

Behavioral and Physical Health and Aging
Services Administration
Bureau of Specialty Behavioral Health
Services

MEASURE SPECIFICATION:

***Adherence to Antipsychotic Medications for Individuals with
Schizophrenia (SAA-AD)***

FY 2025



Adherence to Antipsychotic Medications for Individuals with Schizophrenia

MEASURE

The percentage of adults aged 18 and older with Schizophrenia or schizoaffective disorder who were dispensed and remained on an antipsychotic medication for at least 80 percent of their treatment period (SAA-AD)

MINIMUM STANDARD

The minimum standard is 62%.

ELIGIBLE POPULATION

Age	Ages 18 and older as of January 1 of the measurement year.
Continuous Enrollment	The measurement year.
Allowable Gap	There is no more than one gap in enrollment of up to 45 days during the measurement year. To determine continuous enrollment for a beneficiary for whom enrollment is verified monthly, the beneficiary may not have more than a 1-month gap in coverage (e.g., a beneficiary whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).
Anchor Date	December 31 of the measurement year
Event/Diagnosis	<p><u>Step 1</u> – Identify beneficiaries with schizophrenia or schizoaffective disorder as those who met at least one of the following criteria during the measurement year.</p> <ul style="list-style-type: none">• At least one acute inpatient encounter with any diagnosis of schizophrenia or schizoaffective disorder.• At least two visits in an outpatient, intensive outpatient, partial hospitalization, ED, or nonacute inpatient setting, on different dates of service, with any diagnosis of schizophrenia or schizoaffective disorder. Please refer to the core set guidelines for the Schizophrenia Value Set. <p><u>Step 2</u> – Required Exclusions Exclude beneficiaries who met any of the following during the measurement year.</p>
Exclusions	<p>Exclude beneficiaries who met any of the following during the measurement year:</p> <ul style="list-style-type: none">• A diagnosis of dementia (Dementia Value Set).• Did not have at least two antipsychotic medication dispensing events.• Beneficiaries in hospice or using hospice services anytime during the measurement year.• Beneficiaries who died at any time during the measurement year.• Beneficiaries aged 81 and older as of December 31 of the measurement year with at least two indications of frailty and different dates of service during the measurement year.

	For detailed exclusion criteria, please refer to the core set guidelines.
ADMINISTRATIVE SPECIFICATIONS	
Denominator	The eligible population.
Numerator	The number of beneficiaries who achieved a PDC of at least 80 percent for their antipsychotic medications during the measurement year. To achieve this, please adhere to the 5-step process outlined in the Adult Core Set to identify compliance in the numerator.
DATA ELEMENTS	

Data is extracted from the Medicaid Data Warehouse.

Please refer to the Core Set of Adult Health Care Quality Measures for Medicaid (Adult Core Set) Technical Specifications and Resource Manual for Federal Fiscal Year 2024 Reporting for the current list of the specific codes and exclusions for this measure:

[Core Set of Adult's Health Care Quality Measures for Medicaid \(Adult Core Set\) Technical Specifications and Resource Manual for Federal Fiscal Year 2024 Reporting \(Updated August 2024\)](#)

Specification Updated August 2024 Included: • Clarified the required exclusions for the measure. • Updated the number of occurrences required for the frailty cross-cutting exclusion; two indications with different dates of service are required.

*These specifications are a summary. The CMS Core Set specifications provide the full detail, and in the case of any differences between the summary and the CMS specifications, the CMS specifications should be considered the full specification.

[NCQA > HEDIS MY 2025 Medication List Directory](#)

The electronic specification from Health IT.gov is located on the eCQI resource center webpage at <https://ecqi.healthit.gov>

Month available in CC360	Month of Extract	Measurement Period
Dec 2024	Nov 2024	07/01/23 – 06/30/24
Mar 2025	Feb 2025	10/01/23 – 09/30/24
June 2025	May 2025	01/01/24 – 12/31/24
Sep 2025	Aug 2025	04/01/24 – 03/31/25

PROCESS

The plan-specific percentages will be electronically transmitted to each MHP and PIHP. Quarterly results will also be available via CC360.

MEASUREMENT FREQUENCY

Annually