

 Saskatchewan Ministry of Health Drug Plan and Extended Benefits Branch	Section <i>Pharmacy Professional Services</i>	Reference DP-PPS-17
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SASKATCHEWAN MEDICATION ASSESSMENT PROGRAM (SMAP) POLICY and PROCEDURES		

POLICY

- The Drug Plan and Extended Benefits Branch (DPEBB) pays pharmacies under the Saskatchewan Medication Assessment Program (SMAP) as follows:
 1. One (1) annual medication assessment fee (AMAF) per eligible patient per 365 days for the provision of a medication assessment;
 2. Up to two (2) follow-up patient assessment fees (FPAF) per eligible patient per 365 days for the provision of follow up assessments; and
 3. Compliance packaging fees (CPF) for the provision of compliance packaging.
- The AMAF, FPAF, and CPF amounts are listed in Schedule B of the current Pharmacy Proprietor Agreement in effect on the date the medication assessment, the follow up assessments, and compliance packaging are provided. DPEBB pays 100% of the AMAF, FPAF, and CPF for eligible patients.
- No claims shall be submitted for prescriptive authority services or PACT Bronze/Bronze Plus that result from the provision of medication assessment or follow up assessment services under SMAP.
- It is the responsibility of the pharmacist to determine when an eligible patient last received a medication assessment and follow-up assessments under SMAP. Only one AMAF and up to two FPAF are payable per eligible patient per 365 days under SMAP.
- If a patient meets the eligibility criteria for medication assessment and compliance packaging services under SMAP and another DPEBB program providing any of the same services, **payment for services will only be made under one program**. Pharmacist selection of the best applicable program shall be based on the clinical needs of the patient.
- **No incentives shall be provided** by the Proprietor or an agent on behalf of the Proprietor to any other person in relation to the provision of AMAF, FPAF and CPF.
"Incentives" means any money, gifts, donations to a charity, rebates, refunds, customer loyalty programs, points, coupons, discounts, goods, dividends, and/or rewards which can be redeemed for a gift or other benefit.

PURPOSE

- To critically examine patient medications with the objective to ensure safe and appropriate drug therapy for eligible patients.

LEGISLATIVE AUTHORITY

- *The Pharmacy and Pharmacy Disciplines Act*
- *The Prescription Drugs Act (Saskatchewan)*
- *The Health Administration Act*

DESCRIPTION

- The SMAP involves a pharmacist providing a medication assessment, follow up assessments, and, if deemed appropriate, compliance packaging to an eligible patient. It is strongly recommended to provide these services in-person.
- A pharmacist can only provide follow-up assessments and compliance packaging to an eligible patient after the completion of an annual medication assessment under SMAP. An annual medication assessment is required for the continuation of compliance packaging beyond each 365-day period.
- Annual medication assessment must be fully documented using the required SMAP forms or alternate forms approved for use by DPEBB. Follow up assessments may be documented in the pharmacy management system without the use of the required SMAP forms and must be retrievable upon request.

DEFINITIONS

Caregiver

- A person who provides care to the patient on a daily basis.

Chronic Medication

- Prescription or non-prescription medication that a patient has been or will be using on a regular basis for a minimum of three (3) months to treat a medical condition that is likely to last six (6) months or longer.

Community Living Service Delivery (CLSD) Group Homes/Approved Private Service Homes

- A facility that provides accommodation, supervision, personal care, and individualized programming to individuals with intellectual disabilities.
- A facility that is approved by Community Living Service Delivery Branch, Saskatchewan Ministry of Social Services.
- A list of CLSD Group Homes/Approved Private Service Homes can be found on DPEBB secure website.

Compliance Packaging

- Consists of devices or packaging systems where solid oral medications (tablets or capsules) can be organized according to the time of administration.

Medication Assessment

- A standardized approach to assess an eligible patient's ability to administer their medications, the clinical appropriateness of the medications and dosing regimens, potential interactions, adverse drug reactions, allergies, and contraindications.
 - Includes pharmacist communication with the eligible patient's primary care provider to resolve discrepancies that exist, and potential or actual drug therapy problems identified.

Personal Care Home

- Facility that provides accommodation, meals, and assistance or supervision with activities of daily living (i.e., personal care).
- Facility must be licensed by the Continuing Care Branch, Saskatchewan Ministry of Health.
- A list of licensed personal care homes can be found using the following link:
<http://personalcarehomes.saskatchewan.ca>

Special-care Home

- A Special-care Home, formerly referred to as a Long-term Care Facility, is defined as a designated facility that provides personal or nursing care to individuals who reside in the home on a temporary or permanent basis. The home may provide any of the following types of care: convalescent care; rehabilitation services; palliative care; respite care; and day programming. Special-care homes are operated by the Saskatchewan Health Authority or by a provider that has a contract with the Saskatchewan Health Authority.

ELIGIBILITY

- Eligibility criteria a patient must meet to receive an annual **medication assessment**:
 - Patient is a Saskatchewan resident with a valid Health Services Number;
 - Patient age is 60 years of age or older;
 - Patient is taking:
 - three (3) or more chronic Schedule I medications appearing in the Pharmaceutical Information Program (PIP); or
 - an anticoagulant medication listed on the Saskatchewan Formulary (<http://formulary.drugplan.ehealthsask.ca>); or
 - A medication listed on the Beers Criteria (2023) or STOPP Criteria (version 3, 2023)
 - Patient and/or caregiver consent is documented on the SMAP forms agreeing to receive the medication assessment service and to share information gathered as part of the service with health care providers with the "need to know"; and
 - Patient is living in their own residence, in a licensed personal care home, or in a CLSD approved private service home or group home (as defined within this Policy).
- Eligibility criteria a patient must meet to receive **follow-up assessments**:
Patient has received an annual medication assessment under SMAP and meets at least one of the following:
 - There is a change made to the patient's existing medication profile and requires:
 - Communication of this change to the patient, caregiver and/or health professionals to ensure understanding of the change; or

- A discharge consultation with a patient within one week of discharge from a hospital or convalescent care facility where the pharmacist identifies a change or discrepancy in medications that needs to be communicated and understood by the patient, caregiver and/or health care professionals
 - Profile reconciliation by a receiving pharmacy when a patient transfers care to them
 - there is evidence of patient non-adherence or potential non-adherence due to a complex medication regimen;
 - follow up with the patient is required on the resolution of potential or actual therapy problems identified during the annual medication assessment or first follow-up assessment.
- Eligibility criteria a patient must meet to receive **compliance packaging**:
 - Need for compliance packaging is identified annually during a medication assessment or follow-up assessment completed under SMAP;
 - patient and/or caregiver consent is documented for receipt of compliance packaging; **and**
 - patient is living in their own residence; **or**
 - patient is living in a licensed personal care home with twenty (20) beds or less, or in a CLSD approved private service home or group home (as defined within this Policy).
- A patient's eligibility under SMAP for medication and follow up assessments and compliance packaging **ends** when a patient enters a Special-care Home.

PROCEDURES

The Pharmacist will:

- Ensure the patient meets all eligibility criteria for medication assessment, follow-up assessment, and compliance packaging.
- Review the patient's eHR Viewer, including the PIP profile.
- Conduct the medication and follow-up assessments with the patient and/or caregiver.
- Fully complete all sections of the following required SMAP forms for each medication assessment and follow up assessment:
 - Declaration of Consent
 - Comprehensive Patient Interview
 - SMAP Care Plan
 - Personal Medication Record

Follow up assessments will be documented either within the original SMAP documentation or pharmacy management system.
- Review with the patient and/or caregiver the medications and pertinent information regarding those medications.
- Record all medical conditions or issues, associated medications, and drug therapy problems identified through the medication assessment.
- Manage or attempt to resolve all drug therapy problems identified through the medication assessment, communicating with the patient's primary care provider as necessary.
- Simplify the patient's medication therapy where applicable, including suggestions for deprescribing when appropriate and simplifying medication administration regimens.
- Educate the patient and/or caregiver on any changes, care plan, or monitoring activities after an assessment for both initial and follow-up assessments.

- Provide the patient and/or caregiver with a complete and current medication list (prescription and non-prescription medications) using the Personal Medication Record or other approved form.
- Upon request, provide current SMAP documentation to receiving pharmacy in the event a patient transfers care to another pharmacy.
- If the patient meets the compliance packaging eligibility requirements:
 - Ensure compliance packaging meet the standards as set out in the Saskatchewan College of Pharmacy Professionals (SCPP), Reference Manual – [Compliance Packaging - Customized Patient Medication Packaging Guidelines](#).
 - Package all prescription and non-prescription medications and over-the-counter products (as deemed appropriate) in a 28-day or 35-day supply. Drugs listed on the 2-month and 100-day lists can be dispensed in a 28-day or 35-day quantity.

The Pharmacy will:

- Submit the SMAP claim for capture and adjudication electronically via the DPEBB on-line claim system on the date the medication or follow-up assessment service is provided using the appropriate pseudoDIN (paper claims will not be accepted). (See Appendix 1)
 - The AMAF must be submitted for adjudication prior to submission of the CPF.
 - The first CPF must be submitted within 30 days of the AMAF in order for the DPEBB claim to be adjudicated electronically.
 - Any CPF claim related to the AMAF can only be submitted for adjudication for 1 year from date of the most recent AMAF claim (i.e. an annual medication assessment must be completed to continue submission of CPF)
- Retain copies of the required SMAP forms, and documented consent for compliance packaging as per SCPP's Reference Manual - [Record Retention and Destruction guidelines](#)
- Provide copies of all SMAP forms, consent for compliance packaging and any relevant documentation upon request as part of DPEBB's review of adherence to the SMAP Policy and Procedure within two (2) business days.

The Drug Plan and Extended Benefits Branch will:

- Provide pharmacies with the SMAP Policy and Procedures.
- Pay pharmacies for the AMAF, FPAF, and CPF upon receipt of the electronic claim.
- Request and review the required SMAP forms, written consent for compliance packaging and relevant documentation to confirm adherence to the SMAP Policy and Procedures.
- Recover the AMAF, FPAF, and CPF if DPEBB determines non-adherence to the SMAP Policy and Procedures.

BILLING PROCEDURE:

ANNUAL ASSESSMENT FEE (AMAF):

- Complete the medication assessment and fully complete the required SMAP forms.
- Submit the AMAF electronically via the DPEBB on-line claim system **on the date** the medication assessment is completed (paper claims will **not** be accepted).*
- DPEBB pays 100% of the AMAF to the pharmacy.
- Please ensure the following fields are:

• PATIENT IDENTIFIER • DISPENSING DATE • RX NUMBER • HEALTH PROVIDER ORGANIZATION ID • HEALTH PROVIDER ID • PHARMACIST ORGANIZATION ID • PHARMACIST ID • DIN • COMPOUNDING FEE (CF) • COMPOUND NAME • QUANTITY (QTY) • DAYS SUPPLY • ACQUISITION COST (AC) • DISPENSING FEE (DF) • MARKUP • TOTAL RX COST • PATIENT PAID • ADJUDICATION FLAG	= nine-digit Health Services Number (HSN) = date of the Medication Assessment (e.g. mmm-dd-yyyy) = enter your sequential RX# = SKCP = Pharmacist ID number (e.g. D1234) = SK = Pharmacist ID number (e.g. D1234) = 00951187 = 0 = blank = 1 = 1 = maximum \$60.00 = \$0.00 = 00 /00 /00 = total fee (maximum \$60.00) = \$0.00 = Y
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- Please Note: DPEBB will not accept paper claims for the AMAF
- If you are unable to submit the record of AMAF electronically through your Practice Management System, please use the secure DPEBB web page by logging on to <https://www.drugplan.health.gov.sk.ca>
- If you are not sure how to install the WEB certificate, please contact your software vendor.

FOLLOW-UP ASSESSMENT FEE (FPAF):

- Complete the follow-up assessment and fully complete the required SMAP forms or documentation in the pharmacy management system.
- Submit the FPAF electronically via the DPEBB on-line claim system on the date the follow-up assessment is completed (paper claims will **not** be accepted).*
- DPEBB pays 100% of the FPAF to the pharmacy.
- Please ensure the following fields are:
 - **PATIENT IDENTIFIER** = nine-digit Health Services Number (HSN)
 - **DISPENSING DATE** = date of the Follow-up Assessment (e.g. mmm-dd-yyyy)
 - **RX NUMBER** = enter your sequential RX#
 - **HEALTH PROVIDER ORGANIZATION ID** = SKCP
 - **HEALTH PROVIDER ID** = Pharmacist ID number (e.g. D1234)
 - **PHARMACIST ORGANIZATION ID** = SK
 - **PHARMACIST ID** = Pharmacist ID number (e.g. D1234)
 - **DIN** = 00951188
 - **COMPOUNDING FEE (CF)** = 0
 - **COMPOUND NAME** = blank
 - **QUANTITY (QTY)** = 1
 - **DAYS SUPPLY** = 1
 - **ACQUISITION COST (AC)** = maximum \$20.00
 - **DISPENSING FEE (DF)** = \$0.00
 - **MARKUP** = 00 /00 /00
 - **TOTAL RX COST** = total fee (maximum \$20.00)
 - **PATIENT PAID** = \$0.00
 - **ADJUDICATION FLAG** = Y

- Please Note: DPEBB will not accept paper claims for the AMAF
- If you are unable to submit the record of AMAF electronically through your Practice Management System, please use the secure DPEBB web page by logging on to <https://www.drugplan.health.gov.sk.ca>
- If you are not sure how to install the WEB certificate, please contact your software vendor.

COMPLIANCE PACKAGING FEE (CPF):

- Compliance packaging must meet the standards as set out in the SCPP's Reference Manual – *Compliance Packaging - Customized Patient Medication Packaging Guidelines*.
- Submit the CPF electronically via the DPEBB on-line claim system on the date of service after the date of the annual assessment is completed and the AMAF is submitted* (paper claims will **not** be accepted).
- CPF will only be accepted for 365 days from the AMAF (ie. the annual medication assessment must be done yearly).
- DPEBB pays 100% of the CPF to the pharmacy.
- Please ensure the following fields are:

• PATIENT IDENTIFIER	= nine-digit Health Services Number (HSN)
• DISPENSING DATE	= date of the compliance packaging service (e.g. mmm-dd-yyyy)
• RX NUMBER	= enter your sequential RX#
• HEALTH PROVIDER ORGANIZATION ID	= SKCP
• HEALTH PROVIDER ID	= Pharmacist ID number (e.g. D1234)
• PHARMACIST ORGANIZATION ID	= SK
• PHARMACIST ID	= Pharmacist ID number (e.g. D1234)
• DIN	= 00951189
• COMPOUNDING FEE (CF)	= 0
• COMPOUND NAME	= blank
• QUANTITY (QTY)	= 4 or 5
• DAYS SUPPLY	= 28 or 35
• ACQUISITION COST (AC)	= maximum of \$6.25 for each 7-day supply
• DISPENSING FEE (DF)	= \$0.00
• MARKUP	= 00 /00 /00
• TOTAL RX COST	= total fee
• PATIENT PAID	= \$0.00
• ADJUDICATION FLAG	= Y

*To ensure electronic adjudication of the CPF, the initial CPF must be submitted within 30 days of the AMAF. Contact the Drug Plan if the initial CPF is submitted outside of the 30 day window from the AMAF.

- Please Note: DPEBB will not accept paper claims for the AMAF
- If you are unable to submit the record of AMAF electronically through your Practice Management System, please use the secure DPEBB web page by logging on to <https://www.drugplan.health.gov.sk.ca>
- If you are not sure how to install the WEB certificate, please contact your software vendor.

Appendix I:
Saskatchewan Medication Assessment Program (SMAP) Billing Codes and Threshold Limitations

Billing Code (pseduoDIN)	Service Fee	Billing Threshold/Limitation
00951187	Annual Medication Assessment Fee (AMAF)	Maximum one (1) claim in a 365 -day period per person
00951188	Follow up Patient Assessment Fee (FPAF)	Maximum two (2) claims in a 365-day period per person
00951189	Compliance Packaging Fee (CPF)	Maximum 25 weekly claims in a 140-day period per person.