



**Australian Government**  
**Department of Health and Ageing**

# **Residential Medication Management Review**

## **MBS item 903**

### **Information for Residential Aged Care Facilities**

**This fact sheet must be read in conjunction with the item descriptors and explanatory notes for Item 903 (as set out in the *Medicare Benefits Schedule*).**

The Medicare Benefits Schedule (MBS) item for Residential Medication Management Review (RMMR) for residents of Residential Aged Care Facilities (RACFs) was introduced on 1 November 2004. The item provides a Medicare benefit for GP services where a GP works in collaboration with a pharmacist to review the medication management needs of residents who are likely to benefit from such a review. This includes residents for whom quality use of medicines may be an issue or who are at risk of medication misadventure because of their medical condition or medical regimen.

#### **Who can have a collaborative RMMR?**

RMMRs are available to permanent residents of RACFs. There is no age restriction and residents may be receiving either low or high level care. The resident's medical practitioner may identify the potential need for an 'as required' RMMR for existing residents, including in the course of a consultation for another purpose. The potential need for an RMMR may also be identified by the reviewing pharmacist, supply pharmacist, Residential Aged Care Facility staff, the resident, the resident's carer or other members of the resident's health care team. The item is not available to in-patients of a hospital, people receiving respite care in an RACF, or people living in the community setting.

An RMMR is available to all new residents on admission into an RACF. Generally, new residents should receive an RMMR as soon as possible after admission. Where a resident has a Comprehensive Medical assessment (CMA), the

RMMR should be undertaken preferably after the results of the CMA are available to inform the RMMR. Medicare benefits are available for one RMMR for a resident in any 12 month period, except where there has been a significant change in the patient's medical condition or medication regimen.

#### **What changes in a resident would indicate the need for a RMMR?**

An RMMR may be required where there has been a significant change in the resident's medical condition or medication regimen, for example (but not limited to):

- (a) discharge from an acute care facility in the previous four weeks;
- (b) significant changes to medication regimen in the past three months;
- (c) change in medical conditions or abilities (including falls, cognition, physical function);
- (d) prescription of medication with a narrow therapeutic index or requiring therapeutic monitoring;
- (e) presentation of symptoms suggestive of an adverse drug reaction;
- (f) sub-therapeutic response to treatment;
- (g) suspected non-compliance or problems with managing drug related therapeutic devices; or
- (h) at risk of inability to continue managing own medications (e.g. due to changes with dexterity, confusion or impaired sight).

**Are RMMRs available to residents of supported accommodation facilities that are not funded by the Australian Government under the Aged Care Act (1997)?**

RMMRs are available to residents receiving Australian Government-subsidised aged care. Residents of institutions not funded by the Australian Government under the Aged Care Act are eligible for the DMMR Medicare item, which provides a medication management review service to people living in the community setting.

**Can staff of the RACF identify the need for a collaborative RMMR for an existing resident?**

Yes, the need for an RMMR for an existing resident may be identified by the resident's doctor, the reviewing pharmacist, supply pharmacist, RACF staff, the resident, the resident's carer or other members of the resident's health care team. The resident's doctor must assess the clinical need for an RMMR from a quality use of medicines perspective and determine that an RMMR is necessary.

**Who obtains the resident's consent to a collaborative RMMR?**

A resident's consent should be obtained using normal procedures for obtaining consent for provision of a medical service, before proceeding with an RMMR.

**Further Assistance**

The Medicare Enquiry Line: 13 20 11  
Local Divisions of General Practice  
The Office of the Department of Health and Ageing in each State and Territory.  
MBS online website: [www.mbsonline.gov.au](http://www.mbsonline.gov.au)