Innovative Methods to Expand Medication Therapy Management (MTM) Services: Coupling Interprofessional Team-delivered MTM Services with Integration of Onsite Providers and Support Staff

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BACKGROUND

- Medication therapy management (MTM) is a service or group of services designed to optimize therapeutic outcomes for patients. MTM is underutilized, with only 11% of eligible Medicare beneficiaries using these services.
- The integrated, interprofessional team approach is a relatively new concept in health care today. Several programs have incorporated pharmacists and nurses with onsite providers and staff to provide chronic care management (CCM) services.
- Pharmacists play a key role in helping patients: monitor medications; improve health outcomes; and reduce medication costs. Nurses are an untapped resource in the delivery of MTM services, but serve a vital role on the interprofessional health team.
- New methods utilizing interprofessional, team-delivered CCM are needed to promote a comprehensive approach to MTM and expand these services to eligible beneficiaries who might otherwise not receive them.

GOAL

Program Goal
The overarching goals of the Long-Term Care Outreach Program (L-COP) and the Provider Outreach Program (POP) are to improve patient care by:
- Increasing access to MTM services; and
- Offering an interprofessional team approach to MTM and chronic disease management

Program Objectives

- Integrate interprofessional collaboration in the delivery of MTM services
- Increase comprehensive medication review (CMR) completion rate for previously unreachable patients

L-COP and POP PROGRAM FEATURES

- Long-Term Care Outreach Program (L-COP)

  - Advocacy for MTM
    - MTM nurse coordinator identified contact point (e.g., nursing home staff) to explain the MTM process and its value
  - Medication Reconciliation
    - Fax response received from LTC facility
    - MTM pharmacy technician completed medication reconciliation and updated patient records to enable comprehensive medication review (CMR) completion in MTM software
  - CMR Completion
    - MTM nurse coordinator facilitated exchange to complete the CMR between:
      - MTM pharmacist and LTC caregiver
  - Provider Communication
    - Medication-related concerns and recommendations were provided to LTC facility providers
  - Patient Follow Up
    - Medication action plan and updated medication list were sent to patient at LTC facility via mail

- Provider Outreach Program (POP)

  - Site Visit Scheduling
    - MTM nurse coordinator contacted onsite staff or office management to complete chart reviews, at provider offices within a specified area
  - CMR Completion
    - MTM nurse coordinator facilitated exchange to complete the CMR between:
      - MTM pharmacist and the provider
  - Provider Communication
    - Medication-related concerns and recommendations were faxed to providers
  - Patient Follow Up
    - A medication action plan and updated medication list were sent to patient via mail

CONCLUSIONS

- Both outreach strategies allowed for expansion of MTM services to unique healthcare settings. It also afforded important opportunities to introduce or reinforce the MTM process and its benefits and value to the facility’s healthcare professionals.
- The L-COP and POP methods were effective in completion of medical and medication history reviews.
- Implementation of both programs facilitated completion of CMRs for many patients who may not have otherwise had the valuable pharmacy oversight for their chronic conditions and medications.
- Completion of these additional CMRs led to identification of safety concerns and clinical recommendations that may otherwise have gone unnoticed. This had a positive impact on improving overall patient care.

Lessons Learned

- Integration of the MTM nurse coordinator in both outreach delivery strategies was essential in:
  1. Obtaining “buy in” from respective nurse colleagues in the LTC and primary care settings;
  2. Advocating for the benefits and value of MTM services; and
  3. Facilitating conversations between the MTM pharmacist and patients’ providers and/or caregivers.

- Working directly with the LTC facilities and provider offices (1) offered viable options for successful completion of CMRs; and (2) provided excellent opportunities for interprofessional collaboration.

REFERENCES

2. Acute Care Oncology Beachcomber: Resource Compendium for Pharmacists. Beachcomber is a proprietary development of the University of Arizona College of Pharmacy and is licensed for use by pharmacists and nurse practitioners involved in cancer care. 2013. Revised September 19, 2016

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