Description

The percentage of members 18 years of age and older during the measurement year with schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80% of their treatment period.

**Product Lines:** Commercial, Medicaid, Medicare

## Codes Included in the Current HEDIS® Measure

| Description                                       | Code   |
|---|--|
| Schizophrenia                                     | <b>ICD-10:</b> F20.0-F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9   |
| BH Inpatient Stay with Schizophrenia diagnosis    | <b>CPT:</b> 99304-99310, 99315, 99316<br><b>HCPCS:</b> H0017-H0019, T2048<br><b>UBREV:</b> 0100, 0101, 0110-0114, 0118-0124, 0128-0134, 0138-0144, 0148-0154, 0158-0160, 0164, 0167, 0169, 0190-0194, 0199, 0200-0204, 0206-0214, 0219, 0524, 0525, 0550-0552, 0559, 0660-0663, 06698, 0720-0724, 0729, 0987, 1000-1005  |
| Acute Inpatient Stay with Schizophrenia diagnosis | <b>CPT:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99252-99255 <b>with POS:</b> 21, 51  |
| Outpatient Visit with Schizophrenia diagnosis     | <b>CPT Visit Setting Unspecified:</b> 90791, 90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875, 90876, 99221-99223, 99231-99233, 99238, 99239, 99252-99255 <b>with POS:</b> 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71, 72   |
| BH Outpatient Visit with Schizophrenia diagnosis  | <b>CPT:</b> 98960-98962, 99078, 99202-99205, 99211-99215, 99242-99245, 99341, 99342, 99344, 99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99483, 99492-99494, 99510<br><b>HCPCS:</b> G0155, G0176, G0177, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036, H0037, H0039, H0040, H2000, H2010, H2011, H2013-H2020, T1015<br><b>UBREV:</b> 0510, 0513, 0515-0517, 0519-0523, 0526-0529, 0900, 0902-0904, 0911, 0914-0917, 0919, 0982, 0983 |
| Partial Hospitalization or Intensive Outpatient   | <b>CPT Visit Setting Unspecified:</b> 90791-90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876, 99221-99223, 99231-99233, 99238-99239, 99252-99255 <b>with POS:</b> 52<br><b>HCPCS:</b> Partial Hospitalization: G0410-G0411, H0035, H2001, H2012, S0201, S9480, S9484-S9485<br><b>UBREV:</b> 0905, 0907, 0912, 0913   |
| Community Mental Health Center Visit              | <b>CPT Visit Setting Unspecified:</b> 90791-90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876, 99221-99223, 99231-99233, 99238-39, 99252-99255 <b>with POS:</b> 53  |
| Electroconvulsive Therapy                         | <b>CPT:</b> 90870<br><b>ICD-10:</b> GZB0ZZZ-GZB4ZZZ  |
| ED Visit  | <b>CPT:</b> 99281-99285<br><b>UBREV:</b> 0450-0452, 0456, 0459, 0981   |

|                                      |  |
|--------------------------------------|--|
| Telehealth Visit                     | <b>CPT</b> Visit Setting Unspecified: 90791-90792, 90832-90834, 90836-90840, 90845, 90847, 90849, 90853, 90875-90876, 99221-99223, 99231-99233, 99238-99239, 99252-99255 <b>with</b> Telehealth <b>POS:</b> 02, 10 |
| Telephone Visits                     | <b>CPT:</b> 98966-98968, 99441-99443   |
| Online Assessments                   | <b>CPT:</b> 98970-98972, 98980, 98981, 99421-99423, 99457, 99458<br><b>HCPCS:</b> G0071, G2010, G2012, G2250-G2252   |
| Long-acting Injections 14-day Supply | <b>HCPCS:</b> J2794  |
| Long-acting Injections 28-day Supply | <b>HCPCS:</b> J0401, J1631, J1943, J1944, J2358, J2426, J2680  |
| Long-acting Injections 30-day Supply | <b>HCPCS:</b> J2798  |

## Medications

### *Dementia Medications (For Exclusion)*

| Description                                 | Prescription                         |
|---|--------------------------------------|
| Cholinesterase Inhibitors                   | Donepezil, Galantamine, Rivastigmine |
| Miscellaneous Central Nervous System Agents | Memantine                            |
| Dementia Combinations                       | Donepezil-memantine                  |

### *Oral Antipsychotic Medications*

| Description                               | Prescription  |
|---|---|
| Miscellaneous Antipsychotic Agents (Oral) | Aripiprazole, Asenapine, Brexpiprazole, Cariprazine, Clozapine, Haloperidol, Iloperidone, Loxapine, Lumateperone, Lurasidone, Molindone, Olanzapine, Paliperidone, Quetiapine, Risperidone, Ziprasidone |
| Phenothiazine Antipsychotics (Oral)       | Chlorpromazine, Fluphenazine, Perphenazine, Prochlorperazine, Thioridazine, Trifluoperazine   |
| Psychotherapeutic Combinations (Oral)*    | Amitriptyline-perphenazine  |
| Thioxanthenes (Oral)                      | Thiothixene   |

**\* Please submit a request for coverage when prescribing psychotherapeutic combination medications.**

### *Long-Acting Injections*

| Description                          | Prescription   |
|--------------------------------------|--|
| Long-acting Injections 14-day Supply | Risperidone (excluding Perseris®)  |
| Long-acting Injections 28-day Supply | Aripiprazole, Aripiprazole lauroxil, Fluphenazine decanoate, Haloperidol decanoate, Olanzapine, Paliperidone palmitate |
| Long-acting Injections 30-day Supply | Risperidone (Perseris™)  |

## Ways Providers can Improve HEDIS® Performance

- Engage in shared decision making with the patient to ensure they are at the center of care. Before prescribing an antipsychotic medication, assess the patient's treatment and medication history
- Schedule appropriate follow-up with the patients to assess if medication is taken as prescribed.
- Telephone, telehealth and online appointments count towards patients being included in the measure. *Note:* Two appointments are needed on different dates of service for patients to be part of the measure.
- Consider Long-acting Injectable medications for eligible patients with a history medication non-adherence.
- Review if your patient is eligible for Medication Therapy Management. Contact the Care Coordination/Case Management Department at Molina Healthcare for additional information.
- Routinely arrange the next appointment when the patient is in the office. If the patient misses a scheduled appointment, office staff should contact them to
  - Assess why the appointment was missed or



- Reschedule the appointment and assess the possibility of a relapse.
- Ensure your member understands the local community support resources and what to do in an event of a crisis.
- Encourage collaboration of caregiver/support system. Discuss with your member/caregiver importance of monitoring their emotional well-being and following up with their BH provider.

## Ways Health Plans can Improve HEDIS® Performance

- Use culturally and linguistically appropriate language to educate members about the importance of adhering to their medication therapy and follow-up visits with their BH provider(s).
- Routinely arrange the next appointment when the member is in the office. If the member misses a scheduled appointment, office staff should contact the member to
  - Assess why the appointment was missed or
  - Reschedule the appointment and assess the possibility of a relapse.
- Educate members about the local community support resources and what to do in an event of a crisis.
- Outreach to members who were recently prescribed antipsychotics or who have refills past due to confirm they are taking their medications and/or address any barriers to taking their medications.
- Care should be coordinated between providers. Encourage communication between the behavioral health providers and PCP.

## 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.
- A diagnosis of dementia. Do not include laboratory claims (POS: 81).
- **DID NOT** have at least two antipsychotic medication dispensing events. There are two ways to identify dispensing events:
  - Claim/encounter data: An antipsychotic medication (HCPCS J2794, J2798 and Long-acting Injections 28-day Supply).
  - Pharmacy data: Dispensed an antipsychotic medication (Oral Antipsychotic Medications and Long-acting Injections)
- Medicare members 66 years of age and older as of December 31 of the measurement year who meet either of the following:
  - Enrolled in an Institutional SNP (I-SNP) any time during the measurement year.
  - Living long-term in an institution any time during the measurement year as identified by the LTI flag in the Monthly Membership Detail Data File.
- Members 66–80 years of age as of December 31 of the measurement year (all product lines) with frailty **and** advanced illness. Members must meet **both** frailty and advanced illness criteria to be excluded:
  - **Frailty.** At least two indications of frailty with different dates of service during the measurement year. Do not include laboratory claims (POS: 81).
  - **Advanced Illness.** Either of the following during the measurement year or the year prior to the measurement year:
    - Advanced illness on at least two different dates of service. Do not include laboratory claims (POS: 81).
    - Dispensed dementia medication.
- Members 81 years of age and older as of December 31 of the measurement year (all product lines) with at least two indications of frailty, with different dates of service during the measurement year. Do not include laboratory claims (POS: 81).

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