Statin Therapy for Patient with Cardiovascular Disease (Prescribed)

Metric Information

Metric description: The percentage of males 21–75 years of age and females 40–75 years of age, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and were dispensed at least one high-intensity or moderate-intensity statin medication during the measurement year.

Definition of terms used in this metric:
- *Index Prescription Start Date (IPSD)*: The earliest prescription dispensing date for any statin medication of at least moderate intensity during the measurement year.
- *Treatment period*: The period of time beginning on the IPSD through the last day of the measurement year.

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 to the measurement year.

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.

ACH Project P4P – improvement target methodology: improvement over self (1.9% improvement over reference baseline performance).

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

DSRIP Metric Details

Eligible Population	
Age	Age varies by gender: - Males (21–75 years as of the last day of the measurement year).

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	- Females (40–75 years as of the last day of the measurement year).
Gender	N/A
Minimum Medicaid enrollment	Measurement year and the year prior. Enrollment must be continuous.
Allowable gap in Medicaid enrollment	No more than one gap in enrollment of up to one month during each year of continuous enrollment (both during the measurement year and 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.

Denominator:
Data elements required for denominator:
- Identify Medicaid beneficiaries with clinical atherosclerotic cardiovascular disease (ASCVD). Beneficiaries can be identified in two ways: by event or by diagnosis (only needs to be identified one way to be included in the metric). Refer to HEDIS® specifications for instructions.
    o Relevant value sets for identification of ASCVD by event include:
        ▪ Myocardial Infarction (MI) Value Set
        ▪ Inpatient Stay Value Set
        ▪ Coronary Artery Bypass Graft (CABG) Value Set
        ▪ Percutaneous Coronary Intervention (PCI) Value Set
        ▪ Other Revascularization Value Set
    o Relevant value sets for identification of ASCVD by diagnosis include:
        ▪ Outpatient Value Set
        ▪ Ischemic Vascular Disease (IVD) Value Set
        ▪ Acute Inpatient Value Set
- Apply additional exclusion criteria. Refer to HEDIS® specifications for instructions. Relevant value sets for exclusions include:
    o Pregnancy Value Set
    o In Vitro Fertilization (IVF) Value Set
    o Estrogen Agonist Medications List
    o End State Renal Disease (ESRD) Value Set
    o Cirrhosis Value Set
    o Muscular Pain and Disease Value Set

Value sets required for the denominator.

Name	Value Set
Myocardial Infarction (MI) Value Set	See HEDIS®

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Inpatient Stay Value Set	See HEDIS®
Coronary Artery Bypass Graft (CABG) Value Set	See HEDIS®
Percutaneous Coronary Intervention (PCI) Value Set	See HEDIS®
Other Revascularization Value Set	See HEDIS®
Outpatient Value Set	See HEDIS®
Ischemic Vascular Disease (IVD) Value Set	See HEDIS®
Acute Inpatient Value Set	See HEDIS®
Pregnancy Value Set	See HEDIS®
In Vitro Fertilization (IVF) Value Set	See HEDIS®
Estrogen Agonist Medications List	See HEDIS®
End State Renal Disease (ESRD) Value Set	See HEDIS®
Cirrhosis Value Set	See HEDIS®
Muscular Pain and Disease Value Set	See HEDIS®

Required exclusions for denominator.
- Eligible population exclusions are listed in the eligible population table above.
- Metric specific exclusions:
  - Beneficiaries in hospice care.
  - Refer to HEDIS® specifications for additional exclusions.

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 had at least one dispensing event for a high-intensity or moderate-intensity statin medication (High and Moderate-Intensity Statin Medications List) during the measurement year.

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Value sets required for the numerator.

Name	Value Set
High and Moderate-Intensity Statin Medications List	See HEDIS®

Required exclusions for numerator.
- None

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.