

Cholesterol Roadmap

Goals

Define goals for a cholesterol management program using evidence-based guidelines



CQM

Use the CQM measure to track cholesterol

Documentation

Define the key types of documentation required in the EHR and claims



Optimizing

Implement best practices for managing cholesterol within the practice

Population Health

Identify and effectively manage your patient population with high cholesterol



Provider Tips

Tips and tricks to better manage your patients with high cholesterol

Managing Disparities

Know and address the challenges of patients with or at risk of high cholesterol



Coding Considerations

Document risk factors and social determinants

Federal & State Initiatives

Federal and state programs to increase cholesterol prevention and management



Resources

Available cholesterol resources for providers and patients

Cholesterol Roadmap

Goals

- Measure risk factor control
- Treat risk factors with abnormal levels
- Improve preventive services regarding cholesterol
- Improve patient's health literacy about cholesterol



Documentation

- Document multiple or serious comorbidities, including renal or hepatic function, a history of previous statin intolerance or muscle disorders, concomitant use of drugs affecting statin metabolism, and a history of hemorrhagic stroke
- Document 10-year ASCVD Risk percentage, baseline measurement of alanine transaminase, lipid panel results, smoking status, race and ethnicity, and familial hypercholesterolemia



Population Health

- Consider Clinical Information Systems (e.g. registries) that can provide patient-specific and population-based support to the care team
- Assess social context (i.e. food insecurities, housing stability, and financial barriers) and apply that information to treatment decisions
- Adopt a patient-centered communication style that includes patient preferences, assesses health literacy, and addresses cultural barriers to care



Managing Disparities

- Address specific groups in the community
- Wellness programs
- Educational programs
- Preventive care services



Federal & State Initiatives

- [State Public Health Actions to Prevent and Control Chronic Diseases](#)
- [Million Hearts](#)
- [WISEWOMAN \(Well-Integrated Screening and Evaluation for WOMen Across the Nation\)](#)



CQM

- Quality ID # 438
- Statin Therapy for the Prevention and Treatment of Cardiovascular Disease



Optimizing

- Identify barriers in the EHR system
- Optimize health literacy /education
- Provide patient portal access
- Develop EHR templates



Provider Tips

- Personal Care Plan addressing personal and clinical goals, including exercise plan, diet plan, medication adherence, a plan for smoking cessation, reducing saturated fats, and eliminating trans fats.



Coding Considerations

- Use Z codes to document lack of exercise, poor diet habits, tobacco use, and food insecurity
- Code for noncompliance with dietary regimen or intentional medication underdosing due to financial hardship
- Choose the most specific code from category E78 to describe the patient's diagnosis



Resources

- Cholesterol Resources for Health Professionals – https://www.cdc.gov/cholesterol/materials_for_professionals.htm
- Cholesterol Communications Kit – <https://www.cdc.gov/cholesterol/communications-kit.htm>
- Cholesterol Management Tools & Protocols – <https://millionhearts.hhs.gov/tools-protocols/tools/cholesterol-management.html>
- Check. Change. Control. Cholesterol™ – https://professional.heart.org/professional/EducationMeetings/CholesterolforProfessional_s/UCM_491496_Cholesterol-for-Professionals.jsp

