

Medication Therapy Management in Community Pharmacy Practice: Core Elements of an MTM Service (Version 1.0)

American Pharmacists Association and National Association of Chain Drug Stores Foundation

ABSTRACT

Objective: To develop a model framework of Medication Therapy Management (MTM) in community pharmacy designed to improve care, enhance communication among patients and providers, improve collaboration among providers, and optimize medication use that leads to improved patient outcomes.

Data Sources: Peer-reviewed literature, structured discussions with community pharmacy leaders and representatives from pharmacy benefit providers and health plans, and input from pharmacists and pharmacy associations.

Summary: Building on an MTM consensus definition adopted by 11 national pharmacy organizations in July 2004, this model describes core elements of an MTM service that can be provided by pharmacists across the spectrum of community pharmacy. The model is structured for pharmacists to use with all patients in need of MTM services, both in the private and public sector. The model describes five core elements of MTM in the community pharmacy setting: medication therapy review (MTR), a personal medication record (PMR), a medication action plan (MAP), intervention and referral, and documentation and follow-up. The MTR can be comprehensive or targeted, depending on the needs of the patient. The PMR and MAP are patient-centered documents intended to be used by the patient to improve medication self-management. A collaborative approach to patient care involving patients, pharmacists, and physicians and other health care providers is advocated in the model. General patient eligibility considerations are also described.

Conclusion: A model framework for consideration by community pharmacists in developing MTM services is described. The model consists of five core elements for MTM service delivery in community pharmacy practice.

Keywords: Medication therapy management, Medicare, pharmaceutical care, community and ambulatory practice.

J Am Pharm Assoc. 2005;45:573–579.

Developed through a joint initiative of the American Pharmacists Association and the National Association of Chain Drug Stores Foundation.

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Disclosure: The organizations declare no potential conflicts of interest or financial interests in any product or service mentioned in this article, including grants, employment, gifts, stock holdings, or honoraria.

Acknowledgments: Individuals and organizations participating in the review of this document (see Appendix).

Eleven national pharmacy organizations achieved consensus on a definition of medication therapy management (MTM) in July 2004 (see Appendix I in the article by Bluml preceding this article in this issue of *JAPhA*). Building on the consensus definition, the American Pharmacists Association (APhA) and the National Association of Chain Drug Stores (NACDS) Foundation have developed a model framework for implementing effective MTM services in a community pharmacy setting. This model describes core elements of MTM services that can be provided by pharmacists across the spectrum of community pharmacy.

Although adoption of this model is voluntary, it is important to note that it has been developed with the input of an advisory panel of community pharmacy practice leaders (see Appendix) and is crafted to maximize both effectiveness and efficiency in the community pharmacy practice setting.

The model services are designed to improve care, enhance communication among patients and providers, improve collaboration among providers, and optimize medication use for improved patient outcomes. MTM services are distinct from dispensing. This framework describes core components of MTM service delivery in community pharmacy, but it does not represent all MTM services that could be delivered by the community phar-

macists, such as health and wellness services and disease management programs.

Recognition of the pharmacist as a provider of MTM under the Medicare Modernization Act of 2003 (effective January 2006) represents a valuable opportunity for community pharmacists to enhance patient care and address the nationally recognized need to identify and resolve medication therapy problems.¹ The success of MTM services currently contracted through self-insured employers and state Medicaid programs provides additional support for the delivery of MTM services to diverse patient populations in the community setting.²⁻⁴ As new opportunities arise, all pharmacists in community practice must share a common vision for patient-centered MTM that enhances pharmacists' role in our nation's health care system.

This model is intended for pharmacists to use with all patients in need of MTM services, whether or not they are covered by a private or public health benefit. The model is in agreement with Centers for Medicare and Medicaid Services (CMS) expectations that MTM services will enhance patients' understanding of appropriate drug use, increase compliance with medication therapy, result in collaboration between pharmacists and prescribers, and improve detection of adverse drug events.⁵

CMS, other payers, and many others in health care have recognized the importance of MTM services, but consistently defined parameters are lacking. APhA and the NACDS Foundation believe that a unified vision of core components of MTM in community pharmacy will enhance the efficiency and efficacy of these services for all patients. Our collective vision is the advancement of sustainable community pharmacy services that are supportive of improved patient outcomes and are recognized by patients, payers, and providers for their value.

Framework for Community Pharmacy-Based MTM Services

The APhA/NACDS Foundation model framework of Medication Therapy Management (MTM) in community pharmacy is designed to improve care, enhance communication among patients and providers, improve collaboration among providers, and optimize medication use that leads to improved patient outcomes. Ideally, patients^a or caregivers will receive MTM services at the pharmacy where they have filled their prescriptions and from a pharmacist with whom they have an ongoing relationship.

These services will be provided in a private or semiprivate area, as required by the Health Insurance Portability and Accountability Act, by a pharmacist whose time is devoted to the patient during this service. MTM services typically are provided by appointment but may be provided on a walk-in basis. The pharmacist can initiate MTM services when complex medication therapy problems are identified through the dispensing process.

In this model, the patient meets with the pharmacist for an annual comprehensive medication therapy review and has additional

AT A GLANCE

Synopsis: For payers and the public to be sure they're getting what is expected in terms of medication therapy management (MTM), pharmacy and pharmacists must adequately describe a framework within which this type of care is provided. For services provided in the community pharmacy setting, one such framework is presented in this article. Working with an expert advisory panel, staff from the American Pharmacists Association and the National Association of Chain Drug Stores Foundation specify five core elements that can be present in MTM services provided to patients under public or private plans: medication therapy review (MTR), a personal medication record (PMR), a medication action plan (MAP), intervention and referral, and documentation and follow-up.

Analysis: *When a patient receives medical care in a physician office, certain elements are expected, including being asked about the reason for the visit, taking of body temperature and blood pressure, being told of a diagnosis, and receiving the physician's advice on treatment of the presenting problem. As MTM and related services develop, the public must come to recognize and expect those interventions uniquely identifiable as MTM. This manuscript goes a long way toward development of widely available service features recognizable to and valued by patients, payers, and other providers.*

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