# Understanding Measurement Periods

In your EQuIPP® Dashboard



## Objectives

- Review the two measurement periods hosted with your EQuIPP® dashboard
- Describe the differences between measurement periods as it relates to:
  - Interpreting performance scores
  - Identifying Patient Outliers
  - Reviewing the Quality Improvement Programs table



#### **EQuIPP®** Data Process

- The performance scores in the dashboard are calculated using the measure specifications for the measurement period as shown in the right-hand corner of the EQuIPP® dashboard (listed as "Performance Data Date Range")
- EQuIPP® will host several measurement periods:
  - Rolling 6-month data (the standard EQuIPP® reporting)
    - Example: The Diabetes PDC measure for the June 2021 November 2021 period consists of data from June 1, 2021 through November 30, 2021
    - As EQuIPP® presents new data each month, this will refresh with a new rolling 6-month measurement period
  - Year to date reporting
    - Example: The Diabetes PDC measure for the Jan 2021 November 2021 consists of data from January 1, 2021 through November 30, 2021
    - With each EQuIPP® data refresh, an additional month of claims history will be included in this calculation
    - Once the measurement period extends to December 31<sup>st</sup>, it will cover the pharmacy's performance for the entire calendar or benefit year



## Adherence example – 6-month period

- John Smith is a 70-year-old patient that fills his prescription for atorvastatin at your pharmacy. On January 19<sup>th</sup> he fills his first prescription of the year for the medication, a 30 day fill. Over the next few months John has additional 30 day fills on February 20<sup>th</sup>, April 1<sup>st</sup> and May 12<sup>th</sup>.
- Calculated adherence using the Proportion of Days Covered methodology for the January 2021 June 2021 period:
  - o Denominator = January 19<sup>th</sup>, 2021 through June 30<sup>th</sup>, 2021 equals 163 days
  - Numerator = 30 days (January 19<sup>th</sup> fill) + 30 days (February 20<sup>th</sup> fill) + 30 days (April 1<sup>st</sup> fill) + 30 days (May 12<sup>th</sup> fill) = 120 days
  - o PDC Score = (120 days/163 days) \* 100% = 73.6%



## Adherence example – 6-month period

Review of the PDC score for John Smith on a six-month timeframe from January 1, 2021 – June 30, 2021:

- John has 120 days of coverage based upon the medication fills during this time frame (four fills of 30-day supply).
- While this is a six-month evaluation, the start of the evaluation period is based upon when John Smith has the first fill of the medication (in John's case January 19<sup>th</sup>). Adding up the total number of days from January 19<sup>th</sup> through June 30<sup>th</sup> gives us the total number of days for the evaluation of this period, which equals 163 days.
- Because John Smith has had two or more fills of the medication and his first fill on January 19<sup>th</sup> was more than 91 days prior to the end of the period, his adherence score will be calculated. Based on his days supply and the given measurement period, his adherence is calculated as 120/163 = 73.6%. The threshold for the Cholesterol PDC measure is 80%. Therefore, John is a non-adherent patient.



### Adherence example – Year to Date

- John Smith is a 70-year-old patient that fills his prescription for atorvastatin at your pharmacy. On January 19<sup>th</sup>, he fills his first prescription of the year for the medication, a 30 day fill. Over the next few months John has additional 30 day fills on February 20<sup>th</sup>, April 1<sup>st</sup> and May 12<sup>th</sup>. **Additional 30-day fills occurred on July 3**, **August 3, September 6, October 7, November 7 and December 10.**
- Calculated adherence using the Proportion of Days Covered methodology for the January 2021 December 2021 period:
  - o Denominator = January 19<sup>th</sup> through December 31<sup>st</sup>, which equals 347 days
  - Numerator = 30 days (January 19<sup>th</sup> fill) + 30 days (February 20<sup>th</sup> fill) + 30 days (April 1<sup>st</sup> fill) + 30 days (May 12<sup>th</sup> fill) + 30 days (July 3<sup>rd</sup> fill) + 30 days (August 3<sup>rd</sup> fill) + 30 days (September 6<sup>th</sup> fill) + 30 days (October 7<sup>th</sup> fill) + 30 days (November 7<sup>th</sup> fill) + 22 days (December 10<sup>th</sup> fill the days supply is capped at Dec 31<sup>st</sup> as that is the end of the measurement period) = 292
  - o PDC Score = (292 days/347 days) \* 100% = 84.1%



### Adherence example – Year to Date

Review of the PDC score for John Smith on a calendar year timeframe from January 1, 2021 – December 31, 2021:

- John has 292 days of coverage based upon the medication fills during this time frame (nine fills of 30-day supply, plus 22 days of supply from the fill on December 10th).
- The start of the evaluation period is based upon when John Smith has the first fill of the medication (in John's case January 19<sup>th</sup>). Adding up the total number of days from January 19<sup>th</sup> through December 31<sup>st</sup> gives us the total number of days for the evaluation of this period, which equals 347 days.
- Because John Smith has had two or more fills of the medication and his first fill on January 19<sup>th</sup> was more than 91 days prior to the end of the period, his adherence score will be calculated.
- Based on his days supply and the given measurement period, his adherence is calculated as 292/347 = 84.1%. The threshold for the Cholesterol PDC measure is 80%. Therefore, John is considered adherent over the year-to-date evaluation.



### Adherence Examples - Considerations

- The example shown here for John Smith goes to show an important consideration for pharmacies and health plans. In reviewing the first six months of this patient's history, John appears as non-adherent.
- Considering his adherence for the latter half of the year, John would appear adherent for the last few months of the calendar year but would also appear as adherent for a full year evaluation.
- In reviewing the rolling six-month adherence scores, the pharmacy would be able to see how John's scores are improving over time and that he fills the medication on a more regularly-anticipated basis leading to overall improvements.
- Utilizing the rolling six-month adherence numbers helps to show improvement in a readily-available manner rather than waiting for a full calendar year to determine the performance scores.



### Statin Use in Persons with Diabetes – 6-month period

Linda Jones is a 45-year-old patient with diabetes that fills metformin and glyburide at her local pharmacy. Ms. Jones begins to receive her diabetes medications on February 24th, 2021 but does not receive a statin therapy during this measurement period.

Review of the Statin Use in Diabetes score for Linda Jones on a six-month timeframe from January 1, 2021 – June 30, 2021:

- Because Linda has two or more fills of a diabetes medication and is between the age of 40 and 75, she is eligible for evaluation of this measure.
- Due to the nature of the Statin Use in Diabetes Measure, it is an evaluation of whether the patient received a statin during the measurement period (in this case, January 1, 2021 June 30, 2021).
- Because Ms. Jones did not receive a statin, she does not meet the numerator criteria for the Statin Use in Diabetes measure.



#### Statin Use in Persons with Diabetes – Year to Date

• Linda Jones is a 45-year-old patient with diabetes that fills metformin and glyburide at her local pharmacy. Ms. Jones begins to receive her diabetes medications on February 24th, 2021. **On August 1<sup>st</sup>, Ms. Jones fills a prescription for lovastatin.** 

Review of the Stain Use in Diabetes score for Linda Jones on a Year-to-Date timeframe from January 1, 2021 – December 31, 2021:

- Because Linda has two or more fills of a diabetes medication and is between the age of 40 and 75, she is eligible for evaluation of this measure.
- Because Ms. Jones fills a prescription for a statin therapy during the measurement period, she meets the numerator criteria for the measure.
- Only a single fill is required for the patient to meet the numerator criteria.

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• Although adherence is not required for the Statin Use in Persons with Diabetes measure, her adherence to the cholesterol medication will be paramount for the separate Cholesterol PDC measure.

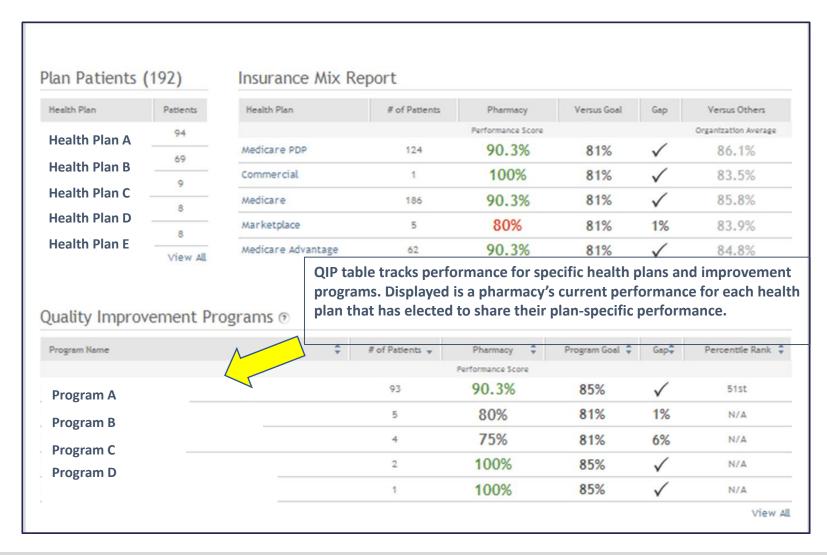


### **EQuIPP®** Patient Outliers

- Outliers are patients who are not meeting the intent of the measure (e.g. not adherent) and represent targets for improvement.
- 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.
- Due to the measure specifications and minimum requirements for evaluation, patients may not appear in six-month performance data, but would be included in the year-to-date performance data.
- Be sure to review the EQuIPP® FAQ tab for an up-to-date listing of EQuIPP® outlier types and providers



## **Quality Improvement Programs**





## Quality Improvement Programs

Quality Improvement P	105141115	3		5	6	7
Program Name	\$	# of Patients 🕌	Pharmacy ‡	Program Goal 💠	Gap 🛊	Percentile Rank
			Performance Score			
Program A ?		62	91.9%	85%	<b>✓</b>	61st
Program B		17	88.2%	85%	✓	29th
Program C		5	100%	81%	✓	N/A
Program D		1	0%	73%	73%	N/A

- 1. Program Name name of Quality Improvement or P4P program at contract level
- 2. Hover over this icon for program detail including plan sponsor
- 3. # of Patients total number of patients in the program for your pharmacy
- 4. Performance Score your pharmacy's performance score
  - Green maximum program performance attained
  - Gray minimum program performance attained, room for improvement exists
  - Red minimum program performance for program not met
- 5. Program Goal goals specific to that program and the measure displayed
- 6. Gap percentage point from goal / goal is met
- 7. Percentile Rank compares your pharmacy to overall aggregate of those in program (calculated if your pharmacy has more than 10 patients for the program)



#### For more information:

- Visit the FAQ tab of your EQuIPP® dashboard for more definitions and specifics that you should be able to view
- Utilize the EQuIPP® Support link at the top right-hand corner of your dashboard to submit questions to the EQuIPP® team
- Be sure to discuss with your organization what strategies are being used to improve quality scores and what opportunities to work with managed care programs are available to your pharmacy
- Watch the EQuIPP® Educational Video on "Calculating Medication Adherence Based on Proportion of Days Covered" <a href="https://www.youtube.com/watch?v=oAL8WjY46v0">https://www.youtube.com/watch?v=oAL8WjY46v0</a>

