

A Fairview Clinic Medication Therapy Management Business Plan

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Situation: A second-year University of Minnesota Pharmaceutical Care Leadership resident started a Medication Therapy Management (MTM) practice at the [clinic name] in July at 0.6 FTE. The resident position was funded through [organization name] and will be completed in June. A determination will need to be made if we continue the practice at [clinic name] after the residency is completed.

Background: Fairview Pharmacy Services has provided MTM services since 1998 in Fairview Clinics. To date we have 40 practitioners in 54 clinic sites. In looking at the Fairview Health Network (FHN), we have MTM in our employed, UMP, and FPA sites. When looking at the quadruple aim- improving quality, stabilizing total costs of care, improving patient and provider satisfaction, MTM has proven benefits in all areas. Specific feedback for [clinic name] can be found in the appendix.

Having an MTM pharmacist embedded at our Fairview primary care sites gives access to MTM for at risk-populations in their primary care clinic and allows for a team-based care approach to medication management for these providers and patients who otherwise had not utilized MTM services.

In looking at the patient population at [clinic name], the total population is approximately 28,000 patients, of which [X number] are at risk-population for the network. The MTM pharmacist has completed 234 visits to-date (see growth below).

Current MTM Visit Growth Table for 0.6 FTE:

Month	9	10	11	12	1	2	3	4
Pts seen	15	19	28	23	32	31	33	53

Revenue is generated through MTM visits both directly and indirectly. Shared savings contracts include patients from both billable (ex. fee-for-service) contracts and non-billable contracts (ex. accountable care organization populations, care transition, MIPS, etc.). We began billing in November. From November through April we have collected [X number] of revenue for [clinic name].

In looking at clinical results, in addition to seeing patients directly, the resident has also helped to implement interprofessional team meetings. Below are the results of this work with one of pilot teams.

% of Patients Passing MN Diabetes Community Measures			
Dec	Jan	Feb	Mar
36.85%	39.78%	41.85%	40.55%

Assessment: In estimating 10% of the at risk population needing MTM services, a full time FTE would be needed for [clinic name]. The estimated cost for this FTE would be \$Y.

Based on claims data from this year, X% of MTM visits were billable through reimbursable contracts, X% were not directly reimbursable but focused on at-risk populations, and X% were clinic consults or chart reviews.

Annual Revenue and Expenses	Price
Reimbursable contracts Anticipated yearly patient visits: X Fee-for-service MTM claims	\$X
Non-reimbursable contracts Anticipated patient visits for at-risk populations: X Anticipated patient visits for consults or chart reviews: X	N/A
Anticipated Revenue (based on full 1.0 FTE capacity)	\$X
PharmD 1.0 FTE salary and benefits	(\$Y)
Anticipated Expense	(\$Y)
Annual Net Loss	(\$Z)

*Currently funding \$XX for resident through June.

Recommendation: We recommend increasing the MTM position at [clinic name] at 1.0 FTE to better cover the needs of their population.

Appendix: Quotes from Primary Care Providers at [clinic name]

Of the 15 PCPs at [clinic name], seven are actively collaborating and referring patients resulting in increasing visit volumes. Statements from PCPs at [clinic name] are noted below.

“[Pharmacist name] has also been a great resource for more complex patients with making decisions about which medications fit the overall patient best (with any diagnosis, not just with diabetes). I like the “teamwork” mindset that the PharmD service brings to [clinic name] for the providers. I like having another resource for patients to receive more education about their medications.”

“[Pharmacist name], Pharm D is a valuable resource for our clinic. Personally – she is easy to approach. Always happy and willing to provide great service to our patients. I am so happy to have her aboard our team.

“MTM services: I love the fact that she has 1 hour with the patients to discuss chronic health issues, to review medications (drug to drug interactions), to make changes in order to save patient[s] money. We don’t get a lot of time with the patient bc they have concerns. However I believe it’s such a HUGE service to our patients in keeping them healthy. I have complete trust in her. She is a wonderful communicator. Visit notes structured to easily read and understand. I hope this service will continue at [clinic].”

“My diabetes panel has greatly improved bc of her efforts. Our goal by May was to be at 50% which we have improved [...] in a short period of time.”

“Overall having the PharmD service at [clinic name] has been wonderful. The knowledge and education that [Pharmacist name] has brought to many of my patients has been so helpful to both their understanding of diabetes as well as their overall outcomes for diabetes.”

“Overall I enjoy working with [Pharmacist name] very much. She is a great communicator and leader. She has great ideas for influencing positive change for our patients and overall care.”

“Excellent, 5 out of 5, patients love her”

“Fantastic, keep her forever, great patient advocate, she does a great job, good communication, patients like her, she does so great with my diabetic patients, I send all my insulin starts to her.”

“The interprofessional team meeting (ITM) process that she has started at [clinic name] has been a great way to learn how to better communicate and collaborate among the different departments of the clinic for the ultimate goal of increasing overall patient outcomes with their diseases.”