

# Asthma Medication Ratio – Measure Definition

**Important:** Denominator Defined the Same as Previous Asthma Medication Management Measure!

## • Eligible Population

- Patients 5 to 18 years of age with persistent asthma.
- Patient must have persistent asthma in **both** the measurement year and prior year, defined with one of the following:

9%

- At least 1 ED visit with a primary diagnosis of asthma

2%

- At least 1 acute inpatient discharge with a primary diagnosis of asthma

18%

- At least 4 outpatient visits / observation visits with a diagnosis of asthma (all diagnoses) and at least two asthma medication dispensing events for any controller or reliever medication

99%

- At least four asthma medication dispensing events for any controller or reliever medication (\* If only leukotriene modifiers or antibody inhibitors dispensed, must also have at least 1 asthma diagnosis)



**Estimated % of Eligible Patients  
Meeting Each Set of Criteria**

# Asthma Medication Ratio – Measure Definition

- **Measure Compliance**

- The ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year (i.e. more controllers prescribed and filled than quick relievers).
- Ratio is measured in units. A unit is one inhaler canister, one injection, or a 30-day or less supply of oral medications (i.e. each prescription longer than 30 days is divided by 30 and rounded down to nearest number).

- **Exclusions**

- Patient with no asthma controller or reliever medications dispensed during the measure year
- Patients with the following diagnoses:
  - Acute Respiratory Failure
  - Chronic Respiratory Conditions Due to Fumes/Vapors
  - COPD
  - Cystic Fibrosis
  - Emphysema
  - Obstructive Chronic Bronchitis

| CMHN Practice                                  | Period: 4/1/2020 to 3/31/2021 |             |                              |                    |                         |
|------------------------------------------------|-------------------------------|-------------|------------------------------|--------------------|-------------------------|
|                                                | Numerator                     | Denominator | Asthma Medication Ratio Rate | % Points to Target | # of Patients to Target |
| CASS COUNTY PEDIATRICS & ADOLESCENTS           | 8                             | 8           | 100.0%                       | Met                | Met                     |
| CHILDREN'S MERCY HOSPITALS AND CLINICS         | 2                             | 4           | 50.0%                        | 36.1%              | 2                       |
| COCKERELL AND MCINTOSH PEDIATRICS, INC.        | 25                            | 27          | 92.6%                        | Met                | Met                     |
| COMMUNITY CHOICE PEDIATRICS, INC               | 26                            | 30          | 86.7%                        | Met                | Met                     |
| CRADLE THRU COLLEGE CARE, INC.                 | 6                             | 7           | 85.7%                        | 0.4%               | 1                       |
| HEALTH CARE FOR CHILDREN, INC                  | 19                            | 25          | 76.0%                        | 10.1%              | 3                       |
| INDEPENDENCE PEDIATRICS PC                     | 2                             | 2           | 100.0%                       | Met                | Met                     |
| JOHNSON COUNTY PEDIATRICS                      | 18                            | 20          | 90.0%                        | Met                | Met                     |
| KANSAS UNIVERSITY PHYSICIANS, INC              | 2                             | 2           | 100.0%                       | Met                | Met                     |
| LEAWOOD PEDIATRICS, INC                        | 21                            | 22          | 95.5%                        | Met                | Met                     |
| MERITAS HEALTH CORPORATION                     | 6                             | 7           | 85.7%                        | 0.4%               | 1                       |
| PEDIATRIC ASSOCIATES                           | 22                            | 27          | 81.5%                        | 4.6%               | 2                       |
| PEDIATRIC CARE NORTH, INC.                     | 27                            | 30          | 90.0%                        | Met                | Met                     |
| PEDIATRIC CARE SPECIALISTS                     | 26                            | 30          | 86.7%                        | Met                | Met                     |
| PEDIATRIC PARTNERS PA                          | 16                            | 17          | 94.1%                        | Met                | Met                     |
| PEDIATRIC PROFESSIONAL ASSOCIATION             | 23                            | 24          | 95.8%                        | Met                | Met                     |
| PREFERRED PEDIATRICS, INC                      | 2                             | 4           | 50.0%                        | 36.1%              | 2                       |
| PRIORITY CARE PEDIATRICS                       | 28                            | 32          | 87.5%                        | Met                | Met                     |
| REDWOOD PEDIATRICS, INC.                       | 5                             | 9           | 55.6%                        | 30.5%              | 3                       |
| SHAWNEE MISSION PEDIATRICS INC                 | 15                            | 19          | 78.9%                        | 7.2%               | 2                       |
| SUMMIT PEDIATRICS AND ADOLESCENT MEDICINE, INC | 9                             | 10          | 90.0%                        | Met                | Met                     |
| TENNEY PEDIATRIC AND ADOLESCENT MEDICINE LLC   | 4                             | 6           | 66.7%                        | 19.4%              | 2                       |
| VILLAGE PEDIATRICS                             | 24                            | 26          | 92.3%                        | Met                | Met                     |
| <b>CMHN Network Rate</b>                       | <b>336</b>                    | <b>388</b>  | <b>86.6%</b>                 | <b>Met</b>         | <b>Met</b>              |

|  |                                                |       |
|--|------------------------------------------------|-------|
|  | Performance is below the measure goal          | x     |
|  | Performance meets or is above the measure goal | 86.1% |
|  | Performance is above the 90th percentile       | 90.4% |

# Findings from Deep Dive

**87% of CMHN patients are AMR compliant**



~37% are up to date with the Asthma Provider Evaluation  
(2 Asthma Visits Per Year)



**13% of CMHN patients are not AMR compliant**



~29% are up to date with their Asthma Provider Evaluation  
(2 Asthma Visits Per Year)



~58% have seen multiple providers for Asthma issues, either at the  
Practice, a specialist visit, or at an ED/UC



~79% do not have an office visit tied to a dispensed reliever medication



Data from 4/1/2020 to 3/31/2021

# Strategies to Improve AMR

- During office visits\*:
  - Provide asthma education and action plan (self-management skills, and controller vs reliever medication)
  - Assess for level of control, trigger control and inhalation device technique
  - Reconcile medication – assess for effectiveness & number of prescription refills
  - Schedule the next asthma visit in 1-6 months
- Ensure all providers in the practice are standardized in their approach to asthma
- Avoid Quick Reliever (QR) auto-refills or refilling QR over the phone
- Use Innovaccer Worklists to target qualifying asthma patients; very small denominator

See the [Innovaccer Worklists Quick Guide](#) (also available via the Quality Improvement Tool Kit or Portal)

\*[Asthma Care Quick Reference: Diagnosing and Managing Asthma \(nih.gov\)](#)

# Asthma Management Tool Kit

- Developed an Asthma Management Tool Kit to Easily Access Asthma Resources for Patients and Providers
  - High Level Review of Key Asthma Resources & Quality Improvement Strategies

Access Tool Kit Via  
Portal or QI Tool Kit!

## ASTHMA MANAGEMENT TOOL KIT



**Children's Mercy  
Health Network**

Given the prevalence of asthma (8.3% of children under 18<sup>1</sup>) and the importance of asthma management (most common pediatric chronic condition, a leading cause of missed school days) for pediatric health, Children's Mercy Health Network has created the following Asthma Management Tool Kit. If your practice has feedback to improve or add additional asthma resources to this tool kit, please share with your practice's CMHN Medical Home or Provider Relations representative.

### Asthma Resources for Patients & Families

#### Comprehensive Asthma Management Resources

- [My Asthma Booklet \(English Version\)](#) ([Spanish Version](#))
- [FREE Online Interactive Asthma Class](#)

[Access All  
CMH Asthma  
Education  
Resources](#)

#### Additional Asthma Resources & References

- [What is Asthma?](#)
- [Asthma Triggers & Ways to Avoid](#)
- Early Warning Signs of an Asthma Episode & How to Take Action

# Innovaccer Asthma-Related Updates

- Asthma Provider Evaluation in Recommended Care
  - Expanding the inclusion criteria of the Asthma Provider Evaluation
    - Current: Patients 5 years and older, with at least two persistent asthma diagnoses in the prior 3 years (at least 90 days apart)

**Adding: Asthma Medication Ratio (AMR) Eligible Population**

- Asthma Management Worklists
  - Expanding the inclusion criteria of the Innovaccer Asthma Worklist
    - Current: Active Blue KC patients with an Asthma Provider Evaluation (Asthma Visit Every 6 Months) Recommended Care Status of “Needs Attention” or “Upcoming”, AMR eligible population

**Adding: Asthma Medication Ratio (AMR) Eligible Population**

*Not all AMR eligible patients were previously included since asthma recommended care did not include all AMR eligible population*

# AMR Report

| Patient Information |           |     |           |                     |                     |                | Eligibility Criteria     |                |                          |                |                             |                |                           | AMR Measure    |                  |                |                               |                         |
|---------------------|-----------|-----|-----------|---------------------|---------------------|----------------|--------------------------|----------------|--------------------------|----------------|-----------------------------|----------------|---------------------------|----------------|------------------|----------------|-------------------------------|-------------------------|
| First Name          | Last Name | DOB | Age Group | Attributed Provider | Attributed Practice | Insurance Plan | Eligibility A (ED Visit) | # of ED Visits | Eligibility B (IP Visit) | # of IP Visits | Eligibility C (4 OP Visits) | # of OP Visits | Eligibility D (RX events) | # of RX Events | # of Controllers | # of Relievers | # of Total Asthma Medications | Asthma Medication Ratio |
|                     |           |     |           |                     |                     |                |                          |                |                          |                |                             |                |                           |                |                  |                |                               | 0.50                    |
|                     |           |     |           |                     |                     |                |                          |                |                          |                |                             |                |                           |                |                  |                |                               | 0.49                    |

AMR .50 or above will show as green

AMR .49 or below will show as red

Practice Performance 50%

Overall Practice Performance will populate here.

| <u>Patients with AMR .50 or above</u> | <u>All eligible patients</u> |
|---------------------------------------|------------------------------|
|                                       |                              |





# Asthma Medication Ratio (AMR): Insights into Non-Compliance

- Patients have multiple prescriptions for relievers for multiple places: multiple households, school, etc.
- Asthma-focused visits are critical for prescription reconciliation and re-education
  - Asthma education is not always done at other visits (sick or well)
- Most practices do not have relievers on auto-refill, but do not have transparency to what the pharmacy is doing
- Providers may deviate from the normal process and refill a reliever
- Patients may cancel their asthma visit
- Patients may not want to have an asthma visit due to cost and/or lack of pressing issue

# Asthma Medication Ratio: Quality Improvement Strategies

- Require an asthma visit be scheduled and attended before the reliever is filled
  - If possible, request to see the patient same-day for emergent situations
- If a reliever is prescribed with 1 refill, require the pharmacy to call the provider to approve
- Keep asthma patients on your radar
  - Portal reports, Practice-created reports, flags in the EMR, worklists in Innovaccr, InNote's Recommended Care section
- Include an asthma visit as part of a well visit, but if not possible, ask some asthma-focused questions to monitor current state