

Educating Payers on the Pharmacist Medication Therapy Management (MTM) Billing Codes

REQUEST FOR PROPOSALS

The instructions in this Request for Proposals should be followed carefully. Only after all the requested information has been received will an application be considered complete and eligible for evaluation by the Pharmacist Services Technical Advisory Coalition Review Panel. If the application is incomplete or incorrectly prepared, it may be returned without review.

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Administered by the Pharmacist Services Technical Advisory Coalition

Sponsored by The Community Pharmacy Foundation

Educating Payers on the New Pharmacist MTM CPT Codes Request for Proposals

I. PROJECT DESCRIPTION

Background

In 2005, the American Medical Association (AMA) Current Procedural Terminology (CPT) Editorial Panel approved three billing codes for pharmacists to use when submitting claims to third-party payers for provision of Medication Therapy Management Services (MTMS). The codes were originally released on July 1, 2005 and became effective January 1, 2006 as temporary codes. The CPT codes became permanent effective January 1, 2008. The codes may be used to bill for services provided under an MTM benefit, including those covered under Medicare Part D.

About the Pharmacist Services Technical Advisory Coalition (PSTAC)

PSTAC was founded in 2002 to improve the coding infrastructure necessary to support billing for pharmacists' professional services. The Coalition works to provide the national leadership necessary to position and secure pharmacy's place in the electronic data interchange (EDI) health encounter/claims processing and payment environment concerning all health care providers' professional services.

PSTAC seeks to develop an educational campaign to inform health care payers about the availability of the pharmacist CPT codes and the value of pharmacist care services in health care. The end product of the educational campaign will reach a variety of payers and be developed in conjunction with MTM intermediaries/payers. Final work product will be posted on www.pstac.org and distributed to key stakeholders in health care.

The following resources are useful background information in understanding the evidence already available regarding the value of pharmacists' services:

- Pharmacist Services Technical Advisory Coalition. PSTAC, www.pstac.org
- Evidence of the Economic Benefit of Clinical Pharmacy Services: 1996 2000 http://www.accp.com/docs/positions/positionStatements/pos029.pdf
- Isetts, BJ, Buffington DE. CPT code-change proposal: medication therapy management services. J Am Pharm Assoc. 2007;47:491 495.
- Isetts BJ, Brown LM, Schondelmeyer SW, Lenarz LA. Quality assessment of a collaborative approach for decreasing drug related morbidity and achieving therapeutic goals. Arch Intern Med. 2003;163:1813 20.
- Bunting BA, Smith BH, Sutherland SE. The Asheville Project: clinical and economic outcomes of a community-based long-term medication therapy management program for hypertension and dyslipidemia. J Am Pharm Assoc. 2008 Jan-Feb;48(1):23-31
- Manias E, Claydon-Platt K, McColl GJ, Bucknall TK, Brand CA. Managing complex medication regimens: perspectives of consumers with osteoarthritis and healthcare professionals. Ann Pharmacother 2007 May;41(5):764-71

- Hansen RA, Roth MT, Brouwer ES, Herndon S, Christensen DB. Medication therapy management services in North Carolina community pharmacies: current practice patterns and projected demand. J Am Pharm Assoc. 2006 Nov-Dec;46(6):700-6.
- Isetts BJ, Schondelmeyer SW, Artz MB, Lenarz LA, Heaton AH, Wadd WB, Brown LM, Cipolle RJ. Clinical and economic outcomes of medication therapy management services: the Minnesota experience. J Am Pharm Assoc. 2008 Mar-Apr;48(2):203-11.

Proposals submitted in response to this RFP should include details of the educational end product(s), description of main educational messages, description of how current payer attitudes will be incorporated into main educational messages, *and* a detailed plan to execute the end product(s).

II. EDUCATIONAL END PRODUCT REQUIREMENTS

Listed below are detailed descriptions of the characteristics of the project team and the requirements for completion of the educational end product.

Organizations that respond to this RFP must demonstrate that the educational end product will be developed by a team of individuals with significant expertise in educational design and program implementation. Respondents should also demonstrate that individuals with experience in the health care payer community with be consulted or incorporated into the development team. The selected bidder will work collaboratively with PSTAC and its member organizations on the final end product.

Educational End Product

The Educational End Product developed by the grantee should be usable by pharmacists in multiple practice settings and must include the following components:

- Multiple educational tools using a consistent message designed for pharmacists to address payers about:
 - Existence of CPT Codes
 - Description from AMA CPT Manual
 - Utilize Case Examples/Vignettes
 - Promotional segment explaining why payers should consider paying for vices if they are not already. (see background links to data)
- End Product Formats (Deliverables)
 - Art work/design/content suitable for web posting
 - Art work/design/content suitable for easily reproducible, large scale distribution in black & white and color
 - Presentation template

III. PROJECT PLAN REQUIREMENTS

To answer this request for proposal, applicants should submit a detailed project plan that addresses the following:

- Abstract
- Background
- Personnel
- Key messaging
- Methods
- Timeline

The qualifications of each member of the project team should be described according to the eligibility requirements above. A curriculum vitae (four pages maximum) should be attached for the project director. In developing the proposal, the applicant should provide sufficient detail in the methods section.

The period of performance for this project is six months.

IV. FUNDING INFORMATION

A \$25,000 grant will be awarded for development of this educational content and strategy for distribution. Fifty (50) percent of the total grant will be provided upon execution of the award letter and the remaining fifty (50) percent will be provided upon receipt and approval of the educational product.

Funds may not be applied to:

Ongoing general operating expenses or existing deficits

Endowment contributions or

Stipends or loans

Funding is generally available for:

Salary support for study personnel

Consumable supplies and services

Travel essential to the conduct of the proposed project

Travel to present project findings in the range of \$1,000 to \$1,500 per project

Facilities and administrative cost rates that do not exceed eight percent of the total budget

Grants will be awarded to individuals and the funds will be disbursed directly to the sponsoring institution for administration.

V. GRANT RECIPIENT RESPONSIBILITIES

The period of performance for this grant will begin upon transmission of an award letter by PSTAC. The period of performance cannot exceed six months.

Following initial disbursement of funds, the grantee must submit an interim report due on or about the midterm of the contract to PSTAC that addresses:

- o Progress toward completion of activities included on the review time line
- Any methods modifications

After PSTAC receipt of the End Educational Product, it will be screened using a peer review process. The peer review process will not exceed 30 days. Within 30 days after receipt of peer review comments from PSTAC, the recipients will be required to submit a revised educational end product and responses to each comment.

Following receipt and acceptance of the final End Educational Product, PSTAC will disburse the final grant payment.

The grantee may request a 60-day grant extension. Only one extension will be granted. If extension granted, the project must be completed and all other requirements of the grant fulfilled by the end of 60-day extension period.

VI. APPLICATION PROCESS/SELECTION CRITERIA

Grant application reviewers will use the following criteria in evaluating applications:

Background - 10 points maximum

Does the Background demonstrate the applicant's understanding of the topic area and balanced knowledge of it?

Personnel and Facilities - 20 points maximum

Are the professional competencies and experiences of the applicants appropriate to execute the work required? Do the applicants demonstrate significant expertise in educational design? Is the project team multidisciplinary? Is there evidence of a commitment to collaboration between the project team and health care payers?

Key Messaging - 20 points maximum

Are the key messages consistent with the project focus and the strategic priorities of PSTAC? Do the applicants identify questions within the topic area that are of the greatest importance with respect to establishing the impact of pharmacist-provided MTMS on health-related outcomes?

Study Methods - 40 points maximum

Do the applicants provide a thorough description of processes that will be employed to systematically identify and select health care payer sources? Do the applicants provide a concise plan for developing educational materials consistent with the educational end product? Do the applicants present a concise plan for synthesizing results of data from payer research and including it into the main educational message?

Scope and Timeline - 10 points maximum

Does the timeline contain an appropriate level of detail? Do the applicants justify that the proposed timeline is realistic? Is there evidence the End Educational Product can be completed in the proposed time period (maximum six months)?

The application is to be completed by the project director and forwarded to: Stacey Swartz, PharmD
Executive Secretary
Pharmacist Services Technical Advisory Coalition
100 Daingerfield Road
Alexandria, VA 22314

To be accepted, the completed application must be mailed to arrive at PSTAC no later than the close of business on December 15, 2008. A letter of intent must be filed by November 14, 2008 for the application to be considered. A conference call for all potential grantees to address any questions pertaining to this RFP will be held on November 17, 2008 at 12 p.m. eastern time.