

## 2020 STAR Measures (Part D)

MEASURE	DETAILS	INFORMATION
<b>Proportions of Days Covered–Medication Adherence (Diabetes)   STAR Weight: 3</b>		
<p><b>Description:</b> Percentage of members ages 18 and older who fill a diabetes medication often enough to cover 80% or more of the treatment period (from date of first fill through Dec 31st of measurement year (MY)).</p>	<p><b>Exclusions:</b> <u>Standard:</u> Hospice   ESRD diagnosis during the MY   One or more prescription for insulin <b>Details:</b> The percentage of adherence is the percent of days in the measurement period “covered” by prescription claims for the same medication or another in its therapeutic category. The members are limited to those who fill at least two prescriptions on unique dates of services for diabetes medication.</p>	<p><b>Medication Classes:</b> Biguanide, Sulfonylurea, Thiazolidinedione, DiPeptidyl Peptidase (DPP)-IV Inhibitor, Incretin Mimetic, Meglitinide, Sodium-Glucose Co-Transporter 2 (SGLT) Inhibitor</p>
<b>Proportions of Days Covered–Medication Adherence (RAS)   STAR Weight: 3</b>		
<p><b>Description:</b> Percentage of members ages 18 and older who fill a blood pressure medication often enough to cover 80% or more of the treatment period (from date of first fill through Dec 31st of MY).</p>	<p><b>Exclusions:</b> <u>Standard:</u> Hospice   ESRD diagnosis during the MY   One or more prescriptions for sacubitril/valsartan <b>Details:</b> The percentage of adherence is the percent of days in the measurement period “covered” by prescription claims for the same medication or another in its therapeutic category. The members are limited to those who fill at least two prescriptions on unique dates of services for blood pressure medication.</p>	<p><b>Medication Classes:</b> Angiotensin Converting Enzyme (ACE) Inhibitor, Angiotensin Receptor Blocker (ARB), and Direct Renin Inhibitors</p>
<b>Proportions of Days Covered–Medication Adherence (Statin)   STAR Weight: 3</b>		
<p><b>Description:</b> Percentage of members ages 18 and older who fill a cholesterol (statin) medication often enough to cover 80% or more of the treatment period (from date of first fill through Dec 31st of MY).</p>	<p><b>Exclusions:</b> <u>Standard:</u> Hospice   ESRD diagnosis during the MY <b>Details:</b> The percentage of adherence is the percent of days in the measurement period “covered” by prescription claims for the same medication or another in its therapeutic category. The members are limited to those who fill at least two prescriptions on unique dates of services for statin cholesterol medication.</p>	<p><b>Statin Cholesterol Medication:</b> Common generic statins: Atorvastatin, Lovastatin, Pravastatin, Rosuvastatin, Simvastatin</p>
<b>Statin Use in Persons With Diabetes (SUPD)   STAR Weight: 3</b>		
<p><b>Description:</b> Percentage of members ages 40-75 who were dispensed at least two diabetes medication fills and who received a statin medication fill during the MY.</p>	<p><b>Exclusions:</b> <u>Standard:</u> Hospice   ESRD diagnosis during the MY</p>	<p><b>Statin Cholesterol Medication:</b> Common generic statins: Atorvastatin, Lovastatin, Pravastatin, Rosuvastatin, Simvastatin</p>

## Medication Adherence Tips for Success

### #1. Switching to a 90-Day Prescription

Benefits:

- ◆ Save Time—Fewer trips to the pharmacy (switching from 12 to 4 pharmacy trips in the calendar year)
- ◆ Save Money—Health Plans may offer lower co-pays when you switch to a 90-day prescription (check your patient’s health plan benefits for more information)

### #2. Mail-Order

Have your patients’ prescriptions sent directly to their home with Medication Home Delivery Service.

- ◆ **WellCare** partners with CVS Caremark
  - ◇ Prescribers can find prescription form at [https://www.caremark.com/portal/asset/mof\\_unauth.pdf](https://www.caremark.com/portal/asset/mof_unauth.pdf) and fax to 1-800-378-0323 or E-prescribe to CVS Caremark Mail Order Electronic, NCPDP ID 322038
  - ◇ Members must create an account with CVS Caremark online at <https://www.caremark.com> or by telephone at 1-866-808-7471
  - ◇ *Please note:* Mail order offers automatic refills ONLY AT the patients request after the first fill. Requests may be done via phone or by selecting auto-refill on Caremark’s website; each medication must be individually enrolled.
- ◆ **Blue Cross Blue Shield of Arizona** partners with Postal Prescription Services (PPS)
  - ◇ Contact them by calling 1-800-552-6694 or access their website at <https://www.ppsrx.com>

### #3. Select the Lowest Tier Medication on Formulary that will Treat Your Patient

Health Plans generally offer cost savings to your patients when filling Tier 1 or Tier 2 medications. Before prescribing, search the formulary for an appropriate medication that will treat your patient at an affordable out-of-pocket cost.

- ◆ To access WellCare’s Formulary, visit: <https://www.wellcare.com/Arizona/Find-My-Plan>
- ◆ To access Blue Cross Blue Shield of AZ’s Formulary, visit: <https://www.yourazmedicareolutions.com/documents/documents-arizona#formularies>

### #5. Complete Medication Reconciliations

Complete regular medication reconciliations to ensure your patients’ medications are up-to-date.

- ◆ To avoid patient confusion, when the dose or frequency of any medication is altered, void the old prescription by sending a new prescription order to the pharmacy with instruction to void the old prescription
- ◆ Establish a good communication plan with the entire healthcare team, including other providers that may also be treating your patients

### #4. Assess Your Patients’ Health Literacy

Determine if your patients need additional support and resources to manage their medications.

- ◆ Take every opportunity available to engage and educate your patients; having detailed conversations with patients about their medication regimen allows them to fully understand the importance of taking their medications as directed
- ◆ Regularly discuss medication barriers with your patients and assess any side effects they may experience due to their medications
- ◆ Encourage patients to use tools such as pill boxes or phone alerts as reminders to take their medications daily
- ◆ Ask your patients to join a refill reminder program with their pharmacy, if it is available
- ◆ Communicate with the patients’ pharmacy to sync their medications
- ◆ Contact AZPC’s Pharmacy Department for additional support, by emailing [AZPC-PHARxM@azprioritycare.com](mailto:AZPC-PHARxM@azprioritycare.com)
- ◆ Utilize AZPC’s STAR Department for support with your patients’ medication adherence

For questions & comments, contact STARS Department by emailing [HCC.STARS@azprioritycare.com](mailto:HCC.STARS@azprioritycare.com)