
Continuing Education 2015

Integrating Medication Management: Lessons Learned

June 2015

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What will we accomplish today?

- ✓ Describe factors related to payer decisions to offer MTM services and how the offerings changed the last few years.
- ✓ List reasons providers begin offering MTM services and describe how service capacity is evolving
- ✓ Describe the MTM process outlined in the MTM Core Elements version 2.0
- ✓ List resources to help a pharmacy practice get started & workflow changes.
- ✓ Recall ten tips for MTM service provision, marketing, documentation, and billing.
- ✓ Hear success stories

Common vision for pharmacists...



...helping patients get the
best use of their medicines



It's nice to have a business where you can actually help the community get healthier.

<http://www.drugstorenews.com/article/hayat-health-mart-named-mckesson-pharmacy-year>

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Goals of MTM Core Elements V 2.0

- Improve collaboration among pharmacists, physicians, and other health care professionals
- Enhance communication between patients and their health care team
- Empower patients to optimize medication use for improved health care outcomes

Medication Therapy Review

- Purpose: “improve patients’ knowledge of their medications, address problems or concerns that patients may have, and empower patients to self-manage their medications and their health condition(s).”
- Comprehensive or targeted to a specific medication-related problem.
- Vary from patient to patient, depending on individual needs.
- May include:
 - demographic information
 - medical history
 - current health status
 - goals of therapy
 - information regarding the patient’s ability to communicate, such as language barriers or literacy level
 - laboratory results
- The APhA and NACDS have created a consumer-directed brochure entitled *Get Your Medication Check-Up* downloadable in pdf at www.pharmacist.com
MTM Central



Medication Therapy Review (MTR)

- Collection of patient-specific information
- Assessment of medication therapies to identify medication-related problems
- Development of a prioritized list of medication-related problems
- Creation of a plan to resolve these problems
- Patient education and training
- Communication of appropriate information to other health care professionals

Personal Medication Record (PMR)

- A comprehensive list of the patient's medications
 - Prescriptions, non-prescriptions, herbal products and other dietary supplements
- Helps facilitate continuity of care
 - Patients and pharmacists are encouraged to share PMR with other health care professionals
- Patients are encouraged to keep their PMR updated
- PMR template reviewed by Health Literacy Expert for ease of patient use

Medication-Related Action Plan (MAP)

- A patient-centered document designed as a simple guide for patients
 - Important action steps for patients to better manage their medications and health
- Completion of the MAP is a collaborative effort between the patient and pharmacist and other health care professionals as appropriate
- MAP template reviewed by Health Literacy Expert for ease of patient use

Why use a MAP?

- Action plan to:
 - Adjust patient behavior to reduce health expenditures
 - Encourage patients to utilize medications safely
 - Facilitate lifestyle modifications

Intervention and/or Referral

- During the MTM visit, the pharmacist provides consultative services and intervenes to address medication-related problems
- Interventions should be designed to meet the unique needs of each patient to optimize outcomes
- Goals of therapy should be established in collaboration with patient or caregiver
- When necessary, the pharmacist may refer patient to other health care professionals

Documentation and Follow-up

- Documentation

 - Pharmacist documents services in a manner appropriate for evaluating patient progress and billing

 - External communication of MTM documentation as applicable

 - Patients, pharmacists, physicians, and payers

 - The MTM service model contains suggested documentation elements for completion

- Follow-up

 - Schedules follow-up visit or transitions patient to other health care professional(s)



Ivy Kare

- 51 year old, white female
- Hearing loss and cognitive disability
- Lives alone with limited transportation
- Limited family support

Diagnosis:

- CHF
- Obesity
- Sleep Apnea
- Diabetes
- GERD
- Hypertension
- Hypercholesterolemia

Current Medication List:

- Isosorbide Mono ER 30mg
- Omeprazole 20mg
- Glimepiride 1 mg
- Metformin ER 1000mg
- Furosemide 40mg
- Atenolol 100mg
- Tramadol 50mg
- Atorvastatin 10mg
- Warfarin 5mg
- Losartan 100mg

CMS 2015/2016 Call Letters

- Themes: improve and expand Part D MTM
- Offer MTM to expanded populations
- Use to promote care coordination
- Adopt standard IT for MTM documentation
- Promote MTM awareness to beneficiaries
- Use CMR completion rate as Part D measure
- Confirms use of PQA quality measures

CMS Star Ratings

- Five-star rating system to grade health plans
- Star ratings are basis for monitoring quality and performance of Medicare plans and tied to quality bonus payments
- Ratings based on different input including:
 - Medical and drug plan data
 - Member surveys

Impact of MTM on Star Ratings

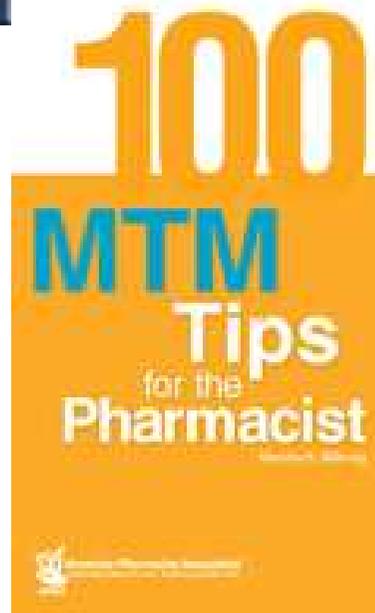
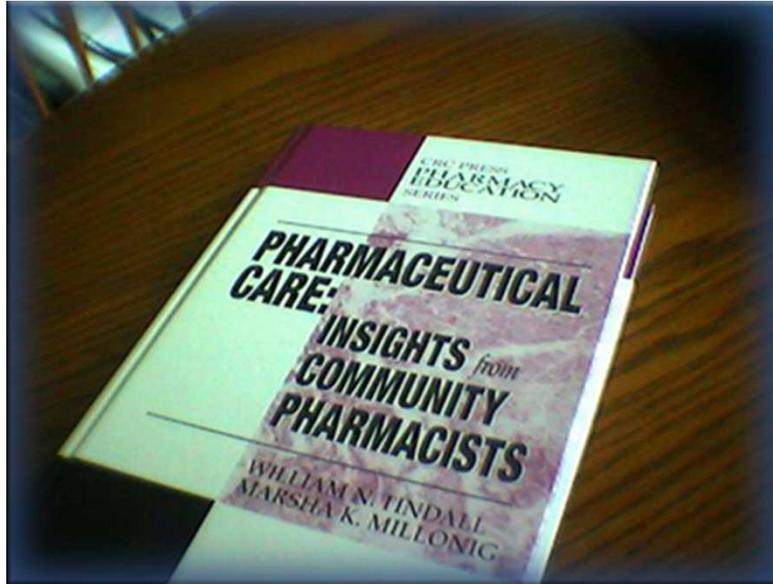
Pharmacies can help positively impact Medicare plans Star Ratings through providing MTM services

- Completion of Comprehensive Medication Reviews (CMRs) is currently a Centers for Medicare and Medicaid Services (CMS) display measure
- In addition other medication-use related measures can be impacted through targeted and comprehensive MTM
 - Adherence (Hypertension, Statins, Diabetes)
 - Appropriate treatment of hypertension in diabetes
 - High-risk medications in the elderly

Why Start an MTM Program at Your Pharmacy?

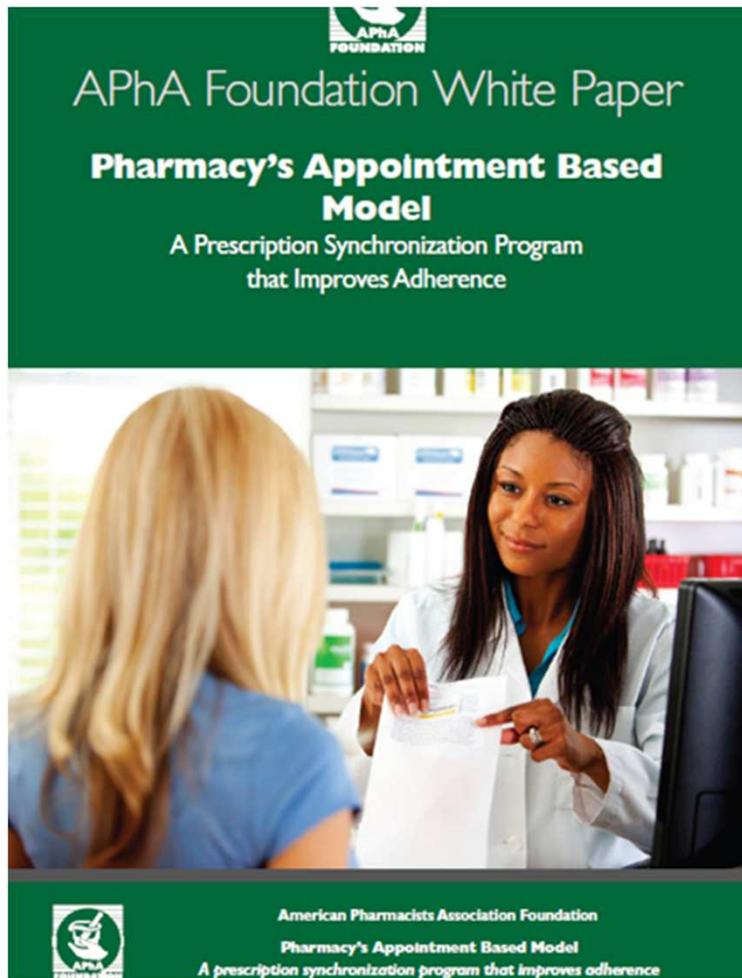
- Best way to differentiate from the competition
- Great way to establish emotional connection with patients
- One of the best programs to utilize clinical knowledge
- Additional income

Lessons from Successful Practitioners



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ABM White Paper



- [http://www.aphafoundation.org/sites/default/files/ckeditor/files/ABMWhitePaper-FINAL-20130923\(3\).pdf](http://www.aphafoundation.org/sites/default/files/ckeditor/files/ABMWhitePaper-FINAL-20130923(3).pdf)
- To synthesize the experiences of an expert panel of individuals related to designing and implementing innovative methods to improve medication adherence, especially through appointment based models and refill synchronization, and to describe benefits and implementation requirements of the methods.

Simplify My Meds-NCPA



What Patients are Saying



“When you’ve got somebody coaching you’ll do a whole lot better than if you do it on your own.”

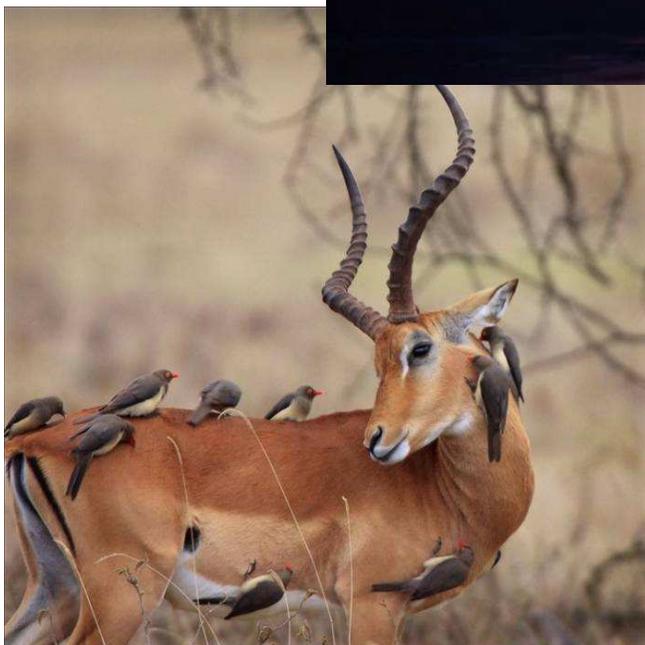
“I have a lot of trust in my pharmacist. He has given me education to help me make my medicines work. It’s given me a new perspective on my health.”



“I had questions and my pharmacist had answers. I think it is important to be able to easily converse with your pharmacist, like being part of your family.”

What if all these services were not available?





At the end of the day, we're all in this together.
And, it's all about the patient.

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Questions

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