



2020 Annual Forum

Managing Drug Value, MTM 3:15 PM- 4:15 PM ET



Gloria Sachdev
MODERATOR
President & CEO
Employers' Forum of Indiana



Anne Burns
Vice President, Professional Affairs
American Pharmacists Association



Nancy Giunto
Executive Director
Washington Health Alliance



Judy Hearn
Director of Membership Initiatives
Midwest Business Group on Health



#NatAllForum

Managing Drug Value: MTM and Beyond

A National Perspective

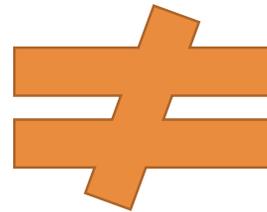
Anne L. Burns, RPh

Vice President Professional Affairs

American Pharmacists Association



The Truth About the Business Model for Medications



Coverage for Medications

\$335 billion for retail
prescription drugs in
2018¹

Coverage for the Services to Ensure they Work

Estimated **\$582 billion** for
nonoptimized therapy²

¹<https://www.cms.gov/files/document/highlights.pdf>

² Watanabe, J., et.al. (2018). *Ann Pharmacother*, 52(9), 829-837.

How Does this Impact Employees in the Workplace and Overall Health Coverage Costs?

- Case 1: a 10 year-old female with asthma who uses two different asthma inhalers. Continual problems with asthma control including three visits to the emergency department in the past 9 months.
 - Impact: poor health outcomes; high annual health costs; parental missed workdays; diminished parental productivity
- Case 2: a 62 year-old male with chronic back pain, high blood pressure, high cholesterol, and depression currently sees 6 physician specialists and taking 10 chronic medications. Back pain is not well-controlled resulting in lack of sleep and worsening depression.
 - Impact: high risk for medication adverse events; poor health outcomes; high annual health costs; missed workdays; diminished productivity

Pharmacists' Medication Management Services

EXPERTS TRAINED TO OPTIMIZE THE THERAPEUTIC VALUE OF THE PATIENT'S ENTIRE MEDICATION REGIMEN

- Accessible
- Individualized for the patient
- Collaborative with other providers

❖ Various terms



Support for Greater Use of Pharmacists in the Health Care System



The
Community
Guide

Cardiovascular Disease: Pharmacy-based
Medication Adherence Interventions

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services
7700 Security Boulevard, Mail Stop 02-26-12
Baltimore, MD 21244-1810



CMCS Informational Bulletin

DATE: January 17, 2017

FROM: Vikki Wachino, Director
Center for Medicaid and CHIP Services (CMCS)

SUBJECT: State Flexibility to Facilitate Timely Access to Drug Therapy by Expanding the Scope of Pharmacy Practitioner using Collaborative Practice Agreements, Standing Orders or Other Predetermined Protocols.

Reforming America's Healthcare
System Through Choice and
Competition

CDC's 6 | 18 Initiative

The Surgeon General's Call to Action to
Control Hypertension



NGA PAPER

The Expanding Role of Pharmacists in a Transformed
Health Care System

<https://www.thecommunityguide.org/content/pharmacy-based-interventions-improve-medication-adherence-cardiovascular-disease-prevention>

<https://www.medicare.gov/federal-policy-guidance/downloads/cib011717.pdf>

<https://www.cdc.gov/sixteent/index.html>

<https://www.hhs.gov/sites/default/files/Reforming-Americas-Healthcare-System-Through-Choice-and-Competition.pdf>

<https://www.hhs.gov/sites/default/files/call-to-action-to-control-hypertension.pdf>

<https://www.modernhealthcare.com/providers/pharmacists-ohio-managing-care-providers-and-getting-paid-it-too>

<https://www.nga.org/wp-content/uploads/2020/08/1501TheExpandingRoleOfPharmacists.pdf>



National Alliance
of Healthcare Purchaser Coalitions
Driving Innovation, Health and Value

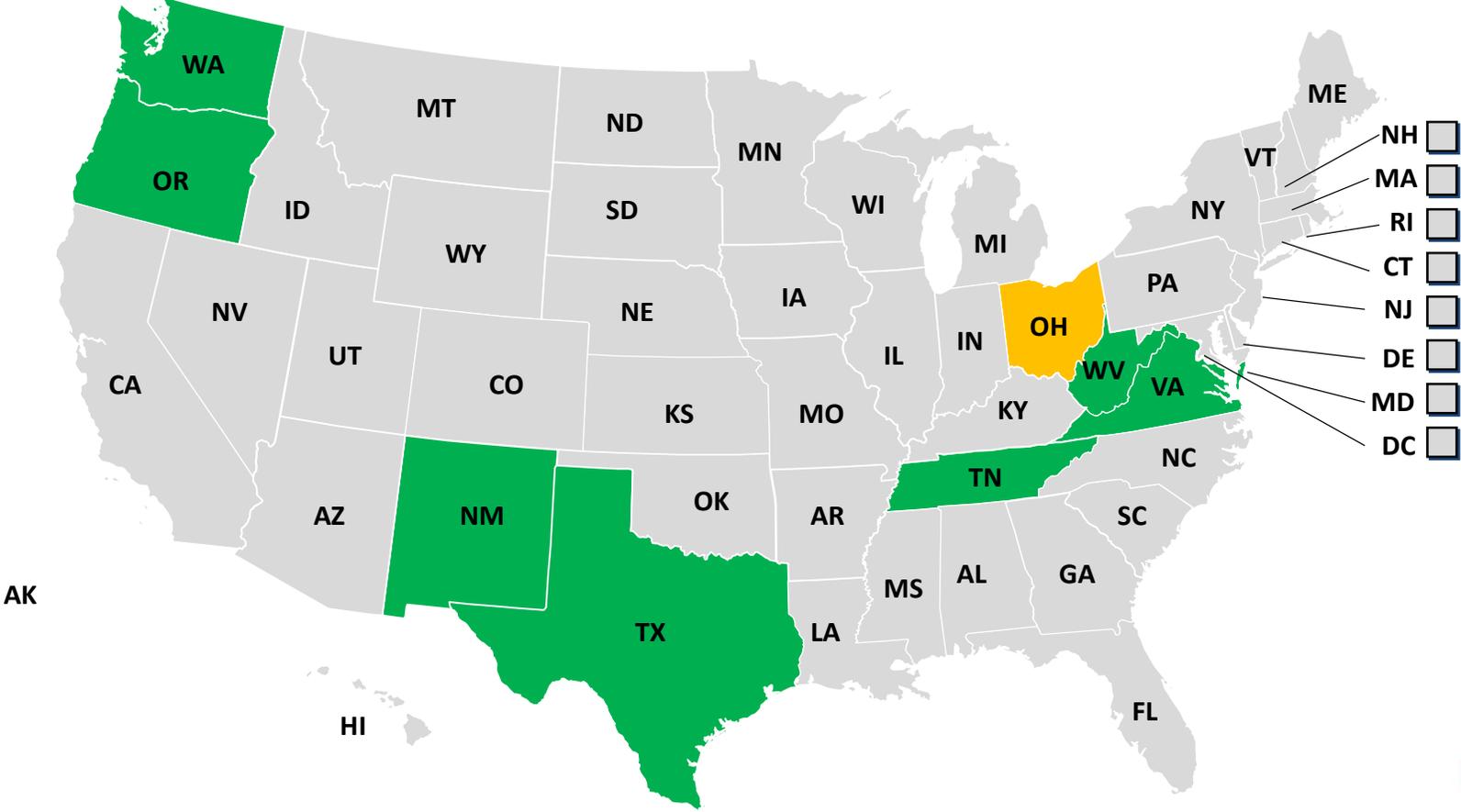
Payment Journey for Pharmacists' Patient Care Services

- Payers
 - Medicaid programs (17 states)
 - Commercial payer requirements (7 states)
 - Commercial contracts and grants (various)
- Payment models
 - Fee for service
 - Value-based arrangements
- Return on investment
 - Decreased health care costs
 - Improved control of chronic conditions (e.g. diabetes, hypertension, asthma)
 - Decreased missed or nonproductive workdays
 - Savings on average of \$1 to \$4 for every \$1 spent on pharmacists' services

Lack of recognition of pharmacists' services for payment in Medicare Part B is a significant barrier to broader uptake in other payer markets.

- Pharmacy profession advocacy efforts to gain recognition

Payment Parity for Pharmacists' Services



Requested Employer Policy Strategy to Facilitate Access to Pharmacists' Services

Require health plans to recognize pharmacists as providers in their payer networks for a specific scope of work that fully uses their expertise

Thank you!

Anne Burns

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202-429-7522

Managing Drug Value, MTM and Beyond



National Alliance of Healthcare Purchaser Coalitions
November 10, 2020

Nancy A. Giunto, Executive Director, Washington Health Alliance
ngiunto@wahealthalliance.org

Today at the Alliance: We Have Three Main Functions

We are a **TRUSTED CONVENER** for stakeholders, promoting a collective conversation to transform care delivery and financing in Washington state



Promoting **TRANSPARENCY:**

Performance measurement and reporting is a core competency of the Alliance

Driving **ACTION:**

Promote and align strategies to have impact and improve performance based on data-driven insights



Alliance Voluntary All-Payer Claims Database

Data Suppliers

Self-Funded
Purchasers

Labor /
Union Trusts

WA State
Medicaid

Medicaid
MCOs

Commercial
Health Plans

Covered Lives

Over 4M Washingtonians

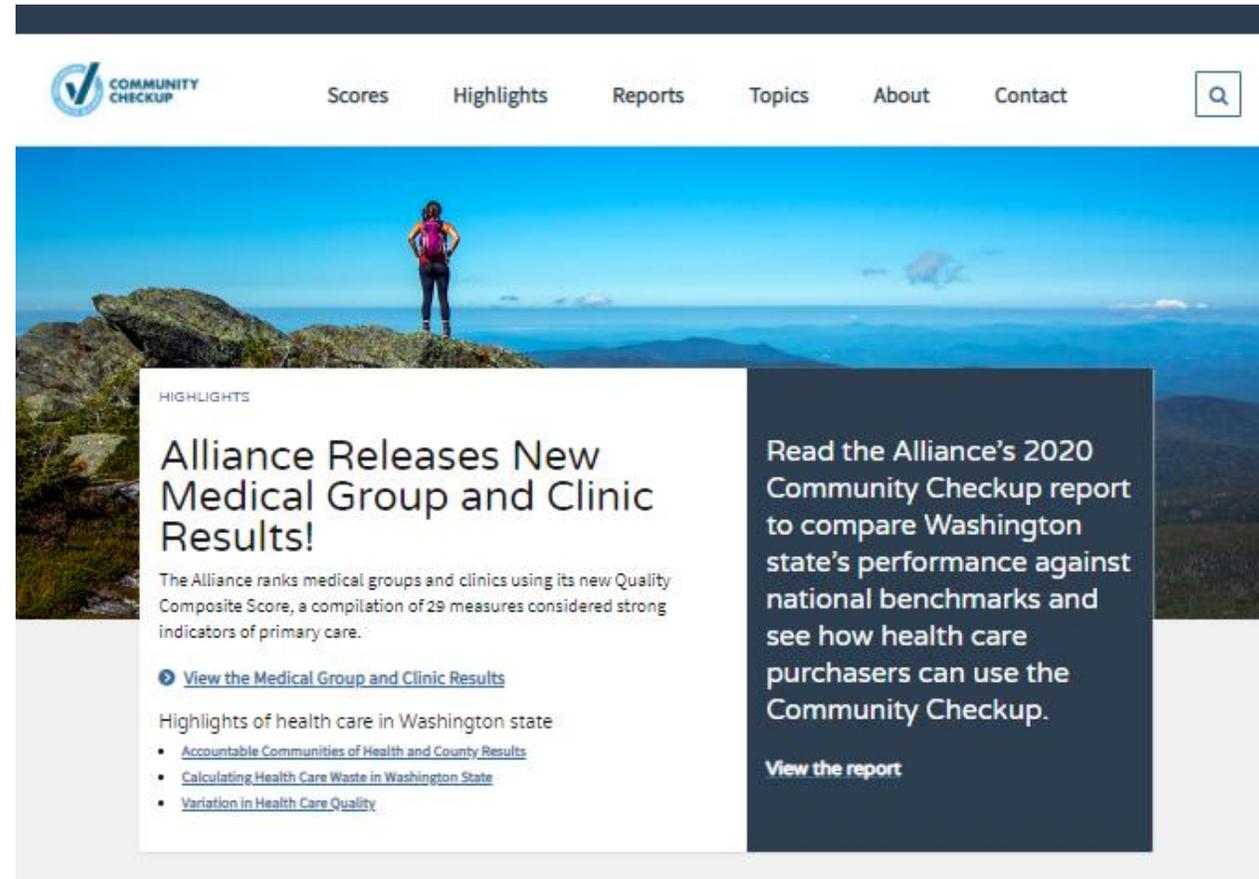
Service Level Detail

Over 12 Years Historical Data
Medical/Pharmacy/Vision/Dental Claim Service Lines, including financial data

Analytic Data

Health Cost Guidelines, Health Waste Calculator, APR-DRG, Milliman GRVU, etc...

Community Checkup



2020 Community Checkup.

Easy as 1, 2, 3

The screenshot shows the top navigation bar of the Community Checkup website with the logo on the left and links for Scores, Highlights, Reports, Topics, About, and Contact on the right. Below the navigation is the 'Scores' section, which includes a paragraph explaining that scores are based on unbiased data and analysis of health care quality in Washington state, and a link to 'compare their performance'. Below this is the 'Measures' section, which is divided into two columns. The left column is titled 'Measure by Category' and contains text about quality measures evaluated for health care settings, with a link to 'View full list of measures'. The right column is titled 'Individual Measures' and contains text about learning more about types of care, with a list of measure categories: Access to care, Asthma & COPD, Behavioral health, Cardiovascular disease, Diabetes, Infections, Low-back pain, and Managing medications. A purple circular icon with a document symbol is located on the right side of the 'Measures' section.

2020 Community Checkup, Scores, Measure by Category, Managing Medications.

Medication Management Measures

Measure Name	Description
ADHD Medication Generic Prescriptions	The number of prescriptions for at least a 30-day supply of attention deficit hyperactivity disorder (ADHD) drugs that were filled with a generic drug any time during the measurement period.
Antidepressant Medication Generic Prescriptions	The number of prescriptions for at least a 30-day supply of antidepressants that were filled with a generic drug anytime during the 1-year measurement period.
Asthma Medication Ratio	The percentage of members 5 to 64 years-old who were identified as having persistent asthma and had a ratio of controller medications to total medications of .50 or greater during the measurement period.
Cholesterol-Lowering Medication Generic Prescriptions.	The number of all prescriptions for at least a 30-day supply of statins that were filled with a generic drug any time during the measurement period.
Follow-up Care for Children Prescribed ADHD Medication (30 days)	The number of children ages 6 to 12 years-old with an ambulatory prescription for ADHD medication and one follow-up visit with the prescribing practitioner during the 30-day initiation phase.
Follow-up Care for Children Prescribed ADHD Medication (9 months)	The number of children ages 6 to 12 years-old with an ambulatory prescription for ADHD medication who stayed on the medication for at least 210 days and had two or more follow up visits with the prescribing practitioner within 270 days of the initiation period.
High Blood Pressure Medication Generic Prescriptions	For at least a 30-day supply of Angiotensin-converting enzyme (ACE) inhibitor or Angiotensin II receptor blockers (ARBs) that were filled with a generic drug any time during the measurement period.
Monitoring Patients on High Blood Pressure Medications	The number of patients age 18 and older who received at least 180 treatment days of ACE inhibitors or ARBs and who had at least one monitoring event (serum potassium and serum creatinine) in the measurement period.

[2020 Community Checkup, Compare Scores, Measures by Category, Managing Medications.](#)



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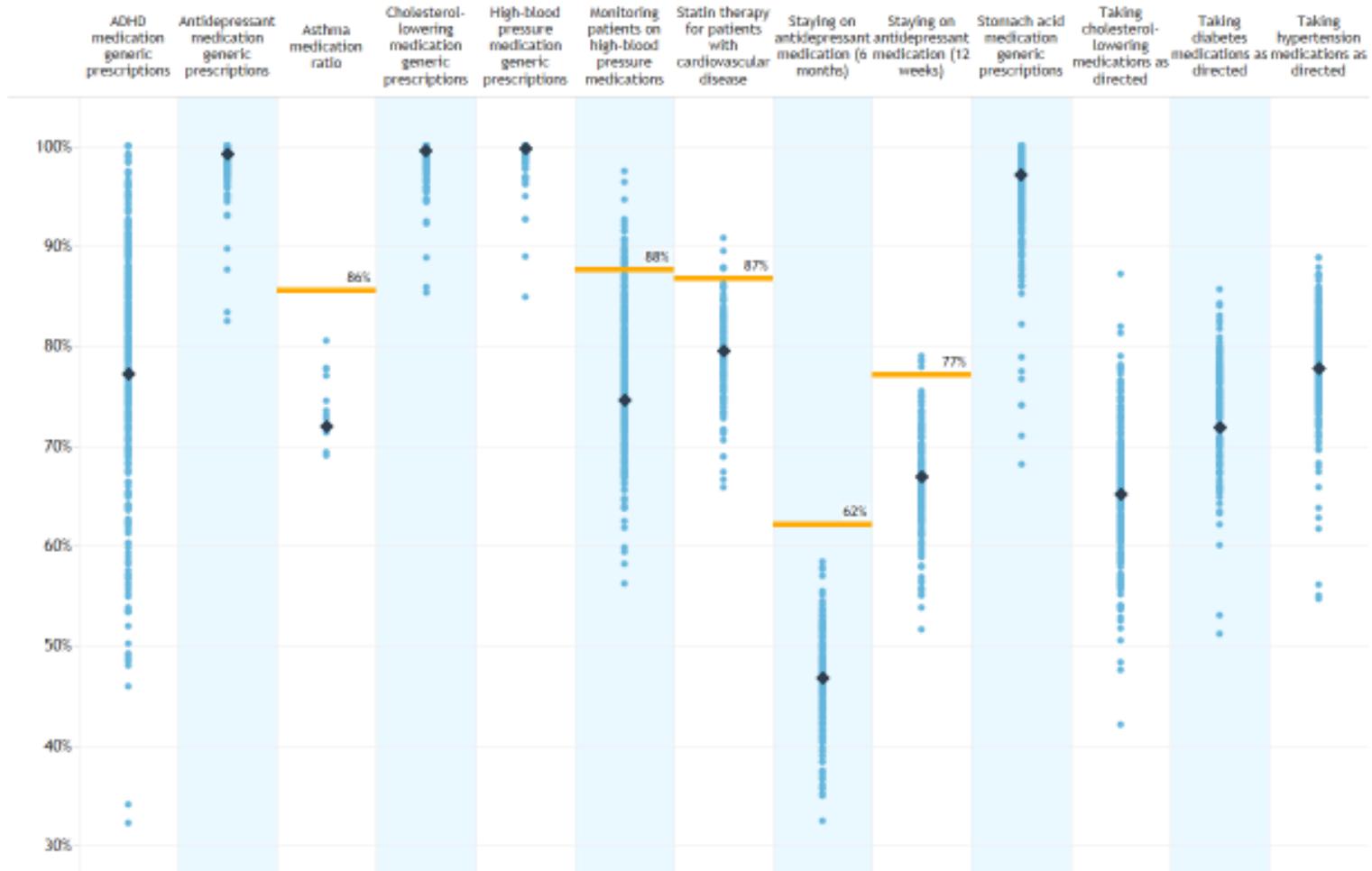


Medication Management Measures

Measure Name	Description
Statin Therapy for Patients with Cardiovascular Disease	The number of males 21 to 75 years-old and females 40 to 75 years-old with atherosclerotic cardiovascular disease (ASCVD) who received a moderate to high intensity statin during the measurement period.
Staying on Antidepressant Medication (12 weeks)	The number of patients 18 years-old and older who are: 1) newly diagnosed with depression during the measurement year; 2) prescribed an antidepressant medication (as determined by prescription fills); and 3) remained on the antidepressant for at least 12 weeks.
Staying on Antidepressant Medication (6 months)	The number of patients 18 years-old and older who are: 1) newly diagnosed with depression during the measurement year; 2) prescribed an antidepressant medication (as determined by prescription fills); and 3) remained on the antidepressant for at least 6 months.
Stomach Acid Medication Generic Prescriptions	The number of prescriptions for at least a 30-day supply of antacids to reduce chronic stomach or gastric acid (proton pump inhibitors or PPIs) that were filled with a generic any time during the measurement period.
Taking Cholesterol-Lowering Medications as Directed	The number of days an adult 18 years-old and older with at least two filled prescriptions for statin medications had access to at least one drug in the statin medication class based on the prescription fill date and the days of supply. The proportion of days covered must be at least 80% to qualify.
Taking Diabetes Medications as Directed	The number of days a patient age 18 or older had access to at least one drug in the diabetes medications class during the measurement year based on the prescription fill date and the days of supply. The proportion of days covered must be at least 80% to qualify.
Taking Hypertension Medications as Directed	The number of days an adult 18 years-old and older with at least two filled prescriptions during the measurement year had access to at least one drug in the RAS Antagonist medications class based on the prescription fill date and the days of supply. The proportion of days covered must be at least 80% to qualify.

[2020 Community Checkup, Compare Scores, Measures by Category, Managing Medications.](#)

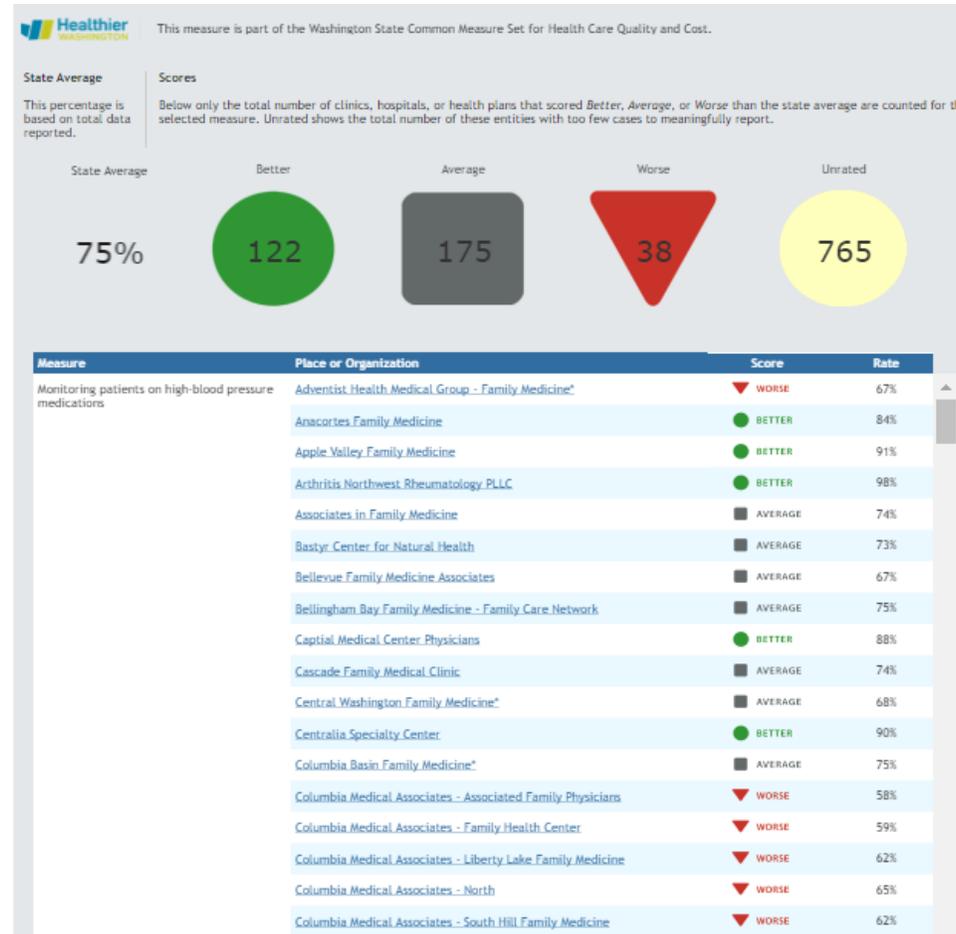
Statewide Variation



2020 Community Checkup, Highlight, Variation in Health Care Quality.

Monitoring Patients on High Blood Pressure Medications

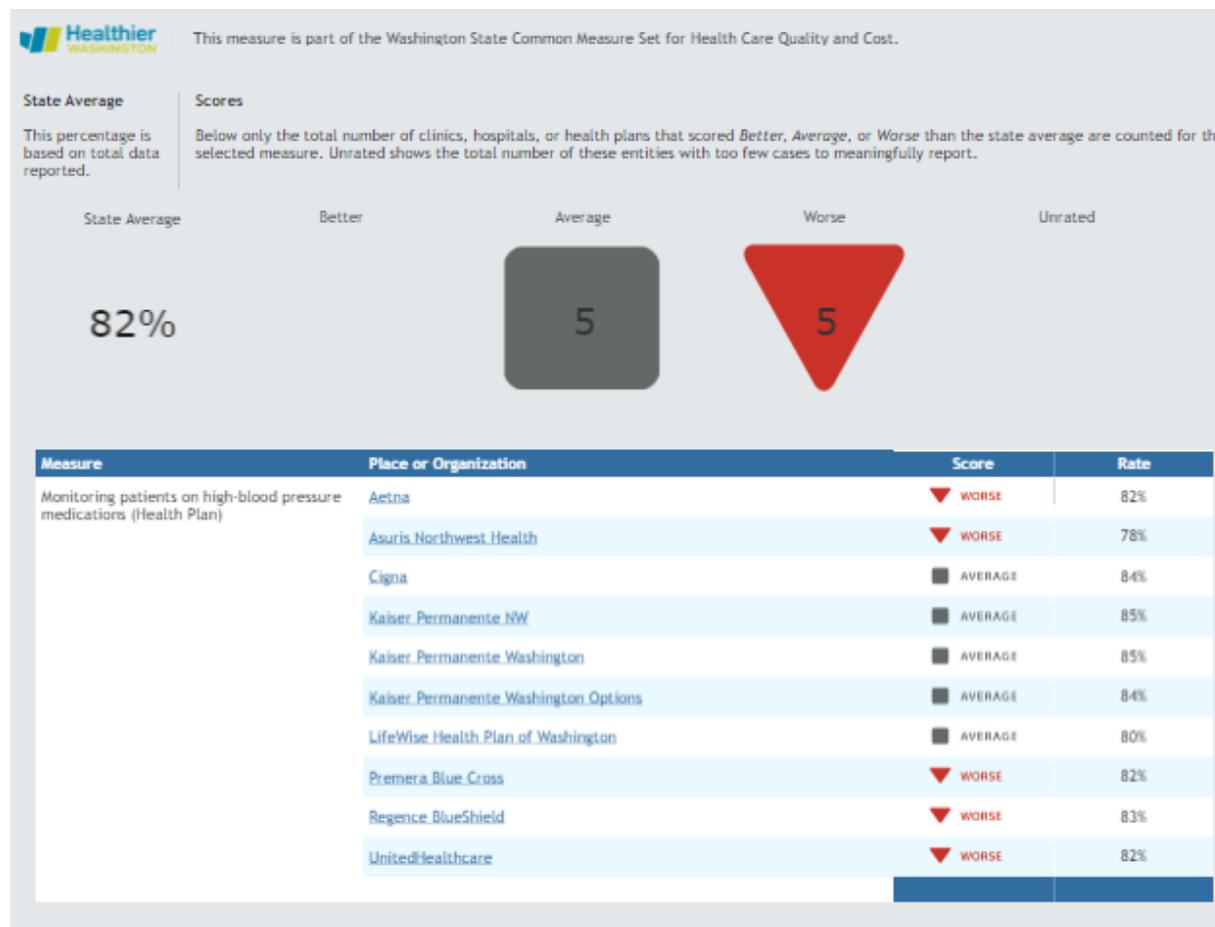
Medical Group



2020 Community Checkup, Compare Scores, Individual Measures.

Monitoring Patients on High Blood Pressure Medications

Health Plan



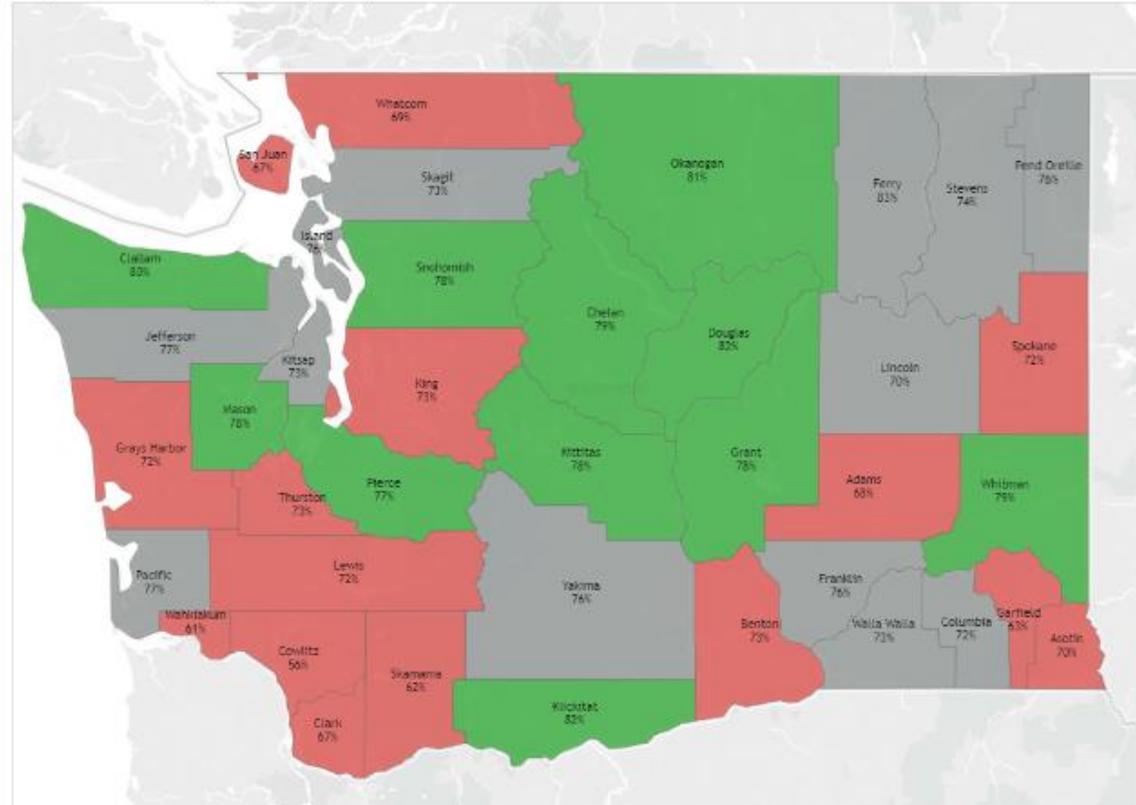
2020 Community Checkup, Compare Scores, Individual Measures.

Monitoring Patients on High Blood Pressure Medications

County

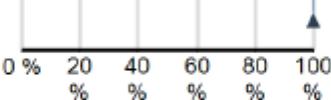
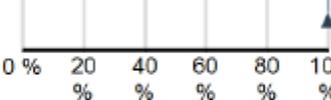
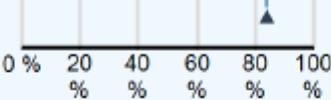
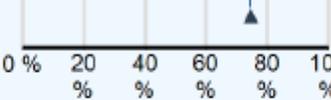
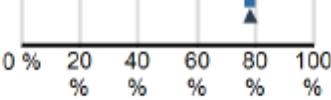
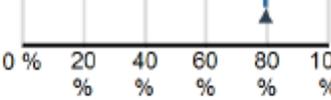
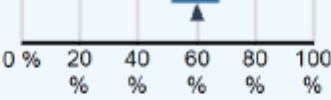
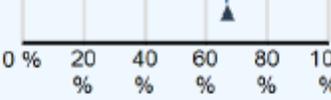
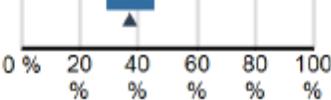
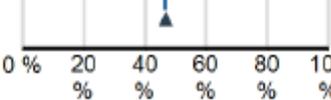
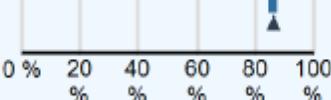
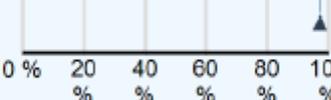
State Average: 75%

County results for Monitoring patients on high-blood pressure medications



2020 Community Checkup, Highlights, Variation in Health Care Quality, Managing Medications, Monitoring Patients on High Blood Pressure Medications.

Data Supplier Report

Measure	Supplier Performance				State Summary		
	Score	Rate	Denominator	Confidence Interval ¹	Rate	Denominator	Confidence Interval ¹
High-blood pressure medication generic prescriptions		100%	130,585		100%	1,162,147	
Monitoring patients on high-blood pressure medications		84%	16,028		75%	147,718	
Statin therapy for patients with cardiovascular disease		78%	1,630		79%	12,250	
Staying on antidepressant medication (12 weeks)		60%	129		67%	22,620	
Staying on antidepressant medication (6 months)		37%	129		47%	22,620	
Stomach acid medication generic prescriptions		86%	2,619		97%	303,163	



- Health plan contract guarantees
- Partnerships between employers and medication management program leaders
- Helps employers work with providers to improve care

Other Alliance Medication Work and Future Aspirations

Technology

**Low-Value
Care**

**Payment
Reform**

*Medication
Therapy
Management*

**Clinical
Outcomes**

**Purchaser
Affinity Group**

Thank you!



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Medication Management for Employers

Case Study from Midwest Business Group on Health

Judy Hearn, Director of Membership Initiatives

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Medication Management Options for Employers

Diabetes Management Program

- Designed after the Ashville Project, the Ten City Challenge added Chicago and Midwest Business Group on Health in cooperation with Illinois Pharmacists Association
- Unique features of the program:
 - The employer reduces or waives copays for diabetes drugs and supplies
 - The participants commit to education and individual face-to-face coaching on diabetes self-management in return for reduced drug costs
 - Pharmacists are trained as diabetes coaches to assist participants on an ongoing basis with periodic visits



Medication Management Options for Employers

- Clinical Outcomes drive ROI
- Reduction in A1C, waist circumference, blood pressure and cholesterol
- Monitoring of flu shots, foot exams, eyes exams, and nutritional goals
- Reduction in use of emergency room services



Medication Management Options for Employers

Employer Options

- Full time Pharmacist on benefits team provides oversight direction on drug selection for employer's formulary
- Pharmacist coaches important to medical team for individuals on their chronic care journey
- Medication management for employers through pharmacy consultants



Panel Discussion

moderated by Gloria Sachdev

gloria@employersforumindiana.org



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