

HEDIS Provider Tip Sheet



IET Measure Description¹

Assesses new episodes of substance use disorder (SUD) in adults and adolescents 13 years of age and older who received:

- Initiation of SUD Treatment: New episodes, after which the individual initiated treatment through an
 inpatient SUD admission, outpatient visit, telehealth or intensive outpatient encounter or partial
 hospitalization, or received medication within 14 days of diagnosis.
- Engagement of SUD Treatment: New episodes, after which the individual initiated treatment and had two or more additional SUD services or medications within 34 days of the initiation visit.

Why is IET Important?1

In 2022, 48.7 million individuals in the U.S. 12 years of age or older (approximately 17.3% of the population) were classified as having had an SUD within the past year. Individuals with SUD are at increased risk of overdose, injury, soft tissue infections and mortality. In 2021, drug overdose accounted for 106,699 deaths, representing a 14% increase in overdose deaths compared to 2020. Similarly, over 140,000 people die each year from excessive alcohol use.

Early and regular SUD treatment, including medication therapy, has been demonstrated to improve outcomes for individuals with SUDs., but less than 20% of individuals with a SUD receive this important specialty care.

Best Practices

- ✓ Proactively arrange a follow-up visit before the member leaves office/IP facility.
- ✓ Use same diagnosis for substance use at each follow-up.
- ✓ If patients do not keep appointments, have staff reach out to reschedule them ASAP.
- ✓ Educating members about the importance follow-up and adherence to treatment recommendations.

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¹ Source: https://www.ncqa.org/report-cards/health-plans/state-of-health-care-quality-report/measures-list/

² Source: HEDIS MY 2025 Tech Specs Manual Vol. 2



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Numerator Compliance²

Rate 1: Initiation of SUD Treatment - Initiation of SUD treatment within 14 days of the SUD episode date.

Rate 2: Engagement of SUD Treatment – Initiation of SUD treatment and has two or more additional SUD services or MAT within 34 days of the initiation visit.

The following SUD treatment with a diagnosis (on the discharge claim) of one of the following: Alcohol Abuse and Dependence, Opioid Abuse and Dependence, or Other Drug Abuse and Dependence, meets the numerator criteria for both rates:

- · An acute or nonacute inpatient admission
- An outpatient, community mental health center, telephone, telehealth, e-visit or virtual check-in visit
- An intensive outpatient encounter or partial hospitalization
- · A non-residential substance abuse treatment facility visit
- · A substance use disorder service
- Substance use disorder counseling and surveillance
- A weekly or monthly opioid treatment service
- For SUD episodes in the alcohol use disorder cohort, an alcohol use disorder medication treatment dispensing event or a medication administration event
- For SUD episodes in the opioid use disorder cohort, an opioid use disorder medication treatment dispensing event or a medication administration event

For all initiation events except medication treatment dispensing events and medication administration events, initiation on the same day as the SUD episode date must be with different providers in order to count.

Refer to the next page for the list of medications.

Data Collection Method²

Administrative (Claims)

Trillium Percentages/NCQA National Averages¹

IET	Measurement Year	Trillium	NCQA National Average
Rate 1: Initiation of SUD	2023	48.66	45.14
Treatment (Total)	2022	-	45.0
Rate 2: Engagement of SUD Treatment (Total)	2023	19.33	14.79
	2022	-	14.9

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IET Numerator Medications²

Description	Prescription	
Aldehyde dehydrogenase inhibitor	Disulfiram (oral)	
Antagonist	Naltrexone (oral and injectable)	
Other	Acamprosate (oral; delayed- release tablet)	
Antagonist	Naltrexone (injectable)	Naltrexone (oral)
Partial Agonist	Buprenorphine (implant) Buprenorphine (injection)	Buprenorphine (sublingual tablet) Buprenorphine/naloxone (sublingual tablet, buccal film, sublingual film)

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