#### PCNE medication review symposium 2011

# New medication review developments in Germany (ABDA / KBV – Concept)

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## Association of Statutory Health Insurance Physicians (ASHIP)

- Representing almost 150,000 statutory health insurance physicians and psychotherapists
- Physicians wanting to treat members of health insurance funds must become members of the ASHIP of their state
- KBV National Association of Statutory Health Insurance Physicians, major functions:
  - > To represent the political interests of all physicians in Germany working in private practice before the federal government, especially in legislative matters
  - Negotiating of contracts with national unions of health insurance funds and other parties of the health care sector





#### Development of a medication management concept

Aim: development of a nationwide service to be provided by a physician and a pharmacist

- Interdisciplinary, team-based approach, including effective communication
- Indication independency instead of indication dependency
- Legally regulated access to this service instead of contracts with specific health insurance companies
- Adequate and equal remuneration for physicians and pharmacists
- Standardized, quality assured















Joint outline



Berlin, April 2011







#### Joint concept of ABDA and KBV

#### MEDICATION MANAGEMENT

Compilation and assessment of all medicines, prevention of DRP and improvement of adherence

#### MEDICATION CATALOGUE

Specifies the drug of choice for fundamental indications as well as second-line drugs

#### ACTIVE INGREDIENT PRESCRIPTION

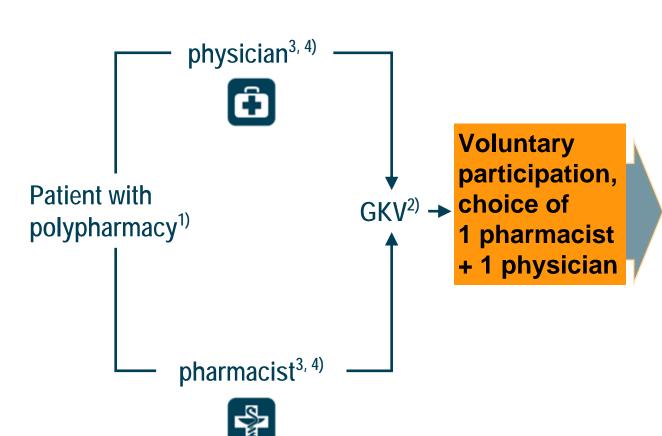
Prescription of active ingredients (INN) instead of specific products/brands







#### Process of medication management (1)



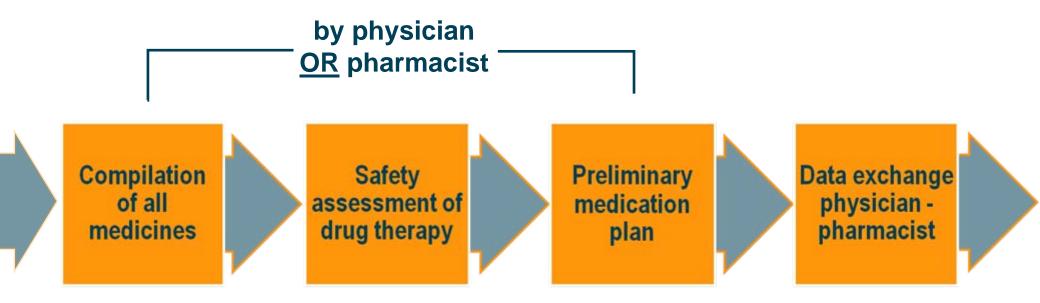
- At least 5 (systemic) longterm medications
- **GKV** voucher medication management or
- Initiation by physician or pharmacist
- Health insurance company to be informed about patient's participation







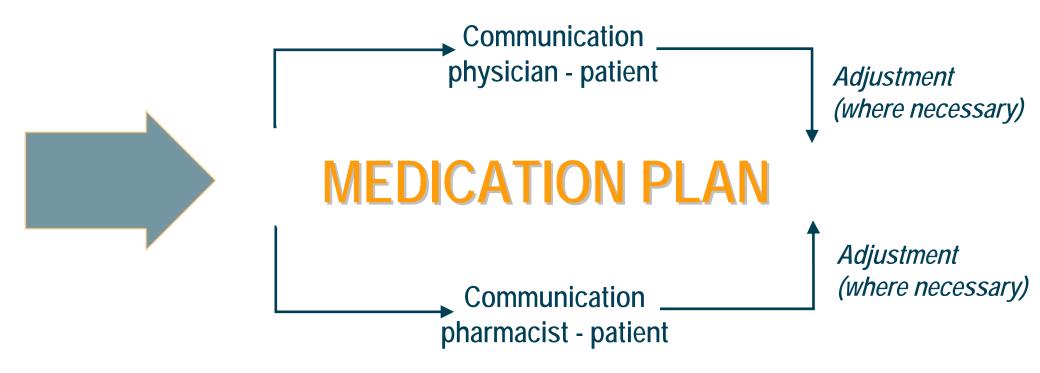
#### Process of medication management (2)







#### Process of medication management (3)



Continuous care, close consultation by changes to medication or new appearance of drug-related problems (DRP).







#### Process of medication management (4)

- 3) Continuous care Adherence: monitoring of
  - New medicine: check for DRP
  - Up-dating of medication plan

2) Compilation and assessment of all medicines

1) Start Patient fits the inclusion criteria Medication management

12 months







#### Current political situation

- Aim: Inclusion of concept in care legislation/law (to be passed late 2011)
- Joint ABDA/KBV press conference on 12 April 2011
- Currently
  - Presentation of the concept to Federal Ministry of Health, policy makers/members of parliament and health insurance funds
  - Public relations work

















### Thank-you!







#### Statutory health insurance – GKV

- Membership in the statutory health insurance (GKV) is compulsory up to a certain level of income in Germany.
- Statutory health insurance is funded by approximately 155 statutory health insurance funds (April 2011).
- Roughly 90 percent of the population in Germany is statutorily insured.
  - All members are entitled to a sufficient, appropriate and economical medical treatment (§ 12 Code of Social Law V).





Rx, (OTC)

Rx, (OTC)

Rx, (OTC)

Rx, OTC

Rx, (OTC)

13

Rx



#### Intervention by pharmacist and physician

(Pseudo-) double medication

(Suspicion of) abuse, misuse

Individual tolerance

Drug/drug interaction

Storage of medicine

Adherence

**Application** 

Intervention	Pharmacist	Physician
Indication	OTC	Rx, (OTC)
Contraindication	OTC	Rx, (OTC)

OTC

OTC

OTC

OTC

Rx, OTC

Rx, OTC

Rx, OTC