

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]
- 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.

# 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

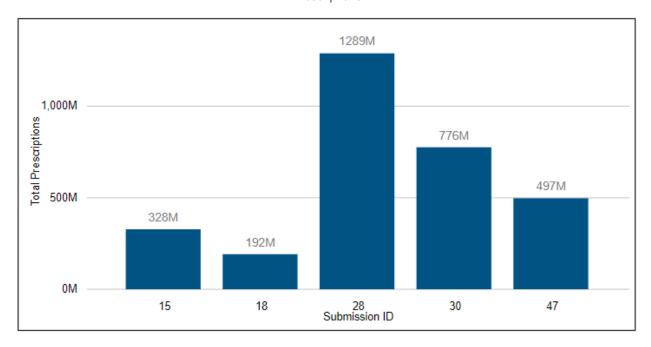
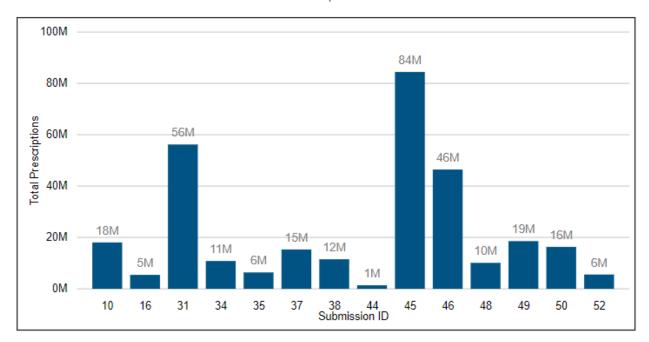


Exhibit 2: Total Number of Prescriptions for Pharmacy Benefit Management Program by Organizations with <100M Prescriptions



#### **Data Validation Overview**

For 2018 reporting, URAC required that organizations have their measure results reviewed by a URAC-approved 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.

# **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.

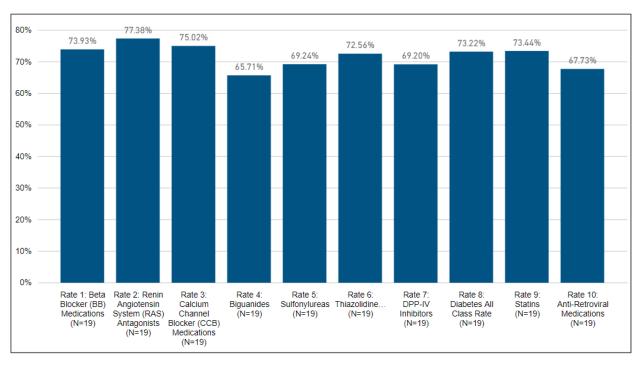


Exhibit 3: Proportion of Days Covered (80% Threshold) - Commercial

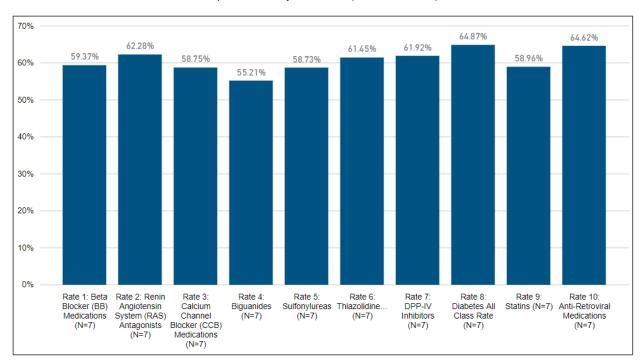
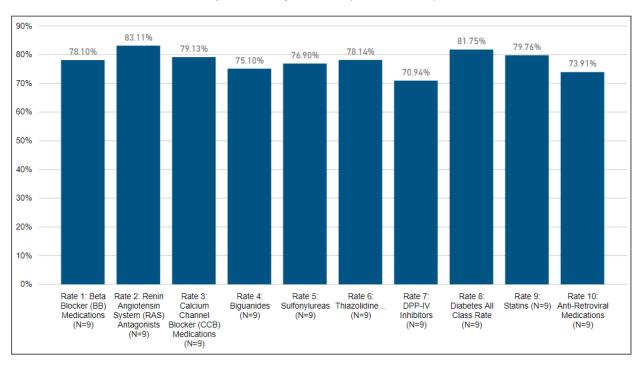


Exhibit 4: Proportion of Days Covered (80% Threshold) - Medicaid





#### **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%.

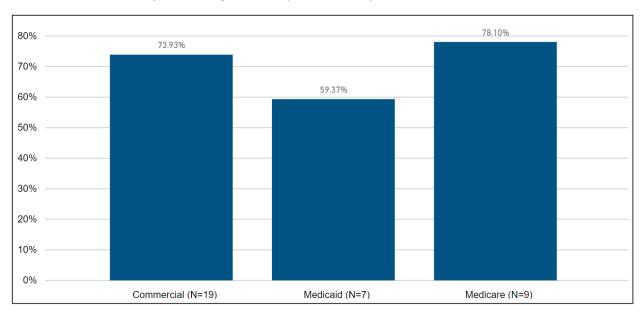


Exhibit 6: Proportion of Days Covered (80% Threshold) - Rate 1: Beta Blocker Medications

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			

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	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

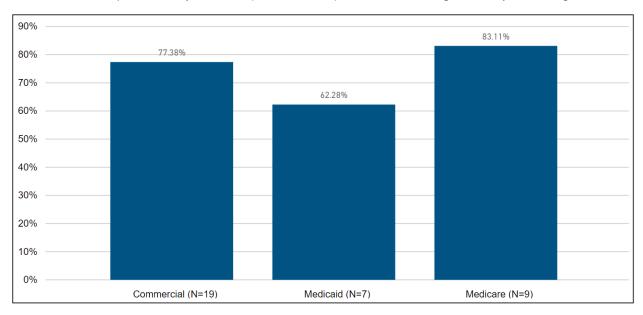


Exhibit 10: Proportion of Days Covered (80% Threshold) – Rate 2: Renin Angiotensin System Antagonists (Summary Data)

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			

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	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% (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% (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

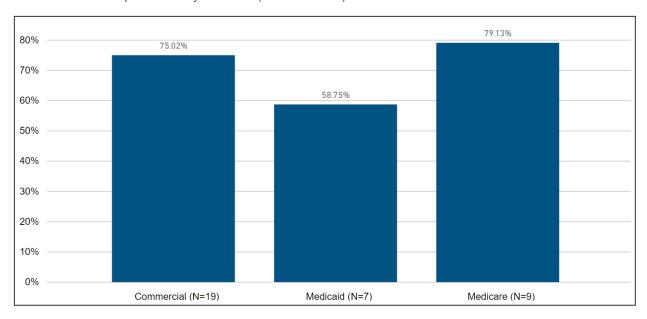


Exhibit 13: Proportion of Days Covered (80% Threshold) – Rate 3: Calcium Channel Blocker Medications (Summary Data)

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			

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	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% (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

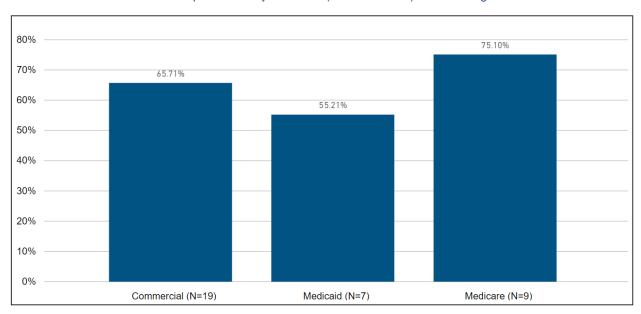


Exhibit 16: Proportion of Days Covered (80% Threshold) - Rate 4: Biguanides

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			

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

Measure:			Rate	4: Biguar	nides		
Line of Business	Min	10th	25th	50th	75th	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

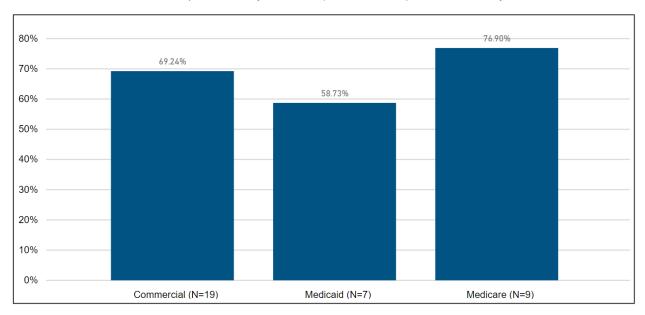


Exhibit 19: Proportion of Days Covered (80% Threshold) - Rate 5: Sulfonylureas (Summary Data)

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			

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

Measure:	Rate 5: Sulfonylureas						
Line of Business	Min	10th	25th	50th	75th	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% (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% (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

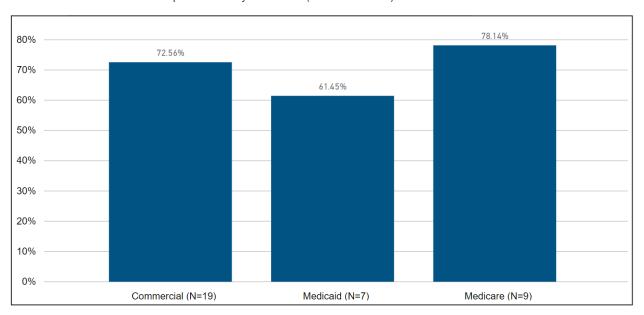


Exhibit 22: Proportion of Days Covered (80% Threshold) - Rate 6: Thiazolidinediones (Summary Data)

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				

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

Measure:	Rate 6: Thiazolidinediones						
Line of Business	Min	10th	25th	50th	75th	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

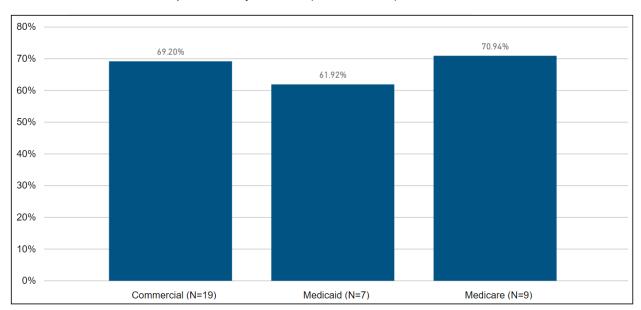


Exhibit 25: Proportion of Days Covered (80% Threshold) - Rate 7: DPP-IV Inhibitors (Summary Data)

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				

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	25th	50th	75th	90th	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% (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

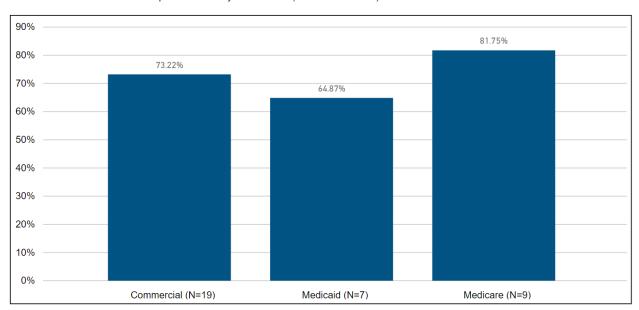


Exhibit 28: Proportion of Days Covered (80% Threshold) - Rate 8: Diabetes All Class Rate (Summary Data)

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				

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	25th	50th	75th	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% (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

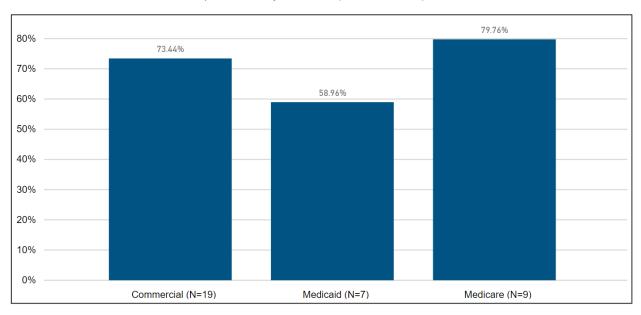


Exhibit 31: Proportion of Days Covered (80% Threshold) - Rate 9: Statins (Summary Data)

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			

Exhibit 32: 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	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% (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

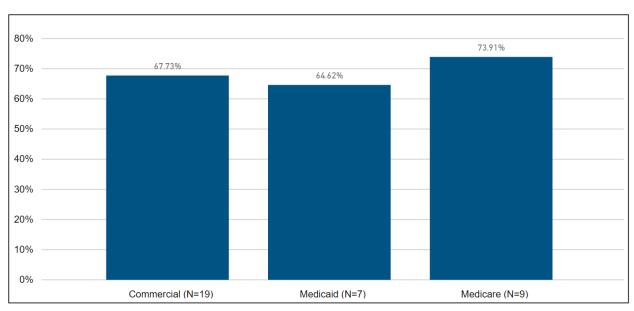


Exhibit 34: Proportion of Days Covered (80% Threshold) - Rate 10: Anti-Retroviral Medications (Summary Data)

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					

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	25th	50th	75th	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%

#### 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.

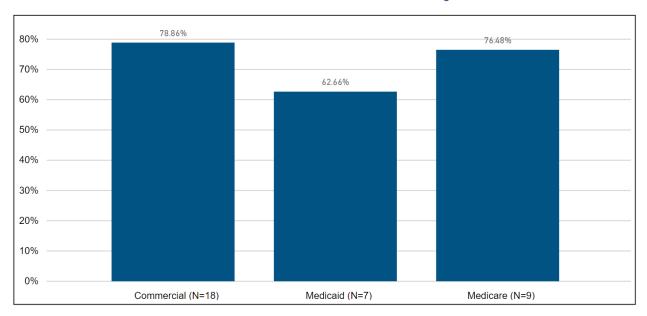


Exhibit 36: Adherence to Non-Warfarin Oral Anticoagulants

### **Summary of Findings**

The Commercial aggregate summary rate is 78.86% (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%.

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					

Exhibit 37: Adherence to Non-Warfarin Oral Anticoagulants (Summary Data)

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

Measure:	Adherence to Non-Warfarin Oral Anticoagulants						
Line of Business	Min 10th 25th 50th 75th 90th						
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%

#### 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.

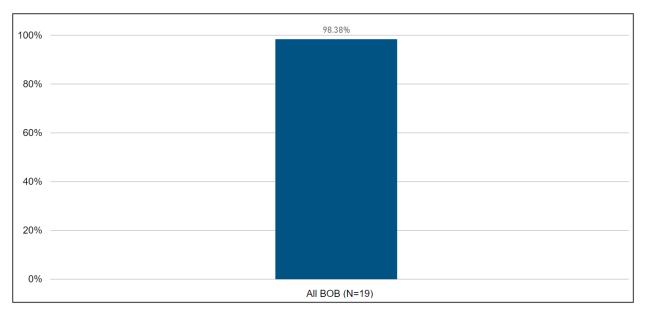


Exhibit 39: Generic Dispensing Rates

## **Summary of Findings**

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

Measure:Generic Dispensing RatesLine of BusinessTotal NumeratorTotal DenominatorAggregate Summary RateMeanSubmissionsAll BOB2,261,589,8582,298,765,95298.38%97.32%19

Exhibit 40: Generic Dispensing Rates (Summary Data)

Exhibit 41: Generic Dispensing Rates (Benchmark Data)

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

#### **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.

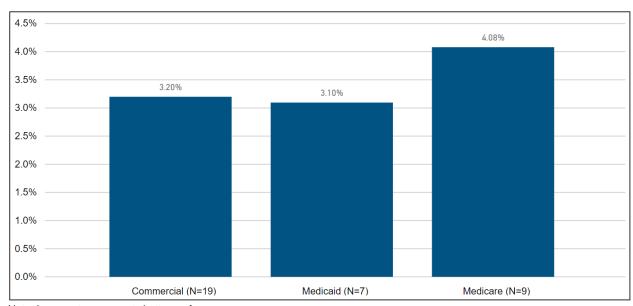


Exhibit 42: Drug-Drug Interactions

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%.

Measure:		Drug-Drug Interactions								
Line of Business	Total Numerator	Total Aggregate Denominator 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					

Exhibit 43: Drug-Drug Interactions (Summary Data)

Exhibit 44: Drug-Drug Interactions (Benchmark Data)

Measure:		Drug-Drug Interactions							
Line of Business	Min	10th	25th	50th	75th	90th	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%		

#### 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.

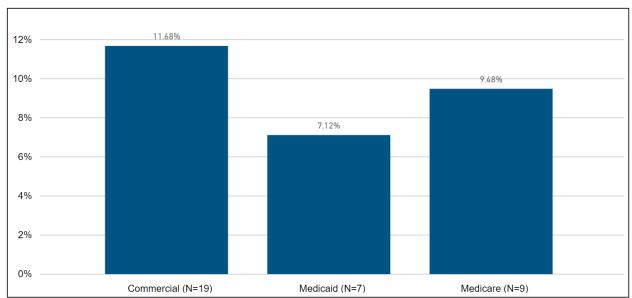


Exhibit 45: Use of High-Risk Medications in the Elderly

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%.

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					

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

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         10th         25th         50th         75th         90th         M							
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%	

#### 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.

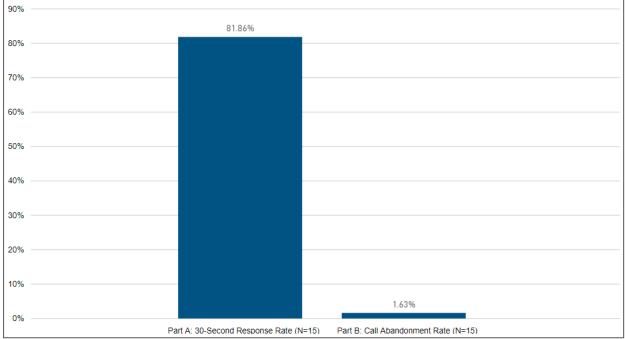


Exhibit 48: Call Center Performance

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.

#### Exhibit 49: Call Center Performance (Summary Data)

Measure	Total Numerator	Total Denominator	Aggregate 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	50th	75th	90th	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%

# 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.

# 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**

# 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**

#### 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**

#### 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**

# **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.