

CMS Medicare Part D Star Ratings Measure

Polypharmacy (POLY-ACH): Use of Multiple Anticholinergic Medications in Older Adults



Measure description

POLY-ACH evaluates the percentage of patients age 65 years or older who concurrently use two or more unique anticholinergic medications for 30 cumulative days or more during the calendar year. This is an inverse measure, meaning lower rates indicate better performance and safer prescribing.

Who qualifies for the measure?

The percentage of patients with concurrent use of two or more unique anticholinergic medications qualify for this measure.

- **Numerator (noncompliant):** Patients with concurrent use of two or more unique anticholinergic medications with an overlapping days' supply of at least 30 cumulative days or more during a calendar year.
- **Denominator (measure population):** Patients ≥ 65 years and older with two or more prescriptions filled for any anticholinergic medication on different dates of service during a calendar year.

Measure goal

Staggering therapy: Ensure that if two anticholinergics must be used, their overlapping prescription supply does not exceed 29 cumulative days during calendar year.

Deprescribe: Eliminate unnecessary medications during regular reviews.

Alternative substitution: Replace a high-risk anticholinergic with a lower-risk therapeutic alternative.

Potential risks of anticholinergic medications

- | | |
|---|-------------------------------|
| • Urinary retention | • Increased confusion |
| • Blurred vision | • Dementia |
| • Dry mouth anticholinergic medications | • Delirium |
| • Sedation | • Increased risk of fractures |
| • Orthostatic hypotension | • Increased risk of falls |

Medication List

When prescribing for older adults, restrict or avoid the medications below, especially if the patient is already taking other anticholinergic or high-risk medications.

Examples of commonly prescribed anticholinergic medications*

Drug Class	Medication	
Antihistamines (first generation)	• Brompheniramine (Dimetapp®-) • Chlorpheniramine (Chlor-Trimeton®) • Clemastine (Tavist®) • Dimenhydrinate (Dramamine®)	• Diphenhydramine (Benadryl®) • Doxylamine (Unisom®) • Hydroxyzine (Vistaril®) • Meclizine (Dramamine® All Day Less Drowsy)
Antidepressants	• Amitriptyline (Elavil®) • Clomipramine (Anafranil®) • Doxepin (Sinequan®) > 6 mg/day	• Imipramine (Tofranil®) • Nortriptyline (Pamelor®) • Paroxetine (Paxil®)
Antipsychotics	• Chlorpromazine (Thorazine®) • Clozapine (Clozaril®) • Loxapine (Loxitane®)	• Olanzapine (Zyprexa®) • Thioridazine (Mellaril®)
Antiparkinsonian Agents	• Benzotropine (Cogentin®)	• Trihexyphenidyl (Artane®)
Skeletal Muscle Relaxants	• Cyclobenzaprine (Amrix®)	• Orphenadrine (Norflex®)
Antiarrhythmics	• Disopyramide (Norpace®)	
Antimuscarinics (Urinary incontinence)	• Darifenacin (Enablex®) • Oxybutynin (Ditropan®) • Solifenacin (Vesicare®)	• Tolterodine (Detrol®) • Trospium (Sanctura®)
Antispasmodics (excludes ophthalmic)	• Atropine (AtroPen®) • Dicyclomine (Bentyl®)	• Hyoscyamine (Levsin®) • Scopolamine (Transderm Scop®)
Antiemetics	• Prochlorperazine (Compazine®)	• Promethazine (Phenergan®)

*This is not an all-inclusive list.

Exclusions

Hospice or palliative care services that were received anytime during the measurement year.

Tips

- **Review** all patient medications, including over-the-counter medications, at every visit.
- **Discuss and educate families** of the risks and side effects of anticholinergic medications.
- **Identify at-risk patients:** Track patients who are currently taking one anticholinergic to prevent a second concurrent prescription.
- **Limit prescriptions** (prescribe shortest duration) for ACH medications as needed (no refills).
- **Perform a mini mental examination (MME)** if suspicion of impaired cognitive function.

Disclaimer

This document is intended for internal quality improvement and educational purposes only. It does not establish clinical guidelines or replace provider judgment. Providers should follow all applicable contractual and regulatory requirements.