

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

JoAnn Stubbings, BS Pharm, MHCA
Rebekah Hanson, PharmD, BCPS
Nehrin Khamo, PharmD



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



Background
and
Planning

- Business Planning
- Opportunity Analysis
- Results

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



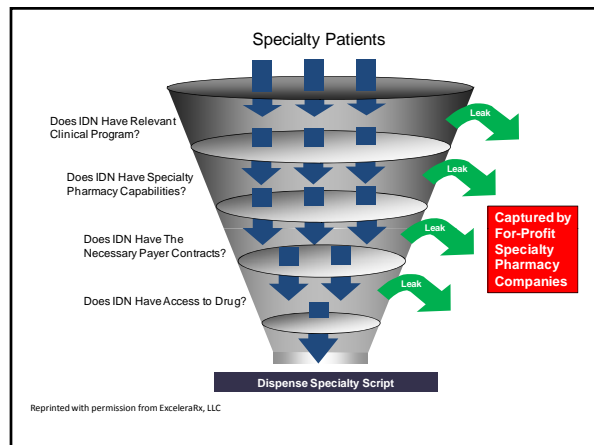
Ambulatory Care Pharmacy Department

- 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

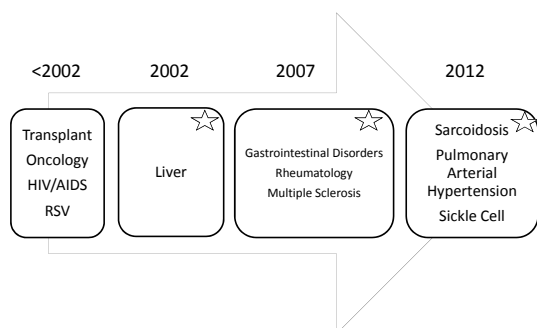
- Clinical pharmacist practice model (little/no dispensing)
 - Clinical pharmacist assigned to clinic (MS, Rheumatology, Neurology, Transplant, Liver, others)
- Pharmacist is considered a member of the interdisciplinary team in the specialty clinic
- Prior authorizations, teaching/training, medication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



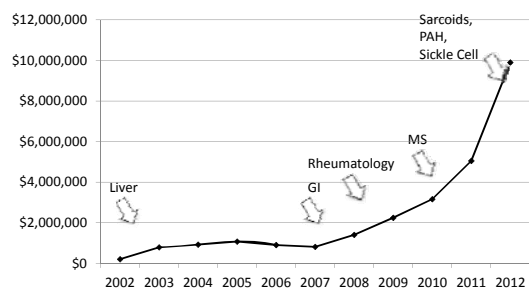
Business Planning

- 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

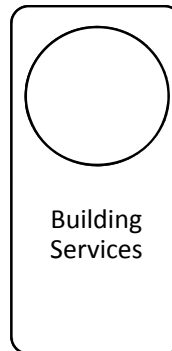


Results – Incremental Dollar Revenue

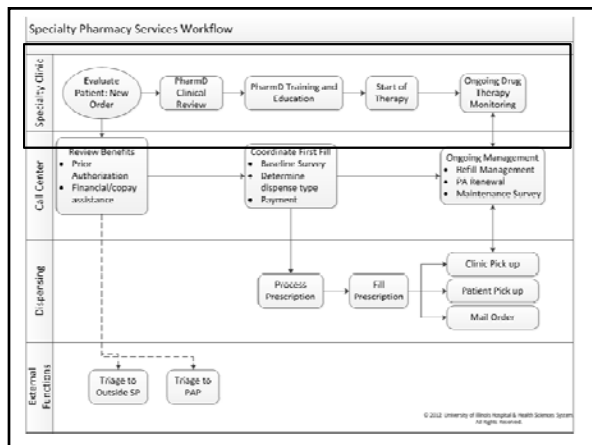


Self-Assessment Question

- 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
- Call Center
- Dispensing



Specialty Clinical Services



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



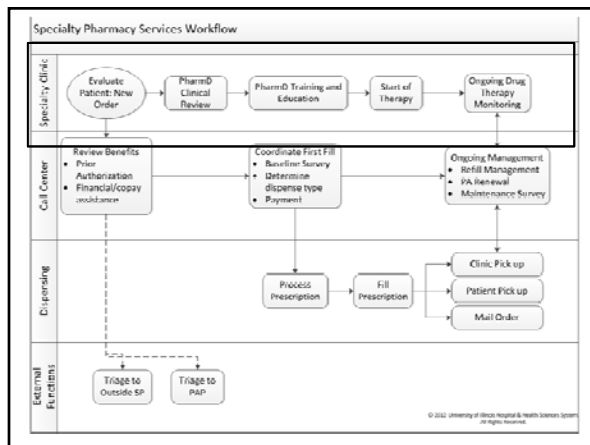
Education and Training

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

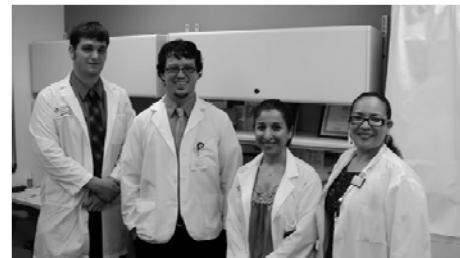
Ongoing Care

Ongoing drug therapy monitoring

- Safety monitoring
- Effectiveness
- Medication Review
- Outcomes
- "Close the Loop"



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

Patient Key 1

Primary Insurance

Prior Approval Type Existing patient, reauthorization

Prior Approval Status Approved with expiration

PA Approval Date: 06-22-2012 Today M-D-Y

PA Expiration Date: 06-21-2013 Today M-D-Y

Other Prior Approval Dates? ☐ Yes ☒ No

Upload for PA documents

Prior Authorization Expiration Calendar

Sun	Mon	Tue	Wed	Thu	Fri
26 G R	27 V R	28 S R	29 M P	30 T A	31 W P
2 M R	3 S T	4 M R	5 T R	6 F L	7 S L
9 G R	10 M R	11 T R	12 W R	13 T A	14 F A
16 S A	17 M A	18 T R	19 W R	20 M L	21 T L

Call Center Success

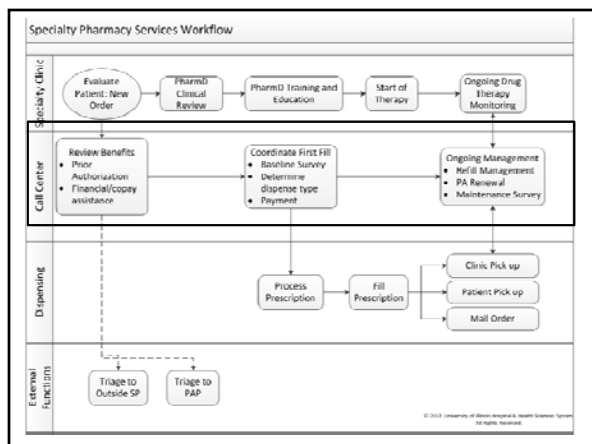
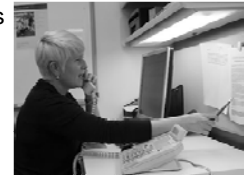


Total Number of PAs (6 months)	249
PA Approval Rate	96%*
Time to Approve	24 hours

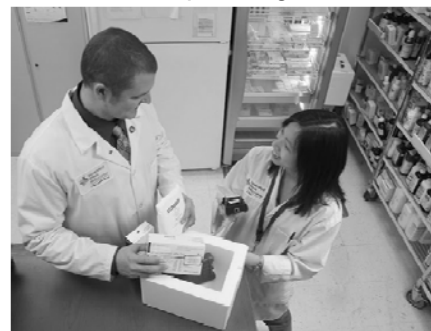
*Denials due to non-approved use of medication for diagnosis, medication not on formulary, or patient non-compliant with other prescribed medication for diagnosis.

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

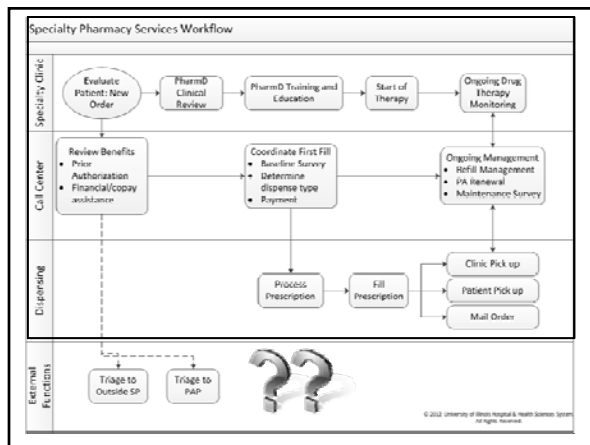
Coordination with Call Center

- Process and fill
- Dispense
- Communication



Refill Management Calendar

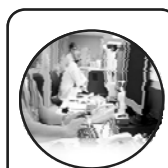
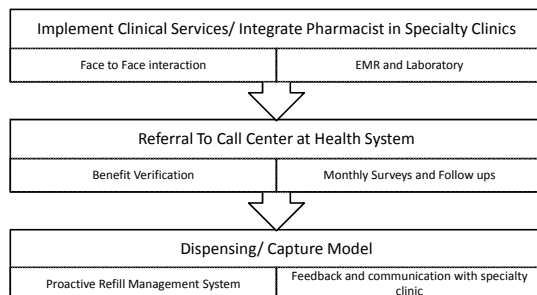
Sun	Mon	Tue	Wed	Thu	Fri
26 G R	27 S	28 T	29 W	30 Th	31 Fri
1 M	2 T	3 W	4 Th	5 Fri	6 Sat
8 M	9 T	10 W	11 Th	12 Fri	13 Sat
15 M	16 T	17 W	18 Th	19 Fri	20 Sat
22 M	23 T	24 W	25 Th	26 Fri	27 Sat
29 M	30 T	31 W			



Self Assessment Question

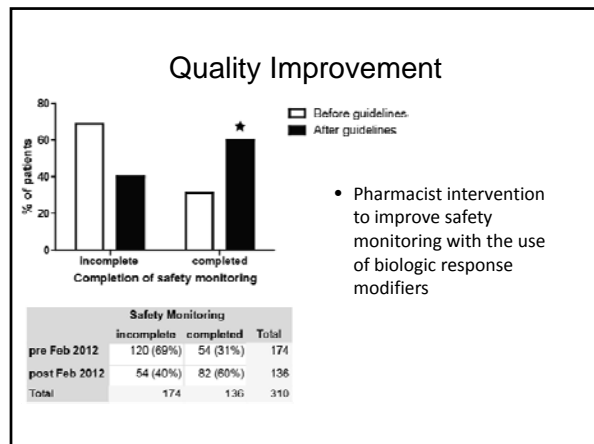
- What services should be implemented when designing a specialty pharmacy service?
 - A. Clinical services
 - B. Call center
 - C. Prior authorization technician
 - D. Dispensing/mail order
 - E. All of the above

Recipe for Creating a Specialty Pharmacy Service in a Health System



Systems and Metrics

- Quality Improvement
- Systems and Reporting
- Teaching and Dissemination



Systems and Reporting

System Evaluation Tool					
System Name:			Date of Demo:		
Contact person:					
Workflow	Clinical	Data Integration	Dispensing	Storage	Security
Reporting	Communication	Implementation	Current Clients	Cost	Misc Notes

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?
 - Restricted access to specialty drugs
 - Restricted payer contracts
 - Lack of support
 - Lack of space
 - 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



Acknowledgements

- Pharmacy students from the UIC College of Pharmacy
- UI Health specialty outpatient clinics, physicians, pharmacists, and nurses
- Ambulatory Care Pharmacies – technicians, pharmacists, managers
- UI Health – administrators and managers
- UIC College of Pharmacy faculty and staff

Contact Information

JoAnn Stubbings	jstubbin@uic.edu	312.996.3098
Rebekah Hanson	rhanso2@uic.edu	312.413.3720
Nehrin Khamo	nyakou1@uic.edu	312.413.3789