



Medication Adherence for Hypertension (MAH) 2024

Measure Description

Percentage of patients 18 years of age and older with a blood pressure prescription who fill their prescription at least 80% or more of the time during the treatment period ending in 2024.

These claims can be either for the same medication or other medications in the same drug class.

Prescriptions include ACE inhibitors (angiotensin-converting enzymes), ARBs (angiotensin receptor blockers) and DRIs (direct renin inhibitors). Patients fall into the MAH denominator when there are two pharmacy claims for their blood pressure medication(s) on unique dates of service during 2023.

Required Exclusions

- Hospice or hospice services any time during 2024
- End stage renal disease (ESRD) diagnosis during 2024
- One or more prescriptions for sacubitril/valsartan during the treatment period

Actions

- **Prescription fills are captured via pharmacy claim only.** Only prescriptions filled with a patient's health plan ID card can be used to measure a patient's adherence to their medication.
- Consider writing 90-100 day prescriptions with 3 refills to help improve medication adherence when clinically appropriate
- Ensure the second refill date is on time. The patient will fall into the denominator with this fill, but the treatment begin date will be the date of the 1st fill.
- Assess, document and address clinical barriers for non-adherence with the patient at every visit
- Work medication adherence reports by making outreach to the patients who are coming up due or past due for a refill
- Encourage patients to fill medications using a mail order service, if available
- When clinically appropriate, prescribe low cost generic medications to reduce patient out of pocket overall costs
- Avoid using samples or discount medication programs during the middle of the treatment period. If samples or programs are going to be used, please continue this action through the end of the measurement year.
- Write a discontinuation order for previous scripts when medications are discontinued or doses are changed. The intent of this action is to notify the pharmacy of the discontinuation of the medication.



From Volume
To Value,
With Care.



*The medication adherence measure is adapted from the Medication Adherence Proportion of Days Covered measure that was developed and endorsed by the Pharmacy Quality Alliance (PQA). CMS uses Medicare data to generate the rates for the medication adherence measures.

Resources

Pharmacy Quality Alliance (PQA) 2023—PQA typically releases new measures specifications from Feb-March 2024. This tip sheet will be updated upon release of those specifications.

QUESTIONS? Please reach out to **EMAIL:** carepartnersquality@privahealth.com