## **Reimbursement Methods for Community Pharmacy Practices**

- 1. Which of the following best describes the fee-for-service reimbursement model?
  - a. Payments are based on patient health outcomes
  - b. Payments are fixed per service, regardless of outcomes
  - c. Payments fluctuate based on the quality of care provided
  - d. Payments are adjusted retroactively based on patient adherence
- 2. Which of the following is NOT a core component of Medication Therapy Management (MTM)?
  - a. Comprehensive Medication Review (CMR)
  - b. Chronic Care Management (CCM)
  - c. Targeted Medication Review (TMR)
  - d. Medication Action Plan (MAP)
- 3. Direct and Indirect Remuneration (DIR) fees typically have what effect on community pharmacies?
  - a. Increase net reimbursement consistently
  - b. Provide predictable revenue per transaction
  - c. Introduce financial unpredictability
  - d. Incentivize preventive care
- 4. MTM services are reimbursable under \_\_\_\_\_, particularly for eligible patients with chronic conditions.
- 5. \_\_\_\_\_ reimbursement models prioritize patient outcomes and encourage preventive care.
- 6. A key role of pharmacists in the reimbursement landscape is to advocate for fair \_\_\_\_\_\_ policies that support pharmacy operations.
- 7. Why is understanding reimbursement methods critical for community pharmacists, particularly when it comes to patient care and pharmacy sustainability?
- 8. Explain how the value-based care model differs from the fee-for-service model in terms of incentives and patient care.
- 9. Describe the role of Comprehensive Medication Review (CMR) within MTM services and why it is important for chronic disease management.