Nuts and Bolts of Implementing Specialty Pharmacy Services in a Health System

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Disclosure

JoAnn Stubbings, Rebekah Hanson, and Nehrin Khamo report no relevant financial relationships.

Learning objectives

- Design the clinical and operation elements of a specialty pharmacy practice model
- Identify barriers to access for specialty medication and how to overcome them, including limited distribution medications and payer restrictions
- Describe the role of specialty pharmacy in health system quality indicators

Overview

- Background and Planning
- Building Services
- Systems and Metrics

Introduction to University of Illinois Hospital and Health Sciences System (UI Health)

- Business Planning
- Opportunity Analysis
- Results

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Ambulatory Care Pharmacy Department

- Division of the UIC College of Pharmacy
- 7 outpatient pharmacies
- Pharmacist-Managed Clinics (ATC, MTM, HF, Hep C, Smoking Cessation)
- Discharge Service
- Therapeutic Infusion Service
- Medication Assistance Program
- Mail Order
- Specialty Pharmacy Services

Missed Opportunity in Specialty Pharmacy

- Clinical pharmacist practice model (little/no dispensing)
  - Clinical pharmacist assigned to clinic (MS, Rheumatology, Neurology, Transplant, Liver, others)
- Pharmacist is considered a member of the interdisciplinary team in the specialty clinic
- Prior authorizations, teaching/training, medication review and management, safety monitoring, refill management
- ‘Fax Forms’ were sent to specialty hubs
  - Problem = no documentation in EMR

Business Planning

- Mission
  - To help people with complex or chronic disease achieve optimal health by providing specialty pharmacy services in the safest, most efficient manner, and at the lowest possible cost
- Rationale
  - In-sourcing specialty pharmacy services can lead to improved continuity of care for patients of the health system/accountable care organization
  - Potential for improved patient outcomes and lower overall costs

UI Health Specialty Pharmacy Services


- Transplant
- Oncology
- HIV/AIDS
- RSV
- Liver
- Gastrointestinal Disorders
- Rheumatology
- Multiple Sclerosis
- Pulmonary
- Arterial Hypertension
- Sickle Cell

Results – Incremental Dollar Revenue

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Self-Assessment Question

- List the specialty services that are available at your practice site
  - A. Clinical services
  - B. Call center
  - C. Prior authorization technician
  - D. Dispensing/mail order
  - E. All of the above

Specialty Clinic: Rx Evaluation

- Clinical pharmacist initial face to face
  - Explain the process of medication approval and dispensing
  - Provide patient education materials
  - Refer prescription to Specialty Pharmacy Services Call Center for insurance benefit verification
  - Provide direct contact information

Pharmacist Clinical Review

- Ensures compliance with Clinical Care Guidelines specific to each specialty medication
- Evaluation of EMR
  - Drug and disease interaction
  - Medication selection
  - Labs/vitals
  - Allergies
  - Order entry
  - Direct MD communication
**Education and Training**

- Schedule training and education session
- Provide first dose if applicable
- Document details in EMR
- **Start of therapy**

**Ongoing Care**

**Ongoing drug therapy monitoring**

- Safety monitoring
- Effectiveness
- Medication Review
- Outcomes
- “Close the Loop”

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**Call Center Service**

**Staffing**

- Manager
- Clinical liaison pharmacist
- Clinical staff pharmacist
- Prior authorization technician
- Pharmacy students

**Insurance Benefit Verification**

- Receive referral
  - Prior authorization
  - Appeals
  - Medication assistance
  - Copayment assistance
- Utilize EMR
- Insource vs. outsource
- Documentation
  - PA database and calendar
Example of PA Database

Prior Authorization Expiration Calendar

Call Center Success

A Higher Level of Patient Care

- Clinical Assessment Surveys
  - Anti-TNF-alpha agents
  - MS
- Refill Management
  - Shipping calls
  - Clinic coordination
  - Pick-up reminder
- Review, update and document in EMR
  - Ensures continuity and coordination of care
- Direct Access to Prescribers
  - Interventions

Dispensing
Dispensing

Coordination with Call Center
- Process and fill
- Dispense
- Communication

Refill Management Calendar

Self Assessment Question
- What services should be implemented when designing a specialty pharmacy service?
  A. Clinical services
  B. Call center
  C. Prior authorization technician
  D. Dispensing/mail order
  E. All of the above

Recipe for Creating a Specialty Pharmacy Service in a Health System

- Implement Clinical Services/Integrate Pharmacist in Specialty Clinics
  - Face to Face interaction
  - DMR and Laboratory

- Referral To Call Center at Health System
  - Benefit Verification
  - Monthly Surveys and Follow ups

- Dispensing/Capture Model
  - Proactive Refill Management System
  - Feedback and communication with specialty clinic

Systems and Metrics
- Quality Improvement
- Systems and Reporting
- Teaching and Dissemination

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Quality Improvement

- Pharmacist intervention to improve safety monitoring with the use of biologic response modifiers

Systems and Reporting

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Teaching and Dissemination

- Independent study students
- P4 Clerkship students
  - Specialty Elective
  - Ambulatory Care Core

Self-Assessment Question

- What is the major barrier to establishing a specialty pharmacy practice in your health system?
  A. Restricted access to specialty drugs
  B. Restricted payer contracts
  C. Lack of support
  D. Lack of space
  E. All of the above

Conclusion: Challenges

- Payment for services
- Lock outs/Not in network
- Restricted payer contracts and restricted distribution drugs
- Restricted access to copay assistance program
- Day to day management/ Shipment challenges
- Difficulty in reaching patients
- Shrinking product reimbursement, especially Illinois Medicaid

Opportunities

- Opportunity to improve patient care at a lower cost
- New practice opportunities for pharmacy
- New revenue streams
- Teaching and research opportunities
- Improve continuity of care and outcomes
- Improve patient satisfaction
- New programs for the health system
Lessons Learned and Next Steps

- **Lessons learned**
  - The potential is greater than expected; however the challenges are greater than expected
  - Start with the low-hanging fruit

- **Next steps**
  - Outcomes studies
  - Quality improvement
  - Accreditation
  - Publication and dissemination

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- UI Health – administrators and managers
- UIC College of Pharmacy faculty and staff

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