

Capturing prescriptions for Kidney Disease Monitoring via supplemental data

The Comprehensive Diabetes Care-Medical Attention for Nephropathy measure is the percentage of type 1 and type 2 adult diabetic patients who had nephropathy screening, a prescription for an ACE inhibitor or ARB, or presented with evidence of nephropathy within the measurement year. Additional information on the specifics of the measure can be found within the Highmark Medicare Advantage Primary Care Incentive Program Measure Guide.

Claims for patients actively taking an ACE inhibitor or ARB who use their Highmark benefits at the dispensing pharmacy will be captured and considered compliant for this measure. **If your patient is not using their Highmark insurance, documentation should be submitted via the Clinical Quality Feedback Loop to receive credit.**

Use the Clinical Quality Feedback function if your patient was taking one of the medications below but received the medication via:

- VA
- Patient Assistance Programs
- Samples
- Retail Pharmacy Programs (such as \$4 generics)
- Pharmacy Discount Cards
- Paying Cash

Medications*

Amlodipine-Benazepril (Lotrel)	Candesartan-Hctz (Atacand HCT)	Lisinopril (Qbrelis)	Quinapril (Accupril)
Amlodipine-Olmesartan (Azor)	Captopril	Lisinopril (Zestril)	Quinapril-Hctz (Accuretic)
Amlodipine-Olmesartan-Hctz (Tribenzor)	Captopril-Hctz	Lisinopril-Hctz (Prinzide)	Ramipril (Altace)
Amlodipine-Perindopril (Prestalia)	Enalapril (Epaned)	Lisinopril-Hctz (Zestoretic)	Sacubitril-Valsartan (Entresto)
Amlodipine-Telmisartan (Twyinsta)	Enalapril (Vasotec)	Losartan (Cozaar)	Telmisartan (Micardis)
Amlodipine-Valsartan (Exforge)	Enalapril-Hctz (Vaseretic)	Losartan-Hctz (Hyzaar)	Telmisartan-Hctz (Micardis-HCT)
Amlodipine-Valsartan-Hctz (Exforge HCT)	Eprosartan (Teveten)	Moexipril (Univasc)	Trandolapril (Mavik)
Azilsartan (Edarbi)	Fosinopril (Monopril)	Moexipril-Hctz (Uniretic)	Trandolapril-Verapamil (Tarka)
Azilsartan-Chlorthalidone (Edarbyclor)	Fosinopril-Hctz	Nebivolol-Valsartan (Byvalson)	Valsartan (Diovan)
Benazepril (Lotensin)	Irbesartan-Hctz (Avalide)	Olmesartan (Benicar)	Valsartan-Hctz (Diovan HCT)
Benazepril-Hctz (Lotensin HCT)	Irbesartan (Avapro)	Olmesartan-Hctz (Benicar HCT)	
Candesartan (Atacand)	Lisinopril (Prinivil)	Perindopril (Aceon)	

The Clinical Quality Feedback function is accessible via NaviNet[®]. Documentation that the patient received ACE/ARB therapy must be clearly documented in the patient medical record.

For additional information on how to submit supplemental data, please refer to the **Clinical Quality Feedback Supplemental Guide** located on the Provider Resource Center or the Quality Blue User Interface.



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请注意：如果您说中文，可向您提供免费语言协助服务。请拨打您的身份证背面的号码（TTY：711）。