

IPAC Project

Guidelines for the provision of Home Medicines Reviews

Identification of eligible patients

Identification of patients eligible for a HMR will be undertaken by the practice pharmacist or another member of the ACCHS clinical team. Determination of patient eligibility will follow the HMR Program Rules as specified by the 6CPA. Priority will be given to selection of IPAC Project consented 'regular' patients aged 18 years or over with one or more of the following chronic diseases:

- Cardiovascular Disease
- Diabetes
- Chronic Kidney Disease

HMR process

The practice pharmacist will first consider whether the ACCHS has an existing relationship with an external HMR provider. If so, the practice pharmacist will support this relationship by seeking the HMR referral from the GP at the ACCHS & forwarding this, along with any necessary supporting documentation, to the external HMR provider. The IPAC Project pharmacist will encourage the ACCHS GP to complete a Medication Management Plan following receipt of the HMR report to enable the ACCHS to claim MBS item 900 payment

If there is not an existing external relationship for provision of HMR services, and the IPAC Project pharmacist is accredited to conduct HMRs, the IPAC Project pharmacist may conduct the HMR either within or outside IPAC Project service hours.

HMRs conducted outside IPAC Project service hours

The IPAC Project pharmacist will only claim personal payment under the 6CPA if the HMR has been conducted outside IPAC Project service hours. In this situation the IPAC Project pharmacist will also encourage the ACCHS GP to complete a Medication Management Plan following receipt of the HMR report to enable the ACCHS to claim MBS item 900 payment.

HMRs conducted within IPAC Project service hours

It is important to note that regulatory requirements for GPs when claiming payment for MBS item 900 (DMMR/HMR) differ to those relevant to pharmacists under the 6CPA HMR Program Rules.

Recent clarification of the criteria (see [here](#)) for MBS item 900 payment to GPs has confirmed that, while the patient's home remains the preferred location for a HMR, an accredited pharmacist may conduct a HMR for an Aboriginal or Torres Strait Islander patient at a location other than the patient's home. Benefits for a HMR service under MBS item 900 are payable to GPs 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 HMR.

While a HMR referral remains necessary, this enables opportunistic HMRs to be conducted in the clinic or another location preferred by the patient, & for the referring GP to claim payment for MBS item 900 upon receipt of the formal HMR report & subsequent completion of the Medication Management Plan.

In such circumstances the accredited IPAC Project pharmacist must forego personal payment for the HMR under the 6CPA, for the following reasons;

- The pharmacist will be working within IPAC Project service hours
- The 6CPA HMR Program location rules relevant to pharmacists have not been met (ie. no prior written approval granted from 6CPA to conduct the HMR at an alternate location)

For reasons of personal and cultural safety the IPAC Project pharmacist must be accompanied by a member of the ACCHS team (eg. an Aboriginal Health Worker) when conducting Home Medicines Review at locations other than the clinic.