Evaluation of an integrated health-system specialty pharmacy technician-driven 7 day post-transplant discharge follow-up call

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Background

• Patients discharged after organ or stem cell transplant on multifaceted drug regimens are often naïve to specialty pharmacy services
• As these patients will be on specialty medications generally lifelong after transplant there is a significant opportunity for early connections and explanation of specialty pharmacy services
• The Wake Forest Baptist Health (WFBH) Specialty Pharmacy is a dually accredited specialty pharmacy, embedded in an academic medical center, serving a myriad of patients
• Abdominal, heart and bone marrow transplant patients are a large portion of patient volumes (45%) and discharge prescription services (DPS) are a key component for these patients
• In November 2019 the Specialty Pharmacy implemented a technician-driven 7 day post-transplant discharge call to review specialty pharmacy services, discuss billing, reiterate refill processes, determine early medication changes and offer additional pharmacist counseling

Objectives

• Determine the average time to completion of post-transplant discharge follow-up calls
• Assess the impact of a technician-drive 7 day post-transplant discharge follow-up call on patient retention
• Evaluate the number of early medication changes, and pharmacist interventions required at the time of the call

Methods

• IRB-approved single-center, retrospective chart review performed on abdominal, heart and bone marrow transplant patients with a completed post-transplant discharge follow-up call between November 1, 2019 and June 1, 2020

Results

• 157 patients had documented post-transplant discharge follow-up call with the majority being kidney transplant recipients
• 85% of patients were retained for future refills of medications, with the most common reason for transfer out being insurance restriction
• Calls were completed at an average of 9.7 days post-discharge and the majority were completed on the first attempt on Post-discharge Day 7

Discussion

• This process was an efficient technician-driven process with the majority of patients reached at 7 days post-discharge
• A positive retention rate was potentially related to relationship building during patient interactions
• The majority of patients unable to continue filling were due to insurance restrictions
• Amount of identified medication changes allowed for timely documentation and proactive request of updated prescriptions
• The low amount of required pharmacist interventions supported a technician-driven process
• Limitations include lack of comparator group, variations in free text documentation and rotation of various individuals through discharge transplant technician role

Conclusions

• The 7-day post-transplant discharge follow-up call offered a timely opportunity to review pertinent specialty pharmacy information and assess any changes in therapy after discharge
• This was a successful technician-driven process with most patients able and willing to continue filling with WFBH Specialty Pharmacy
• Future opportunities include utilization of technology for alternative methods of contact during this touchpoint

References


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