

Medication Adherence

Description of Measure

Percentage of members 18 years of age and older with a prescription for diabetes, hypertension, or cholesterol medications who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication.¹ The three measures are:

- Medication Adherence for Diabetes Medications: Biguanides, DPP-4 inhibitors, GLP-1 Receptor agents, Meglitinides, SGLT2 inhibitors, Sulfonylureas, and Thiazolidinediones
- Medication Adherence for Hypertension – ACE/ARB's and DRI's
- Medication Adherence for Cholesterol - Statins

Patients qualifying for the measure on the second medication fill date, but the measurement period begins with the date of the first dispense.

Exclusions

Patients are excluded if they:

- Members who elect or use hospice services.
- Diabetes only: Have end stage renal disease (ESRD).
- Diabetes only: Have a prescription for insulin.
- Hypertension only: Have a prescription for sacubitril/valsartan.

<p>Tips for Success</p>	<ul style="list-style-type: none"> ■ Schedule a 30-day follow-up when prescribing a new medication to assess how the medication is working. Schedule this visit while the patient is still in the office. ■ Provide short and clear instructions for all prescriptions. Include reason they are taking the statin medication, and how it's important to take their medication as prescribed and get timely refills. ■ Write 90-day supplies of maintenance medications and have your patients use a mail order pharmacy with automatic refills. ■ Emphasize the benefits of taking the medication and the risks of not taking the medication, along with how the benefits generally outweigh the risks. ■ Discuss medication adherence barriers at each visit and ask open-ended questions about concerns related to health benefits, side effects and costs. ■ If ongoing therapy is appropriate, talk with members about timely refills to prevent large gaps between fills. This is particularly important between the first and second fills to set up good habits. ■ Offer recommendations for improvement: <ul style="list-style-type: none"> - Recommend weekly or monthly pillboxes, smart phone apps with medication reminder alerts, and placing medications in a visible area (but in properly closed containers and safely out of reach of children or pets) for patients who forget to take their medications. - Encourage patients to call your office if they experience side effects to discuss alternative medications. - Encourage patients to use mail-order for their prescriptions. ■ Statin intolerance and statin associated muscle symptoms can be barriers to statin therapy. Clinicians should: <ul style="list-style-type: none"> - Partner with the patient to gain a thorough symptom history and determine if he or she is truly statin intolerant. - Walk through the steps of treating and managing a patient who reports muscle symptoms, including cycles of statin discontinuation and rechallenged to identify a tolerated statin and dose.

Resources

- I. Pharmacy Quality Alliance, April 19, 2022, *PQA Measure Overview*, March 2024, www.pqaalliance.org

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