WHAT IS THE IET MEASURE LOOKING AT?
The percentage of adolescent and adult members with a new episode of alcohol and other drug (AOD) use or dependence who received the following:

- **Initiation of AOD Treatment**: The percentage of members who initiate treatment through an inpatient AOD admission, outpatient visit, intensive outpatient encounter, or partial hospitalization, telehealth or medication-assisted treatment (MAT) within 14 days of the diagnosis
- **Engagement of AOD Treatment**: The percentage of members who initiated treatment and who had two or more additional AOD services or MAT within 34 days of the initiation visit

WHY IS THE IET MEASURE IMPORTANT?
Early identification of substance use disorder issues can help your patients avoid future drug-related illnesses and deaths, improving quality of life.

WHO IS INCLUDED IN THE MEASURE?
Members with a new episode of alcohol or drug abuse or dependence

*Applies to members age 13+; Commercial, Medicaid and Medicare LOB are included*

Only encounters from the intake period of Jan 1, 2020 – Nov 13, 2020 are included in the 2020 measurement year.

WHEN DOES A MEMBER ‘PASS’ THE MEASURE?
- **Initiation**: AOD treatment within 14 days of the diagnosis episode
  - If the episode is an inpatient encounter – this is considered treatment and the member is compliant!
- **Engagement**: Compliant with the initiation treatment AND at least 2 visits within 34 days after the initiation visit
  - One may be a medication assisted treatment event such as a medication dispensing event for the treatment of alcohol abuse, dependence or opioid abuse or dependence

*Does a telehealth visit count as a treatment visit?*
Yes; the telehealth service must be of an amount and nature that would be sufficient to meet the key components and/or requirements of the same service when rendered via face-to-face interaction. Telehealth visits billed with the telehealth modifier 95 or GT will meet the IET measure.

WHICH MEMBERS ARE EXCLUDED?
Members already being treated for AOD are excluded.

Members on hospice are also excluded

WHAT CAN PROVIDERS DO TO IMPROVE IET RATES?

**Follow Up**: When a substance use disorder concern is identified, it is very important to schedule appropriate follow-up treatment. For newly diagnosed patients in particular, it is recommended that you schedule an initial follow-up appointment within 14 days and two additional appointments within 34 days of that first visit. Utilize telehealth and home based therapy

**Contact PCC/PCP**: It is recommended that you contact the member’s PCC/PCP to alert them of the new AOD diagnosis. This will support coordinated care long-term and more effectively address the member’s whole health

**Assess barriers to treatment**: When possible, use motivational interviewing to assess the social, economic, and cultural barriers to the member’s access and/or engagement in treatment. If barriers cannot be addressed through brief intervention, consider connecting to a collateral contact such as a Community Support Provider (CSP), Recovery Coach, Recovery Support Navigator, peer bridge support, or family.
What codes represent members that need this follow-up?
When paired with an outpatient visit, telehealth, intensive outpatient visit, partial hospitalization, detox visit, ED visit, observation visit, or an acute / non-acute inpatient stay – some ICD-10 codes for alcohol / drug dependence that require follow-up are:


IET Measure At-a-Glance:

**Initiation:**
- Dx of Alcohol or Drug Abuse/Dependence

**Follow-Up Visit #1**
- No more than 14 days

**Engagement:**

**Follow-Up Visit #2**
- No more than 34 days

**Follow-Up Visit #3**

**WHAT IS HEDIS®?**
HEDIS (Healthcare Effectiveness Data Information Set) is a widely used set of performance measures in the managed care industry, developed and maintained by NCQA. HEDIS measures results and drives improvement efforts surrounding best practices.

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).