

## Statin Therapy for Patients with Cardiovascular Disease Tip Sheet

## What is the CMS Star Rating Program?

CMS uses a five-star quality rating system to measure the experiences Medicare beneficiaries have with their health plan and health care system – the Star Rating Program. Health plans are rated on a scale of 1 to 5 stars, with 5 being the highest. These ratings are then published on the Medicare Plan Finder at <u>www.medicare.gov</u> to raise the quality of care for Medicare beneficiaries, strengthen beneficiary protections and help consumers compare health plans more easily.

## **Measure Description**

Weight: 1

(Measure 1) This measure shows the percent of plan members with heart disease who get the right type of cholesterol-lowering drugs (at least one high- or moderate-intensity statin medication). (Measure 2) and/or who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication.

## Measure Source

- Measure 1: HEDIS
- Measure 2: Prescription Drug Event data from CMS
- 1/1 12/31

## Stars/Quality Specifications

• The percentage of males 21-75 years of age and females 40-75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and were dispensed at least one high or moderate-intensity statin medication during the measurement year (measure 1).

## Two rates are reported:

A. **Measure 1-weight of 1**: Received Statin Therapy. Members who were dispensed at least one high or moderate-intensity statin medication during the measurement year.

B. **Measure 2-weight of 3**: Statin adherence 80%. Members who remained on a high or moderateintensity statin medication for at least 80% of the treatment period.

## Strategies for Success

- Patients with the following should be on a statin:
  - Any form of clinical ASCVD.
  - Primary LDL-C levels of 190 mg per dL or greater.
  - Diabetes mellitus, 40 to 75 years of age, with LDL level of 70 to 189mg per dL.
  - Without diabetes, 40 to 75 years of age, with an estimated 10-year ASCVD risk of at least 7.5%.
  - Be open to discussing different options and switching medications if needed for intolerance or developed myalgias. Think "low and slow" for re-introduction.
  - Discuss the importance of adherence and encourage 90-day supply prescriptions through their pharmacy or mail-order pharmacy.

## Notable Drug/Other Interactions to Statin Medications:

- Calcium Channel Blockers (verapamil, diltiazem).
- Antiarrhythmic drugs (amiodarone, digoxin).
- Some antibiotics (erythromycin, clarithromycin).
- Some antifungals (ketoconazole, voriconazole, fluconazole).



- Some transplant medications (cyclosporine, tacrolimus, sirolimus).
- Some antivirals (darunavir, ritonavir, or atazanavir).
- Colchicine.
- Warfarin.
- Paxlovid.
- Fenofibrate cholesterol-lowering meds.
- Grapefruit juice.
- Alcohol.

## Coding and Documentation Tips

## Exclusion Codes that must be coded annually:

CONDITIONS	ICD-10-CM-CODE EXAMPLES
Cirrhosis during the measurement year of the	K74.69, K74.60
year prior to the measurement year	
ESRD (or dialysis coverage dates for Measure 2)	112.0, 113.11, 113.2, N18.5, N18.6
during the measurement year or the year prior to	
the measurement year	
Myopathy during the measurement year	G72.9
Rhabdomyolysis during the measurement year	M62.82
Myalgia during the measurement year	M79.18, M79.10
Myositis during the measurement year	M60.9

## Myalgia or Rhabdomyolysis caused by a statin any time during the member's history through Dec. 31 of the measurement year.

*Communicate through Data Feed or Supplemental Data:	
16524291000119105	History of myalgia caused by statin (situation)
16524331000119104	History of rhabdomyolysis due to statin (situation)
16462851000119106	Myalgia caused by statin (finding)
787206005	Rhabdomyolysis due to statin (disorder)

## **Other Notable Exclusions:**

- Pregnancy during the measurement year or year prior to the measurement year.
- In vitro fertilization during the measurement year or year prior to the measurement year.
- Dispensed at least one prescription for clomiphene during the measurement year or the year prior to the measurement year.
- Myalgia or myositis during the measurement year.
- Members in hospice or using hospice services any time during the measurement year.
- Members who died any time during the measurement year.
- Members receiving palliative care any time during the measurement year.

Member may be excluded from this measure due to frailty and/or advanced illness codes. Click the following link to review the master code list for exclusions: <u>Exclusion Codes</u>

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#### **Medications:**

**High-and Moderate-Intensity Statin Medications:** \*Eligible Population: Rate 2 -Statin Adherence 80%

## **High-Intensity Statin Therapy**

Atorvastatin 40-80 mg Amlodipine-atorvastatin 40-80 mg Rosuvastatin 20-40 mg Simvastatin 80 mg Ezetimibe-simvastatin 80 mg

## **Moderate-Intensity Statin Therapy**

Atorvastatin 10-20 mg Amlodipine-atorvastatin 10-20 mg Rosuvastatin 5-10 mg Simvastatin 20-40 mg Ezetimibe-simvastatin 20-40 mg Pravastatin 40-80 mg Lovastatin 40 mg Fluvastatin 40-80 mg Pitavastatin 1-4 mg \*If an alternative option is needed due to side effects, consider rosuvastatin (Crestor) as it has a more favorable drug interaction profile, high potency, and can be used less frequently (2-3x weekly).

If you have questions, please contact your provider relations specialist.