

State Opioid Response (SOR) Tier Award Program (TAP) Multi Year Targeted Project (MYTP) Data Definitions

This document contains definitions for terms describing data reporting expectations for SOR TAP MYTP subrecipients. All MYTP subrecipients are required to report on the universal measures. This document provides definitions to support the development of unique measures but does not provide definitions for specific performance measures, given that those are unique to each subrecipient.

	Universal Measures – How Much						
Naloxone	SDOH Referral	MOUD	MOUD Referral	Denials	Medicaid Enrollment	Intervention	GPRA
<p>Number of naloxone prescriptions written and provided to TAP MYTP clients in the <u>last month</u>.</p> <p><i>Note: this measure specifies the number of prescriptions and NOT the number of naloxone kits. Please report the number of prescriptions.</i></p>	<p>Of those that screened positive for an SDOH in the <u>last month</u>, the unduplicated number of those who were referred to community partners.</p>	<p>Number of unduplicated clients who were prescribed or administered each of the following MOUD in the <u>last month</u> through this TAP MYTP-funded project.</p> <ul style="list-style-type: none"> • Buprenorphine • Long-acting, injectable naltrexone • Methadone <p><i>Note: oral naltrexone is not FDA-approved for the treatment of OUD; SOR funds cannot be used to pay for it.</i></p>	<p>Number of unduplicated clients who were referred internally (within your agency) and externally (outside your agency) to MOUD treatment in the <u>last month</u>.</p>	<p>Number of clients who were referred to your SUD service in the <u>last month</u> and were denied treatment, by reason.</p>	<p>In the <u>last month</u>, the number of times that clients were linked to Medicaid enrollment services.</p>	<p>Number of unduplicated clients receiving intervention in the <u>last month</u>.</p>	<p>The Center for Substance Abuse Treatment (CSAT) Government Performance Results and Modernization Act (GPRA) Client-Level data collection at baseline, follow-up, and discharge is required for individuals receiving treatment AND/OR recovery support services.</p>
Definitions							
<p>TAP MYTP clients: individuals receiving and/or participating in TAP MYTP-funded services</p> <p>SDOH: social determinants of health, also known as social drivers of health, are non-medical factors that influence health and health outcomes (e.g., education, employment, environment, housing).</p> <p>Community partners: an organization or program that can provide direct support for identified SDOH needs.</p> <p>MOUD: provision, through prescription or direct administration, of an FDA-approved medication for opioid use disorder (i.e., methadone, buprenorphine, and injectable naltrexone).</p> <p>Prescribed: a clinician provided a prescription to a client for an FDA-approved medication (i.e., limited to buprenorphine or injectable naltrexone since</p>							

methadone is directly dispensed for opioid use disorder from an opioid treatment program (OTP)).

Administered: a clinician directly gave a client at least one injectable dose of an FDA-approved medications (i.e., methadone, buprenorphine, or naltrexone).

Denied treatment: a prospective client, routed through DTRN, is denied acceptance as noted in DTRN.

Linked to Medicaid enrollment services: when a client is referred to an individual or program that is capable of enrolling the client in Medicaid.

Receiving intervention: when the TAP MYTP program provides a clinical intervention (i.e., evidence-based practice, promising practice, or innovation) to a client. Examples:

- Use of MI in individual and group sessions to support initiation and continuation of MOUD
- Peer-led recovery support to help maintain engagement in treatment
- Evidence based outpatient therapy sessions such as CBT or DBT
- Motivational interviewing to engage client in treatment plan activities
- Evidence based group therapy sessions
- Case management activity to connect an individual with an appropriate service
- Provision of a medication for opioid use disorder, including coaching on its use and impact on treatment

Baseline: first or initial assessment (often called “intake”) that a client participates in as part of the TAP MYTP program. GPRA is expected to be performed within 3 days of initial contact for Inpatient/Residential Treatment Services, and within 4 days for Outpatient Treatment Services.

Follow-up: an assessment that is conducted a period of time after the baseline was administered. GPRA is expected to be performed 6 months after the baseline was administered. The window for 6-month follow-ups opens one month before and two months after the 6-month mark. Follow-ups are also due regardless of discharge status.

Discharge: when a client has been discharged, transferred, or has otherwise left the program.

Process Measures – How Well

Integrated Care Plans	Time to Treatment Initiation	Engagement in Treatment
Percentage of TAP MYTP clients to date with comprehensive care plans that include both medical and behavioral health components	Percentage of TAP MYTP clients to date who initiate SUD treatment within 14 days of a SUD diagnosis .	Rate of TAP MYTP clients to date who had two or more additional SUD services within 30 days of the initiation of a SUD treatment encounter.
Definitions		
Numerator: the unduplicated number of TAP MYTP clients served <u>to date</u> with integrated care plans Denominator: total unduplicated number of TAP MYTP clients served <u>to date</u> Medical: references to physical health symptoms or conditions Behavioral health: references to mental health and/or substance use symptoms or disorders To date: from project inception to end of previous month	Numerator: the unduplicated number of TAP MYTP clients served <u>to date</u> who initiated SUD treatment within 14 days of a SUD diagnosis Denominator: total unduplicated number of TAP MYTP clients served <u>to date</u> Initiate: receive any SUD service Diagnosis: newly documented diagnosis of a SUD To date: from project inception to end of previous month	Numerator: the unduplicated number of TAP MYTP clients <u>to date</u> who had two or more additional SUD services within 30 days of the initiation of a SUD treatment encounter. Denominator: total unduplicated number of TAP MYTP clients served <u>to date</u> Additional SUD services: receive any SUD services following the initiating service To date: from project inception to end of previous month

Outcome Measures – Is Anyone Better Off				
Hospital Admission Rates- TAP clients	Hospital Admission Rates- All clients	Emergency Department Utilization- TAP clients	Emergency Department Utilization- All clients	Proposed by Sub-grantee
<p>Rate of TAP MYTP clients who were admitted to any hospital for any reason to date.</p> <p><i>Note: This measure will be required following the launch of Delaware Treatment and Referral Network's DTRN360 behavioral health coordination platform.*</i></p>	<p>Rate of all clients who were admitted to any hospital for any reason to date.</p> <p><i>Note: This measure will be required following the launch of Delaware Treatment and Referral Network's DTRN360 behavioral health coordination platform.*</i></p>	<p>Rate of TAP MYTP clients who were treated at the Emergency Department for any reason to date.</p> <p><i>Note: This measure will be required following the launch of Delaware Treatment and Referral Network's DTRN360 behavioral health coordination platform.*</i></p>	<p>Rate of all clients who were treated at the Emergency Department for any reason to date.</p> <p><i>Note: This measure will be required following the launch of Delaware Treatment and Referral Network's DTRN360 behavioral health coordination platform.*</i></p>	<p>Subrecipients will select a unique performance measure to assess if their clients are “better off” following participation in the TAP MYTP program. The performance measure should align with the goals and programming of each project and must include a target/benchmark, measurement tool or instrument, and measurement interval.</p>
Definitions				
<p>Numerator: TAP MYTP unduplicated count of clients admitted to any hospital for any reason since project’s inception. Denominator: unduplicated count of all TAP MYTP clients</p> <p>To date: from project inception to end of previous month</p>	<p>Numerator: unduplicated count of clients served by the SUD program who were admitted to any hospital for any reason Denominator: unduplicated count of all clients served by the SUD program</p> <p>To date: from project inception to end of previous month</p>	<p>Numerator: TAP MYTP unduplicated count of clients treated at the Emergency Department for any reason Denominator: Unduplicated count of all TAP MYTP clients</p> <p>To date: from project inception to end of previous month</p>	<p>Numerator: Unduplicated count of clients served by the SUD program who were treated at the Emergency Department for any reason Denominator: Unduplicated count of all clients served by the SUD program</p> <p>To date: from project inception to end of previous month</p>	<p>Performance measure: the outcome metric that will be measured for each client to assess changes and/or improvement in quality of life (e.g., reduced substance use, improved social determinants of health) following engagement in TAP MYTP program. Target/benchmark: the goal for change and/or improvement in the selected performance measure among clients assessed (e.g., 60% of clients show improvement in reduced substance use). Tool: the validated measurement tool or instrument that is used to assess clients’ changes in outcomes for the selected performance measure. Measurement interval: the frequency at which clients will be assessed using the selected measurement tool</p>

* DSAMH will coordinate with subrecipients to ensure they are informed and prepared for the launch of DTRN 360. Subrecipients will receive onboarding support and training to access the platform and understand how to utilize the data for these metrics. Additional guidance and timelines will be provided as implementation progresses.