

Impact of an Embedded Rheumatology Pharmacist

Sefa Kploanyi, PharmD, BCPS; Kate Smullen, PharmD, MSCS, CSP; Martha Stutsky, PharmD, BCPS; Jennifer L. Donovan, PharmD



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Background

- In the ambulatory care setting, rheumatologists are often limited in employing potentially effective treatments for their patients due to insurance coverage restrictions and delays in medication approvals.¹
- Studies suggest a pharmacist's involvement can improve the insurance authorization process for specialty medications.²⁻⁴
- There is limited evidence to support a pharmacist's role for rheumatologic disorders.
- The objective is to evaluate the impact of a pharmacist's involvement in a rheumatology practice affiliated with an integrated Health System Specialty Pharmacy for the following areas: coverage determination outcomes, medication access, and provider satisfaction.

Methods

- An ambulatory clinical pharmacist (ACP) was incorporated into an integrated care workflow within a rheumatology clinic at a New York based health system.
- Retrospective cohort analysis performed of prescriptions for specialty and non-specialty oral or injectable disease modifying anti-rheumatologic and supportive care agents prescribed by providers from the clinic.
- Time Period:**
 - Pre-intervention:** October 1, 2021 to March 31, 2022
 - Post-intervention:** April 1, 2022 to September 30, 2022
- Metrics measured:**
 - Prior authorization (PA) turnaround time
 - Prior authorization approval rate
 - Appeal approval rate
 - Provider satisfaction

DISCLOSURES

The 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.

Results

Figure 1: Illustration of the integrated care workflow highlighting the role of the ambulatory clinical pharmacist (ACP)

Figures 2a & 2b: Outcomes of intervention including prior authorization approval rate, appeal approval rate, and prior authorization turn around time

Figure 1: Integrated Care Workflow

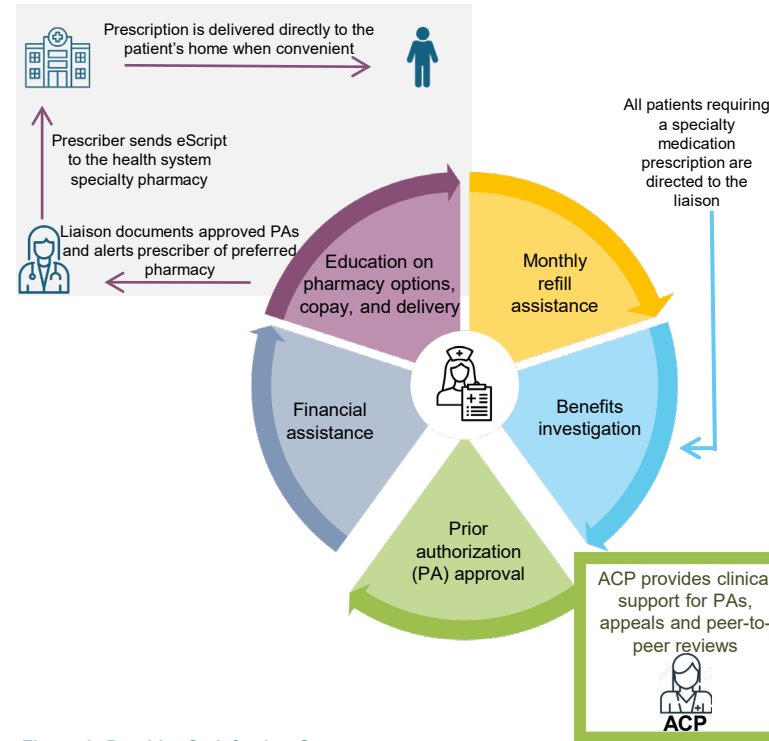


Figure 2a: Coverage Determination Outcomes

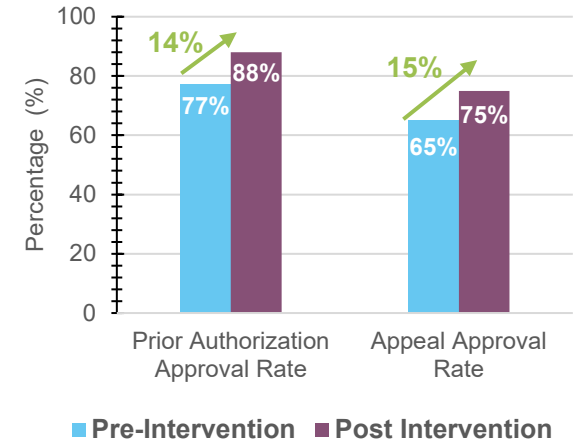


Figure 2b: Prior Authorization Turnaround Time

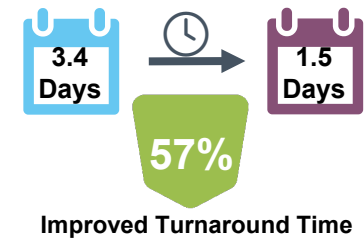
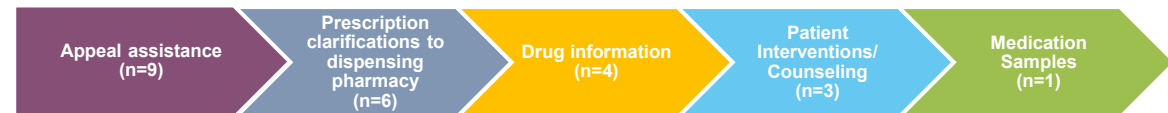


Figure 3: Provider Satisfaction Survey

A provider satisfaction survey (n=10 out of the 20 providers at the clinic) showed that 78% reported that services were very beneficial and 22% found services mostly beneficial. The providers also listed which services they found most impactful with 9/10 choosing appeal assistance.



Conclusions

- The addition of an ambulatory clinical pharmacist to the multidisciplinary team in a rheumatology practice can directly improve provider satisfaction and the quality of patient care related to timeliness of medication approvals.
- Future directions will be to observe if these outcomes have a positive impact on patient time to start therapy and clinical disease state outcomes.

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