

Medication Management for People with Asthma: Medication Compliance 75%

Metric Information

Metric description: The percentage of Medicaid beneficiaries 5–64 years of age who were identified as having persistent asthma and were dispensed appropriate medications that they remained on during the treatment period. Metric is reported for the percentage of Medicaid beneficiaries who remained on an asthma controller medication for at least 75% of their treatment period.

Definition of terms used in this metric:

- *Index Prescription Start Date (IPSD):* The earliest prescription dispensing date for any asthma controller medication during the measurement year.
- *Treatment period:* The period of time beginning on the IPSD through the last day of the measurement year.
- *Proportion of Days Covered (PDC):* The number of days that a Medicaid beneficiary is covered by at least one asthma controller medication, divided by the number of days in the treatment period.
- *Oral medication dispensing event:* One prescription of an amount lasting 30 days or less. To calculate dispensing events for prescriptions longer than 30 days, divide the days supply by 30 and round down to convert.
- *Inhaler dispensing event:* All inhalers of the same medication dispensed on the same day count as one dispensing event. Different medications dispensed on the same day are counted as different dispensing event.
- *Injection dispensing event:* Each injection counts as one dispensing event. Multiple dispensed injections of the same or different medications count as separate dispensing events.

Metric specification version: HEDIS® 2018 Technical Specifications for Health Plans, NCQA.

Data collection method: Administrative only.

Data source: ProviderOne Medicaid claims/encounter and enrollment data.

Claim status: Include only final paid claims or accepted encounters in metric calculation.

Identification window: Measurement year and the year prior.

Direction of quality improvement: Higher is better.

URL of specifications: www.ncqa.org/hedis/measures

DSRIP Program Summary

Metric utility: ACH Project P4P ■ ACH High Performance ■ DSRIP statewide accountability ■

ACH Project P4P – Metric results used for achievement value: Single metric result.

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ACH Project P4P – improvement target methodology: gap to goal.

ACH Project P4P gap to goal - absolute benchmark value:

DY 3/performance year 1 (2019)	50.0% 2017 NCQA Quality Compass National Medicaid, 90 th Percentile
DY 4/performance year 2 (2020)	TBD 2018 NCQA Quality Compass National Medicaid, 90 th Percentile
DY 5/performance year 3 (2021)	TBD 2019 NCQA Quality Compass National Medicaid, 90 th Percentile

ACH High Performance – methodology: HCA will use a Quality Improvement (QI) Model to determine relative high performance among ACHs for the set of High Performance metrics. For more information, see Chapter 8: ACH High Performance Incentives.

DSRIP statewide accountability – methodology: HCA will use a Quality Improvement (QI) Model to determine statewide performance across the quality metric set. For more information, see Chapter 2: Statewide accountability.

ACH regional attribution: Residence in the ACH region for 11 out of 12 months in the measurement year.

Statewide attribution: Residence in the state of Washington for 11 out of 12 months in the measurement year.

DSRIP Metric Details

Eligible Population	
Age	Ages 5 – 64 years. Age is as of the last day of the measurement year.
Gender	N/A
Minimum Medicaid enrollment	Measurement year and the year prior to the measurement year. Enrollment must be continuous.
Allowable gap in Medicaid enrollment	One gap of one month during the measurement year and one gap of one month during the year prior to the measurement year.
Medicaid enrollment anchor date	Last day of measurement year.
Medicaid benefit and eligibility	Includes Medicaid beneficiaries with comprehensive medical benefits. Excludes beneficiaries that are eligible for both Medicare and Medicaid and beneficiaries with primary insurance other than Medicaid.

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Denominator:

Data elements required for denominator: Identify Medicaid beneficiaries as having persistent asthma during either the measurement year and the year prior to the measurement year. Refer to HEDIS® specifications for instructions and additional exclusions. Relevant value sets for the identification of persistent asthma include:

- ED Value Set
- Asthma Value Set
- Acute Inpatient Value Set
- Outpatient Value Set
- Observation Value Set
- Asthma Controller Medications List
- Asthma Reliever Medications List

Value sets required for denominator.

Name	Value Set
ED Value Set	See HEDIS®
Asthma Value Set	See HEDIS®
Acute Inpatient Value Set	See HEDIS®
Outpatient Value Set	See HEDIS®
Observation Value Set	See HEDIS®
Asthma Controller Medications List	See HEDIS®
Asthma Reliever Medications List	See HEDIS®
Emphysema Value Set	See HEDIS®
Other Emphysema Value Set	See HEDIS®
COPD Value Set	See HEDIS®
Obstructive Chronic Bronchitis Value Set	See HEDIS®
Chronic Respiratory Conditions Due to Fumes/ Vapors Value Set	See HEDIS®
Cystic Fibrosis Value Set	See HEDIS®
Acute Respiratory Failure Value Set	See HEDIS®

Required exclusions for denominator.

- Eligible population exclusions are listed in the eligible population table above.
- Metric specific exclusions:
 - o Beneficiaries in hospice care.

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- Beneficiaries with diagnoses in the following value sets at any point in time:
 - Emphysema Value Set.
 - Other Emphysema Value Set.
 - COPD Value Set.
 - Obstructive Chronic Bronchitis Value Set.
 - Chronic Respiratory Conditions Due to Fumes/Vapors Value Set.
 - Cystic Fibrosis Value Set.
 - Acute Respiratory Failure Value Set.

Deviations from cited specifications for denominator.

- HEDIS® specifications require no more than one gap in continuous enrollment of up to 45 days during each year of continuous enrollment. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, as is the case for the ProviderOne data source, the Medicaid beneficiary may not have more than a 1-month gap in coverage (i.e., a Medicaid beneficiary whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).

Numerator:

Beneficiaries must qualify for inclusion in the denominator to be eligible for inclusion in the numerator.

Data elements required for numerator: The number of Medicaid beneficiaries who achieved a proportion of days covered of at least 75% for their asthma controller medications during the measurement year.

- (1) Identify the IPSD. The IPSD is the earliest dispensing event for any asthma controller medication during the measurement year.
- (2) To determine the treatment period, calculate the number of days beginning on the IPSD through the end of the measurement year.
- (3) Count the days covered by at least one prescription for an asthma controller medication during the treatment period. To ensure that a days supply that extends beyond the measurement year is not counted, subtract any days supply that extends beyond the last day of the measurement year. Refer to HEDIS™ for specific instructions on calculating days covered.
- (4) Calculate the Medicaid beneficiary's PDC using the following equation:

$$\frac{\text{Total Days Covered in Treatment Period (Step 3)}}{\text{Total Days in Treatment Period (Step 2)}}$$

- (5) Sum the number of Medicaid beneficiaries whose PDC is $\geq 75\%$ for their treatment period.

Required exclusions for numerator.

- None

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Deviations from cited specifications for numerator.

- None

Version Control

July 2018 release: The specification was updated to HEDIS® 2018 specifications.

January 2019 update: Minor formatting updates were made to the metric specification sheet. This includes updating the URL of the source specification and changing HEDIS™ to HEDIS®. No substantive changes were made to the specification.