



Medication Management for People with Asthma (50% of Treatment Days Covered)



Measure Type: HEDIS (claims) / Age Cohort: 5-64 years

Measure Definition

Number of people who filled prescriptions for asthma controller medications during at least 50% of their treatment period beginning on the Index Prescription Start Date (IPSD) through the last day of the measurement year.

Documentation Required

- Diagnosis of asthma: (J45.20 – J45.998)
- Dispensed an asthma controller medication ([Medication List G](#))
- Prescriptions are filled at least 50% of the time

For Applicable Visits, please reference the [Appendix: Asthma Performance Metrics](#)

Role of Care Management

- Follow-up with patient to ensure monthly refill of prescription
- Reinforce patient and family education regarding chronic disease and medication adherence
- Identify & Address barriers to adherence

Role of PCP Practice

- Prescribe controlling medication as appropriate and authorize monthly refills
- Provide education on medication and adherence
- If applicable, refer to the Asthma Home-Based Self-Management Program



Medication Management for People with Asthma (75% of Treatment Days Covered)



Measure Type: HEDIS (claims) / Age Cohort: 5-64 years

Measure Definition

Number of people who filled prescriptions for asthma controller medications during at least 75% of their treatment period beginning on the Index Prescription Start Date (IPSD) through the last day of the measurement year.

Documentation Required

- Diagnosis of asthma: (J45.20 – J45.998)
- Dispensed an asthma controller medications ([Medication List G](#))
- Prescriptions are filled at least 75% of the time

For Applicable Visits, please reference the [Appendix: Asthma Performance Metrics](#)

Role of Care Management

- Follow-up with patient to ensure monthly refill of prescription
- Reinforce patient and family education regarding chronic disease and medication adherence
- Identify & Address barriers to adherence

Role of PCP Practice

- Prescribe controlling medication as appropriate and authorize monthly refills
- Provide education on medication and adherence
- If applicable, refer to the Asthma Home-Based Self-Management Program



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MEASURE MEDICATION LISTS





Asthma Controller Medication

- Asthma Medication Ratio
- Medication Management for People with Asthma (50% & 75% of Treatment Days Covered)

[Back to Measure](#) – Medication Ratio

[Back to Measure](#) – 50%

[Back to Measure](#) – 75%



Description	Prescription
Antiasthmatic combinations	<ul style="list-style-type: none"> • Dyphylline-guaifenesin • Guaifenesin-theophylline
Antibody inhibitors	<ul style="list-style-type: none"> • Omalizumab
Anti-interleukin-5	<ul style="list-style-type: none"> • Mepolizumab • Reslizumab
Inhaled steroid combinations	<ul style="list-style-type: none"> • Budesonide-formoterol • Fluticasone-salmeterol • Fluticasone-vilanterol • Mometasone-formoterol
Inhaled corticosteroids	<ul style="list-style-type: none"> • Beclomethasone • Budesonide • Ciclesonide • Flunisolide • Fluticasone CFC free • Mometasone
Leukotriene modifiers	<ul style="list-style-type: none"> • Montelukast • Zafirlukast • Zileuton
Methylxanthines	<ul style="list-style-type: none"> • Dyphylline • Theophylline

Asthma Reliever Medication

- Asthma Medication Ratio- [Back to Measure](#)

Description	Prescription
Short-acting, inhaled beta-2 agonists	<ul style="list-style-type: none"> • Albuterol • Levalbuterol • Pirbuterol



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APPENDIX:
ASTHMA PERFORMANCE METRICS



- **Step A:** Identify the eligible population (applies to all three asthma metrics) → Inclusion Criteria

Identify members as having persistent asthma who met at least one of the following criteria during both the measurement year and the year prior to the measurement year. Criteria need not be the same across both years.

- At least one ED visit (ED Value Set), with a principal diagnosis of asthma (Asthma Value Set).

Applicable Visit:

CPT Codes: 99281-99285

- At least one acute inpatient encounter (Acute Inpatient Value Set), with a principal diagnosis of asthma (Asthma Value Set) **without** telehealth (Telehealth Modifier Value Set; Telehealth POS Value Set).

Applicable Visit:

CPT Codes: 99221-99233, 99238, 99239, 99251-99255, 99291

- At least four outpatient visits (Outpatient Value Set) or observation visits (Observation Value Set), on different dates of service, with any diagnosis of asthma (Asthma Value Set) **and** at least two asthma medication dispensing events for any controller medication (Asthma Controller Medications List) or reliever medication (Asthma Reliever Medications List). Visit type need not be the same for the four visits.

Applicable Visit:

CPT Codes: 99201-99220, 99241-99245, 99341-99350, 99381-99397, 99401-99404, 99411, 99412, 99429, 99455, 99456

- Only three of the four visits may be a telehealth visit, a telephone visit or an online assessment. Identify telehealth visits by the presence of a telehealth modifier (Telehealth Modifier Value Set) or the presence of a telehealth POS code (Telehealth POS Value Set) associated with the outpatient visit. Use the code combinations below to identify telephone visits and online assessments:
 - A telephone visit (Telephone Visits Value Set) **with** any diagnosis of asthma (Asthma Value Set).
 - An online assessment (Online Assessments Value Set) **with** any diagnosis of asthma (Asthma Value Set).
 - **Telephone Visit CPT Codes:** 98966-98968, 99441-99443
 - **Telehealth Modifier Codes:** GT, 95
 - **Online Assessments Codes:** 98969, 99444
- At least four asthma medication dispensing events for any controller medication (Asthma Controller Medications List) or reliever medication (Asthma Reliever Medications List).



Oral Medication dispensing event

One prescription of an amount lasting 30 days or less. To calculate dispensing events for prescriptions longer than 30 days, divide the days supply by 30 and round down to convert. **For example, a 100-day prescription is equal to three dispensing events ($100/30 = 3.33$, rounded down to 3).** Allocate the dispensing events to the appropriate year based on the date when the prescription is filled.

Multiple prescriptions for different medications dispensed on the same day count as separate dispensing events. If multiple prescriptions for the same medication are dispensed on the same day, sum the days supply and divide by 30. Use the Drug ID to determine if the prescriptions are the same or different.

- *Two prescriptions* for different medications dispensed on the same day, each with a 60-day supply, equals four dispensing events (two prescriptions with two dispensing events each).
- *Two prescriptions* for different medications dispensed on the same day, each with a 15-day supply, equals two dispensing events (two prescriptions with one dispensing event each).
- *Two prescriptions* for the same medication dispensed on the same day, each with a 15-day supply, equals one dispensing event (sum the days supply for a total of 30 days).
- *Two prescriptions* for the same medication dispensed on the same day, each with a 60-day supply, equals four dispensing events (sum the days supply for a total of 120 days).

Inhaler dispensing event

- All inhalers (i.e., canisters) of the same medication dispensed on the same day count as one dispensing event. Medications with different Drug IDs dispensed on the same day are counted as different dispensing events.
- **For example**, if a member received three canisters of Medication A and two canisters of Medication B on the same date, it would count as two dispensing events.

Injection dispensing event

- Each injection or intravenous infusion counts as one dispensing event. Multiple dispensed injections of the same or different medications count as separate dispensing events. For example, if a member received two injections of Medication A and one injection of Medication B on the same date, it would count as three dispensing events.
- Allocate the dispensing events to the appropriate year based on the date when the prescription was filled.

Step A: Identify the eligible population for the measure (*applies to all three asthma metrics*)

Inclusion

Step 2 A member identified as having persistent asthma because of at least four asthma medication dispensing events, where leukotriene modifiers or antibody inhibitors were the sole asthma medication dispensed in that year, must also have at least one diagnosis of asthma (Asthma Value Set), in any setting, in the same year as the leukotriene modifier or antibody inhibitor (i.e., the measurement year or the year prior to the measurement year).

Exclusion

Step 3: Required exclusions Exclude members who met any of the following criteria:

- Members who had any diagnosis from any of the following value sets, any time during the member's history through December 31 of the measurement year:
 - Emphysema Value Set.
 - Other Emphysema Value Set.
 - COPD Value Set.
 - Obstructive Chronic Bronchitis Value Set.
 - Chronic Respiratory Conditions Due to Fumes/Vapors Value Set.
 - Cystic Fibrosis Value Set.
 - Acute Respiratory Failure Value Set.
- Members who had no asthma controller medications dispensed during the measurement year.