

Attachment 2.1 ADHD Chronic Care Follow-up Measure Specifications Document

DRAFT Measure #3: ADHD Chronic Care Follow-up Measure

Attention Deficit Hyperactivity Disorder (ADHD)

A. DESCRIPTION

Percentage of patients aged 4 through 18 years with a primary or secondary diagnosis of Attention Deficit Hyperactivity Disorder (ADHD) in the year prior to the measurement year who have at least one follow-up visit in the measurement year with ADHD as the primary diagnosis.

B. ELIGIBLE POPULATION

Age	Age 4 through 18 at diagnosis of ADHD
Continuous Enrollment	All days during the measurement year and 1 or more days in the prior year (identification year).
Allowable Gap	No allowable gap during continuous enrollment period
Anchor Date	January 1 st of the measurement year
Event/Diagnosis	Any patient age 4 through 18 with a primary or secondary ADHD diagnosis code (314.0) at an outpatient physician visit (see Table 1 for list of acceptable codes) in the identification year who has a follow up outpatient visit (see Table 1 list of visit codes) with a primary ADHD diagnosis code in the measurement year.
Exclusion Criteria	Children with the conditions listed in Table 2 as a primary or secondary diagnosis during the identification year.

C. DATA SOURCE

Administrative Claims Data

1. Outpatient

D. Process

Step 1 (Denominator): Identify children with complete coverage in the measurement year and 1 or more days of coverage in the prior year (identification year).

Step 1 (Denominator): Identify all patients age 4 through 18 at the time of the primary or secondary ADHD diagnosis (314.0) at a visit (Table 1) during the identification year. Remove patients meeting the exclusion criteria. This remaining group of patients is the measure denominator.

Step 2 (Numerator): For these patients, determine the number of children with an E&M visit with a primary ADHD diagnostic code (314.00 or 314.01) during the measurement year (numerator).

Table 1: Evaluation and Management Codes to Identify Outpatient Follow-up Visits

CPT Codes	w/ POS
90804-90815, 96150-96154, 98960-98962, 99078, 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99341-99345, 99347-99350, 99383, 99384, 99393, 99394, 99401-99404, 99411, 99412, 99510	
90801, 90802, 90816-90819, 90821-90824, 90826-90829, 90845, 90847, 90849, 90853, 90857, 90862, 90875, 90876	03, 05, 07, 09, 11, 12, 13, 14, 15, 20, 22, 33, 49, 50, 52, 53, 71, 72
99221-99223, 99231-99233, 99238, 99239, 99251-99255	52, 53

Table 2: Exclusion Criteria: Any primary or secondary diagnosis during the identification year

ICD9 Diagnosis Codes	Description
299.xx	Autism
303.xx, 304.xx, 305.xx	Substance Abuse
307.1	Anorexia
296.00-296.06, 296.10-296.16, 296.22, 296.24, 296.32-296.34, 296.4*, 296.5*, 296.6*, 296.7*, 296.8*	Mood Disorders
300.01, 300.10-300.19, 300.21, 300.22, 300.5*-300.9*	Anxiety

We developed the measure using ICD9 codes, but the codes can be converted to equivalent version ICD-10. However, the measure was not tested using ICD-10 codes.