

# Initiating and Engaging Patients in Treatment for Alcohol and Drug Dependence: A Key Quality Measure

## September 24, 2021

## **Improving Quality Care**

More than 20 million people ages 12 and older in the U.S. struggle with a substance use disorder each year. Fewer than 20% of them receive treatment, according to the <u>Substance Abuse and Mental Health Services Administration</u>

We encourage providers to talk with our members about the signs of substance abuse disorders and how alcohol can affect them. Consider urging the member to seek help, if appropriate.

## **Closing Care Gaps**

The Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET) is one aspect of care we measure in our quality programs. IET is a Healthcare Effectiveness Data and Information Set (HEDIS<sup>®</sup>) measure.

#### What IET Measures

IET applies to members ages 13 and older with a new episode of alcohol or other drug (AOD) abuse or dependence. The measure captures two stages of adequate and timely follow-up treatment:

- Initiation of treatment, one treatment within 14 days of the diagnosis
- Engagement of treatment within 34 days of initiation visit, meets if members have either of the following:
  - > At least one engagement medication treatment event
  - At least two engagement events

Two engagement visits can be on the same date of service but must be with different providers to count as two events. An engagement visit on the same date of service as an engagement medication treatment event meets criteria for engagement. Treatment may occur in an inpatient, residential, outpatient or telehealth setting or as Medication-Assisted Treatment (MAT). For members who initiated treatment via an inpatient admission, the 34-day period for engagement begins the day after discharge.

Learn more about the <u>IET</u> BHEDIS measure.

#### Tips to consider

If you have diagnosed a patient with AOD, consider:

 Using a screening tool from the <u>Magellan Behavioral Health Toolkit for</u> <u>Medical Providers</u> during your assessment such as the CAGE or CAGE-AID. These screeners are quick questionnaires to help determine if an alcohol and/or drug assessment is needed.

- Educating the patient about their diagnosis and treatment options and encouraging them to discuss any concerns with you if they are not ready to engage in treatment.
- Coordinating care between behavioral health and primary care providers:
  - Sharing progress notes and updates
  - Including the diagnosis for substance use referral
- Working with Magellan Behavioral Health discharge planners to optimize the discharge plan after detoxification, emergency department visit or any other <u>inpatient</u> @ D or <u>outpatient</u> @ D episode where the AOD diagnosis is determined.
- Reaching out to Magellan Behavioral Health if your patient visits an area emergency department for comorbid conditions to any related AOD issue and is discharged to home following the emergency department visit.
- ► Tapping Magellan Behavioral Health resources including the <u>Magellan</u> <u>Behavioral Health Toolkit for Medical Providers</u> and Magellan's <u>Substance</u> <u>Use Treatment</u> and materials.
- Reviewing the quality improvement resources available to you on our <u>Wellness Can't Wait</u> page.

## **Additional Resources**

IET webinar presented by Magellan from August 2021: Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET) @

Reference and review the <u>BCBSTX Preventive Care Guidelines (PCGs)</u>, <u>Clinical</u> <u>Practice Guidelines (CPGs)</u> and <u>THSteps for Medical Providers</u> which includes all current vaccine schedules, <u>ImmTrac2</u> and other important guidance for treating your patients.

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