

“Each year more than 140,000 Australians have to go to hospital with problems caused by their medicine. It has been shown that in up to 69% of these cases the problem can be avoided. Older people are particularly at risk.

As a response to this problem, and in light of research done through the Third Community Pharmacy Agreement, the Home Medicines Review (HMR) Program was developed. It is funded by the Australian Government and managed by the Pharmacy Guild of Australia.” (NPS MedicineWise, 2014)

Overview

A Home Medicines Review (HMR), also known as Domiciliary Medication Management Review (DMMR), is a service provided jointly by general practitioners and pharmacists. The review is conducted by a pharmacist, in the patient’s home.

The HMR allows a thorough check of all the medicines a patient is taking, including prescriptions from the pharmacy, and any non-prescription medication such as vitamins or herbal preparations. The goal of the HMR is to maximise an individual patient’s benefit from their medication regimen, and prevent medication-related problems.

A HMR can only be conducted following a referral from a general practitioner. A specially accredited pharmacist will then conduct the HMR and provide a report back to the patient’s general practitioner, who will then discuss any recommendations with the patient and may make changes to their medication regime based on the findings of the HMR.

Pharmacists in the HMR program are required to be Medication Management Review (MMR) Accredited. This additional training provided by the Australian Association of Consultant Pharmacy or Society of Hospital Pharmacists of Australia.

Patient Eligibility

The patient must satisfy the following eligibility criteria for a HMR service:

- a) the patient is a current Medicare/DVA cardholder;
- b) the patient is living in a community setting;
- c) the patient is at risk of or experiencing medication misadventure; and
- d) the GP confirms that there is an identifiable clinical need and the patient will benefit from a HMR Service.

HMR Services are not available to in-patients of public or private hospitals, day hospital facilities, transition care facilities or to residents of a Government Funded Facility.

Note: Changes to the HMR Program from March 2014

A number of changes to Fifth Agreement programmes took effect from 1 March 2014. These include:

- limiting the **validity of a HMR and RMMR referral to three months**; and
- limiting repeat HMR and RMMR services to **once in a 24 month period (unless a GP considers that it is clinically necessary)**.

Identifying patients for a HMR

Patients who are likely to benefit from a HMR include:

- patients for whom quality use of medicines may be an issue; or
- patients who are at risk of medication misadventure because of factors such as:
 - their co-morbidities,
 - age or social circumstances,
 - the characteristics of their medicines,
 - the complexity of their medication treatment regimen, or
 - a lack of knowledge and skills to use medicines to their best effect.

HMRs are particularly useful for people who:

- take more than five medicines a day
- have recently spent time in hospital
- are concerned about their medicines
- are confused about their medicines
- do not always remember to take their medicines.

Components – Home Medicines Review (MBS Item 900)

A Home Medicines Review (MBS Item 900) involves the GP:

- assessing a patient's medication management needs, and following that assessment, referring the patient to a community pharmacy or an accredited pharmacist for a HMR, and providing relevant clinical information required for the review, with the patient's consent;
- discussing with the reviewing pharmacist the results of that review including suggested medication management strategies; and
- developing a written medication management plan following discussion with the patient.

The patient and the GP must agree on a medication management plan. With patient consent the medication management plan should be forwarded to the patient's usual Community Pharmacy(s) or a Community Pharmacy of their choice.

MBS item 900 includes all HMR related services provided by the GP from the time the patient is identified as potentially needing a medication management review, to the preparation of a the draft medication management plan, and the follow up consultation when the medication management plan is discussed and agreed with the patient. The benefit is not claimable until all the components of the item have been rendered. The pharmacist's review and report is paid for by the Australian government, so there is no cost to the patient for the pharmacist's service.

Note: HMR referrals can be made directly to an accredited pharmacist or community pharmacy

GPs can provide a HMR referral directly to an accredited pharmacist or to a patient's usual community pharmacy. The community pharmacy and/or accredited pharmacist must have approval from Medicare to conduct HMR services.

The steps in a Home Medicines Review including assessment, referral, the pharmacy / pharmacists role and the development of a medication management plan are outlined in The Home Medicines Review Process chart shown on the following pages.

GP Referral for a HMR

A DMMR referral form is available for the GP to refer a patient to a community pharmacy or accredited pharmacist for a HMR, on the Department of Health website at www.health.gov.au. A copy is shown on the following pages. If this form is not used, the medical practitioner must provide patient details and relevant clinical information to the patient's preferred community pharmacy or accredited pharmacist. The HMR referral should include reason for referral.

The patient interview must be conducted by the accredited pharmacist within ninety (90) days of the date of the referral, for the pharmacist / community pharmacy to be remunerated under the Home Medicines Review program.

Frequency of service

One HMR Service can be conducted per eligible Patient on referral from a GP. A subsequent HMR may only be conducted if more than 24 months has elapsed since the date of the most recent Patient interview or when the Patient's GP specifically deems a subsequent review is clinically necessary, such as when there has been significant change to the Patient's condition or medication regimen.

Reasons why an additional review may be requested include:

- Discharge from hospital after an unplanned admission in the previous four weeks;
- Significant change to medication regimen in the past three months;
- Change in medical condition or abilities (including falls, cognition, physical function);
- Prescription of a medicine with a narrow therapeutic index or requiring therapeutic monitoring;
- Presentation of symptoms suggestive of an adverse drug reaction;
- Sub-therapeutic response to therapy;
- Suspected non-compliance or problems with managing medication-related devices; or
- Risk of, or inability to continue managing own medicines due to changes in dexterity, confusion or impaired vision.

Provision of a subsequent Home Medicines Review must not be triggered solely by an "anniversary" date; the Service is not intended to be an ongoing review cycle.

Where does a HMR fit with the Chronic Disease Management Items?

HMR (Item 900) is a very flexible item number for GPs to use. It can be used in conjunction with CDM item numbers (including at GPMP or TCA) or it can be used on its own.

The involvement of the pharmacy/pharmacist in providing this service is separate from, and available in addition to, the Individual Allied Health Services under Medicare available for patients with a GPMP and TCA. It does not take up any of the allowed 5 allied health visits under Medicare per year.

The HMR reports which include the pharmacists report and the consequent GP Medication Management Plan, can be utilised as the medication management component of a GPMP or TCA.

Resources and Further Information

Referral Form and Management Plan Templates

Templates for the Home Medicines Review Referral Form and a Medication Management Plan are available from the GP partners Australia website at www.gppaustralia.org.au, under Services > Quality Use of Medicines.

MBS Online

For further information on MBS Item 900 refer to the MBS available online at www.health.gov.au/mbsonline.

The Pharmacy Guild of Australia

The Home Medicines Review program, while funded by the Australian Government, is managed by The Pharmacy Guild of Australia. Further information on the HMR program is available on The Pharmacy Guild of Australia website www.guild.org.au and the 5th Pharmacy Agreement website at www.5cpa.com.au. A HMR patient brochure (shown below) is available from Pharmacy Guild.

5th Community Pharmacy Agreement

HOME MEDICINES REVIEW

FOR MORE INFORMATION ABOUT HOME MEDICINES REVIEW

ASK YOUR GP, PHARMACIST OR CALL THE PHARMACEUTICAL BENEFITS SCHEME (PBS) INFORMATION LINE ON FREECALL 1800 020 613

If a Home Medicines Review is not suitable for you, other in-pharmacy services are available that may help you manage your medicines.
Ask your pharmacist

The Home Medicines Review Program is funded by the Australian Government Department of Health as part of the Fifth Community Pharmacy Agreement. September 2013

HOME MEDICINES REVIEW

a way to help you manage your medicines at home

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WHAT ARE HOME MEDICINES REVIEWS?

A Home Medicines Review is a way for your pharmacist and GP to help you manage your medicines at home. In particular, anyone taking a number of medications or with several health conditions should discuss a Home Medicines Review with your GP.

Your GP gives you a referral to the community pharmacy or accredited pharmacist of your choice. The pharmacist has specialist training to conduct HMRs. The pharmacist then talks with you in your home and provides a HMR Report back to the GP and can provide it to your community pharmacy.

You and the GP discuss the report and develop a 'medication management plan' that you can share with all your health care providers to assist with your ongoing care. ■

IS THERE A COST FOR A HOME MEDICINES REVIEW?

Your GP may bulk bill or charge you for the GP consultations. The pharmacist's visit to your home and the report is paid for by the Australian Government so it will not cost you anything. ■

A Home Medicines Review will help you to use your medicines effectively and avoid any unwanted effects you may have, meaning that you get the most out of your medicines. A Home Medicines Review may be of benefit if you:

- Take medicines that need close monitoring of their effects on your body
- Take medicines that can have serious interactions with other medicines
- Feel unwell when you take your medicines
- Don't experience the positive effect from your medicines that your GP expected
- Have recently been discharged from hospital and had changes to your medicines.

HOW DO I ARRANGE A HOME MEDICINES REVIEW (HMR) AND WHAT WILL HAPPEN?

YOU

If your condition or medicines change significantly you may benefit from another HMR

Your GP determines if a HMR is appropriate for you

If you are happy for the HMR to be conducted in your home, you can then choose which pharmacy or accredited pharmacist conducts the HMR

The pharmacist receives the HMR referral and arranges a time to visit you in your home

The pharmacist interviews you at home and writes a HMR Report containing their recommendations

Your GP discusses the HMR Report with you and provides you with a 'Medication Management Plan' to help you better manage your medicines at home

Your 'Medication Management Plan' can be provided to your pharmacy to assist you and your GP with your ongoing care

By coming to your home your pharmacist can advise you and show you the best way to store your medicines safely so they work properly when taken. They can help you remove expired medicines or those you no longer use, and make sure that your prescription and non-prescription medicines, including complementary medicines (such as vitamins and herbal products) are appropriate to take together. ■

Your pharmacist can help you to use and maintain your medical devices, such as inhalers, blood pressure monitors and blood glucose monitors, correctly as well. ■