

Benefits

- Easier implementation, feedback, and follow-up on clinical initiatives
- Forum to share new clinical information
- Required participation fosters accountability
- Shorter operational staff meetings
- Meetings augmented with email
- Brings the pharmacists together to touch base

Improving the health of individuals, families and communities

 **PRESBYTERIAN**



Managing a Formulary Today

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*Tammy Cohen, BS, PharmD, MS,
has nothing to disclose.*



Baylor Health Care System

- Dallas & Ft. Worth, Texas
- 13 hospitals
 - Two heart hospitals
 - Teaching and community sites
- ~3100 beds total
- Largest facility ~1000 beds
- Individual P&T Committees and a system-wide P&T Committee



Formulary Management Has Become Increasingly Difficult

- Direct-to-consumer advertising
- More complex drugs
- More drug classes with single agents
- Combination agents

Formulary Management Strategies: General Ground Rules

- Establish an 80/ 20 rule
- Establish the role of 'Home Medications'
- Define Formulary
 - Formulary = a drug that has been approved by P&T for use
 - Non-formulary
 - Any item that has been reviewed by P&T and denied formulary status
 - A new drug on the market that has not yet been reviewed
 - Medication indicated for an uncommon illness or a special circumstance in which the drug may be procured for that patient and dispensed for a limited time only
 - Formulary status is independent of stocking status. What is stocked is based on trends and usage patterns at each site.

Formulary Management Strategies: Financial

Focus on the top drug spend products for contract opportunities

- BHCS: Top 10 = ~28% of spend
- Run reports to combine like items (e.g., vaccines, insulins)

Formulary Management Strategies: Clinical

- Drug class reviews
 - System-wide reviews
 - Antibiotics
 - Cardiac Medications
 - Statins
 - Insulins
 - Target High volume areas