

Use of Opioids from Multiple Providers (UOP)

By working together, we can improve health outcomes for your patients, our members. The Healthcare Effectiveness Data and Information Set (HEDIS®) helps us measure many aspects of performance. This tip sheet provides key details of the HEDIS measure for use of opioids from multiple providers (UOP).

What Is the Measure?

The percentage of members age 18 years and older, receiving prescription opioids for ≥15 days during the measurement year, who received opioids from multiple providers. Three rates are reported, identified below with the lower rate indicating better performance for all three rates.

- **Multiple providers** – the percentage of members receiving prescriptions for opioids from four or more different prescribers during the measurement year
- **Multiple pharmacies** – the percentage of members receiving prescriptions for opioids from four or more different pharmacies during the measurement year
- **Multiple prescribers and multiple pharmacies** (four or more each) – the percentage of members receiving prescriptions for opioids from four or more different prescribers **and** four or more different pharmacies during the measurement year

Measure updates will not be reflected in gap closures when the measure requirements are updated in the fall.

Eligible Population

During the measurement year, a member must have more than one opioid medication dispensing event, and the sum of all the days' supplies must be 15 or greater.

Opioid Medications

- | | | | |
|-------------------|-----------------|---------------|---------------|
| • Benzhydrocodone | • Fentanyl | • Methadone | • Pentazocine |
| • Buprenorphine | • Hydrocodone | • Morphine | • Tapentadol |
| • Butorphanol | • Hydromorphone | • Opium | • Tramadol |
| • Codeine | • Levorphanol | • Oxycodone | |
| • Dihydrocodeine | • Meperidine | • Oxymorphone | |

Recommend Routine Treatment with a Mental Health Practitioner

- Initiation and engagement of stand-alone follow-up visit with a behavioral health (BH) provider, in-person, or virtual visit.
- Request help for coordinated care or a recommended provider. Use Lucet Behavioral Health Network and Case Management services as needed.

Continued next page

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Recommend Routine Treatment with a Mental Health Practitioner (continued)

- **Lucet Behavioral Health Member Services:** Members can call **1-866-287-9569** Monday through Friday, 8 a.m.–8 p.m. ET, for help locating a behavioral healthcare professional or coordination of care.
- **Lucet Behavioral Health Physician and Case Management Services:** Providers who need help locating a behavioral health professional or setting up coordination of care for a patient can call the Lucet Case Management team at **1-866-350-2280** Monday through Friday, 7:30 a.m.–5:30 p.m. ET.
- **Florida Blue Member services:** Call the number on the back of the member ID card.

Symptoms including fever, cough, shortness of breath and wheezing as well as tobacco use (smoking) are **not** exclusions for this measure.

After the patient’s follow-up visit with a BH provider, complete a primary care follow-up visit to include a BH assessment and identify applicable treatment plan for integrated medical and BH care.

Exclusions

Excluded from the opioid medications list are:

- Injectables
- Opioid cough and cold products
- Single-agent and combination buprenorphine products used to treat opioid use disorder for medication-assisted treatment (i.e., buprenorphine sublingual tablets, buprenorphine subcutaneous implant and all buprenorphine-naloxone combination products)
- Fentanyl transdermal patch (Lonsys®) which is for inpatient use only and available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS)
- Methadone for the treatment of opioid use disorder

Hospice care or using hospice services during the measurement year

- **HPCPS:** G0182, G9473 – G9479, Q5003 – Q5008, Q5010, S9126, T2042 – T2046
- **CPT:** 99377 – 99378

Members who died during the measurement year

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