

## Background

The IMPACT Act stands for the Improving Medicare Post-Acute Care Transformation Act, whose goal is to standardize patient assessment data across several post-acute care settings, including skilled nursing facilities. This Act becomes effective on October 1, 2018, with the release of the new version of the Minimum Data Set, which contains 3 new questions related to Drug Regimen Reviews (DRR). Together the responses to these 3 MDS questions comprise a new Quality Measure called Drug Regimen Review Conducted With Follow-Up For Identified Issues. The IMPACT Act requires that any potential or actual clinically significant medication issues be identified upon, or shortly after, admission of a resident on a Medicare Part A stay. Additionally, the Act stipulates that any identified clinically significant medication issues be resolved by 11:59PM of the next calendar day following issue identification.

## Goals

- Assist our skilled nursing facility clients in meeting the new DRR requirements of the IMPACT Act
- Provide education and tools to facilities and prescribers
- Improve the timeliness of the initial medication review, and therefore optimize the safety, quality, regulatory, and cost-effective opportunities for the resident, and for our clients
- Complete a medication review for all new admissions
- Complete a medication regimen review for all residents, independent of their length of stay.

## Process

Our dispensing pharmacists review all medications for allergies, drug interactions, duplicate therapies, dosing discrepancies, and other clinical issues for both new admissions and for new orders, and routinely contact facilities to help resolve clinically significant issues in a timely manner.

An off-site consultant pharmacist monitors facility admissions, and, using available information, completes an Admission Medication Review within 72 hours (or agreed upon timeframe) of resident admission. This review may include hospital discharge documents and other information in the facility's electronic health record (EHR), and from our proprietary consulting software program. Any clinically significant medication issues identified during these admission reviews will be communicated to facilities by a consultant pharmacist.

Recommendations made by the consultant pharmacist will be communicated to a facility designee that will be responsible for ensuring prompt follow-up from the prescriber.

## Targeted Areas

- Strategies to mitigate risk and fulfill IMPACT Act requirements consist of identification of clinically significant medication issues, review of dosing and monitoring of medications, and reduction of polypharmacy. Additionally, a focus on the appropriate use of antipsychotics, antibiotics, and the elimination or reduction of high-risk medications and duplicate therapies, will occur
- Clinical reviews and recommendations will help optimize care in the areas of diabetes, pain management, COPD, antibiotic stewardship, heart failure, and others
- Cost management strategies include ensuring stop dates for antibiotics and post-operative anticoagulants, evaluation of proton-pump inhibitor utilization, and other areas as identified and appropriate

## Facility Responsibility

- Documentation and timely follow-up for clinically significant medication issues identified by dispensing and/or consultant pharmacists
- Access for consultant pharmacist to the facility EHR, including the eMAR. If such access is not feasible, discuss options with your consultant pharmacist
- Identification of a contact person to:
  - receive communication from consultant pharmacists regarding clinically significant medication issues via secured e-mail or other identified mechanism;
  - ensure time sensitive follow-up from prescribers for clinically significant recommendations, as per IMPACT Act requirements;
  - facilitate timely follow-up for other consultant pharmacist recommendations