

# Medication Management Reviews

## DMMR and RMMR Information for GPs

### Domiciliary Medication Management Review (DMMR) – MBS Item 900

A Domiciliary Medication Management Review (DMMR), also known as a Home Medicines Review (HMR), is a collaborative medication review for eligible patients living in the community.

It is intended to maximise a patient's benefit from their medication regimen and prevent medication-related problems through a team approach, involving the patient, their general practitioner (GP) and preferred community pharmacy or an accredited pharmacist.

#### The role of the GP in the DMMR

To provide a DMMR service, the GP must, with the patient's consent:

- assess the patient is subject to a chronic medical condition and/or complex medication regimen but their therapeutic goals are not being met
- following that assessment, refer the patient to a community pharmacy or an accredited pharmacist for a DMMR and provide the relevant clinical information required for the review
- discuss with the reviewing pharmacist the result of that review including suggested medication management strategies
- develop a written medication management plan following discussion with the patient
- provide the written medication management plan to a community pharmacy chosen by the patient.

#### Patient eligibility for a DMMR

DMMRs are targeted at patients living in the community who:

- currently take five or more regular medications
- take more than 12 doses of medication per day
- have had significant changes to their medication treatment regimen in the last three months
- take medication with a narrow therapeutic index or medications requiring therapeutic monitoring
- are experiencing symptoms suggestive of an adverse drug reaction
- are displaying sub-optimal response to treatment with medicines
- are suspected of non-compliance or inability to manage medication related therapeutic devices

- have difficulty managing their own medicines because of literacy or language difficulties, dexterity problems or impaired sight, confusion/dementia or other cognitive difficulties
- attend a number of different doctors, both general practitioners and specialists
- have been recently discharged from a facility or hospital (in the last four weeks).

When referring a patient for a DMMR, the GP should note that the pharmacist portion will only be funded through the Community Pharmacy Agreement program for patients who are:

- a Medicare and/or Department of Veterans' Affairs (DVA) cardholder or a person who is eligible for a Medicare card
- subject to a chronic condition and/or complex medication regimen
- failing to respond to treatment in the expected manner.

If the patient does not meet the above criteria, the GP can still issue a referral, however the remainder of the service will be on a user-pays basis as determined by the accredited pharmacist.

#### Claiming MBS Item 900

A DMMR includes all DMMR-related services provided by the GP from the time the patient is identified as potentially needing a medication management review to the preparation of a draft medication management plan, and discussion and agreement with the patient.

MBS Item 900 is not claimable until all of the above components have been completed, after the second patient consultation. Benefits are payable only once in each 12 month period, except where there has been a significant change in the patient's condition or medication regimen requiring a new DMMR.

#### Further information about a DMMR

To find out more about a DMMR, refer to:

- [MBS Online MBS Item 900](#)
- [Clinician Assist Medication Management Review](#)
- [RACGP aged care clinical guide \(Silver Book\)](#)
- [PPA Home Medicines Review](#)

## Residential Medication Management Review (RMMR) – MBS Item 903

A Residential Medication Management Review (RMMR) is a collaborative service available to eligible permanent residents of a residential aged care facility (RACF) with the intended purpose of identifying, resolving and preventing medication-related problems.

### The role of the GP in an RMMR

When conducting an RMMR, the GP must:

- discuss the proposed review with the resident and seek the resident's consent to the review
- collaborate with the reviewing pharmacist about the pharmacist's involvement in the review
- provide input from the resident's most recent comprehensive medical assessment or, if such an assessment has not been undertaken, provide relevant clinical information for the review and for the resident's records
- if recommended changes to the resident's medication management arise out of the review, participate in a post-review discussion (either face-to-face or by telephone) with the pharmacist to discuss the outcomes of the review including:
  - the findings
  - medication management strategies
  - means to ensure that the strategies are implemented and reviewed, including any issues for implementation and follow-up
  - developing or revising the resident's medication management plan after discussion with the reviewing pharmacist
  - finalising the plan after discussion with the resident.

The GP's involvement in an RMMR also includes:

- offering a copy of the medication management plan to the resident (or the resident's carer or representative if appropriate)
- providing copies of the plan for the resident's records and for the nursing staff of the residential aged care facility
- discussing the plan with nursing staff if necessary.

A post-review discussion is not required if:

- there are no recommended changes to the resident's medication management arising out of the review
- any changes are minor in nature and do not require immediate discussion

- the pharmacist and GP agree that issues arising out of the review should be considered in a case conference.

An RMMR comprises all activities to be undertaken by the GP from the time the resident is identified as potentially needing a medication management review up to the development of a written medication management plan for the resident.

### Patient eligibility for an RMMR

RMMRs are available to:

- new residents on admission into an RACF
- existing residents on an as-required basis, where in the opinion of the resident's GP it is required because of a significant change in medical condition or medication regimen.

RMMRs are not available to patients receiving respite care in an RACF. Domiciliary Medication Management Reviews (DMMRs) are available to these patients if they are living in the community.

### Claiming MBS Item 903

Benefits for an RMMR service under MBS Item 903 are payable when all the activities of an RMMR have been completed.

A maximum of one RMMR rebate is payable for each resident in any 12 month period, except where there has been a significant change in the resident's medical condition or medication regimen requiring a new RMMR.

### Further information about an RMMR

To find out more about an RMMR, refer to:

- [MBS Online MBS Item 903](#)
- [Clinician Assist Medication Management Review](#)
- [RACGP aged care clinical guide \(Silver Book\)](#)
- [PPA Residential Medication Management Review and Quality Use of Medicines](#)