

## **WPQC Frequently Asked Questions**

### **GETTING STARTED**

#### **I'm not a WPQC member yet, but I'd like to be... how do I get started?**

Please visit the Membership section on the PSW website to get started. You can learn more about the program, its requirements, and how to register as a WPQC pharmacy, WPQC pharmacist, WPQC technician, or student.

#### **How long do I need to wait after I register my pharmacy before I can start submitting claims?**

The pharmacy must be WPQC-accredited, and the pharmacist providing the service must be WPQC-certified to bill for Level II services.

- Note: a prior authorization needs to be obtained from the DAPO center before a CMR/A can be performed for a WI ForwardHealth member.

### **PHARMACY REGISTRATION**

#### **What are the membership options for pharmacies joining WPQC?**

Option 1: Current PSW Business Support pharmacy member joining WPQC

- PSW Business Support pharmacy membership – already paid
- WPQC pharmacy membership – waived

Option 2: New PSW Business Support pharmacy member joining WPQC

- PSW Business Support pharmacy membership – \$525/site/year
- WPQC pharmacy membership – waived

Option 3: Non-PSW Business Support pharmacy joining WPQC only

- WPQC pharmacy membership – \$100/site/year

#### **What is a PSW Business Support Membership?**

PSW Pharmacy Business Support membership provides a mechanism for pharmacies to support PSW in the work it does in advising and advocating for the business of pharmacy. PSW is an advocate for pharmacy business within the Wisconsin Legislature and Pharmacy Examining Board (PEB). PSW communicates on business-specific issues impacting pharmacy, with groups such as WI ForwardHealth, SeniorCare and Medicare Part D. PSW advises pharmacies on pharmacy laws and regulations, audits and accreditation requirements, technology and automation advancements.

#### **What is the Good Faith Agreement?**

The Good-Faith Agreement, signed by each pharmacy location, holds the site accountable for implementing the quality-based best practices and is audited via survey on a semi-annual basis. A pharmacy cannot become WPQC-accredited and provide Level I and Level II services until the Good-Faith Agreement is signed.

#### **Who should I designate as our pharmacy's WPQC Pharmacist Champion?**

The WPQC Pharmacist Champion must be a WPQC-certified pharmacist. When registering, a pharmacy can designate a WPQC Pharmacist Champion who is not currently WPQC-certified. However, the individual must become certified within 6 months of the pharmacy registering for WPQC. The WPQC

Pharmacist Champion will monitor and coordinate the execution and success of the WPQC program at that particular pharmacy practice site. The WPQC Pharmacist Champion will be responsible for:

- Incorporating the quality-based best practices into the pharmacy workflow
- Motivating staff to identify and provide quality MTM services to their patients
- Supporting staff through training and education as necessary
- Facilitating processes that maximize completion of payer-identified interventions
- Reviewing completed interventions to ensure they are accurate and relevant to the WPQC program and health plan requirements
- Collaborating with WPQC on performance indicators and process change

The same Champion could be designated for multiple locations if that individual has a presence at those locations.

#### **Who should I designate as our pharmacy's WPQC Corporate Contact?**

The WPQC Corporate Contact should be able to sign legal documents for the pharmacy specified. It is not necessary that the corporate contact be a pharmacist, WPQC-registered or WPQC-certified.

### **MEMBERSHIP**

#### **What are the membership options for pharmacists joining WPQC?**

Option 1: Current PSW pharmacist member joining WPQC

- WPQC pharmacist certification fee – \$50/year

Option 2: Non-PSW pharmacist member joining WPQC

- WPQC pharmacist certification fee – \$150/year

For more information on fees, visit the PSW website.

#### **How do I get an NPI number?**

All pharmacists participating in WPQC must provide their NPI number. Pharmacists can apply for an NPI number [here](#). After applying, it can take up to two weeks to receive the NPI number. An NPI number is needed to be approved for providing Level II services.

#### **What are the membership options for technicians joining WPQC?**

Option 1: Current PSW technician member joining WPQC

- WPQC technician certification fee – \$20/year

Option 2: Non-PSW technician member joining WPQC

- WPQC technician certification fee – \$50/year

#### **What are the membership options for students joining WPQC?**

Option 1: Current PSW student member joining WPQC

- WPQC student certification fee – waived

Option 3: Non-PSW student member joining WPQC

- WPQC student certification fee – waived

## PHARMACY ACCREDITATION

### **What does it mean for my pharmacy to be WPQC-accredited?**

WPQC pharmacy accreditation verifies your pharmacy is compliant with the WPQC quality-based best practices and has at least one WPQC-certified pharmacist. Participating payers of WPQC recognize there is a difference in practice/performance between a WPQC-accredited and non-WPQC-accredited pharmacy.

### **If my pharmacy becomes WPQC-accredited, but we never perform a Level II service, are we still a “WPQC Pharmacy”?**

Yes. As long as the pharmacy continues to meet the WPQC quality-based best practices as evidenced by successful completion of the semi-annual WPQC quality assurance surveys, there is no requirement that they provide Level II services. However, there is a level of commitment expected of participants which includes identifying eligible patients and responding to opportunities presented to the pharmacy for Level II services.

### **Can a remote dispensing site be a WPQC accredited pharmacy?**

According to the Wisconsin Administrative Code Phar 7.095, operation of remote dispensing sites: ‘Remote dispensing site’ means a dispensing site that is not licensed as a pharmacy. Therefore, because a remote dispensary is not a licensed pharmacy, it cannot receive accreditation through WPQC. However, the parent pharmacy associated with the remote dispensary is encouraged to become or remain WPQC-accredited.

## CERTIFICATION

### **What is the difference between certification and accreditation?**

Both pharmacies and individuals need to register for WPQC. After meeting program requirements:

- Pharmacies become accredited.
- People (pharmacists, techs, students) become certified.

### **Who needs to become WPQC-certified?**

All pharmacists providing WPQC services will need to complete the certification process. Each pharmacy must have a WPQC champion pharmacist to coordinate the program. The WPQC champion must become WPQC-certified within six months of the pharmacy registering. If your pharmacy employs technicians, you are encouraged to have at least one pharmacy technician complete the technician certification. In addition, each pharmacy will need to become WPQC-accredited. The University of Wisconsin-School of Pharmacy currently requires that all 741/743 Ambulatory/Community APPE Clerkship Students complete a specified number of MTM services during rotation. Students should access the WPQC Homestudy training online to complete the certification.

### **How do I become WPQC-certified?**

Pharmacists, technicians and students become WPQC-certified by completing the ACPE-accredited WPQC homestudy. The WPQC homestudy is an online course that provides basic training on how to start providing WPQC services at your pharmacy. The training includes program-specific information, educational reading materials, information on the quality-based best practices, and tips for incorporating MTM practices into the pharmacy workflow. Audio visual examples of the Comprehensive Medication Review & Assessment (CMR/A) process as well as clinical assessment activities are also included.

In order to access the homestudy, you must first register for WPQC as it is a “members only” benefit of the WPQC program. Pharmacists and technicians completing the respective homestudy will receive CE credit. Students must complete the WPQC pharmacist homestudy (no CE credits will be granted).

After reviewing the homestudy materials, everyone must take the WPQC homestudy assessment test and receive a passing score of 70% or higher. Individuals who do not receive a passing score can retake the test as many times as is necessary to receive a score of 70% or higher. Upon passing the test, you are considered WPQC-certified.

**How long do I have to complete the certification process?**

You must complete and pass the WPQC homestudy assessment test within 6 months of joining WPQC. If the homestudy assessment test is not completed within this six-month time frame, you will lose access to the homestudy course materials and will need to re-join and re-pay the fee to gain access to the homestudy course materials.

**How do I receive CE credits for completing the homestudy?**

In order to receive CE credit for completing the WPQC homestudy, you must have a CPE Monitor ID #. You can apply for a CPE Monitor ID # [here](#). After completing the homestudy, you must submit the WPQC Evaluation online to provide feedback on the course materials, request your CE credits, and affirm you completed the homestudy.

**When do I receive my CE credits?**

PSW will upload your CE credits to your CPE Portal within 60 days of completion of the WPQC Homestudy Assessment Test.

Note: credits will not be uploaded until you have paid in full to join WPQC. Thus, if you initially requested an invoice be sent to you, you will need to submit payment in order to receive CE credits.

**How do I get my WPQC Certification Certificate?**

Your WPQC Certification Certificate will be available to you upon successful completion of the WPQC homestudy process. To have your certificate emailed to you, click on the WPQC training link in your "User Account" and click on "CERT."

Note: Your certificate will only be available if you have paid in full to join WPQC. Thus, if you initially requested an invoice be sent to you, you will need to submit payment in order to receive your certificate.

**Do we need to have a minimum number of WPQC-certified pharmacists participating on staff?**

Your pharmacy must have at least one WPQC-certified pharmacist acting as the champion to coordinate the proper execution of the program. All pharmacists are encouraged, but not required, to become WPQC-certified. However, in order to provide and bill for WPQC MTM services, pharmacists must be WPQC-certified.

**Do we need to have a minimum number of WPQC-certified pharmacy technicians on staff?**

Your pharmacy is encouraged, but not required, to have at least one WPQC-certified pharmacy technician on staff if you employ technicians. All technicians are encouraged, but not required, to become WPQC-certified.

**I am a pharmacist who already provides WPQC-like interventions, but I don't work in a community/ambulatory pharmacy where product dispensing occurs. Can I become WPQC-certified?**

WPQC-certified pharmacists may provide Level II Services as long as they meet specific payer requirements:

- Wisconsin ForwardHealth: WPQC-certified pharmacists can provide and bill for MTM services as long as they are directly or indirectly affiliated with a WPQC-accredited dispensing pharmacy. Refer to [ForwardHealth Provider Handbook](#) for allowable place of service codes.
- All other WPQC payers: WPQC-certified pharmacists can provide and bill for MTM services as long as they are directly affiliated with a WPQC-accredited dispensing pharmacy.

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.*

To view the official WPQC Service Provider Policy, visit the WPQC Resources section of the PSW website.

**If I leave the pharmacy that I became certified under, do I need to be recertified at my next pharmacy location?**

No. Once you are WPQC-certified, you remain WPQC-certified. You will however need to update your contact information and work affiliations in your PSW Profile.

**Does WPQC Accept the APhA MTM Certification Program as a Substitute for the WPQC Homestudy Training?**

No. The WPQC Homestudy Certification training includes materials that are specific to WPQC program requirements as well as information regarding the types of interventions available under the WPQC program. Due to the program-specific nature of the training, WPQC pharmacists must complete the WPQC Homestudy Certification for Pharmacists to be WPQC-certified.

**TYPES AND PROVISION OF WPQC SERVICES**

**What types of services are provided by WPQC-accredited pharmacies?**

Before we describe the types of services a WPQC-accredited pharmacy offers, we should first remind everyone that in order to become a WPQC-accredited pharmacy, the pharmacy needs to ensure they meet the WPQC Quality-based Best Practices which include:

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 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

All of these process-based measures have been designed to assure patients and payers they will receive a uniform set of standard services when they visit or pay for services performed at a WPQC-accredited pharmacy.

The Good-Faith Agreement signed by each pharmacy location holds that site accountable for implementing and monitoring the quality-based best practices during the good-faith period.

### **What is a Level I (Intervention-Based) Service?**

Level I services, also known as Intervention Based Services, are typically conducted within a dispensing pharmacy's workflow. Some examples include:

- Cost Effectiveness Interventions
  - Examples: Formulary/Therapeutic Interchanges, Tablet-Splitting, and Dose-Consolidations
- Medication Device Instruction
- Dose/Dosage Form/Duration Changes
- Medication Additions
- Medication Deletions
  - Example: Therapeutic Duplications
- Adherence Interventions

Health Care Providers should be contacted for authorization when a change in the prescription is recommended by the pharmacist. The pharmacist will then coordinate approved changes. In all cases, the patient's health care provider needs to be notified of all Level I services performed by a WPQC-accredited pharmacy.

### **What is a Level II (CMR/A) Service?**

Level II services, also known as Comprehensive Medication Review & Assessment (CMR/A) Services, typically consist of a private face-to-face visit between the pharmacist and the patient (or sometimes, the patient's caregiver or advocate). The initial visit tends to last at least 45 minutes and the discussion is guided by the clinical pocket toolkits PSW has created with input from disease experts. During the visit, the pharmacist reviews the patient's full list of medications including OTC's and supplements, addresses adherence issues and patient concerns, and reinforces self-monitoring techniques. At the conclusion of the visit, the patient receives a Personal Medication List (PML) and a Medication Action Plan (MAP). If the PML and MAP cannot be completed by the time the visit is over, they may be mailed to the patient in a timely manner. The patient's primary care provider is contacted with recommendations for change, provided a PML and a visit summary. There are up to three follow-up CMR/A visits allowed per rolling year. Follow-up visits are also considered Level II services.

### **Our pharmacy practice has multiple sites; can I provide WPQC services at all of the pharmacies that I work at within this practice?**

If your pharmacy practice has more than one pharmacy participating in WPQC, you will be able to provide services at each site as long as each site is WPQC-accredited. When registering for WPQC, pharmacists and technicians must list all pharmacies at which they intend to provide WPQC services.

### **When would we need to obtain a Prior Authorization to provide a WPQC service?**

For WI ForwardHealth patients, prior authorization is required for all patients receiving a Level II service. Pharmacy staff can contact the Drug Authorization and Policy Override (DAPO) Center (1-800-947-9627) to request prior authorization to perform a Level II service for a specific patient. Upon approval, the patient is "reserved" by the pharmacy for 60 days (for an initial Level II service) and one year (for a follow-up Level II service). The date of service (DOS) for the initial CMR/A must fall within those 60 days or another approval will need to be obtained.

### **How is WPQC addressing and incorporating health literacy?**

With only 12% of adults in the U.S. being "proficient" in health literacy (NAAL 2003), WPQC recognizes this as an area in which pharmacists can be of great assistance in helping patients understand their

medication therapies. WPQC criteria for low health literacy include problems related to UNDERSTANDING and/or ACTING ON health information. WPQC aims to assist patients with low health literacy through both Level I and Level II services. For more information and resources, please review the Health Literacy Pocketbook Toolkit.

**When do I need to obtain consent for services my pharmacy provides to WI ForwardHealth members?**

For CMR/As (Level II Services), the pharmacist needs to clearly articulate that the service is voluntary on the member's part. A member signature of consent is required. SeniorCare members in their spend-down or deductible period are responsible for the fee associated with the service. In this case, the pharmacist should ensure the member knows this prior to performing the service.

**PAYERS**

**Who will the participating payers be?**

Please refer to the WPQC website to view the most up to date list of payers and their specific participation requirements.

**Once my pharmacy is accredited, what else is required to start submitting claims?**

Once the pharmacy has completed the registration process, has submitted the WPQC Good Faith Agreement to PSW, and has become WPQC-accredited, PSW will provide your pharmacy's name to participating payers. Next, you should identify one WPQC-certified pharmacist to serve as the WPQC Champion as well as other pharmacists and technicians who will be trained. (PSW will provide pharmacist and technician names to payers).

**How does my pharmacy go about submitting claims to the different participating payers?**

WI ForwardHealth will allow Level II claims to be submitted via the ForwardHealth Portal, PES software, or paper 1500 Health Insurance Claim Forms.

**Will patient opportunities be pre-identified for us from the payer?**

Medicaid provides a list of high risk, potentially eligible members through the ForwardHealth portal. Pharmacies with identified high risk members will receive a monthly email stating that the push list is available on the portal. Visit the WPQC website for more information about how to access the ForwardHealth push list.

**How do we know what criteria the payers used to identify potential interventions ("pushes")?**

This information varies depending on the payer and their priorities and formularies. WPQC will make every attempt to provide detail on the criteria used to identify the push opportunities.

**BILLING FOR WPQC SERVICES**

**Do Level I and Level II services have to be "accepted" by the health care provider in order to be billable?**

Most Level I services require prescriber approval in order to be submitted for compensation. The exceptions are the focused adherence intervention and the medication device instruction intervention. These do not require approval by a health care provider, but do require that communication be sent to the patient's health care provider following the service. Level II services do not require health care provider approval either, though the patient must meet the Level II eligibility criteria in order for the claim to be eligible for payment.

**Why does the ForwardHealth Portal for Wisconsin WI ForwardHealth require that a diagnosis code be submitted with the claim?**

Inclusion of a diagnosis code on the professional claim is required by HIPAA. You are only required to submit one diagnosis code that is most relevant to the intervention being billed. When entering the

diagnosis code in the ForwardHealth portal, please enter the code EXACTLY as it appears in the ICD handbook with no periods and no leading or trailing zeroes. If you are having difficulty entering the diagnosis code, you can enter the first 3 digits of the ICD and click on search in the portal. This will pop up the recognized ICDs in the system.

**When documenting Total Time Spent for services performed, what time should I count?**

For CMR/As (Level II) documentation (not billing), WI ForwardHealth specifically requires the pharmacist to document the face-to-face time (start to end) spent with the patient, in addition to documenting the total time spent on the intervention.

For specific billing guidance for the WI ForwardHealth program, please refer to the [WI ForwardHealth Provider Handbook](#) for billing details.

**How do I know if I should use CPT Code 99605 or 99606 to bill for the initial 15 minutes of MTM services provided? When do I use the 99607 CPT Code?**

When submitting a claim for a Level II CMR/A for a new patient, pharmacies should indicate CPT code 99605 with the appropriate modifier, with a quantity of 1 for the first 15 minutes. A new patient is considered a patient who has not received ForwardHealth MTM services from your pharmacy in the last 3 years, or since the WI ForwardHealth MTM program was implemented on September 1, 2012. When submitting a claim for a Level II CMR/A for an established patient, pharmacies should indicate CPT code 99606 with the appropriate modifier and a quantity of 1 for the first 15 minutes. An established patient is considered a patient who has received MTM services (Level I Intervention-Based or Level II CMR/A) from your pharmacy in the last 3 years, or since the WI ForwardHealth MTM program was implemented on September 1, 2012. Use the 99607 CPT code for the additional 15 minute increments of time for either a new or established patient.

**How much will I be reimbursed for Level I and Level II Services?**

Each payer agreement/contract will outline reimbursement rates for Level I and Level II Services.

**Who can I contact for questions regarding the WI ForwardHealth program requirements and the ForwardHealth Portal?**

- Pharmacy Society of Wisconsin: 608-827-9200
- ForwardHealth Portal Helpdesk: (866) 908-1363
- Electronic Data InterChange (EDI) Helpdesk: (866) 416-4979 (for assistance in installing and using the PES software)
- DAPO (Drug Authorization and Policy Override) Center (consent to perform a Level II intervention): (800) 947-9627 – Option 3-- (8:00 a.m. to 5:30 p.m. Central Standard Time, Monday through Friday, except holidays)

**What is Cost Avoidance, and can I bill for MTM services provided to a WI ForwardHealth member who has a primary insurance?**

Because WI ForwardHealth is the payer of last resort, providers are required to take steps to ensure that WI ForwardHealth is NOT paying for services that would be covered by Medicare or commercial health insurance. This is called coordination of benefits or cost avoidance.

Your responsibility as a WI ForwardHealth provider billing for professional services is to check the member's enrollment for other coverage. If the member is found to have Medicare Part A, B, or D or has commercial health insurance, you should take steps to verify that Medicare or the Other Insurance (OI) do or don't cover MTM services and that the member is eligible for them.

You should exercise due diligence in obtaining this information. The process you choose to verify is a business decision that your organization needs to make. Just keep in mind that the expectation is that you coordinate benefits to the best of your ability.

If you find that the member is covered for MTM services under Medicare or OI, you will need to bill the appropriate payer first. Once you get a response as to whether the claim was denied or paid you can proceed with billing WI ForwardHealth. Information on how to bill WI ForwardHealth when Medicare or OI is involved is outlined in your billing instructions. If it is not possible (e.g., eligibility criteria, no conduit to submit the claim) for the pharmacy to submit a CMR/A claim to a member's primary health plan (e.g., Part D PDP) and the member is expected to benefit from the service, the pharmacy may submit the claim to WI ForwardHealth. The WPQC website provides more detail on billing dual eligible Medicaid members on the ForwardHealth portal.

## **DOCUMENTATION**

### **What documentation am I required to give the patient and prescriber following provision of Level II Services?**

After a patient receives a Level II Service, they should be provided a copy of their updated medication list (Patient Medication List – PML) and a Medication Action Plan (MAP) within 14 days. The patient's provider should receive a summary of the visit, the updated PML, and any recommendations for change.

### **How long am I required to retain documentation of services?**

Each participating payer has different requirements. WI ForwardHealth requires pharmacies to retain documentation (including medical, financial records and patient authorizing signature) for not less than five years from the date of payment.

## **MARKETING MATERIALS**

### **Where can we access information about how to effectively communicate and market WPQC services to patients and health care providers?**

Marketing of this program by everyone involved is very important to the profession's success. The WPQC website contains helpful tools in the Marketing section to help you and your staff market services to your patients, prescribers and community. To order free marketing materials, please call PSW (608-827-9200) or email [wpqcadmin@pswi.org](mailto:wpqcadmin@pswi.org).

## **TECHNICIAN INVOLVEMENT AND TRAINING**

### **How can technicians get involved? Is there training for technicians?**

Pharmacy technicians are encouraged to become WPQC-certified. There is a separate training track for technicians (versus pharmacists). The training highlights many roles that WPQC-certified technicians can play. Technician-specific resources are available on the WPQC website.

### **What type of ongoing training will pharmacists and technicians receive?**

As WPQC evolves, there will be required trainings to keep everyone updated on program changes and clinical content.

## AUDITS

### **Will we be audited to ensure that our pharmacy is meeting the quality-based requirements?**

Yes. Each pharmacy should be prepared for audits by participating payers. Pharmacies will be required to provide evidence that they are following their WPQC quality-based best practice policies and procedures. The WPQC Quality Assurance Policy outlines the twice annual audit survey schedule each pharmacy will complete to ensure they are meeting the quality requirements. Consequences of not meeting audit requests are described within the WPQC Quality Assurance Policy.

## WPQC SUPPORT

### **Who can I contact for support regarding the WPQC program?**

For questions or concerns regarding WPQC, please contact PSW at (608) 827-9200 or email [wpqcadmin@pswi.org](mailto:wpqcadmin@pswi.org).