

# Drug Topics<sup>®</sup>

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Health Care



## The Future of Pharmacy

HOW THE EVOLUTION OF HEALTHCARE DELIVERY IS TRANSFORMING RETAIL PHARMACIES AND THE ROLE OF THE PHARMACIST IN PATIENT ENGAGEMENT

**A**s healthcare delivery continues to evolve, the pharmacy community has the ability to become more than just the place where prescriptions are filled. Many pharmacists are already assuming the role of provider, providing meaningful patient engagement to help improve their patients' health through better management of certain conditions and prescription therapies.

This evolution is significant because margins continue to tighten for filling an ever-growing volume of prescriptions for a growing patient population. Pharmacists have to find new lines of services to continue to operate in today's healthcare environment.

Every step of the healthcare chain is important to the well being of the patient. Health plan care managers, primary care and specialty physicians, and others are significant players in improving patient health and outcomes. Now, pharmacists are joining that chain in a more prominent way.

Pharmacists will never completely replace the primary care physician, but with shortages in clinicians for both primary and specialty care, getting an appointment can be difficult. Conversely, pharmacists are the most readily available healthcare provider. No appointments are necessary, and with workflow management solutions that delegate the task of filling prescriptions to technicians, pharmacists can create the time to offer high-quality consultations that go well beyond simply repeating label instructions.

While patients might see their primary or specialty care physicians once or twice a year, they often visit their community pharmacy once a month to refill their medications. As a result, the pharmacist-patient interaction can become more dynamic.

"Pharmacists can now sit down and engage with the patient," says Craig Ford, Vice President, Pharmacy Market for LexisNexis Risk Solutions. "The pharmacist is an integral part of the overall chain of patient healthcare. This will help patients better adhere to their medications, which will lead to better outcomes."

Transforming a pharmacy to produce better outcomes hinges on three crucial steps: ensuring patient data integrity, transforming that data into insights, and validating prescriber information in the workflow to maximize reimbursement and enable compliance.

### **ENSURING THE RIGHT INFORMATION**

When pharmacists consult with a patient about a prescription, they first need to be able to identify if that patient has an existing record. If they are unable to locate an existing record, the pharmacist is likely to create a duplicate record. The reason they couldn't find the existing record is often due to things as simple as the existing patient record contains incomplete or inaccurate information such as a missing middle name or an out-of-date address, or there is a lack of input data standardization techniques used between healthcare systems.

There can be hundreds of patients with similar names and birthdates in electronic medical record (EMR) systems. Without an updated and accurate view of the right patient's complete and correct medical history, the pharmacist cannot consult on the case with complete confidence, says Erin Benson, Director of Market Planning for LexisNexis Risk Solutions.

"Trying to keep track of patient records is a challenge for pharmacists," she says. "With millions of transactions coming into the pharmacy and e-prescribing continuing to grow, it's becoming more critical that pharmacists can automatically access these records. We need to have the knowledge so we know the right questions to ask each patient."

Accurate patient identification goes to the core of patient care, Benson says. To ensure safe prescribing, patient records need to be cleansed, duplicates removed, and missing pieces of information filled in.

"Mismatched and duplicate files along the entire healthcare continuum only invite medical errors that can have devastating consequences," Benson stresses. For example, you can't inform a patient of potential drug interactions if their prescriptions are stored in separate files.

LexisNexis Risk Solutions has introduced a unique patient identifier (UPI) to help increase the appropriate sharing of patient data, improve patient record linking between disparate data sources and prevent medical errors, says Rene Lopez, Vertical Solutions Consultant, Identity for LexisNexis Risk Solutions.

Providing care includes not only meeting clinical demand, but also meeting the demand for technology solutions that facilitate access and accurate record matching.

“Patients expect identity accuracy and integrity of their records during every pharmacy interaction,” he says. “They also want fast, convenient access to their own medical data and to the providers’ service options.”

“We want to make sure there is the most current and correct information so pharmacists can be assured they have the right patient sitting across from them,” he says. “Having the right data that is accessible is critical.”

### **TRANSFORMING DATA INTO INSIGHTS**

The question becomes: How can pharmacists successfully counsel individual patients, each with their own personal life circumstances, in a consultative setting?

According to Benson, the most important information pharmacists might be able to obtain to help improve medication adherence is social determinants of health (SDOH). These are the conditions in which people are born, live, work, and grow, which account for up to 50% of a patient’s health outcomes, based on County Health Rankings and Roadmaps data.

Platforms that integrate SDOH data into a patient profile can help pharmacists determine relevant information about patient challenges to adherence and address both personal and disease-specific concerns in an individualized manner, Benson says.

Pharmacists can manage their patient population using the combination of claims data and SDOH—or just SDOH—to create out-of-workflow decisions about the best way to engage a patient. For example, some at-risk populations might require set appointments instead of trying to force an interaction when

a patient is picking up their medications.

By asking questions that go beyond the prescribed medication, pharmacists can identify social influencers possibly preventing medication adherence, including issues that may be out of the patient’s control.

The prescribed medication, for example, could be cost prohibitive, or there could be transportation issues that stop the patient from getting to the pharmacy, Benson says. We also see challenges of being medication adherent among patients living in high crime areas.

“Pharmacists could use this SDOH information to approach the prescribing physician about lower-cost alternatives,” she notes. “Similarly, this information could help pharmacists determine that the patient lacks reliable transportation to pick up a medication. The pharmacist could help schedule a ride-share or a home delivery method for the following month.”

SDOH information can help pharmacists pay more attention to patients who are at most risk for medication non-adherence and take meaningful steps to achieve better outcomes. Medication Adherence measures are also incredibly important for STAR ratings and meeting contractual obligations.

### **GETTING PAID FOR SERVICES RENDERED**

As the value-based payment model continues to spread across healthcare, pharmacists can help third-party insurers and pharmacy benefit managers achieve certain levels of quality, leading to better reimbursements. In fact, many PBMs and payers are expecting and requiring pharmacies to improve their patient population’s adherence to medications.

While the process for billing for Medication Management Therapy (MTM) services is different from the standard prescription claims billing process, Part D payers are required to cover MTM services and many 3rd party payers cover them, also. Many services are available to pharmacies to obtain the right information about how to bill and to submit the MTM claim to the payer.

“Even though the billing process for MTM may take the pharmacist out of workflow and may initially be time consuming to under-

stand, many services are available to minimize that impact, and the ultimate positive result for the patient and pharmacy is well worth the effort.” says Brian Eidex, Director, Pharmacy, LexisNexis Risk Solutions.

In addition to getting reimbursed directly for the patient interactions, pharmacies will also benefit financially from improved STAR ratings, increased claims volume, higher margins from the consultations, and more loyal, healthy patients.

### **THE PHARMACY OF THE FUTURE IS ALREADY HERE**

The patient already sees the pharmacy of the future. With flu shots and other immunizations, as well as mini-clinics where physicals and other health needs can be met, patients are experiencing the pharmacy in ways that were not possible decades ago — in addition to the traditional interaction of picking up prescriptions.

“Being able to stop in without an appointment makes it more convenient for customers,” Benson says. “There will be more time

to counsel the patient, and pharmacists will be able to identify patients that need the most counseling.”

“We can help by giving the pharmacist analytics, tools and data behind the scenes so they can effectively allocate resources,” she adds. “We can make sure help is getting to the patients who need it the most.”

In many ways, pharmacists are becoming practitioners. Their expertise will allow them to help patients better adhere to their medications, leading to less side effects and better outcomes.

“Having that hands-on, caring approach will be a big differentiator for pharmacies,” Lopez says. “That’s how they will provide quality service to their customers, which in turn will keep them coming back. Patients will feel like they are part of a family.”

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For more information on LexisNexis Risk Solution Pharmacy workflow solutions call 866.396.7703 or visit <https://risk.lexisnexis.com/healthcare/pharmacy>

## **How Data Can Help in Patient Safety**

One of the biggest challenges faced by pharmacists is an incomplete picture of patient prescribing history. Without the transparency of data about medications, the pharmacist does not have the entire story regarding patient health and adherence.

This is especially true in cases of prescribed controlled substances. The pharmacy industry must prioritize the sharing of data for patient safety, says Craig Ford, Vice President, Pharmacy Market at LexisNexis Risk Solutions.

If data could be shared, the system would flag a patient who had previously been prescribed opioids, and more specifically, if the patient filled a prescription recently at another pharmacy.

“With a complete database, pharmacists would get a much broader, more holistic view of the patient, enabling them to provide better patient care,” Ford says. “The pharmacist can engage the patient about how this encounter fits into the entire spectrum of care. With increased patient understanding, all care providers can expect improved outcomes.”