

2022 HEDIS Measure Tips



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS® measures.

Persistence of Beta-blocker Treatment After a Heart Attack (PBH)

Effectiveness of Care HEDIS® Measure*

HEDIS measure description

The percentage of members who were hospitalized and discharged with a diagnosis of acute myocardial infarction, or AMI, and who received beta-blocker treatment.

Measure population (denominator)

Members 18 years of age and older with an acute inpatient discharge between July 1 of the prior year to June 30 of the current measurement year with a diagnosis of AMI.

Measure compliance (numerator)

Members who received persistent beta blocker treatment for at least 135 days during the six months after discharge.

Exclusions

- Intolerance or allergy to beta-blocker therapy. ICD 10 codes: T44.7X5A, T44.7X5D, T44.7X5S.
- Asthma, chronic obstructive pulmonary disease, obstructive chronic bronchitis or chronic respiratory conditions due to fumes and vapors.
- Hypotension, greater than first-degree heart block or sinus bradycardia.
- A medication dispensing event with any of the following medications indicative of a history of asthma: Budesonide-formoterol, Fluticasone-salmeterol, Fluticasone-vilanterol, Formoterol-mometasone, Beclomethasone, Budesonide, Ciclesonide, Flunisolide, Fluticasone, or Mometasone.
- Members ages 66 to 80 with advanced illness and frailty (for additional definition information, see the Advanced Illness and Frailty Guide).

Did you know?

- Beta blockers have been used extensively in the past 40 years after AMI as part of primary therapy and in secondary prevention.
- Beta blockers can decrease the mortality in AMI patients and decrease the chance of reinfarction.

This measure applies to both commercial and Medicare members.

continued

Exclusions *continued*

- Members age 81 and older with frailty during the measurement year.
- Members in hospice or using hospice services anytime during the measurement year.
- Members deceased during measurement year.

Helpful HEDIS hints

- **Discharge** patients with a prescription for a beta-blocker unless contraindicated.
- **Follow up** with phone calls and office visits to assess compliance to medication therapy. This is critical during the first 90 days when patients are most likely to become noncompliant.
- **Educate** your patients on the importance of beta-blockers in the prevention of future heart attacks.
- **Document** patient medical history and medications. This will ensure that patients with conditions that contraindicate beta-blocker therapy are properly excluded through claims data.
- **Be aware** that medication samples or prescriptions filled through discount programs are not captured through BCBSM pharmacy claims and therefore do not close gaps.

Tips for coding

Results for this measure are captured solely through claims data.

- Patients are identified by ICD 10 codes (hospitalized for AMI)
I21.01, I21.02, I21.09, I21.11, I21.19, I21.21, I21.29, I21.3, I21.4
- Beta-blocker therapy is derived from prescription claims.

Following an AMI, a six-month (180 day) treatment course with any of the following beta blockers are compliant for this measure.

Description	Prescription
Noncardioselective beta blockers	<ul style="list-style-type: none">• Carvedilol• Labetalol• Nadolol• Pindolol• Propranolol• Timolol• Sotalol
Cardioselective beta blockers	<ul style="list-style-type: none">• Acebutolol• Atenolol• Betaxolol• Bisoprolol• Metoprolol• Nebivolol
Antihypertensive combinations	<ul style="list-style-type: none">• Atenolol chlorthalidone• Bendroflumethiazide nadolol• Bisoprolol hydrochlorothiazide• Hydrochlorothiazide metoprolol• Hydrochlorothiazide propranolol

Resources

1. American Heart Association. 2016. "About Heart Attacks."
[heart.org/en/health-topics/heart-attack/about-heart-attacks](https://www.heart.org/en/health-topics/heart-attack/about-heart-attacks)

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