EQuIPP Outliers: What You Need to Know

Background: In September 2014, PQS launched support for the distribution of Patient Outlier reporting within the EQuIPP dashboard for pharmacy-level users. Since that time, the outlier function has expanded to include additional types of outliers as well as other features   being added. Patient Outlier reports provide a list of patients who are adversely impacting or may adversely impact your quality measure performance now or in the future for measures hosted in the EQuIPP dashboard. By addressing these patients, you are taking steps to improve patient care and affect your performance rates down the road.

PQS calculates outliers in most cases on a monthly basis, however, in some instances the data provider shares the outlier information directly. In such cases, they may be using a more recent time frame to identify patient outliers, therefore, some patient outliers may not reflect the performance data date range being displayed and may be updated daily.

Outlier Types:

✓ **Outlier**
   o These are the standard outliers that represent members that are adversely impacting individual measure performance based upon calculations from the data provided to EQuIPP during the given measurement data period.
      ▪ **PDC Rate**-Individual/personal PDC rates are displayed for every patient outlier for each adherence performance measure. Individual patient PDC rates gives information that provides the option to use various interventions tailored to the patients' level of adherence.

✓ **Late Refill**
   o This is a new outlier type as of early 2017. The outlier type will display as "Late Refill" *not* "Outlier" as these patients may not yet be outliers. The data provider sharing this data is alerting the pharmacy that the patient was or is late to refill their medication. Late refills may be identified as prescriptions that are anywhere from 11 to 17 days past due.

✓ **First Fill**
   o These outliers apply only to the High Risk Medication (HRM) measure and represent members who have filled one qualifying high risk medication (medication name & dose is also listed). These outliers represent a potential opportunity to prevent a second fill of the medication. These outliers may be updated on a more frequent basis, as often as daily or weekly, depending on the data provider.

Patient Outlier Designation Background: Launched in September 2016 and expanded in early 2017, this feature provides additional patient-level information to help identify actionable opportunities or key characteristics associated with Patient Outlier records. Look for these designations under the designation column on the outlier display.

Designation Definitions:

✓ **90 Day Outlier Designations**
   o Available for PDC measures only. Will highlight non-adherent patients where the most recent fill for a medication applicable to the PDC measure is less than a 60 day supply. Patient Outliers for the PDC measures with the 90 Day Opportunity designation can be sorted within the pharmacy Patient Outlier table allowing for pharmacy users to quickly bring all 90 Day Opportunities to the top of their case list.

✓ **Low Income Subsidy (LIS) Outlier Designations**
   o Designation provided where pharmacies would be able to easily identify unique member populations within the health plan who are eligible for a Low Income Subsidy. The designation will help identify that the member may be eligible for additional services or reduced co-pays or require advanced clinical support.

✓ **"No Impact" Outlier Designations**
   o Designation whereby the patient cannot achieve a proportion of days covered of at least 80% with the days remaining within the calendar year. The "No Impact" outlier designation shall bear a clear indication to pharmacies to help understand which patients are negatively impacting performance scores. This represents patients who do not have the potential to become adherent within the current calendar year.

EQuIPP™ Outliers: What You Need to Know

✓ **!** *"Actionable Impact" Outlier Designations*
  - o Designation whereby the patient can achieve a proportion of days covered of at least 80% or greater with the days remaining within the calendar year. The "Actionable Impact" outlier designation shall bear a clear indication to pharmacies to help understand which patients are currently negatively impacting performance scores but have the potential to become adherent within the current calendar year.

Measure Requirements to be considered an Outlier:
✓ *Medication Adherence Proportion of Days Covered (PDC) Outliers*
  - o Proportion of Days Covered (PDC) measures assess the percentage of patients covered by prescription claims for the same drug or for another drug in the same therapeutic class, within a calendar range. The PDC threshold is the level above which the medication has a reasonable likelihood of achieving the most clinical benefit; clinical evidence provides support for a standard individual PDC threshold of 80%. The following therapeutic categories are covered by the PDC measures hosted within the EQuIPP platform:
    - ▪ Non-insulin Diabetes Medications (including biguanides, sulfonylureas, DPP-IV inhibitors, TZDs, incretin mimetics, meglitinides, and SGLT2 Inhibitors)
    - ▪ Renin Angiotensin System (RAS) Antagonists (including ACE inhibitors, ARBs, and direct renin inhibitors)
    - ▪ Statins
  - o An outlier is a patient who has not achieved an individual PDC score of 80% or higher in the time period being measured
    - ▪ NOTE: Patients must receive at least two (2) fills of a target medication to be eligible for the measure AND their first fill of the medication must be at least 91 days prior to the end of the measurement period.

✓ *Statin Use in Persons with Diabetes Outliers*
  - o Patients aged 40-75 who have received at least two (2) fills of a medication for diabetes, but have not filled a statin medication during the current measurement period.

✓ *High Risk Medication Use in the Elderly Outliers*
  - o Patients who are 65+ years old and have received two or more fills for the same high-risk medication (see the HRM drug list on FAQ page of EQuIPP for specific medications) during the current measurement period, with the **following exceptions**:
    - ▪ Non-benzodiazepine hypnotics: A patient is an outlier if he/she has received at least two prescription fills for any medication in the class AND if the cumulative days supply for any product is greater than 90 days during the current measurement period
    - ▪ Nitrofurantoin: A patient is an outlier if he/she has received at least two prescription fills for the medication AND if the cumulative days supply for any nitrofurantoin product is greater than 90 days during the measurement period
    - ▪ Reserpine: A patient is an outlier if he/she received at least two prescription fills for the medication AND if the average daily dose is greater than 0.1mg
    - ▪ Digoxin: A patient is an outlier if he/she received at least two prescription fills for the medication AND if the average daily dose is greater than 0.125mg
    - ▪ Doxepin: A patient is an outlier if he/she received at least two prescription fills for the medication AND if the average daily dose is greater than 6mg

✓ *Suboptimal Control for Persons with Asthma Outliers (select pharmacies only)*
  - o Patients that have filled prescriptions for more than 3 canisters of a short-acting beta-2 agonist ("rescue inhaler") within 90 days during the current measurement period.

✓ *Absence of Controller Therapy for Persons with Asthma Outliers (select pharmacies only)*
  - o Patients that have filled prescriptions for more than 3 canisters of a short-acting beta-2 agonist within 90 days, but who have not received controller therapy (e.g. inhaled corticosteroids, long-acting beta-agonists, leukotriene inhibitors, or xanthines) during the same 90-day period.

Do I Have Access to Outliers?

- ✓ If you have access to Outliers, a button will appear underneath the "Gap" column for each measure (see Figure 1). Patient outliers will be displayed when the following criteria are met:
  - o The patient has met the definition of an Outlier (see "Measure Requirements" above)
  - o The health plan, PBM, or pharmacy organization submitting the claims data has elected to have their Outliers displayed to their pharmacy network (see "Outlier Types" above)

- ✓ A list of participating data providers who enable the Outlier feature and their associated service areas is included in the FAQ tab on the EQuIPP website. Please note that you may only have Outliers for certain measures depending on the data provider and patient population that you serve.

- ✓ Outliers are exposed *only* to store-level users. Those EQuIPP users who have access to an aggregate account (2 or more pharmacies) do not have access to Outliers. If you have access to 2 or more individual pharmacy accounts (non-aggregate), Outliers will be available.

Measure	Trend	Pharmacy		Versus Goal		Versus Others	
Name		# of Patients	Performance Score	Goal	Gap	Organization Average	State Average
Cholesterol PDC		219	**93.6%** ANALYZE PERFORMANCE	82% ↑ HIGHER IS BETTER	✓ OUTLIERS	86%	85.8%
Diabetes PDC		68	**95.5%** ANALYZE PERFORMANCE	83% ↑ HIGHER IS BETTER	✓	85.9%	85.6%
High-risk Medications		367	**5.7%** ANALYZE PERFORMANCE	3% ↓ LOWER IS BETTER	2.7% OUTLIERS	4.8%	6.5%

Figure 1: "OUTLIERS" button available under the Performance Dashboard view at the Pharmacy level

Viewing the Patient Outlier Page

Clicking the "OUTLIERS" button will bring the user to the patient list. The Outlier Report will display a list of patients that are outliers for the selected measure.

Patient Outliers for Cholesterol PDC

⬇ Download this Report

Designations & Type expanded 2017

Individual PDC rate now displays

			Patient					
Last Name	First Name	Date of Birth	Designations	Provided By	Type	PDC Rate	Status	Action
		04/10/	$		Outlier	72.53%	Not Started	
		08/09/	90		Outlier	46.29%	Not Started	
		04/23/	$		Outlier	73.81%	Not Started	
		01/15/	90		Outlier	24.22%	Not Started	

Figure 2: Outlier report view

- o Displayed here are Last Name, First Name, Date of Birth, Designations, Provided By, Type, PDC Rate, Status & Actions
- o The User can download & export the outlier list to a spreadsheet format and print the list if desired
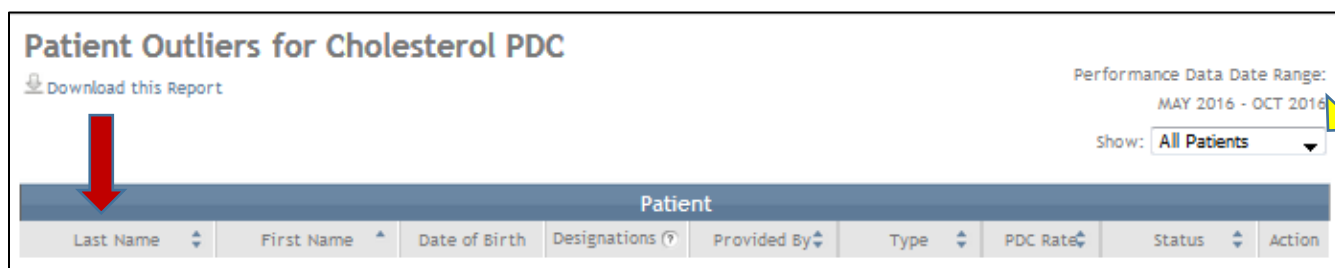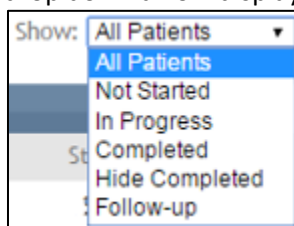
Figure 3: Status filter drop down

- o Each column can be sorted, simply select the Sort Arrows next to the Column Heading (red arrow above)

- o Further, the patient list may be filtered (yellow arrow above) with the following Status selections by using the drop down arrow displayed here:

Documenting Outlier Activities

The Outliers feature contains a documentation page that pharmacies can use to track activities. ***Please note - this does not impact performance scores but is a way for pharmacies to track these items over a period of time.*** It is meant to help multiple pharmacy team members working in the same location to coordinate and track the basic patient management activities that take place for the listed Outliers. **This documentation is *not* tied to any form of payment or transaction and is intended to simply support good patient management practices in an outcomes-focused way.** The information gathered in the documentation at this time will be used only to track patterns of activity so that resources and programs may be developed to better support quality improvement activities.

As a reminder, the EQuIPP performance scores only change based on applicable prescription drug claims during the measurement period evaluated. Typically, when a pharmacy initiates patient care services to address adherence, a patient may remain on the outlier list for several months. While an action was taken as an initial step, pharmacies should review potential follow-up with these patients in the coming months.

The EQuIPP user accessing the Outlier feature will have the opportunity to document the activity and outcomes associated with their management of the outlier patient. This feature is accessed by clicking on this icon ( ) in the activity column.

A menu opens up at this point and is grouped into 3 categories:
- ✓ **Action**: Includes the actions taken by a pharmacy staff to address the outlier (calling physicians, reviewing medication history, etc.)
  - o Multiple actions can be selected
- ✓ **Primary Barrier**: Includes the primary reasons that may be impacting the outcome of the intervention activities (Cost, unable to contact the patient or MD, etc.)
  - o Only one primary barrier can be selected
- ✓ **Outcome**: Includes the result, as identified by the pharmacy staff, of the actions taken to address the patient's issue
  - o Only one outcome can be selected

The default Status for a new patient outlier is "Not Started" (Figure 4). Once an Action is documented, the status will automatically change to "In Progress". Once an Outcome is documented, the status will automatically change to "Completed" and the date of the completed activity will display. The response options for Action, Primary Barrier, and

Outcome are customized for each measure and the documentation is designed to be completed in 20 seconds or less (refer to Figure 5 for an example view and refer to the Appendix at the end of this document for specific response options listed by measure).

Figure 4: Status Column

Figure 5: Action Response Options

Be sure to click "Submit" after completing the Activity documentation to save the entry and update the Status. If you make a mistake in your documentation, or want to reset the status to "Not Started", you can select "Clear Form" and it will erase your current selections.

Appendix: EQuIPP Patient Outliers Documentation Options

Pharmacy staff presented with a patient outlier record will be able to document for each patient outlier, via checkboxes displayed, within the following categories:

- ✓ **Actions:** These include actions taken by the pharmacy staff to address the outlier. Pharmacy staff will be able to document all actions taken.
- ✓ **Primary Barrier:** These are the primary reasons, as identified by the pharmacy staff, for the outlier record. Pharmacy staff will list the primary reason for the outlier.
- ✓ **Outcome:** These outcomes are the result, as identified by the pharmacy staff, of the actions taken to address the outlier record.

A: Adherence (PDC) Measures
Action (select all that apply)
1. Medication history check
2. Patient contact attempted
3. Patient consulted
4. Prescriber consulted
5. Adherence intervention, other
6. No action, patient deceased

Primary Barrier (select one)
1. Unable to contact patient
2. Unable to identify/contact prescriber
3. Previous fill identified, false positive
4. Patient, medication is not a priority/not important
5. Patient, cost
6. Patient, fear of side effects
7. Patient, forgetfulness
8. No longer fills at this location-Patient moved or transferred prescription
9. Long-term care patient-Patient no longer at facility
10. Long-term care patient-Facility uses post-consumption billing

Outcome (select one)
1. No change
2. Filled/Refilled existing prescription
3. Enrolled patient in adherence program
4. Discontinued, contraindication
5. Discontinued, not tolerated
6. Previous fill through other payer
7. Previous fill through cash program
8. Recommended alternative, new Rx filled
9. Recommended alternative, Not accepted by prescriber
10. Contacted prescriber to discuss, No change at this time
11. Temporary change in medication regimen
12. Permanent change in medication regimen
13. Not applicable

B: Statin Use in Persons with Diabetes Measure

Action (select all that apply)

1. Medication history check

2. Patient consulted

3. Prescriber consulted

4. No action-Patient deceased

Primary Barrier (select one)

1. Clinical contraindication to statin therapy

2. Unable to identify/contact prescriber

3. No longer fills at this location-Patient moved or transferred prescription

Outcome (select one)

1. Filled/Refilled existing prescription

2. Recommended new therapy, new Rx filled

3. Recommended new therapy, Not accepted by prescriber

4. Discontinued, contraindication

5. Discontinued, not tolerated

6. Previous fill through other payer

7. Previous fill through cash program

8. Temporary change in medication regimen

9. Not Applicable

C: High Risk Medications (HRM) Measure

Action (select all that apply)

1. Medication history check

2. Patient contact attempted

3. Patient consulted

4. Prescriber consulted

5. No action-Patient deceased

Primary Barrier (select one)

1. No previous fill identified, false positive

2. Unable to contact patient

3. Unable to identify/contact prescriber

4. Alternatives failed, HRM is only option

5. Existing therapy is successful, unwilling to change

6. No longer fills at this location – Patient moved or transferred prescription

Outcome (select one)

1. Filled/Refilled existing prescription

2. Discontinued, No new therapy prescribed

3. Recommended alternative, Not accepted by prescriber

4. Recommended alternative, New Rx filled

5. Temporary change in medication regimen

6. Permanent change in medication regimen

7. Not Applicable

D: Asthma – Suboptimal Control

Action (select all that apply*)***

1. Medication history check
2. Patient contact attempted
3. Patient consulted
4. Prescriber consulted

Primary Barrier (select one)

1. No previous fill identified, false positive
2. Unable to contact patient
3. Unable to identify/contact prescriber
4. Existing therapy is successful, unwilling to change
5. One-time fill for special circumstance, false positive
6. No longer fills at this location-Patient moved or transferred prescription

Outcome (select one)

1. No change
2. Filled/Refilled existing prescription
3. Recommended alternative, Not accepted by prescriber
4. Recommended alternative, New Rx filled
5. Temporary change in medication regimen
6. Not Applicable

E: Asthma – Absence of Controller Therapy

Action (select all that apply)

1. Medication history check
2. Patient contact attempted
3. Patient consulted
4. Prescriber consulted

Primary Barrier (select one)

1. Previous fill identified, false positive
2. Unable to contact patient
3. Unable to identify/contact prescriber
4. Existing therapy is successful, unwilling to change
5. No longer fills at this location-Patient moved or transferred prescription

Outcome (select one)

1. Filled/Refilled existing prescription
2. Recommended new therapy, new Rx filled
3. Recommended new therapy, Not accepted by prescriber
4. Discontinued, contraindication
5. Discontinued, not tolerated
6. Previous fill through other payer
7. Previous fill through cash program
8. Temporary change in medication regimen
9. Not Applicable