

Appropriate Medication Use: Statin Use in Persons with Diabetes (SUPD)

By working together, we can improve health outcomes for your patients, our members. Pharmacy Quality Alliance (PQA) measures are used to assess prescription drug plans quality and performance. *Appropriate Medication Use* measures are developed by the PQA and endorsed by the National Quality Forum. This tip sheet provides key details of the PQA appropriate medication use measure for statin use in persons with diabetes.

What is the measure?

This measure evaluates the percentage of members, age 40-75, who filled at least two prescriptions for a diabetes medication and filled at least one statin prescription during the measurement year.

Exclusions

- Diagnosis of end-stage kidney disease
- Rhabdomyolysis or Myopathy
- Cirrhosis
- Pre-diabetes
- Polycystic ovary syndrome
- Pregnancy, Lactation, or Fertility.
- Member in hospice

Denominator

Eligible population: Members, age 40-75, who filled two or more prescriptions for a diabetes medication during the measurement year.

Numerator

The number of eligible members in the denominator who filled at least one prescription for a statin or statin combination during the measurement year.

Statin Medications*

Amlodipine Atorvastatin	Fluvastatin	Niacin-Simvastatin	Rosuvastatin
Atorvastatin	Lovastatin	Pitavastatin	Simvastatin
Ezetimibe Simvastatin	Niacin-Lovastatin	Pravastatin	

*The active ingredients are limited to oral formulations only.

¹Healthcare Effectiveness Data and Information Set (HEDIS) is a registered trademark of the National Committee for Quality Assurance. Florida Blue and Florida Blue Medicare are Independent Licensees of the Blue Cross and Blue Shield Association. Copyright 2020/2021 PQA, Inc. All rights reserved. pqaalliance.org.

(continued next page)

Appropriate Medication Use: Statin Use in Persons with Diabetes *(continued)*

Best Practices

- Encourage members to use their Florida Blue card at the pharmacy to generate pharmacy claims and capture member compliance.
- Ensure all diabetic patients are prescribed a statin medication.
- Consider prescribing one of the low-cost generic statin medications to improve adherence.
- Discuss with each member why they are on a specific medication. Reinforce the role and importance of statin therapy. Together, identify and resolve member-specific adherence barriers or concerns, such as the prescription's health benefits, side effects, cost and timely refills.
- Statin use should always be accompanied by lifestyle modifications focused on diet and weight loss to improve a patient's lipid panel.

Notable Facts

The American Diabetes Association and American College of Cardiology/American Heart Association (ACC/AHA) guidelines recommend moderate-to-high intensity statins to be used as primary and secondary atherosclerotic cardiovascular disease (ASCVD) prevention on type 1 and type 2 diabetes mellitus patients. For patients who do not tolerate the intended intensity of statin, the maximally tolerated statin dose should be used.

- High-intensity statin therapy will achieve about a 50 percent reduction in LDL cholesterol
- Moderate-intensity statin regimens achieve 30–50 percent reductions in LDL cholesterol
- Statin use in diabetic patients decreases:
 - Incidence of cardiovascular events by 21 percent per 39 mg/dL decrease in LDL
 - Mortality by 9 percent per 39 mg/dL decrease in LDL

References

- pqaalliance.org/measures-overview#supd
- cms.gov/files/document/2023-star-ratings-technical-notes.pdf
- pqaalliance.org/QRS
- care.diabetesjournals.org/content/41/Supplement_1/S86