

# Substance Use Disorder Treatment Rate

## Measure Definition

July 31, 2024

Medicaid Version 5.0

### Description

The percentage of members with a substance use disorder treatment need who received substance use disorder treatment in the measurement year.

These specifications are derived from a measure developed by the Washington State Department of Social and Health Services, in collaboration with Medicaid delivery system stakeholders, as part of the 5732/1519 performance measure development process.

### Eligible Population

Ages	Separate reporting for age groups 12 – 17, 18 – 64 and 65+
Continuous enrollment	The measurement year
Allowable gap	Member may not have more than a 1-month gap in coverage (i.e., a member whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).
Anchor date	December 31 of the measurement year
Identification window	January 1 of the year prior to the measurement year through December 31 of the measurement year (24 months)
Benefit	Medicaid-only and dual eligibles excluding Part C enrollees Exclude persons with third-party liability (coverage)
Data sources	HCA MCO encounters and HCA-paid claims RSN/BHO encounter data and DBHR-paid behavioral health services Medicare Parts A and B claims and Medicare Part D encounters for Dual Eligibles
Event/diagnosis	Members meeting the substance use disorder treatment need criteria defined below
Claim status	Include only final paid claims or accepted encounters in measure calculation

## Substance Use Disorder Treatment Need

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Substance use disorder treatment need is identified by the occurrence of any of the following in the 24-month identification window:

1. Diagnosis of a drug or alcohol use disorder in any health service event: SUD-Dx-Value-Set
2. Receipt of brief intervention (SBIRT) services: SBIRT-Proc-Value-Set (3169)
3. Receipt of medically managed detox services (Detox-Value-Set)
4. Receipt of a substance use disorder treatment service meeting numerator criteria in the 24-month identification window, as defined below

## Denominator

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Include in the denominator all individuals in the eligible population with a substance use disorder treatment need indicated in the 24-month identification window.

## Numerator

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Include in the numerator all individuals receiving at least one substance use disorder treatment service meeting at least one of the following criteria in the 12-month measurement year:

1. Meets any of the following conditions
  - a. Procedure code in SUD-OP-Tx-Proc-Value-Set (MCG 3156)
  - b. Procedure code in SUD-OST-Value-Set (MCG 3148)
  - c. Procedure code or DRG in SUD-IP-RES-Value-Set
2. Meets all of the following conditions:
  - a. Procedure code is NOT in SUD-ASMT-Value-Set (3149) AND
  - b. Billing provider is in SUD-Taxonomy-Value-Set (3170) AND
  - c. Primary diagnosis is in SUD-Dx-Value-Set
3. Meets all of the following conditions:
  - a. Procedure code is in proc-w-prim-SUD-Dx-value-set (3324) AND
  - b. Primary diagnosis is in SUD-Dx-Value-Set
4. Meets all of the following conditions:
  - a. Procedure code is in proc-w-any-SUD-Dx-value-set (4881) AND
  - b. Any diagnosis is in SUD-Dx-Value-Set
5. Received any medication to treat opiate use or alcohol use disorder with an NDC code in MOUD-MAUD-Value-Set
6. Procedure code in the MOUD-Procedure-Value-Set