

2024 Medication Therapy Management (MTM) Program

If you're in a Medicare drug plan and you have complex health needs, you may be able to participate in a Medication Therapy Management (MTM) program. MTM is a service offered by Aspire Health Plan at no additional cost to you. The MTM program is required by the Centers for Medicare and Medicaid Services (CMS) and is not considered a benefit. This program helps you and your doctor make sure that your medications are working. It also helps us identify and reduce possible medication problems.

To take part in this program, you must meet certain criteria set forth in part by CMS. These criteria are used to identify people who have multiple chronic diseases and are at risk for medication-related problems. If you meet these criteria, we will send you a letter inviting you to participate in the program and information about the program, including how to access the program. Your enrollment in MTM is voluntary and does not affect Medicare coverage for drugs covered under Medicare.

To qualify for Aspire Health Plan's MTM program, you must meet one of the following criteria:

- Be an at-risk beneficiary or
- Meet ALL of the following criteria
 - » Have at least three (3) of the following conditions or diseases: chronic heart failure, diabetes, dyslipidemia, hypertension, asthma, or chronic obstructive pulmonary disease AND
 - » Take at least eight (8) covered Part D medications, AND
 - » Are likely to have medication costs of covered Part D medications greater than \$5,330 per year

To help reduce the risk of possible medication problems, the MTM program offers two types of clinical review of your medications:

- **Targeted medication review:** at least quarterly, we will review all your prescription medications and contact you, your caregiver, your pharmacist, and/or your doctor if we detect a potential problem.
- Comprehensive medication review (CMR): at least once per year, we offer a free discussion and review of all of your medications by a pharmacist or other health professional to help you use your medications safely. This review, or CMR, is provided to you confidentially via telephone. The CMR may also be provided in person or via telehealth at your provider's office, pharmacy, or long-term care facility. If you or your caregiver are not able to participate in the CMR, this review may be completed directly with your provider. These services are provided on behalf of Aspire Health Plan. This review requires about 30 minutes of your time. Following the review, you will get a written summary of this call, which you can take with you when you talk with your doctors. This summary includes:
 - » Recommended to do list (TDL): The list has steps you should take to help you get the best results from your medications.
 - » Personal Medication List (PML): The medication list will help you keep track of your medications and how to use them the right way.

For your convenience, we have included a blank medication form you can print to keep track of your prescriptions and over-the-counter medications. This form can be found on the last page of this document.

If you take many medications for more than one chronic health condition contact your drug plan to see if you're eligible for MTM, or for more information, please contact customer service at (888) 495-3160.

Medication List



Bring your Medication List when you go to the doctor, hospital, or emergency room. And, share it with your family or caregivers.



Note any changes to how you take your medications. Cross out medications when you no longer use them.

Medication	How I take it	Why I use it	Prescriber



Add new medications, over-the-counter drugs, herbals, vitamins, or minerals in the blank rows below.

Medication	How I take it	Why I use it	Prescriber

ı	Allergies:
ı	
ı	
ı	
ı	
ı	
ľ	V Side effects I have had:
	▼ Side effects I have had:
	▼ Side effects I have had:
	▼ Side effects I have had:
	▼ Side effects I have had:
	▼ Side effects I have had:
	▼ Side effects I have had:

Form CMS-10396 (Expires: 02/24) Form Approved OMB No. 0938-1154





My notes and questions:

Form CMS-10396 (Expires: 02/24) Form Approved OMB No. 0938-1154