

**AMCP Summary: Request for Public Comment on the Proposed Enhanced MTM Model Encounter Data Structure and Pilot Monitoring Measures**

**Released: February 26, 2016**

**Comments Due: April 26, 2016**

On February 26, 2016, the Centers for Medicare and Medicaid Services (CMS) Center for Medicare and Medicaid Innovation (CMMI) released a [memorandum](#) and [draft specification plan](#) outlining the proposed data structure and pilot monitoring measures for the enhanced MTM model test originally announced in September 2015 and scheduled to begin in January 2017. A summary of the key proposed elements that impact managed care pharmacy are highlighted below:

- Given the intent of the model test is to encourage innovation, CMMI does not mandate a specific MTM approach but instead will collect encounter-level MTM data from participating sponsors to gather data and insight about best practices and approaches.
- Proposes a sequential enhanced MTM encounter data layout where each encounter is described by a SNOMED CT code, including referrals, procedures, medication therapy issues, or outcomes.
- Proposes use of a “long” format, in which each enhanced MTM encounter code is recorded as a new record for the beneficiary rather than a “wide” format, which is a summary-type record containing all information on a beneficiary’s enhanced MTM activities.
- Proposes use of beneficiary-specific sequence identifiers, to allow enhanced MTM encounters to be grouped and tracked over time. Each record will receive a sequence identifier to aid analysts in grouping and understanding the data.
- Proposes use of MTM-related SNOMED CT codes to specifically describe enhanced MTM activities. CMMI believes that SNOMED CT codes represent the best available standardized nomenclature set for use with MTM, and that they will support the model’s goals.
- Data files must be submitted on a quarterly basis and will be due one month after the close of every quarter. However, to ensure participating Part D sponsors have sufficient time to establish reporting systems and processes, the Q1 2017 data file will be due four months after the close of the quarter.
- Proposes a standardized set of seventeen (17) unique data elements and three (3) monitoring measures to allow for sponsors’ enhanced MTM programs to be evaluated, monitored, and compared within a common framework. The standardized approach is also intended to promote interoperability and ease sponsors’ burden in preparing and submitting data.

AMCP considers the consistent use of structured universal codes as critical to the expansion of documentation of MTM services and supports the use and implementation of SNOMED CT codes for the exchange of information. SNOMED CT documentation for MTM services will allow the pharmacist to document the clinical care that is provided through encounter-based coding and intervention-based coding. Encounter-based coding elements for MTM services include reasons or indications for the MTM visits and a description of the services provided (e.g., referral to MTM service, complications with medication therapy, comprehensive medication therapy review, targeted medication therapy review, medication-related action plan, pharmacist consultation with health care provider, patient education). Intervention-based coding allows the pharmacist to document drug therapy problems identified during the medication

regimen assessment and also provide the necessary SNOMED CT codes to document the patient's care plan or medication action plan. Use of standardized SNOMED CT codes, coupled with a framework for defining drug therapy problems, will allow for the shift towards outcomes-based measures versus the traditional process-based measures that are used today in Part D.

AMCP's MTM Advisory Group is working in collaboration with stakeholders in this area, such as the Pharmacy Quality Alliance (PQA) and the HIT Collaborative, to develop a standardized framework to define drug therapy problems and allow for the shift towards outcomes-based measurements in Part D. AMCP plans to share its work and recommendations with CMS in the coming months in advance of the enhanced MTM model test beginning.

Comments on this proposal must be submitted to CMS by April 26, 2016 at 5pm ET. AMCP will work with stakeholders to develop comments to CMS to ensure the perspective of managed care pharmacy is voiced as requirements for the enhanced MTM model test are considered. You may provide feedback via email to Soumi Saha, Assistant Director of Pharmacy & Regulatory Affairs, at [ssaha@amcp.org](mailto:ssaha@amcp.org) by Friday, April 15<sup>th</sup>. AMCP encourages all stakeholders to carefully consider the proposal and submit comments, even if they are not participating in the test model, because the pilot will help shape the future of MTM in Part D.

In addition, AMCP will host a webinar on May 11<sup>th</sup> (2-3PM EST) to explain what SNOMED CT codes are, why they matter, and how they impact managed care pharmacy. This webinar is free for members and \$69 for non-members. To register, please visit AMCP's Calendar of Events at <http://www.amcp.org/calendar/>.