



# Adherence *to Care*

*Hayat Pharmacy owner Hasbim  
Zaibak and wife Bushra.*

# With five locations in Milwaukee, Hayat Pharmacy provides services to an often underserved patient base

by Chris Linville

photos by Douglas Brueckner

For Hashim Zaibak, PharmD, owning an independent pharmacy isn't about financial rewards. For him, it goes well beyond that.

"It's nice to have a business where you can actually help the community get healthier," he says. "That's what I like about it. It's not just a business to make money."

And for more than three years, helping his community is what he's strived to do. Zaibak opened Hayat Pharmacy in Milwaukee in January 2011, and has since added four more stores. (Hayat is the Arabic word for "life.") The five pharmacies primarily serve an urban population that Zaibak says has been underserved in receiving adequate health care.

***We wanted to offer an independent pharmacy that's unique and different, and takes care of patients who need certain services that are not offered by the competition.***

"Most of our patients are either cash paying or on Medicare or Medicaid from the inner city, many have transportation issues, and many have difficulty coming to the pharmacy," he says. "So there definitely are a lot of people who need the services that we have. When we first started, we

didn't just want to offer another pharmacy in Milwaukee; there are plenty of retail pharmacies here. We wanted to offer an independent pharmacy that's unique and different, and takes care of patients who need certain services that are not offered by the competition."

Zaibak notes that when patients literally can't get to the pharmacy, the already challenging goal of adherence becomes even more difficult. So he sought a way to help lessen the impact of that problem.

"Medication costs aren't the reason these patients were not adherent; the reason is they couldn't get to the pharmacy to get the medication," he says. "So we offer a home delivery service. We initially hired a part-time driver, and now we have about seven full-time drivers delivering medications to people who need them."

Zaibak's colleagues are taking notice of this type of dedication to patient care. He was honored as the Pharmacy Development Services 2014 Pharmacist of the Year, and received a One-to-One Patient Counseling Award from APhA earlier this year.

## **ALL IN FOR INDEPENDENCE**

Zaibak was born in Palestine and came to the United States in 1992. He always enjoyed math and science, and says he wanted to do something where could have an impact and help people. Zaibak says his father also hoped to have a son who was a pharmacist, so that pointed him toward the profession. He graduated from the University of Illinois at Chicago in May 1999 and went to work for Osco Drug in Milwaukee. In the next decade Zaibak rose through the ranks, and after CVS bought Osco in 2006, he became district pharmacy supervisor, managing 22 CVS pharmacies throughout Wisconsin.



By 2010 Zaibak started thinking seriously about opening his own pharmacy. He was just looking for the right opportunity. He learned that there was a medical group moving into a new building, so he spoke to the physicians about having a pharmacy inside the new clinic.

"They were pretty excited about that," he says. "They wanted to have an independent pharmacy, so they offered a site within their location."

In the year before the clinic was to open, Zaibak says he did a crash course on pharmacy ownership, attending training sessions, reading books, and meeting with other independents to learn some of the "do's and don'ts" about starting a new pharmacy.

"It was a one-year process because I was opening from scratch," he says. "I wasn't buying another pharmacy that was already running. I learned, and when they opened their doors in January, we were there and in business on the first day."

Zaibak went all in with his first pharmacy, using more than a decade's worth of funds that he had set aside.

"I put all of my savings into the pharmacy," he says. "They say don't put all of your eggs in one basket. I guess I didn't listen to that – I put all of my eggs in that basket."

Hayat Pharmacy, which is affiliated with McKesson Corp.'s Health Mart, initially consisted of Zaibak, his wife Bushra, and a technician. Bushra is not a pharmacist, but has been helpful with data processing and is something of a customer service ambassador. Business grew steadily and more staff came on board. Zaibak says that the clinic where Hayat is based is busy, with about 20 exam rooms that can accommodate some 10 prescribers at a time. Only a few months after Hayat opened, Zaibak was approached by a couple of his pharmacist friends who were looking to get out of the chain environment. He created a partnership with them and the second Hayat location (also in a medical clinic) opened in August 2011.

"Opening the second location was easier after opening the first," he says, adding with a laugh, "Let's put it this way—there were less mistakes to be made the second time around. There were still some challenges, but it was definitely easier for sure."



***Zaibak poured in more than a decade's worth of savings to open his first pharmacy***

Zaibak was able to sharpen his skills after that by attending an NCPA Ownership Workshop in Minneapolis. "That was excellent," he says. "I learned a lot of things there. I wish I had done that training before I opened my first pharmacy – there would have been a lot fewer mistakes made."

Some two years after opening his first pharmacy, Zaibak opened his third location (and first free-standing pharmacy) in December 2012, followed by a fourth in January 2013 (in an urgent care clinic). His fifth pharmacy opened in March 2014 in a specialty clinic. Zaibak owns 100 percent of the first Hayat Pharmacy, with the other four being partnerships. The five pharmacies are within a 10-mile radius, allowing him to visit all of them in a day if he chooses to do so.

"I really wanted to establish multiple locations," Zaibak says. "I wanted some partners where, if I wanted to take an extended vacation, I can do that without having to worry about the business. I wanted to surround myself with

people who believe in the same vision we have, where I can disconnect from the business without having any impact on the quality of the business."

The five pharmacies have a combined staff of about 75, with approximately 10 pharmacists. Hayat has been heavily active in promoting itself, with a comprehensive website ([www.hayatrx.com](http://www.hayatrx.com)) that contains numerous videos and advertisements it has done, and links to Facebook and Twitter.

**ADHERENCE PROGRAMS**

For Zaibak, a crucial factor in keeping his patients healthy is making sure they are adherent with their medications. He has completely embraced NCPA's Simplify My Meds® program ([www.ncpanet.org/smm](http://www.ncpanet.org/smm)). SMM is designed to help pharmacists consolidate and coordinate a patient's prescriptions so they can all be refilled on the same day each month, improving patient adherence and helping pharmacy operations become more efficient.

"I went to an NCPA convention and heard about it," Zaibak says. "I really loved it. It's a simple, simple idea, yet it can have a major impact on patient adherence. One of our technicians [Tiffany Lewis] learned it and really took it to the next level. She loved the program and she immediately started putting people into it. She has almost 200 patients right now in only one single location. When patients call, they don't even ask for the pharmacist, they ask for Tiffany."

Zaibak also saw medication therapy management as another tool to increase adherence. For him, combining MTM and SMM made perfect sense. He has a clinical pharmacist (Omar Eliwa) managing the MTM services, and Zaibak credits his state association (Pharmacy Society of Wisconsin) for being proactive in offering MTM training and certification programs. He says that about 400 patients are enrolled in the adherence programs across all of the Hayat locations.

Along with providing home delivery of medications, Hayat staff will also do house calls for MTM sessions if necessary.

"We'll do between five and 10 [home visits] every week," Zaibak says. "Again, many of our patients have transportation issues; they are disabled, some are very elderly. Many don't know the basics of how to take their medication. We have patients who are blind, and we have patients who are amputees because of diabetes or have severe arthritis or other issues. For those patients, having the home MTM benefits them a lot. Obviously if we can do the MTM at the pharmacy, that's ideal. Financially it's easier when a patient comes to us, but if we have to go to them we will. And when you do a home MTM you really discover problems that you

## MEASURING SUCCESS

Getting patients to sign up for adherence programs is important. Keeping them adherent is more so. For Hashim Zaibak, PharmD, and his team at Hayat Pharmacy, tracking how their patients are doing is a key part of their job.

Hayat Pharmacy recently signed up with EQuipp, an online information management platform designed to help pharmacy organizations better understand the impact they have on patient care by providing dashboards of benchmarked performance information, based on accepted standards of quality care.

"We can look at how adherent our patients are and identify those who are not adherent, and find out what it is that is keeping them non-adherent in the MTM sessions," Zaibak says.

As Zaibak points out, adherence rates are one aspect that the Centers for Medicare & Medicaid Services uses in the Medicare Part D Star Ratings Program, a performance metric system used to rate prescription drug plan performance. With that in mind, Zaibak says, "We are trying to see what we can do to improve patient adherence to certain medications. For example, for oral diabetes medications, using EQuipp, we can go and find out what percentage of our patients are adherent versus what percentage are not. We can also identify what percentage of our patients who have diabetes are taking something such as an ACE inhibitor. Based on what we find out, that can create an action plan for us."

Zaibak continues, "It tells you where you are doing very well and where you can improve. And by us doing that, if we're doing well, we're directly or indirectly helping some of the Medicare plans achieve better star ratings. So it's a win-win situation; we're helping the patient become adherent and hopefully making them healthier, and improving our business too. Because when the patient is more adherent with their medications, that means we're dispensing more prescriptions, and we're helping the star ratings for the Medicare Part D and Part C plans, plus the Medicare Advantage plans."

Zaibak also says that improved patient adherence results in fewer hospital visits, decreasing overall health care costs.

"Let's say somebody gets hospitalized for an asthma attack. If we can show them how to use their inhalers properly, just by doing that basic training we can prevent that patient from being re-admitted into the hospital, and we all know how much it costs for hospitalization – thousands and thousands of dollars.

"If you think about it, our health care system nationwide costs us about \$2.6 trillion. Some studies have said if we can increase the number of prescriptions in the United States by 1 percent, we can decrease the overall health care costs by 0.2 percent, and 0.2 percent of \$2.6 trillion is still a LOT of money." –CL





***Among the Hayat Pharmacy employees, at least 10 different languages are spoken.***

don't really see when you do it at the store. For example, if a patient has multiple bottles of medication, then you can ask them if they are taking the medication correctly. You get to identify a lot more problems when you are at their house."

### **BREAKING DOWN BARRIERS**

Keeping patients adherent is always a work in progress. Throw in cultural and language barriers, as Hayat Pharmacy frequently sees, and that progress becomes even more complicated.

"Let's take a community like the Iraqi community, or the Somali community," Zaibak says. "A lot of them are new immigrants, they don't know the health care system yet in the United States, they might struggle with English, and they don't know why they should take their blood pressure medication, or why they should take their asthma medications."

To help serve such patients, Zaibak says he tries to hire people who speak multiple languages. "Among our employees we have about 10-11 different languages represented, so if we ever have to explain something in Spanish or Arabic or Vietnamese, we have somebody who can tell them how to use these medications," he says. "I know there are 800 numbers that you can call and get an interpreter on

the line, but it's not the same as the face-to-face interaction. That's always the best. When we started, we asked 'Who are the communities that we are serving? Who are the small minority communities in Milwaukee that we can take care of?' We identified those communities and hired people who speak their language."

Zaibak cites an example where native language communication helped solve a health issue. He says that several months ago one of Hayat's Spanish-speaking technicians was reviewing an MTM with a Hispanic diabetes patient who said that injecting herself with insulin was complicated and painful, and that was a reason she wasn't being adherent with her insulin. Her physician had prescribed a pen for her. The patient had been using another pharmacy prior to coming to Hayat, and was not aware that she was supposed to add a pen needle to the top of her pen with each use.

"What she was doing was using her old syringes to pull the insulin out of the pen and then injecting herself with the old-fashioned syringes," Zaibak says. "By having her in an MTM session, we told her that's not the right way to get the insulin out of the pen; all she needed to do was attach a pen needle to the pen. Those pen needles are super thin. It's just a lot easier to dial and inject using those new pens. By training her to do that, we saved her from serious diabetes complications. And by asking in her first language, that helped us significantly, because her English wasn't strong."

***A lot of times you need to have one-on-one sessions with the patient, give them some privacy and give them a demonstration of how to use these things. By just reading an instruction sheet, people don't know how to do things.***

Zaibak says that new technology with insulin pens is making it easier and less painful for patients to manage diabetes. "Having diabetes is never 100 percent convenient, but it's a little bit more convenient than it used to be. But if you don't teach them how to use these pens and how to use these pen needles, patients aren't going to inject themselves properly, and you aren't going to get the correct dose."

Treating people who have been in the hospital can also present obstacles, as was the case with another diabetes patient. The physician discharged her on sliding scale insulin.

"They probably gave her a printout of instructions, but she probably did not keep that printout, and threw it away because she didn't know it was important," Zaibak says. "So she went home and she didn't know how much insulin she should inject. So when we went to her house to do an MTM we noticed that her blood sugar was high, and we asked her when the last time she injected herself with insulin was. But it turns out that she hadn't checked herself because she didn't know how much insulin to inject. So we called her doctor to find out what her dose should be, and then we gave her instructions and got her blood sugar under control."

Zaibak says that health care professionals need to see things from a patient's perspective when providing information.

"We sometimes assume that by giving patients written instructions, that we've really done our job, and covered our backs," he says. "We just tell them to read it and memorize those instructions. It just doesn't work that way. A lot of times you need to have one-on-one sessions with the patient, give them some privacy and give them a demonstration of how to use these things. By just reading an instruction sheet, people don't know how to do things."

## **BUYING IN**

Zaibak says that in theory you can create the most effective adherence programs available anywhere, but, he points out, "If you don't sell it to your employees and convince them that it's the right thing to do, it's never going to succeed. You have to surround yourself with people who believe in the idea; you have to empower them, give them all the tools they need, and make sure it's a win-win situation. That's the only way you are going to succeed."

The primary theme, Zaibak says, is that "You have to make sure you get everybody is engaged. Everyone knows about our program."

As an example, Zaibak says that all of Hayat's delivery drivers have iPads. He says that if a driver is visiting a patient's home two or three times a month, then that patient is probably a candidate for SMM. The driver will take the patient's name and talk to an SMM specialist on the phone (every Hayat location has an SMM specialist). Then the patient is called and usually enrolled in the program, and their medications are synchronized.

"With their iPads, our drivers can FaceTime [an interactive video program] with the pharmacist immediately. If patients have a question about their medication, they can immediately talk to [and see] a pharmacist and ask any questions that they have about their medication. If the driver notices that the patient has 10 or 15 different medications, they will talk to the MTM pharmacist and say, 'Hey, this person might be a good candidate for an MTM session.'"

In Zaibak's view, everybody shares when positive outcomes are achieved. "Nobody can claim that they own the program or they are the one who is behind its success," he says. "I can't claim that this success is related to me. I talk to other pharmacists and see what's working in other states and other pharmacies, and I bring the idea to my team, and we all agree what our priorities are, and based on that, we implement certain programs."

Providing the drivers with iPads is one way that Hayat incorporates technology into its practice. At the store, Eliwa, the pharmacy's clinical MTM pharmacist, has an iPad with an app of MTM videos.

"He can quickly and easily show patients how to use their inhaler, how to use their insulin pen, how to control their diabetes, their blood sugar, their blood pressure, their cholesterol and a number of other things," Zaibak says. "We use the technology as much as we can to improve the health of our patients. There is always the option of calling the pharmacist, but it's better if you are able to do some-



thing like FaceTime, because you can see them and it's just an easier way to communicate."

### SEEKING HEALTHIER HEARTS

Hayat Pharmacy has been actively involved with Million Hearts (<http://millionhearts.hhs.gov>), a national initiative that has set an ambitious goal to prevent 1 million heart attacks and strokes by 2017. The Centers for Disease Control and Prevention and Centers for Medicare & Medicaid Services are the co-leaders of Million Hearts within the Department of Health and Human Services, working alongside other federal agencies. Through its Hayat Cares informational outreach program, Zaibak and other staff visit food pantries, churches, mosques, and senior centers to provide information on diabetes and heart health each month

"We as pharmacists can definitely help by working in our local communities to make this goal achievable," Zaibak says. "I can work with my local community to make this goal achievable nationally."

When doing community health seminars, the pharmacy uses CreativePharmacist.com ([www.creativepharmacist.com](http://www.creativepharmacist.com)), a one-hour a monthly program for independent phar-

***Zaibak and Busbra serve diverse communities at Hayat's five locations.***

macies developed by pharmacist David Pope. It's designed for pharmacists looking to set themselves apart from the competition by re-establishing themselves as a local health support knowledge base.

"It's one of the best programs ever" for health education, Zaibak says. "It's helpful because I'm too busy to do something similar on my own, so having something already created is helpful. The language in the program is easy for patients to understand. It's a turnkey program, and very easy to implement."

Zaibak says that Hayat Pharmacy will continue using all the tools at its disposal to improve patient health in the communities it serves, which keeps him excited about coming to work every day. Perhaps that's why he simply says, "I love my job." ■

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