## SPOTLIGHT ON STAKEHOLDER SUCCESS

Improved management of patients with high LDL-C through electronic health record-directed algorithms for guideline-concordant high-intensity statin prescribing

PATIENT	ENHANCED TREATMENT OPPORTUNITY	6% improvement (from 21.5% to 27.5%, 217 patients) in high-intensity statin prescription orders for patients with LDL-C at or above 190 mg/dL.
	INCREASED <b>WELLNESS</b>	A 22.2% relative increase (from 34.7% to 42.4%, p<0.001) in the proportion of patients who improved their LDL-C below 190mg/dL, post SureNet program implementation.
	ENHANCED <b>SAFETY</b>	41.5% relative increase (from 36.6% to 51.8%, p<0.001) in the number of patients completing recommended follow-up lipid panel testing after initiating their high-intensity statins, enabling appropriate monitoring.
CLINICIAN	REDUCED CLINICAL BURDEN	"The KPSC SureNet program reduces the clinician burden associated with identifying and correcting missed diagnosis of hyperlipidemia and missing medications and lab orders, enabling clinicians to focus on high-quality patient care. In addition, the program eliminated a missed diagnosis of hyperlipidemia in patients with an LDL at or above 190 mg/dL."  - Michael Kanter, Chair of the Department of Clinical Science; Professor, Kaiser Permanente Bernard J. Tyson School of Medicine, Associate Investigator, Kaiser Permanente Southern California Department of Research & Evaluation
HEALTH SYSTEM / ADMINISTRATION	MITIGATED RESOURCE UTILIZATION	23% improvement (from 73.4% to 96.2%, 382 patients) in number of patients receiving guideline appropriate care for their very high cholesterol, thus mitigating future potential burden to the health system based on the 2-5 fold higher risk of CVD in patients with elevated LDL-C.
PAYOR	MITIGATED RISKS	32% relative increase in prescription pick-up after implementation of the SureNet program, lowering known ASCVD risk (ranging between 30-50%) associated with statin non-compliance.