

# MedsCheck and Diabetes MedsCheck eligibility screening tool

Consumer details		
Name		
Address		
Phone		
Email		
Consumer eligibility criteria		
MedsCheck	Diabetes MedsCheck	
1. Living at home in a community setting and has a valid Medicare or DVA card 2. Has not received a MedsCheck, Diabetes MedsCheck, Home Medicines Review or Residential Medication Management Review in the previous 12 months 3. Taking five or more prescription medicines <b>Or</b> has had a recent significant medical event (a recent event or new diagnosis that has the potential to impact on the consumer's medication adherence or knowledge of their medicine regime and may increase the risk of medication misadventure).	1. Living at home in a community setting and has a valid Medicare or DVA card 2. Has not received a MedsCheck, Diabetes MedsCheck, Home Medicines Review or Residential Medication Management Review in the previous 12 months 3. Type 2 diabetes diagnosed within the past 12 months <b>and</b> unable to gain timely access to existing diabetes education /health services in their community <b>Or</b> 4. Type 2 diabetes is less than ideally controlled <b>and</b> unable to gain timely access to existing diabetes education /health services in their community.	
Consumer eligibility	Yes	No
MedsCheck		
1. Does the consumer live at home in a community setting and do they have a valid Medicare or DVA card?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the consumer had a MedsCheck, Diabetes MedsCheck, Home Medicines Review or Residential Medication Management Review in the last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
<b>If answered YES to Question 2, consumer is ineligible for a MedsCheck service</b>		
3. Is the consumer taking five or more prescription medicines OR has had a recent significant medical event?	<input type="checkbox"/>	<input type="checkbox"/>
<b>If answered YES to Questions 1 and 3, consumer is eligible for a MedsCheck service</b>		
The consumer satisfies the eligibility criteria for a MedsCheck	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes MedsCheck		
1. Does the consumer live at home in a community setting and do they have a valid Medicare or DVA card?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the consumer had a MedsCheck, Diabetes MedsCheck, Home Medicines Review or Residential Medication Management Review in the last 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
<b>If answered YES to Question 2, consumer is ineligible for a Diabetes MedsCheck service</b>		
3. Has the consumer had type 2 diabetes diagnosed within the past 12 months <b>and</b> is unable to gain timely access to existing diabetes education /health services in their community <b>OR</b> the consumer's type 2 diabetes is less than ideally controlled <b>and</b> is unable to gain timely access to existing diabetes education /health services in their community?	<input type="checkbox"/>	<input type="checkbox"/>
<b>If answered YES to Questions 1 and 3, consumer is eligible for a Diabetes MedsCheck service</b>		
The consumer satisfies the eligibility criteria for a Diabetes MedsCheck	<input type="checkbox"/>	<input type="checkbox"/>
Pharmacist has obtained consumer consent to:		
• take part in the MedsCheck service or Diabetes MedsCheck service	<input type="checkbox"/>	<input type="checkbox"/>
• share information obtained during the services with other nominated members of their healthcare team (such as their GP, diabetes educator) if required.	<input type="checkbox"/>	<input type="checkbox"/>