Quality Ratings Update and Impact on Performance

March 9, 2017

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Agenda

The Quality Challenge
Moving Toward Common Quality Goals
Aligning with Community Pharmacy
Proven Results
The Quality Challenge
Key Challenges

**Patient Behavior**

50% of patients don’t take their medications as directed

**Access to Information**

22% of ACOs have medication use data

**Payment Incentives**

23% of payment models are value-based

**Advanced Analytics**

36% of healthcare CEOs are satisfied with the analytics

*US CDC, FDA, 2011
Dubois RW, JMCP 2014
Catalyst for Payment Reform, 2017
IBM Institute for business value. 2012*
Consequences of Poor Adherence

Poor Adherence: America’s “Other Drug Problem”

Total Average Annual Cost between:
- Adherence
- Non-Adherence

<table>
<thead>
<tr>
<th>Condition</th>
<th>Adherence Cost</th>
<th>Non-Adherence Cost</th>
<th>Savings</th>
<th>ROI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Congestive Heart Failure</td>
<td>$1,058</td>
<td>$8,881</td>
<td>$7,823 savings</td>
<td>8:4</td>
</tr>
<tr>
<td>Diabetes</td>
<td>$657</td>
<td>$4,413</td>
<td>$3,908 savings</td>
<td>10:1</td>
</tr>
<tr>
<td>Hypertension</td>
<td>$429</td>
<td>$4,337</td>
<td>$3,756 savings</td>
<td>6:7</td>
</tr>
<tr>
<td>Dyslipidemia</td>
<td>$602</td>
<td>$1,860</td>
<td>$1,258 savings</td>
<td>3:1</td>
</tr>
</tbody>
</table>

Source: Roebuck et al. - Health Affairs 30.1 (2011)

Ineffective therapeutic levels
Poor disease control
Increased risk for readmissions
Escalating costs
Preventable morbidity, mortality
**Provider Challenges**

**Challenges**

### Measurement Tsunami
Providers - too many measures
281 measures - Physician Quality Reporting Systems (PRQS)

### Access to Medication Information
Medication discrepancies occur in 70% of patients at hospital admission or discharge*
~1/3 with potential ADE

**Recent News**

### Core Quality Measure Collaborative
Agreement to standardize measures of quality for doctors
Movement - How quality is defined and paid
90% of U.S. hospitals - easier access to info in their EHRs
Representing 17 EHR vendors and other IT systems providers

Paying for Value Requires Aligned Incentives

Evolving Payment Models: Shifting from Volume to Value

- Fee for Service: Rewarding Volume
- Pay for Performance: Rewarding Quality
- Global/Partial Capitation: Rewarding Savings
- Episode-Based Payments: Rewarding Value

Optimization of the Triple Aim = Cost-Effective Health Care
Moving Toward Common Quality Goals
Comprehensive Approach to Quality, Cost Management

1. INTEGRATED DATA

2. ANALYTICS

3. INTERVENTIONS

4. MEASUREMENT

5. IMPROVEMENT

1. INTEGRATED DATA
   - Influence Prescriber, Pharmacist, Member
   - Manage Health
   - Drive Behavior Change

2. ANALYTICS
   - Stratify Populations
   - Measure & Monitor Quality & Drug Safety

3. INTERVENTIONS
   - Identify Issues
   - Focus on Outcomes

4. MEASUREMENT
   - At-Risk Members

5. IMPROVEMENT
   - Conduct Interventions
Quality Performance Monitoring Program

**COMPREHENSIVE**
Over 30 Pharmacy-Based Quality Standards
Key chronic conditions based on therapeutic classes/categories
Includes specialty medication measures
New measures added quarterly

**CREDIBLE**
Quality measures align with national standards developed, endorsed or adopted by:
- National Committee for Quality Assurance (NCQA-HEDIS)
- Pharmacy Quality Alliance (PQA)
- National Quality Forum (NQF)
- Centers for Medicare and Medicaid Services (CMS)

**SUMMARIZED**
Benchmarks with market segment-specific comparators
Aggregation available by:
- Plan Sponsor
- Physician Groups/ACOs
- Pharmacy Regions
- Employer Groups

**Quality Measure Monitoring**
- Opioid Utilization- High Dosage & Multiple Providers \((CMS)\)
- Opioid with Benzodiazepine Use \((PQA)\)
- Statins \((CMS)\), Antidiabetics \((CMS)\), RAS Antagonists \((CMS)\)
- Antidepressants \((NCQA)\)
- TNF Inhibitor Adherence
- Multiple Sclerosis Adherence \((PQA)\)
Quality Performance Monitoring Program Platform

Advanced Analytics to Target Interventions for Quality Improvements

Dashboard
Measures Quality
Population Measurements
Benchmarks
Identify and improve medication use
Potentially lower medical costs

Data File Program
Member-Specific Issues:
Poor Adherence
Gaps in Care
Safety Issues
Guides targeted clinical intervention strategies to improve outcomes

Member Priority List
Predictive Analytics
Stratify Members
Prioritize Interventions
Conduct Targeted Outreach
Improve Medication Adherence
Help Ensure Appropriate Utilization
QPMP: Quality Care Management

Advanced Analytics to Identify Quality Issues for Targeted Interventions

Quality Performance Monitoring Program
Dashboard Version 3.0

SAMPLE: Plan Sponsor Name
MedImpact Benchmark: MEDICARE PART D
Dec-2014 Dashboard (Measurement Period = Jan-2014 to Dec-2014)

CARE GAP

<table>
<thead>
<tr>
<th>QPMP Measure</th>
<th>Trend</th>
<th>Total Patients 1</th>
<th>Target Patients 2</th>
<th>Performance 3</th>
<th>Performance Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes - Hypertension (ACEI/ARB/DRI) Therapy</td>
<td></td>
<td>6,100</td>
<td>900</td>
<td>85.2%</td>
<td></td>
</tr>
<tr>
<td>Diabetes - Statin Therapy</td>
<td></td>
<td>7,010</td>
<td>2,010</td>
<td>71.3%</td>
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<tr>
<td>Asthma - Appropriate Controller Use</td>
<td></td>
<td>122</td>
<td>4</td>
<td>97.2%</td>
<td></td>
</tr>
<tr>
<td>Pharmacologic Prophylaxis for Migraines</td>
<td></td>
<td>60</td>
<td>15</td>
<td>75.0%</td>
<td></td>
</tr>
</tbody>
</table>

Adherence
Persistence
Gaps in Care
Inappropriate Use
Safety
QPMP: Predictive Information Improves Program Targeting

Predictive Modeling

Target & Prioritize Population

Focus on Medication Adherence

Impact Level
- Very High
- High
- Moderate
- Low

Multiple Issues
- Very Low/High Adherence
- New Starts
- High Comorbidity
- Responder

Single Issues
- Very Low/High Adherence
- Continuing User
- Low Complexity
- Non-Responder

Very High Impact

Moderate Impact

Low Impact

High-Touch Interventions

Low-resource High-efficiency Interventions

Moderate Interventions

Services under QPMP Data File Program: Member Priority List
HEDIS Measure Antidepressant Medication Management

**Metric:**
Members ages 18 and up
Treated with antidepressant medication
Diagnosis: major depression
Remained on antidepressant medication treatment

**Effective Acute Phase Treatment:**
% of members who remained on an antidepressant medication for at least 12 weeks

**Effective Continuation Phase Treatment:**
% of members who remained on an antidepressant medication for at least 6 months

Two components in member-directed program to increase HEDIS measure performance:

**Member Letters:**
Target members new to drug therapy (absence of claim in prior 90 days)

**IVR Refill Reminder:**
Calls to members 7 days late to refill
**HEDIS Antidepressant Program Results**

**Target Measures**

**Acute Phase:** Persistence for at least 84 days

**Continuation Phase:** Persistence for at least 180 days

**Interventions**

- Adherence letter to members initiating therapy
- IVR call reminds members to refill medications

**Period** | **All New Start Patients** | **Patients with ≥84 days therapy** | **% of patients with ≥84 days therapy** | **Change***(Post – Pre)* | **Patients with ≥180 days therapy** | **% of patients with ≥180 days therapy** | **Change***(Post – Pre)*
---|---|---|---|---|---|---|---
**Pre** | 2,543 | 1,998 | 78.6% | 4.6% | 978 | 38.5% | 7.0%
**Post*** | 3,379 | 2,810 | 83.2% |  | 1,536 | 45.5% |  

*Based on first 9 months of available data

*Pre-period: Intervention January 2015

*Post-period: Intervention January 2015

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Aligning with Community Pharmacy
~10 - 15% of all prescriptions dispensed by community pharmacies have a portion of reimbursement tied to patient outcome metrics

**Pay-for-Performance Models**

Bonus payments for:

- Improved adherence
- Reduced gaps in care
- High-risk medication use
- Generic utilization

**Pay-to-Play Models**

Fees are paid up front (DIR fees)

Fees “earned back”

Or future fees reduced based on performance
Commonalities Among Incentive Measures

- Medication Reconciliation
- Medication Adherence
- Gaps in Care
- Adverse Drug Event Prevention
- Chronic Care Management (A1C, BP)
- Wellness Screenings
- Vaccinations

Health Plans
Health Systems/Institutions
Providers/Pharmacies
Solutions

Multi-Channel Intervention Strategies to Improve Quality Outcomes and Performance
Medication Therapy Management

Data Analytics
STAR, HEDIS, Outcome Focused

Coordination of Care

Personalized and Targeted Outreach

Medication Action Plan
Person Medication Lists
Branded Wallet Cards

Person-to-Person Consultations
Consistency in Messaging to Drive Behavior

Community Pharmacist

Clinic-based Provider

Centralized Call Center
CVS Pharmacy – HealthTag

9,600 stores

Custom CMR Offer for SinfoníaRx printed on patient label + technician counsel

21,000 messages delivered in 2016

Walmart – Integrated Analytics

4,000 stores

Claims data processed daily by SinfoníaRx

CMRs/TMRs completed by Walmart call center and stores using RxCompanion™ software
Hospital and Health System Solutions

Hospital

Community Pharmacy

SinfoniaRx
Hospital Liaison

Discharge Companion Program

Personalized Consultation
Provider Care Coordination
Medication Surveillance
Proven Reductions in Readmissions

Targets specific conditions or medications
- Antiplatelets
- Anticoagulants
- Digoxin

Positive return on investment (ROI) of 407%
23.5% decrease in readmissions
Positive impact upon provider referral practices
High patient satisfaction:
- 98% of patients were satisfied with the service
- 94% would recommend the service
- 94% valued the information they received

TARGET CONDITIONS:
- Asthma/chronic obstructive pulmonary disorder
- Diabetes mellitus
- Heart or renal failure
- Hip/Knee replacement
- Myocardial infarction
- Pneumonia
- Post-coronary artery bypass graft
Improving Quality Metrics
Case Study Results
Total Program Impact (1st 9 months)

12,350 - Total interventions completed
30% - Average acceptance rate
$1.1 million - Total Cost Saving
ROI: 20:1

HEDIS Focused Interventions (1st 9 months)

Over 10,000 HEDIS focused interventions completed
9 HEDIS performance measures addressed: AMM, SAA, MPM, CBP, CDC, MMA, ASM, AMR, and PCE
26% - Average acceptance rate
Custom program

Evaluate children taking at least one psychotropic medication

Outreach to the prescriber(s) when potential drug therapy problems are found

Example: polypharmacy with multiple prescribers, high dose concerns, non-adherence

Number of Interventions

- **Adherence**: 20%
- **Guidelines**: 29%
- **Safety**: 51%

34,322 - Eligible Members
8,918 - Members Qualified
34,020 - Total Interventions Completed
32% - Total Acceptance Rate
$854,432 - Total Savings
9.32:1 - ROI
## Employer-Based Case Study

40k Employees  
Measured Cost Savings: $390,975  
ROI: 3.98:1

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Total</th>
<th>Measurable</th>
<th>Accepted</th>
<th>Average savings per intervention</th>
<th>Cost Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adherence</td>
<td>3,011</td>
<td>791</td>
<td>255</td>
<td>$845</td>
<td>$215,431</td>
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<tr>
<td>Clinical Guidelines</td>
<td>503</td>
<td>296</td>
<td>51</td>
<td>$1,965</td>
<td>$100,216</td>
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<tr>
<td>Safety</td>
<td>290</td>
<td>183</td>
<td>84</td>
<td>$259</td>
<td>$21,764</td>
</tr>
<tr>
<td>Cost Savings</td>
<td>132</td>
<td>56</td>
<td>24</td>
<td>$2,231</td>
<td>$53,564</td>
</tr>
</tbody>
</table>

Based on published literature for patients with similar characteristics.
Takeaways

Continued lack of alignment in industry

Regulated markets may drive standardization of measures

MedImpact focused on continuous quality improvement and evaluation

Performance measures are significantly impacting provider and community pharmacy workflow

Medication therapy management solutions drive measure performance and reduce cost
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