

Provider Bulletin

HEDIS[®] News You Can Use

Statin Therapy for Patients with Cardiovascular Disease (SPC-E)



Importance of Statin Therapy with ASCVD

Statin therapy lowers LDL cholesterol and reduces the risk of heart attack, stroke, and death in patients with atherosclerotic cardiovascular disease (ASCVD).

This bulletin offers information on any measure changes, best practice suggestions, links to codes and free resources.



Measure requirements

Persons **21-75** years of age who were identified as having clinical ASCVD and met the following requirements.

Two rates reported:

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

For more detailed measure info, go to [MC Gap Closure Reference Guide](#)



Coding information

SPC-E does not have any associated CPT II codes as compliance is triggered by **pharmacy claims**

For up-to-date, measure specific codes to use, go to [MC Gap Closure Reference Guide](#)



Common reasons for Gaps in Care

- Patient concerns about side-effects.
- Early discontinuation or missed refills.
- Delayed refills or limited pharmacy access.
- Prescriptions paid in cash, via discount programs, or provider samples (not captured in claims).
- Exclusion criteria not properly documented in the electronic medical record (EMR).

For members assigned but choosing not to establish care, go to [MC PCP Change Request Form](#)



Engagement Strategies

- **Educate** on statin benefits for cholesterol control and cardiovascular risk reduction.
- **Review side effects** and encourage prompt reporting.
- **Promote consistency:** same time daily dosing.
- **Recommend 90-day supply** to reduce refill barriers, if tolerated.
- **Suggest adherence tools:** pillbox, calendar, reminder app.
- **Schedule follow-up** visit before patient leaves office.
- **Reinforce** importance of pairing **lifestyle changes** (diet, exercise, weight management) for optimal lipid control.



Great resources

- American College of Cardiology: [Statin Intolerance Tool](#)
- American Heart Association(AHA): [AHA My LDL Cholesterol Guide](#)
- NCQA: [SPC-E Measure](#)
- Million Hearts: [What's New?](#)

**Thank you for the care you provide
to our members**



Best Practices Tips to improve results

- **Review and reconcile** medications at every visit.
- **Encourage 90-day supplies** for patients tolerating statin therapy to improve adherence.
- **Document adverse effects** and determine if they qualify for an exclusion.
- **Adjust therapy as needed:**
 - lower dose or frequency switch to an alternative statin if appropriate .
- **Remember:** gap closure is based on **pharmacy claims**, not samples or cash purchases.