

## Initiation and Engagement of Substance Use Disorder Treatment (IET)

[Link to finalized OHA technical specifications](#)

**Who:** Members aged 18 years and older\* with a new SUD episode between November 15, 2024–November 14, 2025. An episode is considered “new” if the member has not had a diagnosis of, or received medication for, alcohol or other drug use in the previous 194 days.

**\*Note on incentivized components:** only the adult 18 and above age groups and its ‘total cohort’ rate is incentivized. CCOs must meet benchmark or improvement target for both Initiation and Engagement for ages 18 and above to achieve measure.

**Why:** Access to treatment for substance use disorder is a critical aspect of a person’s health and their journey through recovery. The IET metric is a tool to encourage coordination across the network of care providers for substance use treatment and helps ensure people have timely access to appropriate care.

**What:** Two rates are reported for this measure: Initiation and Engagement. Both measures use the same denominator.

- **Initiation** – For members with a new episode of alcohol or other drug use (diagnosis on a claim with no other diagnosis in the previous 194 days), this metric measures the percentage of those who initiated treatment within **14 days** through either medication dispensing or a SUD visit with a provider.
  - Initiation of treatment can be on the same day as the new alcohol or other drug use diagnosis if the services are with different providers.
- **Engagement** - For members with a new episode of alcohol or other drug use (diagnosis on a claim with no other SUD diagnosis in the previous 194 days), this metric measures the percentage of those who had **two** treatment events, either medication dispensing or a SUD visit with a provider, within **34 days** from their initial treatment event.
  - If treatment was initiated through a medication dispensing event, only one of the two required engagement events can be through medication and the other must be through a SUD visit with a provider.
  - Both engagement events can be on the same day if the services are with different providers, the exception being if one event is for medication-assisted treatment (MAT) there is no requirement that the second event be with a different provider.

**How:** There are over 200 codes that count toward numerator criteria through a visit with a provider. In general, initiation and engagement events can be through medication dispensing events, inpatient, outpatient (without lab claims), observation, or telemedicine visits.

**Note on telehealth:** This measure is telehealth eligible. For further information, the Health Evidence Review Commission (HERC) has provided this [guideline](#) on telehealth services.

Here are some ideas to improve IET performance and member care:

- Increase utilization of medication to treat AUD and OUD
- Save common codes under provider preferences
- Monitor IET cohort in Collective and perform outreach to identified members
- Increase care coordination with Specialty Behavioral Health providers
- Use person-centered language
- Utilize Behavioral Health Clinicians (BHC) for SBIRT screenings; screenings are the start of initiation/identification (BHC can screen during BHC and PCP appointments)

**Note on Methadone:** Methadone is not included in the medication lists for this measure because Methadone for opioid use disorder does not show up in pharmacy claims data. However, Methadone for opioid use disorder treatment **does count as treatment for this metric** and would be captured on medical claims.

*Please reach out to your Quality Improvement Analyst or Innovation Specialist for additional support or technical assistance.*

**Inclusions:** Refer to technical specifications “Steps for identifying new episodes of SUD during Intake Period.”

**Exclusions:** The following criteria remove members from the denominator:

- Members in hospice or using hospice services anytime during the measurement year.
- Members who died during the measurement year.
- Members under the Basic Health Plan (BHP), Cover All Kids (CAK), and Healthier Oregon Program (HOP) anytime during the measurement year.

**Continuous Enrollment:** Members must be continuously enrollment for 242 days: 194 days prior to the qualifying SUD episode date through 47 days after the qualifying date.

## Frequently Asked Questions: Initiation and Engagement of SUD Treatment (IET)

**Q: Is tobacco use included in this metric?**

**A:** No. The OHA specifications do not include tobacco use.

**Q: Is cannabis use included in this metric?**

**A:** Yes. The OHA specifications do include cannabis use. SUD episodes with cannabis use are categorized as other use disorder.

**Q: What is considered as “other drugs” in this metric?**

**A:** The IET measure is looking for substance use disorder diagnosis including alcohol, opioid and other drugs such as cocaine, cannabis, methamphetamine, hypnotics, sedatives, inhalants, etc. See OHA specifications for full list.

**Q: How are initial alcohol or other drug use diagnoses identified?**

**A:** Alcohol or other drug use disorder diagnosis codes are identified using claims for services that occurred in the following encounter types:

- Outpatient visits (excluding lab claims)
- Telehealth
- E-visit or virtual check-in
- Intensive outpatient visits
- Partial hospitalizations
- Withdrawal Management visits
- ED visits or Hospital observations
- Acute or non-acute inpatient admits
- Online assessments
- Opioid treatment services

## Additional Resources

**CareOregon Guidance:** CareOregon provides information on their website:

- [CareOregon - Quality Metrics Toolkit](#)

**Medicaid Guidance:** This measure is in the CMS Medicaid Adult Core Set; the detail manual and Value Set Dictionary can be found on the CMS resource page:

- [Adult Core Set Reporting Resources | Medicaid](#)

**Performance Measure Set:**  CCO Incentive Metric  Medicare Star Measure  
**Quality Measurement Type:**  Structure  Process  Outcome  Patient Experience  
**Data Type:**  Claims  Chart Documentation  eCQM  Survey  Other: ALERT IIS Registry  
**Benchmark:** (MY2022 National Medicaid 75th percentile)  
Initiation for age 18+: 49.0%, with 2% improvement floor  
Engagement for age 18+: 18.8%, with 2% improvement floor