Emerging Trends: Medication Therapy Management (MTM)

Dawn Gabriele

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Agenda

- Background of MTM
  - Medicare Part D
- Why Retail? Why Now?
- Trends in MTM
- MTM in a Retail Setting
- Discussion
CMS Steps In for Medicare Part D Patients

- Medicare Prescription Drug, Improvement and Modernization Act (MMA 2003)
  - Goal of MTM:
    - Improve patient’s understanding of meds
    - Improve adherence
    - Detect ADEs, overuse and underuse
  - MTM programs are expected to:
    - Optimize therapeutic outcomes
    - Improve medication use including adherence
    - Reduce risk of poor outcomes
    - Reduce adverse drug interactions (biggest money saving element)
  - CMS cited qualified health care providers to provide MTM service and patients who should receive service

Empowering Patients Everyday through MTM

“Not only have I empowered patients on issues pertinent to their health by educating them during their MTM service, but also I’ve earned their respect as a pharmacist and medication specialist. The need for MTM is much larger than most patients and most health care providers, even many pharmacists, can comprehend.”—Lisa Adams Padgett, PharmD, Kerr Drug
Medicare Facts

- Medicare beneficiaries with multiple illnesses:
  - See an average of 13 different physicians
  - Have 50 different prescriptions filled each year
  - Account for 76% of all hospital admissions
  - Account for 72% of physician visits
  - Are 100 times more likely to have preventable hospitalization than someone without a chronic condition

Source: Senate Special Committee on Aging, “The Future of Medicare: Recognizing the Need for Chronic Care Coordination, Serial No. 110-7, pp 19-20 (May 9, 2007)
Over 3.8 billion prescriptions filled annually\(^1\) ... 12% don’t fill, another 12% fill but don’t take. Overall, two-thirds fail to take any or all of their prescriptions\(^2\)

50% of Americans take medicines for chronic conditions.\(^3\)
People with chronic conditions account for 83% of health care spending\(^4\)

Over 60% of the time doctors fail to communicate critical medicine info\(^5\) ... Mention adverse effects 35% of the time, how long to take med 34% of the time\(^5\)

Non-adherence results in an estimated 125,000 deaths annually\(^6\)
Drives direct health care costs of over $100 Billion annually\(^7\)

Pharmacists can help close the gap! Historically they have lacked the systems, data, and business model.

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Patient Benefits of MTM Counseling Services

Medication Therapy Management is designed to provide patients with valuable Pharmacist expertise and personalized care.

- **Safer Results**—lowers the chance of adverse effects or dangerous drug interactions. Pharmacists can see how all the drugs that the patients are taking work together.

- **Costs Savings**—Pharmacists can assist in helping patients find lower costs alternatives to the drugs the patients are on.

- **Education & Awareness**—A patient medication record is provided.
  - May be shared with the patients’ family members
  - May be shared with the patients’ physician/s
  - May be shared in a hospital setting

- **Resource**—pharmacists are a resource and may answer questions about medications.
Why Retail Pharmacy? Why Now?

- Highly trusted by consumers, physicians
- Most accessible/convenient healthcare professionals\(^1\)
- Clinically trained, administratively savvy
- Focused (as a profession) on shifting from product dispensing to clinical patient services
- “New” convenient channel for member engagement

1. Source: NACDS, 2007
# How MTM Services Differ From OBRA ’90

<table>
<thead>
<tr>
<th>Where</th>
<th>OBRA ‘90 Requirement</th>
<th>Mirixa Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where</td>
<td>Occurs at point-of-dispense (some states require only for new medications)</td>
<td>Occurs outside of the dispensing routine</td>
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<tr>
<td>What</td>
<td>Focus on specific topics regarding medication dosing and administration and side-effect mitigation</td>
<td>Focus on broad range of medications looking at costs, safety and adherence</td>
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<tr>
<td>How</td>
<td>Advice and education provided in a single session at the pharmacy counter</td>
<td>Highly interactive, protocol-driven services which may include multiple sessions with the patient through the following channels: phone, mail, face-to-face</td>
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<td>Pharmacists use their discretion to determine the topics that they believe are significant to the patient</td>
<td>Pharmacists expected to consistently follow a uniform intervention protocol</td>
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<td></td>
<td>Optional interaction with physician if patient is non-adherent</td>
<td>Pharmacist instructed to interact with physician when safety, cost, and adherence issues are identified</td>
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<td></td>
<td>Reasonable effort made to maintain patient records including address, phone, drug profile, interactions and allergies</td>
<td>Must complete required document using documentation feature in MirixaPro℠ in order to authorize and bill the case</td>
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MTM Core Elements: APhA/NACDS 2.0

- Medication Therapy Review (MTR)
- Personal Medication Record (PMR)
- Medication-related Action Plan (MAP)
- Intervention &/or referral
- Documentation & follow-up
Impact of MTM

- 98.2% of MTM programs in 2008 used pharmacists to provide their MTM services\(^1\)
- Recent analysis in *JAPhA* centered on pharmacists’ role in improving patient health\(^2\)
  - MTM interventions delivered through retail pharmacy have greater reduction in drug cost than other intervention methods

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\(^1\) "Changes Ahead." *America’s Pharmacist*, September 2009, pg 23.

MTM Analysis: Results Comparison

Covered Drug Cost = Ingredient Cost Paid + Dispensing Fee + Sales Tax

Covered Drug Cost Reduction = \text{Post MTM 6m (PMPM)} - \text{Pre MTM 4m (PMPM)}

Source: "Impact of drug cost and use of Medicare Part D of medication therapy management services, delivered in 2007."
# Evidence that Pharmacist-Delivered Programs Work

<table>
<thead>
<tr>
<th>Project</th>
<th>Findings</th>
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| Asheville Project: Long-Term Clinical and Economic Outcomes of a Community Pharmacy Diabetes Care Program | ↑ Glycemic control - improvement in HbA1C, from 33% to 67% within normal range  
↑ Improvement in lipid levels (> 50% of pts)  
↓ Total direct medical costs by $1,200 to $1,872 / yr  
*(J Am Pharm Assoc. 2003)*                                                                 |
| Wishard Health Services Project (Indiana) targeting low income patients with CHF | ↑ Medication adherence (68% to 79%)  
↓ ER visits and hospitalizations  
*(Annals of Int Med, 2007)*                                                                 |
| Walter Reed Hypertension Study                                         | ↑ Medication adherence (61% to 96%) – sustained over time (vs. usual care)  
*(JAMA, Dec 6, 2006)*                                                                 |
| Mirixa 2007 MTM Study                                                  | • Effectiveness of Face-to-Face Pharmacy programs vs. call center and letter programs  
• Observed reduced prescription costs by $34 PMPM  
*(J Am Pharm Assoc, Nov/Dec, 2009)*                                    |
Priorities: Where Managed Care Pharmacy rate MTM

Source: Adapted from Slide 37. FMCP, 3,726 managed care pharmacists surveyed, 210 responded via internet, August 2009.
How Prepared are Pharmacists to Provide MTM Services?

<table>
<thead>
<tr>
<th>Preparedness</th>
<th>Agree/Strongly Agree (%)</th>
<th>Disagree/Strongly Disagree (%)</th>
<th>Not Sure (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel I have enough clinical knowledge to provide MTM Services</td>
<td>95.7%</td>
<td>2.8%</td>
<td>1.4%</td>
</tr>
<tr>
<td>I feel I have enough clinical experience to provide MTM Services</td>
<td>90.1%</td>
<td>7.8%</td>
<td>2.1%</td>
</tr>
<tr>
<td>My Pharmacy is currently prepared to provide MTM services</td>
<td>77.1%</td>
<td>18.6%</td>
<td>4.3%</td>
</tr>
<tr>
<td>I think pharmacists in general are willing to provide MTM services</td>
<td>78.4%</td>
<td>17.3%</td>
<td>4.3%</td>
</tr>
<tr>
<td>Pharmacists have access to the information necessary to design appropriate MTM services</td>
<td>84.8%</td>
<td>13.1</td>
<td>2.2</td>
</tr>
<tr>
<td>Pharmacists should be involved in providing MTM services</td>
<td>99.3%</td>
<td>0.7%</td>
<td>0%</td>
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Pharmacist’s Perceived Challenges in Developing & Implementing MTM

Health plans have different specifications of MTM Services 69%
Lack of Time 69%
Uncertain of Reimbursement 65%
Lack of Staffing 45%
Problem Due to Part D 35%
Lack of Information on Requirement of MTM services 35%
Lack of physician support 29%
Physical space limitations 26%
Too many options for comm/doc/billing 25%
Lack of knowledge in developing MTM programs 18%
Negative patient attitudes 18%
Cost of implementation of MTM programs 15%
Lack of pharmacist experience 13%
Lack of pharmacist willingness 12%
Inability to make unilateral decisions 8%

Total number of Survey Respondents: 143

General Patient Perceptions of MTM

- Have you ever heard about MTM services?
  - Yes: 39%
  - No: 61%

- Have you ever had medication therapy review?
  - Yes: 22%
  - No: 78%

- Have you ever received a personal medication record?
  - Yes: 22%
  - No: 78%

- Have you ever received a medication action plan?
  - Yes: 13%
  - No: 87%

- Has your pharmacist ever recommended that you visit other health care providers?
  - Yes: 19%
  - No: 81%

- Has your pharmacist ever provided you with advice or recommendations?
  - Yes: 23%
  - No: 77%

Source: Adapted from Figure 2. “Perceptions of patients on Medicare Part D medication therapy management services.” Truong HA, et al. Journal American Pharmacist Association. 2009; 49 (3) 392-398
Patient Perceptions of MTM Benefits

Patient rate benefits of MTM “Somewhat” or “Very Important”

Source: Adapted from Figure 4. “Perceptions of patients on Medicare Part D medication therapy management services.” Truong HA, et al. Journal American Pharmacist Association. 2009; 49 (3) 392-398
Successfully incorporating MTM services into your workflow

- Tap into student interns
- Delegate to Pharmacy Techs where appropriate
- Prepare in advance for the MTM encounter
- Maximize pharmacist’s time
  - Schedule MTM sessions during low volume script filling time periods
- Stay on top of appointments
  - Remind patients about their MTM session
Discussion
For additional information:
How to reach us

Mirixa
11600 Sunrise Valley Drive
Suite 100
Reston, VA  20191

www.mirixa.com

Dawn Gabriele
Vice President
dgabriele@mirixa.com
813-641-8879
## Mirixa Company Overview

<table>
<thead>
<tr>
<th><strong>KEY FACTS</strong></th>
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<tbody>
<tr>
<td>Company Headquarters</td>
<td>Reston, Virginia</td>
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<tr>
<td>Technology Center</td>
<td>Emeryville, California</td>
</tr>
<tr>
<td>Parent Company</td>
<td>The National Community Pharmacists Association (NCPA)</td>
</tr>
<tr>
<td>Mirixa Company Status</td>
<td>For Profit Delaware Corporation</td>
</tr>
<tr>
<td>Number of Years in Business</td>
<td>5 years</td>
</tr>
<tr>
<td>Background of Key Employees</td>
<td>AOL, WebMD, Sage Software, ASCP</td>
</tr>
<tr>
<td>Mirixa’s Customer Reach</td>
<td>International/ Domestic clientele*</td>
</tr>
<tr>
<td>Software-as-a-Service Model</td>
<td>Mirixa recognized in Gartner Publication**</td>
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**"Get the Right IT: Using Business Models." Gartner EXP CIO Signature, October 2007.*
Mirixa’s Offerings

Solutions
- MTM
  - Medication management for Part D and commercial lives
- Formulary Alignment
  - Formulary management to save $ for health plans
- Disease-Specific Programs
  - Disease targeted education and Rx management
- Adherence
  - Assist targeted patients with staying on therapy

Assets
- The MirixaPro℠ Platform
  - Pharmacy’s clinical software suite delivered on demand
- Pharmacy Network
  - Over 40,000 contracted pharmacies

Analytics
- Mirixa Analytics
  - Patient identification and qualification
  - Program analysis
Mirixa Contracted Pharmacy Network

Over 40,000 contracted pharmacies
A Unique Delivery Platform

What is the MirixaPro℠ Platform

- The MirixaPro web-based clinical platform for pharmacy streamlines and systemizes the delivery of data-driven, protocol-based patient care services

How the MirixaPro Platform Works

- The MirixaPro platform allows pharmacies to deliver multiple programs, each configured distinctly, using a single, easy-to-use interface and common workflow pattern

What Pharmacies Can Do with the MirixaPro Platform

- Receive pre-qualified “pushed” cases, including patient-specific information
- Consistently implement program protocols
- Deliver patient education materials
- Capture patient insights and document program results
- Get compensated for professional services
Dashboard Page

Summarizes cases to be worked, presents new program opportunities, doorway to training & support resources and publishes product news.

Note: All patients shown in demo are fictitious and part of the MirixaPro platform training environment.
Pharmacy Care Services at Retail: Overcoming the Historic Challenges

Historic Challenges...
- Disparate programs without a common framework or system
- Operational requirements placed on pharmacy to participate
- No systematic way to engage a broad and deep network on behalf of a program sponsor to drive quality at scale

Require New Solutions...
- Common yet adaptable framework
- Systematic, data-driven approach
- Scalable deployment model
- Reduced adoption barriers
- Policy-driven SLAs, performance monitoring
- Integrates with workflow and staffing in a variety of settings

That Promote Innovation
- Programs must be able to vary (and compete) based on...
  - Clinical design
  - Behavioral design
  - Reach/frequency
  - Outreach modalities
  - Content quality
  - Documentation
  - Follow up
  - Evaluation design