

HEDIS® Tip Sheet

Statin Therapy for Patients With Cardiovascular Disease (SPC)

Measure Description

The percentage of males 21-75 years of age and females 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria.

Two rates are reported:

1. *Received Statin Therapy.* Members who were dispensed at least one high-intensity or moderate-intensity statin medication during the measurement year.
2. *Statin Adherence 80%.* Members who remained on a high-intensity or moderate-intensity statin medication for at least 80% of the treatment period.

Product Lines: Commercial, Medicaid, Medicare

★ Medicare Star Measure Weight: 1

Codes Included in the Current HEDIS® Measure

Description	Code
IVD	ICD-10: I20.0, I20.2, I20.8, I20.81, I20.89, I20.9, I24.0, I24.8, I24.9, I25.xxx, I63.xxx, I65.xx, I66.xx, I70.xxx, I75.xxx, T82.855x, T82.856x
Inpatient Stay	UBREV: 0100, 0101, 0110-0114, 0116-0124, 0126-0134, 0136-0144, 0146-0154, 0156-0160, 0164, 0167, 0169-0174, 0179, 0190-0194, 0199, 0200-0204, 0206-0214, 0219, 1000-1002
Outpatient, Telehealth and Acute Inpatient	CPT: 98966-98968, 98970-98972, 98980, 98981, 99202-99205, 99211-99215, 99221-99223, 99231-99236, 99238, 99239, 99242-99245, 99251-99255, 99291, 99341, 99342, 99344-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99421-99423, 99429, 99441-99443, 99455-99458, 99483 HCPCS: G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250-G2252, T1015 UBREV: 0510, 0511, 0513-0517, 0519-0523, 0526-0529, 0982, 0983

Medications

Description	Prescription
High-intensity Statin Therapy*	Atorvastatin 40–80 mg, Amlodipine-atorvastatin 40-80 mg, Ezetimibe-simvastatin 80 mg, Rosuvastatin 20–40 mg, Simvastatin 80 mg
Moderate-intensity Statin Therapy*	Atorvastatin 10–20 mg, Amlodipine-atorvastatin 10-20 mg, Ezetimibe-simvastatin 20-40 mg, Rosuvastatin 5–10 mg, Simvastatin 20–40 mg, Fluvastatin 40–80 mg, Pravastatin 40–80 mg, Lovastatin 40 mg, Pitavastatin 1–4 mg,

*Please refer to the Molina Healthcare Drug Formulary at www.molinahealthcare.com for statin medications that may require prior authorization or step therapy.

Ways Providers can Improve HEDIS® Performance

- Evaluate all members with ASCVD that are taking a low-intensity statin to increase to a moderate or high-intensity statin, if clinically appropriate.
- Please note that patients only need to be dispensed a moderate or high-intensity statin once during the measurement year to be compliant for the Received Statin Therapy measure.

- Educate patients about the value of prescribed medications for managing cardiovascular disease and the importance of adherence throughout the entire treatment period.
- Schedule appointments to diagnose patients with ischemic vascular disease (IVD) and prescribe statin medication. Telehealth is allowed. *Note: two appointments are needed with an IVD diagnosis on different dates of service for the patient to be part of the measure.*
- Schedule appropriate follow-up with patients to assess if medication is taken as prescribed.
- Arrange the next appointment when the patient is in the office. If the patient misses a scheduled appointment, office staff should contact them to assess why appointment was missed.
- Provide smoking cessation and other interventions to eliminate or control risk factors.

Ways Health Plans can Improve HEDIS® Performance

- Educate members using culturally and linguistically appropriate language about the value of prescribed medications for managing cardiovascular disease and the importance of adherence throughout the entire treatment period.
- Identify members who meet Medication Therapy Management (MTM) criteria and refer them for MTM sessions. This includes members with at least eight (8) chronic medications and at least three (3) qualifying diagnoses. Send medication refill reminders via digital modalities (text message, email)
- Support members to get 90-day prescriptions
- Audit, identify, and educate top 10 providers who have not prescribed needed medications

Required Exclusions

- Members who use hospice services or elect to use a hospice benefit any time during the measurement year.
- Members who die any time during the measurement year.
- Members with a diagnosis of pregnancy during the measurement year *or* the year prior. Do not include laboratory claims (POS: 81).
- In vitro fertilization in the measurement year *or* the year prior.
- Dispensed at least one prescription for clomiphene during the measurement year *or* the year prior.
- ESRD or cirrhosis during the measurement year *or* the year prior. Do not include laboratory claims (POS: 81).
- Dialysis during the measurement year *or* the year prior.
- Myalgia, myositis, myopathy, or rhabdomyolysis during the measurement year. Do not include laboratory claims (POS: 81).
- Myalgia or rhabdomyolysis caused by a statin any time during the member's history through the measurement year.
- Members receiving palliative care any time during the measurement year.
- Members who had an encounter for palliative care (ICD-10-CM code Z51.5) anytime during the measurement year. Do not include laboratory claims (POS: 81).
- Medicare members 66 years of age and older as of December 31 of the measurement year who meet either of the following:
 - Enrolled in an Institutional SNP (I-SNP) any time during the intake period through the end of the measurement year.
 - Living long-term in an institution any time during the intake period through the end of the measurement year as identified by the LTI flag in the Monthly Membership Detail Data File.
- Members 66 years of age and older as of December 31 of the measurement year (all product lines) with frailty and advanced illness. Members must meet both frailty and advanced illness criteria to be excluded:
 - **Frailty.** At least two indications of frailty with different dates of service during the measurement year. Do not include laboratory claims (POS: 81).
 - **Advanced Illness.** Either of the following during the measurement year or the year prior to the measurement year: (a) Advanced illness on at least two different dates of service. Do not include laboratory claims (POS 81); (b) Dispensed dementia medication.

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