

Evaluation of an integrated health-system specialty pharmacy technician-driven 7 day post-transplant discharge follow-up call

Helen Northrup, PharmD, BCACP, Kyle Hansen, PharmD, BCPS, Jennifer Young, PharmD, BCPS, CSP

Wake Forest Baptist Medical Center, Winston-Salem, NC

Background

- Patients discharged after organ or stem cell transplant on multifaceted drug regimens are often naïve to specialty pharmacy services
- As these patients will be on specialty medications generally lifelong after transplant there is a significant opportunity for early connections and explanation of specialty pharmacy services
- The Wake Forest Baptist Health (WFBH) Specialty Pharmacy is a dually accredited specialty pharmacy, embedded in an academic medical center, serving a myriad of patients
- Abdominal, heart and bone marrow transplant patients are a large portion of patient volumes (45%) and discharge prescription services (DPS) are a key component for these patients
- In November 2019 the Specialty Pharmacy implemented a technician-driven 7 day post-transplant discharge call to review specialty pharmacy services, discuss billing, reiterate refill processes, determine early medication changes and offer additional pharmacists counseling

Objectives

- Determine the average time to completion of post-transplant discharge follow-up calls
- Assess the impact of a technician-driven 7 day post-transplant discharge follow-up call on patient retention
- Evaluate the number of early medication changes, and pharmacist interventions required at the time of the call

Methods

- IRB-approved single-center, retrospective chart review performed on abdominal, heart and bone marrow transplant patients with a completed post-transplant discharge follow-up call between November, 1 2019 and June, 1 2020

Technician-Driven Follow-up Call Process



Content Reviewed and Services Offered During 7 Day Post-Transplant Discharge Follow-up Call

Specialty Pharmacy Welcome Packet	Pharmacy hours	24/7 On-call Pharmacist Availability	Delivery Options	Refill Order Process	Billing	Changes in Therapies	Dose Changes	Pharmacist Counseling
-----------------------------------	----------------	--------------------------------------	------------------	----------------------	---------	----------------------	--------------	-----------------------

Results

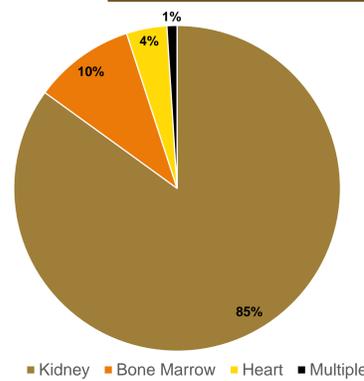


Figure 1. Patient Population

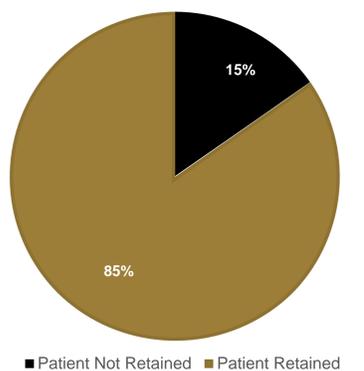


Figure 2. Patient Retention

- 157 patients had documented post-transplant discharge follow-up call with the majority being kidney transplant recipients

- 85% of patients were retained for future refills of medications, with the most common reason for transfer out being insurance restriction

- Calls were completed at an average of 9.7 days post-discharge and the majority were completed on the first attempt on Post-discharge Day 7

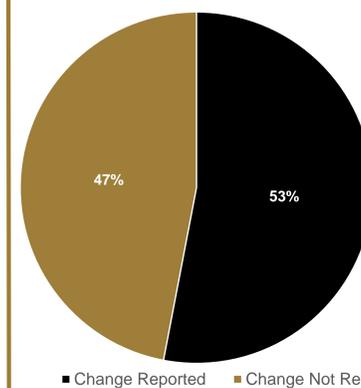


Figure 3. Patient Reported Medication Changes

- 53% of patients reported at least 1 medication change and 47% of patients reported no medication changes during the follow-up call
- Among reported changes 30% of patients had immunosuppressant medication changes, 33% other medication changes and 13% infection prophylaxis changes. Some patients reported multiple medication changes
- 3% of patients required pharmacist consultation with 50% of these being medication related questions, 25% being adverse effect concerns and 25% being billing questions

Discussion

- This process was an efficient technician-driven process with the majority of patients reached at 7 days post-discharge
- A positive retention rate was potentially related to relationship building during patient interactions
- The majority of patients unable to continue filling were due to insurance restrictions
- Amount of identified medication changes allowed for timely documentation and proactive request of updated prescriptions
- The low amount of required pharmacist interventions supported a technician-driven process
- Limitations include lack of comparator group, variations in free text documentation and rotation of various individuals through discharge transplant technician role

Conclusions

- The 7-day post-transplant discharge follow-up call offered a timely opportunity to review pertinent specialty pharmacy information and assess any changes in therapy after discharge
- This was a successful technician-driven process with most patients able and willing to continue filling with WFBH Specialty Pharmacy
- Future opportunities include utilization of technology for alternative methods of contact during this touchpoint

References

1. Kalluri HV, Hardinger KL. Current state of renal transplant immunosuppression: Present and future. *World J Transplant.* 2012;2(4):51-68. doi:10.5500/wjt.v2.i4.51
2. Black CK, Termanini KM, Aguirre O, Hawksworth JS, Sosin M. Solid organ transplantation in the 21st century. *Ann Transl Med.* 2018;6(20):409. doi:10.21037/atm.2018.09.68
3. Sam S, Guérin A, Rieutord A, Belaiche S, Bussièrès JF. Roles and Impacts of the Transplant Pharmacist: A Systematic Review. *Can J Hosp Pharm.* 2018;71(5):324-337.

Acknowledgment
 Authors would like to express gratitude to Amanda Barlow, CPhT, for her immense contribution to the development and implementation of this process.

Disclosures
 All authors of this presentation have nothing to disclose concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation.