

Quality STARS Medication Adherence

Measure Description

The Medication Adherence (ADH) measure calculates the percentage of Medicare Part D beneficiaries, 18 years and older, who adhere to medication regimens for diabetes, hypertension, or cholesterol medication (a statin drug) who fill their prescriptions often enough to cover 80 percent or more of the time they are supposed to be taking the medication. The three measures are:

- **Medication Adherence for Diabetes Medication:** (Biguanides (BG), Sulfonylureas (SFU), Thiazolidinediones (TZD), Dipeptidyl Peptidase-4 (DPP-4) inhibitors, Glucose-dependent Insulinotropic Polypeptide and Glucagon-Like Peptide-1 (GIP/GLP-1) receptor agonists, Meglitinides (MEG), and Sodium-Glucose Cotransporter 2 (SGLT2) inhibitors).
- **Medication Adherence for Hypertension:** (Renin-Angiotensin System (RAS) antagonists, defined as Angiotensin Converting Enzyme (ACE) inhibitors, Angiotensin II receptor blockers (ARBs), or Direct Renin inhibitors. Also known as ACEI/ARB/Direct Renin inhibitor or ACEI/ARB/Direct Renin inhibitor combination products).
- **Medication Adherence for Cholesterol Statins:** Please visit www.ephmedicare.com to view the formulary.

Measurement Period

Calendar Year (January 1 – December 31)

Treatment Period

The beneficiary's treatment period begins on the Index Prescription Start Date (IPSD) and ends on the last day of enrollment through the measurement year, death, or end of the measurement year, whichever comes first. The treatment period should last 91 days.

Tips for Providers

- **Give clear, bilingual instructions** – Provide short, easy to follow prescription directions, including English and Spanish directions when needed.
- **Promote consistent dosing** – Tell patients to take medications at the same time every day and recommend using a pillbox or calendar to support adherence.
- **Schedule follow-up before they leave** – For any new medication, schedule a follow up or a telehealth visit within 30 days while the patient is still in office. Check for side effects to discontinue or change medication.
- **Simplify the regimen** – Adjust timing, frequency, or dosage when appropriate, and offer a 100-day supply to reduce refill barriers.
- **Explain adherence clearly** – Review the benefits of taking medications as prescribed and make sure patients understand the risks of missed doses.
- **Offer recommendations for adherence** – Using cell phone apps, medication reminder alerts, pharmacy delivery, mail order prescriptions, enrolling in auto-refill programs.
- **Use Z-Codes** – Z codes document non-disease factors including Social Determinants of Health (SDOH), personal history, medication-related issues, and other circumstances that influence clinical decision-making, treatment, and healthcare outcomes