

Support for the proposed LDL-C Monitoring and Management Measure (MUC2025-034)

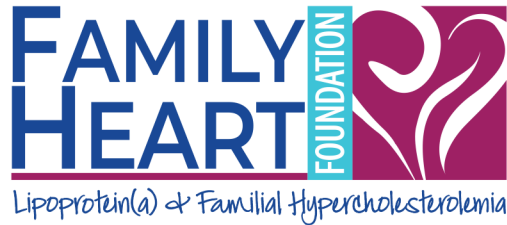
The Family Heart Foundation is a non-profit patient advocacy organization whose mission is to save generations of families from heart disease through timely identification and improved care of familial hypercholesterolemia and elevated lipoprotein(a). We strongly support the proposed LDL-C measure as a means of improving outcomes for patients by correcting the disconnect which exists between the existing statin-based quality measure, current national cholesterol treatment guidelines, and actual control of LDL-C in high-risk individuals, such as those with atherosclerotic cardiovascular disease (ASCVD).

The Foundation maintains a large proprietary database called the Family Heart Database which contains US medical claims of medication use, diagnoses, procedures and/or surgeries in >340 million individuals between 2012–2023, representing more than half of the national census population annually, with corresponding laboratory (primarily lipid) data available in approximately one-third of these individuals. We recently performed an analysis examining the state of control of LDL-C in over 3M individuals with ASCVD by payer type during 2023 which was presented as a poster at the Academy of Managed Care Nexus meeting in October 2025. A copy of the poster is attached.

For Medicare patients, only 36% of people with ASCVD in this analysis achieved an LDL-C <70mg/dL and for those with commercial insurance, that figure was just 30%. We also examined rates of control of LDL-C for the top 10 Medicare and Commercial plans by volume of ASCVD patients and the top performing plan was United Healthcare/AARP where only 40.1% of plan members with ASCVD in this analysis achieved an LDL-C < 70mg/dL.

In a separate analysis which was published in December 2025 in the American Journal of Preventive Cardiology (<https://www.sciencedirect.com/science/article/pii/S2666667725004295>), we demonstrated similar results but also found that women and Black individuals were significantly less likely to achieve an LDL-C of < 70 mg/dL, suggesting significant disparities in care.

This data on actual control of LDL-C in people with ASCVD stands in contrast to the 2023 performance data on the current statin-based quality measure, which was recently published by NCQA (<https://www.ncqa.org/report-cards/health-plans/state-of-health-care-qua...>). In this dataset, 82% of commercial patients and 85-86% of Medicare patients (all with ASCVD) achieved the statin performance measure:



"Received Statin Therapy. Members who were dispensed at least one high- or moderate-intensity statin medication". Taken together, this indicates a significant disconnect between the current statin-based performance measure and actual control of LDL-cholesterol in ASCVD patients.

The current statin-based measure is based on the 2013 ACC/AHA Cholesterol Guidelines which eliminated LDL-C treatment goals. However, the 2018 ACC/AHA Multi-Society Cholesterol guidelines re-introduced the concept of an LDL-C "threshold" of >70 mg/dL in patients with ASCVD, above which clinicians are encouraged the intensify therapy. This approach of recommending a threshold above which therapy should be intensified was maintained and extended in the 2022 ACC Non-Statin Expert Consensus Decision Pathway. Performance measures, which exist to assess quality of care delivered, should be aligned with the national treatment guidelines and at present, that is not the case. Adoption of the proposed measure would address that issue.

Finally, statins, ezetimibe, PCSK9 inhibitors, and bempedoic acid have all been shown to not only lower LDL-C but to also significantly reduce cardiovascular morbidity and mortality in high-risk individuals. This was not the case in 2015 when the statin-based measure was adopted. LDL-cholesterol should be the target of therapy and performance should be assessed by the percentage of individuals with ASCVD who achieve a goal of LDL-C <70 mg/dL. The Family Heart Foundation urges CMS to adopt the proposed measure.

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