



In sync

Appointment-based medication synchronization can help your patients and improve pharmacy efficiency

by Jayne Cannon

For community pharmacists, patient care is No. 1, and supporting patient adherence is a critical element of patient care. More than 90 percent of NCPA member pharmacies offer comprehensive adherence programs, according to the 2020 *NCPA Digest*, sponsored by Cardinal Health. For many pharmacies, that simply means setting all the patient's chronic medications to a single pickup day.

Now some pharmacies are taking med sync a step further, offering not only medications bundled for same-day pickup, but adding an appointment into the mix.

If you're not using an appointment-based model (or ABM), you may be thinking that it's "one more thing," and you just don't have the time for it. But pharmacists who are using the appointment-based model would encourage you to make the time. It can be a business-changing move.

"A number of pharmacists who have implemented the appointment-based model during the COVID-19 pandemic have found it to be so helpful to their business and their practice that they say that they will never go back to the way they used to practice," says NCPA Innovation Center President

Kurt Proctor. "The model adds tremendous efficiency to a pharmacy operation, improves care, and helps pharmacists identify gaps in care when they exist."

MULTIPLE BENEFITS

Tana Kaefer, clinical coordinator for long-term care pharmacy at Bremono Pharmacy in Richmond, Va., ticks off the positives about using an ABM: "Workflow, staffing (especially delivery staff), product ordering, STAR ratings, patient adherence, promoting other clinical programs. Pharmacists have a clinical overview of patient profiles and med lists, and it's more efficient for doctors because we request all refills at one time."

Adherence to medications not only improves patient outcomes, but it also decreases hospitalizations.

"We live in a convenience-driven world where, in many places, you can get groceries delivered to your doorstep and schedule an oil change with a click of a button," says Bri Morris, NCPA Innovation Center senior director, program development. "The convenience of simplifying the prescriptions to one single pickup each month or one delivery per month saves the patient time and

money. The really amazing thing is that med sync has infinite benefits to the pharmacy as well."

NOT ROCKET SCIENCE

Getting started with med sync "is not rocket science," Morris says. (The continuing education article in this issue of *America's Pharmacist*® provides an overview.) Morris says she encourages anyone who is interested to sign up for NCPA's Simplify My Meds® program. "It's an exclusive member benefit of NCPA and is free to NCPA members. You'll find tools, resources, and you can even request a marketing kit to get started. Your pharmacy management system or clinical software solutions are also great resources."

Convinced?

For many, an ABM is often cited as a cornerstone for improving adherence. The use of an ABM also gives pharmacies the time and resources to drive quality improvement through the delivery of other valuable patient care services. Using an ABM, pharmacies can deliver high-quality, cost-effective, patient-centered care to meet the demands of a changing health care landscape and ensure the sustainability of community pharmacy practice.

In sync

HOW ABM IS WORKING: Bremo Pharmacy | Richmond, Va.

At Bremo Pharmacy, it took a few years to really get ABM working. “We started in 2014 with the concept,” Tana Kaefer says, “but it took a good two-plus years to get our staff on board and really run the program how it was meant to be run.” Bremo’s med sync program is almost 100 percent technician-run, she says.

It hasn’t been hard to get patients interested in the program, Kaefer says. “We have people transfer to our pharmacy because of this program and how it simplifies medications for either the patient and/or their caregiver who was having to manage this,” she says. “If patients don’t want to participate, they don’t have to, but then the packaging

and delivery fees are not waived.”

Special packaging and free local and UPS delivery are included in the Bremo program. Some insurances reward 90-day supplies, and because Bremo only does 30-day fills, they miss out on the incentives. But they don’t really mind.

“We feel like we have better adherence with our 30-day supplies and monthly calls because we can identify issues more quickly and make changes if needed,” Kaefer says. She remembers once calling a patient who said she didn’t need her inhaler. “When I questioned this further it was because she couldn’t figure out how to put it together,” Kaefer

says. “As a result of this, I put a note in her profile, and we assembled the inhaler before sending to the patient. If she had a 90-day supply, we wouldn’t have known this for three months.” That action might have prevented a hospitalization for her COPD, Kaefer points out.

The program has other benefits, Kaefer says. Having an up-to-date medication list is helpful. Last year, Kaefer had a patient who was prescribed at least three diuretics due to hospital admissions and multiple doctors not communicating. The patient was not following instructions and was taking all of them for a short time. “When we got a new one we called the doctor and they were

HOW ABM IS WORKING: Norland Avenue Pharmacy | Chambersburg, Pa.

Norland Avenue Pharmacy has offered ABM-based med sync for some six years, but revamped the program about a year ago, says Ashli Yoder (below), clinical services pharmacist. The pharmacy moved to a newer model because its sync patient numbers were growing and the pharmacy wanted to implement a service that encouraged regular communication with its patients, relationship building, and promotion of patient adherence to their medications, Yoder says.

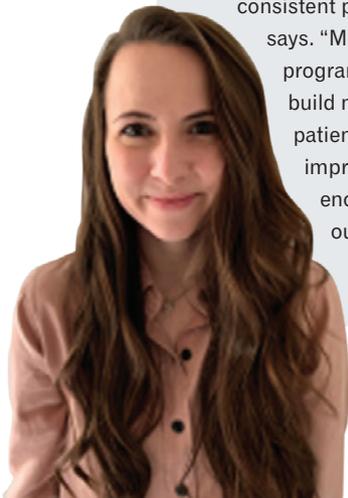
“This new model has improved the efficiency of our sync program and financially has helped us grow due to more consistent prescription filling,” she says. “Most importantly, this program has helped our staff build meaningful provider-patient relationships, has improved patient adherence, and has encouraged our patients to play an active role in their health care.”

The Norland staff hasn’t had issues getting patients to participate. “Whenever we sign someone up for the sync program, we explain the value of filling all their medications at once and how it can be more convenient and helpful for the patient in the long run,” Yoder says.

She continues, “We have quite a few patients who have turned around their patient adherence and understanding of their medications from being on the sync program. In one example, we had a patient who was filling her medications at different times during the month, had poor adherence, and didn’t know what medications she was taking. She also was a COPD patient and didn’t understand the difference between her maintenance and rescue inhalers. After working with her for a few months and educating her on her medications, she now fills everything on time each month and has a much better understanding of her medicines.”

There are 780 patients enrolled in the Norland med sync program. The pharmacy splits these patients into three groups alphabetically and each group is managed by a different health coach. “Our health coaches are pharmacy technicians that call their designated patients to check in and fill their medications,” Yoder says. “Patients are set up to fill on a 30-day or 90-day sync cycle. Health coaches are also responsible for getting refills from the doctor for these patients, reminding patients when they will need refills for future months, and addressing their patients’ calls and questions.”

The coach also takes care of Dispill packaging and blister packs for patients who need a little extra help with medication adherence. “Once sync medications are filled, our will-call technicians provide a personal reminder call if medications are not picked up by their sync date,” Yoder says. “We also offer sync patients one free delivery each month.”



unaware of what he was taking," she says. "He had recently been seen for acute renal failure. The doctor was so thankful that we intervened. I feel that the sync program helped us be more aware of what he was getting."

Caregivers like the ABM model, Kaefer says. Because of the pandemic and its effect on nursing homes, many people moved their family members home with them. "People told us how much easier we made it to give medication accurately."

There are 560 patients in the program at Brema. "Our goal was to have 50 percent of patients in this program, and before COVID vaccines we were meeting this goal," says Kaefer. "Now the COVID vaccine patients are skewing the data."



Tana Kaefer, clinical coordinator for long-term care pharmacy at Brema Pharmacy, consults with a patient.

HOW ABM IS WORKING: Chet Johnson Drug | Amery, Wis.



Chet Johnson Drug began its ABM program about six years ago. It started out on paper and four years ago started using PioneerRx, says pharmacist Matt Wlodyga.

"We did not have a med sync program in place, and we needed to get on board," he says. "We wanted to provide the best service we could and with the help of PDS, we found this method."

The benefits are limitless, Wlodyga says. "It has freed up a lot of our time

during the day where we can put more focus on acute medications and other services. Our pharmacy is more efficient in the filling process overall.

The biggest thing is just the feeling of having more time."

At Chet Johnson, patients fill out a form agreeing to be in the med sync program. From there, a pharmacist looks at the patient's medication to determine what should be synced and what should be PRN. They also determine if the patient wants a 28-, 30-, or 90-day supply.

"After picking out a date, the hardest part is to sync all of the medications, which can take a few months before things work out," Wlodyga says. "When a patient's sync date is coming up,

we have a pharmacist queue up the appropriate medication that needs filling. After that, a tech runs the script and places it in the baskets specifically used for med sync. The techs fill the med sync scripts when they have time, after catching up on acute scripts. From there, we have a person call or text the patient and take care of anything else that needs to be filled or cancelled."

The pharmacy, which has about 1,700 patients on med sync, has its own spin on ABM, Wlodyga says.

"This process works better and more efficiently than doing it the other way. We would rather return something than have to call the patient more than once." ■

Jayne Cannon is NCPA director of communications.