

## DRAFT Measure #1: Accurate Diagnosis of ADHD

### *Attention Deficit Hyperactivity Disorder (ADHD)*

#### A. DESCRIPTION

Percentage of patients aged 4 through 18 years at initial diagnosis of Attention Deficit Hyperactivity Disorder (ADHD), for whom ADHD was diagnosed appropriately.

#### B. ELIGIBLE POPULATION

Age	Age 4 through 18 at diagnosis of ADHD
Continuous Enrollment	12 months prior to ADHD diagnosis
Allowable Gap	No allowable gap during continuous enrollment period
Anchor Date	Date of ADHD diagnosis at the physician visit
Event/Diagnosis	Any patient age 4 through 18 with an ADHD diagnosis code (314.0) at a physician visit (see Table 1 for list of acceptable codes) with no prior diagnosis of ADHD in the look back period. Patients should have an assessment code (see Table 2 for list of assessment codes) at the office visit.
Exclusion Criteria	None

#### C. DATA SOURCE

Administrative Claims Data

1. Inpatient
2. Outpatient

#### D. Process

Step 1: Identify all patients age 4 through 18 with an ADHD diagnosis (314.0) at a physician visit. Remove patients with any ADHD diagnosis code during the look back period (the 12 month period before the anchor date) and any patients with psychiatric conditions. This group of patients is the measure denominator.

Step 2: For these patients, identify all assessment services (see Table 2) with an ADHD diagnosis code at the anchor event. Patients with an appropriate assessment code during the visit are placed in the numerator.

**Table 1: Evaluation and Management Codes**

Description	CPT Codes
Office or Other Outpatient Services	99201–99215
Hospital Observation Services	99217–99220
Hospital Inpatient Services	99221–99239
Consultations	99241–99275
Critical Care and Intensive Care Services	99289–99298
Nursing Facility, Domiciliary and Home Services	99301–99350
Case Management Services and Care Plan Oversight Services	99361–99380
Preventive Medicine Services	99381–99429
Other E&M Services	99450–99456, 99354–99357

**Table 2: Assessment Codes**

Description	CPT Codes
Developmental testing; extended (includes assessment of motor, language, social, adaptive and/or cognitive functioning by standardized developmental instruments) with interpretation and report	96110, 96111
Health and behavior assessment (e.g., health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; initial assessment	96150-96155
Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination	99201-99205
Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician.	99211-99215

*Disclaimer: This is only an example of how a specification could be constructed from administrative claims data for this measure*