



**2018**

**URAC MAIL SERVICE PHARMACY  
PERFORMANCE MEASUREMENT:**

**AGGREGATE SUMMARY PERFORMANCE REPORT**

**December 2018**

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## Executive Summary

Presented in this report are the 2017 measurement year (2018 reporting year) results based on URAC's Mail Service Pharmacy (MSP) Accreditation program performance measures. The report includes only aggregate summary rates; there are no individual performance results included.

Organizations were required to report data for eight mandatory measures, and they had the option to report data for six exploratory measures. Below is the list of mandatory [M] and exploratory [E] measures for 2018 reporting:

1. Proportion of Days Covered (PDC) (DM2012-12) [M]
2. Adherence to Non-Warfarin Oral Anticoagulants (DTM2015-01) [M]
3. Drug-Drug Interactions (DM2012-13) [M]
4. Generic Dispensing Rates (MP2012-09) [M]
5. Call Center Performance (DTM2010-04) [M]
6. Dispensing Accuracy (MP2012-06) [M]
7. Distribution Accuracy (MP2012-07) [M]
8. Turnaround Time for Prescriptions (MP2012-08) [M]
9. Use of High-Risk Medications in the Elderly (HRM) (HIM2013-21) [E]
10. Antipsychotic Use in Children Under 5 Years Old (PH2015-02) [E]
11. Use of Benzodiazepine Sedative Hypnotic Medications in the Elderly (PH2015-03) [E]
12. Diabetes Medication Dosing (DOS) (PH2015-04) [E]
13. Statin Use in Persons with Diabetes (PH2015-06) [E]
14. Consumer Experience with Pharmacy Services (PH2015-05) [E]

The URAC measure specifications are set forth within the 2018 Mail Service Pharmacy Reporting Instructions.

For MSP, performance measurement for the 2018 reporting year aligns with Phase 2 of URAC's measurement process. With Phase 2, mandatory performance measures are subject to an external auditing and verification process. Additionally, the audited performance measure results become publicly available via aggregated, de-identified reports. With Phase 3, organization-specific measure results that have undergone an external auditing and verification process will be publicly available on the URAC website.

This performance report has been prepared for the URAC Quality, Research and Measurement Department by Kiser Healthcare Solutions, LLC. If you have any questions about the results contained herein, please contact [ResearchMeasurement@urac.org](mailto:ResearchMeasurement@urac.org).

## Mail Service Pharmacy Organization Characteristics

Fifteen URAC-accredited Mail Service Pharmacy (MSP) organizations reported 2017 measurement year data for the 2018 reporting year. Not all organizations reported results for all mail service pharmacy measures. Eleven organizations covered all four URAC-specified regions (Midwest, Northeast, South, and West), and four organizations covered only a single region.

The total number of prescriptions represented by the organizations is 154,099,919 prescriptions. Most organizations had less than one million prescriptions, and the majority of those had less than 300,000 prescriptions (Exhibit 1, Exhibit 2, Exhibit 3). Three organizations had over one million prescriptions; these organizations had 2.3 million, 42.2 million, and 106.9 million prescriptions, respectively.

The total number of drug prescriptions dispensed ranged from 7,500 to 106,944,730 prescriptions with a mean of 10,273,328 and median of 177,538.

Exhibit 1: Mail Service Pharmacy Organizations Reporting by Program Tier Size (Total Prescription Volume)

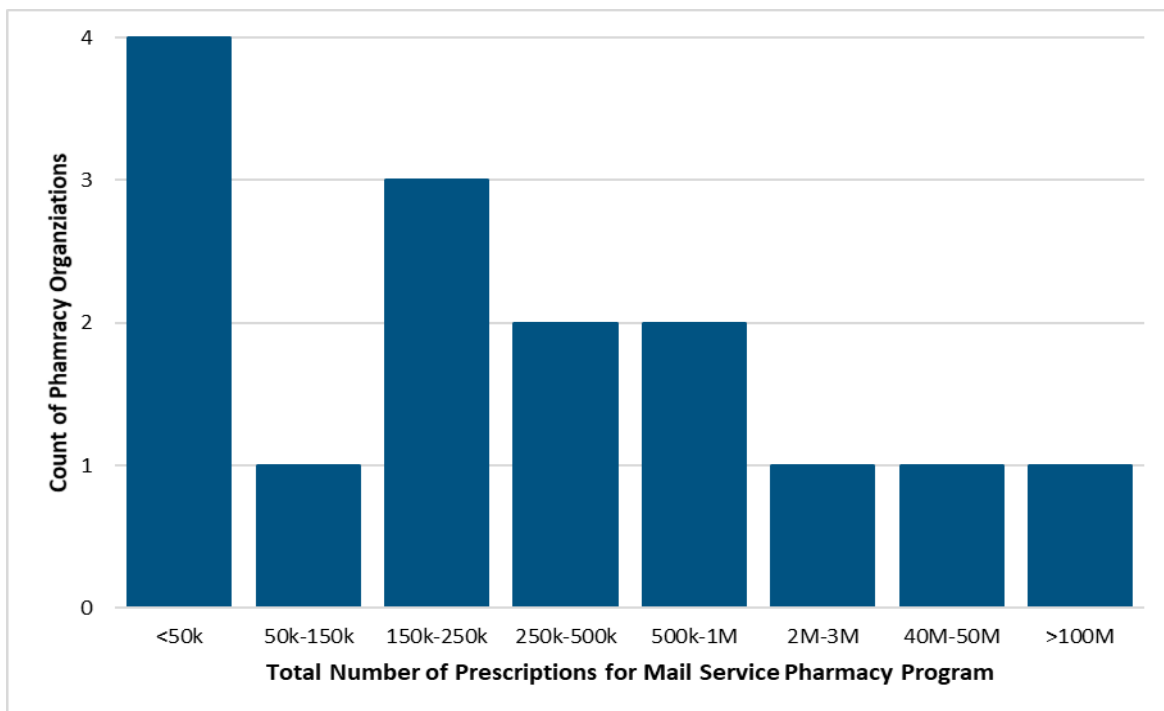


Exhibit 2: Total Number of Prescriptions for Mail Service Pharmacy Program by Organizations with <1M Prescriptions

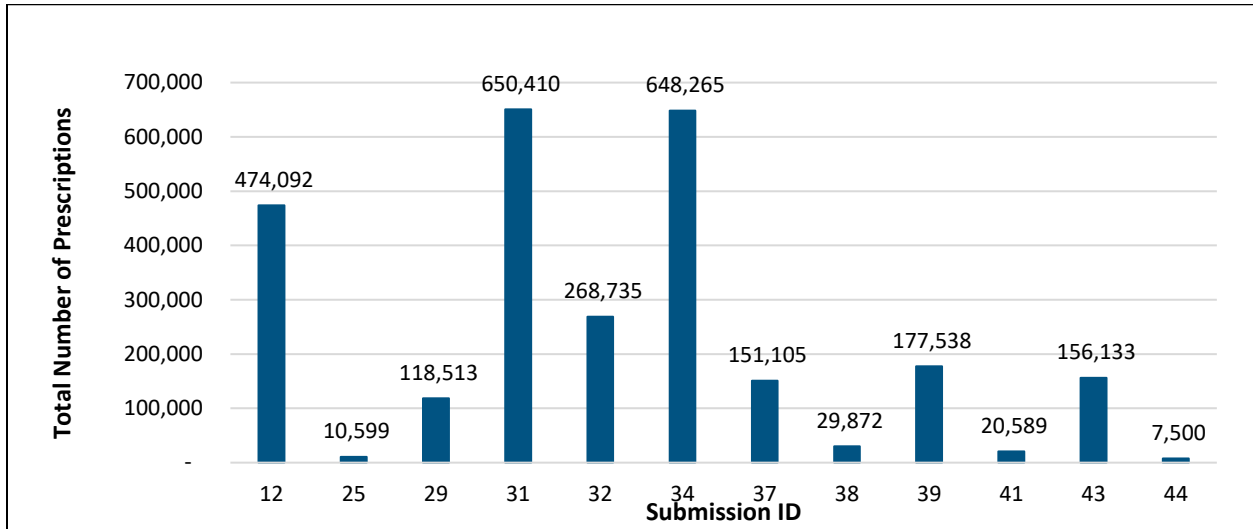
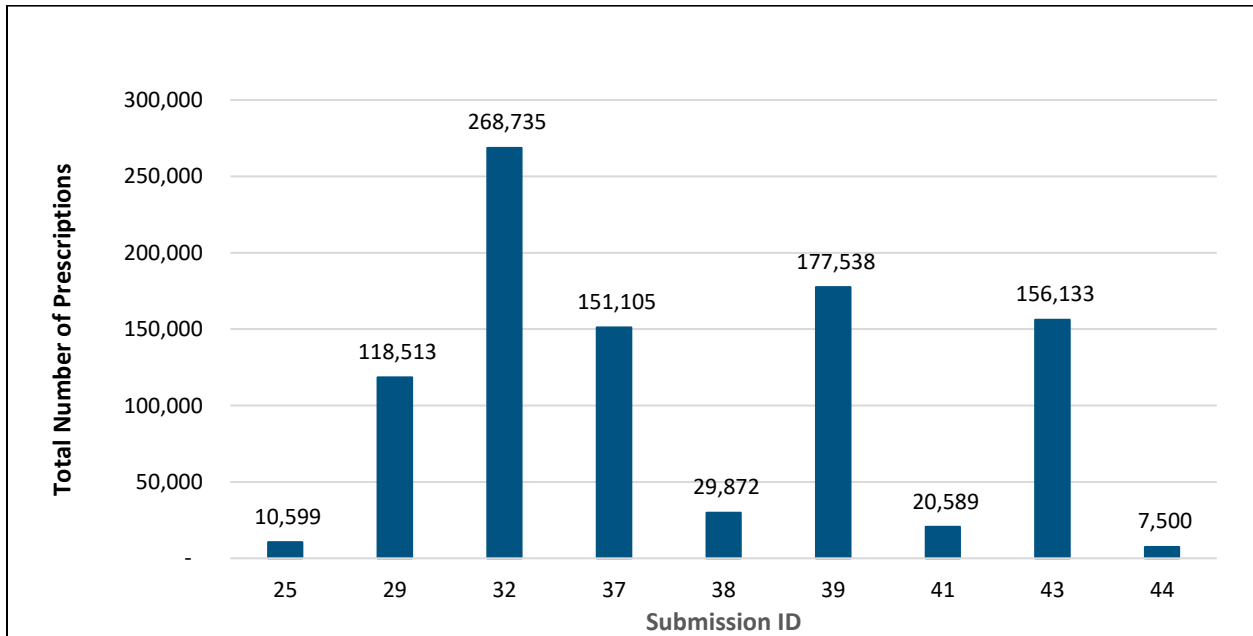


Exhibit 3: Total Number of Prescriptions for Mail Service Pharmacy Program by Organizations with <300,000 Prescriptions



## Data Validation Overview

For 2018 reporting, URAC required that organizations have their measure results reviewed by a URAC-approved Data Validation Vendor (DVV). There were five vendors that participated: Advent Advisory Group, Attest Health Care Advisors, DHS Group, Health Data Decisions, and HSAG.

### Additional Data Validation Procedures

Kiser Healthcare Solutions executed standard procedures for data cleaning and validation prior to finalizing the results presented in this report. All organizations' measure submissions were reviewed for measure component quality. For example, numerators and denominators were checked against rates to ensure accuracy. Also, minimum, mean, median, and maximum rates were benchmarked nationally and regionally to ensure accuracy and to identify potential issues at an individual submission level.

Basic guidelines for identifying valid submissions:

- Measure Denominator is Greater Than 0
- DVV has not deemed the measure submission as materially inaccurate
- Organization has indeed stated it is submitting the measure.

Basic guidelines for aggregate rates:

- Measure Denominator is Greater Than or Equal to 30
- DVV has not deemed the measure submission as materially inaccurate
- Organization has indeed stated it is submitting the measure.



## Results: Mail Service Pharmacy Measures

### Measure 1 – Proportion of Days Covered (PDC) (DM2012-12)

#### Measure Description

This *mandatory* measure assesses the percentage of participants 18 years and older who met the proportion of days covered (PDC) threshold of 80% during the measurement period. A separate rate is calculated for the following medication categories: Beta-blockers (BB); Renin Angiotensin System (RAS) Antagonists; Calcium Channel Blockers (CCB); Statins; Biguanides; Sulfonylureas; Thiazolidinediones; Dipeptidyl Peptidase (DPP)-IV Inhibitors; Diabetes All Class; Antiretrovirals (this measure has a threshold of 90% for at least 2 measures). The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

This measure reports each of the rates separately for each of the organization’s books of business that are included in its URAC accreditation (i.e., commercial, Medicare, and Medicaid).

Exhibit 4: Proportion of Days Covered (80% Threshold) – Commercial

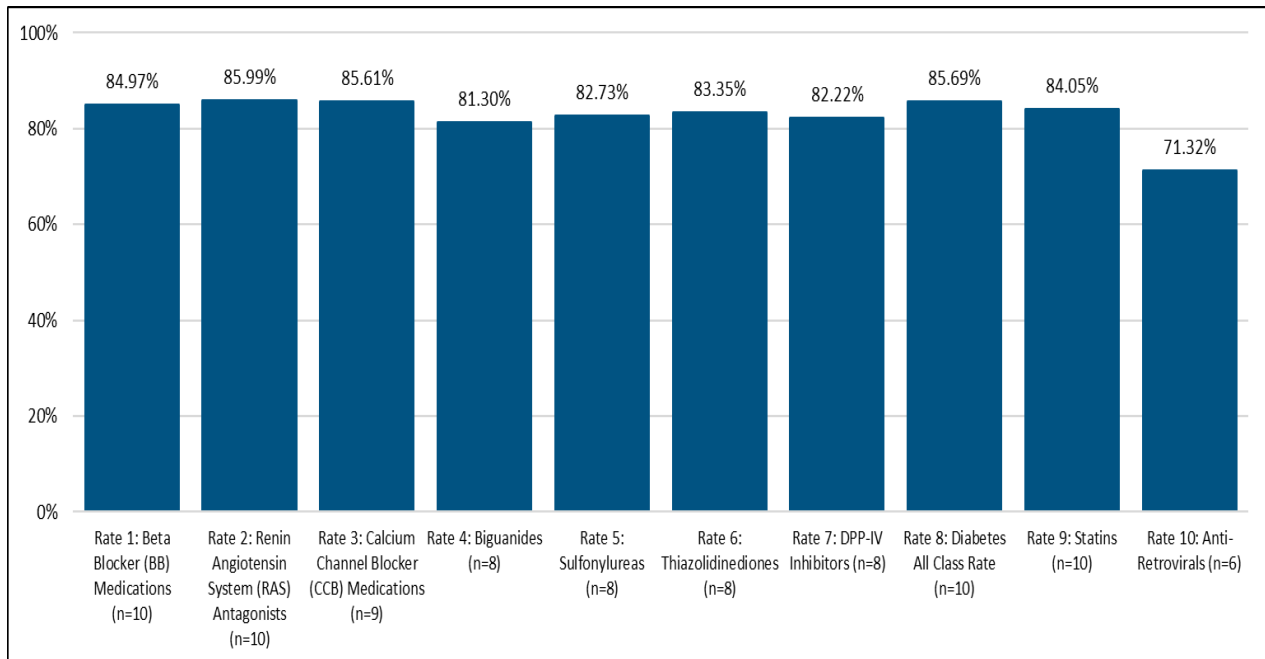


Exhibit 5: Proportion of Days Covered (80% Threshold) – Medicaid

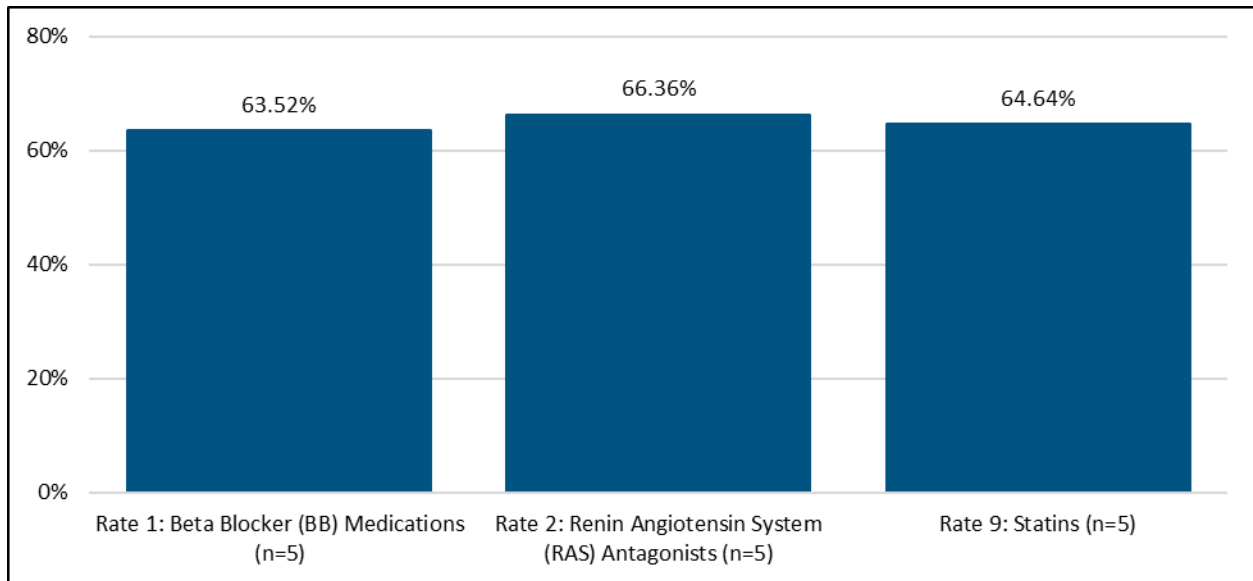
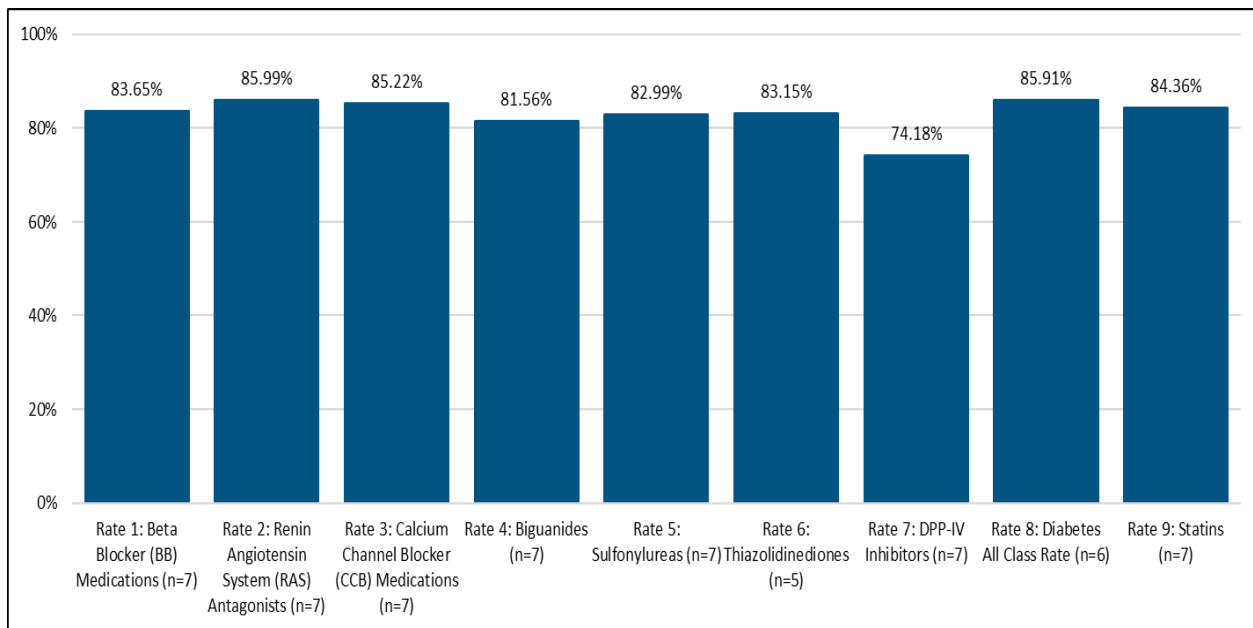


Exhibit 6: Proportion of Days Covered (80% Threshold) – Medicare



## Summary of Findings

Eleven organizations submitted data for this measure for the commercial population, but one organization had small denominators and was not included in the analysis. Eight organizations submitted data for this measure for the Medicaid population, but three organizations had small denominators and were not included in the analysis. Nine organizations submitted data for this measure for the Medicare population, but two organizations had small denominators and were not included in the analysis. While four organizations submitted data for the All Other Population, they all had small denominators and were not included for analysis. Aggregate summary statistics and benchmarks were only produced for Commercial, Medicaid, and Medicare where there were at least five valid submissions for each rate.

### Rate 1: Beta Blocker (BB) Medications

The Commercial aggregate summary rate is 84.97% (n=10, Range: 71.60 – 90.18%) with a mean rate of 82.39% and a median rate of 82.50%.

The Medicaid aggregate summary rate is 63.52% (n=5, Range: 0.00 – 100.00%) with a mean rate of 73.72% and a median rate of 60.35%.

The Medicare aggregate summary rate is 83.65% (n=7, Range: 64.06 – 100.00%) with a mean rate of 82.54% and a median rate of 83.66%.

Exhibit 7: Proportion of Days Covered (80% Threshold) – Rate 1: Beta Blocker Medications

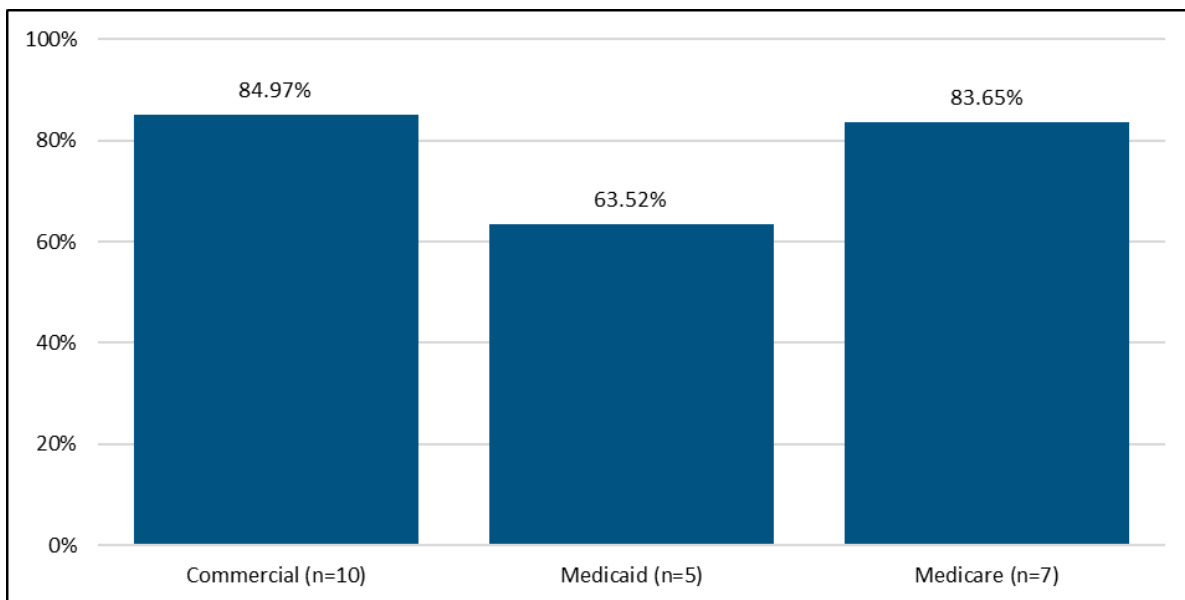


Exhibit 8: Proportion of Days Covered (80% Threshold) – Rate 1: Beta Blocker Medications (Summary Data)

Measure:	Rate 1: Beta Blocker (BB) Medications				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	807,639	950,499	84.97%	82.39%	10
Medicaid	27,780	43,737	63.52%	73.72%	5
Medicare	280,759	335,617	83.65%	82.54%	7

Exhibit 9: Proportion of Days Covered (80% Threshold) – Rate 1: Beta Blocker Medications (Benchmark Data)

Measure:	Rate 1: Beta Blocker (BB) Medications						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	71.60%	77.89%	80.19%	82.50%	85.30%	88.11%	90.18%
Medicaid	0.00%	37.61%	55.74%	60.35%	71.08%	82.50%	100.00%
Medicare	64.06%	72.81%	82.76%	83.66%	84.62%	88.05%	100.00%

**Rate 2: Renin Angiotensin System (RAS) Antagonists**

The Commercial aggregate summary rate is 85.99% (n=10, Range: 53.85 – 90.57%) with a mean rate of 81.05% and a median rate of 84.67%.

The Medicaid aggregate summary rate is 66.36% (n=5, Range: 50.00 – 100.00%) with a mean rate of 73.72% and a median rate of 67.13%.

The Medicare aggregate summary rate is 85.99% (n=7, Range: 75.71 – 100.00%) with a mean rate of 85.70% and a median rate of 86.49%.

Exhibit 10: Proportion of Days Covered (80% Threshold) – Rate 2: Renin Angiotensin System Antagonists

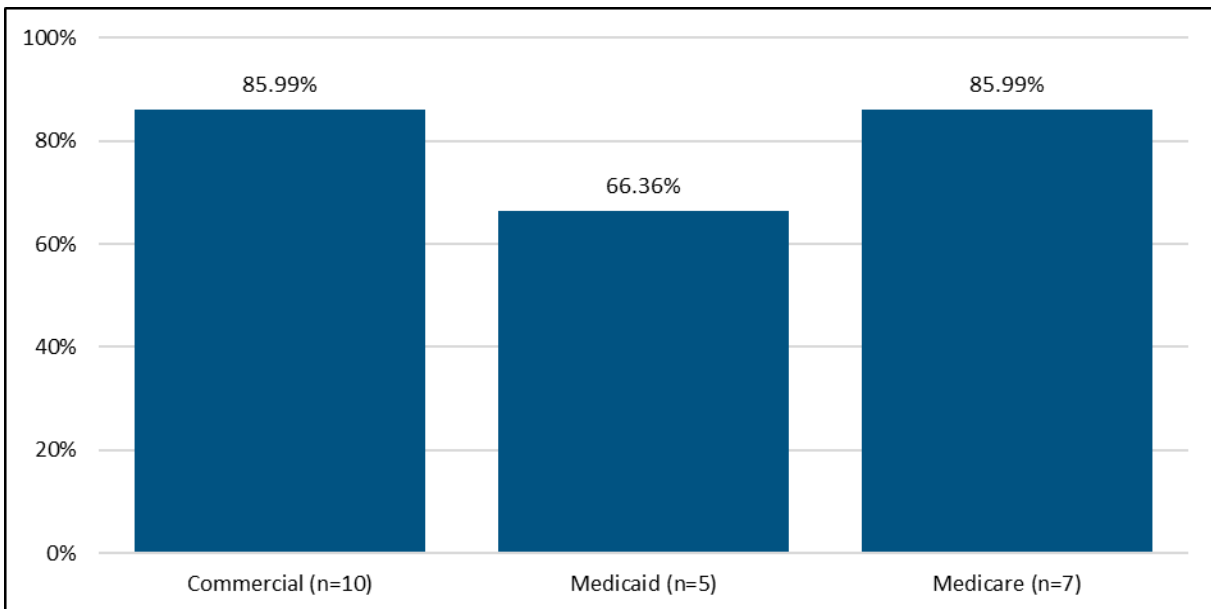


Exhibit 11: Proportion of Days Covered (80% Threshold) – Rate 2: Renin Angiotensin System Antagonists (Summary Data)

Measure:	Rate 2: Renin Angiotensin System (RAS) Antagonists				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	1,523,944	1,772,236	85.99%	81.05%	10
Medicaid	46,107	69,477	66.36%	73.72%	5
Medicare	425,547	494,886	85.99%	85.70%	7

Exhibit 12: Proportion of Days Covered (80% Threshold) – Rate 2: Renin Angiotensin System Antagonists (Benchmark Data)

Measure:	Rate 2: Renin Angiotensin System (RAS) Antagonists						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	53.85%	76.25%	79.87%	84.67%	85.07%	86.76%	90.57%
Medicaid	50.00%	53.63%	61.52%	67.13%	90.00%	100.00%	100.00%
Medicare	75.71%	78.00%	84.04%	86.49%	87.30%	90.70%	100.00%

### Rate 3: Calcium Channel Blocker (CCB) Medications

The Commercial aggregate summary rate is 85.61% (n=9, Range: 76.13 – 95.45%) with a mean rate of 83.88% and a median rate of 83.65%.

The Medicare aggregate summary rate is 85.22% (n=7, Range: 74.88 – 100.00%) with a mean rate of 87.29% and a median rate of 86.06%.

Only four Medicaid organizations submitted complete data for this rate.

Exhibit 13: Proportion of Days Covered (80% Threshold) – Rate 3: Calcium Channel Blocker Medications

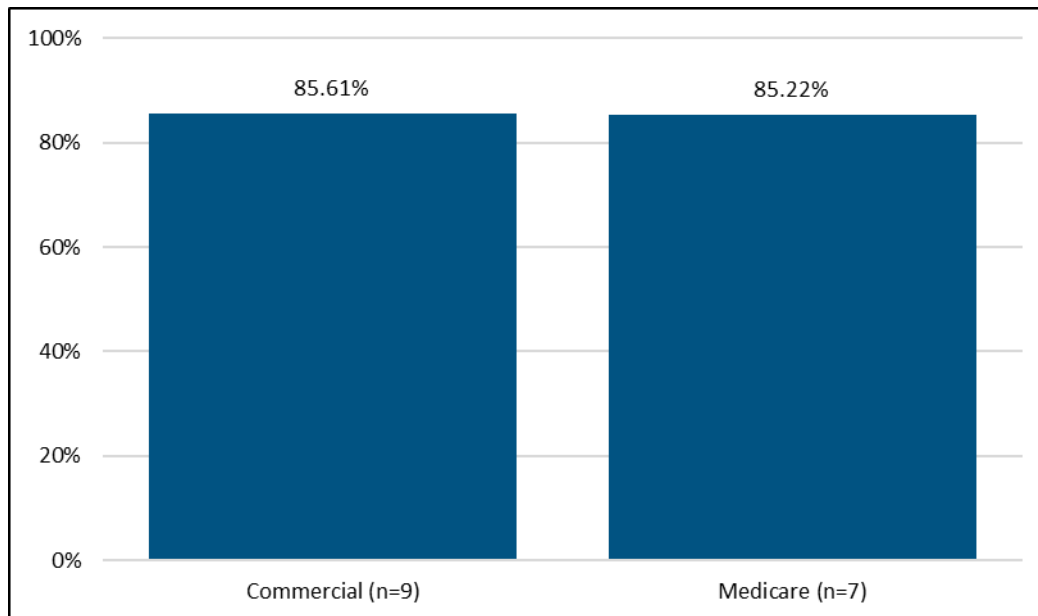




Exhibit 14: Proportion of Days Covered (80% Threshold) – Rate 3: Calcium Channel Blocker Medications (Summary Data)

Measure:	Rate 3: Calcium Channel Blocker (CCB) Medications				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	621,649	726,122	85.61%	83.88%	9
Medicare	210,142	246,596	85.22%	87.29%	7

Exhibit 15: Proportion of Days Covered (80% Threshold) – Rate 3: Calcium Channel Blocker Medications (Benchmark Data)

Measure:	Rate 3: Calcium Channel Blocker (CCB) Medications						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	76.13%	79.25%	79.79%	83.65%	85.47%	90.44%	95.45%
Medicare	74.88%	79.92%	84.95%	86.06%	86.77%	100.00%	100.00%

**Rate 4: Biguanides**

The Commercial aggregate summary rate is 81.30% (n=8, Range: 58.62 – 90.48%) with a mean rate of 79.04% and a median rate of 80.00%.

The Medicare aggregate summary rate is 81.56% (n=7, Range: 71.08 – 84.85%) with a mean rate of 79.33% and a median rate of 80.09%.

Only three Medicaid organizations submitted complete data for this rate.

Exhibit 16: Proportion of Days Covered (80% Threshold) – Rate 4: Biguanides

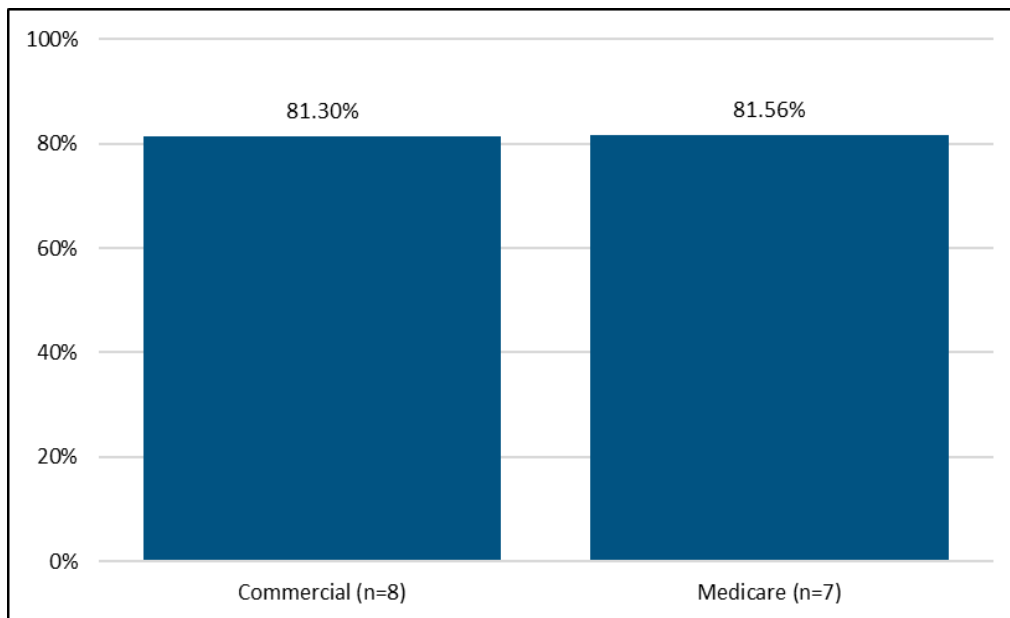


Exhibit 17: Proportion of Days Covered (80% Threshold) – Rate 4: Biguanides

Measure:	Rate 4: Biguanides				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	414,460	509,764	81.30%	79.04%	8
Medicare	102,255	125,379	81.56%	79.33%	7

Exhibit 18: Proportion of Days Covered (80% Threshold) – Rate 4: Biguanides

Measure:	Rate 4: Biguanides						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	58.62%	71.79%	76.41%	80.00%	83.24%	89.15%	90.48%
Medicare	71.08%	74.22%	76.74%	80.09%	82.27%	83.64%	84.85%

### Rate 5: Sulfonylureas

The Commercial aggregate summary rate is 82.73% (n=8, Range: 66.67 – 100.00%) with a mean rate of 81.13% and a median rate of 82.30%.

The Medicare aggregate summary rate is 82.99% (n=7, Range: 73.10 – 100.00%) with a mean rate of 83.81% and a median rate of 83.33%.

Only two Medicaid organizations submitted complete data for this rate.

Exhibit 19: Proportion of Days Covered (80% Threshold) – Rate 5: Sulfonylureas

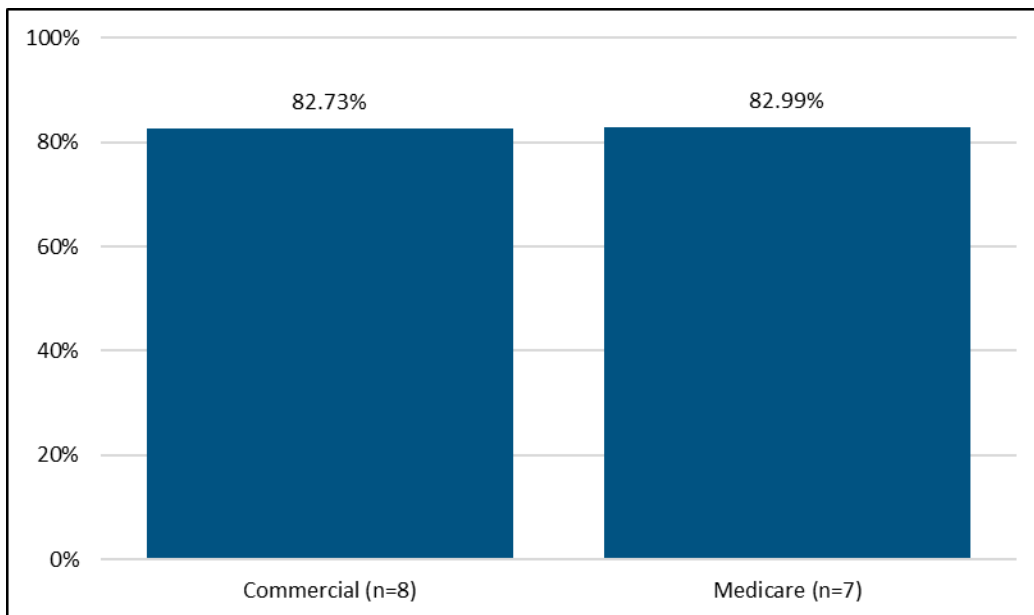






Exhibit 20: Proportion of Days Covered (80% Threshold) – Rate 5: Sulfonylureas (Summary Data)

Measure:	Rate 5: Sulfonylureas				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	140,172	169,443	82.73%	81.13%	8
Medicare	46,392	55,903	82.99%	83.81%	7

Exhibit 21: Proportion of Days Covered (80% Threshold) – Rate 5: Sulfonylureas (Benchmark Data)

Measure:	Rate 5: Sulfonylureas						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	66.67%	71.80%	74.67%	82.30%	85.30%	88.77%	100.00%
Medicare	73.10%	78.98%	82.10%	83.33%	83.62%	88.09%	100.00%

### Rate 6: Thiazolidinediones

The Commercial aggregate summary rate is 83.35% (n=8, Range: 68.57 – 100.00%) with a mean rate of 86.04% and a median rate of 84.00%.

The Medicare aggregate summary rate is 83.15% (n=5, Range: 74.37 – 87.60%) with a mean rate of 82.22% and a median rate of 83.70%.

Only one Medicaid organization submitted complete data for this rate.

Exhibit 22: Proportion of Days Covered (80% Threshold) – Rate 6: Thiazolidinediones

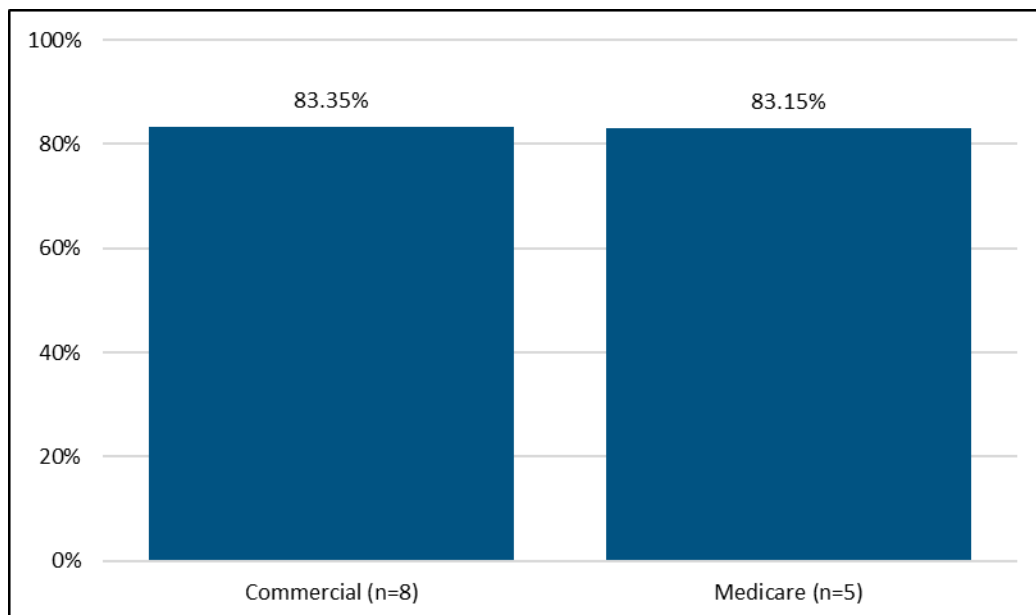


Exhibit 23: Proportion of Days Covered (80% Threshold) – Rate 6: Thiazolidinediones (Summary Data)

Measure:	Rate 6: Thiazolidinediones				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	38,642	46,363	83.35%	86.04%	8
Medicare	10,564	12,704	83.15%	82.22%	5

Exhibit 24: Proportion of Days Covered (80% Threshold) – Rate 6: Thiazolidinediones (Benchmark Data)

Measure:	Rate 6: Thiazolidinediones						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	68.57%	75.80%	79.98%	84.00%	95.98%	100.00%	100.00%
Medicare	74.37%	77.75%	80.22%	83.70%	84.73%	86.47%	87.60%

### Rate 7: Dipeptidyl Peptidase-4 (DPP-IV) Inhibitors

The Commercial aggregate summary rate is 82.22% (n=8, Range: 66.67 – 100.00%) with a mean rate of 81.53% and a median rate of 82.05%.

The Medicare aggregate summary rate is 74.18% (n=7, Range: 56.06 – 100.00%) with a mean rate of 76.04% and a median rate of 75.00%.

Only two Medicaid organizations submitted complete data for this rate.

Exhibit 25: Proportion of Days Covered (80% Threshold) – Rate 7: DPP-IV Inhibitors

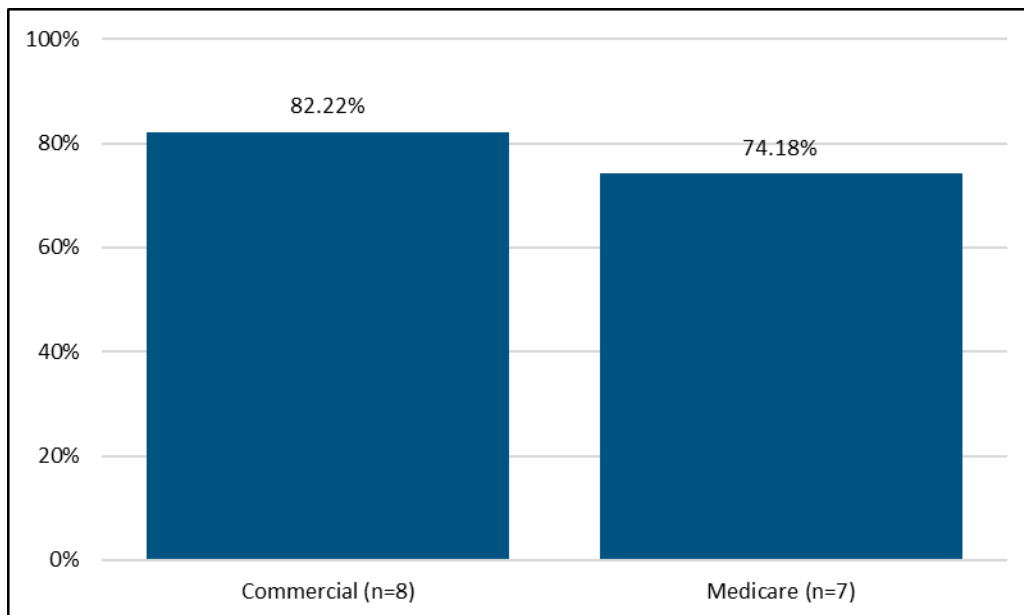


Exhibit 26: Proportion of Days Covered (80% Threshold) – Rate 7: DPP-IV Inhibitors (Summary Data)

Measure:	Rate 7: DPP-IV Inhibitors				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	114,747	139,563	82.22%	81.53%	8
Medicare	22,873	30,834	74.18%	76.04%	7

Exhibit 27: Proportion of Days Covered (80% Threshold) – Rate 7: DPP-IV Inhibitors (Benchmark Data)

Measure:	Rate 7: DPP-IV Inhibitors						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	66.67%	66.67%	76.75%	82.05%	86.96%	90.32%	100.00%
Medicare	56.06%	58.98%	67.35%	75.00%	76.43%	100.00%	100.00%

### Rate 8: Diabetes All Class Rate

The Commercial aggregate summary rate is 85.69% (n=10, Range: 56.99 – 89.94%) with a mean rate of 79.10% and a median rate of 78.89%.

The Medicare aggregate summary rate is 85.91% (n=6, Range: 74.26 – 100.00%) with a mean rate of 84.72% and a median rate of 84.80%.

Only three Medicaid organizations reported data for this measure.

Exhibit 28: Proportion of Days Covered (80% Threshold) – Rate 8: Diabetes All Class Rate

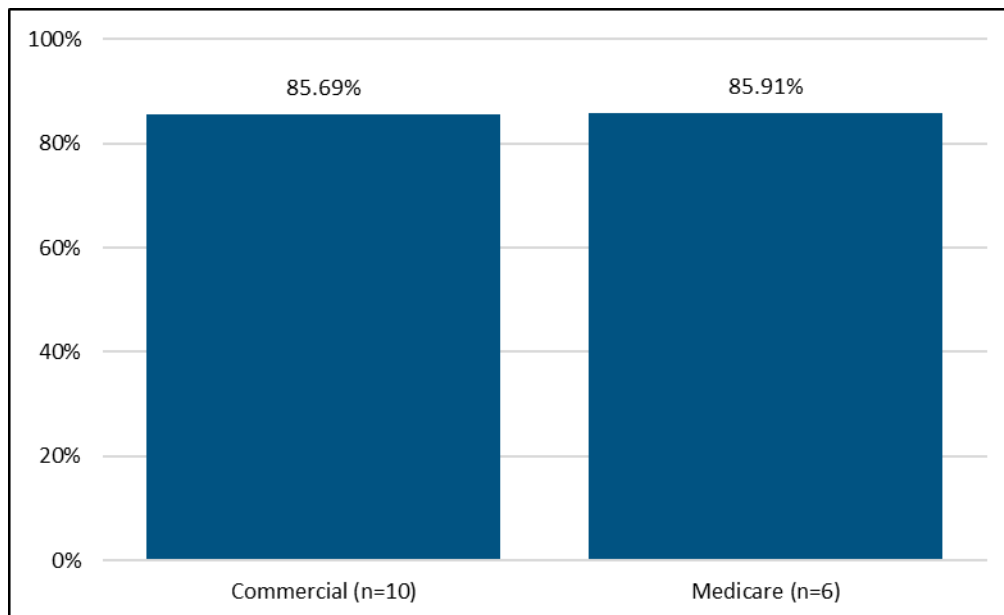


Exhibit 29: Proportion of Days Covered (80% Threshold) – Rate 8: Diabetes All Class Rate (Summary Data)

Measure:	Rate 8: Diabetes All Class Rate				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	489,252	570,964	85.69%	79.10%	10
Medicare	130,270	151,627	85.91%	84.72%	6

Exhibit 30: Proportion of Days Covered (80% Threshold) – Rate 8: Diabetes All Class Rate (Benchmark Data)

Measure:	Rate 8: Diabetes All Class Rate						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	56.99%	71.43%	76.63%	78.89%	85.75%	87.29%	89.94%
Medicare	74.26%	78.28%	80.64%	84.80%	86.14%	91.08%	100.00%

### Rate 9: Statins

The Commercial aggregate summary rate is 84.05% (n=10, Range: 64.29 – 90.43%) with a mean rate of 80.62% and a median rate of 82.73%.

The Medicaid aggregate summary rate is 64.64% (n=5, Range: 55.66 – 100.00%) with a mean rate of 79.00% and a median rate of 82.78%.

The Medicare aggregate summary rate is 84.36% (n=7, Range: 72.95 – 100.00%) with a mean rate of 86.30% and a median rate of 85.47%.

Exhibit 31: Proportion of Days Covered (80% Threshold) – Rate 9: Statins

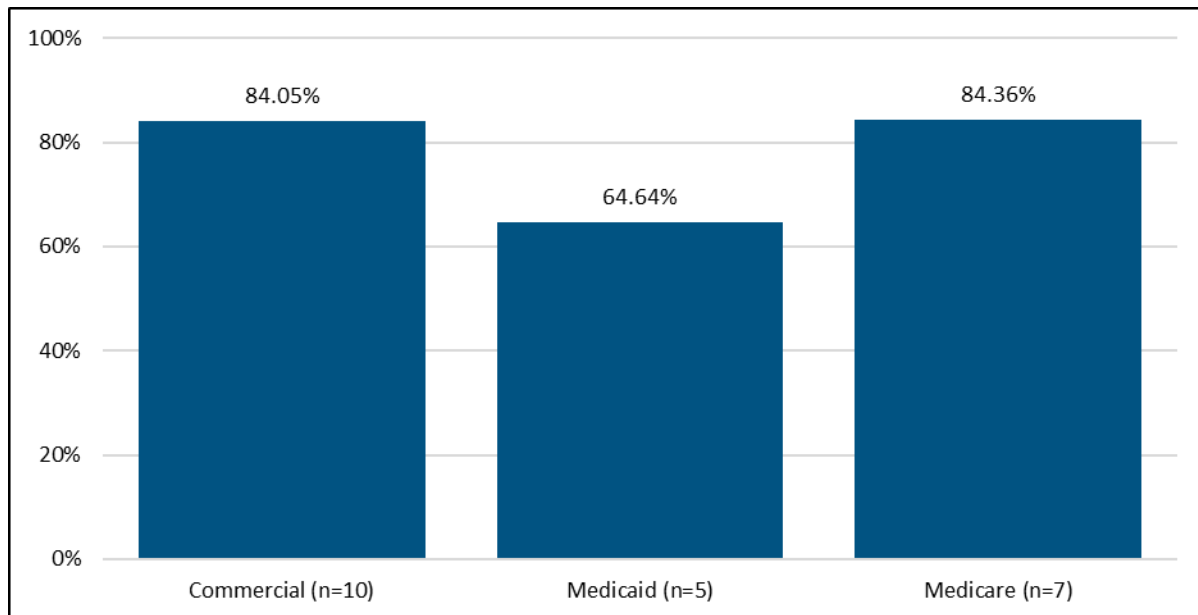




Exhibit 32: Proportion of Days Covered (80% Threshold) – Rate 9: Statins (Summary Data)

Measure:	Rate 9: Statins				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	1,541,277	1,833,734	84.05%	80.62%	10
Medicaid	38,157	59,033	64.64%	79.00%	5
Medicare	486,646	576,846	84.36%	86.30%	7

Exhibit 33: Proportion of Days Covered (80% Threshold) – Rate 9: Statins (Benchmark Data)

Measure:	Rate 9: Statins						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	64.29%	68.54%	78.75%	82.73%	85.19%	86.74%	90.43%
Medicaid	55.66%	58.80%	63.53%	82.78%	89.45%	100.00%	100.00%
Medicare	72.95%	80.90%	84.86%	85.47%	88.89%	92.33%	100.00%

### Rate 10: Anti-Retroviral Medications

The Commercial aggregate summary rate is 71.32% (n=6, Range: 54.93 – 95.83%) with a mean rate of 75.38% and a median rate of 77.23%.

Only one Medicaid organization submitted data for this rate, and only four Medicare organizations submitted data.

Exhibit 34: Proportion of Days Covered (80% Threshold) – Rate 10: Anti-Retroviral Medications

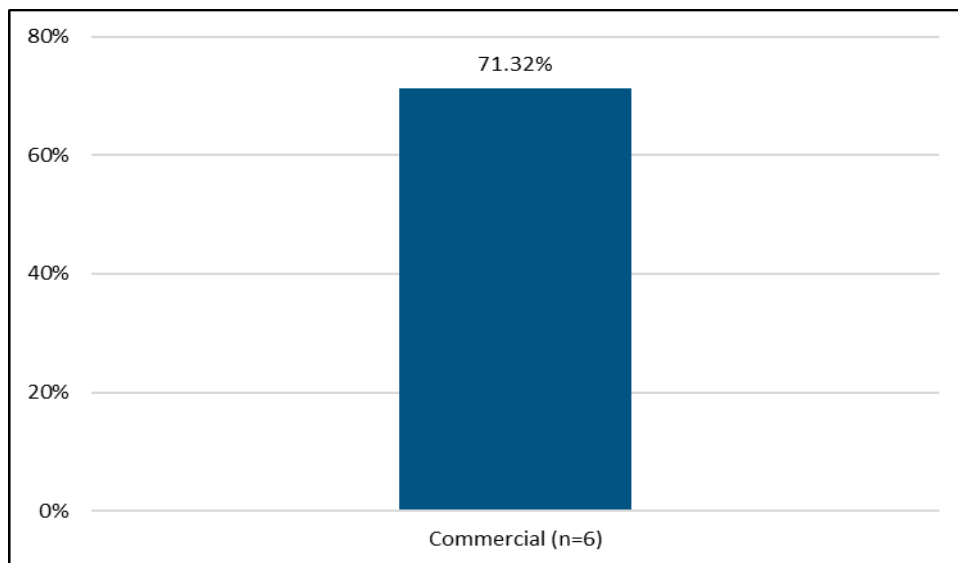


Exhibit 35: Proportion of Days Covered (80% Threshold) – Rate 10: Anti-Retroviral Medications (Summary Data)

Measure:	Rate 10: Anti-Retroviral Medications				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	13,042	18,235	71.32%	75.38%	6

Exhibit 36: Proportion of Days Covered (80% Threshold) – Rate 10: Anti-Retroviral Medications (Benchmark Data)

Measure:	Rate 10: Anti-Retroviral Medications						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	54.93%	61.25%	67.02%	77.23%	80.90%	89.62%	95.83%

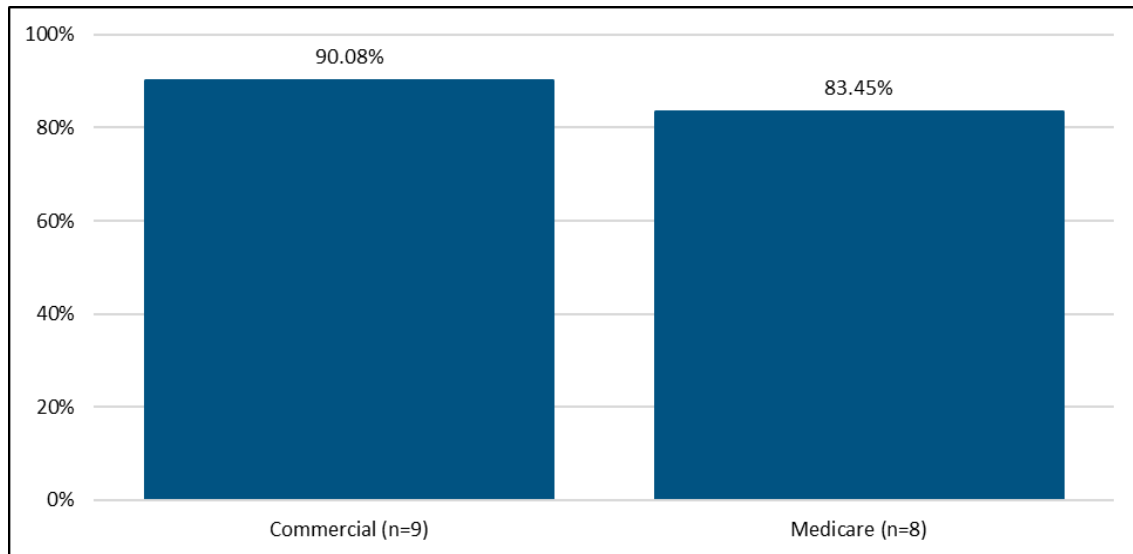


## Measure 2 – Adherence to Non-Warfarin Oral Anticoagulants (DTM2015-01)

### Measure Description

This *mandatory* measure assesses the percentage of patients 18 years and older who met the Proportion of Days Covered (PDC) threshold of 80% during the measurement period for non-warfarin oral anticoagulants. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

Exhibit 37: Adherence to Non-Warfarin Oral Anticoagulants



### Summary of Findings

Nine organizations submitted data for commercial, and eight submitted for Medicare. Only one organization submitted complete data for Medicaid.

The Commercial aggregate summary rate is 90.08% (n=9, Range: 59.01 – 100.00%) with a mean rate of 86.75% and a median rate of 88.58%.

The Medicare aggregate summary rate is 83.45% (n=8, Range: 25.68 – 100.00%) with a mean rate of 75.30% and a median rate of 80.50%.

Exhibit 38: Adherence to Non-Warfarin Oral Anticoagulants (Summary Data)

Measure:	Adherence to Non-Warfarin Oral Anticoagulants				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	76,343	84,754	90.08%	86.75%	9
Medicare	28,116	33,691	83.45%	75.30%	8

Exhibit 39: Adherence to Non-Warfarin Oral Anticoagulants (Benchmark Data)

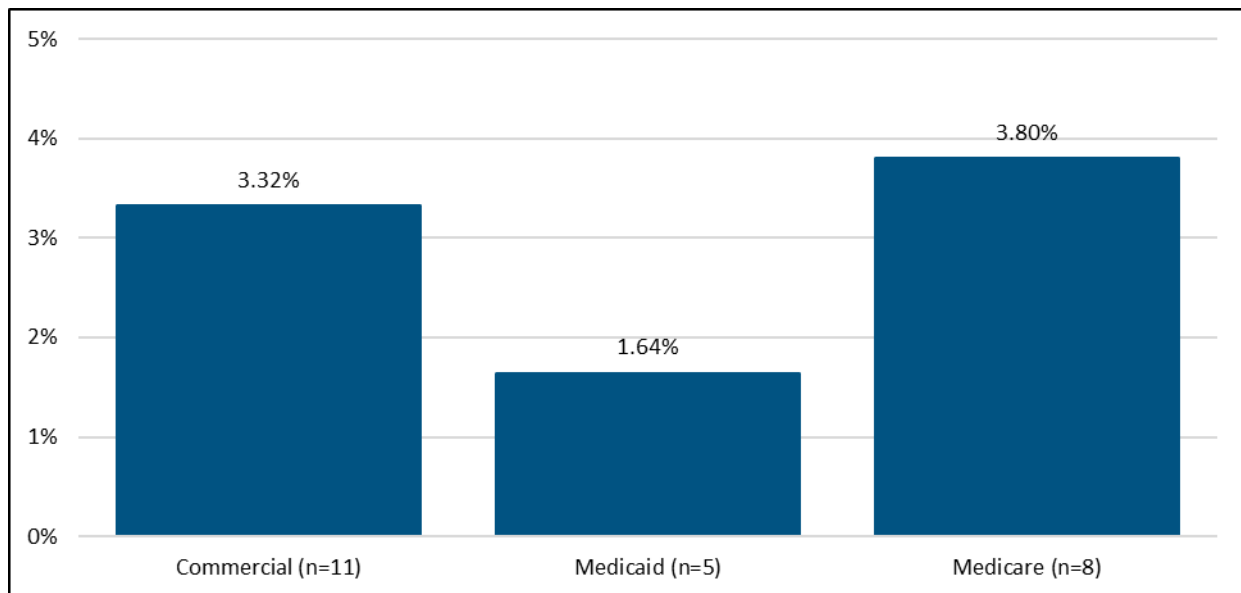
Measure:	Adherence to Non-Warfarin Oral Anticoagulants						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	59.01%	78.89%	85.01%	88.58%	90.33%	100.00%	100.00%
Medicare	25.68%	56.79%	65.60%	80.50%	85.45%	100.00%	100.00%

## Measure 3 – Drug-Drug Interactions (DM2012-13)

### Measure Description

This *mandatory* measure assesses the percentage of patients who received a prescription for a target medication during the measurement period and who were dispensed a concurrent prescription for a precipitant medication. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc. **A lower rate represents better performance.**

Exhibit 40: Drug-Drug Interactions



Note: Lower rate represents better performance.

### Summary of Findings

There were 11 organizations that submitted data for commercial, five submitted for Medicaid, and eight submitted for Medicare.

The Commercial aggregate summary rate is 3.32% (n=11, Range: 42.70 – 0.00%) with a mean rate of 5.05% and a median rate of 1.89%.

The Medicaid aggregate summary rate is 1.64% (n=5, Range: 10.96 – 0.00%) with a mean rate of 1.88% and a median rate of 0.32%.

The Medicare aggregate summary rate is 3.80% (n=8, Range: 49.42 – 0.00%) with a mean rate of 6.80% and a median rate of 2.45%.

Exhibit 41: Drug-Drug Interactions (Summary Data)

Measure:	Drug-Drug Interactions				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Commercial	27,258	820,568	3.32%	5.05%	11
Medicaid	1,149	69,950	1.64%	1.88%	5
Medicare	24,913	655,677	3.80%	6.80%	8

Exhibit 42: Drug-Drug Interactions (Benchmark Data)

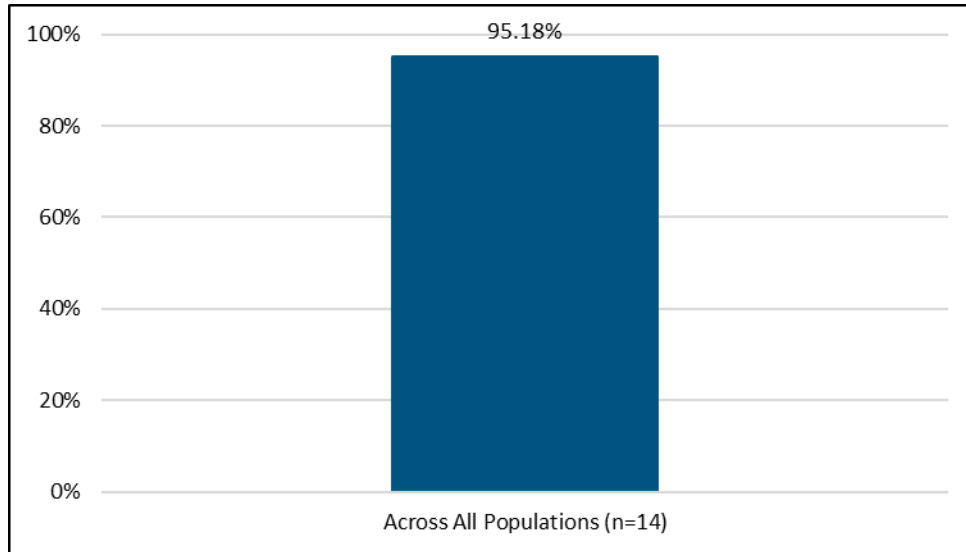
Measure:	Drug-Drug Interactions						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Commercial	42.70%	2.93%	2.65%	1.89%	1.04%	0.39%	0.00%
Medicaid	10.96%	4.46%	1.50%	0.32%	0.00%	0.00%	0.00%
Medicare	49.42%	12.24%	2.90%	2.45%	0.29%	0.22%	0.00%

## Measure 4 – Generic Dispensing Rates (MP2012-09)

### Measure Description

This *mandatory* measure assesses the percentage of all prescriptions that were dispensed as generics, branded generics, or brands for which members paid the generic co-pay.

Exhibit 43: Generic Dispensing Rates



### Summary of Findings

Fourteen organizations submitted data combined for all books of business. The aggregate summary rate is 95.18% (n=14, Range: 57.26 – 99.14%) with a mean rate of 91.49% and a median rate of 96.81%.

Exhibit 44: Generic Dispensing Rates (Summary Data)

Measure:	Generic Dispensing Rates				
Line of Business	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
All BOB	70,352,002	73,915,822	95.18%	91.49%	14

Exhibit 45: Generic Dispensing Rates (Benchmark Data)

Measure:	Generic Dispensing Rates						
Line of Business	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
All BOB	57.26%	80.64%	90.54%	96.81%	98.08%	87.78%	99.14%

## Measure 5 – Call Center Performance (DTM2010-04)

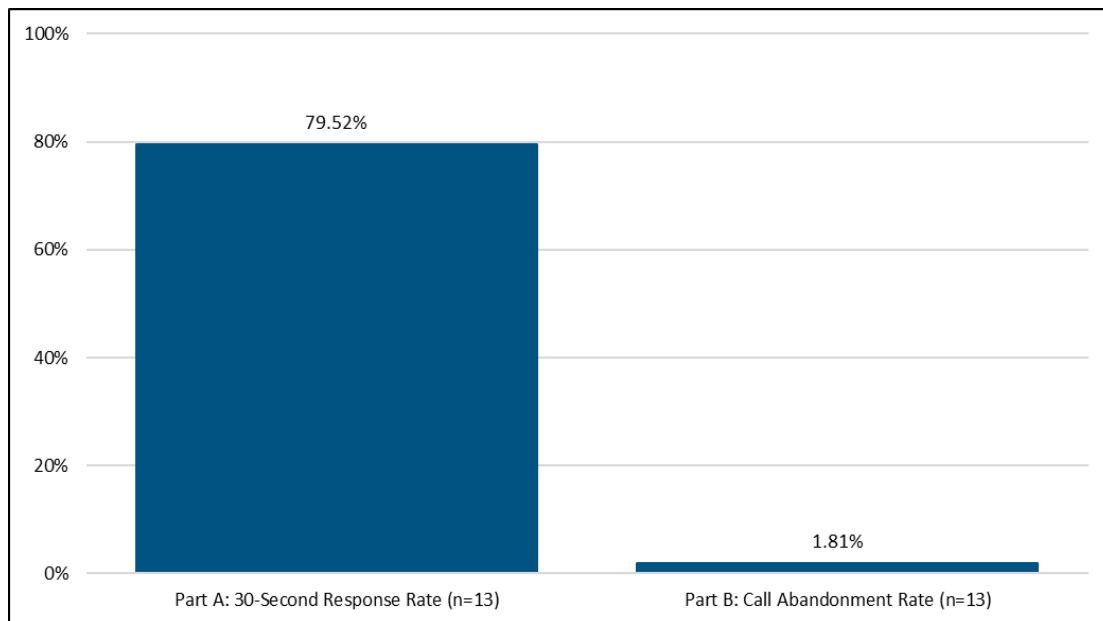
### Measure Description

This *mandatory* measure has two parts:

- Part A evaluates the percentage of calls during normal business hours to the organization’s call service center(s) during the measurement period that were answered by a live voice within 30 seconds;
- Part B evaluates the percentage of calls made during normal business hours to the organization’s call service center(s) during the reporting year that were abandoned by callers before being answered by a live customer service representative.

There is no stratification for this measure, results are reported aggregated across all populations. For Part A, a higher rate represents better performance. **For Part B, a lower rate represents better performance.**

Exhibit 46: Call Center Performance



Note: Lower rate represents better performance for Part B: Call Abandonment.

### Summary of Findings

Thirteen organizations submitted data combined for all books of business.

The aggregate summary rate for Part A: 30-Second Response Rate is 79.52% (n=13, Range: 60.14 – 96.20%) with a mean rate of 80.43% and a median rate of 81.55%.

The aggregate summary rate for Part B: Call Abandonment Rate is 1.81% (n=13, Range: 9.23 – 1.34%) with a mean rate of 3.73% and a median rate of 3.55%.

Exhibit 47: Call Center Performance (Summary Data)

Measure:	Call Center Performance				
	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: 30-Second Response Rate	34,605,127	43,517,403	79.52%	80.43%	13
Part B: Call Abandonment Rate	789,784	43,516,463	1.81%	3.73%	13

Exhibit 48: Call Center Performance (Benchmark Data)

Measure:	Call Center Performance						
	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Part A: 30-Second Response Rate	96.20%	94.40%	86.68%	81.55%	72.56%	69.86%	60.14%
Part B: Call Abandonment Rate	9.23%	7.37%	4.54%	3.55%	1.73%	1.43%	1.34%

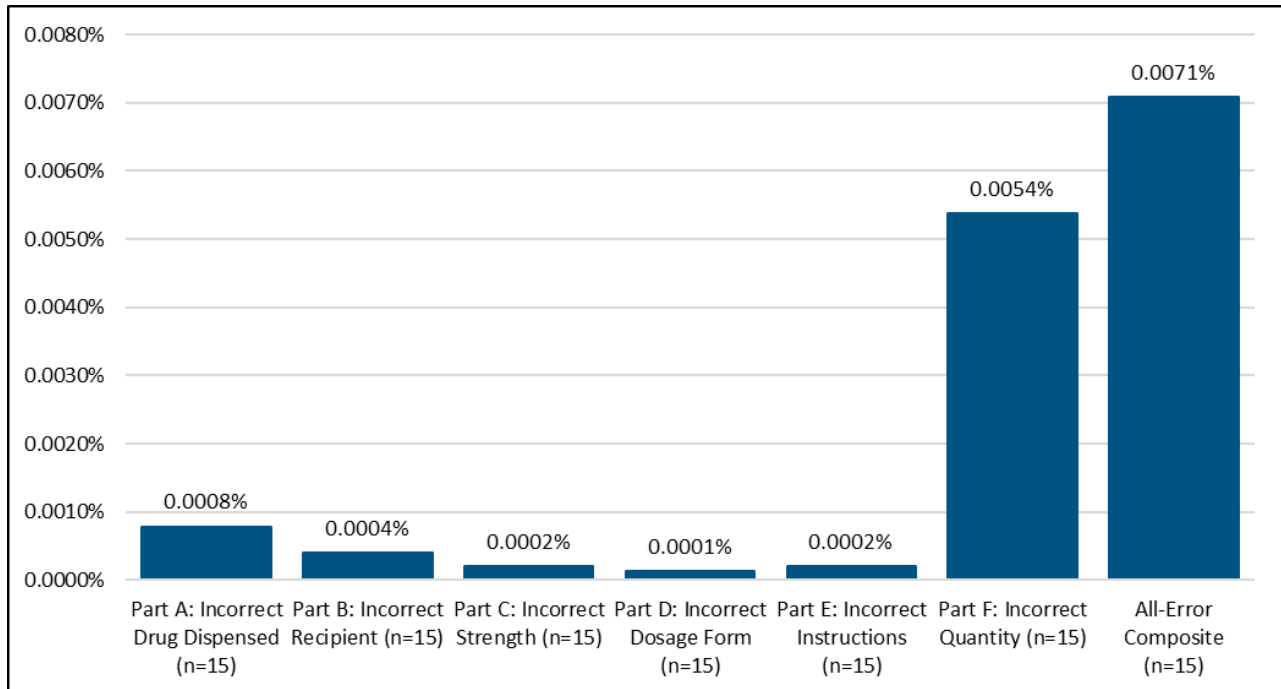
## Measure 6 – Dispensing Accuracy (MP2012-06)

### Measure Description

This *mandatory* six-part measure and composite roll-up assesses the percentage of prescriptions that the organization dispensed inaccurately. Measure parts include: (A) Incorrect Drug and/or Product Dispensed; (B) Incorrect Recipient; (C) Incorrect Strength; (D) Incorrect Dosage Form; (E) Incorrect Instructions; (F) Incorrect Quantity. Each part of this measure is reported separately, and an aggregate error rate or Composite Score is calculated. **A lower rate represents better performance.**

There is no stratification for this measure, results are reported aggregated across all populations.

Exhibit 49: Dispensing Accuracy



Note: Lower rate represents better performance.

### Summary of Findings

All 15 organizations submitted data combined for all books of business.

The aggregate summary rate for Part A: Incorrect Drug Dispensed is 0.0008% or 0.8 incorrect drugs dispensed per 100,000. The range is 0.0480 – 0.0000% with a mean rate of 0.01% and median of 0.0034%.

The aggregate summary rate for Part B: Incorrect Recipient is 0.0004% or 0.4 drugs dispensed to an incorrect recipient per 100,000 dispensed. The range is 0.0373 – 0.0000% with a mean rate of 0.01% and median of 0.0005%.

The aggregate summary rate for Part C: Incorrect Strength is 0.0002% or 0.2 drugs with incorrect strength per 100,000 dispensed. The range is 0.0151 – 0.0000% with a mean rate of 0.00% and median of 0.0005%.



The aggregate summary rate for Part D: Incorrect Dosage Form is 0.0001% or 0.1 drugs with incorrect dosage per 100,000 dispensed. The range is 0.0094 – 0.0000% with a mean rate of 0.00% and median of 0.0002%.

The aggregate summary rate for Part E: Incorrect Instructions is 0.0002% or 0.2 drugs with incorrect patient instructions per 100,000 dispensed. The range is 0.0057 – 0.0000% with a mean rate of 0.0008% and median of 0.0008%.

The aggregate summary rate for Part F: Incorrect Quantity is 0.0054% or 5.4 drugs with incorrect quantity per 100,000 dispensed. The range is 0.0644 – 0.0000% with a mean rate of 0.0109% and median of 0.0143%.

The aggregate summary rate for the All-Error Composite is 0.0071% or 7.1 drugs with some form of error per 100,000 dispensed. The range is 0.1294 – 0.0000% with a mean rate of 0.0302% and median of 0.0143%.

Exhibit 50: Dispensing Accuracy (Summary Data)

Measure:	Dispensing Accuracy				
	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: Incorrect Drug Dispensed	1,230	156,863,464	0.0008%	0.01%	15
Part B: Incorrect Recipient	620	156,863,464	0.0004%	0.01%	15
Part C: Incorrect Strength	308	156,863,464	0.0002%	0.00%	15
Part D: Incorrect Dosage Form	195	156,863,464	0.0001%	0.00%	15
Part E: Incorrect Instructions	313	156,863,464	0.0002%	0.0008%	15
Part F: Incorrect Quantity	8,446	156,863,464	0.0054%	0.0109%	15
All-Error Composite	11,111	156,863,464	0.0071%	0.0302%	15

Exhibit 51: Dispensing Accuracy (Benchmark Data)

Measure:	Dispensing Accuracy						
	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Part A: Incorrect Drug Dispensed	0.0480%	0.0209%	0.0105%	0.0034%	0.0004%	0.0001%	0.0000%
Part B: Incorrect Recipient	0.0373%	0.0283%	0.0029%	0.0005%	0.0001%	0.0000%	0.0000%
Part C: Incorrect Strength	0.0151%	0.0065%	0.0040%	0.0005%	0.0000%	0.0000%	0.0000%
Part D: Incorrect Dosage Form	0.0094%	0.0048%	0.0018%	0.0002%	0.0000%	0.0000%	0.0000%
Part E: Incorrect Instructions	0.0057%	0.0020%	0.0008%	0.0001%	0.0000%	0.0000%	0.0000%
Part F: Incorrect Quantity	0.0644%	0.0311%	0.0136%	0.0026%	0.0003%	0.0000%	0.0000%
All-Error Composite	0.1294%	0.0963%	0.0305%	0.0143%	0.0057%	0.0011%	0.0000%

## Measure 7 – Distribution Accuracy (MP2012-07)

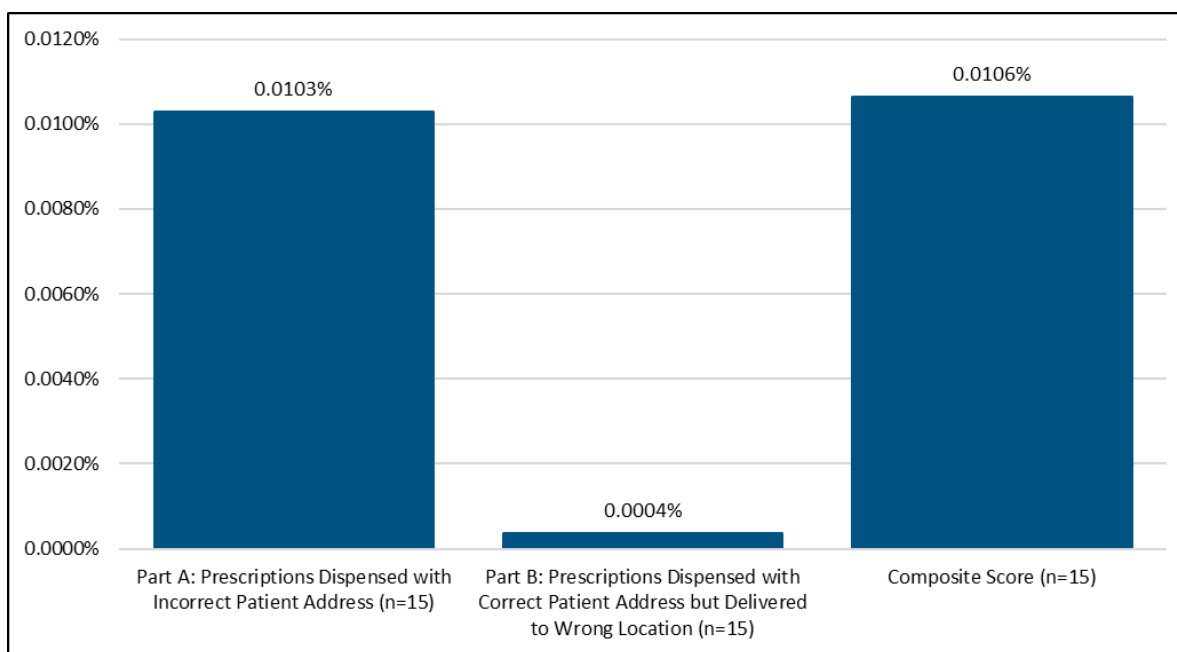
### Measure Description

This *mandatory* measure assesses the percentage of prescriptions delivered to the wrong recipient. **A lower rate represents better performance.**

- Part A assesses the percentage of prescriptions mailed with an incorrect address;
- Part B assesses the percentage of prescriptions mailed with a correct address that were not delivered to the correct location.

Each part of this measure is reported separately, and an aggregate error rate or Composite Score is calculated. There is no stratification for this measure, results are reported in aggregate across all populations.

Exhibit 52: Distribution Accuracy



Note: Lower rate represents better performance.

### Summary of Findings

All 15 organizations submitted data combined for all books of business.

The aggregate summary rate for Part A is 0.0103% or 10.3 incorrect patient addresses per 100,000 prescriptions dispensed. The range is 0.0711 – 0.0000%, with a mean rate of 0.0182% and a median rate of 0.0094%.

The aggregate summary rate for Part B is 0.0004% or .4 prescriptions dispensed with the correct patient address but delivered to the wrong location for every 100,000 dispensed. The range is 0.1367 – 0.0000%, with a mean rate of 0.0158% and a median rate of 0.0189%.

The aggregate summary rate for the Part C: Composite Score is 0.0106% or 10.6 prescriptions per 100,000 dispensed that have an error. The range is 0.1797 – 0.0000%, with a mean rate of 0.0341% and a median rate of 0.0189%.



Exhibit 53: Distribution Accuracy (Summary Data)

Measure:	Distribution Accuracy				
	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: Prescriptions Dispensed with Incorrect Patient Address	16,130	156,863,464	0.0103%	0.0182%	15
Part B: Prescriptions Dispensed with Correct Patient Address but Delivered to Wrong Location	563	156,863,464	0.0004%	0.0158%	15
Composite Score	16,693	156,863,464	0.0106%	0.0341%	15

Exhibit 54: Distribution Accuracy (Benchmark Data)

Measure:	Distribution Accuracy						
	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Part A: Prescriptions Dispensed with Incorrect Patient Address	0.0711%	0.0403%	0.0325%	0.0094%	0.0012%	0.0001%	0.0000%
Part B: Prescriptions Dispensed with Correct Patient Address but Delivered to Wrong Location	0.1367%	0.0400%	0.0087%	0.0005%	0.0000%	0.0000%	0.0000%
Composite Score	0.1797%	0.0760%	0.0383%	0.0189%	0.0015%	0.0001%	0.0000%

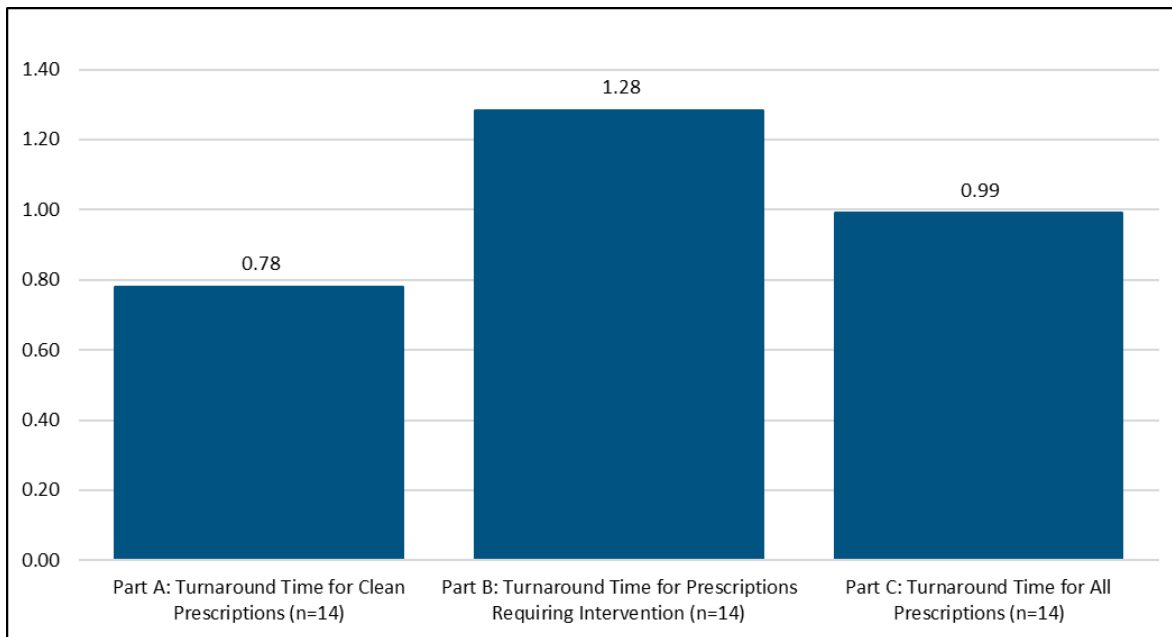
## Measure 8 – Turnaround Time for Prescriptions (MP2012-08)

### Measure Description

This *mandatory* three-part measure assesses the average speed with which the organization fills prescriptions. Part A measures prescription turnaround time for clean prescriptions; Part B measures prescription turnaround time for prescriptions that required intervention; and Part C measures prescription turnaround time for all prescriptions.

There is no stratification for this measure, results are reported aggregated across all populations. Parts A and B of this measure are mutually exclusive; if a prescription requires an intervention, it is counted in Part B; when it becomes “clean,” it is not counted again in Part A. The number of business days to fill a prescription is the number of business days between the day the prescription is received and the day it is shipped from the facility. For the purposes of this measure, a prescription has been “received” when the prescription is assigned an electronically identifiable or otherwise reportable system date denoting the point of entry of the prescription into the pharmacy dispensing system. It is assumed that prescriptions are entered into the organization’s electronic system within 1 business day of receipt. The unit of analysis in this measure is individual prescriptions, not orders (which may include multiple prescriptions). This unit of analysis was chosen because prescriptions in the same order may be sent out separately. Prescriptions that cannot be filled immediately (i.e., must be sent back or held because of benefit design, for example, when the refill is submitted too early), are excluded from this measure. They would be counted later (in either Part A or B, as appropriate) when they are either resubmitted or released for processing at the appropriate time.

Exhibit 55: Turnaround Time for Prescriptions



## Summary of Findings

Fourteen organizations submitted data combined for all books of business.

The aggregate summary rate for Part A: Turnaround Time for Clean Prescriptions is 0.78 days (n=14, Range: 4.29 – 0.00 days) with a mean of 1.57 days and a median of 1.08 days.

The aggregate summary rate for Part B: Turnaround Time for Prescriptions Requiring Intervention is 1.28 days (n=14, Range: 23.37 – 1.01 days) with a mean of 5.06 days and a median of 2.26 days.

The aggregate summary rate for Part C: Turnaround Time for All Prescriptions is 0.99 days (n=14, Range: 17.04 – 0.77 days) with a mean of 3.09 days and a median of 1.64 days.

Exhibit 56: Turnaround Time for Prescriptions (Summary Data)

Measure:	Turnaround Time for Prescriptions				
	Total Numerator	Total Denominator	Aggregate Summary Rate	Mean	Submissions
Part A: Turnaround Time for Clean Prescriptions	71,931,858	92,090,613	0.78	1.57	14
Part B: Turnaround Time for Prescriptions Requiring Intervention	84,762,808	66,001,567	1.28	5.06	14
Part C: Turnaround Time for All Prescriptions	156,811,244	158,081,581	0.99	3.09	14

Exhibit 57: Turnaround Time for Prescriptions (Benchmark Data)

Measure:	Turnaround Time for Prescriptions						
	Min	10 <sup>th</sup>	25 <sup>th</sup>	50 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	Max
Part A: Turnaround Time for Clean Prescriptions	4.29	3.70	1.88	1.08	0.79	0.40	0.00
Part B: Turnaround Time for Prescriptions Requiring Intervention	23.37	11.47	5.19	2.26	1.77	1.28	1.01
Part C: Turnaround Time for All Prescriptions	17.04	5.15	3.06	1.64	1.13	0.90	0.77

## **Measure 9: Use of High-Risk Medications in the Elderly (HRM) (HIM2013-21)**

### **Measure Description**

This *exploratory* measure assesses the percentage of patients 65 years of age and older who received two or more prescription fills for a high-risk medication during the measurement period. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

### **Summary of Findings**

Only two organizations submitted data for this measure. Analysis and benchmarks were not produced given there were less than five valid data submissions.

## Measure 10: Antipsychotic Use in Children Under 5 Years Old (PH2015-02)

### Measure Description

This *exploratory* measure assesses the percentage of children under age 5 using antipsychotic medications during the measurement period. **A lower rate represents better performance.** The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

### Summary of Findings

Only two organizations submitted data for this measure. Analysis and benchmarks were not produced given there were less than five valid data submissions.



## Measure 11: Use of Benzodiazepine Sedative Hypnotic Medications in the Elderly (PH2015-03)

### Measure Description

This *exploratory* measure assesses the percentage of individuals 65 years of age and older that received two or more prescription fills for any benzodiazepine sedative hypnotic for a cumulative period of more than 90 days. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

### Summary of Findings

Only two organizations submitted data for this measure. Analysis and benchmarks were not produced given there were less than five valid data submissions.

## Measure 12: Diabetes Medication Dosing (PH2015-04)

### Measure Description

This *exploratory* measure assesses the percentage of patients who were dispensed a dose higher than the daily recommended dose for the following therapeutic categories of oral hypoglycemics: biguanides, sulfonylureas, thiazolidinediones, and DPP-IV inhibitors. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

### Summary of Findings

Only two organizations submitted data for this measure. Analysis and benchmarks were not produced given there were less than five valid data submissions.

## Measure 13: Statin Use in Persons with Diabetes (PH2015-06)

### Measure Description

This *exploratory* measure assesses the percentage of patients ages 40-75 years who were dispensed a medication for diabetes that receive a statin medication. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

### Summary of Findings

Only two organizations submitted data for this measure. Analysis and benchmarks were not produced given there were less than five valid data submissions.

## Measure 14: Consumer Experience with Pharmacy Services (PH2015-05)

### Measure Description

This *exploratory* measure assesses consumer experience-based survey responses within the following domains: Pharmacy Staff Communication, Information about Medicine, Written Information, New Prescriptions, and About You. The Pharmacy Quality Alliance (PQA) is the measure steward and all rights are retained by PQA Inc.

### Summary of Findings

Only two organizations submitted data for this measure. Analysis and benchmarks were not produced given there were less than five valid data submissions.