Vanderbilt

Transplant Pharmacy

VANDERBILT WHEALTH

RETRAINING OF TRANSPLANT PHARMACY
STAFF TO REDUCE MEDICARE PART B
PRESCRIPTION BILLING ERRORS IN POSTTRANSPLANT RECIPIENTS

Carey Vallone, CPhT; Sarah Osman, CPhT-Adv; Kirsten Mitchell, CPhT-Adv; Michael Wilson, CPhT; Chelsea Ray, CPhT; Keren Rodriguez, PharmD, CSP; Chris Hayes, PharmD; Rachel Chelewski, PharmD, CSP; Genevieve Staff, PharmD; Autumn Zuckerman, PharmD, BCPS, AAHIVP, CSP; Brianna Hawkins, MBA, PharmD Candidate, 2023; Katie Cruchelow, PhD



CONCLUSION

CPhT retraining focused on specific MedB billing errors successfully reduced error frequency and potential resulting fines.

Because MedB billing error fines can be costly for pharmacies dispensing high-cost medications, identifying common errors and training staff can be useful and financially prudent.

Refill Too Soon (RTS) Errors \downarrow 37.5%

Missing Residency (MR) Errors ↓ 21.7%

Day
Supply
Errors
(DSE)

√ 39.7%

PURPOSE

Outpatient prescription billing post-transplant can become complex for patients who had Medicare part B (MedB) at the time of transplant. Date of service for processing prescriptions and prescription plan specifics can dictate changes in how patients' Medicare plans are billed.

The aim of this quality improvement project was to retrain certified pharmacy technicians (CPhTs) on common monthly billing errors and evaluate changes in error rates and potential fines.

METHODS

- Single center, pre-post analysis, Vanderbilt Transplant Pharmacy 2021-2022
- Patients with at least one MedB prescription billing error

CPhT Retraining Topics:

- 1. Early refills
- 2. Missing relationship of caller to patient/residence of patient on orders
- 3. No day supply remaining recorded on the order



Implementation:

- 1. Developing training checklist
- 2. Testing current knowledge
- 3. Coaching based on technician specific errors
- 4. Retesting for knowledge retention



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1. Number of prescriptions with at least one MedB billing error

Outcomes:

2. Projected amount of fines due to errors before and after retraining

Pre-retraining period 12/1/21 - 2/28/22

Training period 3/1/22 - 3/31/22

Post- retraining period 4/1/22 - 7/1/22

RESULTS







