April 26, 2016

Gregory Woods, Director
Division of Health Plan Innovation
Center for Medicare & Medicaid Innovation
Department of Health & Human Services
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850

**Re: Request for Public Comment on the Proposed Enhanced MTM Model Encounter Data Structure and Pilot Monitoring Measures**

Dear Director Woods:

The Academy of Managed Care Pharmacy (AMCP) thanks the Centers for Medicare and Medicaid Services (CMS) Center for Medicare and Medicaid Innovation (CMMI) for the opportunity to provide comments in response to the memorandum titled "*Request for Public Comment on the Proposed Enhanced MTM Model Encounter Data Structure and Pilot Monitoring Measures*" released on February 26, 2016. AMCP commends CMS and CMMI for seeking feedback on the draft specifications for the enhanced medication therapy management (MTM) model encounter data elements prior to implementation. AMCP is pleased to see a commitment to use SNOMED CT codes to exchange information associated with the documentation of enhanced MTM activities as the consistent use of structured, universal SNOMED CT codes is critical to the expansion of MTM service delivery and documentation. However, AMCP is concerned about the reporting timeline proposed and strongly urges CMS and CMMI to delay the reporting requirements until Q4 2017. The delay would allow sufficient time for participating Part D sponsors to implement a consistent, standardized, and industry-approved consensus framework for mapping SNOMED CT codes to describe and report enhanced MTM activities.

AMCP is a professional association of pharmacists and other practitioners who serve society by the application of sound medication management principles and strategies to improve health care for all. The Academy's 8,000 members develop and provide a diversified range of clinical, educational, medication and business management services and strategies on behalf of the more than 200 million Americans covered by a managed care pharmacy benefit.

AMCP and its MTM Advisory Group, that includes AMCP member and non-member participation and representatives from companies that are expected to participate in the expanded MTM demonstration, are gravely concerned that the reporting timeline proposed by CMMI, even with the initial four month grace period, is insufficient for participating Part D sponsors to establish the necessary reporting systems and processes. Over the past several months, AMCP has worked collaboratively with the Pharmacy Quality Alliance (PQA) to conduct a series of market analysis interviews with industry representatives from Part D sponsors, MTM vendors, technology organizations, electronic health record (EHR) vendors, health plans, health care providers, pharmacies, and others to determine the readiness of industry to begin reporting enhanced MTM activities using SNOMED CT codes. Stakeholders report that barriers to the adoption of SNOMED CT codes include a need for guidance regarding how SNOMED CT codes should be mapped, lack of resources and time to map SNOMED CT codes to enhanced MTM activities, and a need for education about the importance of using SNOMED CT codes for enhanced MTM activities. Overwhelmingly, the results indicate that stakeholders are not ready today, nor will readiness occur in the first half of 2017 unless clear guidance and consensus specifications of how to consistently map SNOMED CT codes to enhanced MTM activities are made available.

To aid with the barriers identified by industry such as needing guidance on how SNOMED CT codes should be mapped, and as acknowledged by CMS in the "*Announcement of Calendar Year (CY) 2017 Medicare Advantage (MA) Capitation Rates and Medicare Advantage and Part D Payment Policies and Final Call Letter*," AMCP is working collaboratively with stakeholders in this area, including PQA and the Pharmacy Health Information Technology Collaborative (HIT Collaborative), to develop a consensus-based standardized framework to allow for the shift towards outcomes-based measurements in Medicare Part D. AMCP will begin to work with PQA, the HIT Collaborative, and key industry stakeholders (such as health plans, PDPs, MTM vendors, pharmacies, and other health care providers) to map SNOMED CT codes to enhanced MTM activities in alignment with the standardized set of seventeen unique data elements and three monitoring measures outlined by CMMI in the draft specification plan.

AMCP has conferred with many of the Part D sponsors and MTM vendors that expect to participate in the enhanced MTM model test and general agreement exists on the use of standardized coding for purposes of exchanging clinical information. Reporting using a standardized framework will promote interoperability and provide efficiencies in analyzing the data to determine which innovative approaches provide the greatest benefit to Part D beneficiaries. These stakeholders trust AMCP, PQA, and the HIT Collaborative to lead the mapping initiative and develop industry-wide recommendations for presentation to CMMI and eventual implementation.

AMCP anticipates publishing the standardized mapping framework in late summer 2016 for stakeholder comment and feedback and providing CMMI with a final version of the framework in early fall 2016. AMCP further anticipates that PQA will subsequently lead the measure development process using the standardized mapping framework as a basis for their work, although minor adjustments to mapping may be recommended by PQA in the future to best align with measure development. Once the mapping framework

is accepted by CMMI for implementation, the participating Part D sponsors and MTM vendors will need at least six months to complete their programming and testing before initiating reporting. The participating Part D sponsors and MTM vendors recognize that measures will be developed by PQA and that some changes to the initial mapping may be required as a result, but participants have expressed a commitment to use the same framework to report data in a meaningful manner from day one.

Per the draft specification plan, CMMI expects participating Part D sponsors to submit data files on a quarterly basis due one month after the close of every quarter. However, CMS is extending this deadline in 2017 and proposes that the Q1 2017 data file will be due four months after the close of the quarter in July 2017. CMMI further elaborates that participating Part D sponsors are not required to collect data using SNOMED CT codes at the initiation of the enhanced MTM model test, but must find a means of mapping data to SNOMED CT codes in advance of data submission.

AMCP believes that CMS should not require reporting with deadlines absent detailed specifications on the reporting requirements and formats for participating Part D sponsors. By implementing reporting requirements without a standardized framework, CMS risks incurring additional costs to the health care system if Part D sponsors and MTM vendors build reporting systems based on undefined specifications that are later found to not match CMS's expectations resulting in a need to rebuild the reporting systems. The costs associated with rebuilding reporting systems are likely to be included by Part D sponsors in the prospective payment fees as part of the cost to administer the enhanced MTM program. Therefore, AMCP recommends that CMMI delay reporting requirements until after completion of the mapping work. After the mapping work is completed by the stakeholders, it is vital for CMMI to communicate the agreed-upon specifications, including the framework for mapping SNOMED CT codes to enhanced MTM activities, so that participating Part D sponsors and MTM vendors build their reporting systems accurately from the beginning and avoid additional costs to the health care system.

Given the existing challenges in the timeline, AMCP strongly urges CMMI to revise its reporting timeline to align with the following:
- Q2 2016 – AMCP, PQA, and HIT Collaborative complete consensus-driven mapping of SNOMED CT codes to enhanced MTM activities in conjunction with industry stakeholders.
- Q3 2016 – Standardized SNOMED CT code mapping framework published for stakeholder feedback and comment. AMCP, PQA, and HIT Collaborative to revise framework based upon feedback received, if necessary.
- Q4 2016 – Standardized SNOMED CT code mapping framework provided to CMMI for review, adoption, and communication to participating Part D sponsors.
- Q1 2017 – Q2 2017 – Participating Part D sponsors and MTM vendors to complete system programming and testing using standardized SNOMED CT code mapping framework.
- Q3 2017 – Participating Part D sponsors submit Q1 2017 and Q2 2017 data file four months after the close of Q2 2017 (October 31, 2017).

AMCP appreciates your consideration of the concerns outlined above and looks forward to continuing work on these issues with CMS and CMMI. If you have any questions regarding AMCP's comments or would like further information, please contact me at 703-683-8416 or scantrell@amcp.org.

Sincerely,

Susan A. Cantrell, RPh, CAE
Chief Executive Officer