

# PROVIDER BULLETIN

## PROVIDER INFORMATION



September 3, 2024

### **Changes to the Medication Therapy Management (MTM) Program, Effective January 1, 2025**

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be removing the requirement that a CPT code 99605 needs to be submitted before a CPT code 99606 starting January 1, 2025, for MTM services, for all lines of business. The Provider Manual will also be updated to remove the association of CPT code 99605 with a comprehensive medication review (CMR) and CPT code 99606 with a targeted medication review (TMR). Only one CPT code 99605 can be submitted per member, per provider, per calendar year (1/1-12/31).

The first visit of the year, for a new member who is establishing care, should be a CMR. For Medicare Part D members, this should include the completed CMS Standardized Format (i.e. documents sent to members after a CMR, including the cover letter, to-do list, and updated medication list). Every CMR completed for a Part D member should have a CMS Standardized Summary letter submitted within 14 days of the visit. Continuity of Care (CCD) files submitted without a CMS Standardized Format date will not count towards a completed CMR.

For established members, or members who have a longitudinal relationship with the pharmacist, there may be situations where a follow-up visit (TMR) is scheduled before an initial CMR is completed in the calendar year.

#### **Products Impacted**

- Families and Children
- MinnesotaCare (MNCare)
- Minnesota Senior Care Plus (MSC+) members who do not have a standalone Part D plan
- Medicare Part D (MAPD, SecureBlue, Platinum Blue)
- Fully and Self-Insured Commercial lines of business

#### **Questions?**

Contact Provider Services at **651-662-5200** or **1-800-262-0820**, or email [MTM.Pharmacy@bluecrossmn.com](mailto:MTM.Pharmacy@bluecrossmn.com).