The Part D Enhanced Medication Therapy Management (MTM) Model, operated by the Center for Medicare and Medicaid Innovation, tests whether providing Part D sponsors with additional payment incentives and regulatory flexibilities promotes MTM enhancements leading to improved therapeutic outcomes, while reducing Medicare expenditures.

Six Part D sponsors are participating in the Enhanced MTM Model. These sponsors represent approximately 1.7 million of the 43 million Medicare beneficiaries enrolled in Medicare Part D plans.

To accurately monitor Part D plan sponsors’ implementation of their approved Enhanced MTM programs and to evaluate the overall success of the Enhanced MTM Model, the Centers for Medicare & Medicaid Services (CMS) is collecting Enhanced MTM encounter data.

Enhanced MTM encounters are services delivered to Medicare beneficiaries enrolled in a participating Part D Prescription Drug Plan. IMPAQ International, LLC is providing technical implementation support services. This includes data collection, analysis, and performance monitoring of participants.

Enhanced MTM model tests whether:

- No standard measures are in place to measure enhanced MTM services.
- This poster describes the process of developing Enhanced MTM encounter data specifications and monitoring measures.

### ENHANCED MTM ENCOUNTER DATA SPECIFICATIONS

- Interventions and target populations vary between sponsors participating in the Model. Therefore, it was important that the Enhanced MTM encounter data be both comprehensive and flexible.
- Enhanced MTM encounter data elements were designed to:
  - Make use of existing code sets, primarily the Systematized Nomenclature of Medicine—Clinical Terms®, or SNOMED CT®.
  - Align with existing CMS data collection efforts. For example, although pharmacy claim records use National Drug Codes (NDCs), RxNorm Concept Unique Identifiers (RXCUIs) are standardized and used in other CMS reporting contexts such as formulary submissions.

### QUALITY INDICATOR MEASURES

The selected measures focus on measuring the general delivery of services to various populations of beneficiaries:

- The “at risk” group—the population of beneficiaries targeted for the Enhanced MTM Model.
- The “treated” group—those who actually received enhanced MTM interventions.

### MEASURE #1

**Percentage of hospital-to-home discharges that are followed by an Enhanced MTM service within 7 days**

**Numerator**

- Number of hospital-to-home discharges in the denominator in which the beneficiary had at least one enhanced MTM encounter record within seven days following the hospitalization or within seven days after discharge.

**Denominator**

- Number of hospital-to-home discharges that were targeted for at least one enhanced MTM service (as defined by having at least one enhanced MTM encounter record within seven days following the hospitalization or within seven days after discharge). A beneficiary who receives an assessment, but does not have any identified problems, is NOT counted in the numerator.

**CONCLUSION**

- At least one enhanced MTM encounter record within seven days following the hospitalization or within seven days after discharge.

### MEASURE #2

**Percentage of targeted beneficiaries with at least one medication therapy issue**

**Numerator**

- Number of enhanced MTM encounter records with at least one medication therapy issue.

**DENOMINATOR**

- Number of Medicare Part D beneficiaries who meet targeting criteria and are discharged alive from an inpatient acute care hospital stay to home (or those who left medical advice). Discharges within seven or fewer days from the end of the reporting period will be included with the next reporting period to ensure that sponsors are given adequate time to record enhanced MTM encounter data.

**CONCLUSION**

- At least one enhanced MTM encounter record within seven days following the hospitalization or within seven days after discharge.

### MEASURE #3

**Percentage of hospital-to-home discharges in which at least one enhanced MTM service (as defined by having an enhanced MTM encounter record within seven days following the hospitalization or within seven days after discharge) was provided**

**Numerator**

- Number of hospital-to-home discharges in the denominator in which the enhanced MTM service was provided.

**DENOMINATOR**

- Number of hospital-to-home discharges that were targeted for at least one enhanced MTM service (as defined by having at least one enhanced MTM encounter record within seven days following the hospitalization or within seven days after discharge).

**CONCLUSION**

- At least one enhanced MTM encounter record within seven days following the hospitalization or within seven days after discharge.

### CONCLUSIONS

The new data specifications and pilot monitoring measures create a framework to capture a variety of enhanced MTM services. IMPAQ is developing additional Model-wide and plan-specific measures utilizing Enhanced MTM encounter data to more fully capture Model activities.

Real-world measurement is an inherently iterative process and the new measures will be reviewed and potentially refined to ensure that specifications (e.g., inclusion criteria, required follow-up time) used to construct and calculate the measures align with how data are recorded.

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