MEDS TO BEDS: DELIVERING REDUCED READMISSIONS, LOWER COSTS, AND IMPROVED QUALITY

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Objectives

- Describe medication-related gaps in care associated with hospital admissions and readmissions.
- Explain how pharmacist involvement during transitions of care benefits patients.
- Identify opportunities for health systems to positively impact readmission rates through partnerships with community or outpatient hospital pharmacies.

The Cost of Readmissions

- 18% of all Medicare hospitalizations are 30-day re-hospitalizations.
  - Rate is > 20% for certain high risk populations.
- 76% of Medicare re-hospitalizations were "potentially preventable".
  - Costing $13 billion annually which may be unnecessary.
- Findings led to changes in reimbursement and penalties for hospitals with high readmission rates.

Medications and Care Transitions

- Adverse events occur in nearly 20% of patients discharged from the hospital to home.
  - 66% of these are drug-related.
- 70% of the emergency hospitalizations among seniors were attributed to ADEs from high risk medications.
- Patients with medication discrepancies at discharge had 30-day hospital readmission rate more than double that of patients without discrepancies.

Prevalence of Non-Adherence

- Up to 22% of adult patients do not fill their prescriptions after hospital discharge.
- Up to 25% of prescriptions are not filled, when children are discharged from the hospital with a prescription.
- Only 73% of post-AMI patients filled discharge prescriptions within 7 days post discharge.

The Pharmacist’s Role in Improving Care

- Pharmacist participation in care rounds decreases preventable Adverse Drug Events (ADEs) by 66%.
- Medication review by a pharmacist at discharge reduces preventable ADEs in the 30 days post discharge period.
- Counseling by a pharmacist reduces medication discrepancies and improves adherence at 2 weeks and 3 months post discharge.
Hospital Pharmacy Services

Massachusetts General Hospital (MGH)
- 1,000 Bed Hospital
- 3rd oldest general hospital in the US, the largest in New England
- Teaching site for Harvard Medical School
- Approximately 50,000 discharges each year
  - Average of 137 discharges a day
- MGH Outpatient Pharmacy
  - Fills 600 prescriptions daily
  - 7 days a week
  - 9-5:30 M-F, reduced hours

Care Transitions at MGH
- Launched in 2009, the goal of the STate Action on Avoidable Rehospitalizations (STAAR) was to improve transitions in care and reduce hospital readmissions by building multidisciplinary teams to implement process improvements
- MGH Pharmacist Interventions for high risk patients at discharge:
  - Medication Reconciliation
  - Medication Review
  - Medication Access
  - Patient Counseling

MGH’s STAAR Findings
- On average, patients going home at discharge
  - 15 medications on their discharge care plan
  - 6 changes to the pre-admission medication regimen
  - 85% needed prescriptions to be filled
  - 35% had medication related issues of clinical significance
- Pharmacist Pre-discharge interventions suggest a reduction in readmission rates
  - 16% vs. 27% (p=0.55)

Medication Related Issues Found
- Incomplete medication reconciliation
- Sub-optimal medication regimens
- Vague or conflicting discharge instructions
- Medication access issues
- Confusion or limited understanding of discharge medication plan

Recommendations to Expand TOC Services
- Inpatient Pharmacists
  - Reconcile medications at admission and discharge
  - Proactively address problems
  - Facilitate communication with the care team
  - Optimize therapy
- Outpatient Pharmacists
  - Improve medication access for patients
  - Add convenience by filling prescriptions prior to discharge
  - Increase prescription volume and revenue
- Pharmacy Extenders
  - Doaler medications bedside
  - Assist pharmacists to streamline process
  - Improve patient satisfaction with care
- Hospital Leadership
  - Collaborate on quality improvement initiatives
  - Track the impact of interventions on quality measures
  - NHAPS Scorecard
  - Readmission Rates
  - LOS
Meds to Beds
MGH Pharmacy’s Bedside Delivery Service

Goals of Meds to Beds Service
- Improve patient care and prevent adverse drug events by optimizing medication regimens and resolving discrepancies
- Improve patient access to discharge prescriptions
- Improve the patient experience and satisfaction with care
- Increase discharge prescription capture and revenue to support resources for hospital-wide implementation

MGH’s Meds to Beds Service

Outpatient Pharmacist identifies access issues and fills prescriptions
Inpatient Pharmacist reviews and reconciles medications
Inpatient Pharmacist counsels the patient at bedside
Pharmacy Extender delivers medications to the patient and collects co-pays

Meds to Beds Impact to Care
- Resolving Medication Reconciliation Discrepancies
- Optimizing Medication Regimens
  - Changing dose or formulations, minimizing prescriptions
- Proactively Addressing Access Issues
  - Prior authorizations and high cost meds
- Strengthening Patient Education and Understanding

Other Early Findings
- Patients are happy with the service
- Care Teams find the service very valuable
- Discharge prescription volume has increased

ASHP/APHA Best Practices
- Common Barriers and Elements for Success
- Highlighted Pharmacy Programs
  - Reduced medication-related problems
  - Lowered readmission rate
  - Decreased average length of stay
  - Increased patient satisfaction and HCAHPS scores
  - Increased revenue through increased prescription capture
Community Pharmacy Services

Walgreens offers a broad range of services that are designed to address specific clinical and patient needs:

- Diabetes Specialty Pharmacy
- HealthCare Clinic
- Pharmacy Systems
- Innovative Patient Adherence Programs
- New-to-Therapy Interventions
- WellTransitions®

Retail Pharmacy Central Specialty Infusion Services

WellTransitions®
Collaboration in Patient Care

Medication Management
- MTM
- Specialized Pharmacies
- New to Therapy Interventions
- Adherence Management
- Specialty Pharmacy

Quality Improvement
- Gap Closure at Retail Pharmacies
- Health Testing
- Case Management Optimization

Care Coordination
- MedGap Analysis®
- WellTransitions®
- Bedside Delivery
- SCMA
- 340(b) Services

Primary Care Extension
- Healthcare Clinics
- Infusion and Respiratory
- Digital Health
- Patient Messaging
- Patient Outreach

Analytic/Reporting

Patient Engagement

Connectivity

Well Experience: Transforming the Patient Experience

Bedside Delivery vs. Well Transitions

Bedside Delivery
- BSD Technician staffed* to coordinate prescription delivery
- Deliver Rx’s to discharge patients who opt in and RPh to counsel
- 48 hour check-up call
- No Extra Fee to Hospital/Patient
- Focus: Increase HCAHPS Scores
- *BSD technician hours vary

Well Transitions
- Review medication history upon admission
- Fill & align medications and perform medication reconciliation
- Bedside Delivery
- 48 hours RPh call - complete medication review
- 10 day RPh call*
- 25 day RPh call*
- Reimbursed by hospital/patient (addition to Rx’s filled)
- Focus: Reduce Readmission Rates
- *RPh call from the call center
WellTransitions Strategic Vision

- Bridging the care gap with community integration
- Redefining role of the pharmacist
- Intervention based care model
- Collaboration efforts with interdisciplinary healthcare teams
- Increasing access and extending care through 8,000 community locations

Enhanced Pharmacy Functions: Bridging the Gap

Patient Population:
- Target high-risk, complex patients in conjunction with hospital or health system
- Focus on disease states most commonly associated with readmissions

Clinical Collaboration:
- Conduct patient follow-up after discharge to ensure PCP visit, elevate medication adherence
- Key point of integration focused on the value of a patient’s relationship with a community pharmacist

Comprehensive Reporting and Performance Tracking:
- Analyze trends in avoidable readmissions, patient satisfaction and operational procedures
- Identify gaps in care, collaborate with hospital discharge team for process improvement

WellTransitions Functional Strategic Benefits

<table>
<thead>
<tr>
<th>Functions/Features</th>
<th>Strategic Benefits</th>
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<tbody>
<tr>
<td>Medication History</td>
<td>Information clearly presented and organized by newest date</td>
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<td>Timely return of information</td>
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<td>Provides both PBM and pharmacy fill data</td>
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<td>Reduces time spent validating patient medication history</td>
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<td>Provides medication history extracted from hospital EHR</td>
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<td>Returns up to 70% of both national and local plan data</td>
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<tr>
<td>Medication Delivery</td>
<td>Convenient access to medications</td>
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<td>Offer of initial counsel prior to discharge</td>
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<td>Clinical Pharmacists</td>
<td>Raises health awareness</td>
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<td></td>
<td>Promotes care plan as written</td>
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<td>Encourages medical home</td>
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<td>Risk Alerts</td>
<td>Patient behavior can be influenced at time of risk</td>
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<td>Outcomes Reporting</td>
<td>Provides program results to reduce cost of care</td>
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<td>Effectively manages chronic patients and identify gaps in care</td>
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<td>8,000 Points of Care</td>
<td>Community based collaborative care</td>
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<td>Scalable solutions for most health systems</td>
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Hospital Focused Capabilities of WellTransitions

WellTransitions® Capabilities | Matched with Hospital Objectives
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Proactive approach to patient care and complement to other intervention initiatives and activities | Reducing preventable readmissions
Web based system utilizes data feed extraction from hospital ADT system to identify eligible patients upon admission | Early assessment of high-risk patients
Post discharge clinical calls are based on pharmacist review of discharge medication list with patient | Support of physician based care plan
Bedside delivery of medications | Increase patient satisfaction/HCAPHS scores
Follow-up calls reinforce patient self-care, including medication education and ensuring compliance with physician/specialist appointments | Coordinate care with community providers

Benefits Beyond Reduction in Readmissions

Health System
- Expertise of pharmacists skilled in medication review and complex therapies
- Assists in providing medication history for validation by health system
- Improves health

Patient
- Ensures patient follow-up with proper medical providers
- Raises health awareness and optimizes community healthcare support system
- Decreases medication

Outcomes and Results
Walgreens WellTransitions®: Bridging the Gap, Coordinating Care

**Health Systems**
- Medication history provided at admission, medication review, alignment
- Flow of discharge, follows patient in own environment, reviews discharge
- Resources available in the system (practice, specialty care, primary care) helps patients identify care needs

**Walgreens**
- Helps patients with medication adherence
- Educated on health status of patient
- Integrates data points – EMR, ADT, alerts
- Enhances patient/provider relationship with full view of medication history

**Health Navigator Platforms**
- Collects and maintains data points (medical and pharmacy)
- Integrates data points – EHR, ADT, alerts

**Community Health Providers**
- Integrated into care continuum with two-way communications
- Medication history provided at admission, medication review, alignment

In Summary

- Pharmacist involvement during transitions benefits patients by closing many of the medication-related gaps in care.
- Opportunities exist for health systems to positively impact readmission rates through partnerships with either community or outpatient hospital pharmacies.
Thank You!

Any Questions?

References