

# The Importance of Proper Documentation and Coding with the HEDIS SPC Measure

With the most recent guidelines from the American College of Cardiology (ACC) and the American Heart Association (AHA) for treatment of atherosclerotic cardiovascular disease (ASCVD), statin therapy can be an important tool to help your patients lower their cholesterol and improve their heart health.

The Healthcare Effectiveness Data and Information Set (HEDIS®) SPC measure assesses males 21–75 years of age and females 40–75 years of age who have clinical ASCVD. The National Committee for Quality Assurance (NCQA) measures the quality of care these patients receive using the following two rates.

- **Received Statin Therapy.** Patients who were dispensed at least one high-intensity or moderate-intensity statin medication during the measurement year.
- **Statin Adherence 80%.** Patients who remained on a high-intensity or moderate-intensity statin medication for at least 80% of the treatment period.

Statin Medications	
Moderate-Intensity	High-Intensity
Atorvastatin 10-20 mg	Atorvastatin 40-80 mg
Amlodipine-atorvastatin 10-20 mg	Amlodipine-atorvastatin 40-80 mg
Rosuvastatin 5-10 mg	Rosuvastatin 20-40 mg
Simvastatin 20-40 mg	Simvastatin 80 mg
Ezetimibe-simvastatin 20-40 mg	Ezetimibe-simvastatin 80 mg
Pravastatin 40-80 mg	
Lovastatin 40-60 mg	
Fluvastatin 40-80 mg	
Pitavastatin 1-4 mg	

Note: The medications listed in the article are approved by NCQA for closing care gaps, but Medical Mutual will continue to monitor best practices as recommended by sources such as NCQA, AHA, and ACC.

## Helping Patients Adhere to their Statin Therapy

There are certain things you can do to help your patients adhere to their statin therapy.

- Encourage members to promptly report any adverse effects.
- Prescribing 90-day supplies with sufficient refills is the best way to boost statin adherence since it makes it easier for your patients to have medication on hand. Encourage members to sign up for refill reminders and automated refill programs. Medical Mutual offers Express Scripts to our members to provide an easy and convenient option for medication home delivery.
- Many members that fall into the SPC measure also fall into the statin use in persons with diabetes (SUPD) measure. By prescribing a moderate to high intensity statin you will be able to address both measures.

There are specific criteria that exclude patients from the measure. Acceptable coding of these exclusions is further explained below.

## Historical Exclusion Codes

**Members who have had a historical reaction to statin therapy can be permanently excluded from the measure with the submission of codes found in the table below.** These codes can be submitted through supplemental data file feeds. Submission of these codes can help reduce the need to submit medical records for exclusion. The Supplemental Data team of Rick Hein ([richard.hein@medmutual.com](mailto:richard.hein@medmutual.com)) and Nadia Dumevi ([nadia.dumevi@medmutual.com](mailto:nadia.dumevi@medmutual.com)) is available to assist you in incorporating these codes into your supplemental data file or, where necessary, establishing a new supplemental data file.

Exclusion	Value Set	Code System	Code Set
Muscular reaction to statins	Rhabdomyolysis due to statin (disorder)	SNOMED CT	787206005
	Myalgia caused by statin (finding)	SNOMED CT	16462851000119106
	History of myalgia caused by statin (situation)	SNOMED CT	16524291000119105
	History of rhabdomyolysis due to statin (situation)	SNOMED CT	16524331000119104

## Annual Exclusions Codes

Patients with any of the following conditions during the measurement year are excluded from the SPC measure:

- Ages 66 years and older with frailty **and** advanced illness.
- Patients with pregnancy, in vitro fertilization, or prescribed clomiphene (Estrogen Agonist) during the measurement year or the year prior.
- Patients on dialysis or diagnosed with ESRD during the measurement year or year prior.
- Patients with cirrhosis during the measurement year or year prior.
- Statin intolerance with a claim from myalgia, myositis, myopathy, or rhabdomyolysis **during the measurement year**.
- In hospice or receiving hospice services any time during the measurement year.
- Patients receiving palliative care services any time during the measurement year.

Exclusion	Code System	Code Set**
Drug-induced myopathy	ICD-10-CM	G72.0
Myopathy due to other toxic agents	ICD-10-CM	G72.2
Myopathy, unspecified	ICD-10-CM	G72.9
Myositis, unspecified	ICD-10-CM	M60.9
Rhabdomyolysis	ICD-10-CM	M62.82
Myalgia, unspecified site	ICD-10-CM	M79.10
Myalgia, other site	ICD-10-CM	M79.18

\*\*This is not an all-inclusive list of the value sets codes

Providing quality care for our members, your patients, is a team effort. Thank you for working with us to help keep our members' hearts healthy.

These recommendations are informational only. They are not intended to require a specific course of treatment or take the place of professional medical advice, diagnosis or treatment. Members should make decisions about care with their healthcare providers. Recommended treatment or services may not be covered. Eligibility and coverage depend on the member's specific benefit plan.

None of the information included in this article is intended to be legal advice. It remains the provider's responsibility to ensure that all coding and documentation are done in accordance with applicable state and federal laws and regulations.