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Community CCRx News

■ MTM Cases Expiring Wednesday, June 15

Current CCRx MTM 2011 patient care cases will expire soon. Visit www.Mirixa.com today to log in, and complete your available patient cases. There are many cases listed as "in progress". Please ensure all cases are fully documented, authorized, and submitted by the assigned deadline.

All cases not completed by the assigned deadline will be assigned to another provider (potentially another local independent or chain pharmacy) to complete.

MTM Payment Structure: \$100 Face-to-Face Patient Care Service

Payment for the CCRx MTM 2011 program now distinguishes between patient care services delivered **face-to-face** and by phone.

Type of Service	Pharmacy Fee (Geographically Adjusted)
Face-to-Face MTM Session	\$100 per Case
Phone MTM Session	\$60 per Case
Declined MTM	\$5 per Case

MirixaPro LIVE Training Sessions Available

Mirixa offers a variety of training options, including live training sessions, recorded video tutorials, and hard copy educational materials. Register for a live training session by visiting www.Mirixa.com. Log in utilizing your unique login credentials, and then access training through Training and Support (top right hand side of the MirixaPro home page). Always check Training and Support on the MirixaPro platform for the most current live training dates/times.

Need assistance? Log in to your MirixaPro account, and click on 'Contact Support,' or call 1-866-218-6649, 8:30 a.m. - 5:30 p.m. ET, Monday-Friday.

■ Mirixa Medication Therapy Management (MTM) Quality Reminder

You may be familiar with the old adage: "If you didn't document it, then you didn't do it." We often relate this adage with important dispensing documentation elements. However, this adage holds equally true for MTM service documentation.

Pharmacists must thoroughly document the MTM service, to ensure consistency with the service provided and program requirements. Quality documentation, aligned with the quality service provided, helps improve patient outcomes and demonstrates the pharmacist's value. Remember, an MTM service to Medicare Part D plan members is a Medicare service that is subject to **audit and anti-fraud review**.

Notes:

- Enter the Purpose and Sig/Directions for Use for each medication on the patient's medication list. If you are unable to determine a medication's purpose, mark the field by selecting "Other" or "Unknown". Do not leave the fields blank.
- Document the patient's Medication Action Plan (MAP) on the "Documentation" tab using language that is directed to the patient and easy to understand. Do not talk about the patient. Rather, the MAP should include specific steps or follow-up items the patient can act on to guide self-management and achieve specific health goals.
- Communicate clinically appropriate recommendations to patient's physicians and document accordingly (resolution of safety alerts, potential cost savings, and other medication-related problems you may have identified, such as an adherence concern, adverse drug event, or an omission in care). Don't rely on the patient to communicate such findings with the physician. Become an active member of the patient's health care team.

Pharmacist Resources

My CCRx

- [Check My Scorecard](#)
- [Check Status of PA](#)

Formulary Tools

- [Formulary \(Printable\)](#)
- [Formulary \(Searchable\)](#)
- [Formulary Changes, Addendums](#)
- [PA Forms](#)

Claims Processing

- [Payer Sheet](#)
- [Pharmacy Services Manual](#)
- [2011 Quick Reference Guide](#)
- [Fraud, Waste and Abuse](#)
- [MAC Appeal Form \(NEW!\)](#)

Plan Information

- [Community CCRxSM](#)
- [Order Plan Materials](#)
- [Provider Marketing Guidelines](#)

Patient Care Programs

- [Pharmacy Login \(MirixaProSM\)](#)

Pharmacy Help Desk

1-866-684-5395

1-866-684-5351 (TTY only)

24 hours a day, 7 days a week

www.mhrx.com

experts@mhrx.com

Medicare & Medicaid News

■ CMS Mails Reminder to LIS Beneficiaries

The Centers for Medicare & Medicaid Services (CMS) recently sent its annual notice to individuals enrolled in the prescription drug Low-Income Subsidy (LIS) program, reminding them that they can switch to a lower-cost plan in their area at any time.

LIS, also known as Extra Help, is a federal program that helps eligible individuals with limited income and resources pay for drug costs under the Medicare prescription drug benefit. The government sets a benchmark premium amount annually, and LIS will pay for enrollees' premiums up to that amount. Some people with LIS choose to enroll in plans with premiums over the benchmark amount and, as a result, pay the difference between the plan premium and the benchmark premium. Individuals with LIS are not limited to changing plans during the Fall Open Enrollment Period and therefore always have the option to change to a lower-cost plan.

The notice was sent to nearly 950,000 individuals across the country who have LIS, and who currently pay premiums. The notice was tailored by region to include the names and contact information for plans that would require \$0 premiums.

Read the [CMS notice](#).

For pharmacist use only.

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