

## 2023 Medicaid Quality Incentive Measure

<b>Measure 9</b>	<b>Ryan Robertson</b>
<b>Contact Person</b>	<b>Ryan Robertson</b>
<b>Measure Name:</b>	Distributing opioid overdose reversal medication in emergency departments and behavioral health settings
<b>Measure eligibility:</b>	All adult acute and pediatric hospitals with emergency rooms or inpatient psychiatric units, and psychiatric hospitals
<b>Why?</b>	Naloxone distribution is an effective strategy for reducing deaths caused by opioid poisoning and is required by law to be distributed by emergency departments and BHAs to individuals at risk of an opioid overdose. Initial implementation of this law was challenging for many WSHA members and continuing to collect data will inform any needed technical assistance. Based on feedback received from members, additional context has been provided this year and hospitals with both an emergency department and an inpatient psychiatric unit will be asked to report those totals separately.
<b>Clinical Rationale:</b>	<p>With over 1,700 reported overdose deaths in 2020, the Centers for Disease Control and Prevention estimates a 37 percent increase in Washington state from the year before. The CDC data also shows a national trend of increasing overdose deaths with an estimated yearly increase of nearly 30 percent.</p> <p>On January 1, 2022, <a href="#">2SSB 5195</a> went into effect. This law requires hospital emergency departments (EDs) and facilities licensed as Behavioral Health Agencies (BHAs), which includes inpatient psychiatric units and psychiatric hospitals, to dispense or distribute opioid overdose reversal medication to patients at risk of an opioid overdose for individual use after discharge. The purpose of the new law is to have individuals at risk of an opioid overdose leave the facility with opioid overdose reversal medication to prevent future overdoses. Prescriptions are not sufficient as they often remain unfilled. The law also requires hospitals to provide these patients with overdose prevention education, information about harm reduction strategies, and resources on medications for opioid use disorder.</p> <p><b>Selected References:</b></p> <ol style="list-style-type: none"> <li>1. <a href="#">Distributing opioid overdose reversal medications (2SSB 5195)   Washington State Health Care Authority</a></li> <li>2. <a href="https://lawfilesexternal.wa.gov/biennium/2021-22/Htm/Bills/Session%20Laws/Senate/5195-S2.SL.htm?q=20210601152428">https://lawfilesexternal.wa.gov/biennium/2021-22/Htm/Bills/Session Laws/Senate/5195-S2.SL.htm?q=20210601152428</a></li> </ol>
<b>Definition:</b>	Patients who were seen in a hospital emergency department or inpatient psychiatric hospital were screened and determined to be eligible for distribution of an opioid overdose reversal medication based on 2SSB 5195.
<b>Included Populations:</b>	<p>All patients who present to an emergency department or a licensed behavioral health agency setting with symptoms of the following must be provided with naloxone in hand:</p> <ul style="list-style-type: none"> <li>• Opioid overdose,</li> <li>• Opioid use disorder,</li> <li>• Other adverse event related to opioid use</li> </ul> <p>Each hospital may develop their own strategy for identifying individuals who meet these criteria. Some examples include utilizing a universal screening practice and implementing a flag within the electronic record system, using</p>

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<b>Exclusions:</b>	<p>specific F codes to identify patients effectively (e.g., F11.xx), or using valid procedure codes the CMS ICD-10-PCS master code table and SUB 3 populations for opiates identified by your organization as an individual who are at risk for opiate overdose. (PCS Long and Abbreviated Titles):  <a href="https://www.cms.gov/Medicare/Coding/ICD10/index.html">https://www.cms.gov/Medicare/Coding/ICD10/index.html</a></p> <p>The <b>exceptions</b> to naloxone distribution are as follows:</p> <ul style="list-style-type: none"> <li>• Patients who expired</li> <li>• Patient declines medication</li> <li>• Provider judgement that it is not appropriate</li> <li>• Patient already has naloxone</li> <li>• Patient is transferred to another unit prior to discharge.</li> </ul>
<b>Fields to be reported:</b>	<p>Based on member feedback, reporting will be separated this year for emergency departments and behavioral health settings.</p> <p><b>Emergency departments</b>          Numerator: number of included population of patients who received opioid overdose reversal medication          Denominator: total number of included population of patients who qualify for distribution of opioid overdose reversal medication</p> <p><b>Behavioral health settings (inpatient behavioral health units and freestanding psychiatric hospitals)</b>          Numerator: number of included population of patients who received opioid overdose reversal medication          Denominator: total number of included population of patients who qualify for distribution of opioid overdose reversal medication</p> <p><b>Sampling of Data</b>          Sampling is not required, but hospitals who meet certain thresholds of monthly inpatient population totals <b>may</b> choose to utilize sampling of data. Hospitals who have a monthly inpatient population lower than the minimum number of cases may not use sampling.</p> <p>Sampling guidelines:          If the average monthly inpatient population is:</p> <ul style="list-style-type: none"> <li>• &lt; 51 – no sampling; 100% of population must be included</li> <li>• 51-254 – use 51 as a minimum sample size</li> <li>• 255-509 – use 20% of patient population size</li> <li>• ≥ 510 – use 102 as a minimum sample size</li> </ul>
<b>Data Collection period:</b>	July 1, 2023 - December 31, 2023
<b>Reporting deadline:</b>	30 days after the close of the performance period or by January 31, 2024.
<b>Audits and validation: Do not change</b>	Data are subject to audit by the state. WSHA will not audit but will complete a few basic validity checks.
<b>Submission Frequency:</b>	Monthly (every month for the six months of the performance period from July 1, 2023, to December 31, 2023).
<b>Data collection system:</b>	Washington State Hospital Association Quality Benchmarking System, QBS.

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<b>Data Scoring:</b>	<b>Thresholds</b>	All 6 months of metrics given
	<b>Point Award 2023</b>	10 points