



OISE Outcomes

The reporting period covers six months, from July 1 to December 31, 2024. We anticipate subsequent reporting periods following the same semi-annual schedule: January 1 to June 30 and July 1 to December 31.

OISE members are committed to transparency and accountability, and believe that a fundamental way to demonstrate these values is through publicly reporting quality indicators that measure performance on key aspects of substance use treatment.

In 2024, our founding members published OISE's first round of metrics (to view, visit: sudexcellence.org). Since then, OISE members have worked with more than 50 providers, state policymakers, managed care plans, and advocates to collectively identify the common metrics below. We believe they are reflective of our commitment to service, safety, and quality.

Metrics Chosen Include:

- Are your members getting and using treatment?
- Are you using an EBP?
- How are your members doing?

This report includes self-disclosed information and outcomes from both OISE members, and non-OISE Members. Over the next two years, OISE will collaborate with all stakeholders to refine our metrics and reporting. While we recognize that these measures are not perfect proxies for all recovery outcomes, we are sure they mark an important starting point, since establishing processes for collecting and managing quality measures is essential to creating value in our healthcare delivery system.

Additionally, we believe that transparently reporting on these metrics will energize and facilitate a learning community through common objectives and aligned measures. This shared, collaborative approach enable us to exchange best practices and improve the entire system of care.

Please note that our members have different measurement methodologies and we cannot reliably compare performance across organizations until we have codified specifications to guide measure design and calculations. Nevertheless, we are reporting quality performance now to demonstrate its importance to serving patients in SUD treatment. The journey of continuous improvement towards better health and quality of life outcomes cannot wait.

OISE and Our Members Stand Ready to Partner with You

We see the above commitment as a starting point and we will continue to collaborate and refine our shared vision of high-quality addiction treatment.

Contact us: jonas@sudexcellence.org or 859-512-8691.



Organization Name			
Organization Type (one will be chosen)	(1) Comprehensive addiction / BH treatment provider (MAT and two or more additional SUD services)	(2) Healthcare provider who offers MAT and less than two additional same-day BH services (PCP and telehealth providers will likely fit here)	3) Peer support or other psychosocial provider who does not offer MAT
General Population Characteristics	Total Number	Age	Race/Ethnicity
	Mental Health	Polysubstance	Co-occurring Chronic Physical Health Conditions
	Income	Homelessness	Insurance Status
	HIV	Hep B	Hep C

PURPOSE	MEASURE	POPULATION	DESCRIPTION
Are your members getting and using treatment?	Access	OUD	Are same day appointments available for MAT and at least 2 additional BH services?
			Are same day appointments available for MAT and less than 2 additional BH services?
	Optional Narrative: Are same-day appointments available through telehealth?		
	Optional Narrative: If not same day, please provide one sentence description of treatment access availability.		
	Retention	All SUD	Percentage of adults with at least one outpatient SUD treatment visit or one MOUD prescription in each month for a minimum of four out of the past six months.
Are you using an EBP?	Use of MOUD	OUD	Percentage of adults with an OUD diagnosis who were prescribed MOUD at least once in the past six months.
	Optional Narrative: If desired, provide one sentence on use of EBPs (other than MAT) and context statement around population.		
	Use of MBT tools	All SUD	Percent of people who received at least one screening during the measurement period using PHQ, GAD7, BAM.
How are your members doing?	Tracking change in mood through the Patient Health Questionnaire 9 (PHQ-9)	All SUD	Average change in scores after 180 days.
	Tracking change in anxiety through the Generalized Anxiety Disorder (GAD-7)	All SUD	Average change in scores after 180 days.
	Tracking change in addiction (s) through the Brief Addiction Monitor (BAM)	All SUD	Average change in scores after 180 days.
	Placeholder for provider-specific measurement-based care tool	TBD - All SUD or OUD, etc.	Average change in scores after 180 days.

NON-OISE MEMBER #1 (PLACEHOLDER)

Organization Name			
Organization Type (one will be chosen)	(1) Comprehensive addiction / BH treatment provider (MAT and two or more additional SUD services)	(2) Healthcare provider who offers MAT and less than two additional same-day BH services (PCP and telehealth providers will likely fit here)	3) Peer support or other psychosocial provider who does not offer MAT
General Population Characteristics	Total Number	Age	Race/Ethnicity
	Mental Health	Polysubstance	Co-occurring Chronic Physical Health Conditions
	Income	Homelessness	Insurance Status
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PURPOSE	MEASURE	POPULATION	DESCRIPTION
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	Optional Narrative: If desired, provide one sentence on use of EBPs (other than MAT) and context statement around population.		
	Use of MBT tools	All SUD	Percent of people who received at least one screening during the measurement period using PHQ, GAD7, BAM.
How are your members doing?	Tracking change in mood through the Patient Health Questionnaire 9 (PHQ-9)	All SUD	Average change in scores after 180 days.
	Tracking change in anxiety through the Generalized Anxiety Disorder (GAD-7)	All SUD	Average change in scores after 180 days.
	Tracking change in addiction (s) through the Brief Addiction Monitor (BAM)	All SUD	Average change in scores after 180 days.
	Placeholder for provider-specific measurement-based care tool	TBD - All SUD or OUD, etc.	Average change in scores after 180 days.