

Physician/Prescriber Responsibilities Required of The Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014

A Brief Overview for Prescribers

The Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014 is a Bipartisan bill signed into law in October 2014 and is intended to improve transitions of care and reduce hospital readmission rates.

Beginning October 1, 2018, the law requires that a resident receive a drug regimen review as soon after admission as possible, and that when any potential or actual clinically significant medication issues are identified, in the clinician's professional judgment, prompt communication to the physician or physician-designee occurs AND the physician's (or designee's) prescribed/recommended actions are implemented by midnight of the next calendar day, at the latest.

What does this mean to the prescriber as a crucial member of multidisciplinary team?

1	At the time a clinically significant medication-related issue is identified, the facility and prescriber have until 11:59 PM of the next calendar day to bring resolution to the issue. These time limitations begin as soon as the identified issue is communicated to the facility. Issues may be identified by a dispensing pharmacist at point of service and/or by a consultant pharmacist performing an Admission Medication Review.
2	The timely response to identified clinically significant medication issues by prescribers is an imperative.
3	The prescriber's response or lack of response will be documented on the resident's MDS and submitted as a new SNF Quality Measure.
4	The facility staff is required to record prescriber responses to clinically significant issues in the medical record.
5	Prescribers can reduce potentially preventable medication-related rehospitalizations of recently admitted patients by embracing his/her role in this new CMS requirement.
6	If a prescriber is not available at the time the facility staff makes initial contact, a physician designee may respond to the issue on his/her behalf.
7	Prompt response, issue resolution, and complete documentation will be the keys to compliance and success.

The IMPACT Act requires standardized patient assessment data across post-acute care settings including: Skilled Nursing Facilities (SNF), Long-Term Care Hospitals, Home Health Agencies and Inpatient Rehabilitation Facilities.

SNF data collection for the "Medication Reconciliation Domain" of the IMPACT Act begins October 1, 2018, and is being implemented as 3 new "Drug Regimen Review" items to be added to the Minimum Data Set (MDS). A new Quality Measure named "Drug Regimen Review Conducted with Follow-Up for Identified Issues" will be added to facility short-term stay quality measures, under this enactment.

Omnicare's Consultant Pharmacists are well equipped to assume their role in Admission Medication Review, supported by electronic resident information, clinical proficiency, and tools to help expedite a swift resolution to significant medication-related issues, thus helping people on their path to better health