CDC Operationalized 1305 Performance Measure – Medication Adherence

Measure ID: m_3.1.07, m_3.2.07, and m_4.3.05

Performance Measures 3.1.07; 3.2.07; 4.3.05: Proportion of patients with high blood pressure in adherence to medication regimens*

**This intermediate performance measure has been separated for high blood pressure and diabetes, but combined for Domains 3 and 4. There are two profiles—one for high blood pressure (Domains 3 & 4 combined) and one for diabetes (Domains 3 & 4 combined). This profile is for high blood pressure.*

AREAS	DECISIONS
Definition of Terms *(Key concepts defined)*	• Patients = Adults ≥18 years of age with high blood pressure who have been prescribed antihypertensive medication. • Antihypertensive medications (AHMs) include = Beta blockers, diuretics, calcium channel blockers, angiotensin converting enzyme inhibitor (ACEI), angiotensin receptor blocker (ARB), and other combination antihypertensive medications. • Antihypertensive medication (AHM) use = At least two (2) fills for either the same AHM or AHMs in the same drug class during the one (1) year measurement period. • Medication Adherence = Patients who take their medication as prescribed by their health care provider. Medication adherence can further be distinguished as primary adherence (prescription initially filled within a specified time period) and secondary adherence (i.e., prescription refilled within a specified time period) (Raebel 2013). This performance measure is focused on secondary adherence. • Adherence Measure = Adherence is defined for this performance measure using the proportion of days covered (PDC) methodology, which has been endorsed by the Pharmacy Quality Alliance (PQA) and National Quality Forum. The PDC is the proportion of days in the eligibility period "covered" by prescription claims for the same medication or another in its therapeutic category. Adequate adherence is defined for this performance measure as having a PDC ≥80% (see reference for Nau). o **Measurement Period:** One year. o **Eligibility Period:** Eligibility starts when the initial AHM prescription is filled during the measurement period. Eligibility ends when the measurement period ends or the patient is no longer accounted for within the surveillance system, whether this is because they died or switched to an outside health plan, health system, and/or pharmacy. o **Covered Period:** The proportion of (or number of days during) the eligibility period that a patient had AHM medication available to them.
Unit of Analysis	Adult patients ≥18 years of age with high blood pressure who have been prescribed antihypertensive medication
Intended/Targeted Population	Adult patients

Numerator	The number of patients who met the PDC threshold for adequate adherence (>80%) for antihypertensive medications during the one (1) year measurement period. Follow the steps below for each patient to determine whether the patient meets the PDC threshold. Step 1: Determine the patient's measurement period, defined as the index prescription date to the end of the calendar year, disenrollment, or death. Step 2: Within the measurement period, count the number of days the patient was covered by at least one drug in the class based on the prescription fill date and days of supply. If prescription fills for the same drug overlap (defined at the generic level), then adjust the prescription start date to be the day after the previous fill has ended. Step 3: Divide the number of covered days found in Step 2 by the number of days found in Step 1. Multiply this number by 100 to obtain the PDC (as a percentage) for each patient. Step 4. Count the number of patients who had a PDC greater than 80%. An example of SAS code for steps 1-3 is available at: http://www2.sas.com/proceedings/forum2007/043-2007.pdf Note: This paper offers examples of calculating duration of therapy, as proportion of days supplied over a time period, and demonstrates ways to credit overlapping days' supply of the same medication. Modifications to the code would need to be made based on the surveillance system it is being applied to. Optional: If data source permits, grantees may consider examining PDC as an absolute/continuous variable, *in addition to patients meeting threshold of 80%.*
Denominator	Total number of adult patients who were dispensed antihypertensive medications on two (2) unique dates of service during the one (1)-year measurement period within health care systems in the state (or at the highest level possible)
Data source(s)	A number of accreditation and quality monitoring organizations require PDC reporting. PDC is used by the Centers for Medicare & Medicaid Services (CMS) for Medicare Part D health plan quality ratings, by Utilization Review Accreditation Commission (URAC) for pharmacy quality management accreditation programs, and by the National Business Coalition on Health (NBCH) for evaluation of health plans: • CMS Part D plan performance data uses NQF 542 measure C (medication adherence for angiotensin converting enzyme inhibitors (ACEIs)/angiotensin receptor blockers (ARBs): http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/PerformanceData.html http://www.qualityforum.org/QPS/0542 • URAC performance measure specifications for select URAC pharmacy quality management accreditation programs