

# blue paper



## INNOVATION AT WORK: PRIME IS DEDICATED TO HELPING BLUE PLANS IMPROVE STAR RATINGS

In the Medicare industry, Star Ratings are crucial. The higher the rating, the better a health plan is performing in areas like quality of care and customer service. Higher Star Ratings also lead to greater annual bonus payments for the plan from the Centers for Medicare & Medicaid Services (CMS).

Pharmacy benefit managers (PBMs) have a significant impact on Star Ratings. Prime Therapeutics (Prime) uses holistic member, prescriber, and pharmacy data and analytics to uncover opportunities, and then partners with clients to close Star Ratings gaps.

### **What boosts Star Ratings? Our products and our dedicated Quality team**

Prime's Quality team is dedicated to improving our clients' Star Ratings. It's their primary focus. They work hand-in-hand with clients daily to improve Star Ratings. That's how committed we are to helping our Blue Plans offer quality care and service to their members. Prime also provides a full complement of products created to maximize your Star Ratings.

Prime also offers advanced analytics and dashboards through our Quality Central tool. We use the data to find and close Star Ratings gaps.

**86%** OF PRIME'S MAPD  
MEMBERS ARE  
IN HEALTH PLANS WITH A PART D  
RATING OF 4 OR 5 STARS<sup>1</sup>

A light blue graphic of an upward-pointing arrow with a circular head, positioned behind the text.

STAR FORMULARY  
IMPROVED ADHERENCE

1.4 PERCENTAGE  
POINTS

A SINGLE POINT INCREASE  
CAN MAKE A DIFFERENCE  
BETWEEN A 3- TO 4- OR A  
4- TO 5-STAR RATING<sup>4</sup>

Each Blue Plan client is assigned a Prime Client Quality representative to lead contract-specific data analysis and develop action plans that help boost Star Ratings. These action plans may include:

- Visualization of key quality measures and the Prime product offerings available to drive improved Stars performance
- Data evaluation of member, prescriber, and pharmacy performance
- Quality-based networks that offer incentives to pharmacies to achieve higher ratings in select measures
- Adherence programs, including predictive analytics, that help members stay on their treatments
- Member, prescriber, and pharmacy interventions
- Medication therapy management
- Member prior authorization auto renewal programs for Star adherence medicines
- The Star Formulary benefit program with a benefit tier created to reduce member cost for generic adherence drugs
- Dashboards to chart progress, uncover opportunities, and close Star Ratings gaps

#### **Prime's innovative program improves adherence among Medicare members**

Improving drug adherence is critical to increasing Star Ratings. Adherence is measured across three categories: diabetes, hypertension, and cholesterol-lowering drugs (statins).<sup>2,3</sup> In 2018, Prime piloted a new Medicare proactive pharmacist program informed by a predictive model to improve drug adherence in those areas and, in turn, Star Ratings. The program has continued in 2019 and 2020.

# PROACTIVE PHARMACIST CALL PROGRAM STUDY

The study was so well-received that it was awarded gold medal acknowledgement from the Academy of Managed Care Pharmacy (AMCP) in 2019.

## METHODS

- 1.4 million Blue Cross Blue Shield Medicare members, representing over 40 Medicare Advantage and Prescription Drug Plan contracts, were initially examined.
- The pilot used a predictive model to identify members with a high probability of non-adherence.
- Adherence was defined using CMS Star criteria: Members were adherent if they had an 80% proportion of days covered at calendar year-end.

## RESULTS

All three Star drug categories showed improved adherence.

## CONCLUSIONS

- The predictive model helped pharmacists reach the members most likely to benefit from outreach, resulting in better, more effective outcomes.
- The proactive pharmacist call program improved Medicare members' adherence in each CMS Star drug category.

## PERCENTAGE IMPROVEMENT, PER DRUG CATEGORY

DRUG CATEGORY	ESTIMATED IMPROVED PERCENTAGE POINTS <sup>5</sup>
Diabetes	1.12
Hypertension	0.94
Statins	1.14

## RANGE OF IMPROVED ADHERENCE



FOR MORE INFORMATION

VISIT PRIMETHERAPEUTICS.COM

## REFERENCES

- 1 Prime internal data, 2019.
- 2 CMS.gov. (Dec. 19, 2018). Center for Medicare and Medicaid Services. 2019 Cut Point Trend Star Ratings. Retrieved February 17, 2020, from [https://www.cms.gov/Medicare/Prescription-DrugCoverage/PrescriptionDrugCovGenIn/Downloads/2019\\_Cut\\_Point\\_Trend.pdf](https://www.cms.gov/Medicare/Prescription-DrugCoverage/PrescriptionDrugCovGenIn/Downloads/2019_Cut_Point_Trend.pdf).
- 3 CMS.gov. (Aug. 8, 2018). Centers for Medicare and Medicaid Services. 2019 Star Ratings. Retrieved February 17, 2020, from <https://www.cms.gov/Medicare/PrescriptionDrug-Coverage/PrescriptionDrugCovGenIn/Downloads/2019-Star-Ratings-User-Call-slides.pdf>.
- 4 Can lowering generics member cost share impact CMS Star adherence metrics? (May, 2018). <https://www.primetherapeutics.com/content/dam/corporate/Documents/Newsroom/Pressreleases/2018/document-pqaposter-genericadherence.pdf>.
- 5 S.W. Champaloux PhD, MPH; S. Dauer, PharmD, MS, MBA; P.P. Gleason, PharmD, Prime Therapeutics LLC, Eagan, MN, United States; University of Minnesota College of Pharmacy, Minneapolis, MN, United States. Proactive Pharmacist Call Program: Assessing the Impact of a Predictive Model-Driven Medicare Member Outreach on Adherence and Star Ratings, 2019.