PQA Measure: Statin Use in Persons with Diabetes (SUPD)

We are committed to working with you to improve the quality of care and health outcomes for our members, your patients. Pharmacy Quality Alliance (PQA) is one tool we use to measure many aspects of performance. This tip sheet details some of the key features of Part D Star measure, focusing on statin use in persons with diabetes (SUPD).

What is the measure?
This measure looks at the percentage of Part D members age 40-75 who were dispensed at least two diabetes medications and also received a statin medication fill during the measurement year.

Exclusions
- Starting in the 2017 measurement year, beneficiaries with end-stage renal disease (ESRD) will be excluded (based on the ESRD indicator found in the Medicare Enrollment Database)
- Patients in Hospice are not included in this measure.

Note:
1. Unlike the Part C HEDIS measure, statin use for patients with cardiovascular disease, this measure does not allow for exclusions for myalgia, myositis or rhabdomyolysis
2. It is possible for members to be in this Part D measure and also included in the Part C measure

Numerator
The number of patients in the denominator who received a prescription fill for a statin or statin combination during the measurement year.

Statin Medications*

<table>
<thead>
<tr>
<th></th>
<th>lovastatin (Tier 6)</th>
<th>atorvastatin (Tier 6)</th>
<th>simvastatin (Tier 6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>pravastatin (Tier 6)</td>
<td>rosuvastatin (Tier 6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>pitavastatin (non-formulary)</td>
<td>fluvastatin (non-formulary)</td>
<td></td>
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</tr>
</tbody>
</table>

Statin Combination Products*

<table>
<thead>
<tr>
<th></th>
<th>atorvastatin and amlodipine (Tier 6)</th>
<th>ezetimibe and simvastatin (Tier 6)</th>
<th>niacin and simvastatin (non-formulary)</th>
</tr>
</thead>
<tbody>
<tr>
<td>niacin and lovastatin (non-formulary)</td>
<td>sitagliptin and simvastatin (non-formulary)</td>
<td>ezetimibe and atorvastatin (non-formulary)</td>
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</tr>
</tbody>
</table>

* Tier 6 Select Care drugs for generic formulation have a $0 copay after any deductible is met (Medicare Advantage).

Source:  [circ.ahajournals.org/content/129/25_supp1_2/S1](circ.ahajournals.org/content/129/25_supp1_2/S1)

= CMS Stars Measure

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HEDIS Measure: Statin Use in Persons with Diabetes (SUPD)

(continued)

### Denominator

The eligible population—age 40-75 by December 31 of the measurement year—who were dispensed two or more prescription fills for hypoglycemic agent (oral hypoglycemic, insulin, and incretin mimetic) during the measurement year.

**Note:**

There are two related measures:

- **Medication Adherence for Cholesterol (statins)** – This Star measure has a weighting of three. The denominator includes members 18 years and older who have two fills for a statin. The numerator is met if the Proportion of Days Covered (PDC) is 80% or higher.

- **Statin Therapy for Patients with Cardiovascular Disease (SPC)** – This Star measure is similar to diabetes, but SPC requires the statin be a moderate to high intensity statin. If a patient qualifies for both measures (cardiovascular disease and diabetes), they should meet the requirements of both measures by receiving a moderate to high intensity statin.

**Note:**

The American College of Cardiology and the American Heart Association published the *Guideline on the Treatment to Reduce Atherosclerotic Cardiovascular Risk in Adults* in late 2013, to address reducing cardiovascular disease. The guideline identified adult patients with diabetes mellitus as a population where evidence is strong supporting the use of moderate intensity statin. The expert panel indicates high intensity statin as reasonable when the estimated ASCVD 10-year risk is ≥ 7.5%. The panel suggests the focus is on the maximally tolerated statin intensity, rather than LDL. Recognizing statin-associated side effects may preclude a member from receiving a moderate to high intensity statin, the SUPD measure guidelines allow for low intensity statin.