Integrating medication reconciliation and medication therapy management: Improving accuracy of a home medication list through telephonic patient interview

TH Yang1, S Stevens2, J Lannigan2, A Wolf2, P Sessions3, R Segal1
1 University of Florida College of Pharmacy
2 WellCare Health Plans, Inc.
3 Gold Standard/Elsevier

OBJECTIVES
Medication reconciliation is an important process in ensuring patient safety across the continuum of care, but it can be difficult to conduct without an accurate home medication list. To obtain an accurate home medication profile, the patient and his or her pharmacy can be potential sources of information. This study aims:

- To compare information relevant to medication-related problems obtained from prescription claims provided by a large Prescription Drug Plan (PDP) with a Medication Therapy Management (MTM) patient interview.
- To illustrate the change in information accuracy when the patient interview is conducted.

METHODS
A retrospective study was performed on 100 subjects interviewed during June and July of 2010. During the patient interview, the student pharmacist confirmed and collected the following information with the patient or caregiver:

- Medication name
- Medication strength
- Prescriber
- Indication
- Administration
- Additional prescription medications
- Use of over-the-counter (OTC) products
- Use of diet or herbal supplements

The medication list based only on prescription claims data provided by the PDP (Pre-Interview – Step 2 in MTM Workflow) was compared with the medication list constructed following the patient interview (Post-Interview – Step 4 in MTM Workflow).

RESULTS
The mean age for the study subjects was 65. The sample included subjects with age ≥65 or <65 who meet Medicare eligibility due to a qualifying disability. 94% were dually eligible for Medicare and Medicaid.

Based on the review of prescription claims data for the 100 examined subjects before patient interviews, 1506 chronic prescription medications were identified.

- Based on the MTM patient interviews, 231 medications (15.3%) identified in claims data as active prescriptions were reported as no longer being taken.
- 70% of the study subjects reported having at least one medication identified from the claims data that was no longer being used.
- 448 medications were identified during patient interviews that were not discovered from inspection of prescription claims data alone.
- 96% of the subjects reported using at least one OTC/Supplement product or prescription medication that was not listed in the claims database.

<table>
<thead>
<tr>
<th>Categories</th>
<th>Pre-Interview</th>
<th>Post-Interview</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of chronic medications</td>
<td>1506</td>
<td>1275</td>
</tr>
<tr>
<td>Total number of medications negated</td>
<td>231 (P&lt;0.001)</td>
<td></td>
</tr>
<tr>
<td>Newly Discovered Medications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prescription medications</td>
<td>--</td>
<td>134</td>
</tr>
<tr>
<td>Samples</td>
<td>--</td>
<td>3</td>
</tr>
<tr>
<td>Other sources</td>
<td>--</td>
<td>1</td>
</tr>
<tr>
<td>OTCs/Herbal Supplements</td>
<td>--</td>
<td>310</td>
</tr>
<tr>
<td>Total number of newly discovered medications</td>
<td>448</td>
<td></td>
</tr>
</tbody>
</table>

CONCLUSIONS
- At least one discrepancy was found in the medication list for 99% of the subjects when comparing the information from pre-interview to the reported medication use from post-interview.
- Based on the patient interviews, we uncovered that 67% of patients were taking at least one additional prescription medication that were not discovered from using the claims database alone.
- Patient interviews also revealed that some patients were using medications provided to them as samples or from other sources, such as from a family member.
- MTM patient interview may improve the completeness and accuracy of a home medication list beyond that achievable with the use of claims data from a patient’s pharmacy or pharmacies.

DISCLOSURE
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