Impact of Onboarding Script Standardization on Health-System Specialty Pharmacy Prescription Capture Rate

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Background

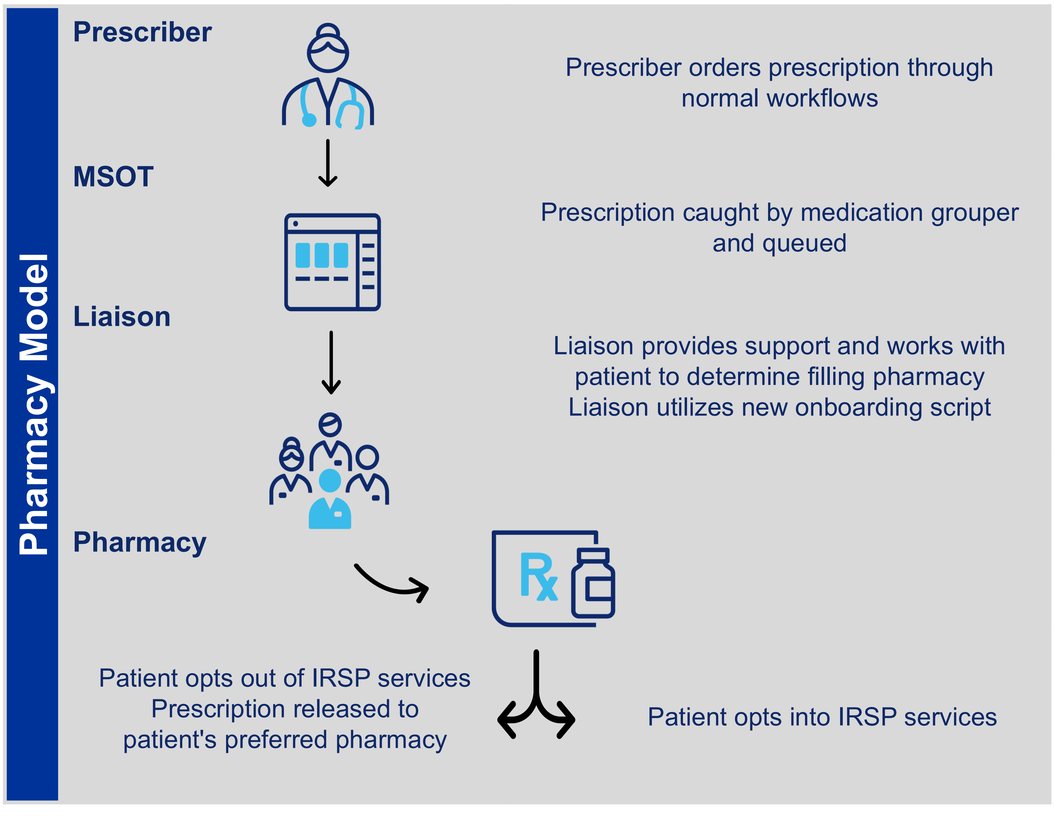
Integrated health-system specialty pharmacies (HSSP) have been shown to have decreased time to treatment initiation compared to external specialty pharmacies – with delays in medication initiation negatively impacting patient care, potentially leading to worse outcomes, disease progression, and increased prescription abandonment.[1,2] While HSSP's have been shown to improve care delivery, patients may be restricted by payors to external pharmacies or may choose to fill their prescriptions elsewhere. Evidence suggests that personnel qualities such as professionalism, responsiveness, competence, and kindness were key attributes in pharmacy selection with continuity of care being associated with higher rates of medication adherence, lower rates of inappropriate drug usage, and lower utilization of costly services.[3,4] These findings underscore the importance of standardized, professional, and competent first impressions during patient interactions.

Objectives

This is a single-center, prospective study to evaluate the impact of implementing a standardized onboarding script to improve prescription capture rates and patient retention within a single clinical team at Inova Retail and Specialty Pharmacy (IRSP), a dual URAC and ACHC accredited health-system specialty pharmacy located in northern Virginia.

Methods

IRSP utilizes Epic Compass Rose as the electronic health record system and Multi-Step Order Transmittal (MSOT) to support more than 60 specialty clinics, six of which are Inova Neurology. Pharmacy liaisons serve as a bridge between providers, patients, and the specialty pharmacy as they identify eligible patients and enroll them into pharmacy services. All liaisons that work with Inova Neurology clinics will be required to complete a training session prior to implementation of a new onboarding script. The primary outcome is the prescription capture rate, defined as the proportion of eligible prescriptions that patients opt into IRSP services. Capture rates will be evaluated between an eight-week intervention group and an eight-week historical control group. The secondary outcome is the retention rate, defined as the proportion of prescriptions that patients continue filling with IRSP, between pre- and post- implementation groups. Statistical comparisons will use two-proportion z-tests, with a p-value of 0.05 considered statistically significant.



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.

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