



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

Pharmacotherapy management of COPD exacerbation measure

This measure examines the percentage of chronic obstructive pulmonary disease exacerbations for members age 40 and older who both:

- Had an acute inpatient discharge or emergency department visit on or between Jan. 1 to Nov. 30 of the current year
- Were dispensed appropriate medications

Two treatment options are reported:

- Patient was dispensed a **systemic** corticosteroid (or there was evidence of an active prescription) within 14 days of the event.
- Patient was dispensed a **bronchodilator** (or there was evidence of an active prescription) within 30 days of the event.

Did you know?

- COPD is the third leading cause of death in the US and smoking accounts for eight out of 10 COPD-related deaths.
- Deaths from COPD in women are higher than in men. Reasons may be related to misdiagnosis, an increase in the number of women smoking or the vulnerability of a woman's lung tissue to smoke and pollutants. (Estrogen and the fact that their lungs are smaller are two factors that may play a role in worsening lung disease among women.)
- COPD often is not diagnosed until the disease is advanced because people typically don't know early warning signs.

Note: The eligible population for this measure isn't based on members but on events (acute inpatient discharges and emergency department visits). It's possible for an individual member to be included more than once if he or she experiences multiple events.

Tip:

Help to ensure patient compliance with therapy after hospital discharge for COPD exacerbation by following up with the patient within seven days.

Improving HEDIS scores

- **Educate** patients on reducing risk of exacerbations through:
 - Participating in smoking cessation programs
 - Avoiding environmental pollutants: chemicals, dust, fumes, secondhand smoke
 - Keeping vaccinations for flu, pneumonia and pertussis current
 - Maintaining overall fitness and good nutrition
- **Assess** patients for proper use of inhalers. Include family and caregivers in your educational efforts.
- **Provide** patients with a prescription for a bronchodilator and systemic corticosteroid following an emergency department visit or inpatient discharge for COPD.
- **Counsel** patients on the importance of getting their prescriptions filled and remaining compliant.
- **Avoid** providing free drug samples to patients when possible. If a patient doesn't fill a prescription, it may appear that he or she is noncompliant.

Table 1: Bronchodilators

Description	Prescriptions		
Anticholinergic agents	<ul style="list-style-type: none"> • Albuterol-ipratropium • Acclidinium-bromide 	<ul style="list-style-type: none"> • Ipratropium • Tiotropium 	<ul style="list-style-type: none"> • Umeclidinium
Beta 2-agonists	<ul style="list-style-type: none"> • Albuterol • Arformoterol • Budesonide-formoterol • Fluticasone-salmeterol • Fluticasone-vilanterol • Formoterol 	<ul style="list-style-type: none"> • Formoterol-glycopyrrolate • Indacaterol • Indacaterol-glycopyrrolate • Levalbuterol • Mometasone-formoterol • Metaproterenol 	<ul style="list-style-type: none"> • Olodaterol hydrochloride • Olodaterol-tiotropium • Pirbuterol • Salmeterol • Umeclidinium-vilanterol
Methylxanthines	<ul style="list-style-type: none"> • Dyphylline 	<ul style="list-style-type: none"> • Theophylline 	
Antiasthmatic Combinations	<ul style="list-style-type: none"> • Dyphylline-guaifenesin 	<ul style="list-style-type: none"> • Guaifenesine-theophylline 	

Note: A bronchodilator should be dispensed within 30 days after the date of inpatient discharge or emergency department visit. For documentation purposes, count bronchodilators that are active within that timeframe.

Table 2: Systemic corticosteroids

Description	Prescriptions		
Glucocorticoids	<ul style="list-style-type: none"> • Cortisone-acetate • Dexamethasone 	<ul style="list-style-type: none"> • Hydrocortisone • Methylprednisolone 	<ul style="list-style-type: none"> • Prednisolone • Prednisone

Note: A systemic corticosteroid should be dispensed within 14 days after the date of inpatient discharge or emergency department visit. For documentation purposes, count systematic corticosteroids that are active within that timeframe.

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This measure applies to both commercial and Medicare members.