



## CASE STUDY

# HOW ALEDADÉ IMPROVED QUALITY SCORES AND STAR RATINGS WITH MEDICATION HISTORY



## OVERVIEW

**Organization:** Aledade, a health technology company that partners with independent primary care practices to deliver better care at lower cost through value-based care models

**Location:** Bethesda, Maryland

**Size:** Aledade is currently partnered with 550 medical practices in 27 states, encompassing 7,300 primary care providers and 840,000 patients.

**Challenge:** Today's prescription claims data is often incomplete and may lag behind by 2-3 months; as a result, providers in value-based care arrangements cannot optimally prioritize clinical interventions for patients at risk of medication non-adherence.

**Solution:** Surescripts Medication History for Populations, which provides dispensed medication history data from pharmacies, is updated daily, and includes cash-pay transactions.

## IMPACT

Eliminated **585 UNNECESSARY PATIENT INTERVENTIONS** out of 2,235 opportunities identified from payer claims data—reducing false positives for medication non-adherence by 26%

Achieved **4, 4, AND 5 STARS FOR DIABETES, CHOLESTEROL AND HYPERTENSION** under the Centers for Medicare & Medicaid Services (CMS) Five-Star Quality Rating System for Medicare Advantage contracts, resulting in pay-for-performance bonuses



## CHALLENGE: IMPROVE PATIENT OUTCOMES

**Aledade is the largest physician-led network of accountable care organizations (ACOs) in the U.S.** Launched in 2014, Aledade partners with 550 independent medical practices across 27 states, totaling \$7.5 billion in healthcare spending. With 840,000 patients under care of 7,300 providers, Aledade sought a way to help its providers close care gaps and improve outcomes for patients at risk of medication non-adherence.

But incomplete prescription claims data and a delivery lag of weeks or months make it difficult to spot gaps in care and identify legitimate opportunities for patient outreach. How can providers accurately determine patients at risk of medication non-adherence? And, how can they prioritize worthwhile outreach to improve outcomes?

Identifying opportunities to close gaps in care—and close those gaps efficiently—is essential to Aledade’s mission of delivering value-based care at lower cost. “This is a huge opportunity for us to help providers and clinical staff understand when patients are struggling with medication adherence,” said Megan Slaga, Pharm.D., director of pharmacy at Aledade.

# SOLUTION: COMPREHENSIVE MEDICATION HISTORY DATA FROM PHARMACIES

To pilot-test a program that would help providers to identify and follow up with patients at risk of medication non-adherence, Aledade focused on diabetes, high cholesterol and hypertension. These conditions represent 30% of Aledade's Star rating, based on three triple-weighted measures for medication adherence. Adherence is crucial to maintaining health for patients with these conditions. And timely and accurate data enables providers to efficiently prioritize patient outreach and improve outcomes.

Aledade chose **Surescripts Medication History for Populations**, which enables health systems, hospitals and accountable care organizations to proactively access comprehensive dispensed medication history data directly from pharmacies via their EHR or analytics platform.

*"We were 100% reliant on payer claims data, with lags of two to three months, depending on the payer. Our first thought was Surescripts as a potential option to help close that gap."*

— Megan Slaga, Pharm.D., Director of Pharmacy

Aledade and Surescripts entered a process of data integration that ran on a weekly cadence in November and December of 2019. Aledade and its three-person pilot team sent its payer claims data to Surescripts. In turn, Surescripts used comprehensive dispensed medication history from pharmacies to clean, validate and supplement the payer claims data. "Surescripts had a very nice 24-hour turnaround," Slaga said.

## PATIENT DOES NOT PICK UP MEDICATION

### OLD WAY

Payer claims data arrives after 2-3 months

Patient has been non-adherent for weeks or months

### NEW WAY

Updated medication history arrives every week

Provider intervenes earlier to minimize duration of non-adherence

## PATIENT PAYS CASH FOR MEDICATION

### OLD WAY

Incomplete claims data shows a false-positive gap in care

Provider calls patient only to find that patient is adherent

### NEW WAY

Comprehensive medication history includes cash-pay transactions

Provider does not waste time on patient outreach





## PILOT RESULTS: ACCURATE & TIMELY DATA = IMPROVED OUTCOMES

Surescripts Medication History for Populations improved outcomes on multiple fronts, including:

1. Validated, trusted data delivered to providers led to increased engagement between Aledade and the medical practices in its network.
2. Smaller, more targeted outreach lists eliminated hundreds of unnecessary patient interventions for providers and staff, reducing daily workload and administrative burden.
3. Accurate and timely data enabled early identification of patients who were struggling with medication adherence and to close gaps in care.
4. Actionable intelligence enabled Aledade to achieve 4, 4, and 5 stars for diabetes, cholesterol and hypertension under the CMS Five-Star Quality Rating System, based on medication adherence metrics.

*“It allowed us to be a 4-, 4- and 5-Star performing plan, which was fantastic.”*

— Megan Slaga, Pharm.D., Director of Pharmacy

## BY THE NUMBERS: PAYER CLAIMS DATA VS. DISPENSED MEDICATION HISTORY DATA

### MANUAL PAYER CLAIMS DATA

Lag in payer claims data of **2-3 months**, resulting in data that was not representative of patients' true medication adherence status

A list of **2,235 patient outreach opportunities** that included patients who may have already picked up their prescribed medications or who may have become adherent in the past 2-3 months

### AUTOMATED MEDICATION HISTORY DATA

**24-hour turnaround** on delivery of clean, up-to-date medication history data from pharmacies on virtually every patient, for every drug

Eliminated 585 unnecessary patient interventions (**a 26% reduction in false positives for medication non-adherence**), allowing providers to focus on a smaller group of patients with validated outreach opportunities and increased efficiency

## IN HER OWN WORDS: ALEDADE'S DIRECTOR OF PHARMACY ON THE VALUE OF DISPENSED MEDICATION HISTORY DATA

### MANUAL PAYER CLAIMS DATA

"Patients were **no longer eligible** or had already failed the adherence metric."

"We hear from providers about **alert fatigue**."

"Medication adherence initiatives are good for patients but **aren't being prioritized because of the data lag**."

### AUTOMATED MEDICATION HISTORY DATA

"It's **hugely valuable** to help patients remain adherent to these crucial medications."

"Providers conduct **more effective outreach** because they can focus resources on a smaller group of patients."

"We had **higher engagement rates** with our providers to do this work."



## LESSONS FROM ALEDADE: THE CASE FOR MEDICATION HISTORY

### LIMIT FOCUS FOR PROOF OF CONCEPT.

Aledade focused on three common disease states—diabetes, cholesterol and hypertension—to improve the quality of patient outreach opportunities for providers and medication adherence metrics.

### BUDGET FOR MANUAL DATA INTEGRATION.

The goal is to fully automate the process, but the initial pilot required an upfront investment of time and resources. For the pilot, Aledade employed a three-person team. One pharmacist on the team used 20% of her time on manual data integration, although this time will be eliminated once automation is achieved.

### TAKE ADVANTAGE OF SURESCRIPTS RESOURCES.

Surescripts offers documentation, training materials and best practices to its customers. Aledade leveraged this during implementation and continues to gather input from developers and end users as it looks toward expanding into additional markets for broader testing and evaluation.

# THE FUTURE OF COMPREHENSIVE MEDICATION HISTORY FROM PHARMACIES AT ALEDADE

"I always knew I wanted to be a pharmacist," Slaga said, "and I grew up at a time when healthcare was becoming incredibly tech-enabled. I really wanted to help change the pharmacy industry and move us into the future." This ultimately led to her current role as director of pharmacy at Aledade. Today, Slaga sees tremendous promise in using data to fulfill Aledade's mission to deliver value-based care at lower cost.

"That's why we're moving forward with Surescripts," she said. "Even if providers gained just 10 minutes a day with the added efficiency, they can prioritize the right patients with those 10 minutes." To illustrate her point, Slaga shared the example of the first Aledade-Surescripts partnership, which involved pinpointing cash-pay transactions for statins that were not reflected in payer claim data. This reduced the number of unnecessary patient interventions for providers and increased the quality of Aledade's statin use measures.

And Slaga sees applications beyond diabetes, cholesterol and hypertension, such as for anticoagulants, which patients must take every day to reduce their risk of heart attack and stroke. In these and other cases, actionable intelligence at providers' fingertips is crucial.

*"We have so much great data. And I think it's a huge opportunity for us."*

— Megan Slaga, Pharm.D., Director of Pharmacy

Based on the pilot program's success, Aledade plans to expand the delivery of dispensed medication history from pharmacies into two additional markets for broader testing and evaluation. After that, Slaga anticipates scaling to all 550 medical practices and 7,300 primary care providers. "And then," she said, "all of our patients will benefit."



*Spot gaps in care and prioritize effective patient interventions with Surescripts Medication History for Populations.*

Get started at [\*\*surescripts.com/inform-care-decisions/medication-history\*\*](https://surescripts.com/inform-care-decisions/medication-history).

### **About Surescripts**

Our purpose is to serve the nation with the single most trusted and capable health information network, built to increase patient safety, lower costs and ensure quality care. Since 2001, Surescripts has led the movement to turn data into actionable intelligence and convened the Surescripts Network Alliance™ to enhance prescribing, inform care decisions and advance the healthcare industry.

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