

PQS

PHARMACY QUALITY SOLUTIONS

EQUIPP®

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## Who is PQS?

Pharmacy Quality Solutions (PQS), is the leading provider of performance management services between payers and providers so patients and members can receive the highest quality of care. PQS delivers the quality insights and guidance necessary to support its customers' efforts to optimize the quality of medication management and use for their Medicare, Medicaid and commercial populations. PQS connects medication use stakeholders to actionable, quality information in a consistent and reliable fashion, allowing them to move more quickly from measurement to improvement. Its industry-leading platform, EQuIPP®, provides consistent and reliable measurement and reporting on key medication use quality measures, including addressing medication adherence, gaps in care, and patient safety. PQS provides measurement insights that are timely, actionable, and simply understood.

## What Drives Us



### Mission

To drive value in healthcare through standardized performance measurement for payers and practitioners



### Core Values

Accuracy  
Honesty  
Integrity  
Neutrality  
Transparency



### Our Vision for the Future

A patient centered healthcare marketplace where data enables payers and practitioners to continuously improve quality of care

# Welcome to EQuIPP®

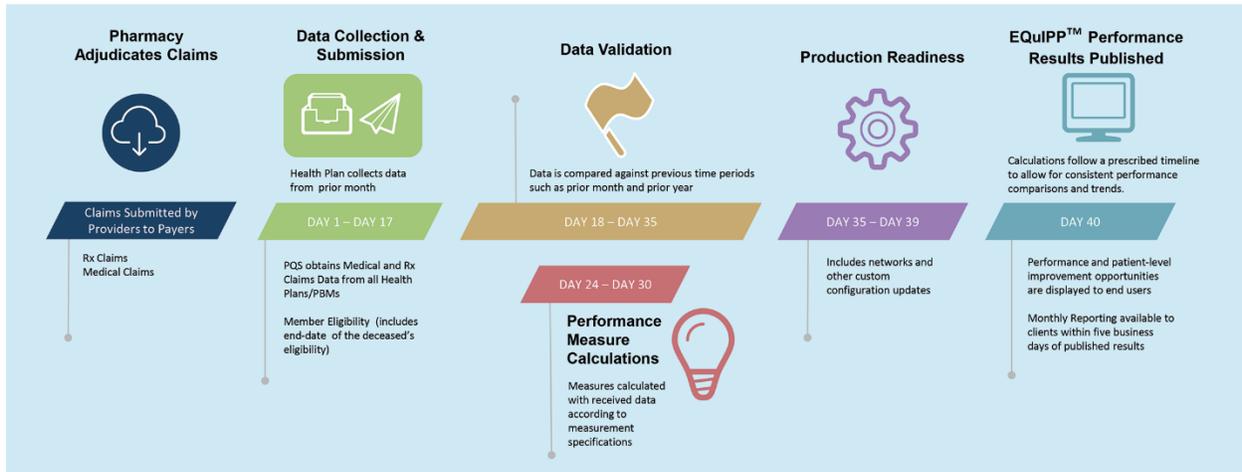


## What is EQuIPP®?

EQuIPP® is a performance information management tool that provides standardized, benchmarked data to help shape strategies and guide medication-related performance improvement.

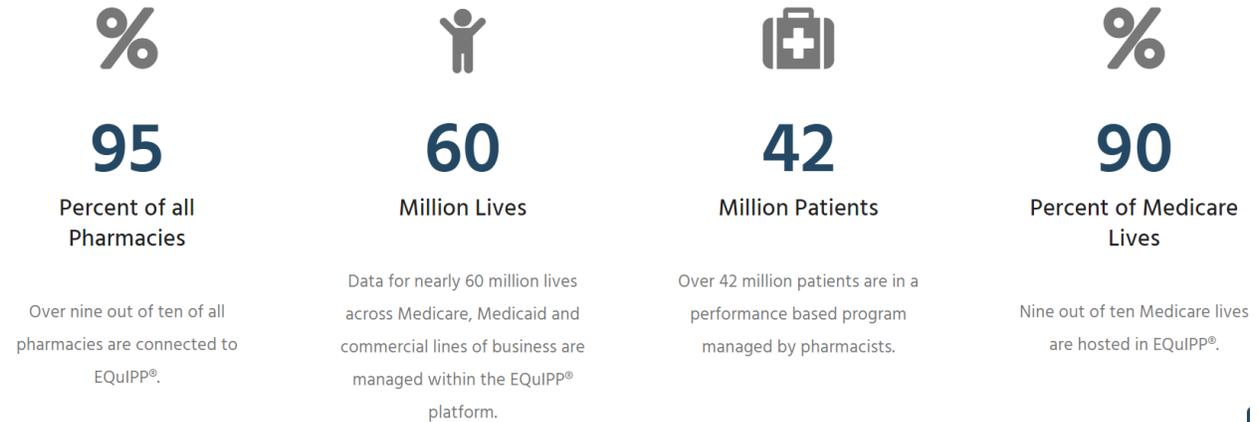
PQS receives prescription claims and member eligibility details from health plans and PBMs. Therefore, claims not adjudicated through the patient's insurance are not captured.

## How is Data Transmitted and Received in EQuIPP®?



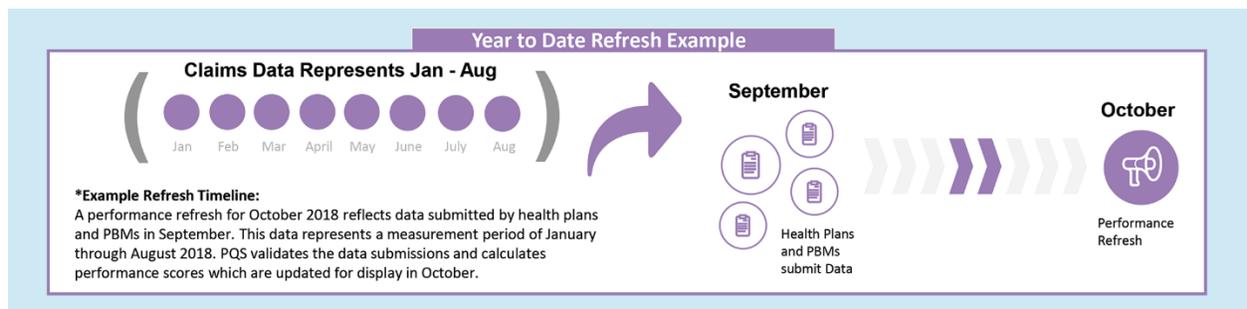
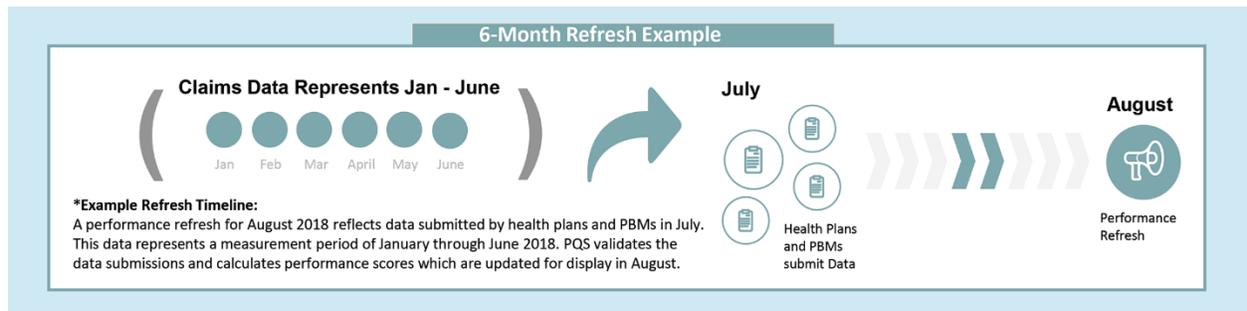
## For the Record

Pharmacy Quality Solutions manages a lot of data including pharmacy and medical claims. Here's a quick overview of PQS's reach as of May 2020.



## EQulPP® - Refresh Timeline

EQulPP® refreshes performance score information on a monthly basis. Our refresh timeline is based on pharmacy claims submission data 40-days in arrears. This timeline allows both the data providers (health plans and PBM's) along with PQS to validate the information being provided to pharmacies. Below are examples of the 6-Month Refresh Timeline and our Year-to-Date Refresh Timeline.



# EQuIPP® Dashboard

The screenshot shows the EQuIPP dashboard interface. At the top, there is a navigation bar with tabs for Home, Performance Dashboard, Resources, Profile, and FAQ. A 'Support' link with a yellow arrow pointing up is located in the top right corner. Below the navigation bar is a large banner area with the text 'Welcome to EQuIPP™' and 'Managing Performance, Improving Quality'. The banner features several performance metrics: 82% (Higher is Better), 5.7% (Improvement), 85.9%, 86.1%, 81.9% (Quality Performance), 81% (Higher is Better), 87.5%, and 89.8%. Below the banner are three main sections: 'News' with a link to 'Highlight on EQuIPP™ Immunizations', 'Learn About EQuIPP' with a description of the platform, and a 'Login' form with fields for Username and Password, a 'Forgot password?' link, and a 'LOGIN' button. A yellow arrow points to the 'Login' button. At the bottom of the dashboard, there is a footer with the PQS logo, copyright information for Premier Inc., and the Premier logo.

EQuIPP® users can access EQuIPP® at [www.equipp.org](http://www.equipp.org).

There are two primary ways to access EQuIPP®:

Standard login Process – In order to access EQuIPP®, Users will be required to enter the Username and Password provided during account creation. If a user is having trouble logging in, see the password reset section for additional support.

Users will be asked to change password upon logging in for the first time. Please choose a password that is secure. We require EQuIPP® passwords to contain one capital letter, one lower case letter, one number, and one special character (cannot use ! or \*, but feel free to use &, #, @, +, etc.). Users will also be asked to select a security question and correct answer in case you need your password reset in the future.

Single Sign On (SSO) Login – Some pharmacy organizations require pharmacies to log in through their site via SSO. Those with an SSO login will not need a password to log in. If your pharmacy organization utilizes an SSO, please log in through the designated channels and contact EQuIPP Support if you have any difficulties logging in.

## Performance Dashboard

The performance dashboard allows users to view data relevant to performance on measures for which they have attributed patients

When selecting Performance dashboard, users asked to select the pharmacy they wish to view the performance report for. Each report will provide data unique to the given pharmacy

## Goal Settings:

Goals align either with a specific Medicare Star Rating threshold or a goal based on current EQUIPP® scores (ie: Top 20% 6-month or Top 20% YTD)

## Selecting 'View-As' and Period Performance Data Date Range

The drop-down information allows users to adjust the 6-month and Year-to-Date data range to view other date ranges that are available.

The data date range on the right-hand side of the screen will represent what performance period is selected from the 'View As' bar. The data shown in the performance dashboard will represent how these two options relate to one another inclusive of the medication-related quality measures available for your pharmacy's data. The quality measures are listed here in the left side of your dashboard.

## 6-Month Trend

The 6-Month trend view is the current default view in EQUIPP®, where performance scores are based on a rolling 6-months of prescription drug claims activity.

The screenshot displays the EQUIPP Performance Dashboard. At the top, there is a navigation bar with 'Home', 'Performance Dashboard', 'My Programs', 'Resources', 'Profile', and 'FAQ'. Below this is a section for 'Organizations' with a list of four items: Pharmacy Chain ABC, Health Plan A, Pharmacy ABC, and Pharmacy Chain ABC - Immunizations. Each item has a 'VIEW PERFORMANCE REPORTS' button. The main section is titled 'Pharmacy Report' for 'Pharmacy ABC'. It includes a 'Goal' dropdown set to '5-star', a 'Print this Report' button, and a 'View' dropdown set to '6-Month Trend'. A 'Performance Data Date Range' dropdown is set to 'MAY 2019 - OCT 2019'. Below this is a table with columns for 'Measure', 'Trend', 'Pharmacy', 'Versus Goal', and 'Versus Others'. The table lists five measures: Cholesterol PDC, Diabetes PDC, High-risk Medications, Statin Use in Diabetes, and RASA PDC. Each measure row shows the number of patients, the performance score, the goal percentage, the gap, and the organization and state averages.

Measure	Trend	# of Patients	Performance Score	Versus Goal		Versus Others	
				Goal	Gap	Organization Average	State Average
Cholesterol PDC		99	83.8%	79%	✓	85.8%	88.4%
Diabetes PDC		38	76.3%	82%	5.7%	85.9%	88.1%
High-risk Medications		230	3%	6%	✓	4.6%	4.4%
Statin Use in Diabetes		51	74.5%	78.9%	4.4%	71%	70.3%
RASA PDC		122	81.9%	81%	✓	87.5%	89.8%

## Year to-Date View

The Year-To-Date view is another data trending view in EQuIPP®, and captures performance based on prescription drug claims activity from the beginning of the current calendar year until the most recent month of activity.

## Immunization View

The immunization Measurement period currently applies to the Annual Influenza Vaccination Rate Measure.

**Note:** The “Flu Season” does not fit into either the Six-Month or YTD measurement periods. The immunization measurement period is June 1<sup>st</sup> – March 31<sup>st</sup> of the following year.

## EQuIPP® Need to Know

By clicking on the EQuIPP® Need to Know button, users will access the need to know section within the resources page in EQuIPP®. This page is filled with important information that may make understanding your data easier.

## Adherence

The adherence measures within the EQuIPP® dashboard have eligibility requirements for the Cholesterol, Diabetes and RASA measures.

Each adherence measure utilizes the proportion of days covered methodology to arrive at a performance score. This methodology rates the percentage of patients covered by prescription claims for the same drug or for another drug in the same therapeutic class, within a measurement period

Minimum requirements for a patient to be eligible for the adherence measures include:

- Patient must have at least two (2) fills in the measurement period – regardless of the days’ supply of the prescription fills
- The first fill of the applicable medication (class) must be at least ninety-one (91) days prior to the end of the measurement period

These therapeutic categories are covered by the PDC measures hosted within the EQuIPP® platform:

- **Cholesterol PDC:** Statins
- **Diabetes PDC:** Non-insulin Diabetes Medications (including biguanides, sulfonylureas, DPP-IV inhibitors, TZDs, GLP-1 receptor agonists/incretin mimetics, meglitinides, and SGLT2 Inhibitors)

\*\*Patients on insulin are excluded from this measure\*\*

- **RASA PDC:** Renin Angiotensin System Antagonists (including ACE inhibitors, ARBs, and Direct Renin Inhibitors)

## Measures

Proportion of Days Covered (PDC) measures assess the percentage of patients covered by prescription claims for the same drug or another drug in the same therapeutic class, within a measurement period.

The PDC threshold is the level above which the medication has a reasonable likelihood of achieving the most clinical benefit (at or greater than 80% for most of the measures).

The PDC methodology is a standard method used to measure medication adherence and is specified within the adherence measures endorsed by the Pharmacy Quality Alliance.

The adherence measures associated with PDC methodology are:

- Cholesterol PDC
- Diabetes PDC
- Renin Angiotensin System Antagonist (RASA) PDC

Specialty quality measures that also utilize the PDC methodology are:

- Antiretroviral PDC
- Multiple Sclerosis PDC

## Patient Safety Quality Measures

### STATIN USE IN PERSONS WITH DIABETES (SUPD)

A statin-use related quality measure focused on the number of eligible patients who have received a statin medication in the measurement period

### STATIN USE IN PERSONS WITH CARDIOVASCULAR DISEASE (SPC)

A statin-use quality measure focused on the percentage of patients with a diagnosis of atherosclerotic cardiovascular disease and have received a moderate to high intensity statin medication in the measurement period

### SPECIALTY MEASURES

#### **Proportion of Days Covered: Antiretroviral Measure**

Patient must have at least **two (2)** fills in the measurement period of two or more distinct antiretroviral medications.

- Can be two fills of combination products or two fills of two different single-agent medications

- The attributed patients must have 90% of their days covered within the measurement period to positively impact the performance score.

#### **Adherence to Non-Infused Disease-Modifying Agents Used to Treat Multiple Sclerosis Measure**

- Patient must have at least **two (2)** fills in the measurement period for a non-infused disease-modifying medication to treat Multiple Sclerosis
- Total day supply of fills must be more than 56 days or more days within the measurement period
- Eligible patients must have 80% or more days covered within the measurement period within these therapeutic categories:

*Beta-interferons, Glatiramer acetate and dimethyl fumarate*

**Note:** Additional measure resource information is available in EQuIPP® resources for further explanation

## Performance Scores

Scores represent the percentage of patients that are meeting the intent of the measure. Therefore, for adherence measures, scores represent the percentage of patients at the pharmacy or across the pharmacy organization that are adherent. Performance measures hosted within EQuIPP® are calculated using claims data that has been adjudicated to a health plan or pharmacy benefit manager that partners with EQuIPP®

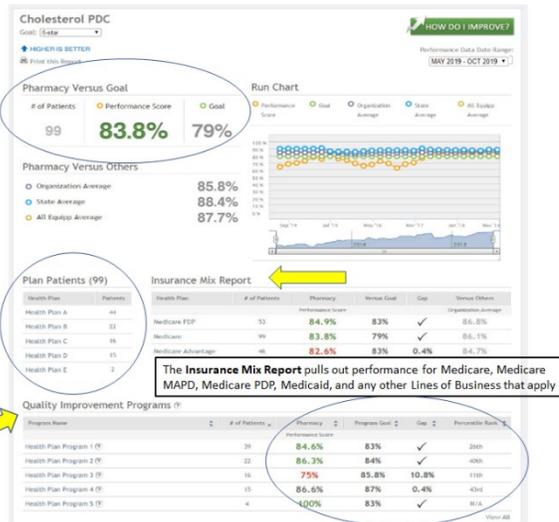
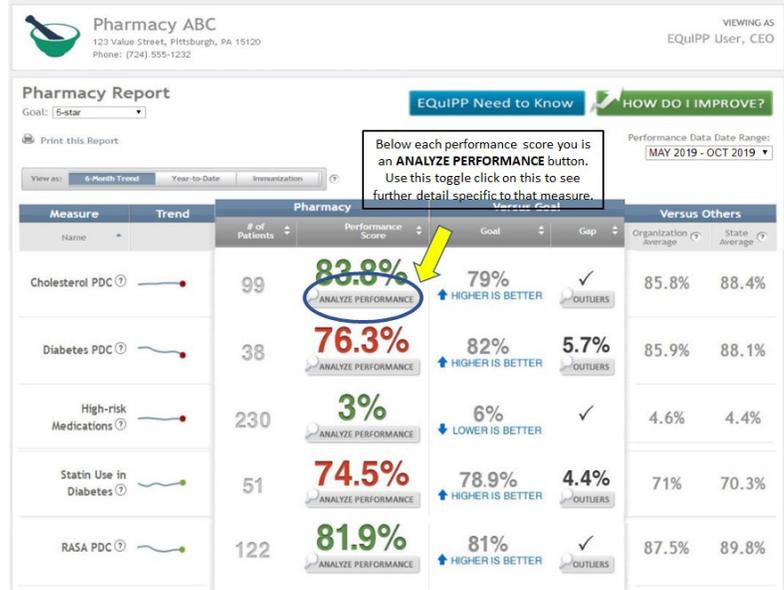
**Note:** Performance scores will vary based on the measure (i.e. adherence measures are based on PDC methodology and SUPD measures will rate the total number of patients who are attributed to the measure having reached the intent of the measure requirements.)

## Goals and Gaps

This section is a Comparison of information to other pharmacies in your organization, state and the average for all pharmacies in EQuIPP® for this specific metric

## Analyzing Performance

Below each performance score this button exists, click on this to see additional detail specific to that measure



## Pharmacy Versus Goal

Comparison information to other pharmacies in your organization, state and the average for all pharmacies in EQuIPP® for this specific metric

## Run Chart

Run Chart is a trend chart over time which provides a visual view of the direction the metric is moving

## Plan Patients

The area details how many patients/per health plans your pharmacy has in this measure

## Insurance Mix Report

This area shows performance data for Medicare, Medicare MAPD, Medicare PDP, Medicaid and any other Lines of Business that may apply

## Quality Improvement Programs

Each quality measure will contain this table within the 'Analyze Performance' tab. The data here represents contract or program specific information applicable to your pharmacy for the selected measure

Green – Highest Goal  
 Gray – Between  
 Red – Lowest Goal

Percentilerank is based on the performance within a line of business and will be applied when 10 or more patients are within the measure and program

Quality Improvement Programs ?

Program Name	# of Patients	Pharmacy Performance Score	Program Goal	Gap	Percentile Rank
Health Plan Program 1 ?	39	84.6%	83%	✓	26th
Health Plan Program 2 ?	22	86.3%	84%	✓	40th
Health Plan Program 3 ?	16	75%	85.8%	10.8%	11th
Health Plan Program 4 ?	15	86.6%	87%	0.4%	43rd
Health Plan Program 5 ?	4	100%	83%	✓	N/A

View All

? ← This icon can be hovered over for additional details on each quality improvement program

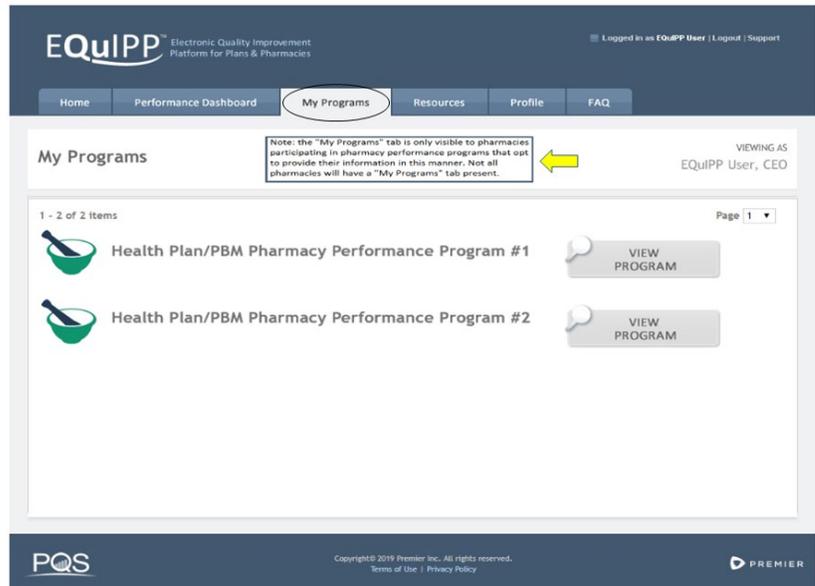
Selecting 'View All' will cascade additional programs attributed to your pharmacy

In the far-left column, each quality improvement program will be named. The total number of patients will be reflected in the next column followed by your pharmacy's performance score for each of those programs. The program goal is established by the health plan and is intended to provide guidance on the measure specific health plan performance expectation.

A percentile ranking will be available in the last column of the table and is calculated for all NPI's with at least 10 patients within each program. The view all selection will cascade the entire table to show all quality improvement programs for your attributed patients in the measure.

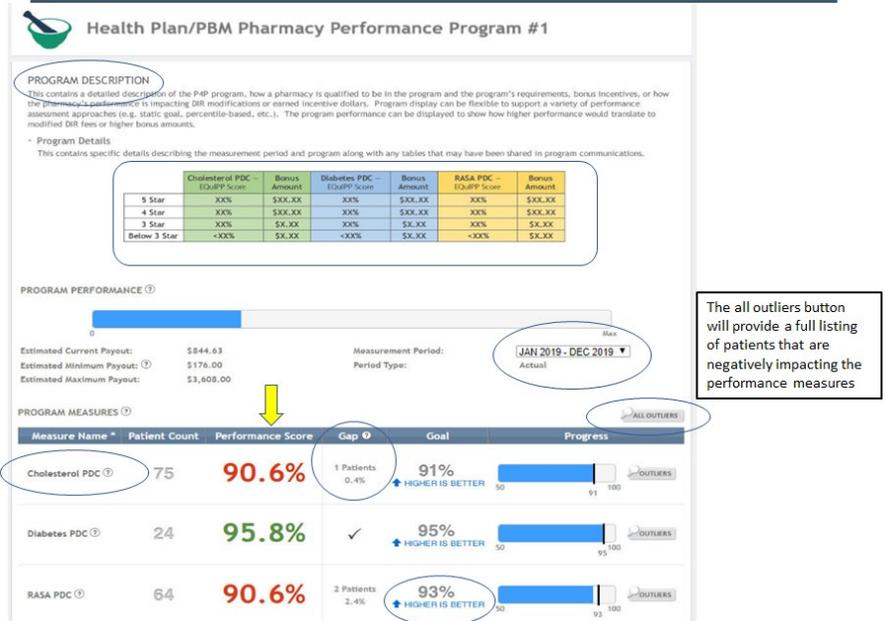
## My Programs

The 'My Programs' tab hosts performance program data for specific health plans that directly correlates patient counts and/or performance scores with financial impact. This level of transparency is intended to help pharmacies understand where there is an opportunity for performance improvement and how that opportunity equates to potential financial incentive. Each instance of a "My Programs" is implemented when a plan or payer has agreed to provide this level of detail through EQulPP® for pharmacies.



## Viewing Programs

By clicking on the View Program Button, pharmacies will be able to see detailed information about pharmacy performance on measures that directly impact them. Information is available such as: program description, performance scores for specific measures, patient count for specific measures, gaps to reach specified goals, and outliers.



## Program Description

The program description in the left corner of the page provides program specific details to define what the program is and how a pharmacy's participation evaluated.

## Program Performance

Summarizes the pharmacy's performance across the applicable program measures and displays key information on the untapped opportunity to improve program performance. In this section, an 'all outliers' button is available for each patient negatively impacting a pharmacy's performance score to help the pharmacy with improvement strategies.

## Program Payouts

The Program payout section gives pharmacies an estimate of their payout based on their performance on the program measures at that snapshot in time.

## Program Measures

The program measures section breaks down the different performance measures that impact the given pharmacy.

## Gap

If the performance score is below the goal, the gap will list the number of patients needed to reach the goal and the percent difference that patient impact is making.

## Outliers

A patient attributed to a specific quality measure that is not meeting the intent of the measure



**Pharmacy ABC**  
123 Value Street, Pittsburgh, PA 15120  
Phone: (724) 555-1232

VIEWING AS  
EQUIPP User, CEO

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### Patient Outliers for Diabetes PDC

[Download this Report](#) Performance Data Date Range: MAY 2019 - OCT 2019

Show: All Patients

Patient								
Last Name	First Name	Date of Birth	Designations	Provided By	Type	PDC Rate	Status	Action
Smith	Jane	XX/XX/XXXX	! 90	Program 1	Outlier	72.81%	Not Started	
Smith	James	XX/XX/XXXX	! 90	Program 1	Outlier	59.79%	Not Started	
Smith	James	XX/XX/XXXX	90	Program 3	Outlier	57.96%	Not Started	
Smith	James	XX/XX/XXXX	90	Program 2	Outlier	76.19%	Not Started	
Smith	James	XX/XX/XXXX	\$	Program 1	Outlier	77.21%	Not Started	

## Outlier Type

A feature within the outlier information of the performance dashboard to categorize how that patient is being identified. Patient outliers may include standard outliers, patients late for refills or patients with a first fill of target medications. The following Outlier Types are displayed:

- 90-Day Opportunity – The patient has been previously dispensed a 30-day supply but is eligible for a 90-day dispense of the related medication.
- Low Income Subsidy (LIS) – The patient is eligible to receive a 90-day supply for the same copay as a 30-day supply
- No Impact – Patient does not have the potential to become adherent before the end of the calendar year based on their PDC Rate.
- Actionable Impact – Patient has the potential to become adherent by the end of the current calendar year based on their PDC Rate.
- Flu Shot Need – Patient has not received their annual influenza vaccination according to both pharmacy and medical claims.
- Flu Shot Received – Patient has already received their annual influenza vaccination according to both pharmacy and medical claims.
- Statin Intensity – Patient needs to receive a moderate or high intensity statin/stain-combination product.
- SPC Indicator – Patient level designation indicating the member has a gap in statin therapy and is recommended to receive a high to moderate-intensity statin based upon their condition of Cardiovascular Disease.
- SUPD Indicator – Patient level designation indicating the member has a gap in statin therapy and is recommended to receive a statin based upon their condition of Diabetes.

## PDC Rate

The score attributed to a patient outlier based on the percentage of the number of days they have had a medication covered during a measurement period

## Action Plan

A documentation tool designed for use by pharmacy staff members in reference to a patient outlier with details for next steps in improving adherence.

## Actionable Improvement Opportunities

Identifies patient outliers (which are patients not meeting the intent of the measure and are targets for improvement).

## Frequency of Outlier Updates

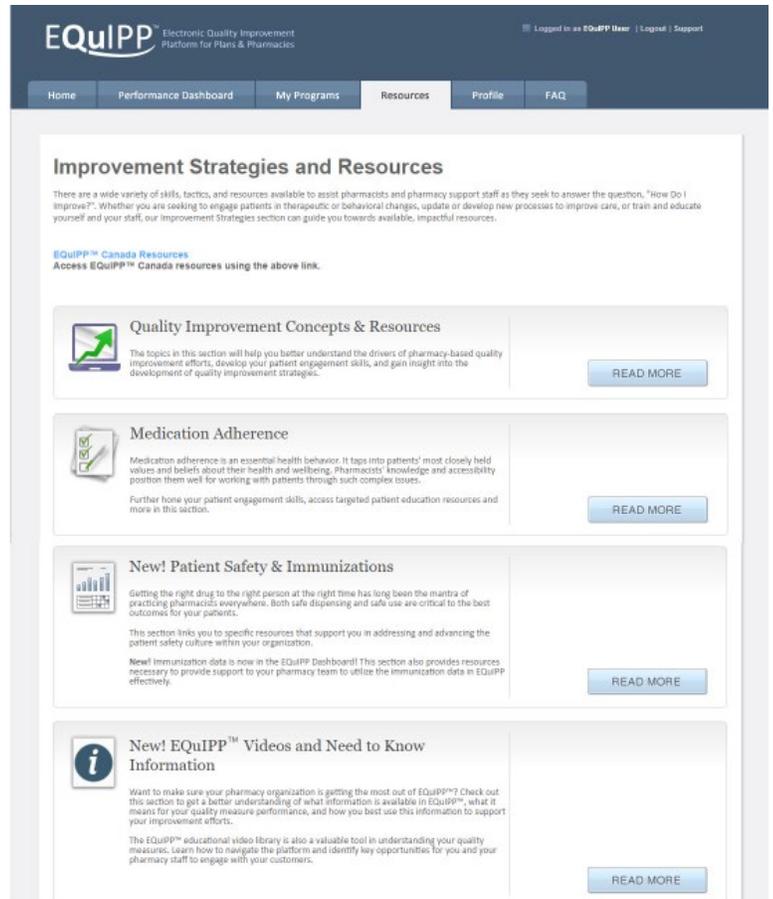
Patient outliers or targets are updated as frequently as weekly.

## Impact Indicators

Patient flags clearly identify patients with improvement opportunities within the calendar year.

## Resources

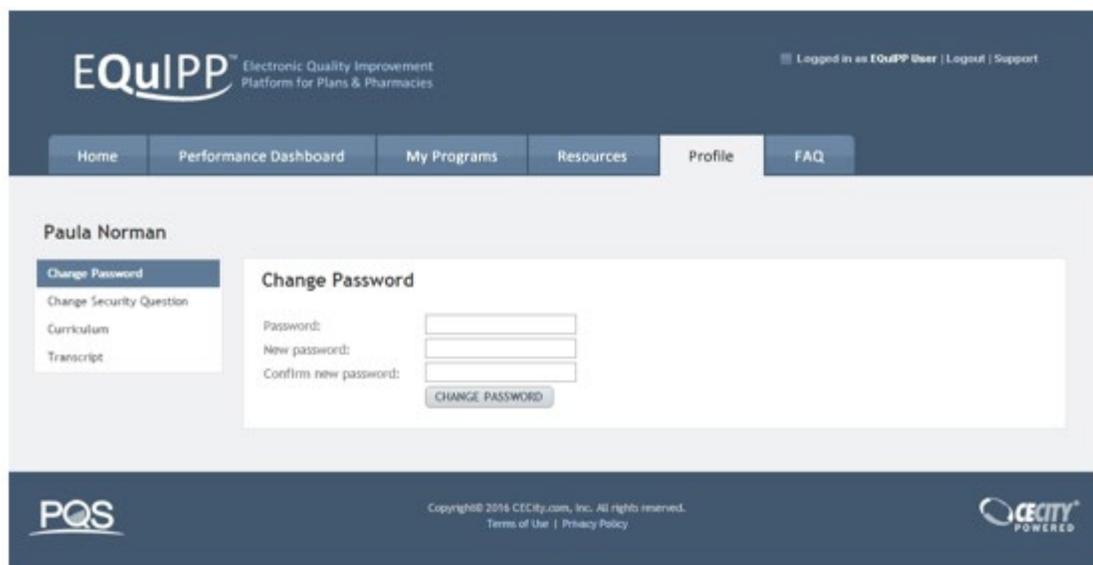
The resource tab offers users quick access to resources that will help pharmacies understand the data being presented to them. For additional resources, see the [Educational Resources](#) section below.



The screenshot shows the EquiPP user interface. At the top, the logo 'EquiPP Electronic Quality Improvement Platform for Plans & Pharmacies' is displayed, along with a user login status 'Logged in as EquiPP User | Logout | Support'. A navigation bar includes 'Home', 'Performance Dashboard', 'My Programs', 'Resources', 'Profile', and 'FAQ'. The main content area is titled 'Improvement Strategies and Resources' and contains four resource cards, each with an icon, a title, a brief description, and a 'READ MORE' button. The cards are: 1. 'Quality Improvement Concepts & Resources' with a green arrow icon; 2. 'Medication Adherence' with a clipboard icon; 3. 'New! Patient Safety & Immunizations' with a bar chart icon; 4. 'New! EquiPP™ Videos and Need to Know Information' with an information icon.

## Profile

Within the profile page, users will be able to change passwords without contacting the support system.



The screenshot shows the EquiPP user interface for the 'Profile' section. The user is identified as 'Paula Norman'. A sidebar menu on the left lists 'Change Password', 'Change Security Question', 'Curriculum', and 'Transcript'. The main content area is titled 'Change Password' and contains three input fields for 'Password:', 'New password:', and 'Confirm new password:', followed by a 'CHANGE PASSWORD' button. The footer includes the 'PQS' logo, copyright information 'Copyright © 2014 CECity.com, Inc. All rights reserved. Terms of Use | Privacy Policy', and the 'CECITY POWERED' logo.

## Password Reset

EQuIPP® users who have a direct login can only reset their password after using their temporary initial password. EQuIPP® users that have Single Sign On (SSO) access through their pharmacy organization cannot reset their password through the EQuIPP® password or login through the EQuIPP® website, as no password is necessary for access.

To reset your EQuIPP® password, click on “Forgot Password?” and enter your username. You will then be prompted to answer a security question. If the security question is blank, please contact EQuIPP® Support.

If the answer to the security question matches the answer entered when the account was created, you will be prompted to change your password. Please note that the new password must be at least 8 characters long, include 1 upper case letter, 1 lower case letter, 1 number, and 1 special character (including only characters @, #, \$, %, ^, &, +, =, !)

## Where to Start Each Month

The EQuIPP® platform is a great place to start building a mindset focused on quality improvement and incorporating a model to follow. An improvement model we recommend is the Plan, Do, Check, Act (PDCA) Cycle. This model is initiated by identifying your goal, understanding that change is an improvement, and recognizing what new initiatives will result in improvement.

The pharmacies should be determined by all staff and should consider the needs of the community and is the pharmacy’s unique patient population. For this example, let’s say the pharmacy’s goal is to improve adherence metrics for patients. The *quality champion* will be an identified team member who’s task will be to log into the EQuIPP® dashboard weekly to track outliers. An outlier is a patient who has not met the intent of a medication-related quality measure. In some instances, a patient may need a consult to determine why they have not filled their medications. This could develop some encouragement to come back to the pharmacy to have medications filled routinely. Keep in mind, a fill must be submitted as a pharmacy claim for the data to be captured by the health plan and presented in the EQuIPP® dashboard.

Change is not instant, but it can progress over time. If these steps are taken with the pharmacy team and team member’s hold each other accountable, success and improvement will follow. Led by the quality champion, the PDCA cycle could be utilized with the EQuIPP® dashboard in this manner:

1. **Plan** to identify what the goal is for the day and then the week. As the quality champion, include staff in what will be done, when it will be done and for how long.

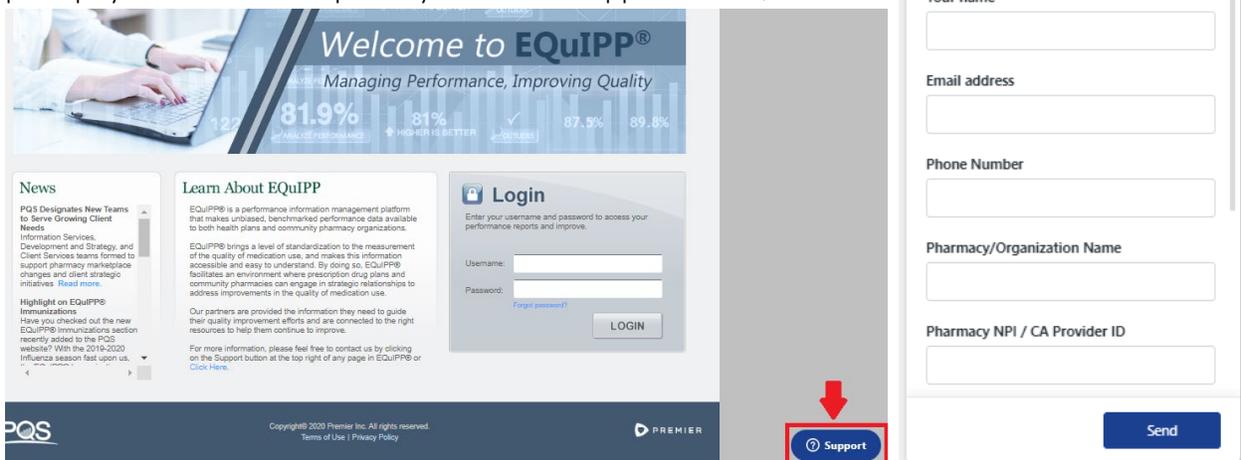
2. **Do:** Log in to the EQuIPP® dashboard at least once a week to review outliers. This should take no more than 15 minutes on the same day each week.
3. **Check your monthly performance metrics after each EQuIPP® refresh.** This typically occurs between the 10<sup>th</sup> and 15<sup>th</sup> of each month. Data in each quality measure and the QIP table should be reviewed to track progress.
4. **Act** on those performance metrics where an improvement was not made and develop a new goal for the team to complete for the weeks to come.

The goal of improving the quality of medication use in patients in the pharmacy is the responsibility of the entire pharmacy team. While the engagement factor may begin with one person (the quality champion), the entire pharmacy team can rally behind each win that improves your pharmacy’s performance and provides a lasting impact on your community. Remember, establishing a daily goal, having a plan of execution, and working hard will produce results the entire pharmacy team can celebrate.

## Support

End-users can select the support link to ask questions related to medication-related quality measures, performance metrics and other EQuIPP® related inquiries

If you are having issues with your EQuIPP® Software, users should submit and support ticket to ensure that their problem is fixed promptly. There are multiple ways to access support for EQuIPP®.



Users can access the support link found at the bottom right corner of the page. Users must fill out all required fields in order to submit a request.

In Addition, Users can submit a support request by clicking the Support Button at the top of the page.



Note: Users should expect a response within 1 business day of submitting a ticket





# Frequently Asked Questions

## FAQ

The FAQ section offers quick answers to commonly asked questions regarding EQuIPP® Data, measurement periods, performance scores, and how to impacts performance scores.

1. What is EQuIPP®?
  - a. EQuIPP® is a performance information management tool that provides standardized, benchmarked performance information needed to shape strategies and guide medication-related performance improvement efforts.
2. What do these numbers mean?
  - a. Scores represent the percentage of patients that are meeting the intent of the measure. Therefore, for adherence measures, scores represent the percentage of patients at the pharmacy or across the pharmacy organization that are adherent.
  - b. Performance measures hosted within the EQuIPP® are calculated using prescription drug claims data that has been adjudicated to a health plan or pharmacy benefit manager that partners with EQuIPP®.
  - c. As an example of adherence, if you see Cholesterol PDC with 100 patients and a score of 92%, then that means of the 100 patients attributed to your pharmacy

for the measure, 92% of them have an adherence rate greater than or equal to 80% for the time period that we're looking at.

3. Why do we have 3 different measurement periods (seen as "View As" in EQuIPP®) and which should I focus on?
  - a. Users can select from a "6-Month", "Year-To-Date", or "Immunization" measurement period.
  - b. The 6-Month measurement represents a rolling period to provide a consistent window to assess performance and determine how activities or new strategies for improvement are impacting scores. The longer the measurement period, the longer it takes to pick up on changes in performance. Therefore, EQuIPP defaults to display this measurement period on log-in.
  - c. The "Year-To-Date" (YTD) measurement period assesses performance throughout the calendar year with the beginning of the measurement period starting on January 1st. The first YTD period calculated in EQuIPP® occurs in May of each year and represents data from January through March. In June, the YTD period would display data from January to April. This continues throughout the year until February of the following year when the measurement represents a full calendar year.
  - d. The third measurement period known as "Immunization" only applies to the Annual Influenza Vaccination Rate measure to account for the "flu season" which does not fit into either the 6-Month or YTD measurement periods. The "Immunization" measurement period is June 1<sup>st</sup> through March of the following year.
  - e. Users should view performance according the measurement periods that align with either the pharmacy or organization's strategic approach or performance-based programs that the pharmacy or organization may be participating in. However, most health plans and performance programs are focused on YTD performance.
4. Where does the data come from?
  - a. PQS receives prescription claims and member eligibility details from health plans and PBMs. Therefore, claims that are not adjudicated through the patient's insurance are not captured.
5. When are my scores updated?
  - a. This typically occurs between the 10<sup>th</sup> and 15<sup>th</sup> of each month.
6. Is the data displayed in real-time?
  - a. The data and scores are updated monthly. For example, a performance refresh that takes place in August, health plans and PBMs submit data in July which represents data from January through June. PQS validates the submissions and calculates performance which is updated in August.

- b. Compared to other segments and providers within health care such as physicians and hospitals, scoring may have a delay of months or years. EQuIPP exceeds industry standards by having data represented with a 45-day lag time.
- 7. What are patient outliers?
  - a. Outliers are patients who are not meeting the intent of the measure (e.g. not adherent) and represent targets for improvement.
  - b. Outlier FAQs
- 8. What is the benefit of documenting my patient outliers in EQuIPP® and will I see my score change?
  - a. The act of documenting actions, barriers, and outcomes associated with outliers does not change performance scores. Outlier documentation is an available option for pharmacies to keep efforts organized among various staff members that may be acting upon the patient improvement opportunities.
- 9. How can my pharmacy use this information?
  - a. Information should be used to help formulate a strategy around patient engagement and quality improvement and track how the approach or strategy may be impacting scores.
  - b. Steps to Better Utilize EQuIPP®
- 10. Is EQuIPP® different than an Mirixa® platform?
  - a. Yes, EQuIPP® is different than an Mirixa® platform. Mirixa® platforms present specific tasks and services that are available for compensation, often through an insurer, such as Comprehensive Medication Reviews (CMRs) and gaps in therapy. EQuIPP® tracks pharmacy or organization-level performance on medication-related quality measures. Quality measure performance is assessed across specific areas, such as medication adherence, and may be impacted by certain activities suggested or promoted through the Mirixa® platform at the pharmacy level.
  - b. As an illustrative example, EQuIPP® can be looked at as the report card for a pharmacy. Mirixa® platforms make assignments available to pharmacies. Like a student, a pharmacy may complete assignments, but it doesn't mean they are guaranteed to receive a good grade.
- 11. If I complete Mirixa® services, does that improve my score?
  - a. Not necessarily. You may have a patient that is listed on a Mirixa® platform as needing either a CMR or an adherence item listed. In this situation, you may be able to impact the patient in the Mirixa® platform as well as impacting their adherence score in EQuIPP®. You may also have patients showing up in a Mirixa® platform that are not currently negatively impacting your score. It all depends on the situation.
- 12. Where is my Star Rating in EQuIPP®?
  - a. Pharmacies do not receive Star Ratings; however, you do have performance scores based on measures that do impact the Star Ratings that Health Plans

receive. Our dashboard provides an aggregated view of how you are performing for each measure based on the health plans/PBMs that provide us claims data.

## Educational Resources

### Quality Corner Blog



We've created a blog section on [pharmacyquality.com](http://pharmacyquality.com) for posts related to managing performance information and other general quality-related topics. If you have common questions or suggested topics, we'd love to hear from you! We hope you enjoy the topics and possibly even learn a thing or two about performance measurement, EQuIPP®, or the broad topic of pharmacy quality.

To access the Quality Corner Blog, follow the link below:

<https://www.pharmacyquality.com/category/qualitycorner/>

### PQS Quality Corner Show

An audio player interface for the 'PQS Quality Corner Show'. The main title is 'Highlighting Pharmacy in Canada'. Below the title is a waveform and a progress bar showing 00:00 | 22:26. A list of other episodes is shown below:

	<b>Highlighting Pharmacy in Canada</b>	22:26
	Improving Patient Care and Health Outcomes with Magellan Rx Management	24:47
	Finding Your Baseline to Improve Patient Care	22:11
	Incorporating the "Law of Process" into Pharmacy Leadership	19:37
	Promoting Quality Care with Social Media	15:15

Pharmacy Quality Solutions' Senior Manager, Pharmacy Accounts, Nick Dorich, PharmD, hosts a podcast series called the Quality Corner Show that covers everything quality in the world of pharmacy and patient care. You can access recent episodes using the built-in player below.

You can also visit our Buzzsprout podcast page for access, and find us on Spotify, Stitcher, TuneIn+, Alexa and other podcast platforms.

## EQuIPP® Educational Video Library



The EQuIPP® educational video library is a valuable tool in understanding your quality measures. Learn how to navigate the platform and identify key opportunities for you and your pharmacy staff to engage with your customers. Begin your journey with the following videos below:

<https://www.pharmacyquality.com/pqs-videos/>

1. [What is EQuIPP®?](#)
2. [What is EQuIPP® My Programs?](#)
3. [Calculating Medication Adherence Based on Proportion of Days Covered](#)
4. [How To Interpret Your EQuIPP® Performance Results](#)
5. [The Impact of Filling Short Versus Extended Day Supplies of Medications](#)
6. [How are Performance Measures Calculated?](#)
7. [How are Performance Measures Created?](#)
8. [How are Outliers Identified?](#)

9. [How Goals and Benchmarks are Determined](#)
10. [Immunization Measures Explained](#)
11. [How Patients Qualify for Measures](#)
12. [Opioid Measures Explained](#)
13. [How Population Adherence Scores are Calculated](#)
14. [How Does Activity on MTM® Opportunities Impact Performance](#)
15. [Explaining Medicare and the Medicare Star Ratings Program](#)
16. [Asthma Performance Measures Explained](#)
17. [Quick Tips on How to Improve Performance on Adherence Measures](#)
18. [Understanding Measures of Statin Use in Persons with Diabetes and Cardiovascular Disease](#)
19. [Three Ways to Improve Your EQuIPP® Score](#)
20. [Measurement Periods and How Performance Changes Over Time](#)

## PQS Learning Connection

The PQS Learning Connection contains a series of training courses dedicated to the EQuIPP® platform and pharmacy quality concepts.

Take your EQuIPP® knowledge to the next level by testing your understanding of the platform and the importance of quality improvement. Complete a five-module course on EQuIPP® designed by CORE readiness and PQS. Educational Modules include:

- EQuIPP® Features
- Introduction to EQuIPP®
- Performance Measure Overview
- Performance Measure Spotlight
- Quality and Healthcare

Other related health industry modules have been included for further enrichment.

To access the five-module course, click the link below:

<https://corereadiness.com/learning-center/i/P11406913>

## Social Media



Twitter:

<https://twitter.com/PharmacyQuality>



LinkedIn:

<https://www.linkedin.com/company/pharmacy-quality-solutions-inc-/>



YouTube:

<https://www.youtube.com/pqsequipp>