

## Measure Description

The percentage of individuals 18 years of age and older as of December 31, 2025, who initiate pharmacotherapy with at least one prescription or visit for opioid treatment medication within 30 days following an index visit with a diagnosis of opioid dependence.

## Definitions

**Intake Period:** January 1, 2025 -December 1, 2025

**Index Episode:** The earliest visit with an opioid dependence disorder diagnosis.

**Index Episode Start Date (IESD):** The earliest date of service during the intake period with a diagnosis of opioid dependence disorder.

## Opioid Use Disorder Treatment Medications

<b>Antagonist</b>	Naltrexone (oral, injectable)
<b>Partial Agonist</b>	Buprenorphine (sublingual tablet, injection, implant) Buprenorphine/Naloxone (sublingual tablet, buccal film, sublingual film)

**Any of the following will identify initiation of pharmacotherapy treatment for opioid use or dependence when within 30 days of the Index Episode:**

<b>Identify the Index Episode</b>	<p><b>Identify all Members 18 years of age and older as of December 31, 2025 who during the intake period (January 1, 2025-December 1, 2025), had one of the following:</b></p> <p><b>NYS Opioid Use and Dependence Diagnosis</b>  <b>ICD10:</b>                      F11.10, F11.120, F11.121, F11.122, F11.129, F11.13, F11.14, F11.150, F11.151, F11.159, F11.181, F11.182, F11.188, F11.19, F11.20, F11.220, F11.221, F11.222, F11.229, F11.23, F11.24, F11.250, F11.251, F11.259, F11.281, F11.282, F11.288, F11.29</p>
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An outpatient visit, intensive outpatient visit, or partial hospitalization with a diagnosis of opioid use or dependence.  
Any of the following code combinations meet the criteria:

**NYS Stand Alone Visits with a  
Diagnosis of Opioid Use or  
Dependence**

**NYS Stand Alone Visits**

**CPT:**

90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90845, 90846, 90847, 90849, 90853, 90865, 90867, 90868, 90869, 90870, 90875, 90876, 90880, 90887, 98960, 98961, 98962, 98966, 98967, 98968, 98970, 98971, 98972, 98980, 98981, 99078, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99242, 99243, 99244, 99245, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381, 99382, 99383, 99384, 99385, 99386, 99387, 99391, 99392, 99393, 99394, 99395, 99396, 99397, 99401, 99402, 99403, 99404, 99408, 99409, 99411, 99412, 99421, 99422, 99423, 99441, 99442, 99443, 99457, 99483, 99484, 99492, 99493, 99494, 99510

**HCPCS:**

G0071, G0155, G0176, G0177, G0396, G0397, G0409, G0410, G0411, G0443, G0463, G0511, G0512, G2010, G2012, G2250, G2251, G2252, H0001, H0002, H0004, H0005, H0007, H0015, H0016, H0022, H0031, H0034, H0035, H0036, H0037, H0039, H0040, H0047, H0050, H2000, H2001, H2010, H2011, H2012, H2013, H2014, H2015, H2016, H2017, H2018, H2019, H2020, H2035, H2036, S0201, S9480, S9484, S9485, T1006, T1012, T1015

**UBREV:**

0510, 0513, 0515, 0516, 0517, 0519, 0520, 0521, 0522, 0523, 0526, 0527, 0528, 0529, 0900, 0901, 0902, 0903, 0904, 0905, 0906, 0907, 0911, 0912, 0913, 0914, 0915, 0916, 0917, 0919, 0944, 0945, 0982, 0983

**NYS Visits Group 1 with NYS  
POS Group 1 and a Diagnosis of  
Opioid Use or Dependence**

**NYS Visits Group 1**

**CPT:**

90791, 90792, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90845, 90847, 90849, 90853, 90875, 90876

**NYS POS Group 1**

**POS:**

02, 03, 05, 07, 09, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 22, 33, 49, 50, 57, 58, 71, 72

<b>NYS Visits Group 2 with NYS POS Group 2 and a Diagnosis of Opioid Use or Dependence</b>	<b>NYS Visits Group 2</b> <b>CPT:</b> 99221, 99222, 99223, 99231, 99232, 99233, 99238, 99239, 99252, 99253, 99254, 99255  <b>NYS POS Group 2</b> <b>POS:</b> 02, 10, 52, 53
<b>An ED visit with a Diagnosis of Opioid Use or Dependence</b>	<b>NYS ED Visit</b> <b>CPT:</b> 99281, 99282, 99283, 99284, 99285  <b>UBREV:</b> 0450, 0451, 0452, 0456, 0459, 0981
<b>A Detoxification Visit with a Diagnosis of Opioid Use or Dependence</b>	<b>NYS Detoxification</b> <b>HCPCS:</b> H0008, H0009, H0010, H0011, H0012, H0013, H0014  <b>ICD10:</b> HZ2ZZZZ  <b>UBREV:</b> 0116, 0126, 0136, 0146, 0156
<b>An Acute or Non-Acute Inpatient Discharge with a Diagnosis of Opioid Use or Dependence</b>	<b>NYS Inpatient Stay</b> <b>UBREV:</b> 0100, 0101, 0110, 0111, 0112, 0113, 0114, 0116, 0117, 0118, 0119, 0120, 0121, 0122, 0123, 0124, 0126, 0127, 0128, 0129, 0130, 0131, 0132, 0133, 0134, 0136, 0137, 0138, 0139, 0140, 0141, 0142, 0143, 0144, 0146, 0147, 0148, 0149, 0150, 0151, 0152, 0153, 0154, 0156, 0157, 0158, 0159, 0160, 0164, 0167, 0169, 0170, 0171, 0172, 0173, 0174, 0179, 0190, 0191, 0192, 0193, 0194, 0199, 0200, 0201, 0202, 0203, 0204, 0206, 0207, 0208, 0209, 0210, 0211, 0212, 0213, 0214, 0219, 1000, 1001, 1002

Initiation of pharmacotherapy treatment within 30 days of the index episode.

Any of the following will identify initiation of pharmacotherapy treatment for opioid use or dependence:

<p><b>A Medication-Assisted Therapy Dispensing Event</b></p>	<p><b>NYS AOD Medication Treatment</b>  <b>HCPCS:</b>  G2067, G2068, G2069, G2070, G2072, G2073, G2078, G2079, G2086, G2087, H0020, H0033, J0570, J0571, J0572, J0573, J0574, J0575, J0577, J0578, J2315, Q9991, Q9992, S0109</p>
<p><b>Dispensed a Prescription for Opioid Use or Dependence</b></p>	<p><b>NYS Opioid Use Disorder Treatment Medications</b>  <b>NDC:</b>  00054017613, 00054017713, 00054018813, 00054018913, 00093215533, 00093537856, 00093537956, 00093572056, 00093572156, 00143924601, 00143924605, 00185003901, 00185003930, 00228315303, 00228315403, 00228315473, 00228315503, 00228315567, 00228315573, 00228315603, 00247148701, 00378092393, 00378092493, 00378876516, 00378876593, 00378876616, 00378876693, 00378876716, 00378876793, 00378876816, 00378876893, 00406117001, 00406117003, 00406192303, 00406192309, 00406192403, 00406192409, 00406800503, 00406802003, 00409201203, 00409201232, 00517072501, 00517072505, 00555090201, 00555090202, 00781721606, 00781721664, 00781722706, 00781722764, 00781723806, 00781723864, 00781724906, 00781724964, 00904701006, 00904703604, 12496010001, 12496010002, 12496010005, 12496030001, 12496030002, 12496030005, 12496075701, 12496075705, 12496120201, 12496120203, 12496120401, 12496120403, 12496120801, 12496120803, 12496121201, 12496121203, 16729008101, 16729008110, 35356055530, 35356055630, 40042001001, 42023017901, 42023017905, 42291017430, 42291017530, 42291063230, 42858050103, 42858050203, 42858060103, 42858060203, 43063059115, 43063066706, 43063075306, 43598057901, 43598057930, 43598058001, 43598058030, 43598058101, 43598058130, 43598058201, 43598058230, 47335032608, 47335032618, 47335032683, 47335032688, 47781035503, 47781035511, 47781035603, 47781035611, 47781035703, 47781035711, 47781035803, 47781035811, 47781071203, 47781071211, 50090157100, 50090286600, 50090392900, 50090492500, 50268014411, 50268014415, 50268014511, 50268014515, 50383028793, 50383029493, 50383092493, 50383093093, 50436010501, 51224020630, 51224020650, 51285027502, 52427069203, 52427069211, 52427069403, 52427069411, 52427069803, 52427069811, 52427071203, 52427071211, 52440010014, 53217013830, 53217024630, 53217026130, 53217032801, 54123011430, 54123090730, 54123091430, 54123092930, 54123095730, 54123098630, 54868557400, 54868570700, 54868570701, 54868570702, 54868570703, 54868570704, 54868575000, 55700014730, 55700018430, 55700030230, 55700030330, 58118017608, 58118017708, 58118315608, 58284010014, 59385001201, 59385001230, 59385001401, 59385001430, 59385001601, 59385001630, 60429058611, 60429058630, 60429058633, 60429058711, 60429058730, 60429058733, 60687048111, 60687048121, 60687049211,</p>

<b>Dispensed a Prescription for Opioid Use or Dependence (cont.)</b>	60687049221, 60846097003, 62175045232, 62175045832, 62756045964, 62756045983, 62756046064, 62756046083, 62756096964, 62756096983, 62756097064, 62756097083, 63629104601, 63629104701, 63629409202, 63629507401, 63629712501, 63629712502, 63629712503, 63629712504, 63629712505, 63629712506, 63629712507, 63629712601, 63629712602, 63629712603, 63629712604, 63629712605, 63629712606, 63629712607, 63629712608, 63629712609, 63629727001, 63629727002, 64725093003, 64725093004, 64725192403, 64725192404, 65162041503, 65162041509, 65162041603, 65162041609, 65757030001, 65757030202, 67046099030, 67046099130, 67046099430, 67046099530, 67046099630, 67046099730, 67046099830, 67046099930, 68071215603, 68084029111, 68084029121, 68094085359, 68094085362, 68788708401, 68788708402, 68788708403, 68788708406, 68788708409, 70022000110, 70518044200, 70518065200, 70518065201, 70518065202, 70518071100, 70518071101, 70518071102, 70518100700, 70518114600, 70518131200, 70518155700, 70518162500, 70518168400, 70518201400, 70518221600, 70518221700, 70518221800, 70518222600, 70518231100, 70518232700, 70518271800, 70518271801, 71335001401, 71335001402, 71335001403, 71335001404, 71335001405, 71335001406, 71335035301, 71335035302, 71335035303, 71335035304, 71335035305, 71335035306, 71335035307, 71335095001, 71335095002, 71335095003, 71335095004, 71335095005, 71335095006, 71335095007, 71335115401, 71335115402, 71335115403, 71335115404, 71335115405, 71335115406, 71335115407, 71335115408, 71335115409, 71335116301, 71335116302, 71335116303, 71335116304, 71335116305, 71335116306, 71335116307, 71335116308, 71335116309, 71335129601, 71335129602, 71335137801, 71335148001, 71335148002, 71335148003, 71335148004, 71335148005, 71335148006, 71335151401, 71335151402, 71335165301, 71335172001, 71335172002, 71335172501, 76519116005, 76519117000, 00228315309, 00228315373, 00228315609, 00228315673, 21695051510, 50268014550, 60846097103, 61786091102, 61786091202, 63629403401, 63629403402, 63629403403, 63629403404, 63629530401, 63629530402, 63629530403, 63629530404, 63629530405, 67046099230, 67046099330, 00904700906, 16729054910, 16729055010, 50090307600, 50090580500, 51862060830, 55700090130, 60687062611, 60687062665, 60687063711, 60687063765, 62135024230, 62135024290, 63629409201, 63629726901, 68071259203, 70518201401, 70518222601, 70518222602, 70518222603, 70518312900, 71335185800, 71335185801, 71335185802, 71335185803, 71335185804, 71335185805, 71335185806, 71335185807, 71335185808, 71335185809, 76519117001, 76519117002, 76519117003, 76519117004, 76519117005
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## Tips and Best Practices to Help Improve Performance

- Medication education is most successful when the Member knows why they are taking a medication and its purpose
- Review expected side effects and medication interactions; discuss a plan for your patient to respond to side effects including how/when to notify their provider
- Encourage the use of a medication diary to keep track of doses; educate your patients about the importance of adhering to their medication regimen, and what to do if a dose is missed
- Provide written documentation to the Member to ensure understanding
- Review importance of continuing the medication even if the Member is feeling better
- Encourage follow-up visits and schedule their next appointment at the end of the visit
- Elderly Members may benefit from the help of family members who can assist with medication cueing, set-up of pill organizers, drug charts reminder calls, etc.
- Utilize your monthly Gaps in Care (GIC) report for a list of MVP Members and the services they still need
- Call MVP Customer Care Center for Provider Services at **1-800-684-9286** for case management guidance, home care referrals, and other community support available to assist Members and their families