

Get the Medications Right Institute

*Working to decrease misuse, overuse and underuse of medications and avoid waste.
Advancing comprehensive medication management to ensure appropriate and
personalized use of medications and gene therapies.*



To change the way we manage medications, we must understand both the challenges and the solutions. As a growing coalition of passionate advocates, together we are working to change

“Getting the medications right is the shiniest silver bullet we have to change the quality of health care. A personalized, patient-centered system and a coordinated approach to medications would dramatically improve outcomes, reduce overall costs and improve people’s lives. We’re going down a road where if there’s no outcome, there’s no income. The easiest way to impact outcomes is to get the medications right.”

PAUL GRUNDY, MD, MPH, FACOEM, FACPM,
PRESIDENT, GTMRX INSTITUTE



How we practice

Most clinicians don’t understand the human toll and waste associated with medications that are wrong, skipped or are not used as intended—more than 275,000 lives are lost, and \$528 billion is wasted every year due to our trial-and-error approach to medication use.¹ Providers, medical carriers and employers as health plan sponsors need to understand that there is a solution: comprehensive medication management (CMM). CMM is a person-centered, team-based approach generally focused on patients with multiple chronic conditions, seeing multiple prescribers, on multiple medications. It is care that includes a clinical pharmacist—or other medication expert—working in collaborative practice with the physician. Studies show that CMM significantly lowers overall costs (with ROI ranging from 5:1 to 12:1) while improving patient attainment of clinical care goals.² ***It’s time to implement a better way to manage medications, engaging an inter-professional team to ensure better care, lower costs and higher physician and patient satisfaction! Let us show you how.***



How we pay

Employers as health plan sponsors hold the purse strings and contract authority. Public payers are structuring alternative payment models that reward for value. Optimizing medication requires payment models that reward person-centered, team-based programs focused on managing and coordinating care for those with chronic conditions who are on many medications prescribed by multiple providers. ***Let’s buy smart to lower total costs of care and mitigate medication misuse, underuse and overuse.***



How we use diagnostics

Companion and complementary diagnostics in the hands of experts on the care team help them make better, more personalized medication decisions. As the science advances, physicians, pharmacists and other team members must understand the value of these tools and how to apply, use and interpret findings. Consumers must be central to the process to move from precise to personalized care. ***Work with us to move from a trial-and-error approach to medication use, leveraging diagnostics and a process of care (CMM) to target correct therapies.***



How we integrate and optimize information

Investments in technology should be made to liberate clinical data at the point-of-care to identify those who would benefit the most from CMM and enable them to meet their clinical goals of therapy by ensuring safe, effective and appropriate medication use. Interoperability and data sharing is key. Access to the full medication and medical record is key. ***Let’s collaborate to ensure that data sharing, access and use agreements advance the practice of comprehensive medication management and allow access to diagnostic findings in a searchable and easy-to-use format.***

1 Watanabe JH, McInnis T, Hirsch JD. Cost of prescription drug-related morbidity and mortality. *Ann Pharmacother.* 2018;52(9): 829-837.
2 Cipolle RJ, Strand L, and Morley P. *Pharmaceutical Care Practice: The Patient Centered Approach to Medication Management.* Third Edition. New York, NY: McGraw-Hill Medical; 2012.

DID YOU KNOW?

- **80%** of the way we treat and prevent illness is through medications³
- There are over **10,000** medications available on the market today⁴
- Nearly **30%** of adults in the U.S. take five or more medications⁵

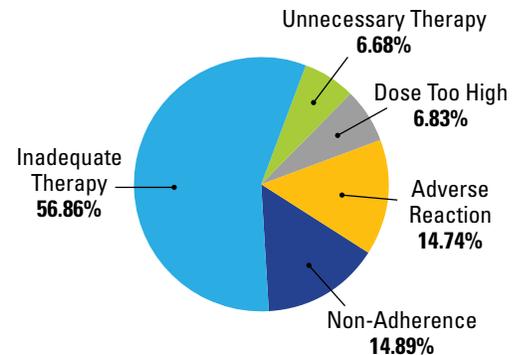
Why It Matters

Today, care is fragmented. People see multiple care providers to treat a host of chronic conditions and are prescribed many medications. There is no care process in place to routinely review all medications a person is taking to determine whether those medications, in combination, are safe, effective and appropriate and to ensure those medications are being taken as intended. For many, a **comprehensive** and **ongoing** process of care must be in place to determine a person's individual response to those drugs and ensure safe, effective use. We believe that this is best achieved with a clinical pharmacist, working in collaborative practice with the physician to review, evaluate, manage and change (or stop) medications, ensuring clinical goals of therapy are being met.

Medication disasters occur when medication therapy problems are ignored, leading to \$528 billion a year of costs associated with unnecessary ER visits, hospitalizations, admission to long-term care facilities and up to 275,000 deaths a year.⁶

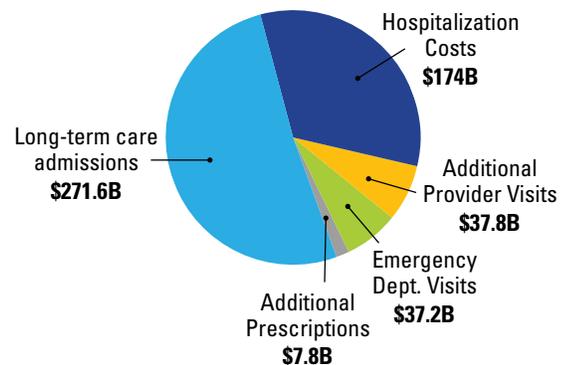
3 McInnis T, et al., editors. *The Patient-Centered Medical Home: Integrating Comprehensive Medication Management to Optimize Patient Outcomes*. 2nd ed., Patient-Centered Primary Care Collaborative. PCPCC Medication Management Task Force collaborative document.
 4 Medication Errors. June 2017. <http://psnet.ahrq.gov/primers/primer/23/medication-errors>. Accessed 4 Jan. 2018. AHRQ Patient Safety Network
 5 Ibid.
 6 Watanabe JH, McInnis T, Hirsch JD. Cost of prescription drug-related morbidity and mortality. *Ann Pharmacother*. 2018;52(9): 829-837.

MEDICATION THERAPY PROBLEMS



Comprehensive medication management in team-based care. American College of Clinical Pharmacy. <https://www.accp.com/docs/positions/misc/CMM%20Brief.pdf>

THE COSTS OF NON-OPTIMIZED MEDICATIONS: \$528B



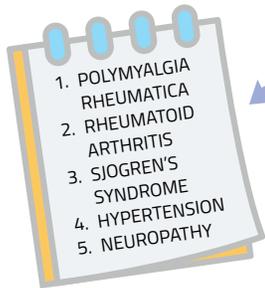
*Watanabe JH, McInnis T, Hirsch JD. Cost of prescription drug-related morbidity and mortality. *Ann Pharmacother*. 2018;52(9): 829-837.*

“CMM makes sense when so much we are doing today is not working. The evidence shows that this is a vital pathway forward.”

CHERYL LARSON, PRESIDENT AND CEO OF MIDWEST BUSINESS GROUP ON HEALTH AND GTRX EMPLOYER TOOLKIT TASKFORCE MEMBER



Showcase Example



"Mildred" has a primary care physician and sees eight specialists in different locations for five chronic conditions. Her medication regimen includes 30 medications. Because the pharmacy her insurance plan prefers doesn't carry all her drugs, she must use two different pharmacies. No single provider or health system has a complete medical record for Mildred.

Mildred is prone to frequent vomiting and diarrhea, often causing dehydration. She visits the emergency room frequently and is hospitalized several times a year.



Mildred's adult children live in other states and her husband, who also suffers from multiple chronic health problems, does his best to keep up with her medication regimen.

Each time, her medication regimen is interrupted, and new medications are introduced. When she returns home, her husband adds the new medications to the old medication regimen. The combination sometimes causes a medication cascade—which can result in more provider visits and potentially another hospitalization.

There are many patients like Mildred. Every year, our health care system spends hundreds of billions of dollars on non-optimized medication therapy.

CMM goes beyond adherence addressing all medication therapy problems such as adverse reactions, doses that are too high, unnecessary therapy and inadequate therapy to ensure that clinical goals of therapy are met and medications are safe, effective and appropriate for the individual patient.

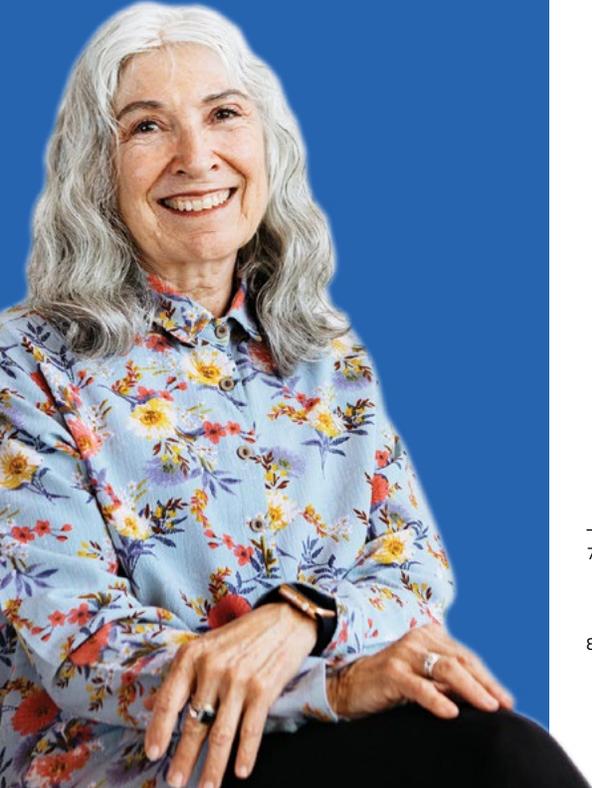


SOLUTION: Optimize medication use through comprehensive medication management in practice

- Move from fragmentation to coordination.
- Move from siloed treatment to team-based care.
- Move from disease-focused treatment to person-centered care.

New drugs, advanced technologies and companion and complementary diagnostics are transforming health care delivery and extending life. But how do we integrate these breakthroughs into practice?

A team-based, personalized approach to care is possible. Teams of experts (physicians, pharmacists, nurses, social workers and others) with health information at their fingertips—often including pharmacogenomic test results—can engage with the consumer and coordinate the medication care plan. The team's expertise and knowledge combine to put the patient at the center of care—optimizing medication use through comprehensive medication management (CMM) in practice. The patient is a partner on the team as individual factors that can make or break a medication regimen are considered. Throughout the CMM process, all the individual's medications and medical needs are evaluated in the context of overarching therapeutic goals. CMM is the vehicle that translates the promise of transformative discoveries into the individualized care that patients need.



“No single segment of the health care industry can solve this alone. It’s going to take a multi-stakeholder approach. We’re bringing together consumer groups, care delivery, payers and solution providers to create a critical mass so everyone can access a safe, effective, efficient, personalized, systematic approach to medication use. That’s what the goal of the Institute is: A call to action for long-term, sustainable change.”

KATHERINE H. CAPPS, CO-FOUNDER AND EXECUTIVE DIRECTOR OF GTMRX

Because CMM Works

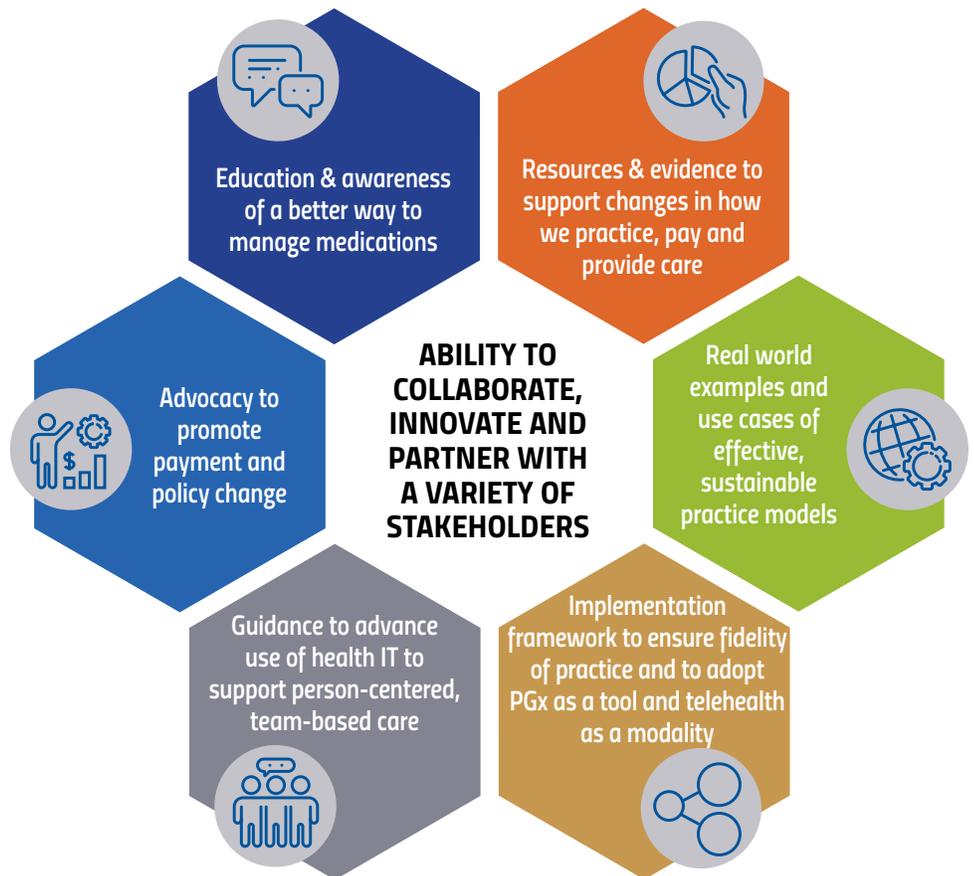
The evidence for CMM is clear. It leads to better care, lower costs and higher provider and patient satisfaction. Patients are more satisfied with their care, and their physicians report less burnout, decreased workload and greater satisfaction that they’re helping their patients.⁷

What is CMM?

“The standard of care that ensures each patient’s medications (whether they are prescription, nonprescription, alternative, traditional, vitamins or nutritional supplements) are individually assessed to determine that each medication is appropriate for the patient, effective for the medical condition, safe given the comorbidities and other medications being taken, and able to be taken by the patient as intended.”⁸



Benefits of Getting Involved



Enhance life by ensuring appropriate and personalized use of medications and gene therapies

7 McFarland MS, Buck ML, Crannage E, Armistead LT, Ourth H, Finks SW, McClurg MR; writing on behalf of the Get the Medications Right Institute. Assessing the Impact of Comprehensive Medication Management on Achievement of the Quadruple Aim. *Am J Med.* 2021 Apr;134(4):456-461. doi: 10.1016/j.amjmed.2020.12.008. Epub 2021 Jan 17. PMID: 33472055.

8 McInnis, Terry, et al., editors. *The Patient-Centered Medical Home: Integrating Comprehensive Medication Management to Optimize Patient Outcomes.* 2nd ed., Patient-Centered Primary Care Collaborative. PCPCC Medication Management Task Force collaborative document.

Who We Are

The GTMRx Institute is a 501c4 and a catalyst for change bringing together critical stakeholders, bound by the urgent need to get the medications right. We are physicians, pharmacists, caregivers, health IT innovators, drug and diagnostics companies, consumer groups, employers, payers and health systems, aligned to save lives and save money by advancing adoption of a systematic approach to medication use, enabled by technology, through comprehensive medication management, or CMM. By showcasing evidence and innovation, we motivate practice transformation and push payment and policy reform. Together, we ACT to champion appropriate, effective, safe and precise use of medications and gene therapies.

Become a Funding Member

A variety of membership levels are available:

- Governing Board Member (board position)
- Platinum Executive Member
- Executive Member
- Gold, Silver or Bronze Strategic Partner
- Supporting Signing Member

Additional benefits can include:

- Special invitations and/or discounts to conferences and/or roundtable events
- Your logo on promotional materials and the GTMRx website
- Name recognition as a Funding Member
- Invitations to lead or participate in workgroups or taskforce groups
- Opportunity to advance change in the marketplace
- Platform for advocacy, thought leadership and policy and payment change

“The health care industry is fighting multiple health crises right now—between COVID-19 and the ongoing opioid epidemic, appropriate use of medications has never been more important. Now is the time to overhaul the process with a person-centered, team-based care approach. More than 10,000 prescription medications are on the market today, and with growing numbers of Americans being prescribed more medications, a new approach is critical, and as shepherds for getting medications right, this is our time to reform a broken process.”

**KATHERINE H. CAPPS, CO-FOUNDER
AND EXECUTIVE DIRECTOR OF GTMRx**

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