

One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

Medication Adherence

Pharmacy Quality Alliance-endorsed performance measures

Measure description

Percentage of patients with a prescription for diabetes, hypertension or cholesterol medications and who were adherent with their prescribed course of treatment.

The three measures are:

- Medication Adherence for Diabetes Medications
- Medication Adherence for Hypertension (RAS Antagonists)
- Medication Adherence for Cholesterol (Statins)

Measure population (denominator)

Patients 18 years and older who were dispensed at least two prescriptions on different dates of service during the measurement year.

Did you know?

- Medication adherence can reduce total annual health care spending primarily through decreased inpatient hospital days and emergency department visits.
- Medications are arguably the single most important health care technology to prevent illness, disability and death in the older population.
- The consequences of medication nonadherence in older adults may be more serious, less easily detected and less easily resolved than in younger age groups.

Medications included in each measure		
Diabetes	Hypertension	Cholesterol
 Biguanides Sulfonylureas Thiazolidinediones Dipeptidyl peptidase (DPP)-IV inhibitors Incretin mimetics Meglitinides Sodium glucose cotransporter 2 (SGLT2) inhibitors 	Renin-angiotensin system (RAS) antagonists: • Angiotensin converting enzyme (ACE) inhibitors • Angiotensin II receptor blockers (ARBs) • Direct renin inhibitors	Statins

Measure compliance (numerator)

Patients who filled their prescribed medication often enough to cover 80% or more of the treatment period.

Note: Patients must use their pharmacy benefit to close this measure.

Exclusions

- Received hospice services anytime during the measurement year
- Patients with end stage renal disease diagnosis
- Diabetes measure only: prescription for insulin
- Hypertension measure only: prescription for sacubitril/valsartan

Helpful HEDIS hints

- Instruct patients to fill prescriptions using their pharmacy benefit.
 - Claims filled through pharmacy discount programs, cash claims and medication samples will not count.
 - Gap closure is dependent on pharmacy claims.
 - Medication costs are often less when they use their pharmacy benefit.
- Provide short and clear instructions for all prescriptions.
- Emphasize the benefits of taking the medication and the risks of not taking the medication. The benefits should outweigh the risks.
- At each visit, ask your patients about their medication habits:
 - What side effects have you had from the medication, if any?
 - How many doses have you forgotten to take?
 - What financial barriers prevent you from obtaining your prescriptions?
 - What issues prevent you from refilling your prescription?
- Offer recommendations for adherence improvement:
 - Suggest the use of weekly or monthly pillboxes, smart phone apps with medication reminder alerts and placing medications in a visible area (in properly closed containers and safely out of reach of children or pets).
 - Instruct patients to contact their practitioner if experiencing side effects. Discuss alternative medications when appropriate.
 - Encourage patients to enroll in auto-refill program or utilize mail-order options.
- Once patients are stable on regimen, write 90-day supplies of maintenance medications.
- Schedule a follow-up visit within 30 days when prescribing a new medication to assess effectiveness and any barriers.

Resources

- 1. Pharmacy Quality Alliance (PQA). 2022. "Proportion of Days Covered: Diabetes All Class." pqaalliance.org/measures-overview#pdc-dr
- 2. Adult Meducation. 2012. "Improving Medication Adherence in Older Adults." adultmeducation.com

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