

Improving Medication Adherence for Chronic Conditions

The Centers for Medicare & Medicaid Services (CMS) Five-Star Quality Rating System assesses medication adherence for certain classes of chronic medications. For 2025, adherence measures focus on renin-angiotensin system (RAS) antagonists for hypertension, statins for cholesterol and non-insulin diabetes medications. Members are deemed adherent when the proportion of days in the measurement period covered by prescription claims for medications in the therapeutic category of interest is at least 80%.¹ Consider the following prescribing strategies to help improve your patients' medication adherence:²

Adherence Strategies	
Write for 100-day supplies of chronic medications	<ul style="list-style-type: none"> Members in CalOptima Health OneCare (HMO D-SNP), a Medicare Medi-Cal Plan, may receive up to a 100-day supply of maintenance medications, allowing for more convenience and fewer trips to the pharmacy.
Request medication refill synchronization	<ul style="list-style-type: none"> Minimize the need for patients to order frequent refills and make multiple trips by asking the pharmacy to refill all chronic medications on the same day.
Remind patients about auto-refills for chronic medications	<ul style="list-style-type: none"> Automatic prescription refill programs can improve medication adherence, especially for patients receiving multiple medications. Some pharmacies may require patients to request auto-refills for each medication in person or electronically.
Remind patients about free medication delivery	<ul style="list-style-type: none"> Most retail pharmacies offer free non-expedited medication home delivery to patients, allowing those with limited mobility or transportation to easily access their medications.
Simplify medication regimens with once-daily dosing	<ul style="list-style-type: none"> Choose medications with a long duration of action to minimize missed doses and reduce pill burden.
Deprescribe unnecessary medications	<ul style="list-style-type: none"> When prescribing new medication regimens or making dosage changes, ensure old prescriptions are deactivated at the pharmacy to avoid duplication of therapy.
Prescribe combination therapy products	<ul style="list-style-type: none"> Consolidate medications into single-pill combination therapies to reduce pill burden when possible (see table below).

Example Combination Therapy Products*		
amlodipine-benazepril	fosinopril-HCTZ	glipizide-metformin
amlodipine-atorvastatin [‡]	irbesartan-HCTZ	Invokamet or Invokamet XR (canagliflozin/metformin) [‡]
amlodipine-olmesartan	lisinopril-HCTZ	Janumet or Janumet XR (sitagliptin/metformin)
amlodipine-valsartan	losartan-HCTZ	
amlodipine-valsartan-HCTZ	olmesartan-HCTZ	Synjardy or Synjardy XR (empagliflozin/metformin)
benazepril-HCTZ	valsartan-HCTZ	
enalapril-HCTZ	alogliptin-metformin	Xigduo XR (dapagliflozin/metformin)

*Not a comprehensive list, [‡]Non-formulary for Medi-Cal Rx, HCTZ = hydrochlorothiazide

References

1. Medicare 2025 Part C & D Star Ratings Technical Notes. Centers for Medicare & Medicaid Services: Center for Medicare. Updated October 3, 2024.
2. Clinical Resource, Medication Adherence Strategies. Pharmacist's Letter/Prescriber's Letter. August 2022. [380822]