



# Pharmacotherapy Management of COPD Exacerbation (PCE)

HEDIS® Measurement Year 2020 & 2021 Measures

**Measure Description: The percentage of COPD exacerbations for members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1–November 30 of the measurement year and who were dispensed appropriate medications. Two rates are reported:**

1. Dispensed a systemic corticosteroid or there was evidence of an active prescription within 14 days of the event.
2. Dispensed a bronchodilator or there was evidence of an active prescription within 30 days of the event.

\*Note: The eligible population for this measure is based on acute inpatient discharges and ED visits, not on members. It is possible for the denominator to include multiple events for the same individual.

## Eligible Population

Ages: 40 years or older as of January 1 of the measurement year.

## Strategies for Improvement

- Utilize NCQA coding tips to actively reflect care rendered.
- Outreach members to schedule follow-up visits as need for chronic condition maintenance and exacerbation.
- Talk to the patient about the importance of medication adherence and scheduling follow-up visits, even if they feel better.
- Educate the patient on reducing triggers in their home, school, work and environment that could exacerbate their condition.
- Coordinate care with specialists such as cardiologists and pulmonologists.

## Measure Adherence

Adherence for the PCE measure is determined by the member being dispensed appropriate medications following an exacerbation of COPD that resulted in an ED or inpatient discharge. This is determined by pharmacy claims data (the plan will capture data each time the member fills their prescription). The medications the NCQA lists in the HEDIS specifications are below. This is a general list and should not replace the advice or care you provide your patients regarding what is optimal to meet their healthcare needs.

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## Systemic Corticosteroid Medications

| Description     | Prescription   |
|-----------------|--|
| Glucocorticoids | Cortisone-acetate<br>Dexamethasone<br>Hydrocortisone<br>Methylprednisolone<br>Prednisolone<br>Prednisone |

## Bronchodilator Medications

| Description                 | Prescription   |
|-----------------------------|--|
| Anticholinergic agents      | Acclidinium-bromide<br>Ipratropium<br>Tiotropium<br>Umeclidinium   |
| Beta 2-agonists             | Albuterol<br>Arformoterol<br>Formoterol<br>Indacaterol<br>Levalbuterol<br>Metaproterenol<br>Salmeterol   |
| Bronchodilator combinations | Albuterol-ipratropium<br>Budesonide-formoterol<br>Dyphylline-guaifenesin<br>Fluticasone-salmeterol<br>Fluticasone-vilanterol<br>Fluticasone furoate-umeclidinium-vilanterol<br>Formoterol-aclidinium<br>Formoterol-glycopyrrolate<br>Formoterol-mometasone<br>Indacaterol-glycopyrrolate<br>Olodaterol hydrochloride<br>Olodaterol-tiotropium<br>Umeclidinium-vilanterol |