

SYNCHRONIZE

Comprehensive Medication Review

Patient Information

Patient ID Number

10:41 AM

AT&T

- All 5
- Focus 3
- Starred
- Inbox
- Inventory Control 1
- Patient Calls 2
- Sync Patients 2

Edit

All

Today

Call 555-555-5555
Tue Apr 24

Tomorrow

Test Claim Mr Smith
Wed Apr 25
Mr. Smith (verify sync inventory)
Wed Apr 25

Next Seven Days

Sync Mr. Smith (Fill Day)
Fri Apr 27
Call 555-555-5555
Fri Apr 27



YOUR HEALTH



Coordinating a patient's refill schedule can improve adherence and profits

By Chris Linville

Photography by Harry M. Davis

Anybody who knows Tim Davis, PharmD, can tell you that when it comes to independent pharmacy, he's always looking for creative ways to increase efficiency, improve the bottom line, and above all, enhance patient care. So, when Davis attended a continuing education luncheon program on medication synchronization at an NCPA convention several years ago, he says, "I just became intrigued."

After Davis returned home—he owns Beaver Health Mart Pharmacy in Beaver, Pa., and newly opened Panther Specialty Pharmacy in nearby New Brighton, Pa.—he decided to implement a medication synchronization program in his own practice. However, he soon ran into roadblocks.

"I really had a hard time figuring out how to get started," Davis says. "I didn't know how to maintain it, how to market it—kind of the whole package. The idea of changing our business paradigm was a little bit overwhelming. It's an initiative that I wanted to do, but we never got off the ground."

However, a few years later, NCPA launched Simplify My Meds, a turnkey adherence program for NCPA members. Based on the concept of refill



Tim Davis (left) and his pharmacy team have embraced NCPA's Simplify My Meds synchronization program.

synchronization, the program helps to coordinate a patient's entire medication regimen to be refilled on the same day of each month, thereby eliminating potential gaps in therapy and improving medication adherence. Among the benefits are more predictable workloads, decreases in labor costs, and improvement with inventory control. (More information is available at www.ncpanet.org/adherence.)

The program started in the summer of 2011, and Davis jumped on board immediately. He explained the difference between Simplify My Meds and his failed earlier attempt at a synchronization program.

"This is something where NCPA has done a great job of supporting and promoting it," Davis says. "And by NCPA doing so, it really helps me keep it fresh and alive within the company. It wasn't just an initiative that I had for my staff and my company, it was something much larger [and] my staff could rally behind it. There had to be staff buy-in, and they had to see value in it for them to really embrace it and do well with it. And then there had to be some understanding of metrics after the fact."

Davis says the results were immediate. "We had some good training and marketing materials, so we were able to get some patients onboard fairly quickly." So far he says about 70 patients are in the synchronization program and he expects that number to grow steadily.

Of the patients, Davis says, "They absolutely love it because it gives them access to their medications and treatment, and also more one-on-one time with the pharmacist. It allows them to feel a little bit more in control of what's going on. And that's something as pharmacists we need to pay attention to. Patients can lose sight of their therapy simply by being disorganized. If we take a little bit of time to organize their therapy, we empower them to take one more step forward in achieving the outcomes that they desire."

Davis notes that caregivers also appreciate the service. "They are responding very, very well," he says. "If someone is caring for their mom, and they're coming in once a week to get two medications filled and then they can buy some OTCs at the same time—the fact that we're packaging everything up in such a way allows them

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to make a single trip and get more attention from the pharmacist because that visit is planned and scheduled.”

At the moment, Davis says his pharmacies don't charge a management fee to patients unless some form of adherence packaging is utilized. In those instances, the pharmacy would request a nominal fee to cover the cost of the packaging and workload to manage its use.

Davis says a patient may have a copay associated with the short fills of some medications required to get all of the prescriptions synchronized.

“We've recognized that this can be a sensitive issue, so we offset the burden by investing in the value of [the program] by providing some of the inexpensive short fills free of cost and not submitted to third parties. The patients really appreciate it, and the value of the program far outweighs the few dollars it may require to get a patient into their cycle.”

Staff Support

Davis says he has three pharmacists across his two locations focusing solely on managing medication synchronization, with technicians providing vital support. Again, he says the staff has accepted the program because it has a clear understanding of their roles and responsibilities.

“They love this program because they know that tomorrow, they are going to do these 10 steps, and the next day they are going to do these 12 steps,” Davis says. “They get in there and make it happen. It's the exceptions to the rule that burn our time and make us overly busy—needing a prior authorization, running out of refills, doing all of these things on the fly. The program works in such a way that exceptions to the rule now become

planned for and become our rules. So we're able to manage that well. Our workflow has also improved. It's beautiful to see how smoothly and how wonderful the workflow surrounding a synched patient works. I also think that the pharmacist also feels more in control of the patient's outcomes and the patient's therapy.”

Davis adds, “It's my feeling that there should be a study associated with perceived outcomes and achieved outcomes associated with synched and non-synched patients. I think what we will see is better outcomes simply by better input by health care professionals and the patients themselves.”

More Comprehensive Patient Profiles

Davis says that medication synchronization has provided benefits to both of his locations.

“We were surprised at how many of our patients, when we talked with them, found out that they were getting a prescription through mail order or through



Davis uses the pharmacy's iPad with a "to do" list application on it for synchronized patients.



Lynnette Holsinger, RPh, helps ensure that the synchronization program runs smoothly.

another outlet, and not necessarily receiving it through us,” he says. “By doing medication synchronization, the patient saw the value in us having 100 percent of the prescription profile filled and available locally through both of our locations. That allowed us to draw some of these prescriptions back into the pharmacy that we had lost for one reason or another—whether it be a \$4 plan, or a discount program, or if the patient was just confused and didn’t understand that they didn’t have to use mail order. That gave us the ability to talk to them about it and draw it back in.”

By drilling down a bit deeper, Davis and his staff were able to get more information about their patients’ buying habits beyond prescription medications, which helped both the bottom line and in getting a better sense of their health outlook.

“If people are at the supermarket, they [typically] buy their multi-vitamin while they are shopping there, instead of purchasing it at the pharmacy,” he says. “What we saw once we sat down and worked with these patients was a truer picture of their complementary

and alternative medicine [CAM] profile as well. So we learned about things such as their herbal supplements, their vitamins and minerals, and dietary supplements—by talking to them we were also able to draw those sales back into the pharmacy and, at the same time, make sure there were no problems associated with their CAM profiles as well as their traditional medication profiles. I think it gave us a truer picture of what people were taking to deal with certain problems, and what we could do to help impact those patients with the problems.”

Technology’s Role

As chairman of NCPA’s Innovation and Technology Committee, it should be no surprise that Davis tends to be ahead of the curve when it comes to technology. And Simplify My Meds gave him yet another opportunity to apply it to his practice.

“We had to devise a way to segregate patients in our pharmacy management system,” Davis says. “All of the patients have the acronym ‘SMM’ plugged in after their last name. So if a prescription comes in midweek, and it’s not a synchronization pharmacist filling it, that pharmacist is going to understand that it’s a synchronization patient, and we need to do something different and special for them.”

That’s where the pharmacy’s iPad comes into play.

“We utilize it in the store with a ‘to do’ list application on it,” Davis says. “It creates repeating reminders for the staff to complete particular actions associated with Simplify My Meds patients. So we know seven days prior to any fill, the iPad will prompt the pharmacist to check for prior authorizations and double check inventory and refills. Three days before the fill, it prompts the pharmacist to test bill those claims and ensure those prior authorizations refills and inventory are in place. One day before, it prompts everybody to prepare that fill and address any inventory issues that are necessary. And last but not least, on the fill day itself, it prompts the pharmacist to actually do that fill.”

There is one area where Davis has stepped away from technology, and that is with interactive voice response.

“We have found that because the patients truly value the interaction between them and the pharmacy, that is one area where we abandoned technology,” he says. “We rely solely on live calls so that we can engage patients, ask questions, allow them to ask questions of us, and resolve

any issues. Instead of it just being a one-way street, we want to take this instance to generate more rapport and continue the relationship that we have built.”

Davis points out that “the outbound calling systems that now exist don’t allow for interaction to occur. And that interaction is critical to successful synchronization. So we just don’t want to call you and say, ‘Hey, we did what you asked us to do.’ And that’s the difference between outbound systems of today and where we need them to go tomorrow. We need systems to become more dialogue and less of just alerts.”

He’s hoping to see technology vendors move in that direction, but says they are basically in a wait-and-see mode.

“Everybody wants to figure out a way to tackle the adherence problem, and there is no one great way, or clear-cut answer,” he says. “So I think that the vendors, instead of chewing up bandwidth on a thousand different ideas, are waiting to see which ones stand the test of time. But I think the vendors need to pay very close attention to the most strongly adopted programs, and Simplify My Meds is one of those programs that can be utilized in any pharmacy at any time on any scale, whether you have one patient or a thousand patients. It will work.”

Return on Investment

Davis, like any other business owner who implements a program or initiative, wants to know if he is receiving a positive return on his investment. For his pharmacy’s synchronization program, he applies several methods to track progress.

“There are a couple of ways to do that,” he says. “We can measure in prescription volume lift. Did we have a percentage of prescription volume lift that was attributed to the program? We can actually measure that directly by printing the prescription volume associated with the patients we have signed up [for the program] and comparing them year over year. So that’s been a good metric for us to utilize. Also, and it’s not a huge change at this point, but when we take a look at the OTC sales, as reported by those particular patients year to year, we can see a lift in those sales. Now if we were able to take this, and have 700 patients instead of 70, we would have much larger figures associated with what’s going on.”

There are other ways to gauge success, even if they

aren’t always easily quantified, Davis says.

“Inventory turns are a big thing, especially if you utilize the program correctly,” he says. “You are going to see a major change in cash flow associated with high-dollar or low-use items. The other is staff time. Pharmacies tend to spend more time responding to patient needs instead of planning for patient needs. This changes the equation. So what happens is we’re able to spend more time preparing for things and less time spinning our wheels or burning money. In doing so, the patient feels a better level of service, with a lower investment from the pharmacy to achieve that service. Have we been able to measure that directly at this point

“Simplify My Meds is one of those programs that can be utilized in any pharmacy at any time on any scale, **whether you have one patient or a thousand patients. It will work.**”

or found a good algorithm to measure that? No, but I know that it is happening by the response from the patients and what’s going on with my staff.”

Davis says that a synchronized refill program can provide ancillary benefits across the health care spectrum, especially in physician settings.

“I think a lot of confusion would decrease,” he says. “Indirectly, by us taking a greater role in the medication profile of a patient, we are actually decreasing confusion and workload in a physician’s office. If you think about it, physicians are responding to things like refill requests and prior authorization requests all day long. They have to assess and respond very quickly to these requests. That utilizes a lot of staff time, and a lot of reactionary situations.

“I think what we are doing with [our program] is helping to stabilize the prescribing community’s workflow as well. The broader that we can deploy this program, the more impact we are going to have on other professions to help them deliver care.”

PHARMACIST TESTIMONIALS



"As a pharmacy offering durable medical supply billing, the Simplify My Meds program allows us to obtain the appropriate paperwork and prescription items before the patients present for pick-up. A pleasant surprise with the program has been the ability to identify and refer patients into our compliance packaging program, which is now 50-plus patients strong."

Michelle Farrell, PharmD

Boscobel Pharmacy (Boscobel, Wis.)



"Hospitals are keenly aware that preventing re-admissions is vital. We've partnered with Berger Health System in a project we call Transitions in Care where we meet with patients after discharge to provide comprehensive medication counseling. We think that Simplify My Meds can be a valuable tool in encouraging compliance with our patients."

Larry Schieber, RPh

Schieber Family Pharmacy (Circleville, Ohio)



"I asked a few doctors what complaints they hear from patients about pharmacies. Their only response was that patients don't understand why they can't get all of their prescriptions refilled on the same day. We were already synchronizing refills for our compliance packaging patients, so I thought, why not synchronize refills for our pill bottle patients, too."

Kyle Klitzke, PharmD

Community Pharmacy (West Monroe, La.)



"We want to position ourselves to be a specialist on the multi-disciplinary health care team being developed in the proposed medical home model, and our ability to work with patients to improve adherence makes us uniquely qualified to help patients achieve goals, reduce hospital re-admission, reduce complications, and control health care costs."

Patrick Devereux, PharmD

FMS Pharmacy (Bessemer, Ala.)

Future Focus

Looking ahead, Davis says he plans on expanding his pharmacy's Simplify My Meds program.

"Now that we have good staff buy in, and we have stable processes to support the initiatives, I think the next step is to expand it out to our patient base, so we're going to focus a bit more on marketing," he says. "Not only marketing to patients, but also to physicians and to home health care, and to nursing agencies. Because sometimes patients don't know that they need assistance, but the other people helping care for them do realize that they do."

Panther Specialty Pharmacy, opened in December 2011, will focus strictly on medication synchronization, which Davis considers an important step forward.

"My goal was to build another pharmacy where we synchronize absolutely everything," he says. "And if we have everything synchronized, or most of our patients are synchronized, then our next step is to start measuring the outcomes associated with those patients. We want

to use the time not only to interact with the patients, but also gather the metrics that we need to show that our pharmacy did the best at handling a patient in any given position. Will we be the best at everything? No. But synchronization will help us realize where we are the best at, and where we can focus our company's efforts to remain profitable and strong."

To say that Davis is bullish on the concept of refill synchronization is an understatement.

"It's my feeling that this is going to help independent community pharmacy to continue the longevity that we have enjoyed over many years, stabilize profitability, [in an era where margins are continually decreasing], and enhance patient care by helping patients to do their best to achieve the outcomes that are intended by their other health care practitioners." **ap**

Chris Linville is managing editor of *America's Pharmacist*.