

Examining Florida Medicaid Intervention Data for a Medication Therapy Management (MTM) Program: An Assessment of Pharmacist Recommendations to Providers

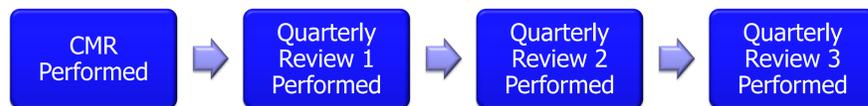
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BACKGROUND

- The University of Florida Medication Therapy Management Communication and Care Center (UF MTMCCC) provides telephonic comprehensive medication reviews (CMR) and quarterly follow-ups to patients enrolled in a State of Florida Medicaid Waiver Program (MEDS-AD).
- Patients enrolled in this program must be: residents of Florida, Medicaid recipients assigned to the MEDS-AD Waiver Program, and not enrolled in a health maintenance organization (HMO). In order to provide CMR and quarterly follow-ups, the Agency for Health Care Administration (AHCA) allowed the UF MTMCCC access to prescription claims data and diagnostic ICD-9 code billing data of enrolled patients.
- Prior to contacting a patient for a telephonic CMR, a work-up is completed to identify potential medication-related or health-related problems. During the CMR (or at a subsequent quarterly follow-up review), these potential problems are either ruled out or considered clinically significant as based on prescription claims data, diagnostic billing data, and information provided by the patient pertaining to their past medical history, current medical conditions, and current medications.
- Pharmacist recommendations are made regarding problems considered clinically significant by the pharmacist and then addressed with the provider by phone, fax, and/or mail. Acceptance of the pharmacist's recommendations is assessed at each quarterly follow-up review, and based on a change in the pharmacy claims data.

PROCESS



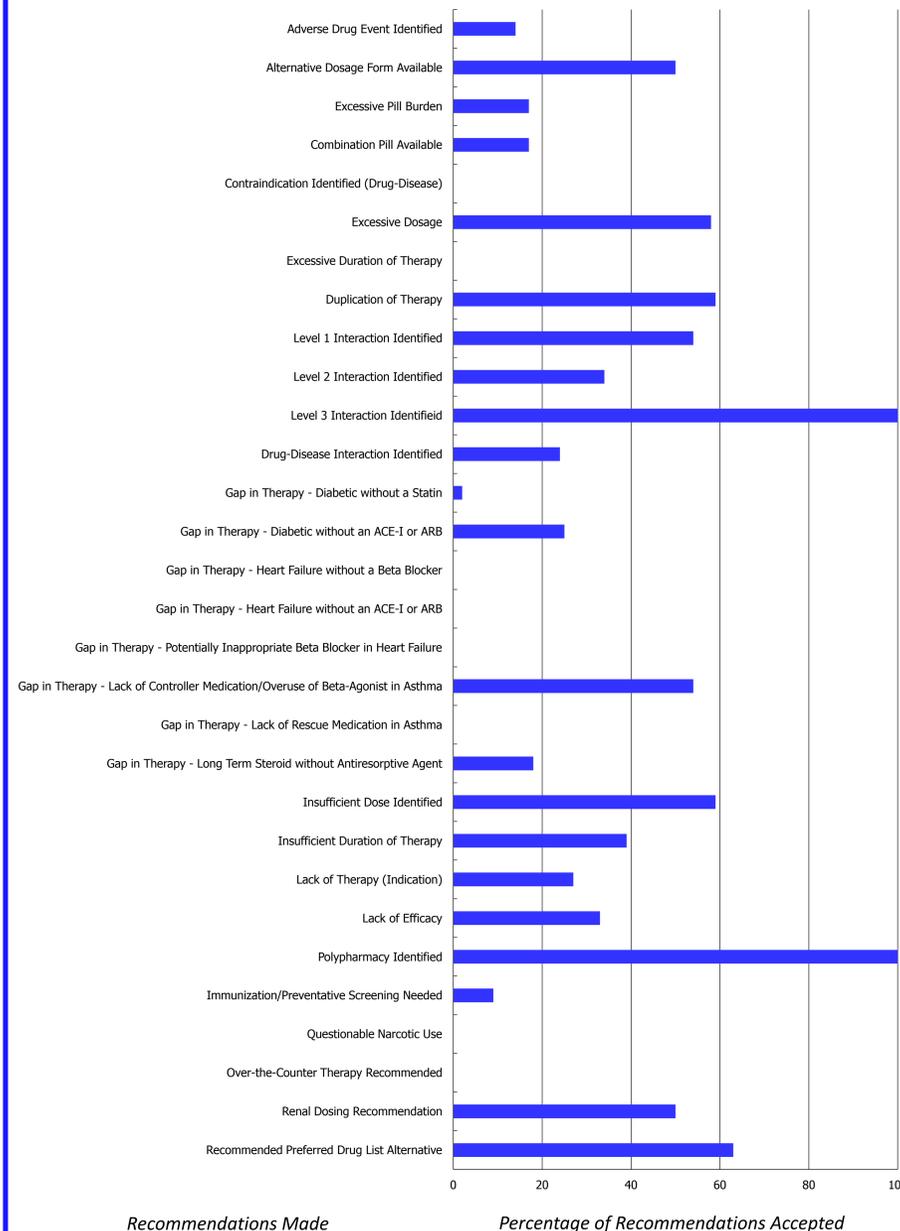
PURPOSE

- To determine the number and type of recommendations made by a pharmacist to providers regarding medication-related or health-related problems identified at the CMR or subsequent quarterly follow-up review to reveal which recommendations are most often accepted by the providers.

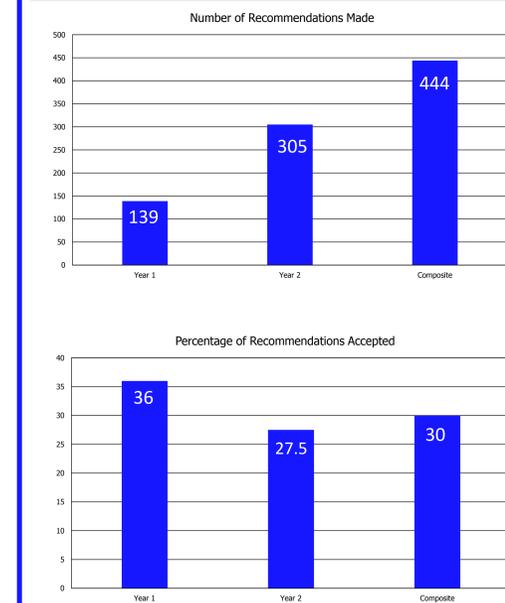
METHODS

- A retrospective chart analysis was performed on patients who received a telephonic CMR with subsequent quarterly follow-up reviews between June 1st, 2011 and May 31st 2013 (n=319) to identify recommendations made by pharmacists to providers regarding medication-related or health-related problems considered clinically significant by the pharmacist.
- The clinically significant medication-related or health-related problems were categorized based on the type of problem identified.
- The number of recommendations within each category was totaled, and then the acceptance rate for each category of recommendations was calculated to demonstrate the types of recommendations that are most often accepted by the providers.
- A recommendation was considered accepted if an appropriate medication change occurred, as evidenced by pharmacy claims data, which in turn resolved the previously identified medication-related or health-related problem.

RESULTS



RESULTS CONTINUED



- In the first year of the pilot program, 139 pharmacist-made recommendations to prescribers were identified.
- In the second year, 305 pharmacist-made recommendations to prescribers were identified.
- The acceptance rate for year 1 was 36%, and 27.5% for year 2.
- The recommendations with the highest acceptance rate were Level 3 drug-drug interactions and reducing polypharmacy.

CONCLUSION

- The provider acceptance rate is higher than what has been seen with our other lines of business.
- There appears to be a wide variety in the types of pharmacist-made recommendations that were accepted by the provider, and no consistent trend was found.
- The results of this study create a need for further research such as: why some recommendations are accepted more often than others, which types of recommendations are most successful, or different methods to employ with the provider that will help increase the overall acceptance rate.



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