

MEDICAL CENTER

QUANTIFYING HEALTH-SYSTEM SPECIALTY PHARMACISTS' INTERVENTIONS FOR PATIENTS UTILIZING EXTERNAL PHARMACIES

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PURPOSE

Integrated Health System Specialty Pharmacy (IHSSP) pharmacists provide essential care for patients at the health system. Payer and manufacturer lockouts impact IHSSPs' ability to dispense specialty medications, often limiting visibility in the patient journey and increasing workload.

The objective of this analysis was to evaluate the number and type of pharmacist actions completed and corresponding estimated costs of the pharmacists' time spent for patients that do not utilize the IHSSP.

METHODS

Setting	Single-center quality improvement project			
Sample	Patients in the Gastroenterology/Inflammatory Bowel Disease (GI/IBD), Neurology, and Hepatology Clinics, who fill specialty medications at non-IHSSP specialty pharmacies			
Exclusion	Patients with at least one fill from the IHSSP during the study period			
Study Period	January 1, 2023 - May 31, 2023			
Descriptive Analysis	Outcomes including the number, outcome, and time spent on actions for non-VSP patients			

Incorporated Quick Actions for documentation of pharmacists' actions in EHR

As part of normal workflow, pharmacists categorized actions taken, action outcome, and time spent on the action

Calculated total estimated labor cost for time spent on actions for non-IHSSP patients

CONCLUSION

- Integrated health system specialty pharmacists perform numerous actions to facilitate specialty medication education, access, adherence, and persistence regardless of the patients' ability to utilize the IHSSP for fulfillment.
- Medication access coordination and access issue actions were common among patients who use external specialty pharmacies.
- Lack of visibility in the patient journey and increased workload on providers and health systems is created when payers and manufacturers lockout IHSSPs.

RESULTS

Figure 1: Quick Action EHR Documentation

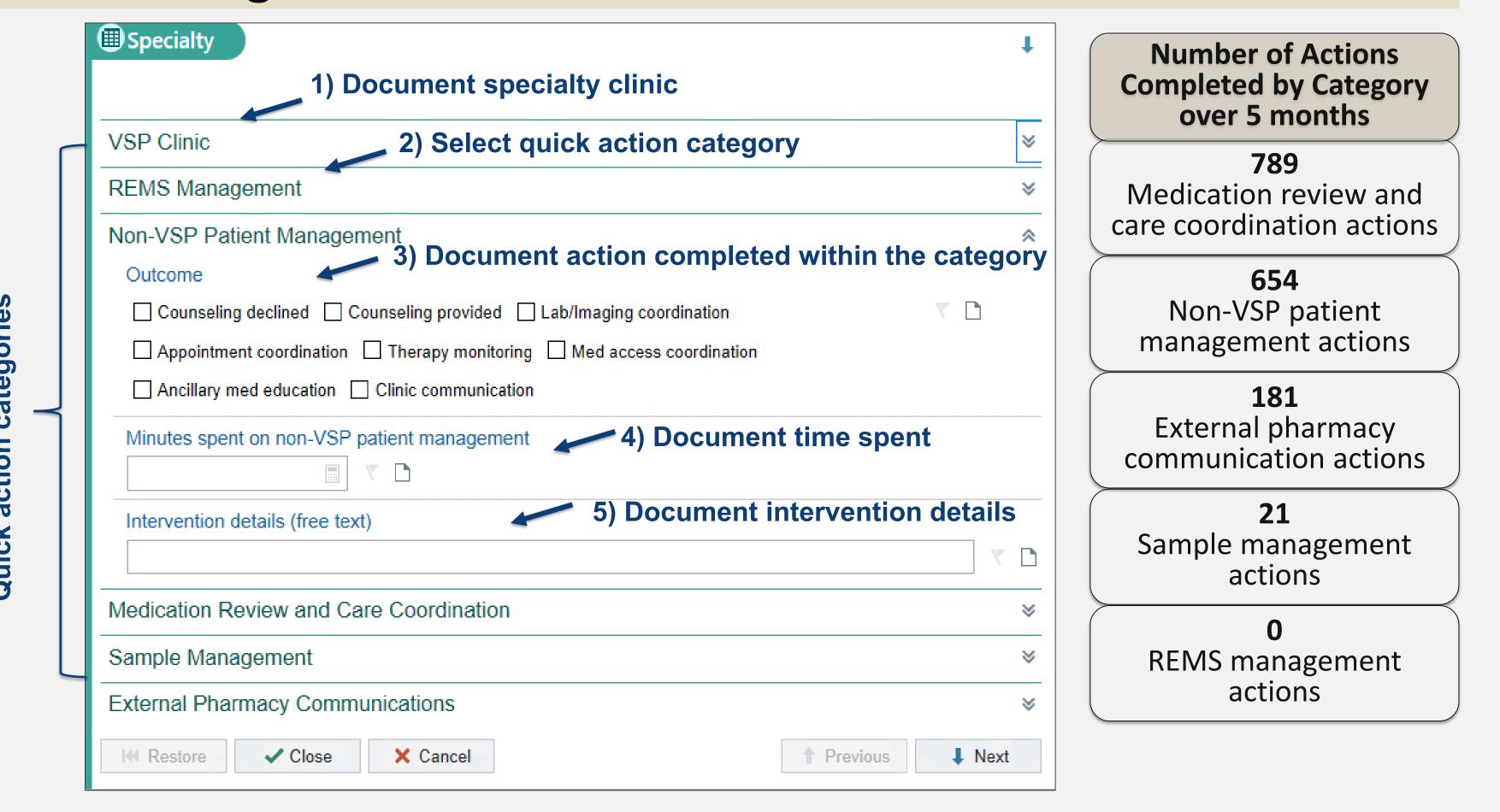


Figure 2: Quick Actions Completed by Clinic

Access issue

19
13
72

		Hepatology	GI/IBD	Neurology
Quick Actions Completed	Therapy monitoring- no intervention	16	1	104
	Therapy monitoring	18	2	66
	Sample management		4	1
	Sample inventory	1		1
	RX transfer		1	1
	Rx Prep	1	2	117
	RX confirmation	4	3	66
	Rep meeting			16
	Med access coordination	44	262	862
	Lab/Imaging coordination	33	3	16
	Counseling provided	12	45	7
	Counseling declined	1		1
	Clinical info provided		1	19
	Clinic communication	11	8	27
	Appointment coordination	13	30	6
	Ancillary med education	3	2	13
	Access issue	19	13	72

Specialty Clinic

Figure 3: Number of Quick Actions Documented

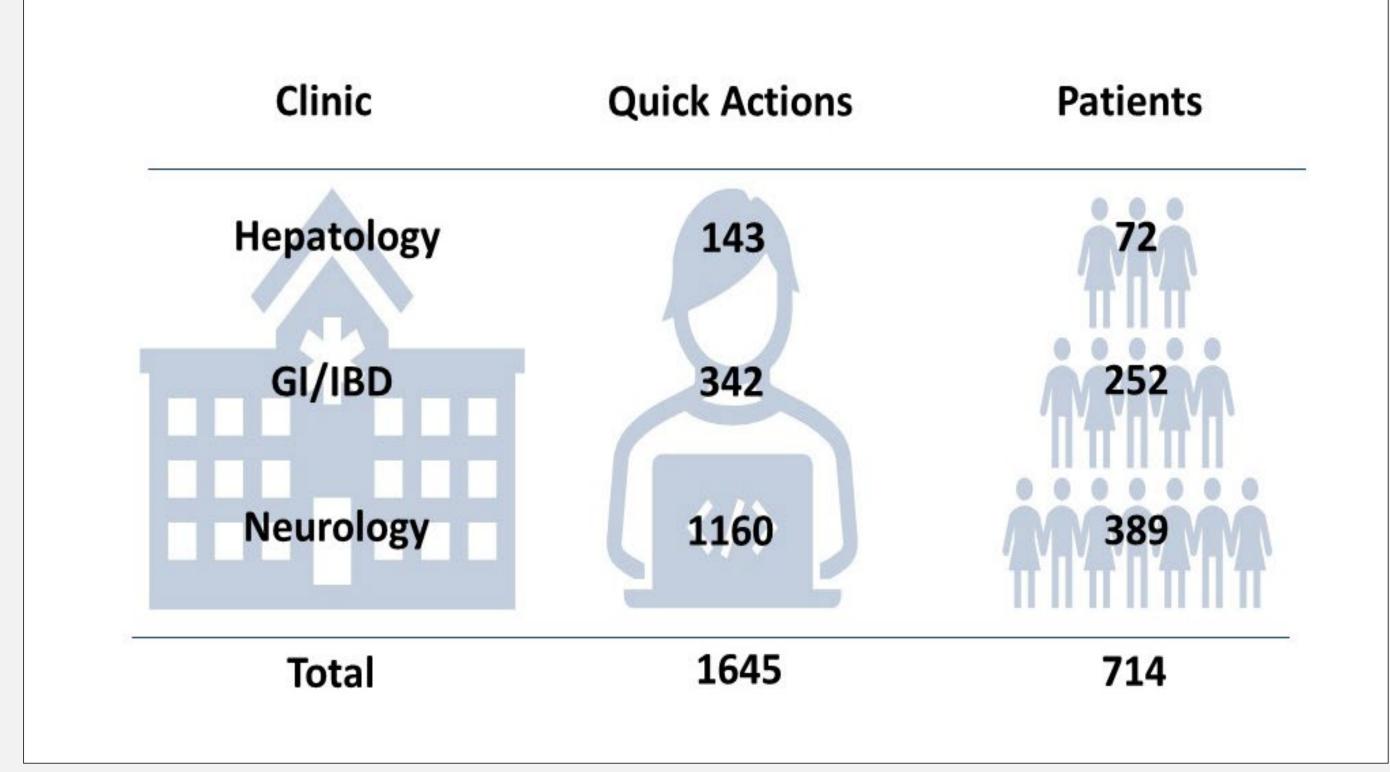


Figure 4: Quick Action Labor and Cost

