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Fairview Health Services
Minneapolis, MN

Pharmacy Services Providing Value
In An Accountable Care Organization
The Fairview Experience

Pharmacy- an integral part of becoming an ACO
Statistics
- Improper medication use by patients has been estimated to cost the health system up to $290 billion a year
- Drug expenditures comprise 15.5% of healthcare premium
- This represents the third most costly component of the nation’s health spending behind hospital care (31%) and physician and clinical services (21%)

Pharmacy optimization goals
- Health outcomes
- Patient experience
- Provider experience
- Financial outcomes

The main objective is to constantly develop and implement new pharmacy capabilities and services to support ACO goals
- Partner with providers to expand panel size
- Special focus on complex and costly patients

FPS is a comprehensive provider of pharmacy services
Retail Pharmacies (33)
Hospital Pharmacies (8)
On-site Infusion Pharmacies (4)
Specialty Pharmacy - Nationwide coverage
Mail Service Pharmacy
Compounding Pharmacy
Central Packaging
Medication Therapy Management (MTM)
20 clinics, multiple direct-to-employer and payer contracts
Fairview Clinical Trials Services
ClearScript PBM
Hemophilia Clinic

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Presentation Outline
Fairview Pharmacy Services, LLC Overview
Pharmacy’s ACO-Related Goals and Objectives
Pharmacy’s Strategies – Current and Future

FPS’ current and future strategies support Fairview’s aggressive ACO development
11 Primary Strategies:
- Formulary Strategies
- Supply Chain Management
- Drug Policy
- CMS Core Measures / Hospital Associated Conditions
- Pain Stewardship
FPS’ current and future strategies support Fairview’s aggressive ACO development

Transitions in care
Chronic disease and wellness
Contributions to clinic care model
Retail clinical services
Continuum of care services
Direct to employer capabilities

Formulary Strategies

- Consolidate formularies across systems
- Pursue contract and market share agreements
- Pursue cost savings programs aggressively
- Evaluate inpatient reimbursement versus outpatient reimbursement

Formulary Strategies – Proving Value

<table>
<thead>
<tr>
<th>Facility</th>
<th>Total Orders Processed</th>
<th>Total Non-Formulary Orders</th>
<th>Total Doses Dispensed</th>
<th>Total Non-Formulary Doses</th>
<th>Total Cost of Non-Formulary Agents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northland</td>
<td>77,973</td>
<td>134 (1%)</td>
<td>113,376</td>
<td>272 (1%)</td>
<td>$18,986</td>
</tr>
<tr>
<td>Lakeside</td>
<td>98,006</td>
<td>149 (1%)</td>
<td>199,571</td>
<td>415 (1%)</td>
<td>$20,066</td>
</tr>
<tr>
<td>Southdale</td>
<td>566,391</td>
<td>103 (1%)</td>
<td>931,346</td>
<td>3486 (1%)</td>
<td>$50,744</td>
</tr>
<tr>
<td>Riverside</td>
<td>401,731</td>
<td>642 (1%)</td>
<td>838,276</td>
<td>3325 (1%)</td>
<td>$24,884</td>
</tr>
<tr>
<td>University</td>
<td>677,766</td>
<td>1907 (1%)</td>
<td>1,700,208</td>
<td>10,902 (1%)</td>
<td>$193,867</td>
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<tr>
<td>TOTAL</td>
<td>2,067,465</td>
<td>4375</td>
<td>4,283,216</td>
<td>21,172</td>
<td>$292,964</td>
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Formulary Strategies – Proving Value

Insulin Contract Analysis- Apidra for Novolog

Formulary Strategies – Proving Value

Cost Savings Programs

Formulary Strategies

Inpatient versus Outpatient Reimbursement

ASP plus 6%
Physician Office

ASP plus 5%
Hospital Outpatient Department (HOD)

Pass-through in hospital outpatient department (HOD)

Non-pass-through
Supply Chain Management

Preferred Product List

<table>
<thead>
<tr>
<th>Code</th>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1234</td>
<td>Item</td>
<td>Description</td>
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</tbody>
</table>

Drug Shortages

- Number of “RED” items and/or absolute outages
- Number of adverse events due to shortages
- SBARs: Processes Fairview follows to keep patients safe.
- Therapy either delayed or denied to Fairview patients
- “Gray Market” purchases
- Incremental costs incurred due to drug shortages

Supply Chain Management

Drug Shortages Metrics

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>In Use</th>
<th>In Stock</th>
<th>Low</th>
<th>In Use Low</th>
<th>Low Alert</th>
<th>Clinical Action</th>
<th>Required Role</th>
<th>Pharmacy Role</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Supply Chain Management

Drug Shortages

IV Diltiazem Shortage SBAR

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Drug Policy – Proving Value

- Standardized 601 Epic order sets
- Standardized 482 Beacon protocols
- Decision Support
- Medication Safety
- Disease Management
- Symptom Management

CMS Core Measures / Hospital Associated Conditions – Proving Value

Antimicrobial Stewardship

<table>
<thead>
<tr>
<th>Reaction Distribution Code</th>
<th>Total #</th>
<th>% of Total</th>
<th>% of Interventions</th>
<th>% of Accepts</th>
<th>% of Declines</th>
<th>% of Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Reactions</td>
<td>1000</td>
<td>100.00%</td>
<td>100.00%</td>
<td>50.00%</td>
<td>0.00%</td>
<td>50.00%</td>
</tr>
<tr>
<td>Total Interventions</td>
<td>500</td>
<td>50.00%</td>
<td>50.00%</td>
<td>50.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Total Accepts</td>
<td>250</td>
<td>25.00%</td>
<td>50.00%</td>
<td>50.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Total Declines</td>
<td>250</td>
<td>25.00%</td>
<td>50.00%</td>
<td>50.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>Total Not Applicable</td>
<td>250</td>
<td>25.00%</td>
<td>50.00%</td>
<td>50.00%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
</tbody>
</table>
CMS Core Measures / Hospital Associated Conditions – Proving Value
Antimicrobial Stewardship

![Graph showing antimicrobial agents cost per patient day actual vs. expected](chart.png)

**Pharmacy Services – Proving Value**

**Pain Stewardship Program**
- Daily report - oral long-acting opioids, fentanyl formulations, and methadone
- PMP profile checked for consistency with patient history
- "opioid review" note documented by the pain medication stewardship pharmacist
- Plan for transition to oral, weaning of acute pain medications, and continuity of care is developed
- Marker of success – numerous physician consults

**Pain Stewardship Program June – Dec, 2010**
- Opioid therapy screened on 1,393 patients
- 586 (42%) met criteria for opioid medication reconciliation
Pain Stewardship Program
June – Dec, 2010

<table>
<thead>
<tr>
<th>Type of Intervention</th>
<th>Number of Patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Note documented under “pharmacist medication review” (note contains all outpatient controlled substance use, identification of opioid use problems and recommendations for involvement of other services (pain team, chem. dep., etc))</td>
<td>499</td>
</tr>
<tr>
<td>Contact floor pharmacist over the phone regarding EMR discrepancies with inpatient opioid medications/down</td>
<td>45</td>
</tr>
<tr>
<td>Contact physician on recommendation for pain or palliative care consult</td>
<td>17</td>
</tr>
<tr>
<td>Pain team request for PMP review by the stewardship program with documentation in FCIS</td>
<td>21</td>
</tr>
<tr>
<td>Contact physician on opioid medication issues (multiple providers outside, need for continuity of care, need social worker intervention)</td>
<td>16</td>
</tr>
<tr>
<td>Document discharge recommendations and include referral to pain clinic</td>
<td>2</td>
</tr>
<tr>
<td>Contact retail pharmacy to verify medication on the PMP report</td>
<td>3</td>
</tr>
<tr>
<td>Contact methadone treatment program to verify patient dose</td>
<td>1</td>
</tr>
<tr>
<td>Total number of interventions</td>
<td>604</td>
</tr>
</tbody>
</table>

Transitions in Care
Fairview Southdale Hospital

- Results after one year:
  - FPA/FSH readmission rate = 9.6%
  - 95% confidence limits are +/- 2.9% for eligible patients.
  - Therefore, we can be reasonably sure the true readmit rate for eligible patients lies between 6.7% and 12.5%

Since the 2009 rate was 16.5%,
readmits are ~ 42% lower this year

Transitions in Care
Amplatz Children’s Hospital

- Medication Teaching Pharmacist
  - 1 FTE from Discharge Pharmacy
  - Monday – Friday 0900-1700
  - Every 5th Saturday 0900-1700
- Discharge Liaison
  - 1 FTE from Discharge Pharmacy
  - Monday – Friday 0800-1600
- 2 PD4 Students
  - Monday – Friday 0900-1700 and 1000-1800
  - Plus 2 Saturdays each 5 week rotation 0900-1700

Medication Teaching Pharmacist and Discharge Liaison are members of the inpatient Pediatric Team!

Transitions in Care
Amplatz Children’s Hospital

- What does the Discharge Liaison do?
  - Meets with patient/family on admission
  - Reviews services offered by FPS
  - Orients to discharge medication process
  - Obtains insurance and allergy information
  - Sets up account in outpatient Rx system
  - Attends discharge rounds/meets with charge RN to identify discharging patients
  - Schedules teaching appointments and interpreters
  - Runs test claims
  - Ensures completed discharge medication orders are sent for filling
  - Delivers medications to the unit for the pharmacist

If 42% of these readmissions can be prevented @ $10,000 each, the ACO saves $950,000 a year on UCare patients alone
If 30% of these readmissions can be prevented, ACO saves $680,000 a year
Transitions in Care
Amplatz Children’s Hospital

What does the Medication Teaching Pharmacist do?
- Reviews all discharge medication orders
- Discharge Reconciliation
- Resolves any drug therapy problems
- Enters correct suspension concentrations to discharge orders
- Brings medications to the teaching appointment
- Creates a MedActionPlan® for complex regimens (SOT, BMT)
- Conducts medication teaching for the patient/family
- Focus is on new medications/dose changes
- Provides a follow-up call to the patient/family after discharge
- Documents teaching activities and interventions
- Training pharmacy students participating in the service

Measurement

- Process Measures:
  - Percent of patients taught/offered teaching at discharge
  - Percent of patients with discharge medication reconciliation completed by pharmacist
  - Time spent teaching/preparing for teaching/reconciling meds
- Patient Care Measures:
  - Type/number of interventions made by pharmacist during reconciliation
  - Readmission rates
- Patient Satisfaction Measures:
  - NRC Picker survey results – specific medication teaching questions
  - Follow-up call satisfaction question

Process Results
10/15/10-12/15/10
- 273 patients discharged from 5A
- 132/237 (56%) had medication teaching documented
- Most recently, teaching an average of 5-6 patients/day on fully staffed days

Patient Care Results
12/16/10-1/26/11
- 59 Documented Interventions
  - N = 143 patients seen by the pharmacist
  - Rate of 0.41 interventions/patient

Patient Satisfaction Results
12/16/10-1/26/11
- “YES” Answers on Follow-Up Calls (N = 61):
  - Was the medication teaching session helpful? = 100%
  - Were you satisfied with the med teaching you received = 100%
  - “...never experienced pharmacist med teaching like this before - very impressed...”
  - “...appreciated the pharmacist making sure I understood how to give medicines to my son prior to leaving the hospital...”
  - “...med program would be awesome for moms with children who have complicated medication regimens...”
  - “...my daughter’s asthma is controlled for the first time in 14 years – I think in part to her now knowing how her meds work...”

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Transitions of Care
Fairview Ridges Pilot

- Identifies patients with predicted DRG of CHF or COPD
- Enters patients into software
- Attends daily discharge rounds

Care Coordinator

Pharmacy Tech

- Attends daily discharge rounds
- Facilitates discharge prescriptions for patients
- Follows progress while in hospital
- Discharge medication reconciliation and resolution of DTPs
- Patient Education
- Discharge medications list to patient
- Arrange referral to MTM service during home health visits

Pharmacist

Results

- 4 month pilot
- 40 patients in intervention group
- 88 drug therapy problems identified (2.6/pt)
- MTM follow-up rate 25% (historically ~6%)
- Primary Care follow-up rate 65%
- Home Health follow-up rate 58%

Results

Types of drug therapy problems

- Need additional therapy
- Tissue too high
- Other too low
- AGR
- Unscheduled therapy
- Compliance
- Change drug

Results

- 30-day all cause readmission rates
  - Pilot 30.6%
  - Comparison Group 35.9%

Care Transitions Continuum

- Medication Reconciliation and Education
  - Complex Medications, High Readmission Risk (Care.com process)
  - Moderate Readmission Risk or Specific Drug Therapy Problem (PDA/Usare process)
  - Low Medication Complexity, Low Readmission Risk

Care Transitions Continuum - Retail

- MTM Consult
  - Complex Medication Regimen, High DTP Risk

Retail Pharmacist Consult

- Moderate DTP Risk or Specific Drug Therapy Problem

Standard Dispensing

- Low DTP Risk

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Inpatient Hospitalization → TCU/SNF/Home Care/Home → Primary Care

**Chronic Disease and Wellness**

**“Care Packages”**

“Evidence-based practice meets Clinic Operations”

3 teams:
- Guidance Team – which conditions need to be packaged
- Design Team – what labs, visits should be included, who should see patient, what education do they need, etc
- Implementation Team – operations focus

10 care packages including: Preventive Care, migraine, Hyperlipidemia, HTN, low back pain, asthma, diabetes

**Contributions to Clinic Care Model**

Direct involvement in clinic team
- C3PO’s
- Huddles
- Clinical consults

Education
- Direct teaching
- Asthma education for nursing
- HTN
- Protocol development

Innovation
- Virtual Care (web-cam) development

**Retail Clinical Services**

Pilot at Hugo Pharmacy in partnership with the clinic
- Hypertension management
- Smoking Cessation
- Pharyngitis protocol
- Travel Health

Refill Authorization & Therapeutic Interchange Protocol
- For Fairview clinic patients
- In pilot phase

Vaccination Program
- Flu, pneumovax

**Continuum of Care Services**

- Consulting Services
- Medication Therapy Management
  - Ebenezer LTC
  - Fairview Partners
  - Assisted Living
  - Community

- Long Term Care Chart Review
- Provider and Staff Education
Direct to Employer Services

- ClearScript – PBM services
- MTM- both live and virtual
  - City of Minneapolis
  - City of Duluth
  - State of Minnesota
  - Integration with Fairview’s direct to employer initiatives

Conclusion

- Pharmacy Services bring value to the ACO
- Transitions in Care
- Chronic Disease and Wellness
- Contribution to Clinic Care Model
- Retail Services
- Continuum of Care
- Direct to Employer Services

Conclusion

- Pharmacy Services bring value to the ACO
  - Formulary Management
  - Supply Chain Management
  - Drug Policy
  - Core Measures
  - Pain Medication Stewardship

Thank you!