urac

2019

URAC MAIL SERVICE PHARMACY PERFORMANCE MEASUREMENT:

AGGREGATE SUMMARY PERFORMANCE REPORT

December 2019

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Executive Summary

Presented in this report are the 2018 measurement year (2019 reporting year) results based on URAC's Mail Service Pharmacy (MSP) Accreditation program performance measures. The report includes summary rates in aggregate.

Organizations were required to report data for 15 mandatory measures, and they had the option to report data for 6 exploratory measures. Below is the list of mandatory [M] and exploratory [E] measures for 2019 reporting:

1. Proportion of Days Covered (PDC) (DM2012-12) [M]
2. Adherence to Long-Acting Inhaled Bronchodilator Agents in COPD Patients (PH2018-01) [M]
3. Adherence to Non-Infused Biologic Agents to Treat Rheumatoid Arthritis (PH2018-02) [M]
4. Adherence to Non-Infused Disease-Modifying Agents to Treat Multiple Sclerosis (PH2018-03) [M]
5. Adherence to Non-Warfarin Oral Anticoagulants (DTM2015-01) [M]
6. Drug-Drug Interactions (DM2012-13) [M]
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8. Call Center Performance (DTM2010-04) [M]
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14. Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults (PH2018-06) [M]
15. Use of Opioids at High Dosage or from Multiple Providers in Persons Without Cancer (PH2018-08) [M]
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17. Use of High-Risk Medications in the Elderly (HIM2013-21) [E]
18. Primary Medication Non-Adherence (PH2015-01)* [E]
19. Use of Benzodiazepine Sedative Hypnotic Medications in the Elderly (PH2015-03) [E]
20. Statin Use in Persons with Diabetes (PH2015-06) [E]
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* No organization submitted data for this exploratory measure.

This performance report has been prepared for the URAC Quality, Research and Measurement Department by Kiser Healthcare Solutions, LLC. If you have any questions about the results contained herein, please contact ResearchMeasurement@urac.org.

Mail Service Pharmacy Organization Characteristics

A total of 23 URAC-accredited Mail Service Pharmacy (MSP) organizations reported 2018 measurement year data for the 2019 reporting year. There were 20 organizations that reported Commercial data for at least one measure; 15 organizations reported Medicaid data; 17 organizations reported Medicare data; and 8 organizations reported as All Other Population.

Of the 23 MSPs that submitted performance measurement data, 18 organizations covered all four URAC-specified regions (Midwest, Northeast, South, and West), and five organizations covered only a single region.

The total number of prescriptions represented by the organizations is 201,077,132 prescriptions. Most organizations had fewer than one million prescriptions, and the majority of those had fewer than 300,000 prescriptions. Three organizations had over one million prescriptions (Exhibit 2).

The total number of drug prescriptions dispensed per organization ranged from 17,562 to 97,824,984 prescriptions with a mean of 8,742,484 and median of 166,789.

Exhibit 1: Regional Areas Served
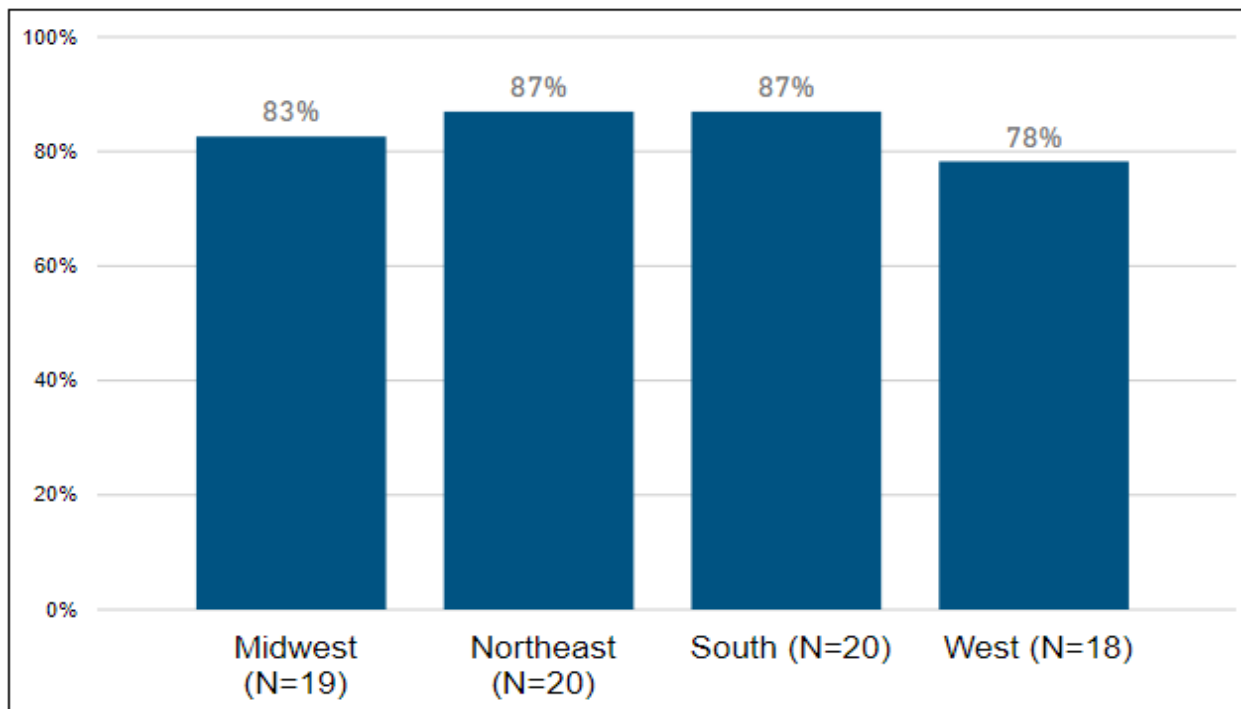
Note: Multiple responses accepted.

Exhibit 2: Mail Service Pharmacy Organizations Reporting by Program Tier Size (Total Prescription Volume)
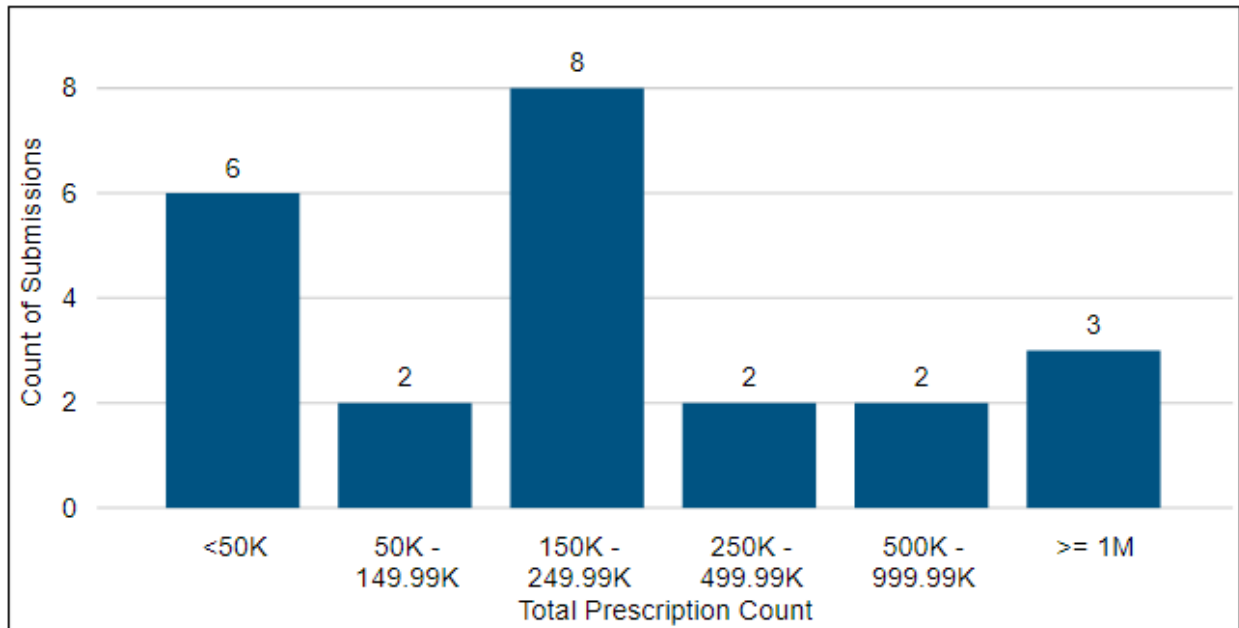
Data Validation Overview

For 2019 reporting, URAC required that organizations have their measure results reviewed by a URAC-approved Data Validation Vendor (DVV).

Additional Data Validation Procedures

Kiser Healthcare Solutions executed standard procedures for data cleaning and validation prior to finalizing the results presented in this report. All organizations' measure submissions were reviewed for measure component quality. For example, numerators and denominators were checked against rates to ensure accuracy. Also, minimum, mean, median, and maximum rates were benchmarked nationally and regionally to ensure accuracy and to identify potential issues at an individual submission level.

Basic guidelines for identifying valid submissions:
- Measure Denominator is Greater Than 0
- DVV has not deemed the measure submission as materially inaccurate
- Organization has indeed stated it is submitting the measure.

Basic guidelines for aggregate rates:
- Measure Denominator is Greater Than or Equal to 30
- DVV has not deemed the measure submission as materially inaccurate
- Organization has indeed stated it is submitting the measure.

Results: Mail Service Pharmacy Measures

All 23 organizations reported data for at least one of the performance measures. The organizations reported primarily Commercial results.

Measure 1 – Proportion of Days Covered (DM2012-12)

Measure Description

This *mandatory* measure assesses the percentage of participants 18 years and older who met the proportion of days covered (PDC) threshold of 80% during the measurement period. A performance rate is calculated separately for the following six medication categories: Beta-blockers (BB); Renin Angiotensin System (RAS) Antagonists; Calcium Channel Blockers (CCB); Diabetes All Class; Statins; Antiretrovirals (this measure has a threshold of 90% for at least two measures). The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure reports each of the rates separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Summary of Findings

Fifteen organizations submitted data for this measure, which resulted in the following submissions: Aggregate summary statistics and benchmarks were produced only for Commercial, Medicaid, and Medicare. There were only two organizations that reported as All Other. Below are the summary results for the three reporting groups.

Exhibit 3: Proportion of Days Covered (80% Threshold) – Commercial
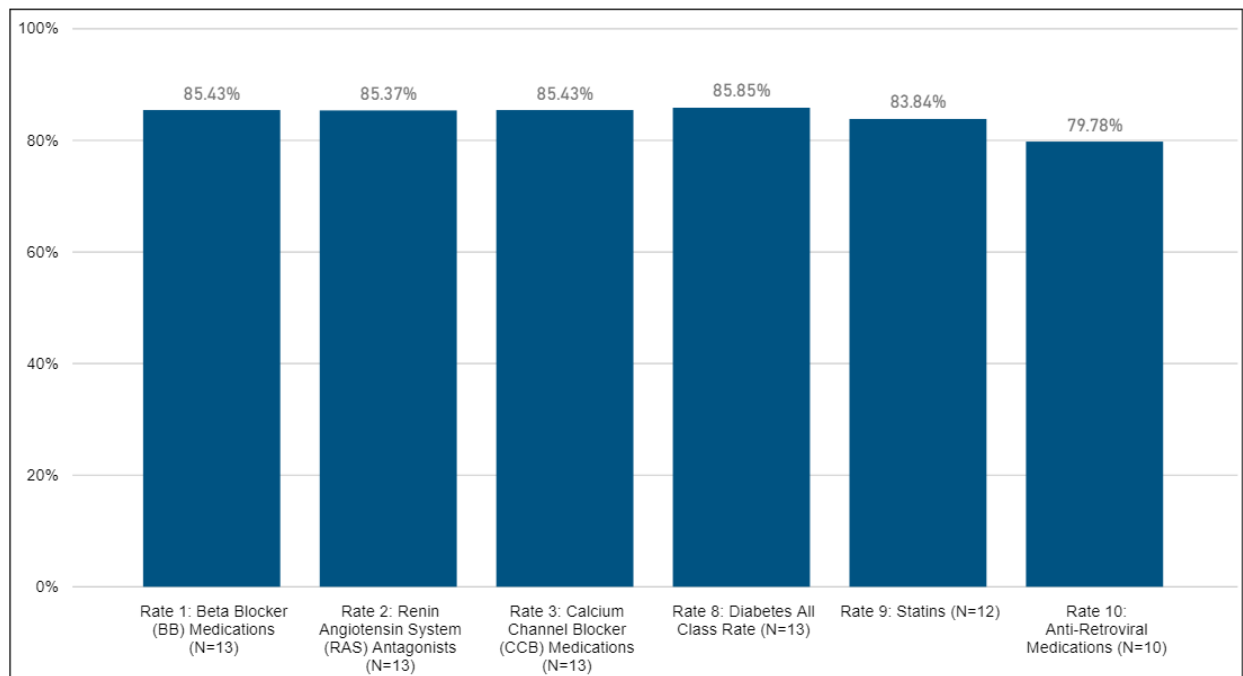
Exhibit 4: Proportion of Days Covered (80% Threshold) – Medicaid
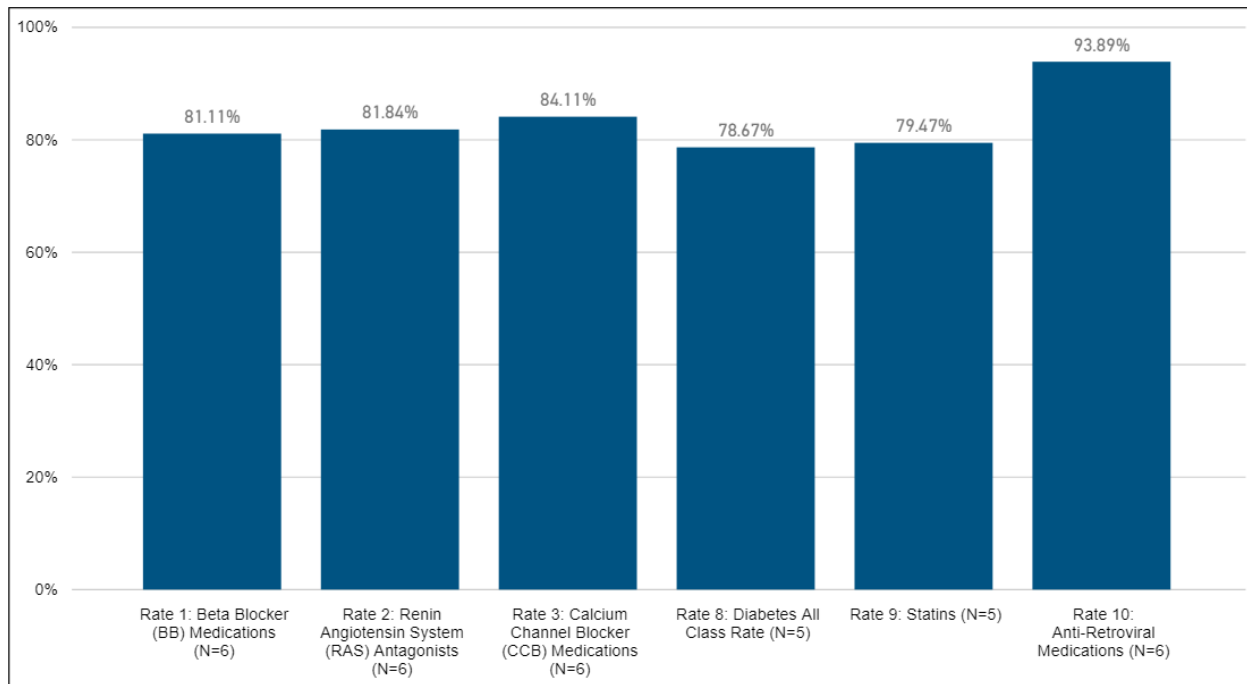
Exhibit 5: Proportion of Days Covered (80% Threshold) – Medicare
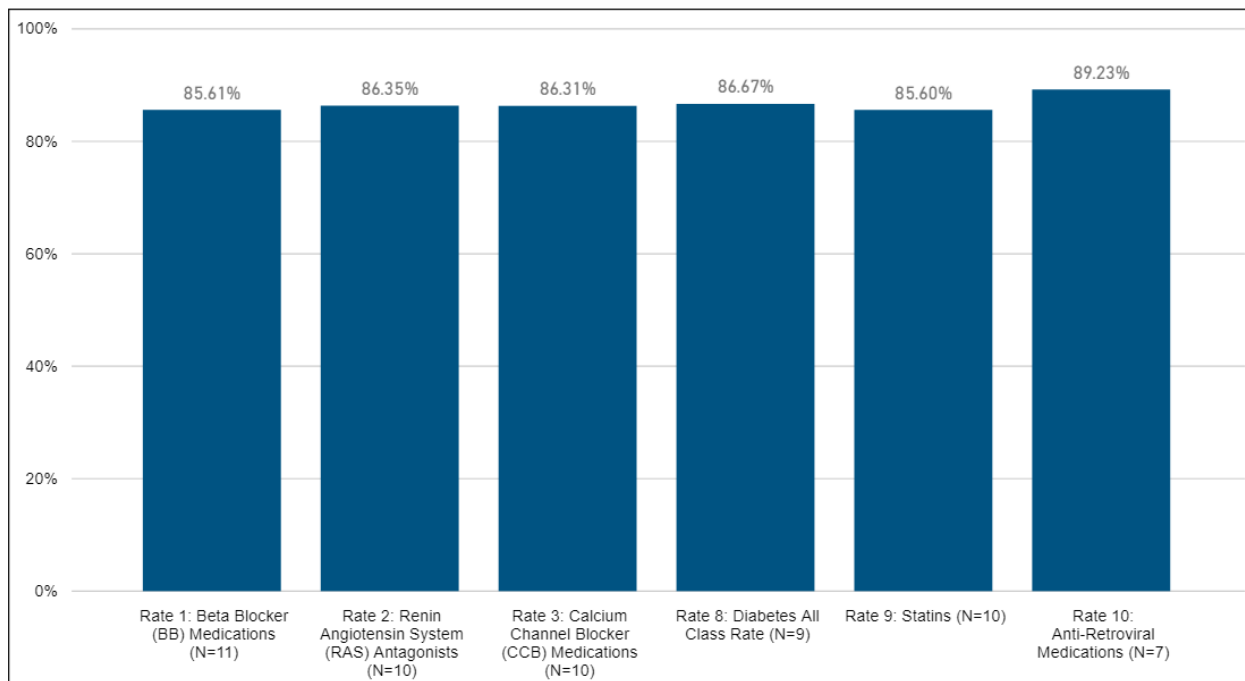
Rate 1: Beta Blocker (BB) Medications

The Commercial aggregate summary rate is 85.43% (n=13, Range: 66.67 - 91.6%) with a mean rate of 79.62% and a median rate of 81.38%.

The Medicaid aggregate summary rate is 81.11% (n=6, Range: 58.73 - 94.41%) with a mean rate of 71.81% and a median rate of 66.09%.

The Medicare aggregate summary rate is 85.61% (n=11, Range: 70.59 - 90.78%) with a mean rate of 83.38% and a median rate of 84.27%.

Exhibit 6: Proportion of Days Covered (80% Threshold) – Rate 1: Beta Blocker Medications

Exhibit 7: Proportion of Days Covered (80% Threshold) – Rate 1: Beta Blocker Medications (Summary Data)

Measure:	Rate 1: Beta Blocker (BB) Medications				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	938,977	1,099,060	85.43%	79.62%	13
Medicaid	2,507	3,091	81.11%	71.81%	6
Medicare	878,319	1,025,989	85.61%	83.38%	11

Exhibit 8: Proportion of Days Covered (80% Threshold) – Rate 1: Beta Blocker Medications (Benchmark Data)

Measure:	Rate 1: Beta Blocker (BB) Medications						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	66.67%	68.54%	74.58%	81.38%	84.60%	86.41%	91.60%
Medicaid	58.73%	59.37%	60.00%	66.09%	82.18%	89.96%	94.41%
Medicare	70.59%	76.09%	81.85%	84.27%	86.74%	89.02%	90.78%

Rate 2: Renin Angiotensin System (RAS) Antagonists

The Commercial aggregate summary rate is 85.37% (n=13, Range: 54.84 - 86.43%) with a mean rate of 79.21% and a median rate of 83.55%.

The Medicaid aggregate summary rate is 81.84% (n=6, Range: 48.72 - 90.03%) with a mean rate of 74.92% and a median rate of 81.4%.

The Medicare aggregate summary rate is 86.35% (n=10, Range: 67.74 - 93.91%) with a mean rate of 83.61% and a median rate of 85.21%.

Exhibit 9: Proportion of Days Covered (80% Threshold) – Rate 2: Renin Angiotensin System Antagonists
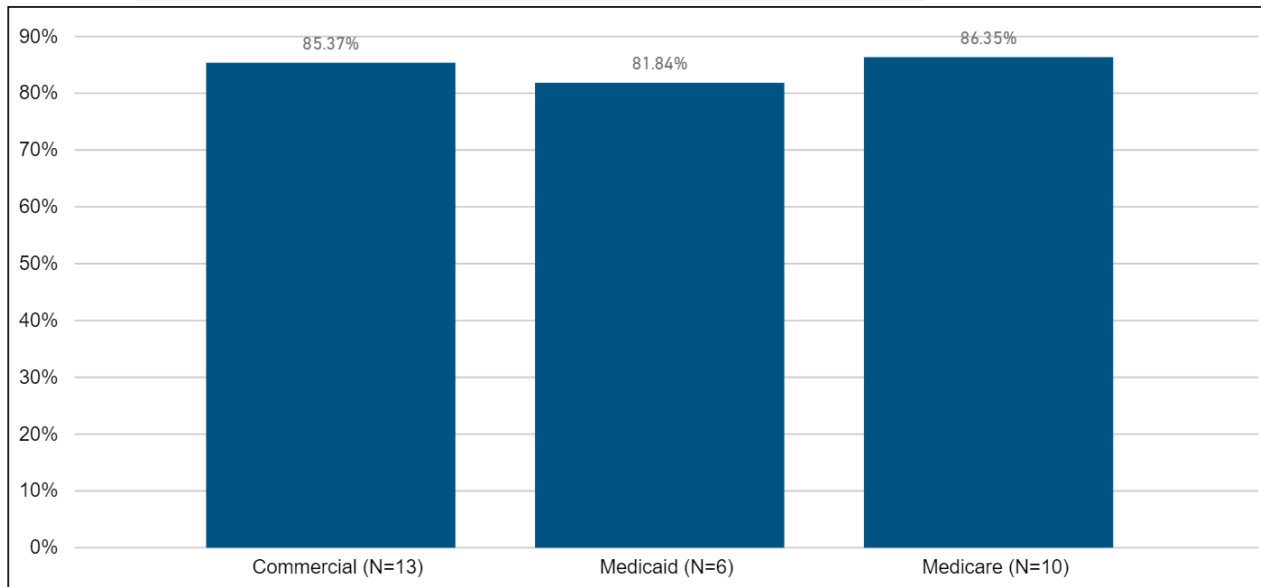
Exhibit 10: Proportion of Days Covered (80% Threshold) – Rate 2: Renin Angiotensin System Antagonists (Summary Data)

Measure:	Rate 2: Renin Angiotensin System (RAS) Antagonists				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	1,791,808	2,098,931	85.37%	79.21%	13
Medicaid	4,313	5,270	81.84%	74.92%	6
Medicare	1,295,770	1,500,564	86.35%	83.61%	10

Exhibit 11: Proportion of Days Covered (80% Threshold) – Rate 2: Renin Angiotensin System Antagonists (Benchmark Data)

Measure:	Rate 2: Renin Angiotensin System (RAS) Antagonists						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	54.84%	70.42%	76.92%	83.55%	85.06%	85.98%	86.43%
Medicaid	48.72%	55.00%	65.19%	81.40%	86.47%	88.35%	90.03%
Medicare	67.74%	76.08%	81.64%	85.21%	87.04%	88.46%	93.91%

Rate 3: Calcium Channel Blocker (CCB) Medications

The Commercial aggregate summary rate is 85.43% (n=13, Range: 68.79 - 90.57%) with a mean rate of 80.52% and a median rate of 79.71%.

The Medicaid aggregate summary rate is 84.11% (n=6, Range: 64.55 - 97.14%) with a mean rate of 78.84% and a median rate of 77.65%.

The Medicare aggregate summary rate is 86.31% (n=10, Range: 77.51 - 91.23%) with a mean rate of 85.81% and a median rate of 85.64%.

Exhibit 12: Proportion of Days Covered (80% Threshold) – Rate 3: Calcium Channel Blocker Medications
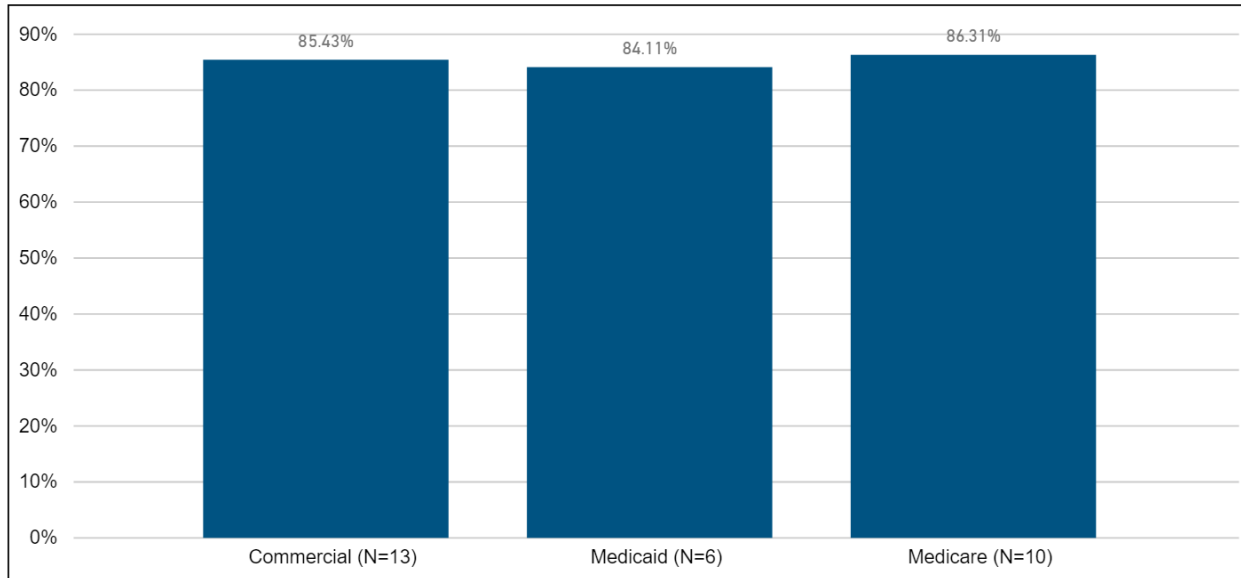
Exhibit 13: Proportion of Days Covered (80% Threshold) – Rate 3: Calcium Channel Blocker Medications (Summary Data)

Measure:	Rate 3: Calcium Channel Blocker (CCB) Medications				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	725,926	849,688	85.43%	80.52%	13
Medicaid	1,996	2,373	84.11%	78.84%	6
Medicare	651,401	754,698	86.31%	85.81%	10

Exhibit 14: Proportion of Days Covered (80% Threshold) – Rate 3: Calcium Channel Blocker Medications (Benchmark Data)

Measure:	Rate 3: Calcium Channel Blocker (CCB) Medications						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	68.79%	74.71%	76.32%	79.71%	84.42%	86.72%	90.57%
Medicaid	64.55%	67.41%	70.42%	77.65%	85.47%	91.48%	97.14%
Medicare	77.51%	80.99%	84.26%	85.64%	89.62%	90.54%	91.23%

Rate 8: Diabetes All Class Rate

The Commercial aggregate summary rate is 85.85% (n=13, Range: 50 - 87.71%) with a mean rate of 74.86% and a median rate of 79.42%.

The Medicaid aggregate summary rate is 78.67% (n=5, Range: 58.06 - 85.36%) with a mean rate of 72.8% and a median rate of 75.65%.

The Medicare aggregate summary rate is 86.67% (n=9, Range: 57.87 - 87.65%) with a mean rate of 79.21% and a median rate of 84.75%.

Exhibit 15: Proportion of Days Covered (80% Threshold) – Rate 8: Diabetes All Class Rate
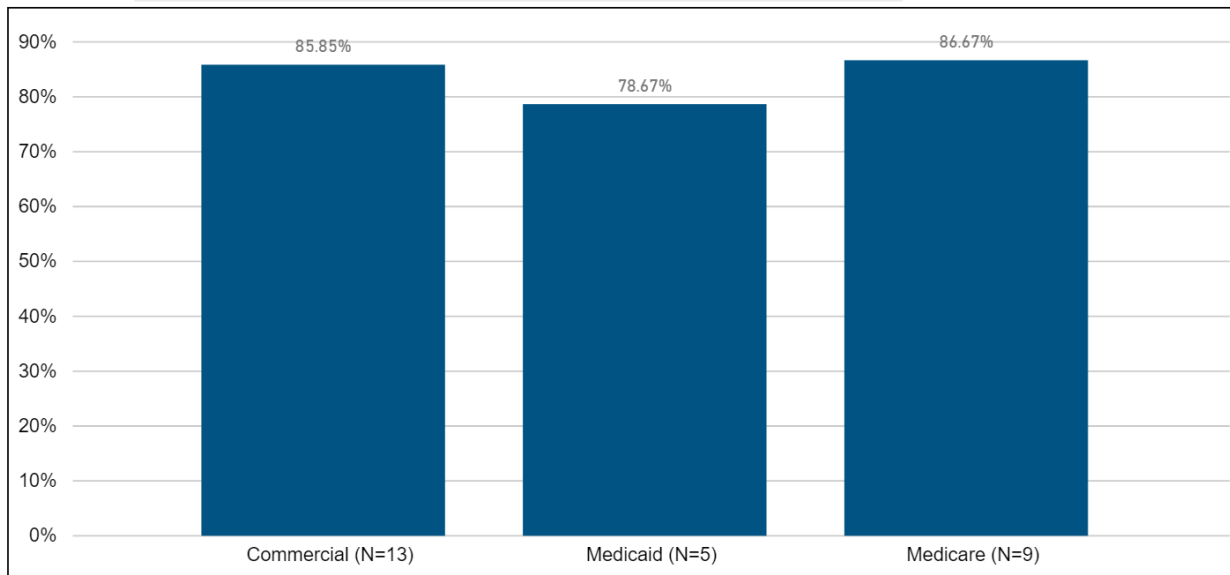
Exhibit 16: Proportion of Days Covered (80% Threshold) – Rate 8: Diabetes All Class Rate (Summary Data)

Measure:	Rate 8: Diabetes All Class Rate				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	584,428	680,733	85.85%	74.86%	13
Medicaid	1,556	1,978	78.67%	72.80%	5
Medicare	424,143	489,400	86.67%	79.21%	9

Exhibit 17: Proportion of Days Covered (80% Threshold) – Rate 8: Diabetes All Class Rate (Benchmark Data)

Measure:	Rate 8: Diabetes All Class Rate						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	50.00%	56.26%	63.38%	79.42%	85.46%	86.44%	87.71%
Medicaid	58.06%	59.58%	61.84%	75.65%	83.06%	84.44%	85.36%
Medicare	57.87%	65.69%	70.90%	84.75%	86.91%	87.26%	87.65%

Rate 9: Statins

The Commercial aggregate summary rate is 83.84% (n=12, Range: 66.73 - 88.3%) with a mean rate of 79.83% and a median rate of 79.05%.

The Medicaid aggregate summary rate is 79.47% (n=5, Range: 47.06 - 84.82%) with a mean rate of 69.19% and a median rate of 70.49%.

The Medicare aggregate summary rate is 85.6% (n=10, Range: 77.5 - 90.95%) with a mean rate of 84.5% and a median rate of 84.76%.

Exhibit 18: Proportion of Days Covered (80% Threshold) – Rate 9: Statins
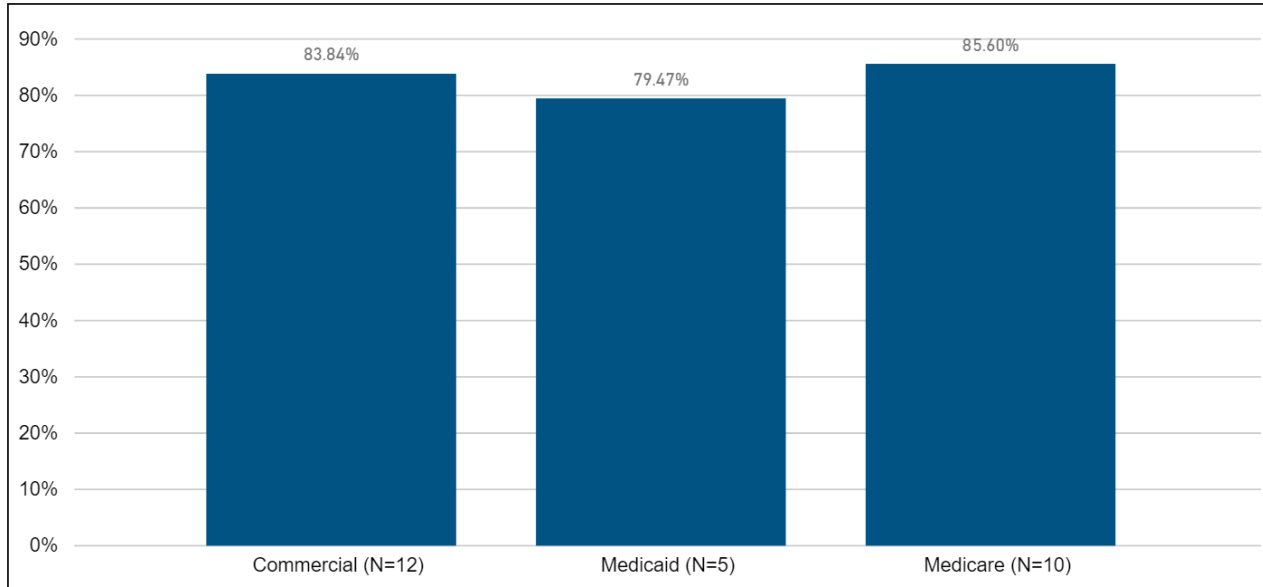
Exhibit 19: Proportion of Days Covered (80% Threshold) – Rate 9: Statins (Summary Data)

Measure:	Rate 9: Statins				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	1,823,372	2,174,825	83.84%	79.83%	12
Medicaid	4,795	6,034	79.47%	69.19%	5
Medicare	1,513,108	1,767,635	85.60%	84.50%	10

Exhibit 20: Proportion of Days Covered (80% Threshold) – Rate 9: Statins (Benchmark Data)

Measure:	Rate 9: Statins						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	66.73%	75.15%	78.01%	79.05%	83.53%	85.17%	88.30%
Medicaid	47.06%	52.52%	60.71%	70.49%	82.89%	84.05%	84.82%
Medicare	77.50%	80.11%	82.71%	84.76%	86.33%	88.17%	90.95%

Rate 10: Anti-Retroviral Medications

The Commercial aggregate summary rate is 79.78% (n=10, Range: 49.15 - 93.86%) with a mean rate of 68.34% and a median rate of 66.21%.

The Medicaid aggregate summary rate is 93.89% (n=6, Range: 44.9 - 95.09%) with a mean rate of 74.64% and a median rate of 71.82%.

The Medicare aggregate summary rate is 89.23% (n=7, Range: 69.73 - 92.35%) with a mean rate of 79.24% and a median rate of 77.38%.

Exhibit 21: Proportion of Days Covered (80% Threshold) – Rate 10: Anti-Retroviral Medications
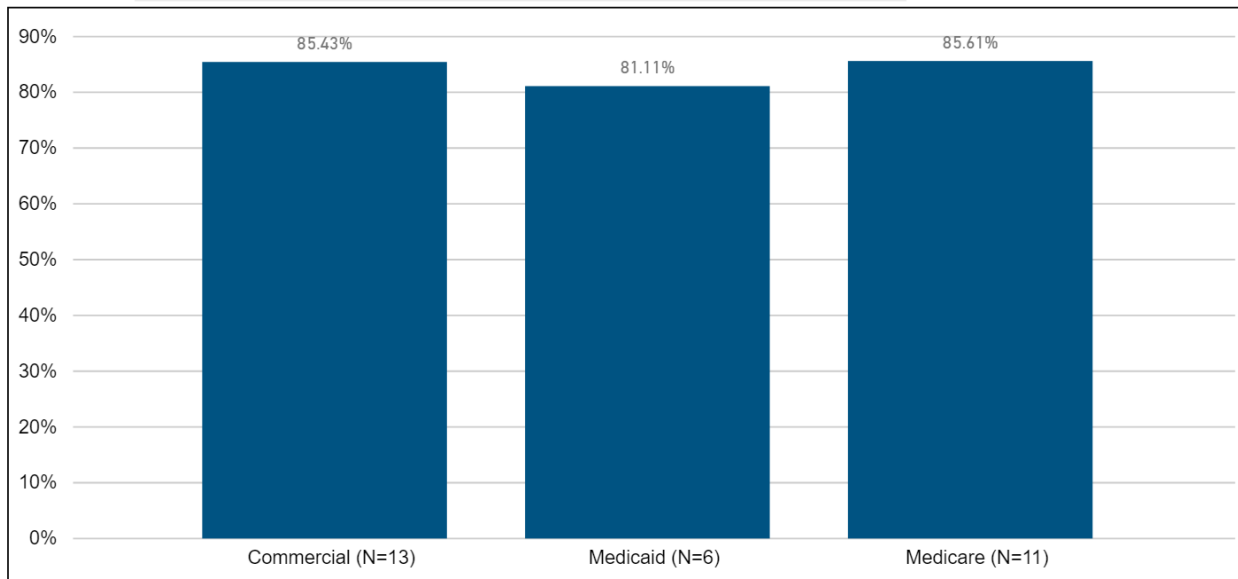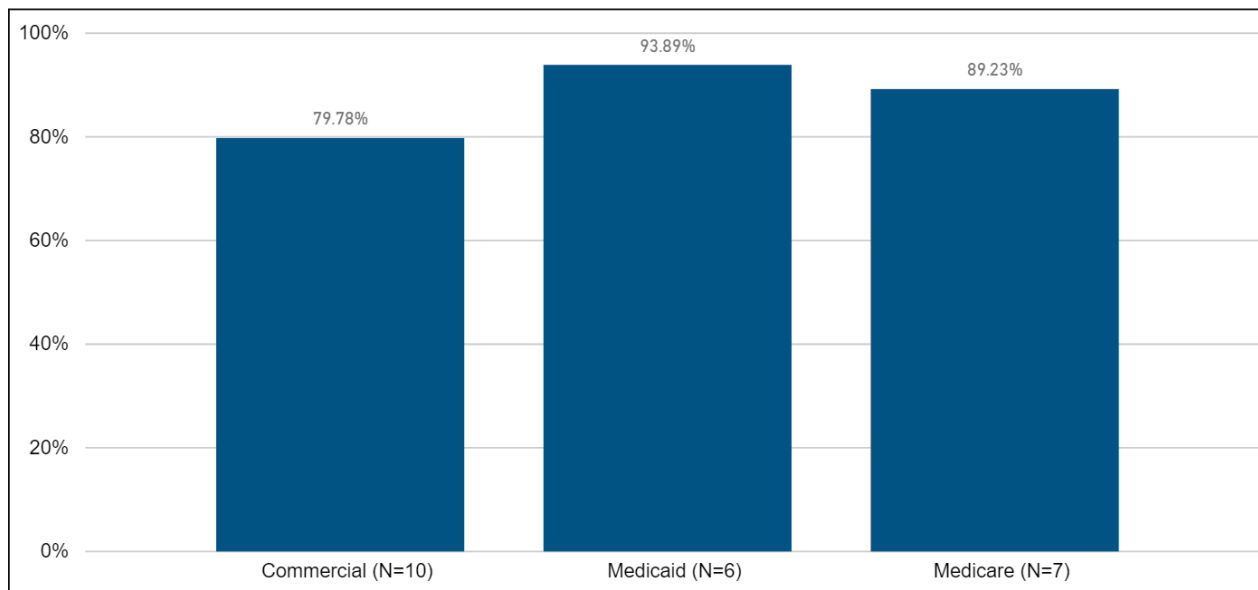

Exhibit 22: Proportion of Days Covered (80% Threshold) – Rate 10: Anti-Retroviral Medications (Summary Data)

Measure:	Rate 10: Anti-Retroviral Medications				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	25,828	32,373	79.78%	68.34%	10
Medicaid	10,005	10,656	93.89%	74.64%	6
Medicare	18,676	20,931	89.23%	79.24%	7

Exhibit 23: Proportion of Days Covered (80% Threshold) – Rate 10: Anti-Retroviral Medications (Benchmark Data)

Measure:	Rate 10: Anti-Retroviral Medications						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	49.15%	50.87%	56.82%	66.21%	75.32%	92.97%	93.86%
Medicaid	44.90%	57.74%	70.65%	71.82%	88.43%	94.37%	95.09%
Medicare	69.73%	70.00%	70.85%	77.38%	86.77%	91.86%	92.35%

Measure 2 – Adherence to Long-Acting Inhaled Bronchodilator Agents in COPD patients (PH2018-01)

Measure Description

This *mandatory* measure assesses the percentage of patients with COPD who met the Proportion of Days Covered (PDC) threshold of 80 percent during the measurement period for long-acting inhaled bronchodilator agents. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Summary of Findings

Only two organizations submitted data for this measure. This resulted in the following submissions: 1 Commercial and 1 Medicare. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 3 – Adherence to Non-Infused Biologic Agents to Treat Rheumatoid Arthritis (PH2018-02)

Measure Description

This *mandatory* measure assesses the percentage of patients with 18 years and older with rheumatoid arthritis (RA) who met the Proportion of Days Covered (PDC) threshold of 80 percent during the measurement period for biologic medications used to treat RA. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Summary of Findings

Only five organizations submitted data for this measure. This resulted in the following submissions: 3 Commercial, 2 Medicaid, 4 Medicare, and 1 All Other. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 4 – Adherence to Non-Infused Disease Modifying Agents Used to Treat Multiple Sclerosis (PH2018-03)

Measure Description

This *mandatory* measure assesses the percentage of patients with 18 years and older who met the Proportion of Days Covered (PDC) threshold of 80 percent during the measurement period for disease-modifying agents used to treat multiple sclerosis (MS). The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Summary of Findings

Only five organizations submitted data for this measure. This resulted in the following submissions: 4 Commercial and 4 Medicare. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 5 – Adherence to Non-Warfarin Oral Anticoagulants (DTM2015-01)

Measure Description

This *mandatory* measure assesses the percentage of patients 18 years and older who met the Proportion of Days Covered (PDC) threshold of 80% during the measurement period for non-warfarin oral anticoagulants. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Summary of Findings

A total of 12 organizations submitted data for this measure. This resulted in 10 Commercial submissions and 9 Medicare submissions. Only one organization submitted results for Medicaid, and one organization submitted results for All Other. Aggregate summary statistics and benchmarks were produced only for Commercial and Medicare.

The Commercial aggregate summary rate is 89.96% (n=10, Range: 61.11 - 96.41%) with a mean rate of 85.2% and a median rate of 87.17%.

The Medicare aggregate summary rate is 81.36% (n=9, Range: 51.61 - 93.93%) with a mean rate of 80.11% and a median rate of 84.03%.

Exhibit 24: Adherence to Non-Warfarin Oral Anticoagulants
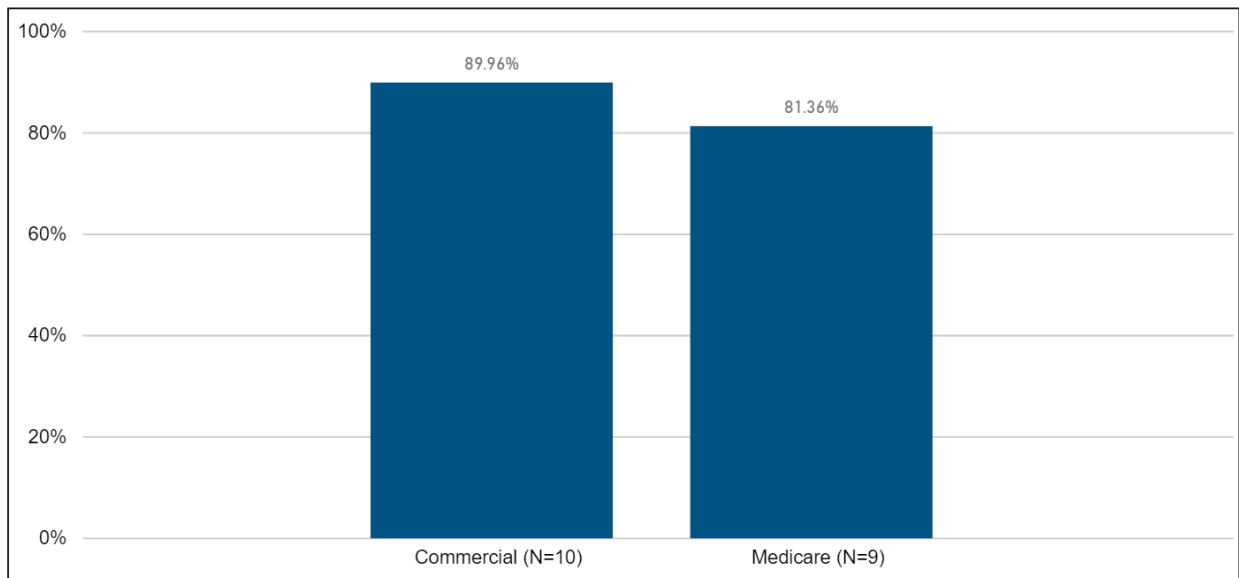
Exhibit 25: Adherence to Non-Warfarin Oral Anticoagulants (Summary Data)

Measure:	Adherence to Non-Warfarin Oral Anticoagulants				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	102,654	114,106	89.96%	85.20%	10
Medicare	114,083	140,223	81.36%	80.11%	9

Exhibit 26: Adherence to Non-Warfarin Oral Anticoagulants (Benchmark Data)

Measure:	Adherence to Non-Warfarin Oral Anticoagulants						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	61.11%	78.70%	83.90%	87.17%	90.15%	91.23%	96.41%
Medicare	51.61%	67.47%	79.70%	84.03%	85.11%	89.47%	93.93%

Measure 6 – Drug-Drug Interactions (DM2012-13)

Measure Description

This *mandatory* measure assesses the percentage of patients who received a prescription for a target medication during the measurement period and who were dispensed a concurrent prescription for a precipitant medication. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc. **A lower rate represents better performance.**

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Summary of Findings

A total of 13 organizations submitted data for this measure. This resulted in the following submissions: 12 Commercial, 6 Medicaid, 9 Medicare, and 3 All Other. Aggregate summary statistics and benchmarks were produced only for Commercial, Medicaid, and Medicare.

The Commercial aggregate summary rate is 1.02% (n=12, Range: 5.09 - 0.28%) with a mean rate of 1.55% and a median rate of 1.02%.

The Medicaid aggregate summary rate is 0.05% (n=6, Range: 10.17 - 0%) with a mean rate of 2.47% and a median rate of 0.74%.

The Medicare aggregate summary rate is 0.89% (n=9, Range: 9.22 - 0%) with a mean rate of 2.23% and a median rate of 1.52%.

Exhibit 27: Drug-Drug Interactions
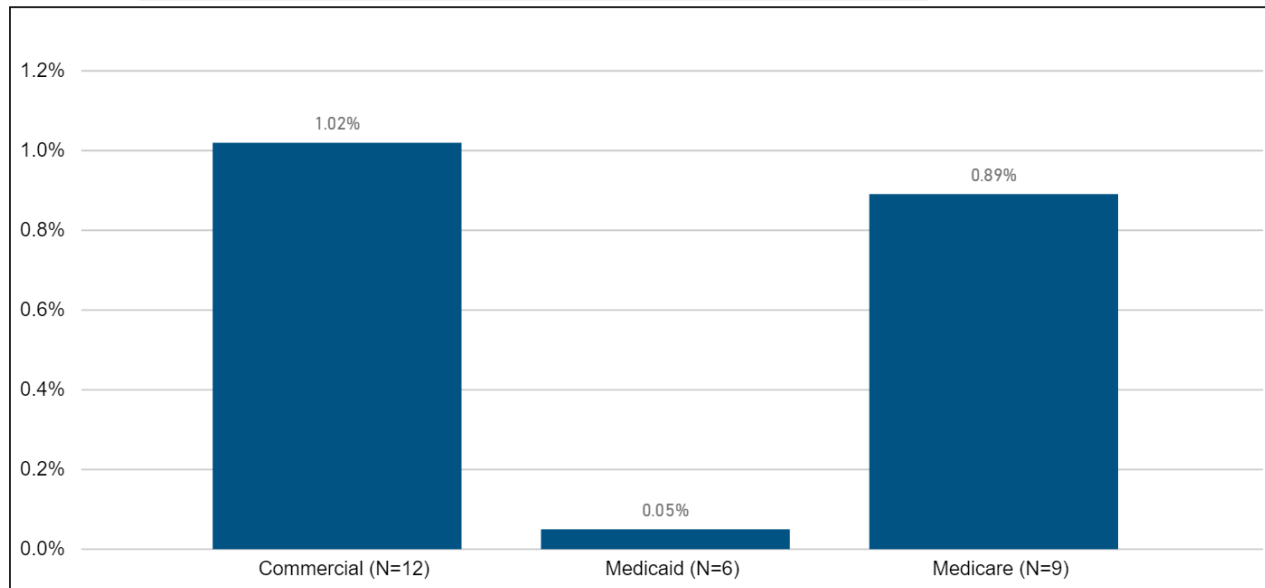
Note: Lower rate represents better performance.

Exhibit 28: Drug-Drug Interactions (Summary Data)

Measure:	Drug-Drug Interactions				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	8,077	792,065	1.02%	1.55%	12
Medicaid	18	36,080	0.05%	2.47%	6
Medicare	7,281	817,322	0.89%	2.23%	9

Exhibit 29: Drug-Drug Interactions (Benchmark Data)

Measure:	Drug-Drug Interactions						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	5.09%	3.04%	2.14%	1.02%	0.46%	0.32%	0.28%
Medicaid	10.17%	6.68%	2.71%	0.74%	0.06%	0.00%	0.00%
Medicare	9.22%	4.97%	2.12%	1.52%	0.46%	0.31%	0.00%

Measure 7 – Generic Dispensing Rates (MP2012-09)

Measure Description

This *mandatory* measure assesses the percentage of all prescriptions that were dispensed as generics, branded generics, or brands for which members paid the generic co-pay.

There is no stratification for this measure, results are reported aggregated across all populations

Summary of Findings

A total of 19 organizations submitted data for this measure, combined for all books of business. The aggregate summary rate for this measure is 96.21% (n=19, Range: 63.73 - 99.94%) with a mean rate of 90.41% and a median rate of 96.64%.

Exhibit 30: Generic Dispensing Rates
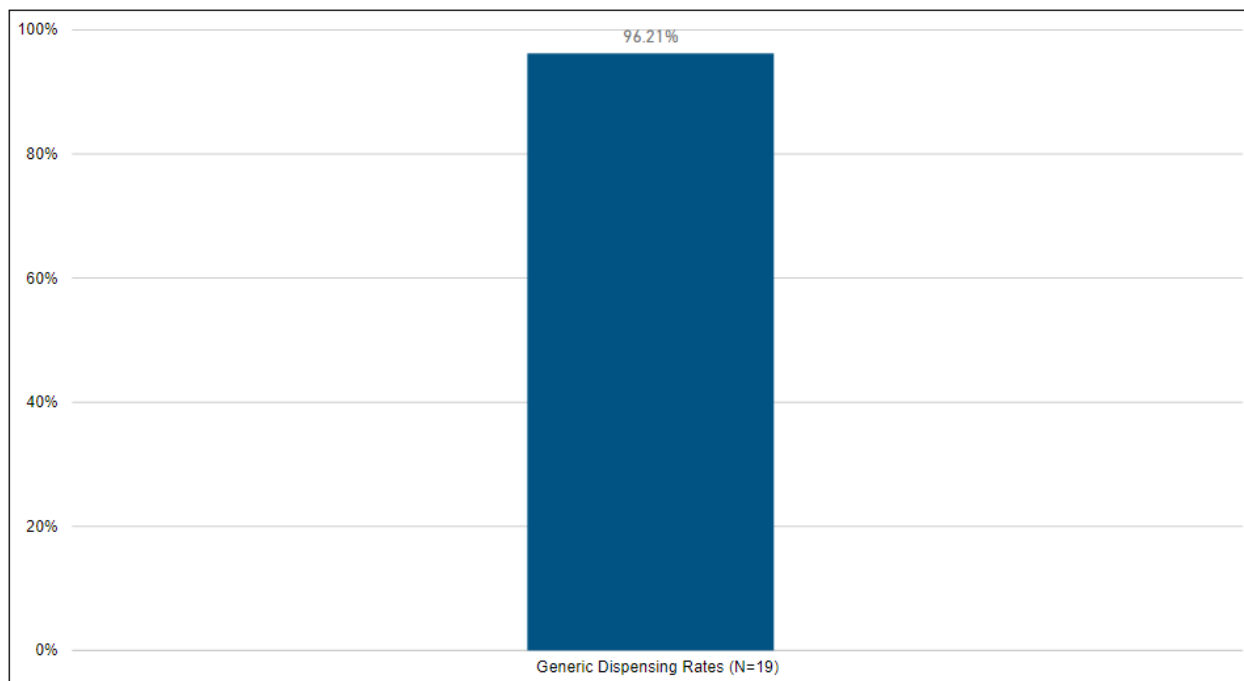
Exhibit 31: Generic Dispensing Rates (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Generic Dispensing Rates	121,756,399	126,555,705	96.21%	90.41%	19

Exhibit 32: Generic Dispensing Rates (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Generic Dispensing Rates	63.73%	70.28%	86.28%	96.64%	98.28%	98.75%	99.94%

Measure 8 – Call Center Performance (DTM2010-04)

Measure Description

This *mandatory* measure has two parts:

- Part A evaluates the percentage of calls during normal business hours to the organization's call service center(s) during the measurement period that were answered by a live voice within 30 seconds;

- Part B evaluates the percentage of calls made during normal business hours to the organization's call service center(s) during the reporting year that were abandoned by callers before being answered by a live customer service representative.

There is no stratification for this measure, results are reported across all populations. For Part A, a higher rate represents better performance. **For Part B, a lower rate represents better performance**.

Summary of Findings

A total of 21 organizations submitted data for this measure, combined for all books of business.

The aggregate summary rate for Part A: 30-Second Response Rate is 81.87% (n=21, Range: 57.2 - 97.75%) with a mean rate of 82.30% and a median rate of 84.54%.

The aggregate summary rate for Part B: Call Abandonment Rate is 2.01% (n=21, Range: 10.37 - 1.26%) with a mean rate of 4.41% and a median rate of 4.07%.

Exhibit 33: Call Center Performance
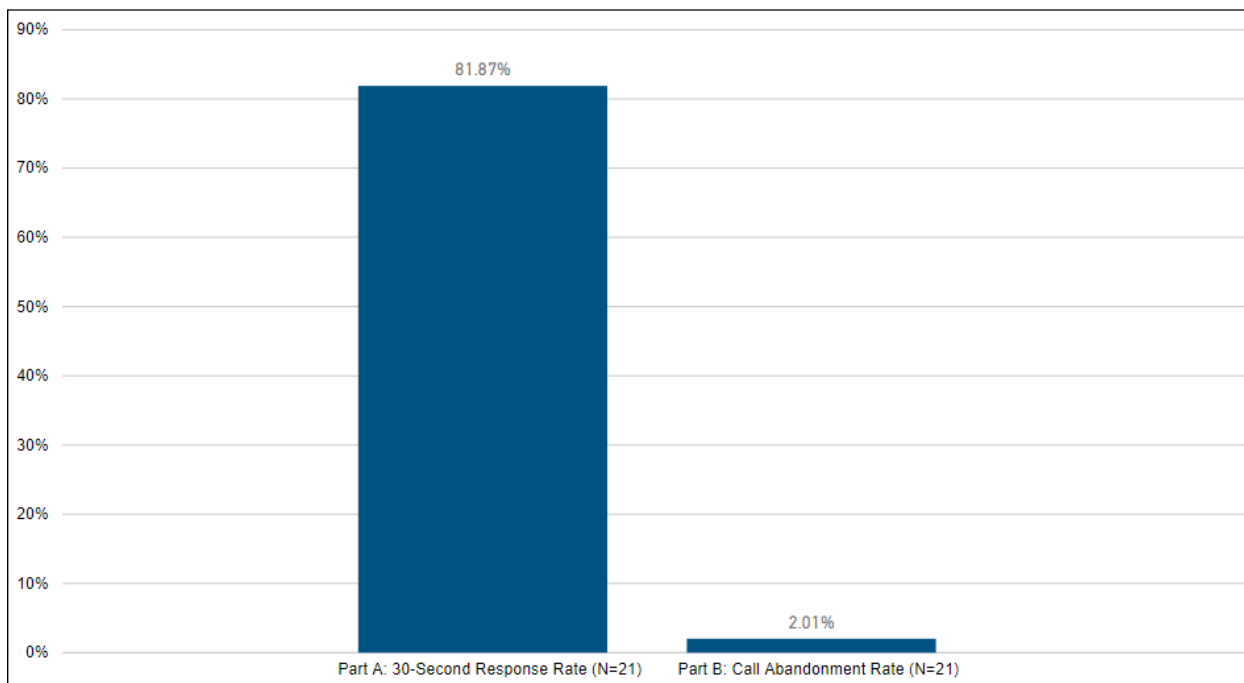
Note: Lower rate represents better performance for Part B: Call Abandonment.

Exhibit 34: Call Center Performance (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: 30-Second Response Rate	67,462,326	82,405,858	81.87%	82.30%	21
Part B: Call Abandonment Rate	1,656,771	82,404,567	2.01%	4.41%	21

Exhibit 35: Call Center Performance (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part A: 30-Second Response Rate	57.20%	65.57%	73.43%	84.54%	93.07%	95.93%	97.75%
Part B: Call Abandonment Rate	10.37%	6.99%	6.01%	4.07%	2.36%	1.90%	1.26%

Measure 9 – Dispensing Accuracy (MP2012-06)

Measure Description

This *mandatory* six-part measure and composite roll-up assesses the percentage of prescriptions that the organization dispensed inaccurately. Measure parts include: (A) Incorrect Drug and/or Product Dispensed; (B) Incorrect Recipient; (C) Incorrect Strength; (D) Incorrect Dosage Form; (E) Incorrect Instructions; (F) Incorrect Quantity. An All-Error composite rate (sum of all numerators) is also calculated. **For all parts, a lower rate represents better performance.**

There is no stratification for this measure, results are reported in aggregate across all populations. Each part of this measure is calculated at the individual prescription level, not at the order level (i.e., if an order contains three prescriptions, those three prescriptions are each counted separately in each denominator).

Summary of Findings

A total of 23 organizations reported valid results for each measure part, with the exception of one organization that did not report results for the Part C, D, and E rates. Incorrect quantity dispensed is the highest error category.

Exhibit 36: Dispensing Accuracy
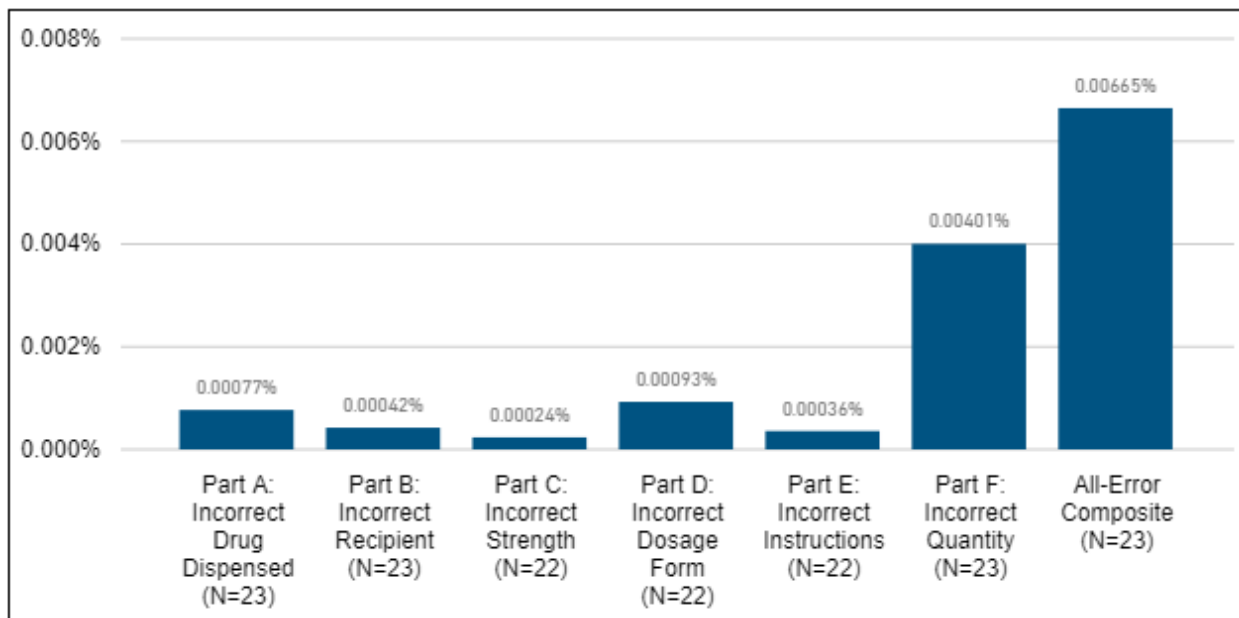
Note: Lower rate represents better performance.

Part A: Incorrect Drug Dispensed

Based on the 23 submissions, the aggregate summary rate for this measure is 0.0008% (or 0.8 incorrect drugs dispensed per 100,000) with a mean rate of 0.0219% and a median rate of 0.0019%. There were 7 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 436 incorrect drugs dispensed per 100,000.

Exhibit 37: Dispensing Accuracy – Part A: Incorrect Drug Dispensed (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: Incorrect Drug Dispensed	1,560	202,873,811	0.00077%	0.02189%	23

Exhibit 38: Dispensing Accuracy – Part A: Incorrect Drug Dispensed (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part A: Incorrect Drug Dispensed	0.43622%	0.01075%	0.00441%	0.00188%	0.00000%	0.00000%	0.00000%

Part B: Incorrect Recipient

Based on the 23 submissions, the aggregate summary rate is 0.0004% (or 0.4 drugs dispensed to incorrect recipient per 100,000) with a mean rate of 0.0063% and a median rate of 0.0006%. There were 7 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 98.9 drugs per 100,000 dispensed to incorrect recipient.

Exhibit 39: Dispensing Accuracy – Part B: Incorrect Recipient (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part B: Incorrect Recipient	859	202,873,831	0.00042%	0.00628%	23

Exhibit 40: Dispensing Accuracy – Part B: Incorrect Recipient (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part B: Incorrect Recipient	0.09893%	0.00640%	0.00318%	0.00062%	0.00000%	0.00000%	0.00000%

Part C: Incorrect Strength

Based on 22 submissions, the aggregate summary rate is 0.0002% (or 0.2 drugs dispensed with incorrect strength per 100,000) with a mean rate of 0.0013% and a median rate of 0.0005%. There were 6 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 7.2 incorrect strength prescriptions dispensed per 100,000.

Exhibit 41: Dispensing Accuracy – Part C: Incorrect Strength (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part C: Incorrect Strength	403	171,576,578	0.00024%	0.00130%	22

Exhibit 42: Dispensing Accuracy – Part C: Incorrect Strength (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part C: Incorrect Strength	0.00724%	0.00377%	0.00181%	0.00049%	0.00003%	0.00000%	0.00000%

Part D: Incorrect Dosage Form

Based on 22 submissions, the aggregate summary rate is 0.0009% (or 0.9 incorrect dosage forms dispensed per 100,000) with a mean rate of 0.0012% and a median rate of 0.0005%. There were 8 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 5.4 incorrect dosage forms dispensed per 100,000.

Exhibit 43: Dispensing Accuracy – Part D: Incorrect Dosage Form (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part D: Incorrect Dosage Form	1,812	195,443,642	0.00093%	0.00124%	22

Exhibit 44: Dispensing Accuracy – Part D: Incorrect Dosage Form (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part D: Incorrect Dosage Form	0.00543%	0.00383%	0.00235%	0.00049%	0.00000%	0.00000%	0.00000%

Part E: Incorrect Instructions

Based on 22 submissions, the aggregate summary rate is 0.0004% (or 0.4 drugs dispensed with incorrect patient instructions per 100,000) with a mean rate of 0.0007% and a median rate of 0.0001%. There were 10 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 5.4 drugs dispensed with incorrect patient instructions per 100,000.

Exhibit 45: Dispensing Accuracy – Part E: Incorrect Instructions (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part E: Incorrect Instructions	728	202,722,531	0.00036%	0.00074%	22

Exhibit 46: Dispensing Accuracy – Part E: Incorrect Instructions (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part E: Incorrect Instructions	0.00543%	0.00195%	0.00108%	0.00013%	0.00000%	0.00000%	0.00000%

Part F: Incorrect Quantity

Based on 23 submissions, the aggregate summary rate is 0.004% (or 4.0 drugs dispensed with incorrect quantity per 100,000) with a mean rate of 0.005% and a median rate of 0.0036%. There were 6 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 17.2 drugs dispensed with incorrect quantity per 100,000.

Exhibit 47: Dispensing Accuracy – Part F: Incorrect Quantity (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part F: Incorrect Quantity	8,126	202,873,831	0.00401%	0.00502%	23

Exhibit 48: Dispensing Accuracy – Part F: Incorrect Quantity (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part F: Incorrect Quantity	0.01718%	0.01257%	0.01002%	0.00360%	0.00057%	0.00000%	0.00000%

All Error Composite

Based on 23 submissions, the aggregate summary rate is 0.0066% (or 6.7 drugs with dispensing errors) with a mean rate of 0.0363% and a median rate of 0.0099%. There were 2 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 453.4 drug dispensing defects per 100,000.

Exhibit 49: Dispensing Accuracy – All Error Composite (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
All-Error Composite	13,488	202,873,831	0.00665%	0.03628%	23

Exhibit 50: Dispensing Accuracy – All Error Composite (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
All-Error Composite	0.45340%	0.04133%	0.02087%	0.00989%	0.00557%	0.00258%	0.00000%

Exhibit 51: Dispensing Accuracy – All Parts (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: Incorrect Drug Dispensed	1,560	202,873,811	0.00077%	0.02189%	23
Part B: Incorrect Recipient	859	202,873,831	0.00042%	0.00628%	23
Part C: Incorrect Strength	403	171,576,578	0.00024%	0.00130%	22
Part D: Incorrect Dosage Form	1,812	195,443,642	0.00093%	0.00124%	22
Part E: Incorrect Instructions	728	202,722,531	0.00036%	0.00074%	22
Part F: Incorrect Quantity	8,126	202,873,831	0.00401%	0.00502%	23
All-Error Composite	13,488	202,873,831	0.00665%	0.03628%	23

Exhibit 52: Dispensing Accuracy – All Parts (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part A: Incorrect Drug Dispensed	0.43622%	0.01075%	0.00441%	0.00188%	0.00000%	0.00000%	0.00000%
Part B: Incorrect Recipient	0.09893%	0.00640%	0.00318%	0.00062%	0.00000%	0.00000%	0.00000%
Part C: Incorrect Strength	0.00724%	0.00377%	0.00181%	0.00049%	0.00003%	0.00000%	0.00000%
Part D: Incorrect Dosage Form	0.00543%	0.00383%	0.00235%	0.00049%	0.00000%	0.00000%	0.00000%
Part E: Incorrect Instructions	0.00543%	0.00195%	0.00108%	0.00013%	0.00000%	0.00000%	0.00000%
Part F: Incorrect Quantity	0.01718%	0.01257%	0.01002%	0.00360%	0.00057%	0.00000%	0.00000%
All-Error Composite	0.45340%	0.04133%	0.02087%	0.00989%	0.00557%	0.00258%	0.00000%

Measure 10 – Distribution Accuracy (MP2012-07)

Measure Description

This *mandatory* measure assesses the percentage of prescriptions delivered to the wrong recipient. Part A assesses the percentage of prescriptions mailed with an incorrect address; Part B assesses the percentage of prescriptions mailed with a correct address that were not delivered to the correct location. A composite rate (sum of all numerators) is also calculated. **A lower rate represents better performance.**

There is no stratification for this measure, results are reported in aggregate across all populations. Each part of this measure is reported separately, and an aggregate error rate is calculated. The unit of analysis in this measure is individual prescriptions, not orders (which may include multiple prescriptions).

Summary of Findings

A total of 23 organizations reported valid results for each measure part, combined for all books of business.

<div align="center">Exhibit 53: Distribution Accuracy</div>
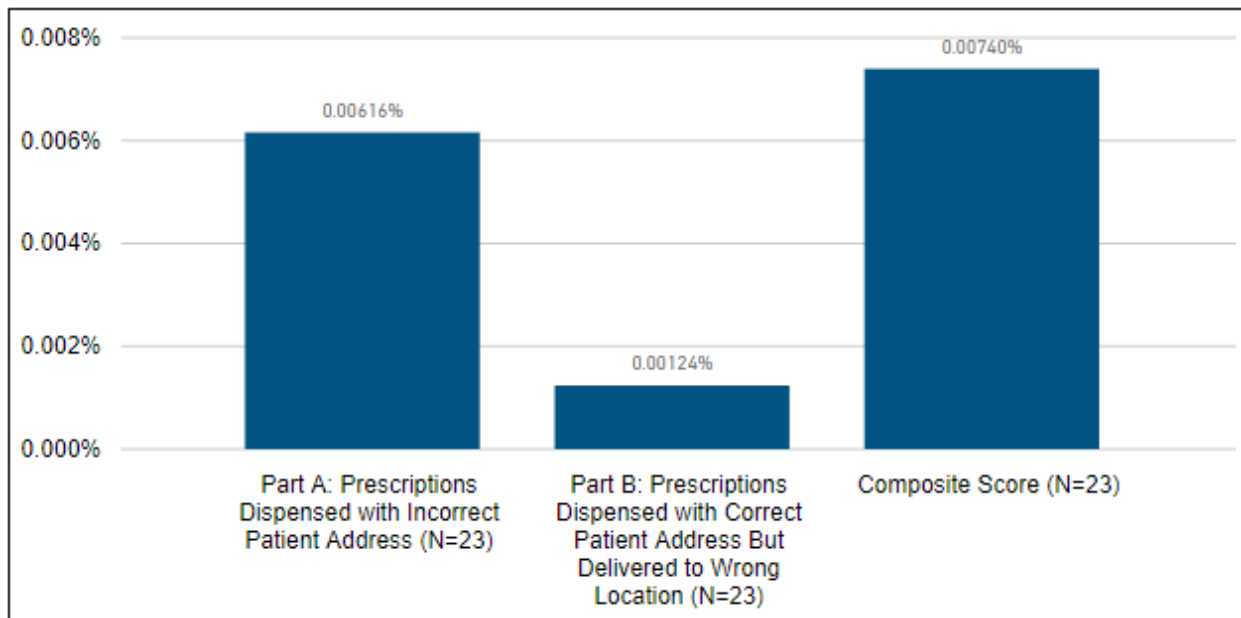
Note: Lower rate represents better performance.

Part A: Prescriptions Dispensed with Incorrect Patient Address

Based on 23 submissions, the aggregate summary rate is 0.0062% (or 6.2 incorrect patient addresses per 100,000 prescriptions dispensed) with a mean rate of 0.025% and a median rate of 0.0117%. There were 4 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 169.9 incorrect patient addresses per 100,000 prescriptions dispensed.

Exhibit 54: Distribution Accuracy – Part A: Prescriptions with Incorrect Patient Address (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: Prescriptions Dispensed with Incorrect Patient Address	12,496	202,873,811	0.00616%	0.02496%	23

Exhibit 55: Distribution Accuracy – Part A: Prescriptions with Incorrect Patient Address (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part A: Prescriptions Dispensed with Incorrect Patient Address	0.16986%	0.04407%	0.03822%	0.01167%	0.00022%	0.00000%	0.00000%

Part B: Prescriptions Dispensed with Correct Patient Address but Delivered to Wrong Location

Based on 23 submissions, the aggregate summary rate is 0.0012% (or 1.2 prescriptions delivered to wrong location per 100,000 dispensed correctly) with a mean rate of 0.021% and a median rate of 0.0018%. There were 4 valid data submissions that reported 0% (perfect performance). The lowest performer indicated 158.3 prescriptions delivered to wrong location per 100,000 dispensed correctly.

Exhibit 56: Distribution Accuracy – Part B: Prescriptions Dispensed with Correct Patient Address by Delivered to Wrong Location (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part B: Prescriptions Dispensed with Correct Patient Address But Delivered to Wrong Location	2,509	202,873,811	0.00124%	0.02102%	23

Exhibit 57: Distribution Accuracy – Part B: Prescriptions Dispensed with Correct Patient Address by Delivered to Wrong Location (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part B: Prescriptions Dispensed with Correct Patient Address But Delivered to Wrong Location	0.15833%	0.07459%	0.00854%	0.00181%	0.00025%	0.00000%	0.00000%

Composite Score

Based on 23 submissions, the aggregate summary rate is 0.0074% (or 7.4 distribution defects per 100,000 prescriptions dispensed) with a mean rate of 0.046% and a median rate of 0.0156%. There were 2 valid data submissions that reported 0% (perfect performance). The lowest performer represented 251.9 distribution defects per 100,000 prescriptions dispensed.

Exhibit 58: Distribution Accuracy – Composite Score (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Composite Score	15,005	202,873,811	0.00740%	0.04598%	23

Exhibit 59: Distribution Accuracy – Composite Score (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Composite Score	0.25186%	0.16895%	0.04346%	0.01556%	0.00400%	0.00038%	0.00000%

Measure 11 – Turnaround Time for Prescriptions (MP2012-08)

Measure Description

This *mandatory* three-part measure assesses the average speed with which the organization fills prescriptions. Part A measures prescription turnaround time for clean prescriptions; Part B measures prescription turnaround time for prescriptions that required intervention; and Part C measures prescription turnaround time for all prescriptions. **For all parts, a lower rate represents better performance.**

There is no stratification for this measure, results are reported aggregated across all populations. Parts A and B of this measure are mutually exclusive; if a prescription requires an intervention, it is counted in Part B; when it becomes clean, it is not counted again in Part A. The unit of analysis in this measure is individual prescriptions, not orders (which may include multiple prescriptions).

Summary of Findings

A total of 18 organizations reported at least one of the measure parts, combined for all books of business.

Exhibit 60: Turnaround Time for Prescriptions
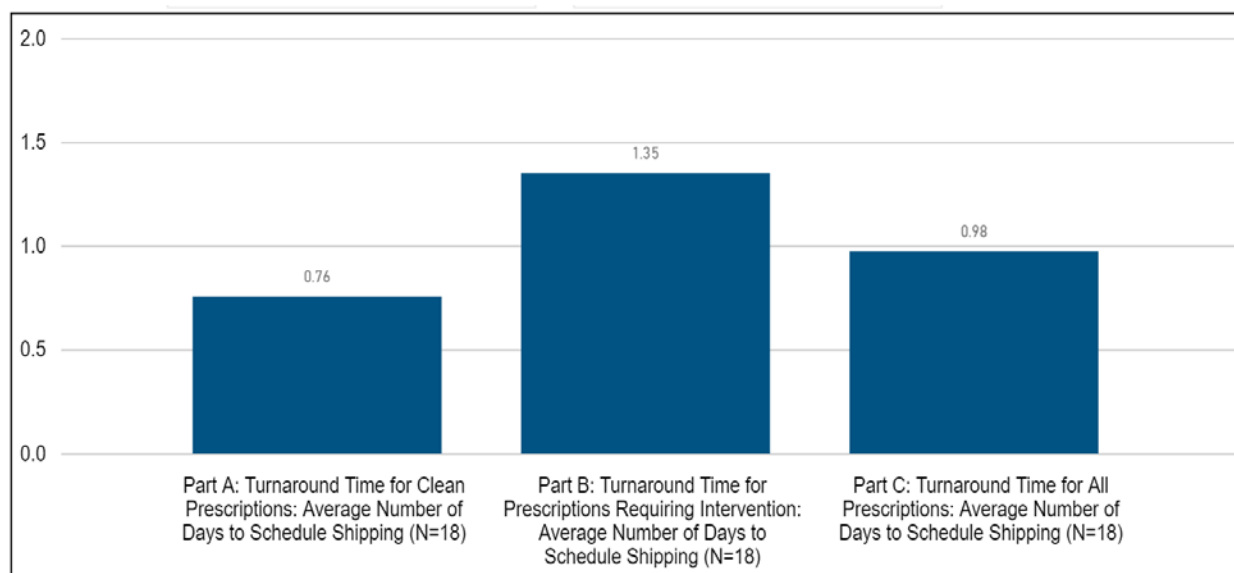
Note: A lower rate represents better performance.

Part A: Turnaround Time for Clean Prescriptions

Based on 18 submissions, the aggregate summary rate is 0.76 days with a mean rate of 1.82 and a median rate of 1.14. There were 7 valid data submissions that reported less than one-day turnaround time, with none of those processed in 0.000 days. There were 6 organizations that took over two days to turnaround clean prescriptions. Among those, 2 organizations took over 5 days.

Exhibit 61: Turnaround Time for Prescriptions – Part A: Clean Prescriptions (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: Turnaround Time for Clean Prescriptions: Average Number of Days to Schedule Shipping	95,211,898	125,323,108	0.76	1.82	18

Exhibit 62: Turnaround Time for Prescriptions – Part A: Clean Prescriptions (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part A: Turnaround Time for Clean Prescriptions: Average Number of Days to Schedule Shipping	5.51	4.30	2.29	1.14	0.73	0.59	0.27

Part B: Turnaround Time for Prescriptions Requiring Intervention

Based on 18 submissions, the aggregate summary rate is 1.35 days with a mean rate of 4.14 and a median rate of 2.66. There were 6 organizations taking over five days to turnaround prescriptions that required intervention. Among those, 1 took over 10 days.

Exhibit 63: Turnaround Time for Prescriptions – Part B: Prescriptions Requiring Intervention (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part B: Turnaround Time for Prescriptions Requiring Intervention: Average Number of Days to Schedule Shipping	96,962,621	71,663,755	1.35	4.14	18

Exhibit 64: Turnaround Time for Prescriptions – Part B: Prescriptions Requiring Intervention (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part B: Turnaround Time for Prescriptions Requiring Intervention: Average Number of Days to Schedule Shipping	11.86	8.74	5.42	2.66	1.94	1.44	0.28

Part C: Turnaround Time for All Prescriptions

Based on 18 submissions, the aggregate summary rate is 0.98 days with a mean rate of 2.63 and a median rate of 1.96. There were 4 valid data submissions that reported less than one-day turnaround time. There were 2 organizations that took over five days to turnaround all prescriptions.

Exhibit 65: Turnaround Time for Prescriptions – Part C: All Prescriptions (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part C: Turnaround Time for All Prescriptions: Average Number of Days to Schedule Shipping	192,175,010	196,987,343	0.98	2.63	18

Exhibit 66: Turnaround Time for Prescriptions – Part C: All Prescriptions (Benchmark Data)

Measure	Min	10th	25th	50th	75th	90th	Max
Part C: Turnaround Time for All Prescriptions: Average Number of Days to Schedule Shipping	6.81	5.27	4.09	1.96	1.13	0.80	0.26

Measure 12 – Concurrent Use of Opioids and Benzodiazepines (PH2018-04)

Measure Description

This *mandatory* measure assesses the percentage of individuals 18 years and older with concurrent use of prescription opioids and benzodiazepines. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid). **A lower rate represents better performance.**

Summary of Findings

A total of 3 organizations submitted reportable data for this measure. This resulted in the following submissions: 3 Commercial, 1 Medicaid, 2 Medicare, and 1 All Other. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 13 – Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (PH2018-05)

Measure Description

This *mandatory* measure assesses the percentage of adults 65 years and older with concurrent use of 2 or more unique anticholinergic medications. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid). **A lower rate represents better performance.**

Summary of Findings

A total of 11 organizations submitted reportable data for this measure. This resulted in the following submissions: 10 Commercial, 2 Medicaid, 8 Medicare, and 2 All Other. Aggregate summary statistics and benchmarks were produced only for Commercial and Medicare.

The Commercial aggregate summary rate is 5.54% (n=10, Range: 69.72 - 0.71%) with a mean rate of 13.03% and a median rate of 7.36%.

The Medicare aggregate summary rate is 6.21% (n=8, Range: 55.56 - 0.85%) with a mean rate of 12.05% and a median rate of 5.74%.

Exhibit 67: Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults
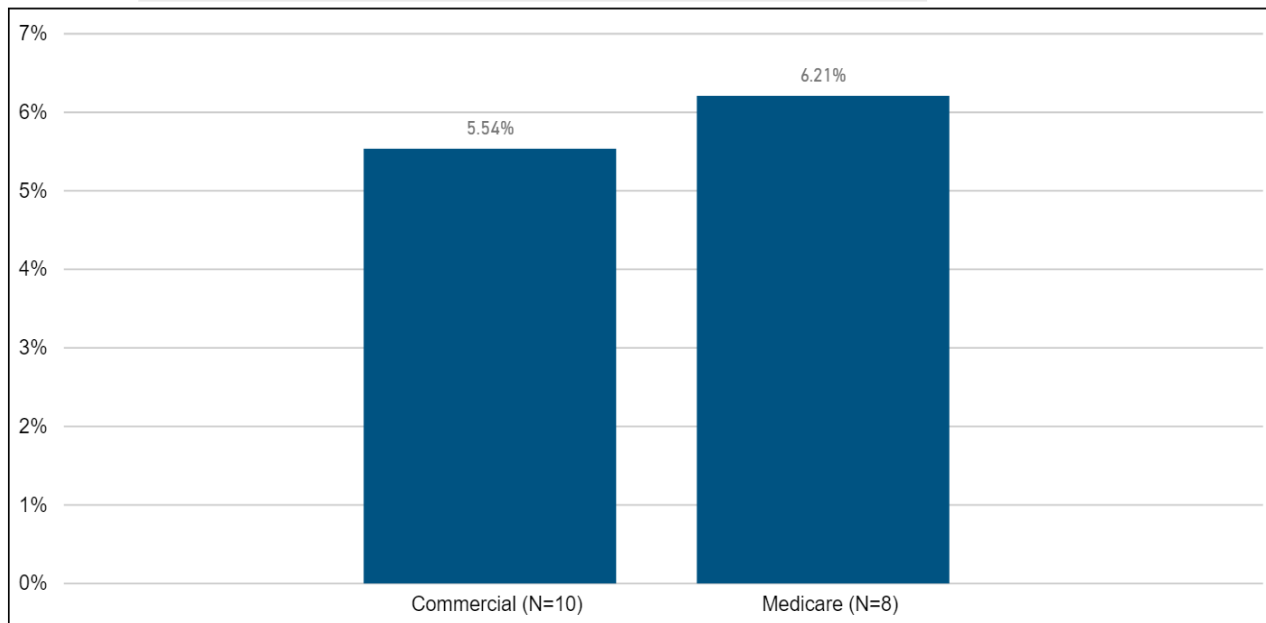
Note: A lower rate represents better performance.

Exhibit 68: Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (Summary Data)

Measure:	Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	3,781	68,293	5.54%	13.03%	10
Medicare	12,547	202,052	6.21%	12.05%	8

Exhibit 69: Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (Benchmark Data)

Measure:	Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	69.72%	19.61%	11.98%	7.36%	3.05%	1.57%	0.71%
Medicare	55.56%	25.52%	10.16%	5.74%	3.49%	2.20%	0.85%

Measure 14 – Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults (PH2018-06)

Measure Description

This *mandatory* measure assesses percentage of adults 65 years and older with concurrent use of 3 or more unique central-nervous system (CNS) active medications. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid). **A lower rate represents better performance.**

Summary of Findings

A total of 13 organizations submitted reportable data for this measure. This resulted in the following submissions: 11 Commercial, 2 Medicaid, 10 Medicare, and 2 All Other. Aggregate summary statistics and benchmarks were produced only for Commercial and Medicare.

The Commercial aggregate summary rate is 2.3% (n=11, Range: 72.22 - 0%) with a mean rate of 8.79% and a median rate of 2.28%.

The Medicare aggregate summary rate is 2.26% (n=10, Range: 63.73 - 0.18%) with a mean rate of 9.16% and a median rate of 3.09%.

Exhibit 70: Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults
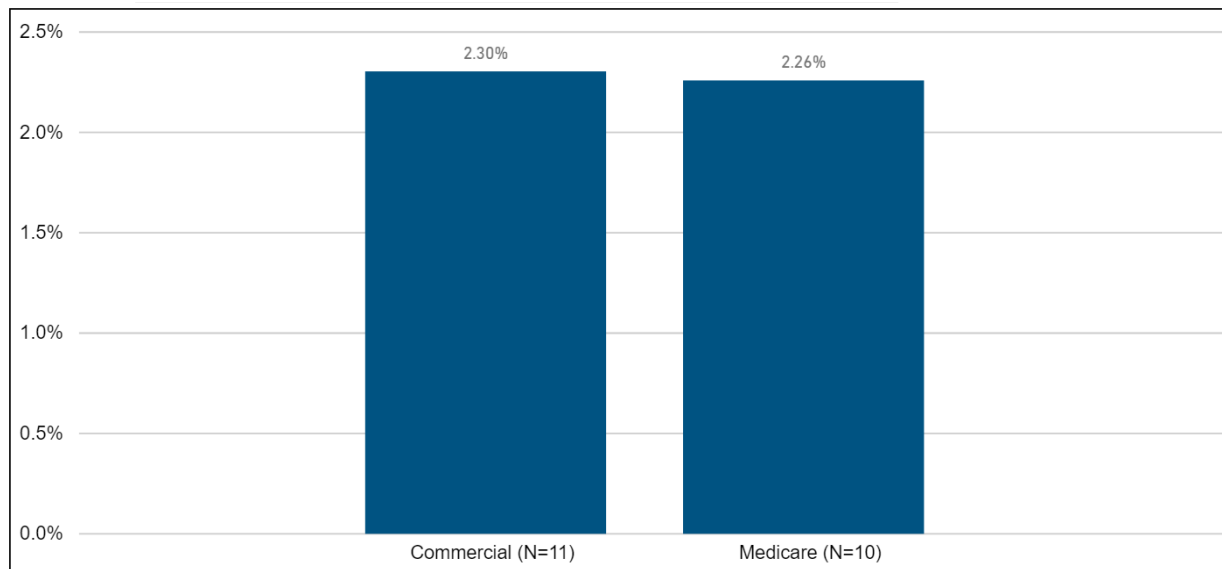
Note: A lower rate represents better performance.

Exhibit 71: Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults (Summary Data)

Measure:	Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	3,617	156,989	2.30%	8.79%	11
Medicare	12,051	533,493	2.26%	9.16%	10

Exhibit 72: Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults (Benchmark Data)

Measure:	Polypharmacy: Use of Multiple CNS-Active Medications in Older Adults						
Line of Business	Min	10th	25th	50th	75th	90th	Max
Commercial	72.22%	7.02%	3.89%	2.28%	1.11%	0.00%	0.00%
Medicare	63.73%	11.83%	5.50%	3.09%	2.01%	0.50%	0.18%

Measure 15 – Use of Opioids at High Dosage or from Multiple Providers in Persons Without Cancer (PH2018-08)

Measure Description

This *mandatory* 3-part measure assesses high dosage opioid use from multiple providers, among individuals 18 years and older without cancer. Patients in hospice also are excluded. The denominator includes individuals with two or more prescription claims for opioids filled on at least two separate days, for which the sum of the days' supply is > 15 during the treatment period. Below are the numerators for each rate:

1. **Use of Opioids at High Dosage in Persons Without Cancer (OHD):** The proportion (XX out of 1,000) of individuals from the denominator receiving prescriptions for opioids with a daily dosage greater than 120 morphine milligram equivalents (MME) for 90 consecutive days or longer.

2. **Use of Opioids from Multiple Providers in Persons Without Cancer (OMP):** The proportion (XX out of 1,000) of individuals from the denominator receiving prescriptions for opioids from four (4) or more prescribers AND four (4) or more pharmacies.

3. **Use of Opioids at High Dosage and from Multiple Providers in Persons Without Cancer (OHDMP):** The proportion (XX out of 1,000) of individuals from the denominator receiving prescriptions for opioids with a daily dosage greater than 120 morphine milligram equivalents (MME) for 90 consecutive days or longer, AND who received opioid prescriptions from four (4) or more prescribers AND four (4) or more pharmacies.

The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

This measure is reported separately for each of the organization's books of business that are included in its URAC accreditation (i.e., Commercial, Medicare, and Medicaid).

Summary of Findings

Only one organization submitted reportable data for this measure, which resulted in 1 Commercial and 1 Medicare submission. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 16 – Fulfillment of Promise to Deliver (SP2012-09)

Measure Description

This *exploratory* measure assesses the percentage of prescriptions that the organization delivered on time (i.e., the percentage of prescriptions that reached patients on the date scheduled for delivery).

This measure only applies to organizations that track the delivery of prescriptions or orders. There is no stratification for this measure; results are reported aggregated across all populations.

Summary of Findings

No organizations submitted data for this exploratory measure.

Measure 17 – Use of High-Risk Medications in the Elderly (HIM2013-21)

Measure Description

This *exploratory* measure assesses the percentage of patients 65 years of age and older who received two or more prescription fills for a high-risk medication during the measurement period. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

Summary of Findings

Only one organization submitted data for this measure, which resulted in 1 Commercial and 1 Medicare submission. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 18 – Primary Medication Non-Adherence (PH2015-01)

Measure Description

This *exploratory* measure assesses the percentage of prescriptions for chronic medications e-prescribed by a prescriber and not obtained by the patient in the following 30 days. This rate measures the level of primary medication nonadherence across a population of patients. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

There is no stratification for this measure, results are reported aggregated across all populations.

Summary of Findings

No organizations submitted data for this exploratory measure.

Measure 19 – Use of Benzodiazepine Sedative Hypnotic Medications in the Elderly (PH2015-03)

Measure Description

This *exploratory* measure assesses the percentage of individuals 65 years of age and older that received two or more prescription fills for any benzodiazepine sedative hypnotic for a cumulative period of more than 90 days. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

Summary of Findings

Only one organization submitted data for this measure, combined for all books of business. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 20 – Statin Use in Persons with Diabetes (PH2015-06)

Measure Description

This *exploratory* measure assesses the percentage of patients ages 40-75 years who were dispensed a medication for diabetes that receive a statin medication. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

Summary of Findings

Only one organization submitted reportable data for this measure, which resulted in 1 Commercial and 1 Medicare submission. Analysis and benchmarks were not produced given there were less than five valid data submissions per payor.

Measure 21 – Consumer Experience with Pharmacy Services (PH2015-05)

Measure Description

This *exploratory* measure assesses consumer experience-based survey responses within the following domains: Pharmacy Staff Communication, Information about Medicine, Written Information, New Prescriptions, and About You. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA, Inc.

Summary of Findings

No organizations submitted data for this exploratory measure.