

2026 Measurement Year

STAR MEASURE: MEDICATION ADHERENCE FOR HYPERTENSION (MAH)

Measure Steward: Pharmacy Quality Alliance

Gold Coast Health Plan Total Care Advantage's (HMO D-SNP) goal is to help its providers gain compliance with their annual Managed Care Accountability Set (MCAS)/Centers for Medicare & Medicaid (CMS) Star measure scores by providing guidance and resources. This tip sheet provides the key components to the Star measure, "*Medication Adherence for Hypertension (RAS antagonists) (MAH)*."

Measure Description: *This measures the percentage of members 18 years of age or older with a prescription for a blood pressure medication (RAS antagonist) who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication in the measurement period.*

Measure Specification:

- ▶ Members are included in the measure if they have at least two fills of blood pressure medication (RAS antagonist) during the measurement year.
- ▶ Members are considered adherent if they have blood pressure medications available at least 80% of the days in the measurement year.
 - The proportion of days covered (PDC) is the standard metric used to measure adherence
 - Definition: PDC is the percentage of days in a measurement year that a patient has their medication available, based on pharmacy claims
 - Adherence Threshold: Patients are considered adherent if $PDC \geq 80\%$
 - Calculation: A day's supply available divided by total days in measurement period
- ▶ RAS antagonist medications that count toward the MAH measure include:
 - Angiotensin II receptor blockers (ARB)
 - Angiotensin-converting enzyme inhibitors (ACEI)
 - Direct renin inhibitors

Data Collection Method: Administrative¹

MAH Clinical Code Set: The MAH measure is entirely based on prescription drug event (PDE) data from pharmacy claims.

Exclusion Criteria – Members with any of the following conditions are excluded from the MAH measure:

- ▶ ESRD or dialysis during the measurement year or the year prior to the measurement year.
- ▶ Members in hospice or using hospice services any time during the measurement year.
- ▶ One or more prescription claim for sacubitril / valsartan (Entresto[®]) during the measurement year.

Best Practices:

- ▶ Use the Inovalon[®] Provider Enablement Quality Gap Insights to identify members with gaps in care.
- ▶ Make outreach calls to schedule appropriate follow-up with members to assess if medication is taken as prescribed if current treatment is appropriate.
- ▶ Remind members to use their insurance card to fill their prescriptions.
 - Gap closure is dependent upon pharmacy claims
- ▶ Encourage members to obtain 90-day supplies of the medication at their pharmacy.
 - Members and/or caregivers can obtain support signing up for a mail order pharmacy option (allowing them to fill a 90-day supply) by calling Member Services at 1-888-301-1228 (TTY: 711)
- ▶ Counsel members on their medication, why they are on it, and the importance of taking medications as prescribed (even when they feel well)
- ▶ Educate members on most common side effects, noting that severe symptoms are rare.
- ▶ Instruct patients to contact your office if they are experiencing side effects and not to stop the medication before doing so.
- ▶ Provide written instructions to reinforce teaching and include caregivers as appropriate.



- ▶ Encourage members to utilize pillboxes or organizers.
- ▶ Address barriers to medication adherence. Refer to GCHP Care Management to assist with barriers.
- ▶ Total Care Advantage's Care Management Team is made up of registered nurses, care management coordinators, and social workers who are ready to help Total Care Advantage members manage their health. Total Care Advantage Care Management referrals can be made by submitting the referral form available on the Gold Coast Health Plan (GCHP) website or by contacting the Care Management team by phone or email.
 - Care Management Contact: 1-805-437-5656
 - Care Management Email: CareManagement@goldchp.org
 - English Referral Form: [Click Here](#)
 - Spanish Referral Form: [Click Here](#)
- ▶ Ensure your documentation is clear and concise.
 - Though tracked through pharmacy claims, documentation and coding all conditions is key to representing member complexity for risk adjustment and identifying excluded conditions.

¹ Measures reported using the *administrative* data collection method report on the entire eligible population and use only administrative data sources (e.g. claims, encounter, lab, immunization registries) to evaluate if services were performed.