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## 2018

URAC PHARMACY BENEFIT MANAGEMENT PERFORMANCE MEASUREMENT:

AGGREGATE SUMMARY PERFORMANCE REPORT
December 2018
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## Executive Summary

Presented in this report are the 2017 measurement year (2018 reporting year) results based on URAC's Pharmacy Benefit Management (PBM) Accreditation program performance measures. The report includes only aggregate summary rates; there are no individual performance results included.

Organizations were required to report data for six mandatory measures, and they had the option to report data for six exploratory measures. Below is the list of mandatory [M] and exploratory [E] measures for 2018 reporting:

1. Proportion of Days Covered (DM2012-12) [M]
2. Adherence to Non-Warfarin Oral Anticoagulants (DTM2015-01) [M]
3. Generic Dispensing Rates (MP2012-09) [M]
4. Drug-Drug Interactions (DM2012-13) [M]
5. Use of High-Risk Medications in the Elderly (HRM) (HIM2013-21) [M]
6. Call Center Performance (DTM2010-04) [M]
7. Turnaround Time for Prescriptions (MP2012-08) [E]
8. Antipsychotic Use in Children Under 5 Years Old (PH2015-02) [E]
9. Use of Benzodiazepine Sedative Hypnotic Medications in the Elderly (PH2015-03 [E]
10. Diabetes Medication Dosing (PH2015-04) [E]
11. Statin Use in Persons with Diabetes (PH2015-06) [E]
12. Consumer Experience with Pharmacy Services (PH2015-05) [E]

For PBM, performance measurement for the 2018 reporting year aligns with Phase 2 of URAC's measurement process. With Phase 2, mandatory performance measures are subject to an external auditing and verification process. Additionally, the audited performance measure results become publicly available via aggregated, de-identified reports. With Phase 3, organization-specific measure results that have undergone an external auditing and verification process will be publicly available on the URAC website.

This performance report has been prepared by the URAC Quality, Research and Measurement Department. If you have any questions about the results contained herein, please contact us at: ResearchMeasurement@urac.org.

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## Pharmacy Benefit Management Organization Characteristics

A total of 19 URAC-accredited Pharmacy Benefit Management (PBM) organizations reported 2017 measurement year data for the 2018 reporting year. The 19 organizations reported commercial data for at least one measure; seven organizations also reported Medicaid data; and nine organizations reported Medicare data.

All 19 PBMs represented national geographical coverage across all four URAC-specified regions (Midwest, Northeast, South, and West). The total number of prescriptions covered by the PBMs ranged from $1,366,085$ to $1,288,747,354$, with a median of $18,060,755$, a mean of $178,284,512$, and grand total of $3,387,405,726$ prescriptions across all organizations reporting.

Five PBMs reported total prescription volume of over 100,000,000 (Exhibit 1). The remaining 14 PBMs reported total prescription volume of less than 100,000,000 (Exhibit 2).

Exhibit 1: Total Number of Prescription for Pharmacy Benefit Management Program by Organizations with >=100M Prescriptions


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Exhibit 2: Total Number of Prescriptions for Pharmacy Benefit Management Program by Organizations with <100M Prescriptions


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## Data Validation Overview

For 2018 reporting, URAC required that organizations have their measure results reviewed by a URACapproved data validation vendor (DVV). There were four vendors that participated: Advent Advisory Group, Attest Health Care Advisors, Healthcare Data Company, and Metastar. This represents an increase by one vendor compared to 2017.

## 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. Materially inaccurate rates based on DVV review were noted in the database and were excluded from the aggregate calculations.

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.

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## Results: Pharmacy Benefit Management Measures

All 19 PBM organizations reported data for at least one of the performance measures. The organizations reported primarily commercial results. DVV-specific analysis was not performed given small numbers.

## 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 medication categories: Beta-blockers(BB); Renin Angiotensin System (RAS) Antagonists; Calcium Channel Blockers (CCB); Statins; Biguanides; Sulfonylureas; Thiazolidinediones; Dipeptidyl Peptidase (DPP)-IV Inhibitors; Diabetes All Class; 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.

Exhibit 3: Proportion of Days Covered (80\% Threshold) - Commercial


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Exhibit 4: Proportion of Days Covered ( $80 \%$ Threshold) - Medicaid


Exhibit 5: Proportion of Days Covered (80\% Threshold) - Medicare


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## Summary of Findings

All 19 organizations submitted data for Commercial, seven submitted data for Medicaid, nine submitted data for Medicare, and no organizations submitted data for the All Other Population. Aggregate summary statistics and benchmarks were produced for Commercial, Medicaid, and Medicare.

## Rate 1: Beta Blocker (BB) Medications

The Commercial aggregate summary rate is $73.93 \%$ ( $n=19$, Range: $51.85-77.43 \%$ ) with a mean rate of $68.25 \%$ and a median rate of $71.20 \%$.

The Medicaid aggregate summary rate is $59.37 \%$ ( $n=7$, Range: $57.61-63.56 \%$ ) with a mean rate of $59.94 \%$ and a median rate of $59.66 \%$.

The Medicare aggregate summary rate is $78.10 \%$ ( $n=9$, Range: $53.67-80.39 \%$ ) with a mean rate of $73.99 \%$ and a median rate of $78.08 \%$.

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 | $6,463,168$ | $8,741,936$ | $73.93 \%$ | $68.25 \%$ | 19 |
| Medicaid | 412,667 | 695,022 | $59.37 \%$ | $59.94 \%$ | 7 |
| Medicare | $5,377,391$ | $6,885,484$ | $78.10 \%$ | $73.99 \%$ | 9 |

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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 | 10 th | 25 th | 50 th | 75 th | 90 th | Max |
| Commercial | $51.85 \%$ | $58.11 \%$ | $64.31 \%$ | $71.20 \%$ | $73.85 \%$ | $75.67 \%$ | $77.43 \%$ |
| Medicaid | $57.61 \%$ | $57.62 \%$ | $58.14 \%$ | $59.66 \%$ | $61.24 \%$ | $62.28 \%$ | $63.56 \%$ |
| Medicare | $53.67 \%$ | $65.32 \%$ | $73.32 \%$ | $78.08 \%$ | $79.78 \%$ | $80.16 \%$ | $80.39 \%$ |

Rate 2: Renin Angiotensin System (RAS) Antagonists
The Commercial aggregate summary rate is $77.38 \%$ ( $n=19$, Range: 48.32-80.23\%) with a mean rate of $72 \%$ and a median rate of $75.05 \%$.

The Medicaid aggregate summary rate is $62.28 \%$ ( $n=7$, Range: $60.62-66.67 \%$ ) with a mean rate of $63.48 \%$ and a median rate of $62.91 \%$.

The Medicare aggregate summary rate is $83.11 \%$ ( $n=9$, Range: $51.56-84.95 \%$ ) with a mean rate of $76.74 \%$ and a median rate of $82.25 \%$.

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 | $11,626,597$ | $15,024,873$ | $77.38 \%$ | $72.00 \%$ | 19 |
| Medicaid | 738,575 | $1,185,949$ | $62.28 \%$ | $63.48 \%$ | 7 |
| Medicare | $7,398,447$ | $8,901,691$ | $83.11 \%$ | $76.74 \%$ | 9 |

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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 | 25 th | 50 th | 75 th | 90th | Max |
| Commercial | $48.32 \%$ | $61.80 \%$ | $68.82 \%$ | $75.05 \%$ | $77.50 \%$ | $79.42 \%$ | $80.23 \%$ |
| Medicaid | $60.62 \%$ | $60.81 \%$ | $61.05 \%$ | $62.91 \%$ | $66.02 \%$ | $66.52 \%$ | $66.67 \%$ |
| Medicare | $51.56 \%$ | $63.91 \%$ | $76.45 \%$ | $82.25 \%$ | $83.15 \%$ | $83.83 \%$ | $84.95 \%$ |

Rate 3: Calcium Channel Blocker (CCB) Medications
The Commercial aggregate summary rate is $75.02 \%$ ( $\mathrm{n}=19$, Range: $56.18-78.66 \%$ ) with a mean rate of $70.58 \%$ and a median rate of $72.14 \%$.

The Medicaid aggregate summary rate is $58.75 \%$ ( $\mathrm{n}=7$, Range: 56.13-63.95\%) with a mean rate of $60.05 \%$ and a median rate of $59.55 \%$.

The Medicare aggregate summary rate is $79.13 \%$ ( $n=9$, Range: 62.27-81.48\%) with a mean rate of $75.8 \%$ and a median rate of $79.29 \%$.

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 | $5,031,922$ | $6,707,207$ | $75.02 \%$ | $70.58 \%$ | 19 |
| Medicaid | 344,497 | 586,376 | $58.75 \%$ | $60.05 \%$ | 7 |
| Medicare | $4,111,319$ | $5,195,493$ | $79.13 \%$ | $75.80 \%$ | 9 |

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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 | 10 th | 25 th | 50 th | 75 th | 90 th | Max |
| Commercial | $56.18 \%$ | $61.51 \%$ | $67.56 \%$ | $72.14 \%$ | $75.26 \%$ | $76.57 \%$ | $78.66 \%$ |
| Medicaid | $56.13 \%$ | $56.78 \%$ | $57.47 \%$ | $59.55 \%$ | $62.89 \%$ | $63.48 \%$ | $63.95 \%$ |
| Medicare | $62.27 \%$ | $66.68 \%$ | $74.53 \%$ | $79.29 \%$ | $81.08 \%$ | $81.22 \%$ | $81.48 \%$ |

## Rate 4: Biguanides

The Commercial aggregate summary rate is $65.71 \%$ ( $n=19$, Range: 45-70.86\%) with a mean rate of $60.51 \%$ and a median rate of $60.78 \%$.

The Medicaid aggregate summary rate is $55.21 \%$ ( $n=7$, Range: $50.66-60.13 \%$ ) with a mean rate of $55.8 \%$ and a median rate of $56.06 \%$.

The Medicare aggregate summary rate is $75.1 \%$ ( $\mathrm{n}=9$, Range: $57.46-77.63 \%$ ) with a mean rate of $71.91 \%$ and a median rate of $74.79 \%$.

Exhibit 15: Proportion of Days Covered (80\% Threshold) - Rate 4: Biguanides


Exhibit 16: Proportion of Days Covered ( $80 \%$ Threshold) - Rate 4: Biguanides

| Measure: | Rate 4: Biguanides |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Total Numerator | Total Denominator | Aggregate Summary Rate | Mean | Submissions |
| Commercial | $3,103,693$ | $4,723,500$ | $65.71 \%$ | $60.51 \%$ | 19 |
| Medicaid | 264,385 | 478,861 | $55.21 \%$ | $55.80 \%$ | 7 |
| Medicare | $2,018,965$ | $2,688,486$ | $75.10 \%$ | $71.91 \%$ | 9 |

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Exhibit 17: Proportion of Days Covered ( $80 \%$ Threshold) - Rate 4: Biguanides

| Measure: | Rate 4: Biguanides |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10th | 25th | 50 th | 75 th | 90th | Max |
| Commercial | $45.00 \%$ | $51.90 \%$ | $54.72 \%$ | $60.78 \%$ | $65.46 \%$ | $67.74 \%$ | $70.86 \%$ |
| Medicaid | $50.66 \%$ | $51.09 \%$ | $52.70 \%$ | $56.06 \%$ | $59.18 \%$ | $60.13 \%$ | $60.13 \%$ |
| Medicare | $57.46 \%$ | $63.99 \%$ | $70.20 \%$ | $74.79 \%$ | $75.43 \%$ | $77.57 \%$ | $77.63 \%$ |

## Rate 5: Sulfonylureas

The Commercial aggregate summary rate is $69.24 \%$ ( $n=19$, Range: 46.37-75.25\%) with a mean rate of $63.12 \%$ and a median rate of $63.8 \%$.

The Medicaid aggregate summary rate is $58.73 \%$ ( $n=7$, Range: $54.44-63.19 \%$ ) with a mean rate of $59.05 \%$ and a median rate of $59.71 \%$.

The Medicare aggregate summary rate is $76.9 \%$ ( $n=9$, Range: $59.75-79.62 \%$ ) with a mean rate of $72.94 \%$ and a median rate of $76.61 \%$.

Exhibit 18: Proportion of Days Covered ( $80 \%$ Threshold) - Rate 5: Sulfonylureas


Exhibit 19: Proportion of Days Covered (80\% Threshold) - Rate 5: Sulfonylureas (Summary Data)

| Measure: | Rate 5: Sulfonylureas |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Total Numerator | Total Denominator | Aggregate Summary Rate | Mean | Submissions |
| Commercial | $1,084,359$ | $1,566,056$ | $69.24 \%$ | $63.12 \%$ | 19 |
| Medicaid | 98,078 | 167,006 | $58.73 \%$ | $59.05 \%$ | 7 |
| Medicare | 943,538 | $1,226,988$ | $76.90 \%$ | $72.94 \%$ | 9 |

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Exhibit 20: Proportion of Days Covered ( $80 \%$ Threshold) - Rate 5: Sulfonylureas (Benchmark Data)

| Measure: | Rate 5: Sulfonylureas |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10th | 25 th | 50 th | 75 th | 90th | Max |
| Commercial | $46.37 \%$ | $53.89 \%$ | $56.90 \%$ | $63.80 \%$ | $68.57 \%$ | $71.84 \%$ | $75.25 \%$ |
| Medicaid | $54.44 \%$ | $54.92 \%$ | $56.53 \%$ | $59.71 \%$ | $61.48 \%$ | $62.62 \%$ | $63.19 \%$ |
| Medicare | $59.75 \%$ | $64.28 \%$ | $70.53 \%$ | $76.61 \%$ | $77.64 \%$ | $79.15 \%$ | $79.62 \%$ |

## Rate 6: Thiazolidinediones

The Commercial aggregate summary rate is $72.56 \%$ ( $\mathrm{n}=19$, Range: $50.53-76.39 \%$ ) with a mean rate of $67.6 \%$ and a median rate of $69.47 \%$.

The Medicaid aggregate summary rate is $61.45 \%$ ( $\mathrm{n}=7$, Range: $57.47-68.21 \%$ ) with a mean rate of $62.96 \%$ and a median rate of $63.6 \%$.

The Medicare aggregate summary rate is $78.14 \%(n=9$, Range: $62.24-81.39 \%$ ) with a mean rate of $75.46 \%$ and a median rate of $77.97 \%$.

Exhibit 21: Proportion of Days Covered (80\% Threshold) - Rate 6: Thiazolidinediones


Exhibit 22: Proportion of Days Covered (80\% Threshold) - Rate 6: Thiazolidinediones (Summary Data)

| Measure: | Rate 6: Thiazolidinediones |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Total Numerator | Total Denominator | Aggregate Summary Rate | Mean | Submissions |
| Commercial | 233,071 | 321,207 | $72.56 \%$ | $67.60 \%$ | 19 |
| Medicaid | 15,054 | 24,497 | $61.45 \%$ | $62.96 \%$ | 7 |
| Medicare | 168,444 | 215,562 | $78.14 \%$ | $75.46 \%$ | 9 |

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Exhibit 23: Proportion of Days Covered ( $80 \%$ Threshold) - Rate 6: Thiazolidinediones (Benchmark Data)

| Measure: | Rate 6: Thiazolidinediones |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10th | 25 th | 50 th | 75 th | 90th | Max |
| Commercial | $50.53 \%$ | $58.72 \%$ | $62.89 \%$ | $69.47 \%$ | $72.54 \%$ | $74.97 \%$ | $76.39 \%$ |
| Medicaid | $57.47 \%$ | $59.15 \%$ | $60.65 \%$ | $63.60 \%$ | $65.08 \%$ | $66.60 \%$ | $68.21 \%$ |
| Medicare | $62.24 \%$ | $68.28 \%$ | $72.99 \%$ | $77.97 \%$ | $78.96 \%$ | $79.99 \%$ | $81.39 \%$ |

## Rate 7: Dipeptidyl Peptidase-4 (DPP-IV) Inhibitors

The Commercial aggregate summary rate is $69.2 \%$ ( $n=19$, Range: 39.68-75.55\%) with a mean rate of $64.86 \%$ and a median rate of 68.7\%.

The Medicaid aggregate summary rate is $61.92 \%$ ( $n=7$, Range: $52.28-66.47 \%$ ) with a mean rate of $61.62 \%$ and a median rate of $64.35 \%$.

The Medicare aggregate summary rate is $70.94 \%$ ( $n=9$, Range: $54.91-74.89 \%$ ) with a mean rate of $68.93 \%$ and a median rate of $71.1 \%$.

Exhibit 24: Proportion of Days Covered (80\% Threshold) - Rate 7: DPP-IV Inhibitors


Exhibit 25: Proportion of Days Covered ( $80 \%$ Threshold) - Rate 7: DPP-IV Inhibitors (Summary Data)

| Measure: | Rate 7: DPP-IV Inhibitors |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Total Numerator | Total Denominator | Aggregate Summary Rate | Mean | Submissions |
| Commercial | 629,470 | 909,669 | $69.20 \%$ | $64.86 \%$ | 19 |
| Medicaid | 52,878 | 85,399 | $61.92 \%$ | $61.62 \%$ | 7 |
| Medicare | 388,517 | 547,652 | $70.94 \%$ | $68.93 \%$ | 9 |

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Exhibit 26: Proportion of Days Covered (80\% Threshold) - Rate 7: DPP-IV Inhibitors (Benchmark Data)

| Measure: | Rate 7: DPP-IV Inhibitors |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10th | 25 th | 50 th | 75 th | 90 th | Max |
| Commercial | $39.68 \%$ | $54.42 \%$ | $62.30 \%$ | $68.70 \%$ | $70.52 \%$ | $70.94 \%$ | $75.55 \%$ |
| Medicaid | $52.28 \%$ | $54.67 \%$ | $58.86 \%$ | $64.35 \%$ | $65.27 \%$ | $65.82 \%$ | $66.47 \%$ |
| Medicare | $54.91 \%$ | $62.88 \%$ | $65.17 \%$ | $71.10 \%$ | $72.12 \%$ | $74.79 \%$ | $74.89 \%$ |

## Rate 8: Diabetes All Class Rate

The Commercial aggregate summary rate is $73.22 \%$ ( $n=19$, Range: $51.58-79.55 \%$ ) with a mean rate of $66.99 \%$ and a median rate of $66.9 \%$.

The Medicaid aggregate summary rate is $64.87 \%(n=7$, Range: 56.28-70.15\%) with a mean rate of $63.94 \%$ and a median rate of $63.69 \%$.

The Medicare aggregate summary rate is $81.75 \%$ ( $\mathrm{n}=9$, Range: $63.66-84.71 \%$ ) with a mean rate of $77.3 \%$ and a median rate of $80.1 \%$.

Exhibit 27: Proportion of Days Covered (80\% Threshold) - Rate 8: Diabetes All Class Rate


Exhibit 28: 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 | $3,940,066$ | $5,380,898$ | $73.22 \%$ | $66.99 \%$ | 19 |
| Medicaid | 337,361 | 520,028 | $64.87 \%$ | $63.94 \%$ | 7 |
| Medicare | $2,661,545$ | $3,255,785$ | $81.75 \%$ | $77.30 \%$ | 9 |

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Exhibit 29: 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 | 25 th | 50 th | 75 th | 90th | Max |
| Commercial | $51.58 \%$ | $57.43 \%$ | $59.26 \%$ | $66.90 \%$ | $73.35 \%$ | $76.24 \%$ | $79.55 \%$ |
| Medicaid | $56.28 \%$ | $60.44 \%$ | $63.39 \%$ | $63.69 \%$ | $65.34 \%$ | $67.49 \%$ | $70.15 \%$ |
| Medicare | $63.66 \%$ | $69.54 \%$ | $71.35 \%$ | $80.10 \%$ | $82.33 \%$ | $82.92 \%$ | $84.71 \%$ |

## Rate 9: Statins

The Commercial aggregate summary rate is $73.44 \%$ ( $n=19$, Range: 39.26-77.17\%) with a mean rate of $66.97 \%$ and a median rate of $68.86 \%$.

The Medicaid aggregate summary rate is $58.96 \%$ ( $n=7$, Range: $56.71-64.66 \%$ ) with a mean rate of $60.6 \%$ and a median rate of $61.24 \%$.

The Medicare aggregate summary rate is $79.76 \%$ ( $\mathrm{n}=9$, Range: $53.92-82.47 \%$ ) with a mean rate of $75.56 \%$ and a median rate of $79.83 \%$.

Exhibit 30: Proportion of Days Covered (80\% Threshold) - Rate 9: Statins


Exhibit 31: 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 | $10,545,636$ | $14,360,450$ | $73.44 \%$ | $66.97 \%$ | 19 |
| Medicaid | 615,936 | $1,044,656$ | $58.96 \%$ | $60.60 \%$ | 7 |
| Medicare | $8,162,594$ | $10,234,043$ | $79.76 \%$ | $75.56 \%$ | 9 |

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Exhibit 32: Proportion of Days Covered (80\% Threshold) - Rate 9: Statins (Benchmark Data)

| Measure: |  | Rate 9: Statins |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10th | 25th | 50 th | 75 th | 90th | Max |  |
| Commercial | $39.26 \%$ | $57.10 \%$ | $61.87 \%$ | $68.86 \%$ | $73.90 \%$ | $75.67 \%$ | $77.17 \%$ |  |
| Medicaid | $56.71 \%$ | $57.02 \%$ | $57.55 \%$ | $61.24 \%$ | $63.26 \%$ | $64.46 \%$ | $64.66 \%$ |  |
| Medicare | $53.92 \%$ | $66.06 \%$ | $74.48 \%$ | $79.83 \%$ | $80.61 \%$ | $81.68 \%$ | $82.47 \%$ |  |

## Rate 10: Anti-Retroviral Medications

The Commercial aggregate summary rate is $67.73 \%$ ( $n=19$, Range: $45.62-73.24 \%$ ) with a mean rate of $62.9 \%$ and a median rate of $65.43 \%$.

The Medicaid aggregate summary rate is $64.62 \%(n=7$, Range: $39.22-68.54 \%$ ) with a mean rate of $55.71 \%$ and a median rate of $58 \%$.

The Medicare aggregate summary rate is $73.91 \%$ ( $\mathrm{n}=9$, Range: $41.77-82.66 \%$ ) with a mean rate of $69.45 \%$ and a median rate of $71.73 \%$.

Exhibit 33: Proportion of Days Covered (80\% Threshold) - Rate 10: Anti-Retroviral Medications


Exhibit 34: 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 | 591,663 | 873,531 | $67.73 \%$ | $62.90 \%$ | 19 |
| Medicaid | 41,160 | 63,698 | $64.62 \%$ | $55.71 \%$ | 7 |
| Medicare | 620,947 | 840,162 | $73.91 \%$ | $69.45 \%$ | 9 |

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Exhibit 35: Proportion of Days Covered ( $80 \%$ Threshold) - Rate 10: Anti-Retroviral Medications (Benchmark Data)

| Measure: |  | Rate 10: Anti-Retroviral Medications |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10th | 25 th | 50 th | 75 th | 90th | Max |
| Commercial | $45.62 \%$ | $50.56 \%$ | $59.94 \%$ | $65.43 \%$ | $67.47 \%$ | $70.92 \%$ | $73.24 \%$ |
| Medicaid | $39.22 \%$ | $44.85 \%$ | $49.43 \%$ | $58.00 \%$ | $62.67 \%$ | $65.06 \%$ | $68.54 \%$ |
| Medicare | $41.77 \%$ | $59.57 \%$ | $68.14 \%$ | $71.73 \%$ | $73.38 \%$ | $81.99 \%$ | $82.66 \%$ |

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## Measure 2 - 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.

Exhibit 36: Adherence to Non-Warfarin Oral Anticoagulants


## Summary of Findings

The Commercial aggregate summary rate is $78.86 \%$ ( $\mathrm{n}=18$, Range: $51.35-90.62 \%$ ) with a mean rate of $75.05 \%$ and a median rate of $77.94 \%$.

The Medicaid aggregate summary rate is $62.66 \%(n=7$, Range: $55.05-87.84 \%$ ) with a mean rate of $65.53 \%$ and a median rate of $64.31 \%$.

The Medicare aggregate summary rate is $76.48 \%(n=9$, Range: 59.53-88.36\%) with a mean rate of $74.87 \%$ and a median rate of $78.53 \%$.

Exhibit 37: 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 | 447,402 | 567,307 | $78.86 \%$ | $75.05 \%$ | 18 |
| Medicaid | 7,114 | 11,354 | $62.66 \%$ | $65.53 \%$ | 7 |
| Medicare | 325,254 | 425,255 | $76.48 \%$ | $74.87 \%$ | 9 |

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Exhibit 38: Adherence to Non-Warfarin Oral Anticoagulants (Benchmark Data)

| Measure: | Adherence to Non-Warfarin Oral Anticoagulants |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10 th | 25 th | 50 th | 75 th | 90 th | Max |
| Commercial | $51.35 \%$ | $63.32 \%$ | $68.16 \%$ | $77.94 \%$ | $81.47 \%$ | $85.84 \%$ | $90.62 \%$ |
| Medicaid | $55.05 \%$ | $55.15 \%$ | $58.37 \%$ | $64.31 \%$ | $67.38 \%$ | $76.70 \%$ | $87.84 \%$ |
| Medicare | $59.53 \%$ | $61.07 \%$ | $67.68 \%$ | $78.53 \%$ | $79.56 \%$ | $84.92 \%$ | $88.36 \%$ |

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## Measure 3 - 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. This measure is not stratified by book of business.

Exhibit 39: Generic Dispensing Rates


## Summary of Findings

The aggregate summary rate across all books of business is $98.38 \%$ ( $\mathrm{n}=19$, Range: 93.09 - $98.81 \%$ ) with a mean rate of $97.32 \%$ and a median rate of $97.76 \%$.

Exhibit 40: Generic Dispensing Rates (Summary Data)

| Measure: | Generic Dispensing Rates |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Total Numerator | Total Denominator | Aggregate Summary Rate | Mean | Submissions |
| All BOB | $2,261,589,858$ | $2,298,765,952$ | $98.38 \%$ | $97.32 \%$ | 19 |

Exhibit 41: Generic Dispensing Rates (Benchmark Data)

| Measure: | Generic Dispensing Rates |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10 th | 25 th | 50 th | 75 th | 90 th | Max |
| All BOB | $93.09 \%$ | $95.56 \%$ | $97.11 \%$ | $97.76 \%$ | $98.15 \%$ | $98.39 \%$ | $98.81 \%$ |

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## Measure 4 - 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. A lower rate represents better performance.

The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.
Exhibit 42: Drug-Drug Interactions


Note: Lower rate represents better performance

## Summary of Findings

The Commercial aggregate summary rate is $3.2 \%$ ( $n=19$, Range: $3.79-1.02 \%$ ) with a mean rate of $2.49 \%$ and a median rate of $2.33 \%$.

The Medicaid aggregate summary rate is $3.1 \%$ ( $n=7$, Range: $3.8-1.42 \%$ ) with a mean rate of $2.63 \%$ and a median rate of $2.7 \%$.

The Medicare aggregate summary rate is $4.08 \%$ ( $n=9$, Range: 5.09-1.32\%) with a mean rate of $3.48 \%$ and a median rate of $3.34 \%$.

Exhibit 43: Drug-Drug Interactions (Summary Data)

| Measure: | Drug-Drug Interactions |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Total <br> Numerator | Total <br> Denominator | Aggregate <br> Summary Rate | Mean | Submissions |
| Commercial | 237,822 | $7,434,542$ | $3.20 \%$ | $2.49 \%$ | 19 |
| Medicaid | 28,251 | 912,524 | $3.10 \%$ | $2.63 \%$ | 7 |
| Medicare | 294,831 | $7,226,989$ | $4.08 \%$ | $3.48 \%$ | 9 |

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Exhibit 44: Drug-Drug Interactions (Benchmark Data)

| Measure: | Drug-Drug Interactions |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10th | 25th | 50 th | 75 th | 90 th | Max |
| Commercial | $3.79 \%$ | $3.75 \%$ | $3.04 \%$ | $2.33 \%$ | $2.11 \%$ | $1.42 \%$ | $1.02 \%$ |
| Medicaid | $3.80 \%$ | $3.66 \%$ | $3.24 \%$ | $2.70 \%$ | $2.00 \%$ | $1.60 \%$ | $1.42 \%$ |
| Medicare | $5.09 \%$ | $5.00 \%$ | $3.81 \%$ | $3.34 \%$ | $3.14 \%$ | $2.34 \%$ | $1.32 \%$ |

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## Measure 5 - Use of High-Risk Medications in the Elderly (HRM) (HIM2013-21)

## Measure Description

This mandatory 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. A lower rate represents better performance.

The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.
Exhibit 45: Use of High-Risk Medications in the Elderly


Note: Lower rate represents better performance

## Summary of Findings

The Commercial aggregate summary rate is $11.68 \%$ ( $n=19$, Range: $22.74-2.63 \%$ ) with a mean rate of $11.27 \%$ and a median rate of $10.38 \%$.

The Medicaid aggregate summary rate is $7.12 \%$ ( $n=7$, Range: $9.88-0.26 \%$ ) with a mean rate of $4.79 \%$ and a median rate of $4.45 \%$.

The Medicare aggregate summary rate is $9.48 \%$ ( $n=9$, Range: 13.45-1.13\%) with a mean rate of $9.51 \%$ and a median rate of $9.92 \%$.

Exhibit 46: Use of High-Risk Medications in the Elderly (Summary Data)

| Measure: | Use of High-Risk Medications in the Elderly (HRM) |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Total Numerator | Total Denominator | Aggregate Summary Rate | Mean | Submissions |
| Commercial | $1,301,722$ | $11,148,250$ | $11.68 \%$ | $11.27 \%$ | 19 |
| Medicaid | 29,221 | 410,580 | $7.12 \%$ | $4.79 \%$ | 7 |
| Medicare | $1,561,100$ | $16,458,985$ | $9.48 \%$ | $9.51 \%$ | 9 |

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Exhibit 47: Use of High-Risk Medications in the Elderly (Benchmark Data)

| Measure: | Use of High-Risk Medications in the Elderly (HRM) |  |  |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Line of Business | Min | 10 th | 25 th | 50 th | 75 th | 90 th | Max |
| Commercial | $22.74 \%$ | $14.91 \%$ | $13.07 \%$ | $10.38 \%$ | $9.19 \%$ | $7.86 \%$ | $2.63 \%$ |
| Medicaid | $9.88 \%$ | $7.67 \%$ | $6.01 \%$ | $4.45 \%$ | $3.45 \%$ | $1.58 \%$ | $0.26 \%$ |
| Medicare | $13.45 \%$ | $13.41 \%$ | $12.35 \%$ | $9.92 \%$ | $8.44 \%$ | $6.21 \%$ | $1.13 \%$ |

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## Measure 6 - 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. For Part B, a lower rate represents better performance. This measure is not stratified by book of business.

Exhibit 48: Call Center Performance


Note: Lower rate represents better performance for Part B: Call Abandonment.

## Summary of Findings

The aggregate summary rate for Part A: 30-Second Response Rate is $81.86 \%$ ( $n=15$, Range: 69.88 $95.65 \%$ ) with a mean rate of $85.95 \%$ and a median rate of $86.44 \%$.

The aggregate summary rate for Part B: Call Abandonment Rate is $1.63 \%(n=15$, Range: $9.15-0.96 \%)$ with a mean rate of $2.3 \%$ and a median rate of $1.76 \%$.

Three organizations had results for both Parts $A$ and $B$ that were deemed materially inaccurate by the DVV; these data submissions were removed from aggregate statistic calculations.

One organization did not submit data for this measure.

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Exhibit 49: Call Center Performance (Summary Data)

| Measure | Total <br> Numerator | Total <br> Denominator | Aggregate <br> Summary Rate | Mean | Submissions |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Part A: 30-Second Response Rate | $63,355,620$ | $77,396,556$ | $81.86 \%$ | $85.95 \%$ | 15 |
| Part B: Call Abandonment Rate | $1,259,156$ | $77,396,556$ | $1.63 \%$ | $2.30 \%$ | 15 |

Exhibit 50: Call Center Performance (Benchmark Data)

| Measure | Min | 10th | 25th | 50 th | 75th | 90 th | Max |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Part A: 30-Second Response Rate | $69.88 \%$ | $76.17 \%$ | $83.25 \%$ | $86.44 \%$ | $90.72 \%$ | $94.45 \%$ | $95.65 \%$ |
| Part B: Call Abandonment Rate | $9.15 \%$ | $3.26 \%$ | $2.31 \%$ | $1.76 \%$ | $1.34 \%$ | $1.09 \%$ | $0.96 \%$ |

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## Measure 7 - Turnaround Time for Prescriptions (MP2012-08)

## Measure Description

This exploratory 3-part measure assesses the average speed with which the organization fills prescriptions, once the prescription is "clean". 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.

## Summary of Findings

Only one organization submitted data for Part A of this exploratory measure. No organizations reported data for Part B or Part C. Analysis and benchmarks were not produced given there were less than five valid data submissions.

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## Measure 8 - Antipsychotic Use in Children Under 5 Years Old (PH2015-02)

## Measure Description

This exploratory measure assesses percentage of children under age 5 using antipsychotic medications 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. Analysis and benchmarks were not produced given there were less than five valid data submissions.

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## Measure 9 - Use of Benzodiazepine Sedative Hypnotic Medications in the Elderly (PH2015-03)

## Measure Description

This exploratory measure assesses 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. Analysis and benchmarks were not produced given there were less than five valid data submissions.

## Measure 10 - Diabetes Medication Dosing (PH2015-04)

## Measure Description

This exploratory measure assesses percentage patients who were dispensed a dose higher than the daily recommended dose for the following therapeutic categories of oral hypoglycemics: biguanides, sulfonylureas, thiazolidinediones, and DPP-IV inhibitors. Dosing rates for each category are to be reported separately. 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. Analysis and benchmarks were not produced given there were less than five valid data submissions

## Measure 11 - 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 data for this measure. Analysis and benchmarks were not produced given there were less than five valid data submissions.

## Measure 12 - Consumer Experience with Pharmacy Services (PH2015-05)

## Measure Description

This exploratory measure assesses the consumer experience. 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.

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