Wisconsin Pharmacy Quality Collaborative (WPQC)
Medication Therapy Management (MTM) Services Program

BACKGROUND
The Wisconsin Pharmacy Quality Collaborative (WPQC) is a group consisting of both pharmacists and health plans dedicated to creating a pharmacy quality pay-for-performance project which aligns incentives for both pharmacists and payers.

OBJECTIVE
To establish a uniform set of pharmacist-provided medication therapy management services and a quality credentialing process in Wisconsin through a collaborative venture between third party payers (health plans, employers and government agencies) and pharmacy providers in the state. The expected results of this health care quality initiative include:

1. Improved medication use among enrolled patients as evidenced by attaining specific patient care outcomes
2. Improved patient safety (decreased numbers of medication errors and adverse drug events)
3. Reduced health care costs for participating payers
4. Professional recognition and compensation based upon the development and implementation of pharmacy practice services that improve the use and safety of medications

Accredited pharmacies are expected to:

- Be active in providing care for beneficiaries of participating network payer(s).
- Complete software system documentation and billing training.
- Have a private or semi-private patient care area accessible for providing comprehensive medication review and assessment services.
- Promote engagement in the WPQC Forum and respond to WPQC program requests as applicable.
- Participate in completing patient satisfaction surveys for the program when requested.
- Provide Level I services at a WPQC network pharmacy for commercial beneficiaries. (Wisconsin ForwardHealth allows any Medicaid provider pharmacy to provide Level I services regardless of WPQC-accreditation status.)
- Have online and/or up-to-date hardcopy pharmacy information resources available.
- Have Internet access sufficient to access a web-based patient management software system (Internet Explorer version 8.0, Mozilla Firefox version 4.0, Safari version 5.0).

QUALITY-BASED BEST PRACTICES
Pharmacies will provide the following services or meet the following characteristics in order to be included in the WPQC network. The best practices are auditable. Pharmacies will have policies and procedures in place for the best practices. WPQC endorses these best practices as procedures which maximize patient safety in the medication use process. These best practices will be reviewed and augmented as the program expands in order to continually increase the quality of pharmacy services provided. Specific educational tools are provided to participating pharmacies in order to facilitate the consistent implementation of the best practices.
Best Practices:
1. Performance of a brief medication history on all new patients or patients who fill medications at multiple pharmacies
2. Consistent verification and documentation of allergies and adverse drug reactions
3. Implementation of a procedure to check all pediatric prescriptions to ensure the prescribed dose is appropriate for age, weight, and condition
4. Implementation of a procedure to ensure the correct product is dispensed and that specific patient engagement strategies are utilized for every patient during consultation
5. Use of at least two unique identifiers for each new prescription order and upon consultation
6. Implementation of a continuous quality improvement (CQI) program for medication risk management
7. Establishment and maintenance of standards for communicating and executing Class I drug recalls and necessary actions pertaining to FDA drug safety alerts (Note: this is not the same as FDA’s MedWatch program.)

WPQC also provides support to the pharmacies in the form of tools, resources, and education which may be used to provide high level care. Examples include:
- Check-off form templates and posters to be used during consultation describing what the pharmacist did from intake to consultation
- Education on the establishment and maintenance of standards for evaluating, reporting, and documenting pertinent adverse events, product problems, and product use errors to the Food and Drug Administration (FDA) using the MedWatch reporting system

**LEVEL I (INTERVENTION-BASED) SERVICES**

**Level I services** include drug product-focused services which will be reimbursed on a per-intervention basis. The patient’s prescriber will be contacted with each intervention. Successful billing requires the suggested intervention be accepted by the prescriber except in cases of focused adherence intervention and medication device instruction intervention. Specific payers may determine exceptions to this guidance. Level I services for commercial beneficiaries must be provided at a WPQC-accredited pharmacy to be reimbursed. (Wisconsin ForwardHealth allows any Medicaid provider pharmacy to provide Level I services regardless of WPQC-accreditation status.)

- Cost effectiveness intervention: formulary interchange, therapeutic interchange, tablet splitting opportunity, conversion to an OTC product and dose consolidation
- Dose/Dosage form/Duration change intervention
- Focused adherence intervention
- Medication device instruction intervention
- Medication addition intervention
- Medication deletion intervention

Level I Service Definitions can be accessed [here](#).

Specific payers may pay for additional Level I Services (e.g., Wisconsin ForwardHealth includes Level I Service opportunities for Three-Month Supply and In Home Medication Management. For details, please refer to the Wisconsin ForwardHealth Provider Handbook.)
LEVEL II (COMPREHENSIVE MEDICATION REVIEW AND ASSESSMENT) (CMR/A) SERVICES*

Pharmacies must be WPQC-accredited to provide Level II services to Wisconsin ForwardHealth beneficiaries. Commercial payers require pharmacies to be WPQC-accredited to provide both Level I and II services.

WPQC-certified pharmacists may provide Level II Services based on the following policy:

<table>
<thead>
<tr>
<th>Payer</th>
<th>General Overview</th>
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<tbody>
<tr>
<td>Commercial Payers <em>(non-Wisconsin ForwardHealth)</em></td>
<td>WPQC-certified pharmacist <em>directly affiliated</em> with a WPQC-accredited dispensing pharmacy; contract pharmacists permitted</td>
</tr>
<tr>
<td>Wisconsin ForwardHealth</td>
<td>WPQC-certified pharmacist <em>directly or indirectly affiliated</em> with a WPQC-accredited Wisconsin ForwardHealth provider pharmacy; location determined by place of service codes in Wisconsin ForwardHealth policy; payment provided to dispensing pharmacy; contract pharmacists permitted</td>
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- **Directly affiliated**: pharmacist whose salary is funded directly by the WPQC-accredited dispensing pharmacy for either dispensing-related activities or service-based activities.
- **Indirectly affiliated**: pharmacist who does not receive payment directly from the WPQC-accredited dispensing pharmacy for service-based activities.

**Level II services** include *value-added professional services provided by a pharmacist*:

- Interviewing the patient to gather pertinent data
- Assessing, on the basis of all relevant clinical information available to the pharmacist, the patient’s physical and overall health status, including current and previous diseases or conditions
- Assessing the patient’s values, preferences, quality of life, and goals of therapy
- Assessing cultural issues, education level, language barriers, literacy level, and other characteristics of the patient’s communication abilities that could affect outcomes
- Evaluating the patient to detect symptoms that could be attributed to adverse events caused by any of his or her current medications
- Interpreting, monitoring, and assessing the patient’s laboratory results
- Assessing, identifying, and prioritizing medication-related problems related to: clinical appropriateness; appropriateness of dose and dosing regimens, considering indications, contraindications, potential adverse effects, and potential problems with concomitant medications; therapeutic duplication or other unnecessary medications; adherence to therapy; untreated diseases or conditions; medication cost considerations; access to healthcare/medication
- Developing a plan for resolving each medication-related problem identified
- Providing education and training on the appropriate use of medications and monitoring devices and the importance of medication adherence and understanding treatment goals
- Coaching patients to be empowered to manage their medications
- Monitoring and evaluating the patient’s response to therapy, including safety and effectiveness
- Communicating appropriate information to the physician or other healthcare professionals, including consultation on the selection of medications, suggestions to address identified medication problems, updates on the patient’s progress, and recommended follow-up care.
Appropriate prescribers will be notified of each CMR/A service provided and sent a copy of the PML and visit summary. If authorizations to change specific medications are needed, the appropriate prescriber will be notified.


**Benefit Structure**

**Level I Patient Eligibility & Benefit Structure**
- **Level I (Intervention-based) Services**: any outpatient with prescription drug coverage by a participating payer is eligible.
- Total number of Level I interventions annually per patient will not be limited with the exception of Level I medication device instruction intervention and focused adherence intervention which will be limited to no more than four of each such intervention annually per patient. Specific payers may determine exceptions to this guidance. (For details on exceptions to this structure for Wisconsin ForwardHealth, please refer to the Wisconsin ForwardHealth Provider Handbook).

**Level II Patient Eligibility & Benefit Structure**
- **Level II (Comprehensive Medication Review and Assessment) Services**: any high-risk outpatient covered by a participating payer is eligible. Patients meeting criteria for Level II services will be eligible unless they choose not to participate in the program. Payers and pharmacists will be involved in the identification of eligible patients.

High-risk patients include those who meet at least one of the following criteria:
- Take four or more prescription medications to treat or prevent two or more chronic conditions (one of which must include hypertension, asthma, diabetes, chronic kidney disease, heart failure, dyslipidemia, COPD or depression)
- -OR- Have diabetes
- -OR- Requires coordination of care due to multiple providers
- -OR- Have been discharged from the hospital or long term care setting within the past 14 days (See Transition of Care Services Policy)
- -OR- Experience health literacy issues* as determined by the pharmacist (prior authorization required)
- -OR- Patients may also be eligible based upon prescriber referral, plan prior authorization or plan identification.

*Health Literacy Criteria (requires prior authorization from commercial payers): Patients who experience difficulty acting on or understanding health information may qualify. For more details on who may qualify, click here.*

- Eligible high-risk patients will be allowed one initial Level II service annually or following each discharge from the hospital or long-term care facility. Specific payers may determine exceptions to this guidance.
- Eligible high-risk patients will be allowed up to three follow-up medication reviews annually. No additional follow-ups will be granted for patients following hospital or long term care setting discharge. The transition of care comprehensive medication review for these patients will be considered a “stand-alone” service. Refer to Transition of Care Services Policy for details.
If Level I services are noted during provision of Level II services, the pharmacist should bill for Level I and Level II services. Focused adherence interventions and medication device instruction interventions are considered part of the Level II service and shall not be billed for separately.

**TRAINING REQUIREMENTS**
- Completion of the WPQC ACPE-accredited homestudy is required of each certified pharmacist, technician, and student pharmacist. The training includes program-specific information, educational reading materials, information on the quality-based network best practices, and tips for incorporating MTM practices into the pharmacy workflow. Audio visual examples of the comprehensive medication review & assessment process as well as clinical assessment activities are also included.

**RESOURCES**
WPQC also provides support to the pharmacies in the form of tools, resources, and education which may be used to provide high level care. Please visit [http://www.pswi.org/WPQC/Resources](http://www.pswi.org/WPQC/Resources).
- Various Level I and Level II forms and tools to aid in the identification, marketing, service provision, documentation, and billing. Check-off form templates and posters to be used during consultation describing what the pharmacist did from intake to consultation.
- Education on the establishment and maintenance of standards for evaluating, reporting, and documenting pertinent adverse events, product problems, and product use errors to the Food and Drug Administration (FDA) using the MedWatch reporting system.
- Each WPQC-accredited pharmacy is provided a set of condition-specific *clinical pocketbook toolkits* which provide clinical resources and tips for prioritization and consistent service provision.

**PHARMACIST PROVIDER ELIGIBILITY**

**Eligible Level I (Intervention-based) Providers**
- All professional network pharmacy staff, including pharmacy technicians, may participate in the identification of Level I interventions.

**Eligible Level II (Comprehensive Medication Review and Assessment) Providers**
- All professional network pharmacy staff may participate in the identification of Level II eligible patients.
- Pharmacists who provide and bill for Level II services are required to have a National Provider Identifier (NPI) and have completed the WPQC homestudy training.

**DOCUMENTATION**
Documentation of both Level I and Level II services is required and may be audited.

**BILLING**
Both Level I and Level II service claims will be submitted for billing as directed by the specific payer.

**QUALITY ASSURANCE**
Pharmacies will be required to keep policies & procedures on-site documenting that their site meets the network quality-based best practices. The [WPQC Quality Assurance Policy](http://www.pswi.org/WPQC/Resources) describes in depth the quality assurance activities required of participating pharmacies.