Problem: When Little Things Are Really, Really Big Things

The patient had waited for three hours. The Lanreotide injection for her tumor treatment had not arrived from the source mandated by her insurance, which was out of state. No one at the hospital could track it down. The drug was re-ordered and the patient’s treatment had to be rescheduled.

An IVIG delivery was scheduled to come to a specific address at a health system so it could be signed for and then walked over to the integrated specialty pharmacy. Afterwards, it was discovered that the drug supplier had used the wrong address, and the incorrect documentation caused the problem. The drug supplier called the patient and changed the shipping address. Eventually, the drug was found and delivered, but the amount of time and effort expended because of a clerical error was enormous and caused significant distress to the patient.

It’s often the little things that cause the biggest problems. In the specialty pharmacy space, however, a seemingly small error can result in long-term repercussions affecting patient experience and patient outcomes.

When a patient arrives for scheduled treatment such as a specialty oncology drug infusion, but the drug is not on site as scheduled, it sets off a chain reaction of potentially serious problems. Patient care is interrupted and fragmented, leading to frustration, stress, and a poor patient experience. More importantly, the patient’s clinical outcome may be negatively impacted. Specifically-timed drug regimens are interrupted and months-long appointment schedules are disrupted. Time and money are wasted on delivery preparations for a drug that never arrives. Patients, often facing difficult medical conditions, are distressed, and providers direct blame at the pharmacy.

Baystate Health, located in Western Massachusetts, has a state-of-the-art integrated specialty pharmacy. But it was not immune to this industry-wide problem impacting patient care and patient outcomes. The difference was this integrated specialty pharmacy had the ability to develop a strategic solution.

“The things that can derail medical treatment, in this case, are all the “little things.” It’s basically logistics: packing, shipping and delivery issues, especially when the drug is mandated by a payor or PBM to be sourced from a supplier in another state or region. Once we have the drug in our possession the process typically runs very smoothly.”

Gary Kerr, Chief Pharmacy Officer, Baystate Health.
The minute a drug is sourced from out of state, out of region, or even simply outside of preferred channels, “handoff gaps” are at an increased risk of being created. Drug delivery channels are often mandated by the payor and the pharmacy benefits manager (PBM). Baystate Health, a member of the Health System Owned Specialty Pharmacy Alliance (HOSP), believes it is important to work closely with insurance companies to reduce restrictions that limit where patients can fill prescriptions, and give patients more choice in the process. This strategy can help to reduce potential breakage points in the continuum of care, and ultimately result in improved patient care.

Health systems with an integrated specialty pharmacy often own the (insurance) risk of the entire care continuum and employ the prescribing physicians, so the health system’s pharmacy has access to the patient’s electronic medical record. In many cases, the integrated specialty pharmacy is located inside the health center or academic medical complex, meaning all patient care is coordinated and delivered from one nearby location. This drives high-level real-time collaboration between physicians and pharmacists, reducing fragmentation of care. Patients receive the benefit of highly coordinated care, compared to large PBMs with a mail order specialty pharmacy approach, often a toll-free long distance customer service center located thousands of miles away.

Allowing patients to choose this coordinated specialty pharmacy care model, provided at the same or nearby site of their provider, ensures patients receive the most effective care, achieved through frequent in-clinic communication and shared electronic medical records between providers and pharmacists. This collaborative team-based approach results in the best patient outcomes, and an added bonus: the total cost of care is also lower.

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Results: Doing It Right

Looked at from a logistical perspective, Baystate Health’s strategy makes a lot of sense. Why order a drug from halfway across the country when it is available, in many cases, 100 yards across the street? Add in the on-site embedded clinical and administrative support linked to the clinician care teams, a better patient journey, and a lower total cost of care, and the argument is complete.

Focusing on patient choice and access to the integrated specialty pharmacy model results in less fragmented care, better patient outcomes, and the creation of a “culture of care” model of excellence within the health system.

This approach improved Baystate Health’s patient outcomes across a number of metrics: Time To Start Therapy was cut in half; Prior Authorization Turnaround Time was reduced to less than a day; and phone metrics including Time To Answer and Abandonment Rates exceeded industry averages. Disease-specific metrics were also improved: For example, Multiple Sclerosis relapse rates are world class, with over 87 percent of patients reporting zero flares.

Baystate Health is a not-for-profit, integrated health care system serving over 800,000 people throughout western New England. The system has four hospitals, over 80 medical practices, and 25 reference laboratories. With 12,000 employees including 1,600 physicians, it is one of Massachusetts’ largest employers.

The Baystate Specialty Pharmacy, located “a stone’s throw” from the Regional Cancer Center, fills an estimated 95,000 prescriptions a year across a patient “panel” of 6,200. Over 9,250 prior authorizations are completed annually, with 61% completed within one day; the pharmacy also boasts a turnaround time for orders of 3.4 days, far below a reported industry average of about 14 days.

HOSP general membership is open to any qualified health system that seeks to embrace the organization’s mission. For information about member qualifications, membership dues and how to join: http://hospalliance.org/membership/

HOSP partnership opportunities are also now available.