

Statin Therapy for Patients with Cardiovascular Disease (SPC)

Clinical Rationale

The American College of Cardiology and the American Heart Association Guidelines state that statins of moderate or high intensity are recommended for adults with established clinical atherosclerotic cardiovascular disease (ASCVD). Patients included in the measure are:

- › Males 21-75 years old
- › Females 40-75 years old
- › Those with clinical ASCVD identified by the following diagnoses:
 - Ischemic vascular disease
 - Myocardial infarction, coronary artery bypass graft surgery or a revascularization event such as a percutaneous coronary intervention

✓ SPC Measure Fulfillment

One fill of a high or moderate-intensity statin during the calendar year.

! Measurement Exclusions*

During the measurement year or the year prior:

- › Patients who are pregnant
- › Patients using in vitro fertilization or have a clomiphene prescription fill
- › Patients who have end stage renal disease: (N18.5, N18.6, Z99.2) or have cirrhosis: (K70.30, K70.31, K71.7, K74.3, K74.4, K74.5, K74.60, K74.69) are excluded from the measure.

During the measurement year:

- › Myalgia: (M79.1, M79.10-M79.12, M79.18), Myositis: M60.80, M60.811, M60.812, M60.819, M60.821, M60.822, M60.829, M60.831, M60.832, M60.839, M60.841, M60.842, M60.849, M60.851, M60.852, M60.859, M60.861, M60.862, M60.869, M60.871, M60.872, M60.879, M60.88, M60.89 and M60.9 Myopathy: (G72.0, G72.2, G72.9), or Rhabdomyolysis: (M62.82)
- › Patients 66 and older enrolled in an Institutional Special Needs Plan or living long-term in an institution
- › Patients 66 and older with frailty and advanced illness
- › Palliative care or hospice

*Must be documented annually.

Note: The data for this measure comes from medical and pharmacy claims. Attestations for statin fills in the Quality Care Rewards (QCR) application in Availity® are allowed only for statins filled through cash pay, Patient Assistance Programs or from the Veteran's Administration (VA). A photo of the prescription bottle or pharmacy receipt or feed showing the full label information with patient identification, medication name, dose, route and dispensed date is required to be uploaded with the attestation. The diagnosis code for the applicable condition should be submitted on a claim to exclude the patient. Attestations for SPC exclusions can also be made in the QCR application. Attestations made for exclusions require documentation upload from the medical record to support the exclusion.

Documentation

Ensure the medical record clearly documents the exclusion in the notes. Patients don't have to attempt taking a statin medication once a year to qualify for the muscle pain or muscular disease exclusion. The provider should document in the measurement year that the patient has myalgia or muscle cramps when taking statins as a reason for not being on them.

Statin Intensity: amount of low-density lipoprotein cholesterol (LCL-C) lowering

High-intensity statins (lower LDL-C by 50% or more)	Atorvastatin 40mg, 80mg
	Rosuvastatin 20mg, 40mg
Moderate-intensity statins (lower LDL-C by 30-49%)	Atorvastatin 10mg, 20mg
	Rosuvastatin 5mg, 10mg
	Simvastatin* 20-40mg
	Pravastatin 40mg, 80mg
	Lovastatin 40mg, 80mg
	Fluvastatin XL 80mg
	Fluvastatin 40mg BID
	Pitavastatin 1-4mg

Note: indicates specific statins and doses evaluated in randomized controlled trials (RCTs) and the Cholesterol Treatment Trialists' 2010 meta-analysis. All these RCTs demonstrated a reduction in major cardiovascular events.

*Initiation of or titration to simvastatin 80mg isn't recommended due to increased risk of side effects.

Sources

Grundy SM, Stone NJ, Bailey AL, et al. 2018 ACC/AHA Guideline on the Management of Blood Cholesterol: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. Circulation. 2019 | Volume 139, Issue 25: e1046–e1081. <https://www.ahajournals.org/doi/10.1161/CIR.0000000000000625>

<https://www.cms.gov/medicare/health-drug-plans/part-c-d-performance-data>