Background
The scope of pharmacy practice has evolved from the traditional role of compounding and dispensing medications to becoming a central member of the health care team. The collaboration of managed care pharmacists, physicians, care plans, and other clinical and staffing staff offers opportunities for optimizing drug therapy and reducing costs. Interventions by pharmacists have been considered a valuable aspect of the health care community by reducing the medication errors, reinforcing patient education, and helping to reduce the cost of therapy.

Accreditation
Administrative costs included payroll for the five managed care pharmacists. Providers and members were receptive to the pharmacist interventions, and savings $0.37M medical policy

The collaboration of managed care
HIV antiretroviral review yielded $0.37 million (4.2 percent) Other category (e.g., cancer, rare diseases) yielded $0.5 million (6 percent) The value of the provider's overall change in prescribing habits due to the additional medical costs. However, the changes were approved and made by the managed care team, so the additional medical costs were considered by the for the health plan.

No evaluation of medical harm was performed. It is possible the managed care intervention added value of these interventions and return an investment (ROI)

Limitations
• There was no control group. It is solution if the drug therapy regimen, and subsequent savings would have occurred regardless of a managed care
• The omission of medical harm was performed. It is possible the managed care pharmacist intervened, and savings could yield a 10:1 return.

The value of the provider's overall change in prescribing habits due to the enhanced education and pharmacist intervention could not be determined.

Pharmacy claims data for drug therapy optimization opportunities. Through telephonic or facsimile communication, recommendations were provided to the member and prescriber yielding results of a 10:1 ROI over a 10-month period. pharmacy claims data for drug therapy optimization opportunities. Through telephonic or facsimile communication, recommendations were provided to the member and prescriber yielding results of a 10:1 ROI over a 10-month period.

Methods
Study Population
• The population of focus for this prospective review was identified using integrated medical and pharmacy claims with a focus on high cost and high volume members. High cost and high volume members included patients from Medicare, commercial, and health insurance.

• These members' medical and pharmacy claims were reviewed for drug therapy utilization opportunities for managed care pharmacists.

Managed care pharmacists worked collaboratively within a multi-disciplinary care management team through a telephonic and/or facsimile review of medical and pharmacy claims data to enhance quality of care and improve medical utilization and medical spend through targeted triage of patients identified risk factors.

Study findings include:
• Opportunities to update drug regimens included a review of key drug categories and disease states, as well as referrals from colleagues within POD teams.

Other conditions
• Other conditions
• Rare diseases
• Managed care pharmacists reviewed prior authorization requests for drugs of interest and identified therapeutic drug approval opportunities.

Outcomes of Interest
• Managed care pharmacists electronically reviewed interventions in a reporting database.

• Change in drug regimen was tracked in medical and pharmacy claims data claims occurring after the managed care care window.

• Cost savings were defined as an actuarial assessment of the difference between the members' actual plan and drug therapy cost and anticipated change caused by a managed care pharmacist intervention.

Workflow for Managed Care Pharmacists

Figure 4: Multi-disciplinary Care Management Flow of delivery team

Figure 2: Workflow for Managed Care Pharmacists

Figure 3: Membership Breakdown and Intervention Savings

Figure 1: Study Population

Targeted Population
• During Jan, 1 to Nov, 1, 2009, among a total of 127,496, 852,279 commercial and 140,529 Medicare insured members with claims benefits in Florida Blue care, there were 2,325 interventions (case per member year) (Figure 1).

• 873 (36 percent) HM members
• 307 (11 percent) Medicare members through the prior authorization system
• 724 (21 percent) interdepartmental categories (e.g., oncology, care, disease state)

Cost Savings Breakdowns and ROI (Figure 3)

• Of the total 2,325 target population identified as potential opportunities, 724 (31 percent) were successfully identified on $8.6 million in cost savings.

• Prior authorization online system review yielded $9.7 million (41.6 percent)

• HM pharmacist review yielded $3.2 million (12 percent)

• Inpatient review yielded $9.5 million (22 percent)

• Other category (e.g., cancer, rare diseases) yielded $0.6 million (11 percent)

• Prior authorization system review yielded $8.4 million (36.6 percent)

• HM pharmacist review yielded $3.0 million (12 percent)

• Inpatient review yielded $9.2 million (36 percent)

• Other category (e.g., cancer, rare diseases) yielded $0.6 million (11 percent)

Primer on Data Analytics

Figure 5: ROI across medical conditions

Conclusions
This study evaluated the ROI of 5000 forline pharmacists in a managed care plan to evaluate medical and pharmacy claims data claims to identify drug utilization opportunities. Through telephonic or facsimile communication, recommendations were provided to the member and prescriber yielding results of a 10:1 ROI over a 10-month period.

$2 million in cost savings were identified and actuarially validated through pharmacy and medical claims.

The unique knowledge base pharmacists possess allowed them to quickly adapt to the needs of varying patient populations.

pharmacy claims data for drug therapy optimization opportunities. Through telephonic or facsimile communication, recommendations were provided to the member and prescriber yielding results of a 10:1 ROI over a 10-month period.

The value of the provider's overall change in prescribing habits due to the enhanced education and pharmacist intervention could not be determined.

pharmacy claims data for drug therapy optimization opportunities. Through telephonic or facsimile communication, recommendations were provided to the member and prescriber yielding results of a 10:1 ROI over a 10-month period.

The value of the provider's overall change in prescribing habits due to the enhanced education and pharmacist intervention could not be determined.

Health plans who wish to explore the potential may have difficulty accessing to pharmacies and need for integrated claims data.

References


4. Eagan, MN 55121 387

5. 1305 corporate center drive, St. Louis, MO 63141 879

6. 387

7. 879

8. 776

9. 03003472

10. 03003472

11. 03003472

12. 03003472

13. 03003472

14. 03003472

15. 03003472

16. 03003472

17. 03003472

18. 03003472

19. 03003472

20. 03003472