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Introduction

The Ontario Government fundamentally believes in the role of pharmacists as part of an integrated team that provides an enhanced level of care for patients. The Transparent Drug System for Patients Act (TDSPA), passed in the Ontario Legislature in June, 2006 included a landmark decision to recognize the valuable role of pharmacists by compensating them for providing professional services to Ontarians.

The Ministry of Health and Long-Term Care, collaboratively with the Ontario Pharmacy Council and the Ontario Pharmacists’ Association, launched MedsCheck as the first of these professional services as eligible benefits under the Ontario Drug Benefit Program, beginning April 1st, 2007. On July 17, 2007 the program was expanded to include all Ontarians and on November 30, 2007 the MedsCheck Follow-Up was introduced to accommodate patients who require another MedsCheck during the annual time-frame.

The services, intended to promote better patient health outcomes, will continue to be phased in over the coming months.

Through one-on-one interactions, pharmacists may provide their patients with an annual medication review service to help them better understand their medication therapy and ensure that medications are being taken as prescribed. MedsCheck is a service provided by pharmacists, with the goal of maximizing patient compliance to therapy.

- The Ministry of Health and Long-Term Care (MOHLTC) pays pharmacies a fee to provide a MedsCheck medication review service to patients that are taking three or more chronic prescription medications. The medication review must be conducted by the pharmacist as a one-on-one interview between patient and pharmacist in order to qualify for payment through the Health Network System (HNS).

- The results of any MedsCheck, including a comprehensive medication list and recommended action, will be shared with the patient/caregiver and, when appropriate, with their physician and/or primary healthcare provider.

- Any resulting recommendation for change in therapy remains at the discretion of the patient’s doctor.

- A MedsCheck represents a professional consultation between the pharmacist and the patient. Patients should be briefed on the importance of the MedsCheck medication review list as they travel through the health-care system. The MedsCheck program helps patients to understand drug names, strengths, adverse events, expected or unexpected adverse effects and how to benefit the most from their medications. It also includes medications that were not filled by prescription, such as over-the-counter drugs and herbal medicines. Such a document becomes important for other health care providers that are also interacting with the patient.

- The Ontario College of Pharmacists defines in its Standards of Practice, the expected functions of a pharmacist specifically with respect to the dispensing of medications. These functions are to be part of every pharmacist’s daily activities and are considered compensated for by the usual and customary dispensing fee. This program is not intended to compensate pharmacists for these functions. In order for the service to qualify for payment, the process outlined must be followed in a one-on-one interview with the patient.
Who Is Eligible?

To qualify for a MedsCheck, a patient must be:

- A resident of Ontario;
- A holder of a valid Ontario Health Card; and
- Currently taking a minimum of three prescription medications for a chronic condition.

The service is:

- Voluntary
- Paid for by the Ontario Government
- Providing for a MedsCheck Follow-Up within the annual time-frame
- Available to community-based patients (patients residing in licensed long-term care homes are not eligible for this service)

Which Eligible Patients Would Most Benefit?

Typically, patients who have several chronic medical conditions and are taking multiple medications are at a higher risk for medication-related problems.

Based on the eligibility criteria to the left, the following patients may benefit most from a MedsCheck:

1. Patients who may be having trouble managing their medication, or who have a history of non-compliance.
2. Patients who have had significant changes made to their regimen in the past 100 days.
3. Patients on “high alert” medications, such as warfarin, digoxin and opiates.
4. Patients who have recently been discharged from hospital.

Physicians and other healthcare providers may also refer patients to you for this service.

Inside This Guide

This quick reference will provide you with a step-by-step outline of the MedsCheck program, along with tips, suggested resources, and documentation and billing procedures. Please note that the Suggested Practice Tools in this guide are provided as suggestions only—you may choose to use your own tools or other tools developed by other organizations.
MedsCheck Annual Medication Review Process

Patients benefit most from medications when they take the right medicines at the right dose and at the right time.

The MedsCheck Annual is a voluntary service that provides an opportunity for pharmacists to interact one-on-one with patients, helping them to identify and resolve common medication-related issues in order to get the most benefit from their medication.

During this review, your patients will have an opportunity to meet with you, one-on-one, to learn more about their medications. As part of this service, you will:

- Help them to understand drug names, strengths, adverse effects and usage instructions.
- Ensure that they are taking their medications as their doctor has directed.
- Provide your patients with an accurate and complete medication list that they may take with them when they visit their physician, other healthcare providers, or if they go to hospital.
- Address patient concerns and determine whether the patient should be referred to the physician.

1. Identify Eligible Patients

To get started, identify eligible patients based on the criteria outlined on page 3. You can do this by reviewing your patient prescription profiles and contacting the patient by phone, or by approaching him or her in your pharmacy.

The following key messages may be helpful when introducing the MedsCheck service to your patients:

- The service is voluntary and is paid for by the Ontario Government.
- The service will help you get the most from your medications and allow you to ask questions or discuss any concerns you may have.
- It will only take 20-30 minutes of your time.
- An appointment can be scheduled for a time that is convenient to you.

If the patient agrees, schedule an appointment. Please allow sufficient time so you can talk with the patient uninterrupted.
**TIPS**

Ask your patient if they have already had this service from another pharmacy. If they have had a MedsCheck Annual from another pharmacy within the past year, they are not eligible under the program to receive another annual review. However, patients may be eligible for a MedsCheck Follow-Up within the annual timeframe under specific criteria.

**Refer to the MedsCheck Follow-Up section in this guide for eligibility criteria on that service.**

To help prepare for a more meaningful interview, you may ask the patient to complete a short questionnaire or screening tool.

**Refer to the Suggested Practice Tools page in this guide for some suggestions.**

Remind the patient to bring:

- Their medication containers
- Medication containers from other pharmacies
- Over-the-counter drugs, vitamins and herbal remedies they are taking

Encourage their caregiver to come along, if appropriate. For patients who are not able to attend the pharmacy, the pharmacist may conduct the MedsCheck with the caregiver provided there is patient consent and documentation that the MedsCheck was conducted with the patient’s caregiver.
Preparing for the Medication Review

Prepare a list of the medications dispensed at your pharmacy.

Conducting the Medication Review

Confirm that the patient understands the voluntary nature of the service and agrees to the interview before beginning. This is important since you will be collecting personal, lifestyle and health information from your patient.

2. Interview Patient

Summarize the goals of the interview with the patient and/or caregiver. Explain that you will:

- Verify any allergies and chronic medical conditions, as well as the patient’s overall health status.
- Review and discuss the proper use of all medications, including non-prescription products, vitamins and natural products.
- Attempt to resolve any medication-related problems you may discover, consulting with the patient’s doctor, if necessary.
- Provide tips/additional information on how to obtain the best results from the medication.
- Provide an up-to-date and accurate medication list. Explain to the patient the importance of taking this list with them when they visit their doctor or go to hospital.
**Ensure Patient Privacy**

Ensure you meet with your patient in an “acoustically private” area of the pharmacy away from other customers—preferably where there is a desk and computer.

Patients should be comfortable during the MedsCheck service and receive the pharmacist’s undivided attention. If a counselling room is available and the patient agrees, this can be used.

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**Review Medications**

Review all medications (including over-the-counter medications and natural products) with the patient to ensure they are being taken properly. Identify and try to resolve any problems the patient may be having in managing their medication regimen.

**Prepare Medication List**

Prepare an accurate medication list (including any over-the-counter medications or natural products the patient may be taking) to accompany your recommendations. Have the patient sign it to indicate that they have received the MedsCheck service from you; sign and date the list; provide the list to the patient and keep a copy for the pharmacy records. Encourage the patient to bring the list with them whenever they return to the pharmacy, visit another healthcare provider, or go to the hospital.

**Claim for Payment**

You may make a claim for payment after completing the MedsCheck and providing the patient with their signed and dated medication list, including any recommendations. For audit purposes, claims are made on the day of the MedsCheck service and a copy of the signed medication list is kept on file at the pharmacy for a period of not less than 2 years. (Refer to the Claim for Payment section in this guide for more information.)

**Follow-up with Patient**

If necessary, indicate to the patient that you will be following up with them by telephone or other alternate method.
3. Assess and Follow-up

You may decide you need to do further research and assessment. Review the information gathered in your interview. If necessary, gather more information (from the patient’s doctor or caregiver, for example). Compare the list of medications that the patient is taking to the medication prescribed by their physician(s). Identify any issues and use your professional judgment to decide how they can be resolved.

Some examples:

◆ Many of the issues may be straightforward and require relatively little time and no further information to address. For example, if the concern is a packaging issue, you may simply resolve the patient’s concern immediately by changing a bottle top.

◆ If the issue is the patient forgetting to take their medication, and the dosage taken is appropriate, you may determine that a compliance tool (i.e., multiple dose package) would help. Follow-up with the patient to discuss this option and implement if appropriate.

◆ During any MedsCheck, you may uncover significant medication-related problems that require further patient assessment and more time to conduct a more comprehensive medication consultation, or you may need to consult with the patient’s doctor. You can phone the physician, or if the situation is not urgent, put your findings/concerns in a letter/fax/email.

TIP

The Ontario College of Pharmacists has developed a framework and sample forms for conducting medication reviews, as well as comprehensive medication consultations. Refer to the Suggested Practice Tools page in this guide for suggestions.

Once you have resolved any issues, a follow-up discussion with the patient may be necessary. This can be done over the telephone or in person, if appropriate.

You may need to provide the patient with a revised medication list and, in some cases, forward a copy to their physician.

If you send the patient’s medication list to his or her doctor, be sure to clearly explain to the physician your purpose for doing so. For example, indicate whether the list is for information/record purposes only. Or if you need the physician to address a specific concern.

IMPORTANT

It is important to promote the value of your professional services. Take a few moments during the consultation to review with the patient what services you provided and any follow-up plan. Be sure to reinforce key recommendations.

Remind the patient of the importance of keeping their medication list up-to-date at all times. They should bring it with them each time they visit the pharmacy or their doctor. Any time a patient is scheduled for a hospital admission, the MedsCheck should be updated; similarly, upon being discharged from the hospital, patients should visit their pharmacy within two weeks to again, update the MedsCheck.
4. Document the Service

It is important to clearly document all patient interactions to support payment for the MedsCheck medication review service. For example, you must keep a copy of the medication list signed by the patient and the pharmacist who conducted the MedsCheck.

Refer to the Ontario College of Pharmacists’ Standards of Practice and Documentation Guidelines for Pharmacists for patient interaction documentation requirements.

Many pharmacy software systems have the ability to document patient interactions. Alternatively, a paper-based system may also be used. All information should be in a readily retrievable format and maintained on-site at the pharmacy for a minimum of 2 years for audit purposes. A paper-based system must cross reference the claim transaction number.

5. Claim for Payment

A claim for payment may only be made on the day of the service once a MedsCheck Annual has taken place, and the patient has been provided with a signed/dated complete medication list. The amount paid for the MedsCheck Annual claim is $50. If a patient has already received a MedsCheck in the previous 12 months, the pharmacist can look into the criteria for conducting a MedsCheck Follow-Up medication review claim that is reimbursed at $25.

1. The claim submission follows the normal process for submitting claims on the Health Network System using the following information:
   - Product Identification Number (PIN) is 93899979
   - the intervention code “PS” will be required
   - the Pharmacist’s ID code must be included with the claim.

2. The amount paid is $50.

3. See the specific process for non-ODB/TDP recipient claims on page 24.
The MedsCheck Follow-Up Medication Review Process

All Ontarians taking three or more chronic medications qualify for a MedsCheck Annual provided by pharmacists with the goal of improved patient safety and treatment. During the annual time-frame, a patient may benefit from another MedsCheck service.

The additional MedsCheck(s) provided to patients within the one-year time-frame is referred to as the MedsCheck Follow-Up. All MedsCheck Annual guidelines and procedures apply to the MedsCheck Follow-Up; however, as it is considered a follow-up service building on the MedsCheck Annual, there are additional criteria that must be met.

Criteria

1) The MedsCheck Follow-Up may be conducted in the following situations:
   a) A patient is discharged from hospital
   b) A pharmacist’s documented decision
   c) A physician or registered nurse in the extended class (RN[EC]) request
   d) A planned hospital admission

2) The MedsCheck Follow-Up should be conducted at the same pharmacy where the MedsCheck Annual took place. If this is not possible, the pharmacist conducting the MedsCheck Follow-Up must make every effort to obtain a copy of the MedsCheck Annual medication review list from the originating pharmacy or from the patient. If the original cannot be obtained, this must be noted as part of the documentation.

IMPORTANT

The Personal Health Information and Protection Act, 2004 (PHIPA) allows a pharmacist to disclose personal health information it has received from a patient, the patient’s substitute decision maker, or another health information custodian, without the express consent of the patient, when the purpose of the disclosure is to provide or facilitate the provision of health care to that patient. A pharmacist may assume it has a patient’s implied consent to the disclosure of the patient’s MedsCheck Annual or MedsCheck Follow-Up medication review list to another pharmacist or health information custodian. However, if the pharmacist is aware that the patient has expressly withheld or objected to such a disclosure, the pharmacist cannot disclose the information.

NB: According to PHIPA, a health information custodian is a listed individual or organization under PHIPA that, as a result of his or its power or duties, has custody or control of personal health information. Health care practitioners (doctors, nurses, pharmacists), hospitals, pharmacies, laboratories, nursing homes and other organizations are included among others.

Please refer to the www.ipc.on.ca for more information on PHIPA.
Pharmacists must submit claims using the appropriate PIN depending on the service provided. This information will help the ministry and the Pharmacy Council to monitor the success of the program and to evaluate outcomes of the program which may inform future directions.

In each of the four situations, the process described for the MedsCheck Annual outlined in this guidebook must be followed.

1) A patient is discharged from hospital

The MedsCheck Follow-Up is conducted within two weeks after a patient is discharged from hospital.

Pharmacists will:

- discuss any discrepancies and thoroughly review any new medications or regimens with the patient so that there is a clear understanding of any changes which have occurred. If the patient is unable to come to the pharmacy post-discharge, the MedsCheck service may be conducted in person with the patient’s caregiver with patient’s consent.

- provide a new, up-to-date medication review list to the patient that includes the name of the discharging institution and the date the patient was discharged.

2) A pharmacist’s documented decision based on outlined criteria

A MedsCheck Follow-Up may be conducted at the discretion of the pharmacist under the following circumstances:

i) significant changes made to an existing medication profile or the addition of new medication,

ii) documented evidence of patient non-compliance, or

iii) patient has changed their place of residence and has transferred their prescriptions to a different pharmacy.

Pharmacists will:

- discuss any discrepancies and thoroughly review any new medications or regimens with the patient so that there is a clear understanding of any changes which have occurred.

- document the reason for providing the MedsCheck Follow-Up; a copy of the signed and dated medication review list and any supporting documentation is kept on file at the pharmacy for a period of not less than 2 years, for audit purposes.

Changes to existing medication profiles must be significant enough to warrant a face to face review of the complete MedsCheck profile. Conducting any MedsCheck does not refer to the usual patient counselling required as per the Standards of Practice on new prescriptions and/or prescription changes.
3) A physician or RN(EC) requests a MedsCheck Follow-Up

A patient’s family physician, a specialist or a registered nurse in the extended class [RN(EC)] may refer a patient for a MedsCheck Annual or a MedsCheck Follow-Up. Such a referral may be written or verbal. The written request should be signed by the prescriber, dated and provided to the patient or faxed to the pharmacy. The verbal request should be transcribed by the pharmacist, signed and dated.

Pharmacists will:

- ensure that the written or verbal referral received at the pharmacy is signed and dated according to the above-mentioned method of receiving.
- forward a copy of the medication review list to the healthcare provider who requested the update.
- maintain the written or transcribed referral on file along with a copy of the signed and dated medication review list for a period of not less than 2 years, for audit purposes.

4) A planned hospital admission

Patients who are scheduled for a hospital admission may qualify and benefit from a MedsCheck Annual or a MedsCheck Follow-Up. The medication review list will accompany the patient on admission and will verify for hospital staff a patient’s list of current medications at the point of admission.

The MedsCheck Annual or the MedsCheck Follow-Up due to a planned hospital admission includes the one-on-one pharmacist/patient consultation review of the medications prior to admission along with providing the patient the awareness that medications may be adjusted upon discharge. The supplying of a patient medication profile at the request of the hospital without the one-on-one patient consultation does not qualify as a reason to claim for reimbursement of a MedsCheck Follow-Up.

Pharmacists will:

- discuss any discrepancies and thoroughly review any new medications or regimens with the patient so that there is a clear understanding of any changes which have occurred.
- impress upon the patient the importance of informing the hospital staff of the MedsCheck medication review list. Alternatively, the pharmacist may arrange for the MedsCheck medication review list to be forwarded to the hospital.
- document the reason for providing the MedsCheck Follow-Up; a copy of the signed and dated medication review list and any supporting documentation is kept on file at the pharmacy for a period of not less than 2 years, for audit purposes.
The amount paid to the pharmacy for the MedsCheck Follow-Up is $25.

A claim for payment is made after the MedsCheck Follow-Up has occurred and the patient and/or healthcare provider have been provided with a copy of the updated medication list.

The claim submission follows the same process for submitting a claim for a MedsCheck Annual using the following information:

- Specific Product Identification numbers (PIN) will be used per claim category
  - Hospital Discharge MedsCheck Follow-Up PIN: 93899981
  - Pharmacist’s Documented Decision MedsCheck Follow-Up PIN: 93899982
  - Physician/RN(EC) Referral MedsCheck Follow-Up PIN: 93899983
  - Planned Hospital Admission MedsCheck Follow-Up PIN: 93899984
- The intervention code “PS” will be required.
- The pharmacist’s ID code must be included with the claim.

If a patient’s MedsCheck Annual has already taken place, the pharmacist may claim for the MedsCheck Follow-Up. If the patient has not had a MedsCheck Annual in the past year, the pharmacist may claim for a MedsCheck Annual.
Frequently Asked Questions for Pharmacists

MedsCheck questions have been divided into 5 categories:

◆ General Information (G)
◆ Patient Eligibility (PE)
◆ Conducting a MedsCheck (C)
◆ MedsCheck Claim Payment (CP)
◆ MedsCheck Follow-Up (FM)

1. General Information

G-1. Where can I find information on the MedsCheck program?

Details of the MedsCheck program, including a downloadable guidebook, can be obtained online at:

◆ www.medscheck.ca; and

G-2. Where do I get tools, forms, etc.?

Examples of forms and tools to assist pharmacists when conducting a MedsCheck service can be downloaded on the ministry website by accessing: www.medscheck.ca

In addition, the MedsCheck Guidebook offers a section on Suggested Practice Tools offered by the Ministry of Health and Long-Term Care (www.medscheck.ca), the Ontario College of Pharmacists (www.ocpinfo.com), the Drug Information Research Centre (DIRC) at the Ontario Pharmacists’ Association (www.OntarioRph.ca) and by the Canadian Pharmacists’ Association (www.pharmacists.ca).

Alternatively, pharmacists may use other tools or forms as they prefer or they may create their own.

G-3. Who do I contact for more information on MedsCheck?

For more information on the MedsCheck claims process, contact the Ontario Drug Benefit Program Help Desk at 1-800-668-6641.

For clinical support, contact the Drug Information and Research Centre (DIRC) at 1-800-268-8058.
2. Patient Eligibility

PE-1. Are Trillium patients eligible for MedsCheck?

Yes.

PE-2. How often can I conduct a MedsCheck for a patient?

Patients are eligible for one MedsCheck Annual per year. Should a patient require another review, pharmacists should refer to the MedsCheck Follow-Up medication review program for more information.

PE-3. How do I determine whether a patient has already had a MedsCheck conducted at another pharmacy?

Prior to initiating a MedsCheck review, it is important to ask the patient whether or not they have participated in this service at another pharmacy in the past year.

PE-4. How will the ministry address patients who receive a MedsCheck more than once within the year?

Patients may only receive one MedsCheck Annual per year. The Health Network System (HNS) does not alert the pharmacist that the original MedsCheck Annual was already conducted. The ministry is reviewing the HNS to see if this can be implemented.

Ministry inspectors continue to monitor the claims and will follow up with pharmacies if there are concerns about how the claims were submitted. MedsCheck claims are subject to audit and may be recovered if appropriate.

Patients may be eligible for a MedsCheck Follow-Up when there is a need to conduct another medication review during the year.

PE-5. Is the one year based on a calendar year or per patient?

The one medication review per year limit is based on the date that the recipient had his/her MedsCheck Annual.

PE-6. What is the definition of ‘chronic prescription medication’ under the MedsCheck program?

Chronic prescription medication refers to prescription medications that are administered for ongoing long-term conditions. For example, medication for hypertension would be eligible, whereas an antibiotic for a respiratory tract infection would not be eligible.

PE-7. Are non-ODB patients eligible for MedsCheck and is there an age limit?

As of July 17, 2007 all Ontarians are eligible for a MedsCheck service provided they are taking at least 3 medications for a chronic condition. The MedsCheck criteria for all-Ontarians have no age restrictions.
3. Conducting a MedsCheck

C-1. As a licensed pharmacist, do I need to register or sign-up to provide and be paid for conducting a MedsCheck?

Provided that you are practicing in a pharmacy that is registered as a provider with the Ontario Drug Benefit Program, you may provide and claim for the MedsCheck service.

C-2. Can a MedsCheck be conducted over the phone?

No, the intent of the MedsCheck program is for the pharmacist to review the medication history directly with the patient and/or caregiver at a face to face meeting.

C-3. Can a MedsCheck be conducted with caregivers?

Yes. The MedsCheck may be conducted with a caregiver, however, every attempt must be made for the patient to also be present for the review. If the patient cannot be present, he/she must give consent to the pharmacist to conduct the MedsCheck with the caregiver and the pharmacist must ensure that documentation of the review includes the caregiver’s signature.

C-4. Can a MedsCheck be done in a Long-Term Care home?

No. Long-Term Care residents are not eligible for the MedsCheck Annual or MedsCheck Follow-Up at this time.

C-5. Can a MedsCheck be conducted outside of the pharmacy?

Yes, as long as they are one-on-one and not for residents of Long-Term Care homes.

C-6. Can an intern/student under the supervision of a pharmacist conduct the MedsCheck?

Yes, an intern or a registered pharmacy student may conduct a MedsCheck Annual or MedsCheck Follow-Up under the supervision of a pharmacist.

C-7. Are patient care records related to computer software documentation enough? What patient interactions need to be documented?

It is important to document all patient interactions to support payment for the MedsCheck. You must keep a copy of the current medication list signed by the patient and the pharmacist who conducted the MedsCheck. A paper-based system must cross-reference the ODB claims transaction number. The patient must also be provided with their copy of the signed and dated current medication list. Refer to the Ontario College of Pharmacists’ Standards of Practice and Documentation Guidelines for Pharmacists for patient interaction documentation requirements.

C-8. How long does the documentation need to be kept?

MedsCheck documentation records must be maintained on site at the pharmacy for a minimum of not less than 2 years for the purposes of audit under the ODB program.

C-9. How much documentation of the MedsCheck service is required?

All patient interactions must be documented, either in paper form or on computer. Refer to the Ontario College of Pharmacists’ Standards of Practice and Documentation Guidelines for Pharmacists for documentation requirements.
C-10. Do I have to send the patient’s MedsCheck medication review list to his/her doctor?

No, it is not required that the MedsCheck medication review list be sent to the doctor, although you may identify situations in which you feel it is beneficial to do so such as when the prescriber refers the patient for the service. Be sure to let the patient know your intentions, and explain to the doctor your reasons for providing the list.

C-11. I’ve just completed a MedsCheck and I’ve decided that this patient needs a much more in-depth consultation to resolve problems. What do I do?

Utilize your professional judgement to determine whether to conduct a more comprehensive medication review in consultation with the patient’s physician. In some situations it may be appropriate to refer the patient back to his or her physician. If you’ve identified potential or actual drug-related problems, these often require collaboration and follow-up with the patient’s prescriber, including appropriate documentation and communication with the patient and other health practitioners.

C-12. Am I required to provide the MedsCheck service? What if I do not wish to participate?

Although pharmacists are encouraged to offer this professional service to their patients, it is not mandatory that they provide the MedsCheck.

C-13. Can my pharmacy technician conduct a MedsCheck?

No, a pharmacy technician may not conduct a MedsCheck Annual or MedsCheck Follow-Up. The pharmacy technician may play an administrative support role in scheduling patients and assisting the pharmacist in compiling materials in preparation of the MedsCheck and other support roles as needed.

C-14. How long should a MedsCheck take?

Time required to conduct the MedsCheck will vary from patient to patient; it is estimated that the interview portion for the MedsCheck Annual will take approximately 20-30 minutes, and it may be less interview time for the MedsCheck Follow-Up.

C-15. I’ve just conducted a MedsCheck and it took longer than 30 minutes. Can I bill for the extra time?

No, the Ontario Government is compensating a flat rate of $50 for the MedsCheck Annual and $25 for the MedsCheck Follow-Up.

C-16. Where is the most appropriate place in the pharmacy to conduct the MedsCheck with a patient?

Patients should be comfortable during the MedsCheck session and receive the pharmacist’s undivided attention. If the patient agrees, a private counseling room can be used for the MedsCheck consultation. Some pharmacists may be able to accommodate a patient’s privacy in a seating area of the pharmacy. While the need for privacy may be met in a seating area of the pharmacy, it is not appropriate to conduct a MedsCheck any place where other clients are within hearing or where there is a likelihood of being interrupted.

Pharmacists must be cognisant of the Standards of Practice and the Code of Ethics of the profession in ensuring confidentiality of patient information. This would include patient privacy while conducting the MedsCheck Annual or MedsCheck Follow-Up.
3. Conducting a MedsCheck (cont’d)

C-17. Can I conduct a MedsCheck at the dispensing counter?

The MedsCheck may be conducted at the dispensing counter only if the pharmacy dispensing counter provides for acoustical privacy in which the pharmacist may engage the patient in a dialogue about their medications.

As per the Ontario College of Pharmacists’ Standards of Practice and the Code of Ethics, a pharmacist must ensure confidentiality of patient information. This would include patient privacy regarding the MedsCheck program.

4. Claim Payment

CP-1. Is there a total maximum that will be paid to a pharmacy for the MedsCheck?

No, there is not a maximum amount allocated to a pharmacy for the MedsCheck.

CP-2. How do you bill for the $1,000 for your first review? Is there an expiry date on this?

An adjustment of $950 will be made to the pharmacy’s regular ODB payment. This payment, plus the regular $50 payment for the first MedsCheck Annual claim, total the $1,000 payment. Effective April 1, 2008, pharmacies will need to submit a letter to the ministry requesting the adjustment payment of $950.

The $950 adjustment payment is paid once to a pharmacy accreditation number. Should a pharmacy relocate or be sold, the pharmacy will not qualify for the adjustment payment again.

CP-3. Is the fee for MedsCheck to be considered part of the $100 deductible that ODB recipients are required to pay each August?

No. Since there is no patient payment associated with the MedsCheck there is no out-of-pocket expense that can be applied to the deductible payment. In addition, the Health Network System (HNS) will not apply the MedsCheck fee payment to the recipient’s deductible calculation.
**5. MedsCheck Follow-Up**

FM-1. **What is the MedsCheck Follow-Up?**

The **MedsCheck** Follow-Up is an additional program for those patients who may benefit from a second **MedsCheck** during the annual time-frame due to situations such as a hospital discharge, a planned hospital admission, a physician or RN(EC) referral or a pharmacist’s documented decision due to:

i) significant changes made to an existing medication profile or the addition of new medications,

ii) documented evidence of a patient’s non-compliance, or

iii) a patient has changed both their place of residence and their pharmacy thus necessitating further review of their medications by the pharmacist.

FM-2. **When a pharmacist implements a MedsCheck Follow-Up claim, will the system indicate that the MedsCheck Annual has already been conducted within the past year? What action should the pharmacist take?**

No, the Health Network System (HNS) does not alert the pharmacist that the original **MedsCheck** Annual or a **MedsCheck** Follow-Up has been claimed. The ministry is reviewing the HNS to see if this can be implemented.

Ministry inspectors will continue to monitor the claims and will follow-up with pharmacies if there are concerns about how the claims were submitted. **MedsCheck** claims are subject to audit and monies may be recovered if appropriate.

Pharmacists are encouraged to ask recipients prior to conducting the review whether they have had this service at another pharmacy in the last year.

FM-3. **A patient has been discharged from the hospital with new medications. The pharmacy records show that the MedsCheck Annual was conducted within the previous six months; can I perform a second review?**

A **MedsCheck** Follow-Up can be conducted by a pharmacist. Pharmacists must clearly indicate on the medication review that the **MedsCheck** Follow-Up was conducted as a result of a hospital discharge indicating the date the patient was discharged.

FM-4. **It has been identified that a patient will benefit from a MedsCheck Follow-Up due to a hospital discharge. Is there a time limit for the review to take place?**

A **MedsCheck** Follow-Up as a result of a hospital discharge is to be conducted within **two weeks** after a patient is discharged from hospital.

FM-5. **As a result of the hospital discharge, the patient is not available to attend the pharmacy for the MedsCheck Follow-Up. Can I conduct the MedsCheck Follow-Up with the patient’s agent?**

The **MedsCheck** Follow-Up is conducted one-on-one between the pharmacist and the patient. If however, the patient is not able to attend the pharmacy, the pharmacist may conduct the **MedsCheck** Follow-Up with the patient’s caregiver.

Appropriate documentation and consent forms are required to be in place when conducting the **MedsCheck** Annual or the **MedsCheck** Follow-Up with the patient’s agent or caregiver.
FM-6. Can a hospital pharmacist perform a MedsCheck Follow-Up due to a hospital discharge?

The MedsCheck Follow-Up due to a hospital discharge may be conducted by either the hospital pharmacist in an out-patient setting (and with an ODB Health Network System billing code) or the community pharmacist. If the MedsCheck Annual was conducted elsewhere, the pharmacist must make every effort to obtain a copy of the MedsCheck Annual medication review list from the original pharmacy or from the patient. If the original MedsCheck Annual medication review list is not obtained, this must be noted as part of the documentation.

If the MedsCheck Follow-Up is performed by the hospital pharmacist, a copy of the updated medication review list must be forwarded to the patient’s community pharmacist/pharmacy. The medication list must indicate that the review was conducted as a result of a hospital discharge including the date the patient was discharged. Hospital pharmacies that perform any MedsCheck are required to have an ODB billing code.

FM-7. A patient has recently moved to the neighbourhood from another city and plans to attend your pharmacy. On reviewing her copy of the MedsCheck medication review list, you notice that her new physician has made significant changes to her medication regimen. Is it appropriate to conduct a second MedsCheck within the annual time-frame?

Yes. Although a patient is eligible for the MedsCheck Annual once per year, a pharmacist may identify reasons for conducting a second review within the annual time-frame. The second review, the MedsCheck Follow-Up, may be conducted and documented as a pharmacist’s decision for instances such as a patient’s relocation to your pharmacy, significant changes in a patient’s medication regimen, diet and lifestyle or due to documented non-compliance.

If the previous MedsCheck Annual or MedsCheck Follow-Up was conducted at another pharmacy, pharmacists must make every effort to obtain a copy of it from the originating pharmacy or from the patient. For audit purposes, the pharmacist’s reason for providing the MedsCheck Follow-Up must be documented; a copy of the signed and dated medication list and any supporting documentation is kept on file at the pharmacy for a period of not less than 2 years.

FM-8. A physician has contacted the pharmacy to request that a patient have a MedsCheck with the pharmacist. You notice that the MedsCheck was already conducted within the past year. Can the pharmacist conduct a second MedsCheck within the annual time-frame due to a physician’s request?

Yes. When the pharmacist identifies that the MedsCheck has been performed within the past year, then a MedsCheck Follow-Up may be implemented. In addition, the pharmacist must provide the referring practitioner with a copy of the MedsCheck medication review list.
FM-9. A physician has referred a patient for a MedsCheck Follow-Up. Can the pharmacist take this as a verbal request?

Yes. The MedsCheck referral from the physician or registered nurse in the extended class (RN(EC)) may be in writing or as a verbal request. The written referral may be provided to the patient or faxed to the pharmacy. The verbal referral is transcribed and signed by the pharmacist.

For both written and verbal referrals, the information should be documented with the prescriber’s name, patient’s name and date of referral. For audit purposes, the referral documentation must be maintained on file at the pharmacy with a copy of the signed and dated medication list for a period of not less than 2 years.

FM-10. Is it mandatory to forward a copy of the patient’s MedsCheck Annual or MedsCheck Follow-Up medication review list to another party?

A pharmacist may identify situations when the medication review list as a result of any MedsCheck may be forwarded to the patient’s physician, to another pharmacist, to the hospital upon a patient’s planned admission or other primary health-care professionals who interact with the patient. Building positive communication channels between the pharmacy and the other health-care professionals will add value to the communication process and foster seamless care. It is advisable that the pharmacist ensure that the patient is aware that the medication review is being forwarded to the other party and that this action is documented on the pharmacy copy.

FM-11. As a pharmacist, do I require patient consent to request the MedsCheck Annual or MedsCheck Follow-Up medication review list from another pharmacy?

It is considered implied consent for a pharmacist to request any MedsCheck medication review list from another pharmacist or health information custodian. The Personal Health Information and Protection Act (PHIPA) provides for disclosure without expressed consent under certain circumstances such as when the disclosure relates to providing health care programs and services. (Please refer to page 10 of this guide for more information on PHIPA.)

Any such transaction should be documented by both pharmacists, including the reason for the request. Pharmacists must make every effort to obtain the previous MedsCheck medication review list, either from the patient or the other pharmacy, when conducting a MedsCheck Follow-Up in the situations when the previous MedsCheck was performed elsewhere. Best practice is such that pharmacists ensure that the patient is part of the discussion in obtaining and sharing MedsCheck medication review lists.
FM-12. How many MedsCheck Follow-Up services can the pharmacist perform in one year?

There is no limit to the number of MedsCheck Follow-Up services that a pharmacist can perform per patient in the annual time-frame. The criteria for the MedsCheck Follow-Up must be identified as part of the claims process with the appropriate documentation and reason. The four criteria for the MedsCheck Follow-Up result from:

- a patient’s discharge from hospital,
- a physician or registered nurse in the extended class (RN[EC]) referral,
- a pharmacist’s documented decision, or
- a planned hospital admission

FM-13. What is the amount paid for the MedsCheck Follow-Up?

The amount paid to the pharmacy for the MedsCheck Follow-Up is $25.

FM-14. A patient happens to mention to the pharmacy technician that she will be entering the hospital for surgery next month. What action should the pharmacy initiate regarding MedsCheck?

Patients entering the hospital for a planned admission will benefit from an up-to-date MedsCheck medication review list to take with them to the hospital. When pharmacy staff is alerted to patients undergoing planned hospital admissions, they should schedule a MedsCheck with the patient and/or review when the last MedsCheck was conducted to ensure there is a current MedsCheck for the patient.

The patient should be reminded of the importance of carrying the MedsCheck medication review list with them to the hospital and be made aware that medications may change upon discharge. The patient should be enlightened on either providing the hospital admitting staff with the MedsCheck medication review list or referring them to the pharmacy for the copy.
FM-15. The area hospital has contacted the pharmacy for a patient’s MedsCheck medication review list due to a scheduled hospital visit. As a pharmacist, am I obligated to provide the MedsCheck medication review list to the hospital and do I require the patient’s consent?

Community pharmacists should provide the hospital staff with a current MedsCheck medication review list.

It is considered implied consent for a health information custodian to request the original MedsCheck from the pharmacist. It is advisable that the pharmacist ensures that the patient is aware that the medication review is being forwarded to the other party and that this action is documented on the pharmacy copy. (Please refer to page 10 of this guide for more information on PHIPA.)

The MedsCheck is a complete medication review that includes current prescription medications, over the counter and herbal medicines. If the pharmacist observes that the MedsCheck on file is no longer current, it is not recommended to forward it to the hospital as being the current medication list. Instead a current patient profile can be sent. If time permits, a MedsCheck Follow-Up may be conducted with the patient and the subsequent medication list forwarded to the hospital with the date of the MedsCheck indicated; following this process, the pharmacist may claim for reimbursement of the MedsCheck Follow-Up.
Claim Information

*MedsCheck Annual – $50*

1) *MedsCheck Annual Claim for ODB Recipients:*

If a pharmacist submits a *MedsCheck Annual* claim for a person who has ODB coverage, or the person is enrolled in the Trillium Drug Program (TDP), but has not reached their deductible, the claim submission follows the normal process for submitting claims on the Health Network System (HNS) using the following additional information:

- The intervention code ‘PS’ (Professional Care Services) will be required.
- The valid pharmacist’s ID code must be included with the claim.

2) *MedsCheck Annual Claim for Non-ODB/TDP Recipients:*

When submitting a *MedsCheck Annual* claim for a person who does not have ODB/TDP coverage, pharmacists will need to submit the following information:

- Patient Gender: ‘F’ = female, ‘M’ = male
- Patient Date of Birth: Valid YYYYMMDD
- Health Card Number
- Intervention Codes:
  - PS: Professional Care Service
  - ML: Established eligibility coverage (i.e., 1 day of the new Plan ‘S’ coverage)
- Carrier-ID: ‘S’ (This is the new Plan code for the new ‘Non ODB MedsCheck Service’ plan.)
- Product Identification Number (PIN): 93899979 (Medication Review)
- Pharmacist ID: Valid Pharmacist ID

In cases where a *MedsCheck Annual* claim for a non-ODB/TDP recipient is rejected, the pharmacist should note the following:

a) If a pharmacist does not provide the ML intervention code on a *MedsCheck Annual* claim for a non-ODB/TDP recipient, the claim will reject with either the ‘C8’ or the ‘CD’ response code. This should prompt the pharmacist to resubmit the claim with the required information. The ‘C8’ and ‘CD’ reject response codes are described below:

* C8: No record of this beneficiary
* CD: Patient not entitled to drug claimed

b) If a pharmacist submits a *MedsCheck Annual* claim using the non-ODB/TDP claims procedure, and the HNS determines that the patient is actually an ODB/TDP-eligible client, the claim will reject with reject response code ‘65’ (intervention/exception code error). The pharmacist may resubmit the claim without the ‘ML’ intervention code.

Please note that *MedsCheck Annual* claims are subject to audit and the ministry will follow up and may recover duplicate and ineligible claims.
MedsCheck Follow-Up – $25

It is imperative that pharmacists submit claims using the appropriate PIN depending on the service provided. This information will help the ministry and the Pharmacy Council to monitor the success of the program and to evaluate outcomes of the program which may inform future directions.

1) MedsCheck Follow-Up Claim for ODB Recipients:

The claim submission follows the same process for submitting a claim for a MedsCheck Annual, using the following information:

- The intervention code ‘PS’ (Professional Care Services) will be required.
- The valid pharmacist’s ID code must be included with the claim.

Specific Product Identification numbers (PIN) will be used per claim category:

| Hospital Discharge MedsCheck Follow-Up | PIN: 93899981 |
| PHARMACIST’S DECISION MedsCheck Follow-Up | PIN: 93899982 |
| PHYSICIAN/RN(EC) Referral MedsCheck Follow-Up | PIN: 93899983 |
| Planned Hospital Admission MedsCheck Follow-Up | PIN: 93899984 |

2) MedsCheck Follow-Up Claim for Non-ODB/TDP Recipients:

When submitting a MedsCheck Follow-Up claim for a person who does not have ODB/TDP coverage, pharmacists will need to submit the following information:

- Patient Gender: ‘F’ = female, ‘M’ = male
- Patient Date of Birth: Valid YYYYMMDD
- Health Card Number
- Intervention Codes:
  - PS: Professional Care Service
  - ML: Established eligibility coverage (i.e., 1 day of the new Plan ‘S’ coverage)
  - Carrier-ID: ‘S’ (This is the new Plan code for the new ‘Non-ODB MedsCheck Service’ plan.)
- Product Identification Number (PIN): see above for appropriate PINs
- Pharmacist ID: Valid Pharmacist ID

In cases where a MedsCheck Follow-Up claim for a non-ODB/TDP recipient is rejected, the pharmacist should note the following:

a) If a pharmacist does not provide the ML intervention code on a MedsCheck Follow-Up claim for a non ODB/TDP recipient, the claim will reject with either the ‘C8’ or the ‘CD’ response code. This should prompt the pharmacist to resubmit the claim with the required information. The ‘C8’ and ‘CD’ reject response codes are:
  - C8: No record of this beneficiary
  - CD: Patient not entitled to drug claimed

b) If a pharmacist submits a MedsCheck Follow-Up claim using the non-ODB/TDP claims procedure, and the HNS determines that the patient is actually an ODB/TDP-eligible client, the claim will reject with reject response code ‘65’ (intervention/exception code error). The pharmacist may resubmit the claim without the ‘ML’ intervention code.
Suggested Practice Tools

Ministry of Health and Long-Term Care (www.medscheck.ca)

- MedsCheck Personal Medication Record
- Public education materials including posters, multi-lingual bag inserts and brochures

Ontario College of Pharmacists (www.ocpinfo.com)

- Best Possible Medication History Guidelines for Medication Reconciliation
- Framework to Support Comprehensive Medication Consultation Services

Sample forms are included with both references.

Ontario Pharmacists’ Association Drug Information and Research Centre (DIRC) (www.dirc.ca)

- Clinical and practice support available through DIRC at 1-800-268-8058
- Forms and protocols available at www.OntarioRph.ca

Canadian Pharmacists Association (www.pharmacists.ca)

- PharmaCheck® (www.pharmacists.ca/pharmacheck)

The PharmaCheck program provides pharmacists with the tools to do an initial assessment of medication compliance and to quickly identify and resolve common drug-related issues in older adults or patients taking chronic medications. Available for download for CPhA members free of charge, non-member charge is $25.

To view this guide online, please visit www.medscheck.ca