

Opioids Prescribed

i4C Indicator MED-OPI-001: Opioids Prescribed v 2.1

Category: Medication Management/Opioids

Purpose:

This indicator is used to identify non-palliative care patients who currently are prescribed one or more opioids.

Source:

Based on the Opioid Prescribing indicators defined in the technical appendix of the HQO MyPractice: Primary Care Report version 3 (December 2018) as well as the HQO Quality Standards on Opioid Prescribing.

Base Population:

All non-palliative care patients with an Active demographic status recorded in the EMR.

Indicator Segments:

Patients with current opioid prescription(s): Count of non-palliative care patients WITH one or more current opioid prescriptions documented.

Patients with only past opioid prescription(s): Count of non-palliative care patients WITHOUT any current opioid prescription documented AND WITH one or more past opioid prescriptions documented.

Patients who have never had opioids prescribed: Count of non-palliative care patients WITHOUT any current or past opioid prescriptions documented.

A *current opioid prescription* is any of the following medications (identified by brand or generic name) that is a current (not discontinued) medication:

'Alfentanil'	'Buprenorphine'	'Butorphanol'	'Codeine'
'Dihydrocodeine'	'Fentanyl'	'Hydrocodone'	'Hydromorphone'
'Meperidine'	'Methadone'	'Morphine'	'Nalbuphine'
'Opium'	'Oxycodone'	'Pentazocine'	'Pethidine'
'Remifentanil'	'Sufentanil'	'Tapentadol'	'Tramadol'

A *past opioid prescription* is any of the above medications (identified by brand or generic name) that is a discontinued medication.

Non-palliative care patients are patients WITHOUT any of the following Service Codes billed for the patient: A945, C945, C882, C982, W872, W882, W972, W982, K023, B998, B966, B997, G511, G512 AND WITHOUT diagnosis code Z51.5 (ICD-10) entered as a current/past diagnosis in the cumulative patient profile.

Suggested Indicator Use:

Physician use of this indicator is to review charts of patients with current or past opioid prescriptions for potential recall or other follow-up actions.