



HEDIS[®] MEASURE

Initiation and Engagement of Substance Use Disorder Treatment (IET)



Measure Overview

The National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data Information Set (HEDIS) measure **Initiation and Engagement of Substance Use Disorder Treatment (IET)** assesses the rate of initial engagement in substance use disorder (SUD) treatment. It measures the percentage of new SUD episodes that result in treatment initiation through an inpatient SUD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visit or medication treatment within 14 days. It also measures the percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation. For all initiation events, except medication dispensing and administration events, initiation on the same day as the SUD episode date must be with different providers.

Providing holistic, patient-centered care and educating patients to engage in SUD treatment after diagnosis is recommended to ensure they are aware of their treatment options and are encouraged to take the necessary steps in their recovery. Timely access to SUD services increases the chance that a patient will engage in services when they demonstrate readiness.

Ways to Improve Measure Performance

- Educate the patient about the importance of initiating and remaining engaged in treatment because treatment works and recovery is possible.
- Provide patient-centered care with evidence-based clinical practices.
- Make outreach calls to patients to remind them of appointments.
- Provide physical appointment cards to help patients remember appointments.
- Conduct same-day assessments or allow walk-in assessments.
- Centralize appointment scheduling and increase appointment availability.
- Provide patient incentives for attending appointments, such as bus passes.

- Simplify the intake process.
- Improve the patient experience using tools such as satisfaction surveys.
- Use correct HIPAA-compliant codes when billing for the initiation and engagement of treatment. Please see page 2 of this document for a complete list of codes.
- Promote transitions of care by addressing social determinants of health, and clinical needs such as severe mental illness (SMI) and access to medications that may be barriers to treatment and recovery.
- Collaborate with CareSource on care coordination to connect the patient to additional services, such as transportation.
- Obtain consent from the patient to coordinate care with other providers.

CareSource Resources

CARE MANAGEMENT

CareSource provides extra help to patients with complex behavioral health conditions. We understand the continuum of care and need for care coordination. Strong community relationships enable us to make referrals and connect health partners and patients to ancillary resources. Our goal is to simplify care and ensure greater access to the spectrum of behavioral health services.

Providers can refer patients for care management through the Provider Portal at [CareSource.com](https://www.caresource.com) > Providers > [Provider Portal Log-in](#) or by calling Member Services.

CareSource also staffs a 24-hour nurse advice line, [CareSource24[®]](#), with registered nurses who can help 24/7/365. Providers can refer their patients to this resource.

Please visit [CareSource.com](https://www.caresource.com) or call CareSource Marketplace Plans [Provider Services](#) for more information.



Follow-Up Visit Compliance Codes

| INDIVIDUAL CODES | COMBINATION CODES |
|---|--|
| BH Outpatient Visit CPT: 98960-2, 99078, 99201-5, 99211-5, 99241-5, 99341-5, 99347-50, 99381-7, 99391-7, 99401-4, 99411-2, 99483, 99492-4, 99510 | Outpatient Visit, Visit Setting Unspecified CPT: 90791-2, 90832-4, 90836-40, 90845, 90847, 90849, 90853, 90875-6, 99221-3, 99231-3, 99238-9, 99251-5 WITH POS: 03, 05, 07, 09, 11-20, 22, 33, 49, 50, 71, 72 |
| HCPCS: G0155, G0176-7, G0409, G0463, G0512, H0002, H0004, H0031, H0034, H0036-7, H0039-40, H2000, H2010-1, H2013-20, T1015 | Non-residential Substance Abuse Treatment Facility Visit, Visit Setting Unspecified CPT WITH POS: 57, 58 |
| Revenue Code: 0510, 0513, 0515-17, 0519-23, 0526-9, 0900, 0902-4, 0911, 0914-17, 0919, 0982, 0983 | OR |
| Substance Use Disorder Service CPT: 99408-9 | CMHC Visit, Visit Setting Unspecified CPT WITH CMHC POS: 53 |
| HCPCS: G0396-7, G0443, H0001, H0005, H0007, H0015-6, H0022, H0047, H0050, H2035-6, T1006, T1012 | Intensive Outpatient/Partial Hospitalization, Option 1 |
| UBREV: 0906, 0944-5 | HCPCS: G0410-1, H0035, H2001, H2012, S0201, S9480, S9484-5 |
| Observation CPT: 99217-20 | Revenue Code: 0905, 0907, 0912-3 |
| Telephone Visit CPT: 98966-8, 99441-3 | Option 2: Visit Setting Unspecified CPT WITH POS: 52 |
| Online Assessments CPT: 98969-72, 99421-3, 99444, 99457-8 | Telehealth Visit, Outpatient Setting Unspecified CPT WITH Telehealth POS: 02, 10 |
| HCPCS: G0071, G2010, G2012, G2061-3, G2250-2 | |
| ODD Monthly Based Treatment HCPCS: G2086-7 | |
| ODD Weekly Drug Treatment HCPCS: G2067-70, G2072-3 | |
| ODD Weekly Non-Drug HCPCS: G2071, G2074-7, G2080 | |
| SUD episodes in the alcohol use disorder cohort Naltrexone Injection HCPCS: G2073, J2315 | |
| Alcohol Abuse and Dependence ICD-10: F10.10-F10.29 | |
| Opioid Abuse and Dependence ICD-10: F11.10-F11.29 | |
| Other Drug Abuse and Dependence ICD-10: F12.10-F19.29 | |

Please Note: The codes in this document are derived from the NCQA HEDIS Volume 2 Technical Specifications for Health Plans. These codes are examples of codes typically billed for this type of service and are subject to change. Submitting claims using these codes helps improve reporting of quality measure performance. Billing these codes does not guarantee payment. Providers should check the Centers for Medicare & Medicaid (CMS) Fee Schedule prior to claim submission.

References

NCQA HEDIS MY2022

[Initiation and Engagement of Substance Use Disorder Treatment \(IET\)](#)

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U.S. Department of Health and Human Services

[Best Practices and Barriers to Engaging People with Substance Use Disorders in Treatment](#)

Substance Abuse and Mental Health Services Administration (SAMHSA)

[Key Substance Use and Mental Health Indicators in the United States: Results from the 2020 National Survey on Drug Use and Health \(samhsa.gov\)](#)