HEDIS® Tip Sheet
Statin Therapy for Patients With Diabetes (SPD)

Measure Description

The percentage of members 40 – 75 years of age during the measurement year with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) who met the following criteria. Two rates are reported:

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

Product Lines: Commercial, Medicaid, Medicare

Codes Included in the Current HEDIS® Measure

Description	Code
Diabetes	**ICD-10:** E10.xxxx, E11.xxxx, E13.xxxx, O24.xxxx
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, 94412, 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
IVD - Exclusion	**ICD-10:** I20.0, I20.2, I20.81, I120.89, I20.9, I24.0, I24.8, I124.81, I24.9, I25.xxx, I63.xxx, I65.xx, I66.xx, I70.xxx, I75.xxx, T82.855x, T82.856x

Medications

High, Moderate and Low-Intensity Statins Medications

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

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

Diabetes Medications

Description	Prescription
Alpha-glucosidase inhibitors	Acarbose, Miglitol
Amylin analogs	Pramlintide

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Antidiabetic combinations	Alogliptin-metformin, Alogliptin-pioglitazone, Canagliflozin-metformin, Dapagliflozin-metformin, Dapagliflozin-saxagliptin, Empagliflozin-linagliptin, Empagliflozin-linagliptinmetformin, Empagliflozin-metformin, Ertugliflozin-metformin, Ertugliflozin-sitagliptin, Glimepiride-pioglitazone, Glipizide-metformin, Glyburide-metformin, Linagliptin-metformin, Metformin-pioglitazone, Metformin-repaglinide, Metformin-rosiglitazone, Metformin-saxagliptin, Metformin-sitagliptin
Insulin	Insulin aspart, Insulin aspart-insulin aspart protamine, Insulin degludec Insulin degludec-liraglutide, Insulin detemir, Insulin glargine, Insulin glargine-lixisenatide, Insulin glulisine, Insulin isophane human, Insulin isophane-insulin regular, Insulin lispro, Insulin lispro-insulin lispro protamine, Insulin regular human, Insulin human inhaled
Meglitinides	Nateglinide, Repaglinide
Biguanides	Metformin
Glucagon-like peptide-1 (GLP1) agonists	Albiglutide, Dulaglutide, Exenatide, Liraglutide, Lixisenatide, Semaglutide
Sodium glucose cotransporter 2 (SGLT2) inhibitor	Canagliflozin, Dapagliflozin, Ertugliflozin, Empagliflozin
Sulfonylureas	Chlorpropamide, Glimepiride, Glipizide, Glyburide, Tolazamide, Tolbutamide
Thiazolidinediones	Pioglitazone, Rosiglitazone
Dipeptidyl peptidase-4 (DDP-4) inhibitors	Alogliptin, Linagliptin, Saxagliptin, Sitaglipin

Ways Providers can Improve HEDIS® Performance

- Educate patients about the prevalence of heart disease or stroke for people with diabetes and the importance of adhering to their medication therapy and follow-up visits with their provider(s).
- Schedule appointments to diagnose patients with diabetes and prescribe statin medication. Telehealth is acceptable. Note: two appointments are needed with a diabetes diagnosis on different dates of service for patients 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, over the telephone, or via telehealth. If the patient misses a scheduled appointment, office staff should contact them to assess why the appointment was missed.

Ways Health Plans can Improve HEDIS® Performance

- Educate members using culturally and linguistically appropriate language about the prevalence of heart disease or stroke for people with diabetes and the importance of adhering to their medication therapy and follow-up visits with their provider(s).
- 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 at least one of the following during the year prior to the measurement year:

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    - *MI.* Discharged from an inpatient setting with a Myocardial Infarction (MI) on the discharge claim.
    - *CABG.* Members who had CABG in any setting.
    - *PCI.* Members who had PCI in any setting.
    - Other Revascularization. Members who had any other revascularization procedure in any setting.
- Members who had at least one encounter with a diagnosis of IVD during both the measurement year and the year prior to the measurement year.
- Members with a diagnosis of pregnancy during the measurement year or year prior to the measurement year.
- In vitro fertilization in the measurement year or year prior to the measurement year.
- Dispensed at least one prescription for clomiphene during the measurement year or the year prior to the measurement year.
- ESRD during the measurement year or the year prior to the measurement year. Do not include laboratory claims (POS: 81).
- Dialysis during the measurement year or the year prior to the measurement year.
- Cirrhosis during the measurement year or the year prior to the measurement year.
- Myalgia, myositis, myopathy, or rhabdomyolysis during the measurement year.
- Myalgia or rhabdomyolysis caused by a statin any time during 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) any time 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 or living long-term in an institution any time during the measurement year.
- Members 66–80 years of age 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: Advanced illness on at least two different dates of service or dispensed dementia medication.

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