



One in a series of tip sheets about HEDIS® and other measures that contribute to star ratings of Medicare Advantage plans.

## Disease-modifying anti-rheumatic drug therapy for rheumatoid arthritis (ART)

Effectiveness of Care HEDIS® measure

### Measurement definition

Patients ages 18 and older within the measurement year who were diagnosed with rheumatoid arthritis and filled at least one ambulatory prescription for a disease-modifying anti-rheumatic drug in the current measurement year.<sup>1</sup>

### Exclusions

Patients are excluded if they:

- Received hospice care during the measurement year.
- Have a human immunodeficiency virus, or HIV, diagnosis.
- Have a pregnancy diagnosis.
- Are age 81 or older with frailty.
- Are ages 66–80 with advanced illness and frailty (for additional definition information, see the *Advanced Illness and Frailty Guide*).

### Information that patient medical records should include

- A diagnosis of RA only if confirmed through appropriate testing (often providers incorrectly code a diagnosis of osteoarthritis or joint pain as RA)
- The DMARD prescribed and the date it was prescribed (below is a chart of DMARDs that fall under the measure).

Description	Prescription	
<b>5-Aminosalicylates</b>	<ul style="list-style-type: none"> <li>• Sulfasalazine</li> </ul>	
<b>Alkylating agents</b>	<ul style="list-style-type: none"> <li>• Cyclophosphamide</li> </ul>	
<b>Aminoquinolines</b>	<ul style="list-style-type: none"> <li>• Hydroxychloroquine</li> </ul>	
<b>Anti-rheumatics</b>	<ul style="list-style-type: none"> <li>• Auranofin</li> <li>• Methotrexate</li> </ul>	<ul style="list-style-type: none"> <li>• Leflunomide</li> <li>• Penicillamine</li> </ul>
<b>Immunomodulators</b>	<ul style="list-style-type: none"> <li>• Abatacept</li> <li>• Adalimumab</li> <li>• Anakinra</li> <li>• Certolizumab</li> <li>• Certolizumab pegol</li> <li>• Etanercept</li> </ul>	<ul style="list-style-type: none"> <li>• Golimumab</li> <li>• Infliximab</li> <li>• Rituximab</li> <li>• Sarilumab</li> <li>• Tocilizumab</li> </ul>
<b>Immunosuppressive agents</b>	<ul style="list-style-type: none"> <li>• Azathioprine</li> <li>• Cyclosporine</li> </ul>	<ul style="list-style-type: none"> <li>• Mycophenolate</li> </ul>
<b>Janus kinase (JAK) inhibitor</b>	<ul style="list-style-type: none"> <li>• Baricitinib</li> </ul>	<ul style="list-style-type: none"> <li>• Tofacitinib</li> </ul>
<b>Tetracyclines</b>	<ul style="list-style-type: none"> <li>• Minocycline</li> </ul>	

## Tips for success

- Refer patients to a rheumatologist to assist with treatment.
- Medication samples, when given, interfere with pharmacy claims and produces false nonadherent results.

## Tips for talking with patients

- Educate patients on the importance of DMARD treatment in managing rheumatoid arthritis, unless contraindicated.
- Educate patients that they need to make at least two follow-up appointments a year after their initial diagnosis to monitor their disease, evaluate the effectiveness of their DMARD therapy and manage potential adverse RA events with an adjusted DMARD treatment.

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<sup>1</sup>National Committee for Quality Assurance. *HEDIS® 2020 Volume 2 Technical Specifications for Health Plans* (2019), 216-220

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