

North Carolina Medicaid — FOCUSED RISK MANAGEMENT PROGRAM (FORM) Instructions

The recipient's pharmacist and primary care physician must review the recipient's medication profile every three months to ensure clinically appropriate and cost-effective use of drug therapy and to optimize patient specific therapeutic outcomes. NC DMA has created FORM Review Templates (2 pages) to assist in the documentation of this process.

Step 1: Complete FORM Patient Medication Profile Review (page 1)

- Reviewing Pharmacy
- Fill in all requested recipient and primary care physician (PCP) information and recipient's active drug profile, inclusive of OTC, and non-routine (e.g., PRN) medications.
 - Pharmacy may substitute their pharmacy computer generated medication profile if it contains all of the necessary information, including medication-related diagnosis.
- Sign and date the Patient Medication Profile FORM.

Step 2: Complete FORM Medication Review Communication Form (page 2)

- Reviewing Pharmacist
- Fill in recipient, pharmacy, and PCP demographic information.
- Review recipient's medication profile and document medication-related problems and cost-effective alternatives identified.
- Document recommended plan of action for every medication-related problem and/or cost-effective alternative identified.
- Document any recipient specific education provided.
- Document any additional comments.
- Sign and date the Medication Review Communication FORM.

Step 3: Reviewing Pharmacy — Fax the-FORM review documents, including the Patient Medication Profile FORM and Medication Review Communication FORM, to the recipient's PCP.

Step 4: PCP Review

- Review the FORM Patient Medication Profile and Medication Review Communication.
- Document a response for each medication-related problem and/or cost-effective therapy recommendation.
- Document any additional comments and/or follow-up actions as part of the FORM review.
- Sign and date the Medication Review Communication form, to assure compliance with the frequency of review and agreement on actions undertaken.
- Return the FORM review documents, including the Patient Medication Profile form and Medication Review Communication form, to the reviewing pharmacy.

Step 5: Reviewing Pharmacy

- Review and implement medication therapy management recommendations agreed upon with the PCP.
- Follow up with necessary recipient education and PCP communication.
- Retain copies of the signed documentation and the FORM review documents on file in the pharmacy for five years.
 - If the PCP refuses to sign the FORM review documents; the pharmacy must document this on the form. The name of the PCP who refused to sign and the reason for the refusal must be stated.