

Part D Enhanced Medication Therapy Management (MTM) Model Test



Center for Medicare and Medicaid Innovation

Division of Health Plan Innovation

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Center for Medicare and Medicaid Innovation

- Center for Medicare and Medicaid Innovation (Innovation Center)
 - Created by the Affordable Care Act
 - Tasked with developing and testing "innovative payment and service delivery models to reduce program expenditures ... while preserving or enhancing the quality of care" in Medicare, Medicaid, or CHIP
- Examples of Innovation Center models include:
 - Medicare Advantage Value-Based Insurance Design Model Test
 - Pioneer ACOs
 - Bundled Payments for Care Improvement
 - Partnership for Patients

Health Plan Innovation

- Innovation Center work on Health Plan Innovation:
 - November 2014: Issued RFI requesting public feedback on potential model approaches
 - September 2015: Announced the first Health Plan Innovation models
 - Medicare Advantage Value-Based Insurance Design
 - Part D Enhanced Medication Therapy Management
 - Additional potential models are currently under consideration and/or in development.

Why an Enhanced MTM Model?

- Medication Therapy Management refers to activities that aim to optimize medication use by patients
 - Medicare Part D plans are required to have an MTM program that targets beneficiaries at high risk of medication-related health issues
- Currently, standalone Part D sponsors are not incentivized to fund MTM programs above a minimum level
- Current MTM regulations require uniform service offerings to all who meet the plan's approved criteria without regard to differences in individuals' actual needs for assistance.

Model Test

- Does providing regulatory flexibility and financial incentives to standalone Part D plans encourage more targeted and effective MTM programs?
 - More beneficiaries impacted
 - Quality (health care quality, outcomes, and customer satisfaction)
 - Cost (Medicare expenses across Parts A, B, and D)

Beneficiary Impact

- MTM programs that work to identify and subsequently target barriers to medication management
- Outreach strategies that reach beneficiaries in a clear and effective way
- Interventions that properly address barriers to medication management in a tailored, personalized manner

What Does the Enhanced MTM Model Test?

- 5-year Performance Period
 - Regulatory Flexibilities
 - Financial Incentives
 - Increased Access to Medicare Data

Regulatory Flexibilities

- The model provides a limited waiver of the following Part D requirements:
 - MTM requirements
 - Uniformity requirements
 - Disclosure requirements
 - MLR requirements for MTM

Financial Incentives

- Prospective Payment for MTM Program
 - Per member per month (PMPM) payment outside of the bid
 - Vary by programs proposed
 - Approval based on program scope and comparison to other proposals

Financial Incentives

- Performance Payment
 - \$2 PMPM premium reduction for plan beneficiaries
 - Awarded annually for 2% reduction in plan enrollees for Medicare
 Parts A and B expenditures
 - Compared to a benchmark that projects what spending would have been absent the model
 - Payment made 2 years after performance year
 - Payment for year 1 will be made in year 3 of the model

Increased Access to Medicare Data

- Plans may request access to Parts A and B data for their enrollees to improve health care operations involving quality improvement and/or care coordination.
- To be used for targeting groups of beneficiaries at high risk of medication-related issues
- CMS is exploring the feasibility of providing data on alignment with ACOs and other CMMI models to improve system linkages with pharmacists and providers.

Current Medication Management Issues: Pharmacists

- A primary goal of the model is to promote stronger linkages between PDPs, pharmacists, and prescribers.
- Limitations of current MTM programs:
 - Pharmacists are often not utilized fully or effectively.
 - Information exchange between pharmacists and prescribers is often lacking.
- The Enhanced MTM model does not directly pay pharmacists; they can be paid only through a participating PDP or MTM vendor.

Current Medication Management Issues: Prescribers

- Currently prescribers face barriers to ensuring proper medication management.
 - Prescribers often lack a complete picture of a patient's prescriptions.
 - They lack the time to educate patients on proper medication management.
- Potential prescriber benefits for participating in the model:
 - Access to up-to-date accurate prescription records that reduce prescription of duplicative or contraindicated medications.
 - Synergies with ACO model
 - Linkages between clinical care, consultations, and data to improve patient quality of care
- The model does not permit plants to compensate prescribers for services rendered

Model Duration and Plan Eligibility

Model Duration

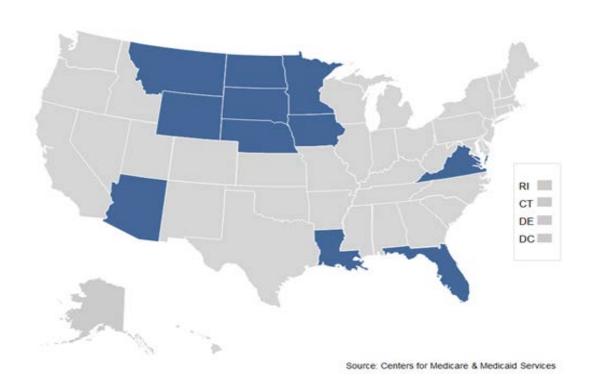
- Five-year performance period,
- Incentive payments will continue in years 6 and 7

Plan Eligibility

- Standalone basic Part D Plan with at least 2,000 enrollees and 2 years of Part D experience
- Approved for Part D participation for plan year 2017
- Not be under sanction by CMS or any law enforcement entity (including the OIG) as of April 2016

Eligible Regions

• Eligible regions include:



While participation is voluntary, in order to participate, a multiregional sponsor must participate in all regions in which it offers a qualifying plan

Data Reporting Requirements

- Plans will be required to report:
 - MTM Encounter Data
 - SNOMED coding for MTM interventions (and other data)
 - CMS plans to issue further guidance in near future
 - Plan-developed metrics for:
 - Progress assessment
 - Internal Learning System

Marketing Communications & Disclosures

- Participants may not advertise participation in pre-enrollment marketing materials.
- Plans may convey truthful and accurate information when asked directly by potential enrollees; CMS may require disclaimer language to accompany.

Monitoring

- CMS will monitor participating plans to ensure compliance with accepted proposals, including analyzing the following data:
 - MTM Encounter Data
 - Eligible plans must clearly identify targeted populations, engagement strategies, and interventions in their application.
 - Beneficiary impacts (1-800-Medicare, etc.)
 - Impact on Star Ratings
 - CMS will observe effects on related measures (adherence).
 - Aim is to hold non-participants harmless for differences in model participants scores

Evaluation

- Longitudinal case-control study design:
 - Comparison with similar beneficiaries enrolled in Basic Part D plans that are not selected
 - Comparison group based on a variety of measurable dimensions, including but not limited to patient- and market-specific characteristics
 - A pre/post case control study design, comparing 3 years of pre-model data with model performance data
- Key metrics (including but not limited to):
 - Overall expenditures
 - Utilization Quality measures

Application Process

- Request for Application
 - Released October 2015
 - Actuarial Instructions Release Date: October 2015
 - Online Version Available Late November 2015
 - Applications Due January 2016
 - Provisionally Accepted Applications Updated: July 2016
- Enhanced MTM Model Email: EnhancedMTM@cms.hhs.gov
- FAQs posted online regularly at http://innovation.cms.gov/initiatives/enhancedmtm/
- Applications evaluated based on:
 - Likelihood of program targeting at-risk populations, and implementing effective engagement strategies and interventions
 - Proposals should be able to achieve performance payment if effective through clinically plausible and financially reasonable interventions.

Modifying Enhanced MTM Programs

- Can you modify an Enhanced MTM program after the program has begun?
- In the middle of a plan year?
 - Yes, but the proposed scope (and prospective payment) cannot change
- Between plan years?
 - Yes, and plans may alter their prospective payment proposals during this time.
 - CMS will provide more guidance at a later date

Upcoming Learning Events

- Model will include several events aimed to promote learning and diffusion among participants.
- Medication Therapy Management Data Exchange: state of the art of MTM related coding transactions and interoperable data exchange
 - Planned for November 18, 2015
 - More information coming late October

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Questions?