

## Background

- Specialty pharmacy clinical programs provide disease management through side effect management and adherence coaching to improve patient outcomes.
- CenterWell Specialty Pharmacy (CWSP) has an established Oncology Center of Excellence (OCOE) which provides dedicated clinicians, cancer-specific disease assessments, social determinants of health evaluation, and operational processes to provide holistic patient care.
- Clinical outcomes and quantification of value are increasingly important to showcase impact of specialty pharmacy clinical programs.

## Objectives

- Compare acute hospitalization rates and medical costs for oncology patients using affiliated pharmacy with an oncology clinical program versus non-affiliated pharmacies.
- Measure the impact of engagement with CWSP clinical staff.

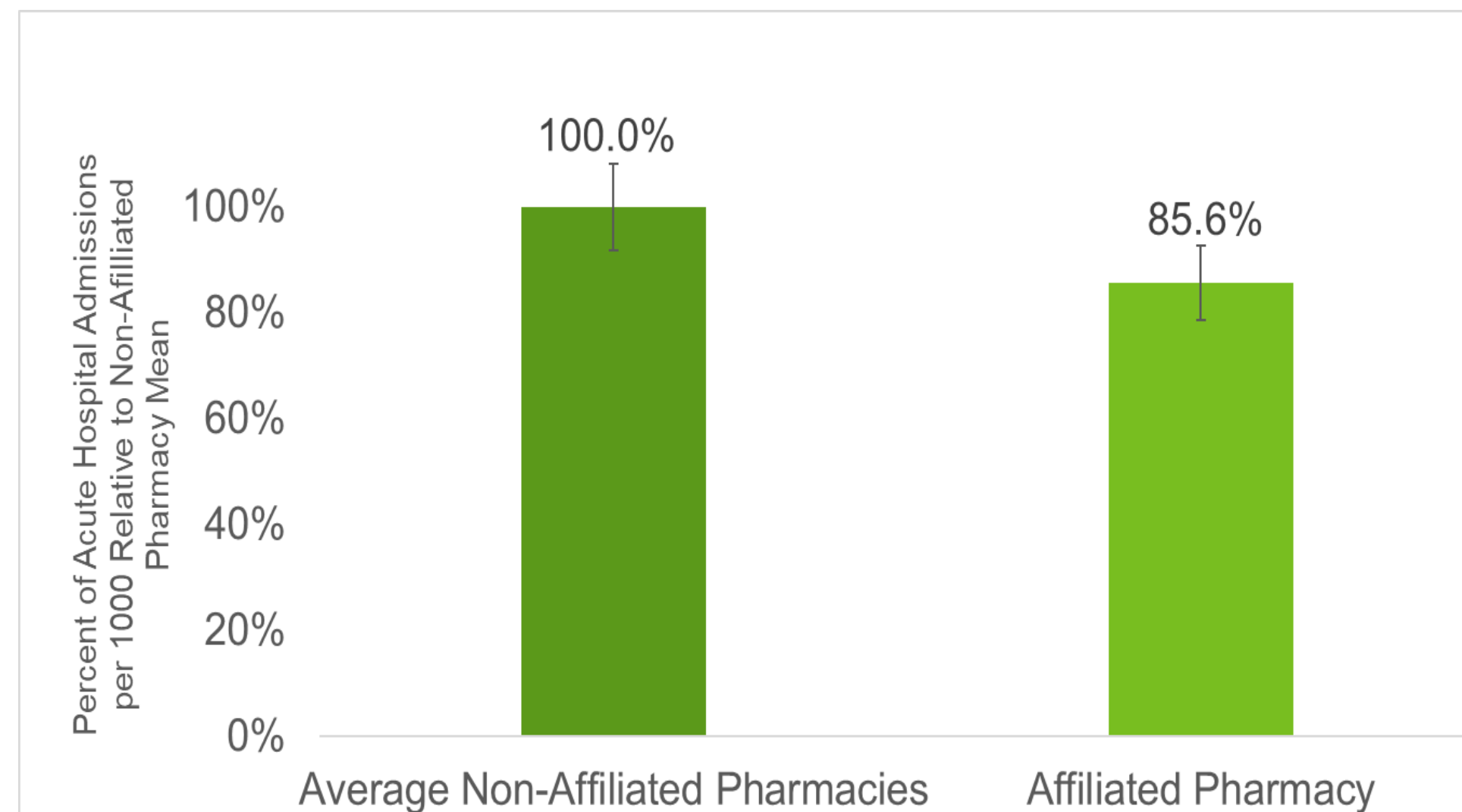
## Methods

- This study is a retrospective analysis of Medicare Part D-insured patients using Medicare administered by a large national insurer.
- The primary test group included beneficiaries who used the insurer's affiliated specialty pharmacy OCOE.
- Those using cancer medications within the first 8 months of 2022 (hospice and delegation excluded) were included.
- Predictors and covariates of interest were measured in a four-month window starting with their first qualifying oncology medication fill.
- Outcomes, including acute hospitalization rates and medical costs, were measured in the 12 months after the pre-period.

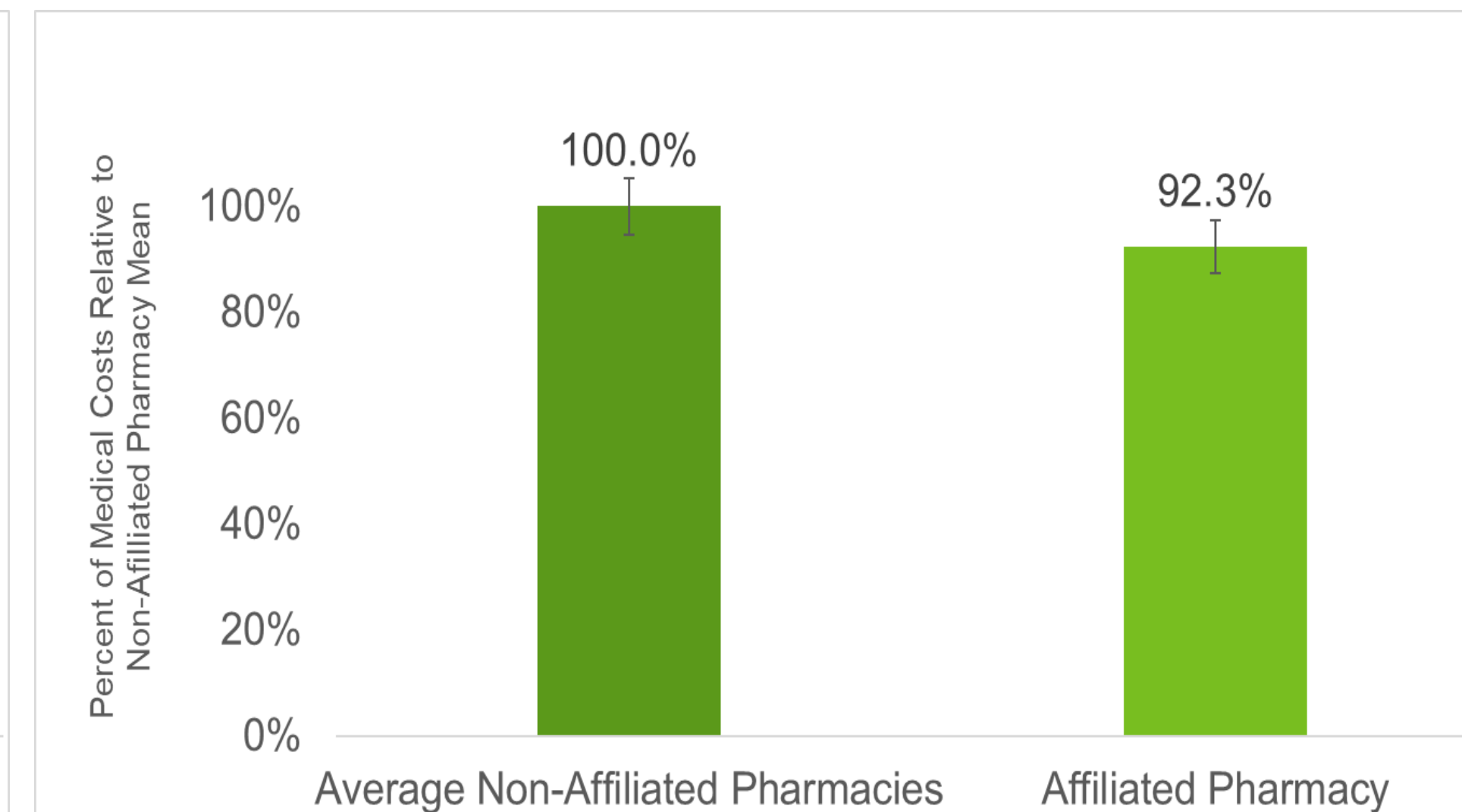
**Control Variables:** age, sex, # distinct specialty drug classes, # distinct brand name specialty drugs, contract, low-income subsidy code, provider super group, specific oncology drug (restricted to drugs offered by the target pharmacy)

## Results

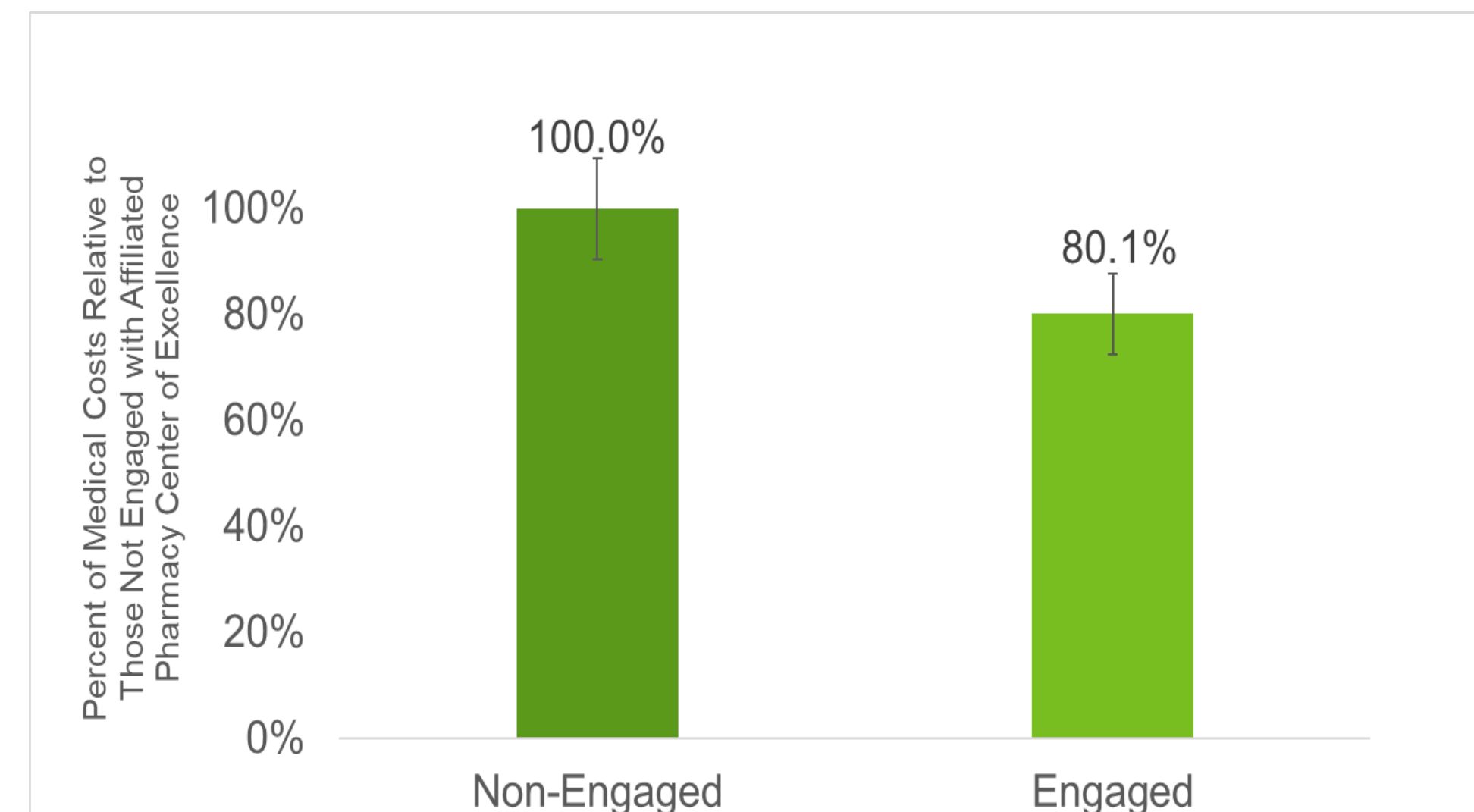
**Figure 1. Relative Acute Hospitalizations for Non-Affiliated versus Affiliated Pharmacy**



**Figure 2. Relative Medical Costs for Non-Affiliated versus Affiliated Pharmacy**



**Figure 3. Engagement with Oncology Center of Excellence and Reduction in Medical Costs**



Regression analyses estimated that affiliated pharmacy use was associated with 14.2% fewer acute hospitalizations ( $P = .004$ ). Analyses indicated reduced annual costs of 7.7% ( $P = .005$ ). Of patients who used the affiliated pharmacy, those engaged with dedicated clinicians had a 19.9% reduction in medical costs relative to those who did not ( $P < .001$ ). The association between affiliated pharmacy use and medical costs was fully explained via mediation analysis by center engagement ( $P < .001$ ). Highly similar results were obtained using a propensity score matching method.

## Conclusions

- High-touch clinical programs with dedicated resources reduce negative health events in the form of acute hospitalizations and lower overall medical costs for oncology patients with Medicare.
- Patients engaged in OCOE programming benefit from greater reductions in medical costs than those not engaged.

## Limitations

- Unable to account for non-affiliated pharmacies clinical programming and engagement.

## Future Research

- Determine drivers for OCOE engagement
- Determine which cancer medications lead to greater reduction in medical costs to further develop clinical program intensity.
- Complete analysis for other specialty disease states.

## References

- Vanscoy GJ. The Emergence of Specialty Pharmacy. *J Manag Care Spec Pharm.* 2020;26(3):229-233.
- Patel K, Chim YL, Grant J, et al. Development and Implementation of Clinical Outcome Measures for Automated Collection Within Specialty Pharmacy Practice. *J Manag Care Spec Pharm.* 2020;26(7):901-909.

## Disclosures

The authors of this presentation are employed by the affiliate pharmacy and parent company