

## Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA)

### Patient Profile

This measure evaluates members who were 19-64 years old during the measurement year who had a diagnosis of Schizophrenia, were dispensed an antipsychotic medication, and remained on the medication for at least 80% of their treatment period.

### How to Implement Best Practices and Improve Performance

- Medication education is most successful when a patient knows why they are taking a medication, what are the medication targets, and the importance of adherence. It is helpful to review expected side effects, caution on serious side effects and medication interactions, and instruct on how to respond to such side effects, should they emerge. An example can be to use hard candy (sugar free if Diabetic)/ice chips for dry mouth.
- Encourage a medication diary to keep track of doses. Educate on what to do if a dose is missed or taken late.
- When a patient receives a new medication, follow up phone calls can help ensure adherence and re-evaluate the patient's understanding of medication teaching.
- When educating patients/caregivers, have the patient repeat back what you taught them to ensure understanding. With written documentation, the patient may benefit from reading the material and then explaining what they read in order to ensure understanding.
- Encourage follow-up visits with all providers. It is easiest to schedule next appointments at the end of the visit.

*Information related to all 2019 HEDIS measures has been extracted from the NCQA 2019 HEDIS Technical Specifications Volume 2.*

The medication list below is used when evaluating the measure criteria noted above. For information on medications covered by MVP, see the *MVP Medicaid Drug Formulary* available by visiting [mvphealthcare.com](http://mvphealthcare.com) and selecting *Providers*, then *Pharmacy*, then *MVP Formularies*.

### Examples of Antipsychotic Medications

Visit [ncqa.org](http://ncqa.org) for a comprehensive list of Antipsychotic Medications.

<b>Miscellaneous Antipsychotic Agents (Oral)</b>	ARIPRAZOLE Clozapine Molindone Ziprasidone	Asenapine Haloperidol Quetiapine	Brexiprazole Loxapine Quetiapine fumarate	Cariprazine Lurasidone Risperidone
<b>Phenothiazine Antipsychotics (Oral)</b>	Chlorpromazine Thioridazine	Fluphebnazine Perphenazine-amitriptyline	Perphenazine	Prochlorperazine
<b>Psychotherapeutic Combination (Oral)</b>	Fluoxetine-olanzapine			

Examples of Antipsychotic Medications continued.

<b>Thioxanthenes (Oral)</b>	Thiothixene		
<b>Long Acting Injections 28-Day Supply</b>	Aripiprazole Paliperidone palmitate	Fluphenazine decanoate Polanzapine	Haloperidol decanoate Risperidone-14 day supply

Use of drugs listed here will score the measure as compliant. Remember to reference the MVP Formulary to learn which of these medications are covered by the member's plan.

## Billing Codes

### CPT Codes

Behavioral Health Stand Alone Outpatient/PH/IOP codes with  
 ICD-10 Schizophrenia Codes

98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220,  
 99241-99245, 99341-99345, 99347-99350, 99384-99387, 99394-99397,  
 99401-99404, 99411, 99412, 99510

Behavioral Health Outpatient/PH/IOP codes used with  
 Behavioral Health Outpatient/PH/IOP/POS codes and the  
 ICD-10 Schizophrenia Codes

90791, 90792, 90832-90840, 90845, 90847, 90849, 90853, 90867-90870, 90875,  
 90876, 99221-99223, 99231-99223, 99231-99233, 99239, 99251-99255, 99291

### Behavioral Health POS Codes

03, 05, 07, 09, 11-20, 22, 24, 33, 49, 50, 52, 53, 71, 72

### ICD-10 Codes

Schizophrenia Codes Only, Exclude Any Dementia

F20.0-F20.3, F20.5, F20.81, F20.89, F20.9, F25.0, F25.1, F25.8, F25.9

### HCPCS Codes

Use the HCPCS Codes with the Behavioral Health Stand Alone  
 Outpatient Codes

G0155, G0176, G0177, G0409-G0411, G0463, H0002, H0004, H0031, H0034,  
 H0036, H0037, H0039, H0040, H2000, H2001, H2010-H2020, M0064, S0201,  
 S9480, S9484, S9485, T1015