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ADMISSION DRUG REGIMEN REVIEW (DRR): IMPACT Act

The Drug Regimen Review required by the IMPACT Act is distinct from the traditional monthly consultant pharmacist reviews required by §483.45(c). The IMPACT Act does not require a pharmacist to perform the DRR. It can be performed by various clinicians and should be completed upon admission or as close to the actual time of admission as possible. Note that this requirement of the IMPACT Act covers Medicare A residents only. The IMPACT Act DRR includes two basic aspects:

PART I: Medication Reconciliation

Admission process should include a comprehensive evaluation of pre-admission medications as soon as possible.

Medication Reconciliation

Comparison of the resident's medications taken prior to admission, to the medications prescribed upon admission, including:

- *RX*
- *OTC*
- *Supplements*
- *Vitamins*
- *Homeopathic*
- *Herbal*
- *TPN*
- *Oxygen*

Critical Data Sources

- Previous healthcare facility medical records
- Transfer documents
- Discharge summaries
- Resident or family discussions
- Recent history and physical
- Medication lists
- Progress notes
- Other records

Responsible Clinician(s)

- To perform a medication reconciliation, the clinician(s) must have access to critical data sources.
- Considering compressed time frame and need for access to critical data, medication reconciliation is ideally performed by:

  -Admitting Nurse with
  -Admitting Prescriber

PART II: Clinically Significant Medication Issues

Upon admission, medications must be reviewed to identify and potentially prevent clinically significant medication adverse consequences as soon as possible.

"Clinically Significant" Medication Issues

"Clinically Significant" means effects, results, or consequences that materially affect or are likely to affect an individual's mental, physical, or psychosocial well - being either:

- *Positively by preventing a condition or reducing a risk or*
- *Negatively by exacerbating, causing, or contributing to a symptom, illness, or decline in status*

Timing

"Clinically Significant" issues are potential or actual issues that, in the clinician's professional judgment, warrant:

- *Immediate attention*
- *Physician (or designee) communication and*
- *Completion of prescribed/ recommended actions by midnight of the next calendar day*

Responsible Clinician(s)

- Suggested Clinician: Prescriber and/or Facility Nurse
- Use available data (transfer summaries, discharge documents, resident interview, etc.) for a comprehensive evaluation.
- Without all critical data, the traditional Consultant Pharmacist Medication Regimen Review alone will NOT satisfy the Admission DRR requirement as described by the IMPACT Act.

Pharmacy Partnership

Clinicians with immediate and direct access to on-site admission and resident data are in the best position to assess for clinically significant medication issues upon admission.

The pharmacy can assist facilities in the IMPACT Act DRR process, but cannot perform all suggested aspects of the review without access to the resident's full information.

DISPENSING PHARMACISTS who dispense the resident's admission medications are able to review some of the elements but have limited access to other critical data.

CONSULTANT PHARMACISTS can likewise assist remotely with an admission review, but without comprehensive access to critical admission data and resident evaluation, an additional immediate admission review would not be beyond the scope of the Dispensing Pharmacist review.

Facility Policies and Procedures

The facility should create Policies and Procedures that address the requirements of the IMPACT Act:

- Depending on current facility admission processes, many of the requirements may already be in place.
- Identify which clinicians will be responsible for specific elements of the Admission DRR, and establish time frames for when activities will occur.
  - Dispensing pharmacists already review orders for many of these elements (see chart below)
    1. Medication issues will be immediately escalated to the facility's nurse
    2. Unresolved issues will be visible on the MyRemedi® Order Clarification dashboard
    3. MyRemedi users can subscribe to Clarification Med-Alerts for real-time notification
- Ensure documentation of complete Admission DRR is included in the resident's medical record
  - Document Medication Reconciliation and identification of clinically significant medication issues
  - Document Issue Resolution -- communication to prescriber or prescriber-designee and completion of all prescribed/recommended actions by midnight of the next calendar day (at the latest)

Upon Admission to Facility				
Drug Regimen Review Elements	**Prescriber**	**Nurse**	**Dispensing Pharmacist**	**Consultant Pharmacist**
Medication prescribed despite documented allergy or prior ADR	X	X	X	X
Excessive dose	X	X	X	X
Inadequate dose	X	X	X	X
Adverse reactions to medication	X	X		
Ineffective drug therapy	X	X		
Drug interactions	X	X	X	X
Duplicate therapy	X	X	X	X
Wrong resident	X	X		
Wrong drug	X	X		
Wrong dose	X	X	X	X
Wrong route	X	X		
Wrong time	X	X	X	X
Wrong frequency	X	X	X	X
Wrong duration	X	X	X	X
Dose, frequency, route, duration not consistent with resident's condition	X	X		
Dose, frequency, route, duration not consistent with manufacturer's instructions	X	X	X	X
Dose, frequency, route, duration not consistent with applicable standards of practice	X	X	X	X
Use of a medication without evidence of adequate indication for use	X	X		
Presence of a medical condition that may warrant medication therapy	X	X		
Omissions	X	X		
Nonadherence	X	X		

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ONGOING DRUG REGIMEN REVIEW (DRR): IMPACT Act

PART III: Ongoing Review

In addition to the Admission DRR, the IMPACT Act requires "Ongoing Drug Regimen Reviews" that may be performed by any clinician, and should continue throughout a Medicare A resident's stay to achieve the best possible care. The traditional Consultant Pharmacist's monthly drug regimen reviews as required by §483.45(c) will identify "clinically significant medication issues," but are not the only source of identifying medication issues. Any health care provider may identify a "clinically significant medication issue"; the facility action and response timeframe are identical regardless of the source of identification.

Clinically Significant Medication Issues*

- *Medication allergy*
- *Excessive/ Inadequate Dose*
- *ADRs*
- *Duplicate Therapy*
- *Drug Interactions*
- *Wrong Resident*
- *Wrong Drug/Dose*
- *Wrong Route*
- *Wrong Time/Frequency*
- *Wrong Duration*
- *No indication for use*
- *Untreated indication*
- *Medication omissions*
- *Non-Adherence*
- *Inconsistent use with:*
  - *Resident condition*
  - *Manufacturer instructions*
  - *Standard of practice*

**list is not comprehensive*

Who Can Identify These Issues?

Healthcare providers may identify a clinically significant medication issue at any time. This includes but is not limited to:

- *Dispensing Pharmacist*
- *Consultant Pharmacist*
- *Nurse*
- *Nurse Practitioner/PA*
- *Prescriber*
- *GNA/CNA*
- *Psychiatrist*
- *Consultant*
- *Dietitian*
- *Physical Therapist*
- *Dentist*

(Clinically significant means effects, results, or consequences that materially affect or are likely to affect an individual's mental, physical, or Psychosocial well–being.)

Timeframe for Response

- Every time a potential or actual clinically significant medication issue is identified throughout the resident stay, it must be:
  - Communicated to a physician
  - The physician-prescribed/ recommended actions must be completed by the clinician in a time frame to maximize risk reduction for medication errors and resident harm
- Completed no later than by midnight of the next calendar day

Remedi SeniorCare – Tools and Actions

MyRemedi® Order Clarification Dashboard

- For new orders, any unresolved pharmacy medication clarifications will be visible on your MyRemedi Clarification Dashboard
- Users may subscribe to Clarification MedAlerts for real-time notifications of outstanding issues:
  - *Nurses*
  - *DON*
  - *Nurse Managers*
  - *Medical Directors*
  - *Administrators/Corporate*

Consultant Pharmacist Reviews

- Consultant Pharmacists will continue to review for Clinically Significant Medication Issues
- Consultant DRR Reports will be provided in real-time at the facility
  - Allows facility as much time as possible to notify the prescriber and comply with the IMPACT Act requirements
  - Facility can triage Pharmacist recommendations according to designated timeline in facility policy
  - If desired, Consultants can perform a remote review within several days after admission to support the overall process

Pharmacy Policies and Procedures

- Remedi Polices indicate what Dispensing Pharmacists review for each new medication order:
  - 3.1.2: Clarification of Orders
  - 3.1.3: Drug Interactions
- Remedi Policies updated for same day availability of Consultant Pharmacist's reviews:
  - 8.2: Medication Regimen Review
  - 8.2.1: Interim Medication Regimen Review