# Statin Therapy for Patients with Cardiovascular Disease (SPC)



# **Measure Description**

This measure evaluates the percentage of males 21-75 years old and females 40-75 years old who have been diagnosed with clinical atherosclerotic cardiovascular disease (ASCVD) and who received statin therapy during the measurement year.

## **Calculation**

#### [Numerator] = Measure Compliance

Patients from the denominator who were also dispensed at least one high or moderate-intensity statin medication during the measurement year.

#### [Denominator] = Measure Population

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).

### **Statins**

High-Intensity Statins	Moderate-Intensity Statins	
Atorvastatin 40-80 mg     Rosuvastatin 20-40 mg	<ul> <li>Atorvastatin 10-20 mg</li> <li>Rosuvastatin 5-10 mg</li> <li>Simvastatin 20-40 mg</li> <li>Pravastatin 40-80 mg</li> <li>Lovastatin 40 mg</li> <li>Fluvastatin XL 80 mg</li> <li>Fluvastatin 40 mg BID</li> <li>Pitavastatin 2-4 mg</li> </ul>	

#### Did You Know?

- The American Heart Association recommends statin use to prevent atherosclerotic cardiovascular disease (ASCVD) events.
- Certain adverse reactions to a statin medication may exclude the patient from the measure denominator if properly documented.
- The goal is to assess whether patients with a history of cardiovascular disease are receiving appropriate lipidlowering treatment with statins, which are known to help reduce the risk of heart attacks, strokes, and other cardiovascular events.

# **Strategies for Rate Improvement**

- Use simple, non-technical language when discussing statins to
- ensure understanding.
   Manage side effects by either changing the statin or reducing the dosage.
- To exclude patients who cannot tolerate statin medications, the appropriate exclusion diagnosis code must be submitted annually.
- Once patients demonstrate that they tolerate statin therapy, encourage them to obtain 100-day supplies through their preferred pharmacy or mail-order
- pharmacy. Utilize digital health tools such as mobile apps or text reminders to promote adherence.
  - Encourage patients to fill prescriptions using their L.A. Care pharmacy benefit. Gap closure is dependent on pharmacy claims.

#### **Exclusions**

Patients are excluded if they meet any of the following criteria:

- Pregnancy\*\*
- In vitro fertilization\*\*
- Dispensed at least one prescription for clomiphene\*\*
- ESRD or dialysis\*\*
- Cirrhosis\*\*
- Myalgia, myositis, myopathy, or rhabdomyolysis\*
- In hospice or using hospice services\*
- Deceased\*

Receiving palliative care\*



- Enrolled in an institutional SNP (I-SNP)\*
- Living long-term in an institution\*
- Patients 66 years of age or older as of December 31st with frailty and advanced illness\*
- \* = during the measurement year
- \*\* = during the measurement year or year prior to the measurement year

## **Exclusion Codes**

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Condition	ICD-10-CM Codes
Pregnancy	O00.101, O00.102, O00.109, O00.112, O00.119, O00.201, O00.202, O00.209, O00.211, O00.212, O00.219, O00.80, O00.81, O00.90, O00.91, O09.00, O09.01, O09.02, O09.03, and 1,682 additional codes
Myopathy	G72.0, G72.2, G72.9
Myositis	M60.80, M60.811, M60.812, M60.819, M60.821, M60.822, M60.829, M60.831, M60.832, M60.839, M60.841, M60.842, M60.849, M60.851, M60.852, M60.859, M60.861, M60.862, M60.869, M60.871, M60.872, M60.879, M60.88, M60.89, M60.9
Rhabdomyolysis	M62.82
Myalgia	M79.10, M79.11, M79.12, M79.18
Cirrhosis	K70.30, K70.31, K71.7, K74.3, K74.4, K74.5, K74.60, K74.69, P78.81
ESRD	N18.5, N18.6, Z99.2

- 1. Medicare 2025 Part c & D Star Ratings Technical Notes. https://www.cms.gov/files/document/2025-star-ratings-technical-notes.pdf
- 2. Arnett DK, Blumenthal RS, Albert MA, et al. 2019 ACC/AHA Guideline on the Primary Prevention of Cardiovascular Disease. Journal of the American College of Cardiology. 2019;74(10):e177-e232. doi:https://doi.org/10.1016/j.jacc.2019.03.010
- 3. Pennsylvania SK PharmDAssistant Professor of Pharmacy PracticeWilkes University, Nesbitt School of PharmacyWilkes-Barre. Considerations in the Approach to Appropriate Statin <u>Selection. www.uspharmacist.com</u>. <a href="https://www.uspharmacist.com/article/considerations-in-the-approach-to-appropriate-statin-selection">https://www.uspharmacist.com/article/considerations-in-the-approach-to-appropriate-statin-selection</a>
- SPC Statin Therapy for Patients with Cardiovascular <u>Disease</u>. <u>Hopkinsmedicine.org</u></u>. Published 2025. Accessed January 17, 2025. <a href="https://www.hopkinsmedicine.org/johns-hopkins-health-plans/providers-physicians/health-care-performance-measures/hedis/statin-therapy-cardiovascular-disease">https://www.hopkinsmedicine.org/johns-hopkins-health-plans/providers-physicians/health-care-performance-measures/hedis/statin-therapy-cardiovascular-disease</a>



