

Measure ID: PP11

Measure Name/Title

Improvement Or Maintenance In Recovery For All Individuals Seen For Mental Health And/Or Substance Use Care

1. Descriptive Information

1.1 Measure Type

Outcome: Patient-Reported Outcome-based Performance Measure (PRO-PM)

1.2 National Quality Strategy (NQS) domain

Effective Clinical Care

1.3 Meaningful Measure Area

Prevention, Treatment, and Management of Mental Health

1.4 Brief Description of Measure

The percentage of individuals aged 18 and older with a mental and/or substance use disorder who demonstrated improvement or maintenance in recovery (as defined, prioritized, and/or reported by the individual) based on results from the 24-item Recovery Assessment Scale (RAS-R) 150 to 210 days after an index assessment.

2. Measure Specifications

2.1 Data Dictionary, Code Table, or Value Sets

See Appendix A for data elements.

2.2 For an instrument-based measure

See Appendix B for a copy of the 24-item Recovery Assessment Scale (RAS-R).

2.3 Numerator Statement

Improvement or maintenance: Improvement is defined as any positive improvement in score at the follow-up assessment compared to the index assessment. Maintenance is defined as no change in score at the follow-up assessment compared to the index assessment.

2.4 Numerator Details

24-item Recovery Assessment Scale (RAS-R): The 24-item Recovery Assessment Scale (RAS-R) assesses recovery from an individual's perspective with an emphasis on hope and self-determination. The domains covered in the tool are personal confidence, willingness to ask for help, goal orientation, reliance on others, and not feeling dominated by symptoms. Response options include: 1 = Strongly Disagree, 2 = Disagree, 3 = Not Sure, 4 = Agree, and 5 = Strongly Agree. The RAS-R is scored by summing the number ranking of the response for each of the 24 questions. The minimum score for the RAS-2 is 24 with a maximum score of 120. A higher RAS-24 score indicates better recovery.

Improvement or maintenance: Improvement is defined as an increase in RAS-R score at the follow-up assessment compared to the index assessment. Maintenance is defined as no change in RAS-R score at the follow-up assessment compared to the index assessment.

Follow-up Assessment: The follow-up assessment is the RAS-R assessment completed at an encounter 150 to 210 days after the encounter with the index assessment, within the 14-month measurement period. If there are multiple assessments completed within the follow-up time window (i.e., a 61-day window, beginning on the 150th day after the index assessment), the assessment that will be counted as the follow-up is the last assessment completed during the window.

Index Assessment: Defined in denominator details (Section 2.7)

Measurement Period: A 14-month period.

2.5 Denominator Statement

Adults aged 18 years or older with a mental health and/or substance use disorder and an index outpatient mental health encounter with an assessment completed using the RAS-R during the denominator identification period.

2.6 Denominator Details

To be included in the denominator cohort, patients must meet the following inclusion criteria:

1. All adults aged 18 or older as of the date of the index outpatient mental health encounter.
2. Documented diagnosis of mental health and/or substance use disorder during denominator identification period or in the 12 months prior.
 - a. Mental health and/or substance use disorder:
 - i. ICD-10 codes F01-99
 - b. Denominator identification period:

- i. The denominator identification period is the 12-month window starting 7 months prior to the measurement period through 7 months prior to the end of the measurement period.
- 3. Index outpatient mental health encounter during the denominator identification period.
 - a. CPT codes: 99205, 99211-99215, 90791, 90792, 99241-99245, 90832, 90834, 90837, 90839, 90847, 90853, 90845, 96110, 96127, 99441-99443, 90865, 90867, 90868, 90869, 90870, 90875, 90876, 90880, 96118, 90901, 90911
 - b. If there are multiple assessments during the denominator identification period, the assessment that will be counted as the index is the first assessment completed during the denominator identification period.
- 4. Completed a RAS-R within 24 hours of the index encounter.

2.7 Denominator Exclusions

The patient has a diagnosis of an incapacitating mental health disorder during the denominator identification period or patient death occurred during the measurement period.

2.8 Denominator Exclusion Details

Patients will be excluded from the denominator if:

- 1. The patient has a documented diagnosis of any mental health condition with a high likelihood of impaired functional capacity, motivation, and/or altered ability to use an assessment tool during denominator identification period or in the 12 months prior.
 - a. *Rationale: These conditions can impact the accuracy of results of validated tools.*
 - i. F00-09: Mental disorders due to known physiological conditions (e.g., delirium, dementia)
 - ii. F70-79: Intellectual disabilities
 - iii. F80-89: Pervasive and specific developmental disorders
- 2. Patient deceased during the measurement period

2.9 High Priority Status
Yes

2.10 Type of Score
rate/proportion

2.11 Telehealth
Yes

2.12 Number of performance rates
1

2.13 Traditional vs. inverse measure
Traditional

2.14 Interpretation of Score
Better quality = higher score

2.15 Stratification Details/Variables

The measure will be stratified by age, sex, and major mental health comorbidity.

2.16 Risk Adjustment Type

stratification by risk category/subgroup

2.17 Calculation Algorithm/Measure Logic

STEP 1: Define the initial denominator population. Identify all individuals aged 18 and older with a mental health and/or substance use disorder and an encounter with an index baseline assessment completed using the RAS-R during the denominator identification period as defined in section 3.8.

STEP 2. Define the final denominator population. Apply the denominator exclusion criteria to all the patients from the initiation denominator population as defined in section 3.9.

STEP 3: Define the initial numerator population. The subset of patients from the denominator who experience improvement or maintenance in recovery, as demonstrated by results of a follow-up assessment using the RAS-R in 150 to 210 days after the index assessment as defined in section 3.6.

STEP 4: Define the final numerator population. Apply the numerator exclusion criteria to all the patients from the initial numerator population as defined in section 3.7.

STEP 5: Calculate the performance score. Divide the final numerator population (Step 4) by the number of patients in the denominator population (step 2) and multiply by 100 for each provider and clinical site. The outcome measure performance is reported as a percentage: XX out of 100. Patients with an index assessment that do not have a follow-up assessment remain in the denominator population.

2.18 Survey/Patient-Reported Data

Patient will complete tool within 23 hours of encounter using a paper-based or electronic tool.

2.19 Data Source

- patient medical records (i.e., paper-based or electronic)
- registries
- patient-reported data and surveys

2.20 Data Source or Collection Instrument

This measure is intended to be collected via registry or EHR. There are 2 modes of data collection in the PsychPRO registry: 1) through the registry online portal components (i.e., an electronic portal whereby information is entered directly by either the patient or the clinician) and 2) via direct electronic integration with participating providers' EHRs, practice management systems and/or other patient reported outcome (PRO) applications. Data from any 1 practice may comprise information: (i) solely from EHRs, (ii) solely from the online portals, or (iii) from both online portals and EHRs.

- 2.21 Data Source or Collection Instrument (Reference)
- Patient medical records (i.e., paper-based or electronic)
 - Registries
 - RAS-R: [Recovery Assessment Scale \(RAS-R\)](#)
- 2.22 Level of Analysis
- individual clinician
 - group/practice
- 2.23 Care Setting
- clinician office/clinic
 - behavioral health: Outpatient

Figure 1. Measure specification logic



Appendix A. Data Elements

Data Element	Description
patient_sex	Administrative sex of the patient
patient_age	Derived from patient's date-of-birth in years and encounter date
patient_deceased	If the patient is deceased (Y/N) during the measurement period, derived from patient's date-of-death relative to measurement period
enc_code	Codes used to indicate type of encounter or intervention delivered on encounter date (contains CPT, HCPCS, LOINC, SNOMEDCT)
enc_date	Encounter data
diagnosis_code	Code that describes the problem, condition or diagnosis billed during the encounter or from patient's problem list (contains ICD-10 only)
diagnosis_date	Date diagnosis ascribed to this patient
scale_date	Date the patient completed the patient reported assessment scale
scale_name	Patient reported assessment scale name (contains various assessment tools)
total_score	Patient reported assessment scale subsection or total score

Element	Validity Test Logic
patient_age	patient_age >=18 >= & patient_age <= 100
patient_sex	patient_sex %in% c("Male", "Female", "Other")
patient_deceased	patient_deceased %in% c(TRUE, FALSE)
enc_codes*	str_detect(enc_codes, paste(cpt_codes, collapse = " ")) == TRUE
enc_date	enc_date >= "2018-01-01" & enc_date <= "2021-03-31"
diagnosis_code	str_detect(diagnosis_code, "^F") == TRUE
diagnosis_date	diagnosis_date >= "2018-01-01" & diagnosis_date <= "2021-03-31"
scale_name	scale_name %in% c("RAS24")
scale_date	scale_date >= "2018-01-01" & scale_date <= "2021-03-31"
total_score	scale_name %in% c("RAS24") & in_range(total_score, min = 24, max = 120)

* CPT codes tested = 99201-99205, 99211-99215, 90791, 90792, 99241-99245, 90832, 90834, 90837, 90839, 90847, 90853, 90845, 96110, 96127, 99441-99443, 90865, 90867, 90868, 90869, 90870, 90875, 90876, 90880, 96118, 90901, 90911

Appendix B. Instrument

Recovery Assessment Scale (24-item)

Name: _____

Date: _____

INSTRUCTIONS: Below is a list of statements that describe how people sometimes feel about themselves and their lives. Please read each one carefully and circle the number to the right that best describes the extent to which you agree or disagree with the statement. Circle only one number for each statement and do not skip any items.

	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree
1. I have a desire to succeed	1	2	3	4	5
2. I have my own plan for how to stay or become well	1	2	3	4	5
3. I have goals in life that I want to reach	1	2	3	4	5
4. I believe that I can meet my current personal goals	1	2	3	4	5
5. I have a purpose in life	1	2	3	4	5
6. Even when I don't care about myself, other people do	1	2	3	4	5
7. Fear doesn't stop me from living the way I want to	1	2	3	4	5
8. I can handle what happens in my life	1	2	3	4	5
9. I like myself	1	2	3	4	5
10. If people really knew me, they would like me	1	2	3	4	5
11. I have an idea of who I want to become	1	2	3	4	5
12. Something good will eventually happen	1	2	3	4	5
13. I'm hopeful about my future	1	2	3	4	5
14. I continue to have new interests	1	2	3	4	5
15. Coping with my mental illness is no longer the main focus of my life	1	2	3	4	5
16. My symptoms interfere less and less with my life.	1	2	3	4	5
17. My symptoms seem to be a problem for shorter periods of time each time they occur	1	2	3	4	5
18. I know when to ask for help	1	2	3	4	5
19. I am willing to ask for help	1	2	3	4	5
20. I ask for help when I need it	1	2	3	4	5
21. I can handle stress	1	2	3	4	5
22. I have people I can count on	1	2	3	4	5
23. Even when I don't believe in myself, other people do	1	2	3	4	5
24. It is important to have a variety of friends	1	2	3	4	5
TOTAL					