

Steps to Success with your Pharmacy Recommendations

Skilled Nursing Facility Impact - CMS State Operations Manual mandates at least monthly Medication Regimen Reviews (MRRs) for residents of Medicare- and Medicaid-certified SNFs [See F756].

To ensure optimal patient outcomes, consider these tips for timely resolution of consultant pharmacist recommendations!

CONSULTANT PHARMACIST (CP)

- Contact facility at the beginning of the month to coordinate schedules with attending MD's routine visits
- Provide irregularities/recommendations reports from monthly audits within 48 hours of MRR completion to Attending Physician, Medical Director and Director of Nursing

DIRECTOR OF NURSING (DON)

Print out the following reports after receipt of CP's findings via Email OR via retrieval from ViewMasterRx

- **MD** – given to Physician for review
- **Nursing** – given to nursing supervisors
- **User Defined** – consolidated list of ALL recommendations
 - Checklist by DON/designee to monitor compliance with responses
 - Place in monthly binder & flag outstanding recommendations for follow-up
- **Recommendations Pending Response** – Last month's outstanding recommendations
 - Address these ASAP to avoid potential regulation noncompliance for untimely notification or response to recommendations that place residents at harm

Track and file completed recommendations

- CMS SOM: *"the pharmacists findings are part of residents' medical records and must be maintained within the facility readily available for review" AND "the medical record must document that the physician reviewed irregularities and provided responses to recommendations"*
- **Requirement:** Scan returned recommendations with responses into resident's EMR and/or place hardcopy in designated area of resident's chart
- **Optional:** Place a copy in designated binder organized by date for easy retrieval during surveys

DESIGNATE A POINT PERSON to own pharmacy recommendation management (i.e., DON, Unit Manager, etc.)

- Maintain printed recommendations for safe keeping until distributed to physician
- Facilitate process to accept or decline the recommendations
 - **If accepted:** obtain a new order written & transcribed that day
 - **If declined:** verify that the physician documents appropriate supporting clinical rationale
- Ensure that physician signed and dated all recommendations

PHYSICIAN RESPONSES

- CMS SOM: *a facility's Policies and Procedures must address the appropriate time frames for each step of the MRR*
- NO explicit time frame is promulgated for physician response time
- PharMerica policy
 - Standard monthly recommendations: response within 30 days
 - Urgent clinically significant recommendations: direct care nurse notified for immediate action; if prescriber intervention is required, resolve by midnight the next calendar day
- If NOT accepting a recommendation: supply specific documentation of supporting clinical rationale
- Sign & date the recommendation/document in progress note even if RNP/PA provides initial response

To avoid survey action: choose your champion, track your responses & know what is outstanding! DON'T WAIT!

Strive for 30 day response time to standard monthly recommendations

Act on urgent recommendations by midnight the next calendar day