Patient Navigator Program

Focus MI

September 25, 2019

Integrating a Pharmacist into the Ambulatory Cardiology Setting

Webinar #3

AMERICAN COLLEGE of CARDIOLOGY

Agenda

Time	Topic	Presenter
12:00pm EST	**Welcome and Introductions**	Dr. Ty Gluckman
	Patient Navigator Program: Focus MI "Integrating a Pharmacist into the Ambulatory Cardiology Setting"	
12:05	Integrating a Pharmacist into the Ambulatory Setting	Kris Howard, PharmD, BCPS, AACC Cardiology Clinical Pharmacy Specialist Ashley Marie Parrott, PharmD, MBA, BCACP Supervisor, Ambulatory Clinical Pharmacy *Parkview Regional Medical Center, Fort Wayne Indiana*
12:45	**Q&A**	All
12:55	**Wrap-up & Next Steps**	Dr. Ty Gluckman

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Integrating a Pharmacist into the Ambulatory Cardiology Setting

Kris Howard, PharmD, BCPS, AACC
Ashley Marie Parrott, PharmD, MBA, BCPS, BCACP

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Objectives

- Review literature describing pharmacist participation in multidisciplinary clinic and pharmacist-managed clinic settings.
- Describe the implementation of a pharmacist service in the cardiology practice of a community-based health system.
- Identify key components of service development.

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Establishing the role of the Ambulatory Cardiology Pharmacist

Kris Howard PharmD, BCPS, AACC;

Cardiology Clinical Pharmacy Specialist

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Early Evidence in Heart Failure

- Duke University Cardiology Faculty Clinic
  - Multidisciplinary clinic
  - 181 subjects randomized
- Recommendations to physician
  - Patient survey
  - History
  - Medication profile review
- Pharmacist education visit

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Arch Intern Med. 1999;159:1939-1945

Focus of Pharmacist Recommendations

- ACE Inhibitor
  - ✓Usage and dosage
  - ✓Alternate vasodilators in intolerant patients
- Avoiding Digoxin toxicity
- Avoiding drug interactions & contraindicated drugs
- Individualized recommendations

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Arch Intern Med. 1999;159:1939-1945

Pharmacist Intervention

- Significant reduction in all cause mortality and heart failure events
- Trend toward increased ACE Inhibitor usage
- Target ACE Inhibitor dose significantly improved
- Alternative therapy

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Arch Intern Med. 1999;159:1939-1945

Pharmacist Managed HF Titration Clinic

- University of Illinois at Chicago
  - Medication Titration Assistance Clinic (MTAC)
- Retrospective Review
- Primary Endpoint
  - Target or maximal tolerated dose at 12 months

Annals of Pharmacotherapy. 2018;52(8):724-732

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Pharmacist Managed vs General Cardiology

ACE-I/ARB and BBs	Initial MTAC	Final MTAC	Initial GC	Final GC	*P-value*
Prescribed	90%	95%	82%	87%	NS
Target or maximal-tolerated dose	4%	64%	32%	40%	*P = 0.01*
>50% goal dose		83%		69%	*P = 0.04*

MTAC: Medication Titration Assistance Clinic
GC: General Cardiology

- MTAC patients more likely new heart failure diagnosis

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Annals of Pharmacotherapy. 2018;52(8):724-732

Hypertension Management

- Multi-center, cluster-randomized analysis
- 9- or 24-month pharmacist intervention vs usual care
- Diverse population
- Primary outcome trend toward improvement
  - Secondary outcomes showed significant reductions in SBP and DBP

Circ Cardiovasc Qual Outcomes. 2015;8:235-243

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Who is Parkview?

Parkview Health

- Not-for-profit community based health system
- Eleven hospitals in Indiana
- Research Center
- Employer health plan

Parkview Physicians Group

- More than 100 locations in northeast Indiana and northwest Ohio
- Nearly 800 providers
- More than 40 specialties

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Parkview – Ambulatory Pharmacy Services

- Outpatient Pharmacy
- Meds2Beds
- Medication Assistance Program
- Specialty Pharmacy
  - Embedded model

Distribution

- Primary Care
  - Diabetes
- Specialty Care
  - Cardiology
  - Oncology
  - Anticoagulation
  - Falls Clinic
  - Movement Disorders Clinic

Clinical

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Parkview Health Timeline

- 2015 Hypertension Clinic
- 2016 Lipid Clinic
- 2018 1.0 Full time pharmacist
  - Hypertension (1- 0.5 day per week)
  - Lipid (1- 0.5 day per week)
  - Heart Failure (4- 0.5 days per week)
  - Bundle Payments for Care Improvement (4- 0.5 days per week)

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Multidisciplinary Hypertension Clinic

2015

- Initial visit
  - Physician and pharmacist
- Follow-up visits
  - Nurse practitioner
  - Dietician
- General HTN education
- Initial pharmacist interview and education

2018

- Nurse Practitioner / Pharmacist Clinic
- Follow up visits with either NP or pharmacist
- Collaborative practice agreement (CPA)

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Multidisciplinary Lipid Clinic

2016

- Initial visit with physician
- Pharmacist education
- Dietician education
- Follow-up visits with nurse practitioner

2018

- Education class prior to initial visit
  - Initial physician visit more efficient
  - Pharmacist evaluates medication history
  - Dietician Meal Planning
- No NP / Pharmacist clinic
  - Collaborative practice agreement (CPA)

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Heart Failure Clinic

2018

- Existing clinic
- Education of new patients
  - Mitigate risk of non-adherence
- Independent pharmacist follow-up visits
  - Achievement of GDMT
  - Escalate as appropriate
- Collaborative practice agreement

2019

- Optimization in process
- Initial visit
  - Pharmacist to see patient prior to NP
- Dietician added to second visit

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Lessons Learned

- Cardiac patients are very complex – take advantage of all resources to best care for them
- Know your role – escalate as appropriate
- For initial visits, pharmacist first
- Scheduling can be a challenge

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Practical considerations for service development & implementation

Ashley Marie Parrott, PharmD, MBA, BCPS, BCACP

Supervisor, Ambulatory Clinical Pharmacy

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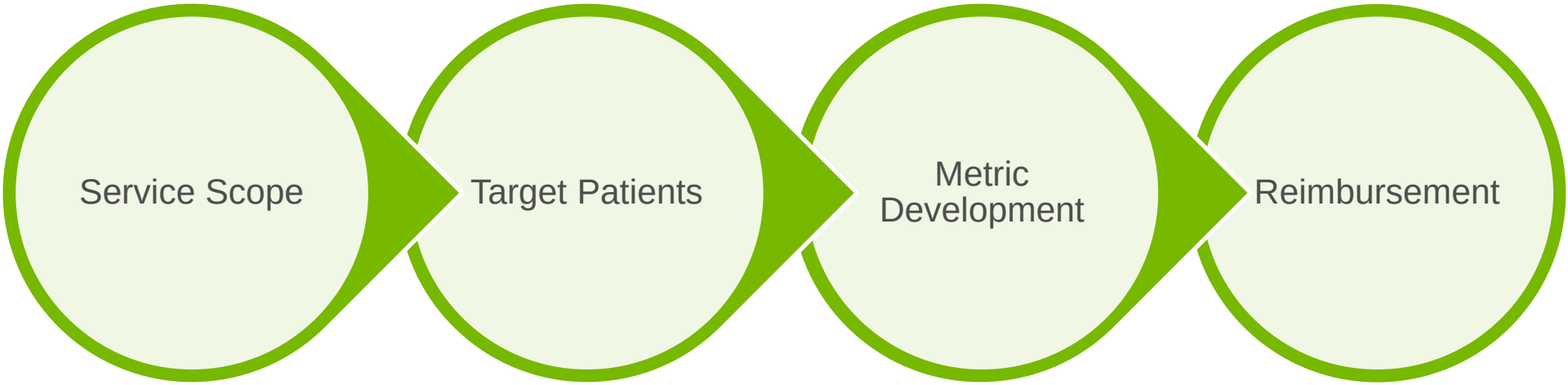
Roadmap



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Practicing at the top of your license

- Comprehensive medication management (CMM) is…
  - Assessment of each patient's medication to ensure appropriateness, safety, and efficacy
  - Coordinated, team-based care
  - Executed through collaborative practice agreements (CPAs)

https://www.accp.com/docs/positions/misc/CMM%20Brief.pdf

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Collaborative Practice Agreement (CPA)

- Relationship between pharmacist and provider
- Defines pharmacist role and functions
- State specific
- Often used to facilitate chronic disease management

https://www.cdc.gov/dhdsp/pubs/docs/CPA-Team-Based-Care.pdf

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Identify target patient population

- Physician champion to help guide?
- Target disease state?
- Specific population?
  - The more specific you can be, the better!
    - Ex: HFrEF, not currently on GDMT, discharged within last 7 days
- Can your organization's IS team help build a report to identify patients?

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Metrics

What?

- What should be measured?

How?

- How are we going to measure it?

Who?

- Who should we share it with?

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Establishing Outcomes

Economic	• Revenue Stream • Cost Savings
Clinical	• Relevant clinical markers • Related health service utilization
Humanistic	• Patient Satisfaction • Provider Satisfaction
Utilization	• Referrals • Completed Visits

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Am J Manag Care. 1999 Apr;5(4 Suppl):S217-24.

Economic Outcomes

- Internal
  - Revenue Stream
  - Cost Savings
- External
  - Value-based reimbursement structures
    - Per member per month (PMPM) reimbursement
    - Quality bonuses
    - Reduced member expenses to plan

Pharmacotherapy 2000;20(10 Pt 2):243S–252S
Am J Health Syst Pharm. 2014 Aug 15;71(16):1375-86

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Clinical Outcomes

- Relevant clinical markers
  - HEDIS
  - STAR
  - ACO
  - Value-based contracts
- Related health service utilization
- Interventions made

Am J Health Syst Pharm. 2014 Aug 15;71(16):1375-86
https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Value-Based-Programs.html
https://qpp.cms.gov/

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Humanistic Outcomes

- Patient Satisfaction
  - Other things to consider:
    - Quality of life
    - Pill burden
    - Patient cost savings
- Provider Satisfaction

Pharmacotherapy 2000;20(10 Pt 2):253S–258S
Am J Manag Care. 1999 Apr;5(4 Suppl):S217-24.
https://www.pharmacist.com/article/assessing-outcomes-pro-how-pharmacies-can-use-patient-reported-outcomes-better-manage

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Utilization

- Referrals
- Completed Visits
- Improved access

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The How & The Who

- Once you have determined which metrics to measure, how will you measure them?
  - IS resources, existing structured resources?
- Who will you share outcomes with?
  - Service line leadership, departmental leadership, patients?

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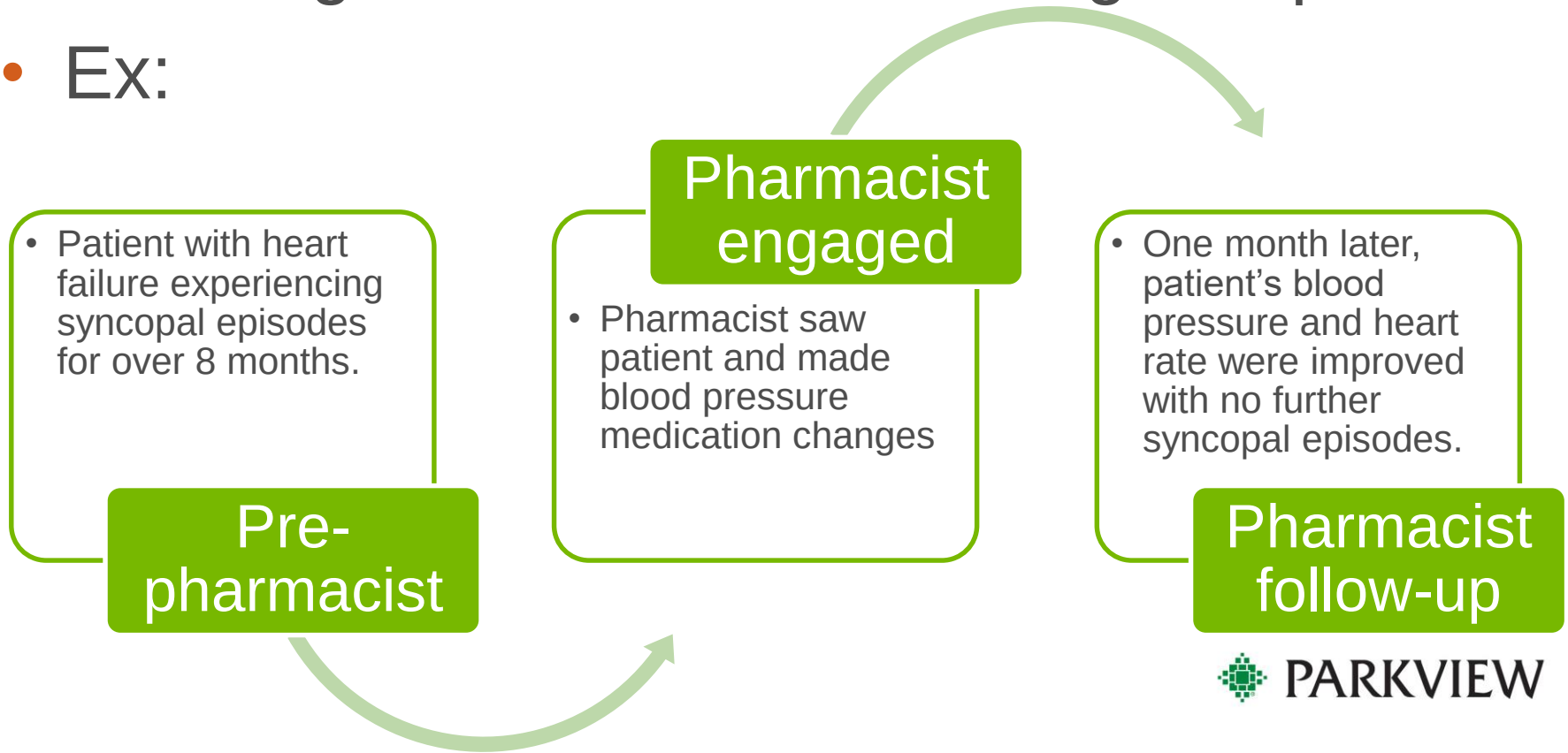
Patient Stories

- Patient stores can be impactful while other meaningful clinical data is being compiled
- Ex:



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To bill or not to bill…

- Organizational alignment

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Reimbursement Opportunities

Physician-based Clinic

- 99211*
- Transitional Care Management*[1]
- Chronic Care Management*[2]

Hospital-based Clinic

- Facility Fee
- Transitional Care Management*[1]
- Chronic Care Management*[2]

**denotes incident-to*

Opportunities may vary by state!

1. https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Transitional-Care-Management-Services-Fact-Sheet-ICN908628.pdf
2. https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/ChronicCareManagement.pdf

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What is incident-to?

- Pharmacists are not Medicare Part B recognized providers
- Services are billed under (or incident-to) the Medicare recognized provider
- CMS specific criteria for using incident-to billing based on facility vs non-facility locations

https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c15.pdf

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For your consideration…

MAC determination

CMS regulations

State scope of practice

Organizational alignment

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Regional Practices

- Find out what others are doing!
- Don’t forget to consider pharmacy state scope of practice
- Each state may vary slightly, changing opportunities (ex: states with provider status for pharmacists)

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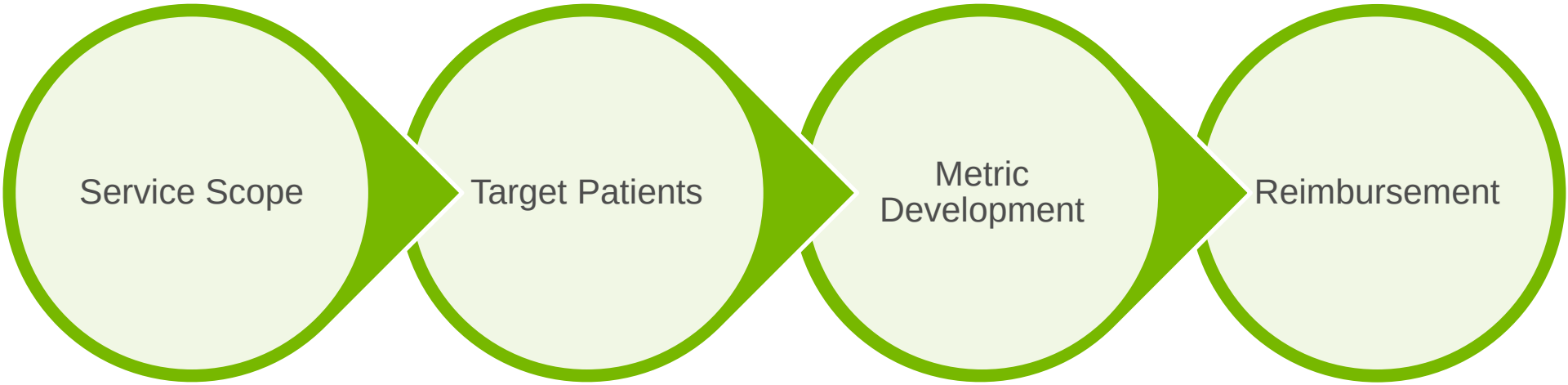
Roadmap Revisited



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Integrating a Pharmacist into the Ambulatory Cardiology Setting

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QUESTIONS

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Learning Network - Listserv

Join the Patient Navigator Community:

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Save the Date!
National Webinar Series 2019

Webinar 4: Wednesday, December 11th, 2019 12:00-1:00pm EST

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