

QUALITY INDICATOR HEDIS MEASURE GUIDE – ASA or other Antithrombotic Use with Dx IVD

Measure Definition

Individuals 18 years of age or older with AMI; CABG; or PCI during past 12 months or have an active diagnosis of Ischemic Vascular Disease (IVD)

Measure exceptions: Adverse effects, allergies or intolerance. Patient is already taking other anti-thrombotic or anticoagulant such as warfarin. Patient at high risk for bleeding or is receiving palliative care.

The use of aspirin for secondary prevention is where the evidence is the best and can reduce risk of vascular events by about 22%. Typical doses 81-162mg daily.

Work Flow Pearls

- Capture on EMR medication list
- Consider point of care clinical decision support to prompt providers
- Consider implementing population management lists for outreach

Service Required

Outpatient visits.

Documentation Requirements to Meet Quality Measure Specifications

To meet the requirement there must be documentation of active medication of aspirin or other anti-platelet during the measurement year in the medical record.

Oral antiplatelet therapy consists of: aspirin, clopidogrel, combination of aspirin and extended release dipyridamole, prasugrel, ticagrelor, ticlopidine, or yosprala

Anticoagulant medications consists of: Apizaban, Argatroban, Bivalirudin, Dabigatran, Dalteparin, Desirudin, Edoxaban, Enoxaparin, Fondaparinux, Heparin, Lepirudin, Rivaroxaban, Tinzaparin, or Warfarin

Prescription dates are needed in the documentation to support ongoing use.

Due to the number of codes example ICD 10 Codes provided:

I25: Active diagnosis of Ischemic Vascular Disease

I21: Diagnosis of Acute Myocardial Infarction

I25.70: Coronary Artery Bypass Graft; or Percutaneous Coronary Interventions in the twelve months prior to the measurement period.

• *Incomplete list - list of ICD 10 Codes can be provided upon request.*

Resources:

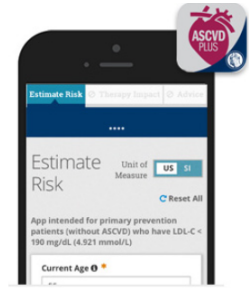
www.cvriskcalculator.com: calculate your 10-year risk of heart disease or stroke using the ASCVD algorithm.

www.aspiringuide.com: provides risk stratification with algorithm to balance risk of GI bleeding with benefit of ASA use in a user friendly interface and patient-friendly statistics.

Physicians 
OF SOUTHWEST WASHINGTON

pswipa.com
PSW on the web

DOWNLOAD THE APPS



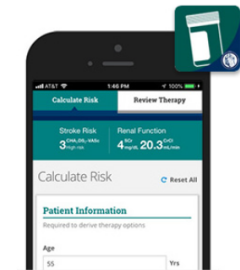
ASCVD Risk Estimator Plus App

Use recent science and user feedback to help build a customized risk lowering plan by estimating and monitoring change in 10 year ASCVD risk.

for more information

www.acc.org/tools-and-practice-support

click on 'MOBILE APPS'



ACC Anticoag Evaluator App

The updated AnticoagEvaluator helps clinicians make informed decisions on antithrombotic therapy for their non-valvular AF patients.

Use the app to:

- Calculate a patient's stroke risk (CHA2DS2-Vasc), bleed risk (HAS-BLED and concomitant meds), and renal function (Cockcroft-Gault Equation)
- Review stroke prevention therapy guidance based on ACC/AHA/HRS's 2014 Guidelines for the Management of Patients with Atrial Fibrillation
- Improve accurate use of DOACs with adjusted dosage based on prescribing information, fine-tuned for renal and other patient characteristics
- Determine appropriate therapy for a patient by reviewing
 - o Synthesized individualized risk for antithrombotic therapy options based on clinical trials (e.g., ACTIVE-A, RE-LY, ROCKET-AF, ARISTOTLE, ENGAGE-AF)
 - o Relevant safety information and full prescribing information for all therapy options

For more information

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If you had downloaded the previous AnticoagEvaluator version on your iPhone or iPad before December 2015, simply update the app on your Apple device to access the updated version.

For all other users,

this update app is available for free on the web, and in the iTunes and Google Play app stores. *The AnticoagEvaluator is available through iTunes; Google Play and Web Version.*

This app was developed as part of ACC's Anticoagulation Initiative and is an update to the original AnticoagEvaluator App. Its content was adapted from a web tool created by Peter Loewen, ACPR, Pharm.D., FCSHP, which can be viewed at www.sparctool.com. The app was further refined and vetted through review and user testing by physicians, nurse practitioners, pharmacists, and other relevant specialists. The app was developed as part of the ACC's Anticoagulation Initiative. Financial support for the app was provided by Daiichi Sankyo, Inc. All content was independently developed with no sponsor involvement.

