Comprehensive Medication Review: New Poll Indicates Interest but Low Receipt Among Older Adults

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The use of prescription medications among US adults has increased over time, including the use of 5 or more medications daily (ie, polypharmacy).1 With increased medication use comes the potential for problems including drug interactions, adverse effects, persistent use of medications no longer needed, incorrect dosages, nonadherence, and high costs. In 2016, it was estimated that prescription drug-related morbidity and mortality related to nonoptimized medication regimens cost the United States more than $500 billion annually.2

Comprehensive Medication Reviews and Medicare Part D

A potential solution to address these problems, which are often related to polypharmacy, is medication therapy management, including a comprehensive medication review. Medicare Part D plan sponsors are required to have a Medication Therapy Management (MTM) program for eligible beneficiaries. The goals of MTM programs are to reduce the risk of adverse events, including drug interactions, and to improve medication use, adherence, and outcomes. MTM eligibility is set each year by the Centers for Medicare & Medicaid Services (CMS). For 2020, the eligibility criteria are having multiple chronic diseases, multiple Part D medications, and estimated annual costs for covered Part D medications of at least $4255. Each plan is allowed to design their MTM eligibility specifications for number of medications and specific chronic diseases required to meet their populations' characteristics. In 2019, the conditions most commonly targeted by plans for MTM were diabetes, chronic heart failure, and dyslipidemia, and nearly 78% of plans targeted beneficiaries who filled at least 8 medications covered by Part D.

As part of their MTM programs, Part D plans are required to offer eligible beneficiaries an annual comprehensive medication review. The annual comprehensive medication review is a face-to-face, telephone, or telehealth visit between the beneficiary or caregiver and a pharmacist or other qualified professional. It includes reviewing all medications (ie, prescription, over-the-counter, herbal products, dietary supplements) to identify medication-related problems, creating a prioritized medication problem list, and crafting a plan to resolve any problems with the patient or caregiver and prescriber. It also addresses patient concerns to improve medication self-management. However, studies using the recently released national data from 2013 and 2014 Medicare Part D MTM program showed that less than 20% of eligible beneficiaries who were offered a comprehensive medication review received one.3,4

Receipt of Comprehensive Medication Reviews Is Low

In December 2019, a nationally representative survey of 2048 older adults aged 50 to 80 years, conducted by the University of Michigan National Poll on Healthy Aging, found that many older adults could benefit from a comprehensive medication review. Most older adults (64%) reported taking 2 or more prescription medications, and nearly one-quarter (23%) reported taking 5 or more. Likewise, more than half of older adults (52%) responded that they take 2 or more nonprescription medications. Among those who took 5 or more prescription medications, nearly one-third (32%) took an additional 5 or more nonprescription medications, indicating a potentially higher risk of
medication problems. However, just 24% of older adults taking 2 or more prescription medications had received a comprehensive medication review. Similarly, among older adults aged 65 to 80 years who indicated that they were enrolled in a Medicare Part D plan, just 1 in 4 (25%) had received a comprehensive medication review.

**Need for Increased Awareness of Comprehensive Medication Review Coverage**

Among adults aged 50-80 years who had not had a comprehensive medication review, most (86%) were not aware that their insurance may include this benefit. Among respondents aged 65 to 80 years with a Medicare Part D plan, nearly 9 in 10 (85%) who had received a comprehensive medication review were not aware that it could be covered by their prescription insurance. Additionally, more than one-third (36%) of respondents who took 2 or more medications indicated that they would be interested in having a comprehensive medication review with a pharmacist in the future.

**Implications for MTM Programs**

Medicare Part D-covered and Medicare Advantage-covered comprehensive medication reviews have been available for nearly 15 years; however, there remains a lack of awareness about and receipt of medication reviews among older adults. As of 2016, completion rates for comprehensive medication reviews in eligible members are a quality measure included in yearly Medicare Part C and D Star Ratings. Older adults can view Star Ratings when selecting their plan, including information on medication reviews. However, patients may not be aware of the ratings or use them when selecting their plan.

Given that the poll found a lack of awareness of this insurance coverage, additional efforts by Medicare, Medicare Part D, and Medicare Advantage plans as well as health care professionals to promote medication reviews are warranted. These efforts should target factors shown to affect an older adult’s decision to receive a comprehensive medication review, such as a recommendation from a physician or pharmacist, conversations with pharmacists regarding what comprehensive medication reviews entail, the ability to have the medication review in their usual pharmacy, and perceived susceptibility to medication-related problems, perceived lower health status, and beliefs of the benefit of a comprehensive medication review.

Changes to MTM benefit design are currently being tested. In 2017, the CMS Center for Medicare and Medicaid Innovation started a 5-year Medicare Part D Enhanced MTM model demonstration project across 6 Part D plan sponsors in 5 US regions. This model allows the Part D plan sponsors flexibility in their MTM targeting criteria and delivery and includes performance payments for improved outcomes and decreased medical costs. Results from this demonstration project may identify successful strategies to expand MTM and reach more Medicare Part D beneficiaries.

Overall, results of this national poll indicated that few older adults received a comprehensive medication review, most were unaware of this potential insurance benefit, and more than one-third were interested in receiving a review in the future. As prescription medication use and costs rise, nonprescription medication use increases, and medication-related problems exist, combined efforts by Medicare Part D plans and health care professionals to educate older adults about the benefits of an annual comprehensive medication review are warranted to increase safe and effective medication use.
ARTICLE INFORMATION

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REFERENCES


