

Medication Adherence for Cholesterol (Statins)

Who: Members 18 years and older with at least two prescription fills on unique dates of service for statin medication(s) who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication.

Why: One of the most important ways people with high cholesterol can manage their health is by taking medication as directed. It is important for the member, doctor, and the health plan to work together to manage the member's high cholesterol.

How: This measure is calculated using the number of member-years of enrolled beneficiaries (see below) with a proportion of days covered (PDC) at 80% or higher for statin cholesterol medication(s) during the measurement period.

- The measure is weighted based on the total number of member-years for each Medicare Part D member. For instance, if a member is enrolled for a three-month episode, does not have coverage for a six-month episode, then reenrolled for a three-month episode, they will count as "0.5 member years" in the rate calculation ($3/12 + 3/12 = 6/12$).

Statin Medications: Lovastatin, simvastatin, pravastatin, atorvastatin, fluvastatin, rosuvastatin.

Exclusions:

- Members in hospice or using hospice services.
- Members enrolled in an Institutional I-SNP during the measurement year.
- Members with at least one claim for ESRD or ESRD-related dialysis.
 - ICD-10: I12.0, I13.11, I13.2, N18.5, N18.6, N19, Z99.2

Cut Points: Cut points demonstrate the rates that need to be reached to achieve the specific star rating.

1 Star: Less than 84%

2 Star: 84% to less than 88%

3 Star: 88% to less than 90%

4 Star: 90% to less than 93%

5 Star: Greater than or equal to 93%

CMS National Average: 89%

Tips for Success:

- Always send a new prescription to the pharmacy if you changed the dose or frequency of a medication.
 - Members can appear non-adherent if the fill frequency doesn't match the days supply of the last paid claim.
- Write prescriptions for 100 day supply if member is stable on their medication.
 - 100-day supplies reduce the number of fills per year to achieve adherence to 3

- As community pharmacies continue to struggle with staffing shortages and limit hours of operation, less fills can help members stay adherent to their medications.
- Consider NOT limiting refills based on needed labs or follow up – utilize CareOregon pharmacist (pharmacyquality@careoregon.org) to access care coordination resources to overcome member barriers (forgetful, lack of transportation, etc.).
- Synchronize medication fills to reduce trips to the pharmacy.
 - CareOregon can collaborate with the filling pharmacy to do this work.
- For new members: refer to clinic-based or CareOregon pharmacist (pharmacyquality@careoregon.org) for “How’s it going?” outreach 30 days after new prescription.
 - Develop clinic pharmacist workflow to write extended supply prescription after this check-in.