

Select Health Quality Provider Program

STATIN USE IN PERSONS WITH DIABETES

2026 Quality Measure Reference Guide



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- [Adult/Pediatric Primary Care Measures Quick Guide](#)
- [Report Hub Instructions: Basic User](#)
- [Formatting a Gaps List in Excel](#)
- [Demographic Allowable Corrections](#)



**Select
Health**

This measure is included in the Primary Care and Endocrinology Quality Provider Programs.

Measure Description

Description	The percentage of Select Health Medicare Members ages 40–75 who were dispensed at least 2 diabetes medication fills on unique dates of service and received a statin medication fill during the measurement year*
Denominator	Members ages 40 to 75 with at least 2 diabetes medication fills on unique dates of service during the measurement year
Numerator	Members in the denominator who were dispensed at least 1 statin medication of any intensity during the measurement year
Intake and Measurement Periods	January 1 through December 31 of the measurement year
Corrections	There are no allowable corrections for this measure. There is an option in the tool to enter a correction; however, it is not for the QPP measure.

* For members who cannot tolerate statin therapy, a trial of as little as 7 days, if appropriate, would count for compliance.

Allowable Corrections

There are no allowable corrections for the SUPD measure.

The only way for a patient to be compliant in this measure is through a pharmacy claim for a statin; or intolerance code on a claim during the measurement year, which will remove the individual from the QPP measure. Providers may use virtual care to confirm and document the exclusion

diagnosis in the medical record. They should then bill the non-reimbursable HCPCS code **G9781** for \$0.01 with the applicable ICD-10 code attached to process the claim and remove the patient from the measure.

The statin intolerance code must be submitted each year for SUPD exclusion (see table below for acceptable exclusion codes).

Patient has a diagnosis of:	Submit the relevant exclusion code with the visit:
Myositis	M60.80, M60.819, M60.829, M60.839, M60.849, M60.859, M60.869, M60.879, M60.9
Myopathy	G72.0, G72.89, G72.9
Rhabdomyolysis	M62.82
Lactation	O91.03, O91.13, O91.23, O92.03, O92.13, O92.5, O92.70, O92.79, Z39.1
PCOS	E28.2
Cirrhosis	K70.30, K70.31, K71.7, K74.3, K74.4, K74.5, K74.60, K74.69
ESRD	I12.0, I13.11, I13.2, N18.5, N18.6, N19, Z91.15, Z99.2
Pre-Diabetes	R73.03, R73.09
Dialysis	Z91.15, Z99.2
Pregnancy	(1000+ codes)

[Access guidance for general corrections to demographics.](#)

Frequently Asked Questions

Q: Why does this measure matter?

A: Atherosclerotic cardiovascular disease (ASCVD) is one of the most common complications and the leading cause of morbidity and mortality for those with diabetes. In fact, the American Diabetes Association (ADA) recommends all patients with diabetes be considered for treatment with a statin regardless of their low-density lipoprotein (LDL) levels. Taking statin medication to lower cholesterol levels can reduce risks for ASCVD.^{1,2}

Cholesterol is a waxy substance produced in the body and also found in certain animal-based foods. Blood cholesterol levels include high-density lipoprotein (HDL), considered to be the “good” cholesterol, and LDL, or the “bad” cholesterol. Cholesterol is essential for overall health; however, too much LDL can lead to narrowed or blocked arteries. Individuals with diabetes mellitus are more susceptible to having abnormal cholesterol levels, which contributes to the higher risk for ASCVD and premature death.³ Statins help to lower LDL cholesterol and raise HDL cholesterol.

Q: What is Select Health doing to help?

A: Outreach to Select Health clinics and members includes:

- Faxed letters and phone calls to inform providers which of their patients with diabetes are currently not on a statin; along with the accepted exclusion codes
- Mailed quarterly informational letters to patients with diabetes who are not on statins
- Phone calls to members to share statin education and discuss barriers to statin use
- Maintenance of an up-to-date registry of patients who:
 - Are included in this measure with their compliance status
 - Have diabetes and are included in the hemoglobin A1c (HbA1c), diabetic eye exam, and kidney health evaluations measures (includes compliance status)

Q: What are best practices for this measure?

A: Best practices include:

- Using the Select Health Quality Provider Program registry or clinic electronic health record (EHR) to identify members who:
 - Meet the criteria for statin therapy
 - Need a statin
- For members who experience muscle pain, considering:
 - Reducing the dose
 - Trying an intermittent dosing schedule (every 2 or 3 days)
 - Using a more water-soluble statin, such as pravastatin or rosuvastatin
- Avoiding the use of samples, which will not generate a pharmacy claim and may produce false non-adherent results
- Developing a pharmacist protocol to initiate statins in patients who meet the criteria if resources are available
- Providing verbal and written education to patients with diabetes on the importance of statin therapy
- Encouraging healthy lifestyle habits, including exercise and a heart-healthy diet, in combination with statin therapy
- Instituting pre-visit planning, scrubbing charts, and using alerts in the clinic's electronic health record (EHR) so that the provider can talk to patients about why they need a statin and/or assess their response to statin therapy

References:

¹ American Diabetes Association. 10. Cardiovascular disease and risk management: Standards of medical care in diabetes—2021. *Diabetes Care*. 2021;44(Suppl_1):S125–S150.

² Centers for Disease Control and Prevention. *Statins and Diabetes: What You Should Know*. [www.cdc.gov](https://www.cdc.gov/diabetes/diabetes-complications/statins-and-diabetes.html). May 15, 2024. Available at: <https://www.cdc.gov/diabetes/diabetes-complications/statins-and-diabetes.html>. Accessed February 16, 2026.

³ American Heart Association. *Cholesterol and Diabetes*. www.heart.org. Last reviewed: April 2, 2024. Available at: <https://www.heart.org/en/health-topics/diabetes/diabetes-complications-and-risks/cholesterol-abnormalities--diabetes>. Accessed February 16, 2026.

Working Your Open Gaps List

STEP 1
Create a current gaps-in-care list: <ol style="list-style-type: none"> 1. Open your Gaps-in-Care-for-Download report: QPP Report Hub 2. Apply these filters: <ul style="list-style-type: none"> — Super clinic: Choose your clinic. — Measure: Click on “Statin Use in Persons with Diabetes (SUPD).” — Status: Unclick the "Compliant" box. This will filter for only the achievable members. 3. In the drop-down menu on the top right side of the page, change the view from "Member" to "Download." 4. Follow the instructions on the screen to export the data to Excel. Refer to Report Hub Instructions: Basic User .
STEP 2
Format your Excel export. (Refer to Formatting a Gaps List in Excel .)
STEP 3
Review tips for working your gaps-in-care list (page 6).

Measure Information

The objective behind statin use in persons with diabetes is to lower the risk of damage to the blood vessels and nerves that control a person's heart. People with diabetes are twice as likely to have heart disease or a stroke. The longer a person has diabetes, the higher the chance they will develop heart disease.¹ By using statins to prevent cholesterol deposits being built up in arteries, doctors hope to reduce a patient's risk of developing heart disease.

NOTE: Examples used in this document are for instructional purposes only; the dates that appear are only representative of what a user might see.

For this measure:

- The beginning of the calendar year is the measurement start date.
- The end of the calendar year is the measurement end date. Your gaps-in-care list has the measurement end date noted in the "Measure Instructions" column.

Measure Name	Qualified Date	Compliance Date	Status	Status Detail	Achievable Date	Measure Instructions
Statin Use in Persons with Diabetes (SUPD)	MM/DD/YYYY		Achievable	To Be Completed	MM/DD/YYYY	Member needs 1 prescription fill of a statin medication of any intensity by MM/DD/YYYY.
Statin Use in Persons with Diabetes (SUPD)	MM/DD/YYYY		Achievable	To Be Completed	MM/DD/YYYY	Member needs 1 prescription fill of a statin medication of any intensity by MM/DD/YYYY.

Working Open Gaps List, Continued

Tips for Working your Gaps-in-Care List

1. Understand what the data in these columns mean:

"Qualified Date": The date the diabetes medication was dispensed that qualified the member for the measure.

"Compliance Date": The date the statin medication was dispensed.

"Achievable Date": The member has until the end of the measurement year to fill a statin medication.

Measure Name	Qualified Date	Compliance Date	Status	Status Detail	Achievable Date	Measure Instructions
Statin Use in Persons with Diabetes (SUPD)	MM/DD/YYYY		Achievable	To Be Completed	MM/DD/YYYY	Member needs 1 prescription for statin medication of a MM/DD/YYYY.
Statin Use in Persons with Diabetes (SUPD)	MM/DD/YYYY		Achievable	To Be Completed	MM/DD/YYYY	Member needs 1 prescription for statin medication of a MM/DD/YYYY.

2. Work the patient list by “Achievable” status because those are the members that have not filled a statin medication during the measurement year. If the member has been prescribed a statin medication but has not filled the medication, please provide outreach to remind them of their prescription. This could be a good time to ask them about any barriers with taking their medication as prescribed (cost, transportation to the pharmacy, remembering to take their medications, pill splitting, etc.) and/or provide the patient with additional education and resources.

For additional best practice information and tips for closing care gaps for this measure, please refer to the Frequently Asked Questions on [page 4](#).

Reference:

¹ Centers for Disease Control and Prevention. *Statins and Diabetes: What You Should Know*. [www.cdc.gov](https://www.cdc.gov/diabetes/diabetes-complications/statins-and-diabetes.html). May 15, 2024. Available at: <https://www.cdc.gov/diabetes/diabetes-complications/statins-and-diabetes.html>. Accessed February 16, 2026.

Questions about the Quality Provider Program?
Contact us at QualityProvider@selecthealth.org.

