Medication Therapy Management: 10 Years of Experience in a Large Integrated Health Care System

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Abstract

Objectives: To present the clinical, economic, and humanistic outcomes of 10 years of delivering MTM services to patients in a health care delivery system.

Design: Retrospective data analysis from MTM services delivered face-to-face.

Setting: Fairview Health Services, a large integrated health care system in Minnesota, with 48 primary care clinics, implemented a standardized pharmaceutical care service in 1998.

Patients: Data from MTM services provided to 9,068 patients and documented in an electronic therapeutic record (The Assurance System™, Medication Management Systems, Inc.) were retrospectively analyzed over the 10-year period from September 1998 to September 2008.

Intervention: Comprehensive MTM was delivered face to face with an assessment, care plan and follow-up evaluation completed for each patient and the documented data were retrospectively analyzed.

Main Outcome Measures: Drug therapy problems identified and addressed, change in clinical status, and pharmacist-estimated cost savings as well as patient satisfaction results.

Results: There were 33,706 documented encounters (mean 3.7 per patient). 38,631 drug therapy problems were identified and addressed. The most frequent were a need for additional drug therapy (n=10,870, 28.1%) and sub-therapeutic dosage (n=10,100, 26.1%). Of the 12,851 medical conditions in 4,849 patients who were not at goal when they enrolled, 7,068 conditions (55.0%) improved, 2,956 (23.0%) were unchanged, and 2,827(22.0%) worsened. Pharmacist-estimated cost savings to the health system over the 10-year period were $2,913,850($86 per encounter) and the total cost of MTM was $2,258,302($67 per encounter), for an estimated ROI of $1.29 per $1 in MTM administrative costs. 95.3% of respondents agreed or strongly agreed that their overall health and well-being had improved because of MTM.

Conclusion: The MTM program in a large integrated health care system was associated with improved clinical outcomes and cost savings. Patient satisfaction with the program was high.

Keywords: Medication therapy management, pharmaceutical care, economic outcomes,

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