

Topic	Explanation
Measure Type	Dynamic Star Measure
Description of the Measure	The percentage of members 18 years of age and over who were dispensed a renin angiotensin system antagonist (RASA) medication for hypertension, an ACEI (angiotensin converting enzyme inhibitor), ARB (angiotensin receptor blocker), DRI (direct renin inhibitor) or combination of the medications.
Eligible Population	<p>Members 18 and over who were dispensed at least two prescriptions for a RASA antihypertensive agent during the measurement year.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> • Members with one or more pharmacy claims for the medication sacubitril/valsartan (Entresto®). • Members with end-stage renal disease. • Members in hospice any time during the measurement year. • Members without Part D benefits through Highmark.
Compliant Member	<p>Percentage of members with a prescription for a blood pressure medication who fill their prescriptions often enough to cover 80% or more of the time they are supposed to be taking the medication (as derived from the prescription daily dosage).</p> <p>*Medication Adherence is calculated based on the proportion of days covered during the measurement period. The measurement period ends at the end of the measurement year or date of disenrollment.</p>
How to Submit to Highmark Inc.	The claim is only captured via a pharmacy claim. The dispensing pharmacist generates the claim as the claim is processed at the point of sale. Adherence is calculated based on claims that are processed through the Part D benefit; therefore, claims must adjudicate at the point of sale. Retrospective claims adjudication is not permissible.
Best Practices	<ul style="list-style-type: none"> • Discourage “pill splitting” or taking medications every other day. If dosage changes, rewrite prescription to accurately show prescribed dose and have dispensing pharmacy discontinue the previous script. • Identify all patients who are prescribed a RASA medication for the treatment of high blood pressure. • Prep chart to ensure that provider discusses ongoing compliance. • Discuss with patients the benefits of adhering to medication. • Utilize medication adherence report to identify those trending poorly (percent) on compliance. • Provide ongoing member outreach to those showing as non-compliant. • Identify reason for non-compliance and attempt to resolve.

Topic	Explanation
Best Practices (continued)	<ul style="list-style-type: none"> • Educate patients about their condition and explain why the medication is being prescribed. • Use motivational interviewing to help patients commit to taking their medication and set goals for taking their medications. • Ask patients what routine they use to help them remember to take their medications (apps, alarms, pillboxes). • Utilize Highmark’s predesigned member letter templates and other informational resources that are located on the Provider Resource Center. • Consider 90-day fills when writing prescriptions. • Consider effective but low-cost treatment options that are on Tier 1 of the Highmark Medicare Part D formularies. • Be proactive. Evaluate practice processes for opportunities to close gaps every time the patient is seen rather than reacting to gap closure reports.
Other	<p>Samples, paying in cash, and using discount cards will not generate an insurance claim. Therefore, these patients will appear to have a lower adherence rate and will appear to be non-compliant with the measure.</p> <p>Always encourage patients to utilize their insurance card, as this may help to identify other services that may be beneficial to them, as in cases for disease management programs. Also, utilizing the insurance ID card is the way to leverage benefit enhancements for the current plan year.</p>

Key Additional Resources

Additional information specific to this measure can be found on the Provider Resource Center under **Value-Based Reimbursement Programs Overview**, in the **Medicare Advantage Stars** section.

Information on formulary medications and Utilization Management restrictions can be found in the **Pharmacy Program/Formularies** section on the Provider Resource Center.