

MEDICATION THERAPY MANAGEMENT – CMR COMPLETION

Measurement Specifications for Star Ratings Program



Measurement Description

Percent of prescription drug plan members 18 years and older who met eligibility criteria for medication therapy management (MTM) services and who received a comprehensive medication review (CMR) during the measurement period.

Measurement Source

Pharmacy Quality Alliance

Denominator

Patients who were at least 18 years or older as of the beginning of the measurement period and who were enrolled in the MTM program for at least 60 days during the measurement period.

Only patients who meet the MTM specified targeting criteria at any time in the measurement period are included in the denominator:

1. 3 Chronic Diseases:

- Bone Disease – Arthritis – Osteoarthritis
- Bone Disease – Arthritis – Osteoporosis
- Chronic Heart Failure
- Diabetes
- Dyslipidemia
- Hypertension
- Mental Health – Depression
- Respiratory Disease – Asthma
- Respiratory Disease - COPD

2. 6 Covered Part D drugs

Numerator

The number of patients in the denominator that have received one or more comprehensive medication reviews (CMRs) during the measurement year.

Exclusion Criteria

Hospice	For Medicare reporting, exclude patients who actively receive hospice services any time during the measurement year
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Note

- MTM is a distinct service or group of services that optimize therapeutic outcomes for individual patients. MTM services are independent of, but can occur in conjunction with, the provision of a medication product. MTM encompasses a broad range of professional activities and responsibilities within the licensed pharmacist's or other qualified health care provider's scope of practice. A comprehensive medication review (CMR) is a common element of MTM services.
- CMR consists of a review of a patient's medications, including prescription, over-the-counter (OTC) medications, herbal therapies and dietary supplements to assess medication use and identify drug therapy related problems. A CMR includes an interactive, person-to-person consultation with the patient to address and resolve findings to optimizing patient outcomes.

The Format for the written summary given to patients after a CMR includes three documents:

1. CMR Cover Letter (CL)
2. Medication Action Plan (MAP)
3. Personal Medication List (PML)

Best Practice

- A comprehensive medication review should occur with patients who have 3 or more chronic conditions or are taking 6 or more Covered Part D drugs.
- Pharmacist-physician teams: Either team member can recommend a patient for interventions, and physician must approve or modify medication action plans.
- Ask patients about any medications other providers may have prescribed; review for potential drug-drug interactions, determine and encourage patient adherence

Star Ratings Performance Thresholds

Year	1 STAR	2 STARS	3 STARS	4 STARS	5 STARS
2016	< 13.6%	≥ 13.6% to < 36.2%	≥ 36.2% to < 48.6%	≥ 48.6% to < 76.0%	≥ 76.0%
2017	< 33.2%	≥ 33.2% to < 47.8%	≥ 47.8% to < 58.1%	≥ 58.1% to < 76.8%	≥ 76.8%
2018	< 33%	≥ 33% to < 51%	≥ 51% to < 59%	≥ 59% to < 75%	≥ 75%
2019	< 50%	≥ 50% to < 66%	≥ 66% to < 73%	≥ 73% to < 85%	≥ 85%
2020	< 48%	≥48% to < 71%	≥ 71% to < 81%	≥ 81% to < 89%	≥ 89%
2021	< 48%	≥48% to < 71%	≥ 71% to < 81%	≥ 81% to < 89%	≥ 89%

