



Performance Measurement in Addictive Disorders

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Goals & Objectives

- What is the Washington Circle Group?
- How does the WCG approach performance measurement for addictive disorders?
- What are the core measures?
- What is the WCG's approach to pilot testing?
- Where are we and what's next?



What is the Washington Circle Group?

- Convened in March 1998 by the Office of Managed Care within CSAT
- Wide-spread group of national experts in research, treatment, public policy & managed care
- Guided by a 15 person Policy Committee
- Technical support by Brandeis University



Goals of the Washington Circle Group

- Develop & pilot test a core set of performance measures for addictive disorders
- Actively promote the widespread adoption of this core set
- Best positioned as supporting external accountability at the delivery system level



Underlying Principles

- With authority over treatment decisions comes responsibility & accountability
- Addiction is a complex, chronic disease
- Base of accountability for delivery systems broader than treatment alone
- Difference between clinical accountability & financial responsibility



The Process of Care in Addictive Disorders

- Prevention/ Education
- Recognition
- Treatment
- Maintenance



Guiding Assumptions

- Don't let "the perfect" be the enemy of "the good"
- Lower administrative burden wherever possible by using available data & tools
- Focus initially on process measures
- Forge strong & mutually supportive links to the accreditation process



Core Performance Measures

- Prevention/Education
 - **Educating patients about addictive disorders**
 - % of adult patients with primary care visits who are advised or given information about addictive disorders
 - Data source – enrollee survey



Core Performance Measures

- Recognition

- **Identification Rates**

- Number of cases per 1,000 members who were diagnosed with addictive disorder or who received plan service for addictive disorder on an annual basis
 - Adult members with SA dx or claim/total adult members
- Data source – administrative data



Core Performance Measures

- Treatment
 - **Initiation of plan-provide AOD services**
 - % of individuals with an index diagnosis of addictive disorder who receive any additional AOD services within 14 days
 - Adults with index & additional AOD claim/ full year adult members
 - Data source – administrative data



Core Performance Measures

- Treatment
 - **Linkage of detoxification & AOD plan services**
 - % of patients with an index detoxification who receive plan-provided AOD services within 14 days following detoxification
 - Patients with detox & AOD services within 14 days/adult members with detox
 - Data source – administrative data



Core Performance Measures

- Treatment
 - **Treatment engagement**
 - % of clients diagnosed with addictive disorder who receive at least 2 additional plan-provided AOD services within 30 days of initiation of care
 - Adult members with at least 2 AOD services within 30 days of initiation/adult members who initiate care
 - Data source – administrative data



Core Performance Measures

- Prevention/Education
 - **Interventions for family members/significant others of AOD clients in treatment**
 - % of survey respondents who report using plan-provided AOD services and who also report that family members/significant others received preventive/educational services
 - Data source – patient survey



Core Performance Measures

- Maintenance
 - **Maintenance of treatment effects**
 - % of clients who report specific services provided or supported by plan to promote & sustain positive treatment outcomes post-discharge
 - Data source – patient survey



WCG Approach to Pilot Testing

- Developed operational set of test questions
- Worked on testing approach with WCG Policy Group
- Reviewed approach with NCQA Technical Advisory Group
- Prepared programming instructions
- Solicited participating organizations



Goals of WCG Pilot Testing

- Evaluate feasibility of calculating measures from claims, encounter, & eligibility data
- Develop basic programming approach that could be adapted across sites
- Provide information for future refinement of measures
- Compare results across managed care plans



Administrative Measures for Pilot Testing

- Identification
- Treatment initiation
- Treatment engagement
- Linkage of detoxification to treatment



Participants

- Three HMOs with internal provision of behavioral health services
- One MBHO
- Information on 4+ MCOs from a state database



Initial Results

- Identification rates within the range reported to NCQA (mean .24% and range
- Serious measurement issues with detoxification measure
- Details about the proportions of claims from primary care and from specialty providers
- Details about the numbers of services after the initial substance abuse claims



Initiation Rates

	A	C ₁	C ₂	C ₃	C ₄	C ₅	C ₆
Initiation Rate	46%	26%	33%	10%	37%	26%	46%
Inpatient	6%	1%	5%	0%	4%	0%	3%
Outpatient	38%	25%	26%	10%	33%	26%	42%
Detox	2%	0%	2%	0%	0%	0%	<1%



Additional Measures Tested Through ECHO Process

- Interventions for family members
 - ECHO Item – “In the last 12 months did anyone talk to you about whether to include your family or friends in your counseling or treatment?”
- Maintenance of treatment effect
 - ECHO Item – “In the last 12 months, were you told about self-help or support groups such as consumer-run groups or 12-step programs?”



Challenges

- Data issues
 - Under-reporting of AOD diagnoses
 - Small numbers
- Structural issues
 - Product mix
 - Impact of employer carve-out
 - Level of accountability (MCO vs MBHO)



Next Steps

- Complete pilot testing & produce final report by October 1st
- Review by WCG at Policy Group meeting at end of October
- Report to BMAP of NCQA
- Distribute core measure set widely