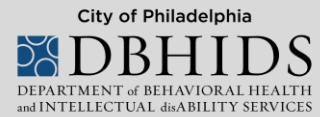




Provider Bulletin 20-16 August 6, 2020



Clinical Guidelines and Related Provider Requirements

Please note that this Bulletin replaces Bulletin 18-12, originally released July 30, 2018.

Community Behavioral Health (CBH) has adopted Clinical Practice Guidelines (CPGs) to outline best practices for the treatment of specific disorders or certain populations. These guidelines outline best practices for the such treatments and will be used by CBH to assess the quality of care provided to CBH members. As such, providers are advised to review and, where appropriate, implement these best practices in their care. CPGs apply to all clinical settings where members are seen with these disorders. CPGs should be used in conjunction with any level-of-care-specific performance standards as well as all other required CBH, NIAC, state, and federal regulations and standards.

CBH has updated five existing CPGs and is issuing a newly developed guideline for tobacco use. The most recent version of all CPGs can be found in Section 7.2., “Clinical Guidelines,” of the [CBH Provider Manual](#).

New and updated documents include:

1. Clinical Guidelines for Opioid Use Disorder (OUD)
2. Clinical Guidelines for the Pharmacologic Treatment of Schizophrenia
3. Clinical Guidelines for the Pharmacologic Treatment of Attention Deficit and Hyperactivity Disorder (ADHD) in Children and Adolescents
4. Clinical Guidelines for the Prescribing and Monitoring of Benzodiazepines and Related Medications
5. Clinical Guidelines for the Prescribing and Monitoring of Antipsychotic Medications for Youth
6. Clinical Practice Guidelines for the Treatment of Tobacco Use Disorder

CBH had previously required submission of policies related to some of these CPGs. At this time, no additional policy submission is required. However, to ensure alignment and best practices, CBH recommends that providers review the updated CPGs and make any necessary updates or revisions to provider policies and procedures.

Adherence to the CPGs will be assessed through CBH monitoring and oversight, including Quality, Clinical, and Compliance Department protocols. Additionally, components may be

reviewed as part of NIAC initial and recredentialing reviews. To assess quality of care and align with state and regulatory requirements, CBH will also be utilizing several specific metrics for each CPG, which are detailed in the table below.

Clinical Guidelines	Quality Metrics
<i>Clinical Practice Guidelines for Opioid Use Disorder (OUD)</i>	<ol style="list-style-type: none"> 1. MAT Penetration Rate: Percentage of members with OUD diagnosis who are receiving MAT. Substance use providers report data quarterly to CBH (aligns with Provider Bulletin 18-07) 2. HEDIS® Follow Up After High-Intensity Care for Substance Use Disorder (FUI) 3. Rates of Unplanned Discharge from residential rehab and withdrawal management level of care
<i>Clinical Guidelines for the Pharmacologic Treatment of Schizophrenia</i>	<ol style="list-style-type: none"> 1. HEDIS® Adherence to Antipsychotic Medications for Individuals with Schizophrenia (SAA) 2. HEDIS® Diabetes Screening for People with Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD) 3. HEDIS® Diabetes Monitoring for People with Diabetes and Schizophrenia (SMD); assesses adults 18–64 years of age with schizophrenia and diabetes who had both an LDL-C test and an HbA1c test during the measurement year
<i>Clinical Guidelines for the Pharmacologic Treatment of Attention Deficit and Hyperactivity Disorder (ADHD) in Children and Adolescents</i>	<ol style="list-style-type: none"> 1. HEDIS® Appropriate medication follow-up appointments for children and adolescents prescribed medications for ADHD Initial and Continuation/Maintenance Phase (ADD) 2. Appropriate use of medication for children and adolescents diagnosed with ADHD (percentages of members with ADHD prescribed FDA-approved medications, other medications, and no medication)
<i>Clinical Guidelines for the Prescribing and Monitoring of Benzodiazepines and Related Medications</i>	<ol style="list-style-type: none"> 1. Overall rate of benzodiazepine prescribing 2. Rates of benzodiazepine prescribing to members with concomitant opioid prescription, methadone treatment, or buprenorphine treatment 3. Rates of benzodiazepine prescribing to members with a history of substance use disorder
<i>Clinical Guidelines for the Prescribing and Monitoring of Antipsychotic Medications for Youth</i>	<ol style="list-style-type: none"> 1. HEDIS® Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM); the percentage of children and adolescents ages 1–17 years of age who had two or more antipsychotic prescriptions and had metabolic testing.
<i>Clinical Practice Guidelines for the Treatment of Tobacco Use Disorder</i>	<ol style="list-style-type: none"> 1. Percentage of CBH members screening for tobacco use over the age of 13 in the last 12 months 2. Percentage of tobacco users who were provided tobacco cessation counseling 3. Percentage of tobacco users who were provided pharmacotherapy (NRT or medication)

These requirements take effect Monday, September 7, 2020. Please direct questions to CBH.PharmacyInitiatives@phila.gov.