# Medication access difficulties for patients dispensing with internal health system specialty pharmacies versus external specialty pharmacies



Victor Nguyen, PharmD Candidate, Jessica Mourani, PharmD, Ashley Blaakman, PharmD, Casey Fitzpatrick, PharmD, BCPS

#### High costs, insurance coverage restrictions, prior authorizations, and drug availability are some common barriers that patients experience for initial and continued access to specialty medications.

- Medication access difficulties can lead to increased out-of-pocket costs<sup>1</sup> for patients as well as worsening of disease or death.<sup>2</sup>
- Pharmacists positively impact medication adherence by providing patient counseling, monitoring the safety and efficacy of therapies, and assisting patients with medical assistance program enrollment.
- With the health system specialty pharmacy (HSSP) model, pharmacists are integrated within a health system where they can access electronic health records, assess therapies, and expedite communication with health care providers, leading to more timely care, higher quality of care, improved patient safety, and cost savings.<sup>3</sup>
- For the purposes of this study, a pharmacy miss was defined as any medication access difficulty that resulted in a delay or interruption in therapy and not documented as one of the following:
  - Change in prescriber
  - Drug shortage

**BACKGROUND** 

- Limited distribution drug
- Patient unreachable
- Proactive pharmacist intervention
- Natural disaster
- Patient or provider oversight
- Hospitalization/facility admission

# **OBJECTIVE**

 The primary objective of this study is to evaluate the impact of HSSPs in alleviating medication access difficulties for patients prescribed specialty medications.

# **METHODS**

# Design

Multicenter retrospective descriptive analysis evaluating medication access difficulty interventions for patients prescribed specialty medications via Trellis Rx's clinical dashboards

#### Setting

Trellis Rx partner sites

#### **Study Period**

February 23, 2021, to June 22, 2022

#### Measures

- Number of access difficulty interventions completed by pharmacists
- Number of access difficulty interventions due to internal HSSP
- Number of access difficulty interventions due to external specialty pharmacy misses

### Analysis

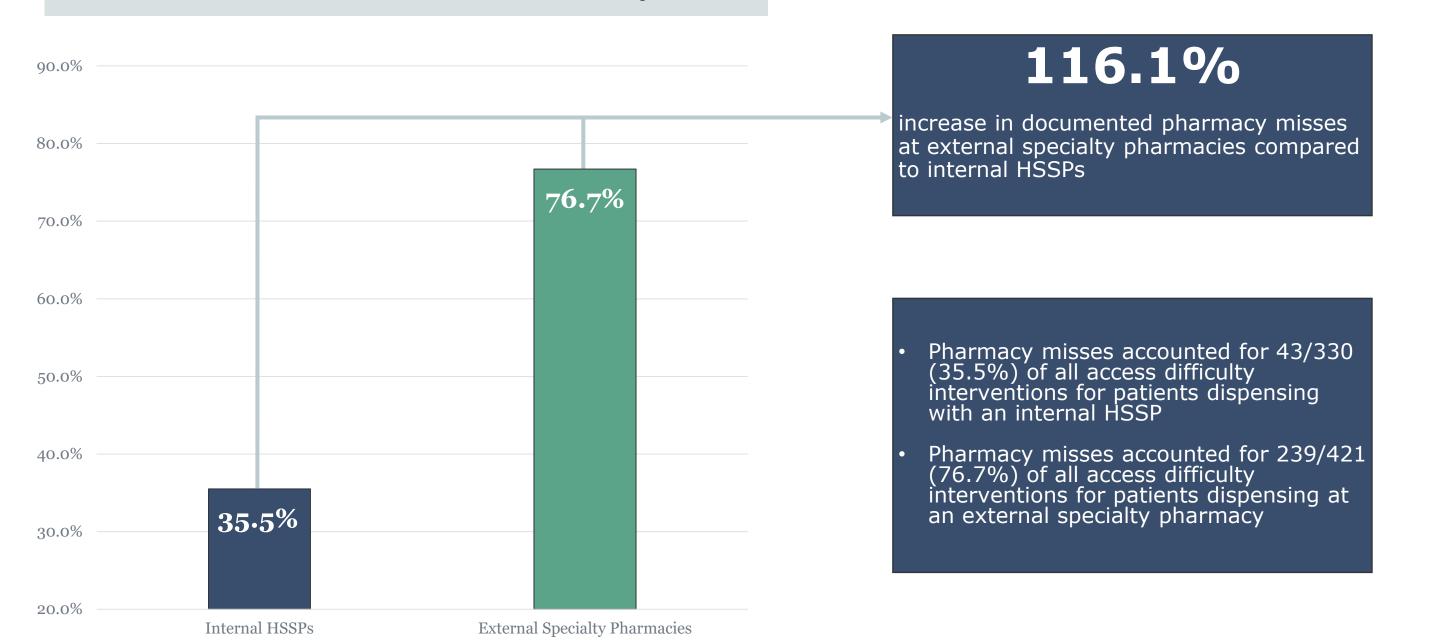
Descriptive statistics analyzing percentage of access difficulty interventions between the two groups. All pharmacist intervention data was collected from Trellis Rx's interventions dashboard.

# **RESULTS**

# **FIGURE 1: Intervention Disposition** Total Number of Access Difficulty Interventions Completed by Pharmacist n = 751Access Difficulty Interventions for Access Difficulty Interventions for Patients Dispensing at an External Patients Dispensing with an Internal Specialty Pharmacy

# FIGURE 2: % of Access Difficulties as Pharmacy Misses

n = 330



n = 421

# CONCLUSIONS

HSSP

• Patients dispensing with an internal HSSP are less likely to have an access difficulty due to a pharmacy miss compared to an external specialty pharmacy.

**Pharmacist** Role

Being embedded in the health system means HSSP pharmacists can be proactive when access difficulties arise by:

- Bridging therapy gaps
- Supplying samples/initiating therapy, when needed
- Communicating patient follow-ups and adherence checks
- Consistently performing and documenting information regarding

pharmacist interventions

**Future** Direction

- Identify and improve internal pharmacy miss interventions
- Assess barriers and develop solutions to decrease patient access difficulties to specialty medications
- Refine intervention data reporting metrics

#### **DISCUSSION**

- This project illustrates the impact of Trellis Rx's HSSP model on decreasing medication access difficulties for patients prescribed a specialty medication.
- Consistent intervention documentation by HSSP pharmacists and subsequent data review via Trellis Rx clinical dashboards promote proactive quality improvement initiatives that enhance patient care.
- Pharmacists integrated within the health system are uniquely positioned to address medication adherence difficulties as they arise, leading to a higher quality of care for patients.

# REFERENCES

- 1. Goldman DP, Joyce GF, Zheng Y. Prescription drug cost sharing: associations with medication and medical utilization and spending and health. JAMA. 2007;298(1):61-69.
- 2. Jimmy B, Jose J. Patient medication adherence: Measures in daily practice. *Oman Med J.* 2011;26(3):155-159.
- 3. Zuckerman AD, Whelchel K, Kozlicki M, et al. Health-system specialty pharmacy role and outcomes: A review of current literature. Am J Health Syst Pharm. 2022;79(21):1906-1918.