TWO PQA-ENDORSED HEALTH PLAN PERFORMANCE MEASURES RECOMMENDED FOR RETIREMENT

- *Drug-Drug Interactions (DDI)*
- *Use of High-Risk Medications in the Elderly (HRM)*

Background

As a measure Steward, PQA routinely assesses endorsed measures for maintenance updates. During the maintenance review process, measures occasionally are identified for retirement consideration.

1. Drug-Drug Interactions (DDI)

DESCRIPTION: The percentage of individuals who received a prescription for a target medication during the measurement year and who were dispensed a concurrent prescription for a precipitant medication. A lower rate indicates better performance.

The denominator includes individuals with a prescription claim for a target medication during the measurement year.

The numerator includes the number of individuals from the denominator who were dispensed a concurrent precipitant medication during the measurement period.

INTENDED USE: Performance measurement for health plans.

DATA SOURCE: Prescription claims, medical claims.

KEY POINTS:

- DDI was PQA-endorsed in 2008 and last updated in 2017.

- CMS is retiring the DDI measure from the 2022 Medicare Part D Display Page. Measure rates from this program are so low and unvarying (<7% across MAPD and PDP contracts; SD = 3% [2019 data]) that meaningful distinctions and improvements in performance can no longer be made.

- The last measure update occurred in 2017 with a large technical expert panel and took one year to complete, which is significantly more resource intensive than the typical PQA measure maintenance process. Retirement of this measure would allow for resources to be allocated to areas with more meaningful impact.

- The QMEP voted (24 yes; 1 no; 1 abstain) to recommend the DDI measure for PQA membership retirement consideration.

- If retired by PQA membership, notice will be sent to users of the measure. The measure will be maintained in an appendix of the PQA Measure Manual for two years to mitigate disruption due to the measure's retirement. The retirement will be documented in the PQA Measure Concept Inventory.

2. Use of High-Risk Medications in the Elderly (HRM)

DESCRIPTION: The percentage of individuals ≥65 years of age who received ≥2 prescription claims for a high-risk medication during the measurement year. A lower rate indicates better performance.

The denominator includes individuals ≥65 years of age.

The numerator includes individuals from the denominator with 2 or more prescription claims on different dates of service for the same high-risk medication during the measurement year.

INTENDED USE: Performance measurement for health plans.

DATA SOURCE: Prescription claims, medical claims.

KEY POINTS:

- HRM was PQA-endorsed in 2008 and last updated in 2017.

- CMS retired the HRM measure from the Medicare Part D Display Page in 2021.

  o The final measure rate was 19% across MAPD and PDP contracts; SD = 6% (2020 Medicare Part D Display using 2018 data).

- Measure changes have been implemented for the HRM-related HEDIS measure, which would increase the level of effort and resources needed to maintain the PQA HRM measure in alignment with HEDIS. Additional testing would also be needed to confirm the scientific acceptability of the changes to the measure.

- Retiring the measure would allow PQA to allocate resources to newer medication safety measures with greater opportunity for meaningful impact (e.g., POLY-CNS and POLY-ACH, which capture many of the same components of HRM).

- The QMEP voted (25 yes; 0 no; 0 abstain) to recommend the HRM measure for PQA membership retirement consideration.

- If retired by PQA membership, notice will be sent to users of the measure. The measure will be maintained in an appendix of the PQA Measure Manual for two years to mitigate disruption due to the measure's retirement. The retirement will be documented in the PQA Measure Concept Inventory.