
Why it matters?

Antipsychotic medications are often prescribed for nonpsychotic conditions for which psychosocial interventions are considered first-line treatment.

Appropriate, first-line psychosocial interventions may be underutilized, and children and adolescents may unnecessarily incur the risks associated with antipsychotic medications.¹

Measure Description

The percentage of children and adolescents 1–17 years of age who had a new prescription for an antipsychotic medication and had documentation of psychosocial care as first-line treatment.

Documentation of psychosocial care in the 121-day period from 90 days prior to the earliest prescription start date through 30 days after.

Best Practices

- Psychosocial care includes structured counseling, case management, care-coordination, psychotherapy and relapse prevention.
- Ensure psychosocial care included in the treatment plan before writing a new prescription for an antipsychotic medication.
- When prescribed, antipsychotic medications should be part of a comprehensive, multi-modal plan for coordinated treatment that includes psychosocial care. Psychosocial care (behavioral interventions, psychological therapies and skills training, etc) is the recommended first-line treatment option for children and adolescents diagnosed with nonpsychotic conditions such as ADD and disruptive behaviors.
- Ensure children and adolescents receive a psychosocial care appointment at least 90 days prior to prescribing medication or within 30 days of starting an initial prescription if there is an urgent need for medication.
- Involve parents/guardians and/or significant others regarding the importance of treatment, medications, and attending psychosocial care appointments.
- Establish an initial baseline and assess appropriate management of side effects of antipsychotic medication therapy as needed.
- Encourage communication and coordinated care between behavioral health and primary care teams.
- Assess the need for Care Management or Care Coordination and refer if necessary.
- Utilize telehealth options if needed.
- Send appointment reminders and maintain appointment availability for follow up appointments.
- Identify and address any barriers to member keeping appointment.
- Provide timely submission of claims with correct service coding and diagnosis.
- Ensure progress notes are complete and accurate.

IPSD Definition

Index Prescription Start Date (IPSD): The earliest prescription dispensing date for an antipsychotic medication between January 1 – December 31 of the measurement year.

Psychosocial care must occur in the 121-day period from 90 days prior to the IPSD through 30 days after the IPSD (by December 31 of the measurement year) to count towards compliance.

Qualifying Medications

Antipsychotic Medications

Description	Prescription
Miscellaneous Antipsychotic Agents	Aripiprazole, Asenapine, Brexpiprazole, Cariprazine, Clozapine, Iloperidone, Loxapine, Lurasidone, Molindone, Olanzapine, Haloperidol, Paliperidone, Pimozide, Quetiapine, Risperidone, Ziprasidone
Long-acting injections	Aripiprazole, Fluphenazine decanoate, Haloperidol decanoate, Olanzapine, Paliperidone palmitate, Risperidone, Aripiprazole lauroxil
Phenothiazine Antipsychotics	Chlorpromazine, Fluphenazine, Perphenazine, Thioridazine, Trifluoperazine
Thioxanthenes	Thiothixene

Antipsychotic Combination Medications

Description	Prescription
Psychotherapeutic combinations	Perphenazine-amitriptyline, Fluoxetine-olanzapine

Psychosocial Visit Codes

Code System	Code
CPT	90832 90845
	90833 90846
	90834 90847
	90836 90849
	90837 90853
	90838 90875
	90839 90876
	90840 90880

Code System	Code
HCPCS	G0176 H0037 H2013 S9484
	G0177 H0038 H2014 S9485
	G0409 H0039 H2017
	G0410 H0040 H2018
	G0411 H2000 H2019
	H0004 H2001 H2020
	H0035 H2011 S0201
	H0036 H2012 S9480

¹ Use of first line psychosocial care for children and adolescents on anti-psychotics. NCQA. (2023, January 23). <https://www.ncqa.org/hedis/measures/use-of-first-line-psychosocial-care-for-children-and-adolescents-on-anti-psychotics/>