



# Value-based Care Chronicle: Guide to Improving Performance

January 2026

We hope the Chronicle continues to bring you useful insights. As we work to keep you informed about the latest trends and best practices, your feedback helps us refine our approach. Please take a moment to complete this short survey and share what's working well and where we can improve.

<https://www.surveymonkey.com/r/MPC5VCF>

## Medication Adherence

*From Prescriptions to Performance*

Adherence matters. As healthcare professionals, you can motivate patients to take their medications as prescribed, which contributes to improved outcomes and increased STARS performance. Effective two-way communication is critical; in fact, it doubles the odds of patients taking their medications as prescribed. Try to understand your patients' barriers and address them honestly to build trust.

### Want Better Medication Adherence Outcomes?

Medication Adherence Quality Measures				
Quality Measure	Patient Inclusion	Patient Exclusion	Medication Class	Compliance
Medication Adherence for Diabetes (MAD)	<ul style="list-style-type: none"> <li>✓ Age 18 and above</li> <li>✓ Pharmacy must dispense a <u>non-insulin diabetes medication</u> ≥ 2 times using patient's insurance benefit</li> </ul>	<ul style="list-style-type: none"> <li>x Insulin - filled using insurance</li> <li>x ESRD diagnosis or dialysis coverage dates</li> <li>x Hospice</li> </ul>	<ul style="list-style-type: none"> <li>✓ Metformin</li> <li>✓ Sulfonylureas</li> <li>✓ DPP-4 inhibitors</li> <li>✓ Incretin mimetics</li> <li>✓ Meglitinides</li> <li>✓ SGLT2 inhibitors</li> <li>✓ TZDs</li> </ul>	Patient fills prescription(s) often enough to cover 80% or more of the time they are supposed to be taking the medication.
Medication Adherence for Hypertension (MAH)	<ul style="list-style-type: none"> <li>✓ Age 18 and above</li> <li>✓ Pharmacy must dispense a <u>renin angiotensin system antagonist medication</u> ≥ 2 times using patient's insurance benefit</li> </ul>	<ul style="list-style-type: none"> <li>x One or more prescriptions for sacubitril/valsartan</li> <li>x ESRD diagnosis or dialysis coverage dates</li> <li>x Hospice</li> </ul>	<ul style="list-style-type: none"> <li>✓ ACE inhibitors</li> <li>✓ ARBs</li> <li>✓ Direct Renin Inhibitors</li> </ul>	
Medication Adherence for Cholesterol (MAC)	<ul style="list-style-type: none"> <li>✓ Age 18 and above</li> <li>✓ Pharmacy must dispense a <u>statin medication</u> ≥ 2 times using patient's insurance benefit</li> </ul>	<ul style="list-style-type: none"> <li>x ESRD diagnosis or dialysis coverage dates</li> <li>x Hospice</li> </ul>	<ul style="list-style-type: none"> <li>✓ Statins</li> </ul>	

CHS - Medicare 2025 Part C & D Star Ratings Technical Notes

- Reconcile medications at each visit and assess access, adherence, and tolerability
- Update Rx with pharmacy for any use or dosage changes
- Send refill requests and Rx updates as requested by CHES Pharmacy Team
- Renew expired Rxs at AWW
- Order extended day supplies to cover up to 365 days
  - UHC, Humana, and Aetna all use 100-day fills (+3 refills)
  - 90 days + 4 refills for others
  - Pharmacies can adjust to 30 days when required
- Use mail order, daily preparations, and/or combination medications when appropriate
- Refer to CHES Pharmacy for medication adverse effects and access barriers

Med Adherence Flyers

2025 Medicare Rx Changes

90-Day Prescription Fills

Overcoming Med Adherence

## CODING CORNER: V28 is Here!

Starting in 2026, CMS will fully adopt V28 for risk scoring. This marks a significant shift in the evolution of risk adjustment, introducing more specific disease classifications to better capture patient complexity.

Key takeaways for your practice:

- Be detailed and specific in your documentation
- Avoid "unspecified" diagnoses
- Follow complete documentation and coding best practices
- The goal: reflect true risk of patient through precise documentation

### [V28 Risk Adjustment Flyer](#)

Feature	V24 (Old Model)	V28 (New Model)
HCC Disease Groups	86	115 (More Specific!)
Condition Grouping	Some overly broad	More detailed & focused
Risk Calculation	Some conditions counted the same	More refined, higher-risk conditions count more
Accuracy in Disease Measurement	Some conditions underestimated	More precise capture of disease severity

## Patient Education Point of the Month Simple Method

The SIMPLE method gives care teams an easy, effective way to improve medication adherence by focusing on what really gets in the way. By reducing complexity, clearly explaining the purpose of each medication, and inviting honest conversations about concerns, we can turn adherence into a shared goal.

# SIMPLE Method

To improve medication adherence

- S** Simplify the Regimen
- I** Impart Knowledge
- M** Modify Patient's Beliefs & Behaviors
- P** Provide Communication & Trust
- L** Leave the Bias
- E** Evaluate Adherence



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## Additional Resources

- [DEA Extends Telemedicine Flexibilities for Controlled Substance Prescribing into 2026](#)
- [Medicare's New GLP-1 Pricing Initiative Signals a Shift in Coverage](#)

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