

# HEDIS® Tips:

## Annual Monitoring for Patients on Persistent Medications (MPM)

### MEASURE DESCRIPTION

Adults 18 years of age and older who received at least 180 treatment days of ambulatory medication therapy for a select therapeutic agent during the measurement year and at least one therapeutic monitoring event for the therapeutic agent in the measurement year.

- *Annual monitoring for members on angiotensin converting enzyme (ACE) inhibitors or angiotensin receptor blockers (ARB):*

Need either a lab panel test **or** a serum potassium test and a serum creatinine test

- *Annual monitoring for patients on diuretics:*

Need a lab panel test **or** a serum potassium test and a serum creatinine test

### USING CORRECT BILLING CODES

#### Codes to Identify Therapeutic Monitoring

Description	CPT® Codes
Lab Panel	80047, 80048, 80050, 80053, 80069
Serum Potassium	80051, 84132
Serum Creatinine	82565, 82575

### HOW TO IMPROVE HEDIS SCORES

- ☐ Schedule a follow-up visit when prescribing a new medication to your patient within 30 days to assess how the medication is working. Schedule this visit while your patient is still in the office.
- ☐ Schedule two more visits in the 5 months after the first 30 days to continue to monitor your patient's progress.
- ☐ Discuss different treatment options if the patient has any issues with the medication (if possible) or switch to an equivalent medication (e.g., ACE-I to ARB). Keep in mind that some medication exchanges between classes (e.g., ACE-I to calcium channel blocker in a diabetic patient) may be necessary in a few situations, but may not be generally recommended as routine practice.
- ☐ Ensure the patient is able to easily obtain the medication (i.e. mail order prescription, if needed).
- ☐ Educate the patient on how they might be able to alleviate any medication side effects.