Statin Use in Persons with Diabetes (SUPD) provider tipsheet

Did you know?

The Centers for Medicare and Medicaid Services' (CMS) Stars program assesses the quality and performance of Medicare insurance plans, including Pharmacy Quality Alliance (PQA) measures such as appropriate medication use.

The scores we receive help us understand the quality of care your Medicare patients receive while managing common conditions.

Use this tip sheet to help **ensure your diabetic patients are taking the most cost-effective drugs at the right time, and to succeed in the Statin Use In Persons with Diabetes (SUPD) PIP measure.**

5-Star cut point performance	
Payout PCM	**Medicare cut point target**
$25	92%

Eligible population

- Patients enrolled in Medicare Part D, age 40-75, who were dispensed two or more prescriptions for a diabetes medication on unique dates of service, with the first fill being 90 or more days before Dec. 31 of the measurement year.

Compliance

- Patients who were dispensed at least one prescription for a statin or statin combination using their Priority Health pharmacy benefit during the measurement year.

Exclusions

- Dialysis
- End-stage renal disease (ESRD)
- Hospice
- Lactation and fertility
- Liver disease
- Polycystic ovary syndrome (PCOS)
- Pre-diabetes
- Pregnancy
- Rhabdomyolysis and myopathy

Exclusions must be reported annually through claim submissions during the measurement year. **If your patient meets exclusion criteria, refer to the statin exclusion codes.**

Statin medications

Statin medications covered by our Medicare Advantage plans (Tier 1)*	
Tier 1	**Tier 2**
• Atorvastatin • Atorvastatin-amlodipine • Lovastatin • Pravastatin • Rosuvastatin • Simvastatin	• Ezetimibe-simvastatin

To close the SUPD care opportunity, members must use their Priority Health insurance to fill one of these prescriptions in any strength/dose by the end of the measurement year.

*Tier 1 drugs are $0 for most Medicare Advantage members when filling 90-day prescriptions at preferred retail pharmacies like Meijer, Walgreens and Walmart.

Tips for closing SUPD gaps in care

90-day prescriptions	Review medications	Check for patients' understanding of medication
• If you determine a statin medication is appropriate, e-prescribe a 90-day quantity with three refills to the patient's preferred retail pharmacy • 90-day refills are available through mail-order pharmacy, with most statins being $0 for several Medicare plan benefits • Encourage patients to fill prescriptions using their health plan pharmacy benefit **Note:** Claims filled through pharmacy discount programs and cash claims won't close care gaps.	• During each visit, review and document all medications and supplements with the patient • When possible, remove medications no longer needed and/or reduce dosages • To help boost adherence, update active prescriptions to match how they take their statin *(i.e. call in a new script for atorvastatin 20 mg tablets vs. directing patient to split tablets of a 40 mg fill)*	• Make sure your patients know why you're prescribing a medication • Clearly explain what they are, what they do, and how to manage potential side effects • Discuss the importance of taking their medications as prescribed • Consider trying a different statin and/or reducing the dose or frequency if patients are experiencing adverse effects

Talking points to help support medication adherence in your patients

Patient barriers	Provider talking points
Why are cholesterol lowering drugs right for me?	• Statins are effective at lowering the risk of heart disease and stroke, as well as cholesterol levels • The U.S. Preventive Services Task Force recommends low-to-moderate dose statins in adults 40-75 years who have one or more risk factors for cardiovascular disease, regardless of cholesterol levels[1]
I experienced side effects after taking a statin. Should I be worried?	• Statin use is an important part of lowering your risk of cardiovascular (CV) events • Encourage patients to contact their pharmacist or provider to discuss alternate drugs or dosing strategies to improve tolerance
My medications cost too much. Are there alternatives for affordable medications?	• 90-day supply tier 1 medications are covered for most Priority Health Medicare members for a $0 copay at a preferred retail pharmacy or mail order
How do I remember to fill my statin?	• Talk to your patients or their caregivers about how they can enroll in mail-order pharmacy or in a refill reminder program through their pharmacy
It's difficult for me to get to the pharmacy. What alternatives are available for me to get my medications?	• Suggest your patient obtain prescriptions from a mail-order pharmacy • Ask the patient to check with family members or a caregiver to help pick-up prescriptions
How can I easily track my medications?	• Ask the patient's pharmacy to synchronize medications so they're all filled on the same day • Encourage the use of a pillbox or phone calendar reminders to help patients take their medications at the correct time(s)

U.S. Preventive Services Task Force:
www.uspreventiveservicestaskforce.org/uspstf/recommendation/statin-use-in-adults-preventive- medication

Tips for coding SUPD exclusions

To exclude patients who cannot tolerate statins based on any of the exclusion criteria, **a claim must be submitted annually using the appropriate ICD-10-CM code.**

If your patient has one of the conditions listed below, they're eligible for exclusion from this measure. **To remove your patient from the SUPD measure, you must submit the appropriate ICD-10-CM code.** Use the table below for reference or download our complete list of ICD-10-CM exclusion codes for this measure.

Exclusion condition	ICD-10-CM codes
Cirrhosis	K70.30, K70.31, K71.7, K74.3, K74.4, K74.5, K74.60, K74.69
End-stage renal disease (ESRD)	I12.0, I13.11, I13.2, N18.5, N18.6, N19, Z91.15, Z99.2
Hospice	Exclusions for hospice must be captured by appropriate hospice diagnoses documented in an encounter during the measurement year or hospice enrollment
Lactation and fertility	O91.03, O91.13, O91.23, O92.03, O92.13, O92.5, O92.70, O92.79, Z39.1
Polycystic Ovary Syndrome	E28.2
Pre-diabetes	R73.03, R73.09
Pregnancy	Numerous pregnancy diagnosis codes O00.101 - O9A.519, Z33.1, Z33.3, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, Z34.93
Rhabdomyolysis and myopathy	G72.0, G72.89, G72.9, M60.80, M60.819, M60.829, M60.839, M60.849, M60.859, M60.869, M60.879, M60.9, M62.82

Using virtual care to document and submit an exclusion condition

You can use virtual care to confirm and document your patient's exclusion condition in their medical record. To submit this documentation, simply bill the non-reimbursable HCPCS code G9781 for the amount of $0.01 with the applicable ICD-10 code attached. This will remove your patient from the SUPD measure.

To ensure accuracy in documentation, please code your patients' diagnoses to the highest level of specificity.

Want to learn more about our programs that can help close care gaps for your patients, our members? Contact your ACN's Provider Strategies and Solutions Consultant.