PROGRAM RULES
Residential Medication Management Review and Quality Use of Medicines
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1 INTRODUCTION

This document outlines the Program Rules governing the Residential Medication Management Review (RMMR) and Quality Use of Medicines (QUM) Programs. This document must be read in conjunction with the Pharmacy Programs Administrator General Terms and Conditions (General Terms). Definitions in the General Terms apply in these Program Rules.

The RMMR Program is designed to enhance the Quality Use of Medicines for residents in approved Australian Government funded aged care facilities, by assisting residents and their carers to better manage their medicines. The Program will also support activities that are designed to improve Quality Use of Medicines across approved Australian Government funded aged care facilities.

The RMMR Program, including QUM, is part of the suite of Medication Management Programs funded under the Sixth Community Pharmacy Agreement (6CPA) to support Quality Use of Medicines services that are designed to reduce adverse events and associated hospital admissions or medical presentations.

2 DEFINITIONS

**Facility** means an Australian Government funded residential care facility including the following:

- Aged care facility that receives residential care subsidy in accordance with the *Aged Care Act 1997*
- Transition care facility
- Multi-Purpose Service (MPS).

**DVA** means Department of Veterans’ Affairs

**Patient** means a person residing in a Facility. To be eligible, the Patient must be a:

- Permanent resident of an Australian Government funded Aged Care Facility, as defined by the *Aged Care Act 1997* or
- Permanent resident of an MPS facility or
- Resident in an Australian Government funded transition care facility for more than 14 consecutive days.

**QUM** means Quality Use of Medicines.

**QUM Service** means a Quality Use of Medicines service provided to a Facility through a facility-wide approach. A Registered Pharmacist or Accredited Pharmacist conducts a QUM service in association with appropriate members of the Facility.

**QUM Service Provider** means any of the following who have been approved to provide QUM Services in accordance with the QUM Program Rules and the General Terms:

- An owner of an approved Section 90 Community Pharmacy
- A registered Pharmacist
- A business entity, with an Australian Business Number (ABN). This includes an Accredited Pharmacist operating as a sole trader.
Business entities that are not eligible to perform the role of a QUM Service Provider include:

- Any organisation that is able to initiate a referral for the Service
- A Section 94 Pharmacy
- A public or private hospital.
- A QUM Service Provider must also have executed a QUM Service Agreement with an eligible residential care Facility.

**RMMR** means Residential Medication Management Review.

**RMMR Service** means a Residential Medication Management Review requested by the eligible Patient’s general practitioner (GP) in which the GP, Accredited Pharmacist, Patient, and where appropriate, a carer or other member of the eligible resident’s health care team participate in a comprehensive review of a Patient’s medications.

**RMMR Service Agreement** means an agreement between a prospective Service Provider and a Facility for the provision of RMMR services. An example agreement is available at [www.ppaonline.com.au](http://www.ppaonline.com.au).

**RMMR Service Provider** means any of the following who have been approved to provide RMMR Services in accordance with these Program Rules and the General Terms:

- An owner of an approved Section 90 Community Pharmacy
- A business entity with an Australian Business Number (ABN). This includes an Accredited Pharmacist operating as a sole trader.

A business entity that is not eligible to perform the role of a RMMR Service Provider include:

- Any organisation that is able to initiate a referral for the RMMR Service
- A Section 94 Pharmacy
- A public or private hospital.
- A RMMR Service Provider must have executed a RMMR Service Agreement with an eligible residential care Facility. The RMMR Service must be delivered by an Accredited Pharmacist.

### 3 PARTICIPATION REQUIREMENTS

To be eligible to participate in the RMMR and/or QUM program, Service Providers must meet Program Eligibility Criteria and be approved by the Pharmacy Programs Administrator. Service Providers can apply for approval online at [www.ppaonline.com.au](http://www.ppaonline.com.au).

#### 3.1 Service Provider Eligibility

To be eligible for the RMMR and/or QUM Program, a Service Provider must:

- Be an eligible business entity which is either:
  - An owner of an approved Section 90 Community Pharmacy
  - A business entity with an Australian Business Number (ABN). This includes an Accredited Pharmacist operating as a sole trader with an ABN
- Agree to abide by the Pharmacy Programs Administrator General Terms and Conditions available from [www.ppaonline.com.au](http://www.ppaonline.com.au)
• Undertake to provide Services in accordance with these Program Rules
• Have a RMMR and/or QUM Service Agreement in place with an eligible residential aged care Facility
• An RMMR Service Provider must ensure that all steps of the RMMR Service are carried out by the same Accredited Pharmacist
• The RMMR Service Provider can be different to the QUM Service Provider.

3.2 Residential Care Facility Eligibility
In order for a Facility to participate in the RMMR and/or QUM programs it must be either:
• An Aged Care Facility that receives residential care facility subsidy from the Australian Government in accordance with the Aged Care Act 1997; and
• An Australian Government funded transition care facility; or
• A Multi-Purpose Service providing integrated health and aged care services to small rural and remote communities.

3.3 RMMR Patient Eligibility Criteria
In relation to RMMR Services, the Patient must satisfy the following mandatory Eligibility Criteria:
• The Patient is a current Medicare/DVA card holder
• The Patient is at risk of, or currently experiencing, medication misadventure
• The Patient is:
  – A permanent resident of an Australian Government funded Aged Care Facility, as defined by the Aged Care Act 1997 or
  – A permanent resident of an MPS facility or
  – A resident in an Australian Government funded transition care facility for more than 14 consecutive days
• The GP confirms that there is an identifiable clinical need and that the Patient will benefit from a RMMR Service.

Failure to maintain compliance with any or all of the above Eligibility Criteria will result in the Service Provider being ineligible to participate in the RMMR and/or QUM Programs for that Facility.

4 RMMR PROGRAM

4.1 Background
The objectives of the RMMR Program are to:
• Achieve safe, effective, and appropriate use of medicines by detecting and addressing medicine-related problems that interfere with desired Patient outcomes
• Improve the Patient's quality of life and health outcomes using a best practice approach that involves cooperation between the GP, Pharmacist, other relevant health professionals and the Patient (and where appropriate, their carer)
• Improve the Patient's and health professional's knowledge about medicines
Facilitate cooperative working relationships between members of the healthcare team in the interests of Patient health and wellbeing

Provide medication information to the Patient and other healthcare providers involved in the Patient’s care.

### 4.2 RMMR Service Agreement

To become an approved RMMR Service Provider, a RMMR Service Agreement with an eligible Facility must be in place. The Service Provider is responsible for ensuring the Service Agreement entered into with the Facility is consistent with these Program Rules and current at the time of service, prior to conducting any RMMR Service.

Newly executed Service Agreements or variations to existing RMMR Service Agreements must be submitted to the Pharmacy Programs Administrator Support Team prior to submitting a claim for services at that Facility. To be eligible for payment, RMMR Services must be provided within Service Agreement start and end dates.

RMMR Service Agreements may be terminated by the Facility or the Service Provider with 30 days prior written notice. Termination notices must be provided to the Pharmacy Programs Administrator Support Team prior to the Service Agreement termination date by email to support@ppaonline.com.au

Only one RMMR Service Provider may be contracted for a single Facility.

The RMMR Service must be provided at no charge.

An example RMMR Service Agreement can be found on the RMMR page of the Pharmacy Programs Administrator website.

### 4.3 RMMR Review Process

#### 4.3.1 GP Referral

The Patient’s GP must refer the Patient for a RMMR; however, the Community Pharmacy or Accredited Pharmacist, nursing staff or other member of the health care team, the Patient themselves or their carer may identify the need for a RMMR and bring this to the GP’s attention.

The Patient’s GP should be contacted to initiate the review process. The Patient’s GP will provide a written referral, which should include reason for referral and all relevant prescribing and clinical history, to the RMMR Service Provider.

RMMR referrals are only valid if received on or before the date of the RMMR service and cannot be made retrospectively. It is the RMMR Service Provider’s responsibility to ensure that appropriate Patient consent has been granted to conduct the RMMR Service.

The Patient Interview must take place within 90 days of the date of the referral to be remunerated under the RMMR Program.

#### 4.3.2 Patient Consent

If the GP and the Patient determine a RMMR meets the Patient’s needs, the RMMR Service Provider must receive consent prior to conducting the Patient review to allow sharing of necessary Patient information between health care providers.
4.3.3 RMMR Service

A RMMR Service consists of a Patient Interview, clinical assessment and written RMMR report. The same Accredited Pharmacist must conduct all steps of each individual RMMR Service.

4.3.4 RMMR Report

The RMMR report involves assessing the information gathered from relevant sources and preparing a written report. The report must state the findings of the review and outline recommendations to assist in the development of a Medication Management Plan.

The report must be prepared by the same Accredited Pharmacist that conducted the Patient Interview and clinical assessment. The Accredited Pharmacist must provide a copy of the written report to the referring GP and discuss relevant findings and suggested management strategies. The written report should be communicated in a manner agreed upon by the Accredited Pharmacist, the Facility and the Patient’s GP.

4.4 Prior Approval for Pharmacist Only Review

In limited circumstances a RMMR Service Provider may seek to conduct a funded RMMR Service without a GP referral. This is known as a Pharmacist Only Review and requires prior approval.

Prior approval for a Pharmacist Only Review may only be sought when:

- A member of the Patient's health care team, the Patient or their carer has determined that a RMMR would benefit the resident; and
- Where repeated and reasonable attempts have been made to obtain a referral from the Patient’s GP.

Prior approval will not be granted retrospectively. Receiving prior approval in one instance should not be construed as a guarantee that any future application, even for identical circumstances, will be approved.

Payment for a RMMR Review conducted without a GP’s referral will only be made when prior approval has been sought and granted.

4.4.1 Submissions for Pharmacist Only Review

Approved Service Providers can make a submission for prior approval of a Pharmacist Only Review by completing the Program Variation Pharmacist Only Review Form online at www.ppaonline.com.au.

Submissions must be made at least 10 working days prior to the proposed date of interview.

The RMMR Service Provider must provide information that outlines a detailed and reasonable justification for a service to be conducted without a GP’s involvement.

As part of the assessment process, some information contained in the submission will be shared with the Department of Health. Requests will be assessed by the Department of Health on the evidence provided. The RMMR Service Provider will be advised of the outcome via email within seven working days from the date of submission.

It is the responsibility of the RMMR Service Provider to explain the prior approval process to the Facility and the Patient and seek consent for their details to be shared with the Department of
Health and the Pharmacy Programs Administrator for the purpose of assessing the request for prior approval.

4.5 Frequency of Service

One RMMR Service can be conducted per eligible Patient on referral from a GP.

A subsequent RMMR Service 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 (but are not limited to):

- 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.

Provision of a subsequent RMMR must not be triggered solely by an ‘anniversary’ date; the Service is not intended to be an ongoing review cycle.

4.6 RMMR Claim Submission

Claims must be submitted by approved Service Providers online via the Pharmacy Programs Administrator Portal.

RMMR Services must be claimed by the end of the next calendar month (e.g. services undertaken in March must be claimed by 30 April).

Claims submitted outside this timeframe cannot be submitted and will not be paid.

Claims that are incomplete or that do not meet Program Rules will not be able to be submitted or will be rejected (e.g. where the RMMR interview was conducted more than 90 days after the date of referral or where Pharmacist Only Review claims are submitted without prior approval being granted).

5 QUM PROGRAM

5.1 Background

QUM services focus on improving Facility practices and procedures as they relate to the Quality Use of Medicines.

The QUM service is a separate service from an RMMR service and is provided by a Registered or Accredited Pharmacist.
The objectives of the QUM Program are to:

- Advise members of the Facility’s healthcare team on a range of medication management issues in order to meet the healthcare needs of residents
- Provide medication information and education to residents, carers and other healthcare providers involved in the resident’s care
- Assist the Facility to undertake continuous improvement activities, including ensuring medication management accreditation standards are met and maintained.

5.2 QUM Service Agreement

To become an approved QUM Service Provider, a QUM Service Agreement with an eligible Facility must be in place. The Service Provider is responsible for ensuring the Service Agreement entered into with the Facility is current and consistent with these Program Rules, prior to conducting any QUM Service.

The QUM Service Agreement must include a Work Plan that details the agreed QUM activities between the Facility and the approved Service Provider. QUM services cover areas such as medication advisory activities, education, and continuous improvement. They are designed to assist Facilities in meeting the healthcare needs of residents.

Newly executed Service Agreements or variations to existing QUM Service Agreements must be submitted to the Pharmacy Programs Administrator Support Team prior to submitting a claim for services at that Facility. To be eligible for payment, QUM Services must be provided within Service Agreement start and end dates.

QUM Service Agreements may be terminated by the Facility or the Service Provider with 30 days prior written notice. Termination notices must be provided to the Pharmacy Programs Administrator Support Team prior to the Service Agreement termination date by email to support@ppaonline.com.au

Only one QUM Service Provider may be contracted for a single Facility. The QUM Service Provider can be different to the RMMR Service Provider.

The QUM Service must be provided at no charge to the Facility.

An example QUM Service Agreement can be found at www.ppaonline.com.au.

5.3 QUM Activities List

Activities that can be provided under the QUM Program include (but are not limited to):

**Medication Advisory Activities**

- Participate in Drug Use Evaluation (DUE)
- Advise members of the healthcare team on a range of issues, including storage, administration, dose forms, compatibilities, therapeutic and adverse effects and compliance
- Participate in Medication Advisory Committees (MACs)
- Assist in the development of nurse-initiated medication lists
- Participate in policy and procedure development activities
• Assist in the development of policies and procedures to address medication management concerns, for example, sleep, bowel or pain management and infection control.

**Education activities**

• Provide in-service for nursing staff and carers or residents on medication therapy, disease state management or prescribing trend issues
• Provide drug information for medical practitioners and Facility staff, including provision of newsletters.

**Continuous improvement activities**

• Assist the Facility to meet and maintain medication management accreditation standards and to comply with regulatory requirements.
• Assess competency of residents to self-administer medications
• Advise on and assess medication storage requirements, monitoring and standards including:
  - Storage and labelling
  - Expired stock
  - Security of medication storage areas
  - Safe disposal of unwanted medications.
• Conduct medication administration audits and surveys on medication errors, altered dosage forms and psychotropic drug use
• Assist with the development of, and report on, quality indicators and other quality measures.

**5.4 Frequency of Service**

The type and frequency of QUM Services are to be documented within the Service Agreement between the Service Provider and the Facility.

**5.5 QUM Claims**

Claims must be submitted by approved Service Providers online via the Pharmacy Programs Administrator Portal.

QUM claims must be submitted by the end of the next calendar month following the last day of each claiming quarter. Claims submitted outside this timeframe will not be paid.

The QUM Service fee is paid to Service Providers quarterly in arrears. The quarterly period commences on the date the Service Agreement between the Facility and the Service Provider is signed.

A QUM claiming quarter must:

• Cover three consecutive months
• Fall within the start and end dates of the relevant Service Agreement
• Not overlap any previously claimed quarters.
An approved QUM Service Provider is required to complete a quarterly claim and provide quarterly updates to qualify for payment.

A minimum of one agreed QUM Service must be provided each quarter to receive the QUM payment.

**Example of QUM Claiming quarters and timeframes:**

If the QUM Service Agreement is signed on the 5 April the quarters and claiming timeframe for this Agreement would be as follows:

<table>
<thead>
<tr>
<th>Claiming quarters</th>
<th>Claiming timeframes</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 April to 4 July</td>
<td>31 August</td>
</tr>
<tr>
<td>5 July to 4 October</td>
<td>30 November</td>
</tr>
<tr>
<td>5 October to 4 January</td>
<td>28 February</td>
</tr>
<tr>
<td>5 January to 4 April</td>
<td>31 May</td>
</tr>
</tbody>
</table>

**5.6 QUM Service Payment Calculations**

The QUM Payment consists of a base annual amount plus an additional amount per eligible aged care bed within the Facility.

No adjustments to payments will be made when the number of eligible aged care beds changes during the quarter. The change to the number of eligible aged care beds will take effect from the beginning of the following quarter.

**6 AUDIT REQUIREMENTS**

RMMR/QUM Service Providers must retain all records for seven years to demonstrate that they have complied with the General Terms and these Program Rules when providing and claiming for a RMMR/QUM Service.

RMMR/QUM Service Providers will be subject to audits to ensure RMMR/QUM Services are provided in accordance with the General Terms and these Program Rules. RMMR/QUM Service Providers that do not provide RMMR/QUM Services in accordance with the General Terms and these Program Rules may no longer be able to participate in the RMMR/QUM Program or be eligible to receive RMMR/QUM Program payments.

Under section 137.1 of the *Criminal Code Act 1995*, giving false and misleading information is a serious offence.

**7 RESOURCES**


**CONTACT THE SUPPORT CENTRE:** 1800 951 285 | support@ppaonline.com.au