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

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BACKGROUND

- The Center for Quality Medication Management (CQM) at the University of Florida (UF) provides comprehensive medication reviews (CMRs) with quarterly follow-ups, via telephone, to patients enrolled in a State of Florida Medicaid Waiver program (MEDS-AD).
- The Florida MEDS-AD program was approved in 2005 and provides coverage for certain aged and disabled individuals with incomes up to 88% of the federal poverty level. The Agency for Health Care Administration (AHCA) allowed the CQM access to prescription claims data as well as diagnostic billing data (ICD-10 codes) of enrolled patients to facilitate delivery of the medication therapy management services.
- Prior to contacting a patient to provide a CMR, a brief evaluation is completed to identify any potential medication-related problems. While completing the CMR, or quarterly follow-up, the potential problems are either ruled as clinically significant or insignificant based on the information provided by the patient during the interview about their medications or conditions.
- Recommendations are then made by the pharmacist regarding the issues ruled as clinically significant, and communicated with the patient’s provider via fax. Acceptance of these recommendations is then assessed at each quarterly follow-up review based upon changes in pharmacy claims data.

OBJECTIVE

To ascertain the number and type of pharmacist recommendations made to providers regarding medication-related problems identified during CMRs and quarterly follow-ups to determine which type of recommendation is most frequently accepted by providers.

METHODS

- A retrospective chart analysis was performed for patients who received a CMR with a subsequent quarterly follow-up review between June 1st, 2011 and November 30th, 2017 (n=1,035) to identify recommendations made to providers by pharmacists regarding medication-related problems considered clinically significant.
- The problems were then categorized by type of problem, and the number of problems within each category were totaled. The acceptance rate for each category was calculated to determine which type of recommendation is most often accepted by providers.
- A recommendation was considered accepted if an appropriate medication change occurred that resolved the previously identified medication-related or health-related problem, as evidenced by pharmacy claims data or direct provider feedback via fax.

RESULTS

Pharmacists at CQM make a wide variety of recommendations to providers. The most common classifications of recommendations made are drug-drug interactions and lack of therapy. Providers seem more likely to accept pharmacist recommendations when there is less of a barrier to implementation, such as a simple deletion of a duplicate medication.

Further research is needed to determine why providers are more likely to accept some types of recommendations over others.

CONCLUSION