### EXISTING MEASURES FOR ATTENTION DEFICIT/HYPERACTIVITY DISORDER (ADHD) – PRIOR TO PQMP

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<th>Measure Title</th>
<th>Measure Description</th>
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| Percentage of patients diagnosed with ADHD whose medical record contains documentation that the clinician discussed the need for school-based supports and educational service options for children with ADHD. (Source: ICSI) | This measure is used to assess the percentage of patients diagnosed with attention deficit hyperactivity disorder (ADHD) whose medical record contains documentation that the clinician discussed the need for school-based supports and educational service options for children with ADHD.  
Numerator Description: Number of medical records of attention deficit hyperactivity disorder (ADHD) patients with documentation of discussion of the need for school-based supports and educational service options  
Denominator Description: Total number of attention deficit hyperactivity disorder (ADHD) patients whose medical records are reviewed | Process                                                                 |
| Percentage of patients newly diagnosed with ADHD whose medical record contains documentation of DSM-IV-TR or DSM-PC criteria. (Source: ICSI) | This measure is used to assess the percentage of patients newly diagnosed with attention deficit hyperactivity disorder (ADHD) whose medical record contains documentation of Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV-TR) or Diagnostic and Statistical Manual for Primary Care (DSM-PC) criteria.  
Numerator Description: Number of medical records of newly diagnosed attention deficit hyperactivity disorder (ADHD) patients with documentation of Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition-Text Revision (DSM-IV-TR) or Diagnostic and Statistical Manual for Primary Care (DSM-PC) criteria  
Denominator Description: Total number of medical records of newly diagnosed attention deficit hyperactivity disorder (ADHD) patients reviewed | Process                                                                 |
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| Percentage of patients treated with psychostimulant medication for the diagnosis of ADHD whose medical record contains documentation of a follow-up visit at least twice a year. | This measure is used to assess the percentage of patients treated with psychostimulant medication for the diagnosis of attention deficit hyperactivity disorder (ADHD) whose medical record contains documentation of a follow-up visit at least twice a year.  
**Numerator Statement:** Number of medical records of attention deficit hyperactivity disorder (ADHD) patients on psychostimulant medication with documentation of at least two follow-up visits within the previous year  
**Denominator Statement:** Total number of attention deficit hyperactivity disorder (ADHD) patients on psychostimulant medication whose medical records are reviewed | Process |
| Follow-up care for children prescribed ADHD medication (ADD) -- initiation phase. | This measure is used to assess the percentage of members 6 to 12 years of age with an ambulatory prescription dispensed for attention-deficit/hyperactivity disorder (ADHD) medication who had one follow-up visit with a practitioner with prescribing authority during the 30-day initiation phase.  
**Numerator Description:** Members from the denominator with one face-to-face outpatient, intensive outpatient or partial hospitalization follow-up visit with a practitioner with prescribing authority, within 30 days after the Index Prescription Start Date  
**Denominator Statement:** Members 6 years as of March 1 of the year prior to the measurement year to 12 years as of February 28 of the measurement year who were dispensed an attention deficit/hyperactivity disorder (ADHD) medication during the 12-month Intake Period | Process |
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| Follow-up care for children prescribed ADHD medication (ADD) -- continuation and maintenance (C&M) phase. (Source: NCQA) | This measure is used to assess the percentage of members 6 to 12 years of age with an ambulatory prescription dispensed for attention-deficit/hyperactivity disorder (ADHD) medication who remained on the medication for at least 210 days and who, in addition to the visit in the initiation phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the initiation phase ended. 

**Numerator Statement:** Members from the denominator who had an initiation phase visit in the first 30 days and had at least two follow-up visits from 31 to 300 days after the Index Prescription Start Date

**Denominator Statement:** Members 6 years as of March 1 of the year prior to the measurement year to 12 years as of February 28 of the measurement year who were dispensed an attention deficit/hyperactivity disorder (ADHD) medication during the 12-month Intake Period, who remained on the medication for at least 210 days | Process                                           |
| Screening using standardized screening tools for potential delays in social and emotional development (Source: AHRQ) | **Numerator Statement:** Number of children screened for social and emotional development

**Denominator Statement:** Children ages 0-12 mo., 12-24mo., or 24-36 mo., who had a WCV/other primary care visit during the measurement year who were enrollees in Medicaid/CHIP | Process                                           |
| Follow-up care for children prescribed attention-deficit/hyperactivity disorder (ADHD) medication (Continuation and Maintenance Phase) (Source: AHRQ) | **Numerator Statement:** Children ages 6-12 as of the index prescription state date, who in addition to the visit in the Initiation Phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the Initiation Phase ended

**Denominator Statement:** Children ages 6-12 as of the index prescription start date, with an ambulatory prescription dispensed for ADHD medication, who remained on the medication for at least 210 days. Continuous Enrollment ---120 days prior to the Index Prescription Start Date (IPSD) and 300 days after the IPSD | Process                                           |
References

1) Institute for Clinical Systems Improvement (ICSI). Diagnosis and management of attention deficit hyperactivity disorder in primary care for school-age children and adolescents. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2010 Mar. 72 p.
