Quality ID #438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease
– National Quality Strategy Domain: Effective Clinical Care
– Meaningful Measure Area: Management of Chronic Conditions

2019 COLLECTION TYPE:
MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:
Process

DESCRIPTION:
Percentage of the following patients - all considered at high risk of cardiovascular events - who were prescribed or were on statin therapy during the measurement period:

- Adults aged ≥ 21 years who were previously diagnosed with or currently have an active diagnosis of clinical atherosclerotic cardiovascular disease (ASCVD); OR
- Adults aged ≥ 21 years who have ever had a fasting or direct low-density lipoprotein cholesterol (LDL-C) level ≥ 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial or pure hypercholesterolemia; OR
- Adults aged 40-75 years with a diagnosis of diabetes with a fasting or direct LDL-C level of 70-189 mg/dL

INSTRUCTIONS:
This measure is to be submitted once per performance period for patients seen during the performance period. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who provide the services in the measure-specific denominator coding.

Measure Submission Type:
Measure data may be submitted by individual MIPS eligible clinicians, groups, or third-party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third-party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third-party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

THERE ARE THREE SUBMISSION CRITERIA FOR THIS MEASURE**:

1) Patients aged ≥ 21 years at the beginning of the measurement period with clinical ASCVD diagnosis

OR

2) Patients aged ≥ 21 years at the beginning of the measurement period who have ever had a fasting or direct laboratory result of LDL-C ≥ 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial or pure hypercholesterolemia

OR

3) Patients aged 40 to 75 years at the beginning of the measurement period with Type 1 or Type 2 diabetes and with an LDL-C result of 70–189 mg/dL recorded as the highest fasting or direct laboratory test result in the measurement year or during the two years prior to the beginning of the measurement period
**All patients who meet one or more of the following criteria indicated above would be considered at high risk for cardiovascular events under the ACC/AHA guidelines. When submitting this measure, determine if the patient meets denominator eligibility in order of each risk category.**

**DENOMINATOR (SUBMISSION CRITERIA 1):**
Patients aged ≥ 21 years at the beginning of the measurement period with clinical ASCVD diagnosis

**Definitions:**
Clinical Atherosclerotic Cardiovascular Disease (ASCVD) includes:
- Acute Coronary Syndromes
- History of Myocardial Infarction
- Stable or Unstable Angina
- Coronary or other Arterial Revascularization
- Stroke or Transient Ischemic Attack (TIA)
- Peripheral Arterial Disease of Atherosclerotic Origin

Lipoprotein Density Cholesterol (LDL-C) result - A fasting or direct LDL-C laboratory test performed and test result documented in the medical record.

**DENOMINATOR NOTE:** *Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.

Denominator Exclusions should be active during the measurement period.

**DENOMINATOR CRITERIA: (Eligible Cases):**
Patients aged ≥ 21 years at the beginning of the measurement period

AND


WITHOUT

Telehealth Modifier: GQ, GT, 95, POS 02

AND

Previously diagnosed or have an active diagnosis of Clinical ASCVD: G9662
AND NOT

**DENOMINATOR EXCLUSIONS:**
Patients who have a diagnosis of pregnancy: G9778

OR

Patients who are breastfeeding: G9779

OR

Patients who have a diagnosis of rhabdomyolysis: G9780

**NUMERATOR (SUBMISSION CRITERIA 1):**
Patients who are actively using or who receive an order (prescription) for statin therapy at any point during the measurement period

**Definitions:**
Statin therapy - Administration of one or more of a group of medications that are used to lower plasma lipoprotein levels in the treatment of hyperlipoproteinemia. Statin Medication Therapy List (NOTE: List does NOT include dosage) is included in the clinical recommendations.
Denominator Exceptions

Active Liver or Hepatic Disease or Insufficiency – The following codes are included in the Denominator Exception (G9781) to define liver disease: B15.0, B15.9, B16.0, B16.1, B16.2, B16.9, B17.0, B17.10, B17.11, B17.2, B17.8, B17.9, B18.0, B18.1, B18.2, B18.8, B18.9, B19.0, B19.10, B19.11, B19.20, B19.21, B19.9, K70.0, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K71.0, K71.10, K71.11, K71.2, K71.3, K71.4, K71.50, K71.51, K71.6, K71.7, K71.8, K71.9, K72.00, K72.01, K72.10, K72.11, K72.90, K72.91, K73.0, K73.1, K73.2, K73.8, K73.9, K74.0, K74.1, K74.2, K74.3, K74.4, K74.5, K74.60, K74.69, K75.4, O98.411, O98.412, O98.413, O98.419

End Stage Renal Disease – N18.6

Some patients may not be appropriate to prescribe or use statin therapy (see exceptions and exclusions below for the complete list).

"Statin intolerance is the inability to tolerate a dose of statin required to reduce a person's CV risk sufficiently from their baseline risk and could result from different statin related side effects including: muscle symptoms, headache, sleep disorders, dyspepsia, nausea, rash, alopecia, erectile dysfunction, gynecomastia, and/or arthritis" (Banach, et al., 2015).

Patients that experience symptoms such as these may prefer not to take or continue statin therapy and therefore may be exempt from the denominator.

NUMERATOR NOTE: In order to meet the measure, current statin therapy use must be documented in the patient’s current medication list or ordered during the measurement period. Only statin therapy meets the measure Numerator criteria (NOT other cholesterol lowering medications). Prescription or order does NOT need to be linked to an encounter or visit; may be called to the pharmacy. Statin medication “samples” provided to patients can be documented as “current statin therapy” if documented in the medication list in health/medical record. Patients who meet the denominator criteria for inclusion but are not prescribed or using statin therapy will NOT meet performance for this measure. Adherence to statin therapy is not calculated in this measure. Denominator Exceptions should be active during the measurement period.

Numerator Options:

Performance Met: Patients who are currently statin therapy users or received an order (prescription) for statin therapy (G9664) OR

Denominator Exception: Documentation of medical reason(s) for not currently being a statin therapy user or receive an order (prescription) for statin therapy (e.g., patient with adverse effect, allergy or intolerance to statin medication therapy, patients who are receiving palliative care, patients with active liver disease or hepatic disease or insufficiency, and patients with end stage renal disease (ESRD) (G9781) OR

Performance Not Met: Patients who are not currently statin therapy users or did not receive an order (prescription) for statin therapy (G9665)

DENOMINATOR (SUBMISSION CRITERIA 2):
Patients aged ≥ 21 years at the beginning of the measurement period who have ever had a fasting or direct laboratory result of LDL-C ≥ 190 mg/dL or were previously diagnosed with or currently have an active diagnosis of familial or pure hypercholesterolemia

**Definition:**
Lipoprotein Density Cholesterol (LDL-C) result - A fasting or direct LDL-C laboratory test performed and test result documented in the medical record.

**DENOMINATOR NOTE:** *Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQM.

Denominator Exclusions should be active during the measurement period.

**DENOMINATOR CRITERIA: (Eligible Cases):**
Patient aged ≥ 21 years at the beginning of the measurement period
AND
WITHOUT
Telehealth Modifier: GQ, GT, 95, POS 02
AND
Any fasting or direct LDL-C laboratory test result ≥ 190 mg/dL: G9663
OR
History of or active diagnosis of familial or pure hypercholesterolemia: G9782
AND NOT
DENOMINATOR EXCLUSIONS:
Patients who have a diagnosis of pregnancy: G9778
OR
Patients who are breastfeeding: G9779
OR
Patients who have a diagnosis of rhabdomyolysis: G9780

**NUMERATOR (SUBMISSION CRITERIA 2):**
Patients who are actively using or who receive an order (prescription) for statin therapy at any point during the measurement period

**Definitions:**
Statin therapy - Administration of one or more of a group of medications that are used to lower plasma lipoprotein levels in the treatment of hyperlipoproteinemia.
Statin Medication Therapy List (NOTE: List does NOT include dosage) is included in the clinical recommendations.

**Denominator Exceptions**
Active Liver or Hepatic Disease or Insufficiency – The following codes are included in the Denominator Exception (G9781) to define liver disease: B15.0, B15.9, B16.0, B16.1, B16.2, B16.9, B17.0, B17.10, B17.11, B17.2, B17.8, B17.9, B18.0, B18.1, B18.2, B18.8, B18.9, B19.0, B19.10, B19.11, B19.20, B19.21, B19.9, K70.0, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K71.0, K71.10, K71.11, K71.2, K71.3, K71.4, K71.50, K71.51, K71.6, K71.7, K71.8, K71.9, K72.00, K72.01, K72.10, K72.11, K72.90, K72.91, K73.0, K73.1, K73.2, K73.8, K73.9, K74.0, K74.1, K74.2, K74.3, K74.4, K74.5, K74.60, K74.69, K75.4, O98.411, O98.412, O98.413, O98.419
End Stage Renal Disease – N18.6

Some patients may not be appropriate to prescribe or use statin therapy (see exceptions and exclusions below for a complete list).

"Statin intolerance is the inability to tolerate a dose of statin required to reduce a person's CV risk sufficiently from their baseline risk and could result from different statin related side effects including: muscle symptoms, headache, sleep disorders, dyspepsia, nausea, rash, alopecia, erectile dysfunction, gynecomastia, and/or arthritis" (Banach, et al., 2015).

Patients that experience symptoms such as these may prefer not to take or continue statin therapy and therefore may be exempt from the denominator.

**NUMERATOR NOTE:** In order to meet the measure, current statin therapy use must be documented in the patient's current medication list or ordered during the measurement period. Only statin therapy meets the measure Numerator criteria (NOT other cholesterol lowering medications). Prescription or order does NOT need to be linked to an encounter or visit; may be called to the pharmacy. Statin medication “samples” provided to patients can be documented as “current statin therapy” if documented in the medication list in health/medical record. Patients who meet the denominator criteria for inclusion but are not prescribed or using statin therapy will NOT meet performance for this measure. Adherence to statin therapy is not calculated in this measure. Denominator Exceptions should be active during the measurement period.

**Numerator Options:**

**Performance Met:**

Patients who are currently statin therapy users or received an order (prescription) for statin therapy (G9664)

**OR**

**Denominator Exception:**

Documentation of medical reason(s) for not currently being a statin therapy user or receive an order (prescription) for statin therapy (e.g., patient with adverse effect, allergy or intolerance to statin medication therapy, patients who are receiving palliative care, patients with active liver disease or hepatic disease or insufficiency, and patients with end stage renal disease (ESRD) (G9781)

**OR**

**Performance Not Met:**

Patients who are not currently statin therapy users or did not receive an order (prescription) for statin therapy (G9665)

**DENOMINATOR (SUBMISSION CRITERIA 3):**

Patients aged 40 to 75 years at the beginning of the measurement period with Type 1 or Type 2 diabetes and with a LDL-C result of 70–189 mg/dL recorded as the highest fasting or direct laboratory test result in the measurement year or during the two years prior to the beginning of the measurement period

**Definition:**

Lipoprotein Density Cholesterol (LDL-C) result - A fasting or direct LDL-C laboratory test performed and test result documented in the medical record.

**DENOMINATOR NOTE:** *Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS CQMs.*
Denominator Exclusions should be active during the measurement period.

DENOMINATOR CRITERIA: (Eligible Cases):
Patients aged 40 through 75 years at the beginning of the measurement period
AND
AND
WITHOUT
Telehealth Modifier: GQ, GT, 95, POS 02
AND
The highest fasting or direct LDL-C laboratory test result of 70 –189 mg/dL in the measurement period or two years prior to the beginning of the measurement period: G9666
AND NOT
DENOMINATOR EXCLUSIONS:
Patients who have a diagnosis of pregnancy: G9778
OR
Patients who are breastfeeding: G9779
OR
Patients who have a diagnosis of rhabdomyolysis: G9780

NUMERATOR (SUBMISSION CRITERIA 3):
Patients who are actively using or who receive an order (prescription) for statin therapy at any point during the measurement period.

**Definitions:**

**Statin therapy** - Administration of one or more of a group of medications that are used to lower plasma lipoprotein levels in the treatment of hyperlipoproteinemia.

Statin Medication Therapy List (NOTE: List does NOT include dosage) is included in the clinical recommendations.

**Denominator Exceptions**

**Active Liver or Hepatic Disease or Insufficiency** – The following codes are included in the Denominator Exception (G9781) to define liver disease: B15.0, B15.9, B16.0, B16.1, B16.2, B16.9, B17.0, B17.10, B17.11, B17.2, B17.8, B17.9, B18.0, B18.1, B18.2, B18.8, B18.9, B19.0, B19.10, B19.11, B19.20, B19.21, B19.9, K70.0, K70.10, K70.11, K70.2, K70.30, K70.31, K70.40, K70.41, K70.9, K71.0, K71.10, K71.11, K71.2, K71.3, K71.4, K71.50, K71.51, K71.6, K71.7, K71.8, K71.9, K72.00, K72.01, K72.10, K72.11, K72.90, K72.91, K73.0, K73.1, K73.2, K73.8, K73.9, K74.0, K74.1, K74.2, K74.3, K74.4, K74.5, K74.60, K74.69, K75.4, O98.411, O98.412, O98.413, O98.419

**End Stage Renal Disease** – N18.6

Some patients may not be appropriate to prescribe or use statin therapy (see exceptions and exclusions below for the complete list).

"Statin intolerance is the inability to tolerate a dose of statin required to reduce a person’s CV risk sufficiently from their baseline risk and could result from different statin related side effects including: muscle symptoms, headache, sleep disorders, dyspepsia, nausea, rash, alopecia, erectile dysfunction, gynecomastia, and/or arthritis" (Banach, et al., 2015).

Patients that experience symptoms such as these may prefer not to take or continue statin therapy and therefore may be exempt from the denominator.

**NUMERATOR NOTE:** In order to meet the measure, current statin therapy use must be documented in the patient’s current medication list or ordered during the measurement period. Only statin therapy meets the measure Numerator criteria (NOT other cholesterol lowering medications). Prescription or order does NOT need to be linked to an encounter or visit; may be called to the pharmacy. Statin medication “samples” provided to patients can be documented as “current statin therapy” if documented in the medication list in health/medical record. Patients who meet the denominator criteria for inclusion but are not prescribed or using statin therapy will NOT meet performance for this measure. Adherence to statin therapy is not calculated in this measure. Denominator Exceptions should be active during the measurement period.

**Numerator Options:**

**Performance Met:**

Patients who are currently statin therapy users or received an order (prescription) for statin therapy (G9664)

**OR**

**Denominator Exception:**

Documentation of medical reason(s) for not currently being a statin therapy user or receive an order (prescription) for statin therapy (e.g., patient with adverse effect, allergy or intolerance to statin medication therapy, patients who are receiving palliative care, patients with active liver disease or hepatic disease or insufficiency, patients with end stage renal disease (ESRD) (G9781)
Denominator Exception:
Documentation of patients with diabetes who have a most recent fasting or direct LDL-C laboratory test result < 70 mg/dL and are not taking statin therapy (G9783)

OR

Performance Not Met:
Patients who are not currently statin therapy users or did not receive an order (prescription) for statin therapy (G9665)

RATIONALE:
"Cardiovascular disease (CVD) is the leading cause of death in the United States, causing approximately 1 of every 7 deaths in the United States in 2011. In 2011, stroke caused approximately 1 of every 20 deaths in the United States and the estimated annual costs for CVD and stroke were $320.1 billion, including $195.6 billion in direct costs (hospital services, physicians and other professionals, prescribed medications, home health care, and other medical durables) and $124.5 billion in indirect costs from lost future productivity (cardiovascular and stroke premature deaths). CVD costs more than any other diagnostic group" (Mozaffarian et al., 2015).

Data collected between 2009 and 2012 indicates that more than 100 million U.S. adults, 20 years or older had total cholesterol levels equal to 200 mg/dL or more, while almost 31 million had levels 240 mg/dL or more (Mozaffarian et al., 2015). Elevated blood cholesterol is a major risk factor for CVD and statin therapy has been associated with a reduced risk of CVD. Numerous randomized trials have demonstrated that treatment with a statin reduces LDL-C, and reduces the risk of major cardiovascular events by approximately 20 percent (Ference, 2015).

In 2013, guidelines on the treatment of blood cholesterol to reduce atherosclerotic cardiovascular risk in adults were published (see Stone et al., 2013 ACC/AHA Guideline on the Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk in Adults: a Report of the American College of Cardiology [ACC]/American Heart Association [AHA] Task Force on Practice Guidelines). This guideline was published by an Expert Panel, which synthesized evidence from randomized controlled trials to identify people most likely to benefit from cholesterol-lowering therapy. The ACC/AHA Guideline recommendations are intended to provide a strong evidence-based foundation for the treatment of blood cholesterol for the primary and secondary prevention and treatment of Atherosclerotic Cardiovascular Disease (ASCVD) in adult men and women (21 years of age or older). The document concludes the addition of statin therapy reduces the risk of ASCVD among high-risk individuals, defined as follows: individuals with clinical ASCVD, with LDL-C ≥ 190 mg/dL, or with diabetes and LDL-C 70-189 mg/dL (Stone et al., 2013).

However, one study that surveyed U.S. cardiovascular practices participating in the PINNACLE registry, found that 32.4 percent of patients with an indication for statins under the 2013 ACC/AHA cholesterol guidelines were not currently receiving them (Maddox et al., 2014). Although, systematic evidence review found that statins are safe drugs with low incidence of conditions or diseases attributable to statin use (Law et al., 2006). Overall, the Statin Safety Expert Panel that participated in an NLA Statin Safety Task Force meeting in October 2013 reaffirms the general safety of statin therapy. The panel members concluded that for most patients requiring statin therapy, the potential benefits of statin therapy outweigh the potential risks. In general terms, the benefits of statins to prevent non-fatal myocardial infarction, revascularization, stroke, and CVD mortality, far outweighs any potential harm related to the drug (Jacobson, 2014).

CLINICAL RECOMMENDATION STATEMENTS:
This electronic clinical quality measure is intended to align with the 2013 ACC/AHA Guideline on the Treatment of Blood Cholesterol (Stone et al. 2013), which indicates the use of statins as the first line of cholesterol-lowering medication therapy to lower the risk of ASCVD among at-risk populations.

Recommendations for Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk in Adults—Statin Treatment:
Secondary Prevention:
1. High-intensity statin therapy should be initiated or continued as first-line therapy in women and men ≤ 75 years of age who have clinical ASCVD, unless contraindicated. (Level of Evidence A), (ACC/AHA, 2013)

2. In individuals with clinical ASCVD in whom high-intensity statin therapy would otherwise be used, when high-intensity statin therapy is contraindicated or when characteristics predisposing to statin-associated adverse effects are present, moderate-intensity statin should be used as the second option if tolerated. (Level of Evidence A), (ACC/AHA, 2013)

Primary Prevention in Individuals ≥ 21 Years of Age With LDL-C ≥ 190 mg/dL:
- Adults ≥ 21 years of age with primary LDL-C ≥ 190 mg/dL should be treated with statin therapy (10-year ASCVD risk estimation is not required). (Level of Evidence B), (ACC/AHA, 2013)

Primary Prevention in Individuals With Diabetes and LDL-C 70-189 mg/dL:
- Moderate-intensity statin therapy should be initiated or continued for adults 40-75 years of age with diabetes. (Level of Evidence A), (ACC/AHA, 2013)

Intensity of statin therapy in primary and secondary prevention:
The expert panel of the 2013 ACC/AHA Guidelines (Stone et al., 2013) defines recommended intensity of statin therapy on the basis of the average expected LDL-C response to specific statin and dose. Although intensity of statin therapy is important in managing cholesterol, this measure assesses prescription of ANY statin therapy, irrespective of intensity. Assessment of appropriate intensity and dosage documentation added too much complexity to allow inclusion of statin therapy intensity in the measure at this time.

Table 1 - Statin Medication Therapy List (NOTE: List does NOT include dosage):

<table>
<thead>
<tr>
<th>Generic Name</th>
<th>Brand or Trade Name</th>
<th>Medication Type, If Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Atorvastatin</td>
<td>Lipitor</td>
<td>Statin</td>
</tr>
<tr>
<td>Fluvastatin</td>
<td>Lescol XL or Lescol</td>
<td>Statin</td>
</tr>
<tr>
<td>Lovastatin (Mevinolin)</td>
<td>Mevacor or Altoprev</td>
<td>Statin</td>
</tr>
<tr>
<td>Pitavastatin</td>
<td>Livalo</td>
<td>Statin</td>
</tr>
<tr>
<td>Pravastatin Sodium</td>
<td>Pravachol</td>
<td>Statin</td>
</tr>
<tr>
<td>Rosuvastatin Calcium</td>
<td>Crestor</td>
<td>Statin</td>
</tr>
<tr>
<td>Simvastatin</td>
<td>Zocor</td>
<td>Statin</td>
</tr>
<tr>
<td>Amlodipine Besylate/Atorvastatin</td>
<td>Caduet</td>
<td>Combination</td>
</tr>
<tr>
<td>Ezetimibe/Simvastatin</td>
<td>Vytorin</td>
<td>Combination</td>
</tr>
</tbody>
</table>

COPYRIGHT:
Limited proprietary coding is contained in the measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. Quality Insights, Inc. disclaims all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.


LOINC® copyright 2004-2017 Regenstrief Institute, Inc. This material contains SNOMED Clinical Terms (SNOMED CT®) copyright 2004-2017 [International Health Terminology Standards Development Organisation. All Rights Reserved.

THE MEASURES AND SPECIFICATIONS ARE PROVIDED “AS IS” WITHOUT WARRANTY OF ANY KIND
2019 Clinical Quality Measure Flow for Quality ID #438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease
Submission Criteria One

Start

Denominator

Patient Age at the Beginning of the Measurement Period: 21 Years

No

Encounter as Listed in the Denominator: (1/1/2019 thru 12/31/2019)

No

Telehealth Modifier: GO, CT, 96, POS 02

No

Previously Diagnosed or have an Active Diagnosis of Clinical ASCVD G9062 or equivalent

No

Denominator Exclusions

Patients Who Have a Diagnosis of Pregnancy G9778 or equivalent

No

Patients Who are Breastfeeding G9778 or equivalent

No

Patients Who have a Diagnosis of Rheumatology G9790 or equivalent

No

Not Included in Eligible Population/Denominator

Yes

Numerator

Patients Who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy

Yes

Data Completeness Met + Performance Met G9664 or equivalent (40 patients)

No

Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy

No

Data Completeness Met + Denominator Exception G9781 or equivalent (10 patients)

Yes

Patients Who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy

No

Data Completeness Met + Performance Not Met G9665 or equivalent (20 patients)

Yes

Data Completeness Not Met (80 patients)

Include in Eligible Population/Denominator (80 patients)

*See the posted Measure Specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Patient-process
2019 Clinical Quality Measure Flow for Quality ID #438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

Submission Criteria Two

Start

Denominator

Patient Age at the Beginning of the Measurement Period ≥ 21 Years

No

Encounter as Listed in the Denominator (1/1/2019 thru 12/31/2019)

Yes

Not Included in Eligible Population/Denominator

No

Telehealth Modifier: GQ, GT, GS, PS00 02

Yes

Active or History of Familial or Pure Hypercholesterolemia G9712 or equivalent

No

Any Fasting or Direct LDL-C Laboratory Test Result ≥ 190mpidl G9763 or equivalent

Yes

Denominator Exclusions

Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy

Yes

Data Completeness Met + Performance Met G9654 or equivalent (40 patients)

No

Documentation of Medical Reason(s) for Not Currently being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy

Yes

Data Completeness Met + Denominator Exception G9781 or equivalent (10 patients)

No

Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy

Yes

Data Completeness Not Met G9785 or equivalent not submitted (20 patients)

No

Include in Eligible Population/Denominator (50 patients)  

*See the posted Measure Specification for specific coding and instructions to submit this measure.
NOTE: Submission Frequency: Patient-Process

CPT only copyright 2017 American Medical Association. All rights reserved.
2019 Clinical Quality Measure Flow for Quality ID #438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease
Submission Criteria Three

Start
Denominator

Patient Age 40-75 at the Beginning of the Measurement Period

Yes

Diagnosis of Type 1 or Type 2 Diabetes as Listed in the Denominator

No

Encounter as Listed in the Denominator® (V4/219 thru 12/31/2019)

No

Telehealth Modifier G4, G5, G6, FG02 X2

Yes

No

No

No

Not Included in Eligible Population/Denominator

Numerator

Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy

Yes

Data Completeness Met + Performance Met G9564 or equivalent (40 patients) a1

No

Documentation of Medical Reason(s) for Not Currently being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy

Yes

Data Completeness Met + Denominator Exception C9713 or equivalent (10 patients) a3

No

Documentation of Patients with Diabetes and Most Recent Fasting or Direct LDL-C Result < 70 mg/dl, for Not Currently being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy

Yes

Data Completeness Met + Denominator Exception C9733 or equivalent (5 patients) a5

No

Patients who are Not Currently Statin Therapy Users or did not Receive an Order (Prescription) for Statin Therapy

Yes

Data Completeness Met + Performance Not Met G9565 or equivalent (20 patients) c1

No

Denominator Exclusions

Patients Who have a Diagnosis of Pregnancy G9778 or equivalent

Yes

No

Patients Who are Breastfeeding G9779 or equivalent

Yes

No

Patients Who have a Diagnosis of Rhabdomyolysis G9780 or equivalent

Include in Eligible Population/Denominator (80 patients) d1

*See the posted Measure Specification for specific coding and instructions to submit this measure.
NOTE: Submission Frequency: Patient Process

CPT only copyright 2017 American Medical Association. All rights reserved.
v3
2019 Clinical Quality Measure Flow for Quality ID #438: Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

SAMPLE CALCULATION:

Data Completeness = 
\[
\frac{\text{Performance Met (a^2+b^2+c^2=120 pts)}}{\text{Denominator Exception (b^2+c^2>d^2=30 pts)}} + \frac{\text{Performance Met (c^2+d^2=60 pts)}}{\text{Eligible Population / Denominator (d^2+e^2+f^2=240 pts)}} = 210 \text{ pts} = 87.50\%
\]

Performance Rate = 
\[
\frac{\text{Performance Met (a^2+b^2+c^2=120 pts)}}{\text{Data Completeness Numerator (210 pts) - Denominator Exception (b^2+c^2>d^2=30 pts)}} = \frac{120 \text{ pts}}{190 \text{ pts}} = 63.16\%
\]

*See the posted Measure Specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Patient process
2019 Clinical Quality Measure Flow Narrative For Quality ID #438:
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification.

**Submission Criteria 1:**

1. Start with Denominator
2. Check Patient Age:
   a. If the Patient Age is greater than or equal to 21 Years at the beginning of the Measurement Period and equals No, do not include in Eligible Population. Stop Processing.
   b. If the Patient Age is greater than or equal to 21 Years at the beginning of the Measurement Period and equals Yes during the Measurement Period, proceed to check Encounter Performed.
3. Check Encounter Performed:
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
   b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier
4. Check Telehealth Modifier
   a. If Telehealth Modifier as Listed in the Denominator equals No, proceed to check Previously Diagnosed or have an Active Diagnosis of Clinical ASCVD.
   b. If Telehealth Modifier as Listed in the Denominator equals Yes, do not include in Eligible Population. Stop Processing.
5. Check Previously Diagnosed or have an Active Diagnosis of Clinical ASCVD:
   a. If Previously Diagnosed or have an Active Diagnosis of Clinical ASCVD equals No, do not include in Eligible Population. Stop Processing.
   b. If Previously Diagnosed or have an Active Diagnosis of Clinical ASCVD equals Yes, proceed to check Patients Who have a Diagnosis of Pregnancy.
6. Check Patients Who Have a Diagnosis of Pregnancy:
   a. If Patients Who Have a Diagnosis of Pregnancy equals No, proceed to check Patients Who are Breastfeeding
   b. If Patients Who Have a Diagnosis of Pregnancy equals Yes, do not include in Eligible Population. Stop Processing.
7. Check Patients Who are Breastfeeding:
   a. If Patients Who are Breastfeeding equals No, proceed to check Patients Who have a Diagnosis of Rhabdomyolysis.
   b. If Patients Who are Breastfeeding equals Yes, do not include in Eligible Population. Stop Processing.
8. Check Patients Who have a Diagnosis of Rhabdomyolysis:
   a. If Patients Who have a Diagnosis of Rhabdomyolysis equals No, include in Eligible Population.
   b. If Patients Who have a Diagnosis of Rhabdomyolysis equals Yes, do not include in Eligible Population. Stop Processing.
9. Denominator Population:
   a. Denominator Population is all Eligible Patients in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d\(^1\) equals 80 patients in the Sample Calculation.

10. Start Numerator

11. Check Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy:
   a. If Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Performance Met.
   b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a\(^1\) equals 40 patients in the Sample Calculation.
   c. If Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy equals No, proceed to check Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy.

12. Check Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy.
   a. If Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
   b. Data Completeness Met and Denominator Exception letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b\(^1\) equals 10 patients in the Sample Calculation.
   c. If Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals No, proceed to check Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy.

13. Check Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy:
   a. If Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Performance Not Met.
   b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c\(^1\) equals 20 patients in the Sample Calculation.
   c. If Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy equals No, proceed to check Data Completeness Not Met.

14. Check Data Completeness Not Met:
   a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.
2019 Clinical Quality Measure Flow Narrative For Quality ID #438:
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification.

Submission Criteria 2:

1. Start with Denominator
2. Check Patient Age:
   a. If the Patient Age is greater than or equal to 21 Years at the beginning of the Measurement Period and equals No, do not include in Eligible Population. Stop Processing.
   b. If the Patient Age is greater than or equal to 21 Years at the beginning of the Measurement Period and equals Yes during the Measurement Period, proceed to check Encounter Performed.
3. Check Encounter Performed:
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
   b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.
4. Check Telehealth Modifier:
   a. If Telehealth Modifier as listed in the Denominator equals No, proceed to check Any Fasting or Direct LDL-C Laboratory Test Result ≥ 190mg/dL.
   b. If Telehealth Modifier as listed in the Denominator equals Yes, do not include in Eligible Population. Stop Processing.
5. Check Any Fasting or Direct LDL-C Laboratory Test Result ≥ 190mg/dL:
   a. If Any Fasting or Direct LDL-C Laboratory Test Result ≥ 190mg/dL equals No, proceed to check Active or History of Familial or Pure Hypercholesterolemia.
   b. If Any Fasting or Direct LDL-C Laboratory Test Result ≥ 190mg/dL equals Yes, proceed to check Patients Who Have a Diagnosis of Pregnancy.
6. Check Active or History of Familial or Pure Hypercholesterolemia:
   a. If Active or History of Familial or Pure Hypercholesterolemia equals No, do not include in Eligible Population. Stop Processing.
   b. If Active or History of Familial or Pure Hypercholesterolemia equals Yes, proceed to check Patients Who Have a Diagnosis of Pregnancy.
7. Check Patients Who Have a Diagnosis of Pregnancy:
   a. If Patients Who Have a Diagnosis of Pregnancy equals No, proceed to check Patients Who are Breastfeeding
   b. If Patients Who Have a Diagnosis of Pregnancy equals Yes, do not include in Eligible Population. Stop Processing.
8. Check Patients Who are Breastfeeding:
   a. If Patients Who are Breastfeeding equals No, proceed to check Patients Who have a Diagnosis of Rhabdomyolysis.
b. If Patients Who are Breastfeeding equals Yes, do not include in Eligible Population. Stop Processing.

9. Check Patients Who have a Diagnosis of Rhabdomyolysis:
   a. If Patients Who have a Diagnosis of Rhabdomyolysis equals No, include in Eligible Population
   b. If Patients Who have a Diagnosis of Rhabdomyolysis equals Yes, do not include in Eligible Population. Stop Processing.

10. Denominator Population:
    a. Denominator Population is all Eligible Patients in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d^2 equals 80 patients in the Sample Calculation.

11. Start Numerator

12. Check Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy:
    a. If Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Performance Met.
    b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a^2 equals 40 patients in the Sample Calculation.
    c. If Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy equals No, proceed to check Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy.

13. Check Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy.
    a. If Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
    b. Data Completeness Met and Denominator Exception letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b^2 equals 10 patients in the Sample Calculation.
    c. If Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals No, proceed to check Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy.

14. Check Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy:
    a. If Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Performance Not Met.
    b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c^2 equals 20 patients in the Sample Calculation.
    c. If Patients who are Not Currently Statin Therapy Users or Did Not Receive an Order (Prescription) for Statin Therapy equals No, proceed to check Data Completeness Not Met.

15. Check Data Completeness Not Met:
a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.
2019 Clinical Quality Measure Flow Narrative For Quality ID #438:
Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification.

Submission Criteria 3:

1. Start with Denominator

2. Check Patient Age:
   a. If the Patient Age is 40 through 75 Years at the beginning of the Measurement Period equals No, do not include in Eligible Population. Stop Processing.
   b. If the Patient Age is 40 through 75 Years at the beginning of the Measurement Period equals Yes, proceed to check Diagnosis of Type 1 or Type 2 Diabetes.

3. Check Diagnosis of Type 1 or Type 2 Diabetes:
   a. If Diagnosis of Type 1 or Type 2 Diabetes as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
   b. If Diagnosis of Type 1 or Type 2 Diabetes as Listed in the Denominator equals Yes, proceed to check Encounter Performed.

4. Check Encounter Performed:
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
   b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier.

5. Check Telehealth Modifier:
   a. If Telehealth Modifier as listed in the Denominator equals No, proceed to check Highest Fasting or Direct LDL-C Laboratory Test Result of 70-189 mg/dL in the Measurement Period or Two Years Prior to the Beginning of the Measurement Period.
   b. If Telehealth Modifier as listed in the Denominator equals Yes, do not include in Eligible Population. Stop Processing.

6. Check Highest Fasting Or Direct LDL-C Laboratory Test Result of 70-189 mg/dL in the Measurement Period or Two Years Prior to the Beginning of the Measurement Period:
   a. If Highest Fasting Or Direct LDL-C Laboratory Test Result of 70-189 mg/dL in the Measurement Period or Two Years Prior to the Beginning of the Measurement Period equals No, do not include in Eligible Population. Stop Processing.
   b. If Highest Fasting Or Direct LDL-C Laboratory Test Result of 70-189 mg/dL in the Measurement Period or Two Years Prior to the Beginning of the Measurement Period equals Yes, proceed to check Patients Who Have a Diagnosis of Pregnancy.

7. Check Patients Who Have a Diagnosis of Pregnancy:
   a. If Patients Who Have a Diagnosis of Pregnancy equals No, proceed to check Patients Who are Breastfeeding
   b. If Patients Who Have a Diagnosis of Pregnancy equals Yes, do not include in Eligible Population. Stop Processing.
8. Check Patients Who are Breastfeeding:
   a. If Patients Who are Breastfeeding equals No, proceed to check Patients Who have a Diagnosis of Rhabdomyolysis.
   b. If Patients Who are Breastfeeding equals Yes, do not include in Eligible Population. Stop Processing.

9. Check Patients Who have a Diagnosis of Rhabdomyolysis:
   a. If Patients Who have a Diagnosis of Rhabdomyolysis equals No, include in Eligible Population
   b. If Patients Who have a Diagnosis of Rhabdomyolysis equals Yes, do not include in Eligible Population. Stop Processing.

10. Denominator Population:
    a. Denominator Population is all Eligible Patients in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d³ equals 80 patients in the Sample Calculation.

11. Start Numerator

12. Check Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy:
    a. If Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Performance Met.
    b. Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a³ equals 40 patients in Sample Calculation.
    c. If Patients who are Currently Statin Therapy Users or Received an Order (Prescription) for Statin Therapy equals No, proceed to check Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy.

13. Check Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy.
    a. If Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
    b. Data Completeness Met and Denominator Exception letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b³ equals 10 patients in the Sample Calculation.
    c. If Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals No, proceed to check Documentation of Patients with Diabetes and Most Recent Fasting or Direct LDL-C Result < 70 mg/dL for Not Currently being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy.

14. Check Documentation of Patients with Diabetes and Most Recent Fasting or Direct LDL-C Result < 70 mg/dL for Not Currently being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy:
    a. If Documentation of Patients with Diabetes and Most Recent Fasting or Direct LDL-C Result < 70 mg/dL for Not Currently being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
    b. Data Completeness Met and Denominator Exception letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b⁴ equals 0 patients in the Sample Calculation.
c. If Documentation of Medical Reason(s) for Not Currently Being a Statin Therapy User or Receive an Order (Prescription) for Statin Therapy equals No, proceed to check Patients who are Not Currently Statin Therapy Users or did Not Receive an Order (Prescription) for Statin Therapy.

15. Check Patients who are Not Currently Statin Therapy Users or did Not Receive an Order (Prescription) for Statin Therapy:
   a. If Patients who are Not Currently Statin Therapy Users or did Not Receive an Order (Prescription) for Statin Therapy equals Yes, include in Data Completeness Met and Performance Not Met.
   b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 patients in the Sample Calculation.
   c. If Patients who are Not Currently Statin Therapy Users or did Not Receive an Order (Prescription) for Statin Therapy equals No, proceed to check Data Completeness Not Met.

16. Check Data Completeness Not Met:
   a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

---

**SAMPLE CALCULATION:**

Data Completeness = 
\[\text{Performance Met}(a^1+b^2+c^3=120 \text{ pts}) + \text{Denominator Exception}(b^1+b^3+b^3=30 \text{ pts}) + \text{Performance Not Met}(c^1,c^2+c^3=60 \text{ pts}) \div \text{Eligible Population} = 210 \text{ pts} = 87.50\% \]
\[\text{Performance Rate} = \frac{\text{Performance Met}(a^1+b^2+c^3=120 \text{ pts})}{\text{Data Completeness Numerator (210 pts) - Denominator Exception (b^1+b^3+b^3=30 \text{ pts})}} = 66.66\%\]