

Farm Bureau PCM Program Training

January 24, 2006
7:00 a.m. to 9:00 a.m.

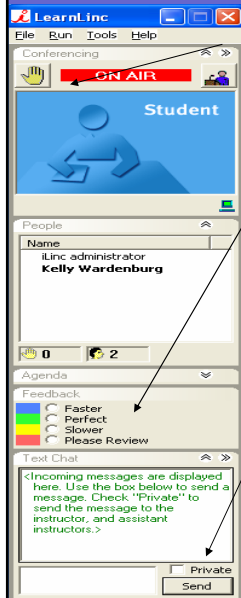
January 25, 2006
1:00 p.m. to 3:00 p.m.

Introductions

Agenda

- Web Conference Instructions
- ScriptSave Dialogue
- Program Overview
- Claims and Data Submission
- Care Coordination
- Evaluation
- Questions

Web Conferencing Instructions



Hand Raise

If you have any questions during our session, please raise your hand by clicking on the hand in the upper left of the Tool Panel.

Feedback

When a question is asked, feedback can be given using the answers provided in this section of the Tool Panel.

Text Chat

You can also send text chat to the leader or publicly by typing in the box and clicking on 'Send'. To send a private message to the leader, check the 'Private' box prior to clicking 'Send'.

ScriptSave Partnership

Mark Walsworth
Senior Vice President, Sales

Farm Bureau PCM Program

Program Overview

Program Objectives

- Build upon success of the Iowa Medicaid Pharmaceutical Case Management
- Evaluate the success of the PCM model of care in the private sector
- Supported by grant funding from the Community Pharmacy Foundation
- Improve outcomes for select patients

Partners

- Community Pharmacy Foundation
- Iowa Pharmacy Association
- The University of Iowa College of Pharmacy
- Iowa Farm Bureau Federation
- Wellmark Blue Cross and Blue Shield of Iowa

Iowa Pharmacy Association

- Obtained CPF funding
- Manage pharmacy network
- Coordinate partnership
- Collect interim data

The University of Iowa College of Pharmacy

- Guide data collection of partners
- Conduct evaluation of the program
- Report findings to Community Pharmacy Foundation and other partners
- Publish and/or present findings

Iowa Farm Bureau Federation

- Farm Bureau member outreach
 - Letters to eligible patients
 - *The Spokesman* newsletter
- Program oversight and support

Wellmark Blue Cross and Blue Shield of Iowa

- Develop patient eligibility process
- Determine patient eligibility pool
- Share pharmacy and medical claims data with evaluation team
- Facilitate coordination with other Wellmark programs
- Communicate program to physicians
 - *Blue Ink* article

Iowa Medicaid vs. Farm Bureau

- Care processes are essentially the same.
- Differences in administrative processes:
 - Patients will be notified of their eligibility
 - Physicians are not paid for participation
 - Wellmark is considering policy changes to facilitate this payment
 - Different billing process will be used
 - Coordination with other care management programs in place

Pharmacist Participation

- All currently eligible PCM pharmacist providers for the Iowa Medicaid program are eligible for participation.
- The addition of new pharmacist providers at new pharmacy locations may be considered after implementation.

Patient Selection – Risk Selection

- Wellmark staff modeled the eligibility process used for the Iowa Medicaid PCM program implementation to determine patient eligibility.
 - 4 or more chronic medications
 - scheduled, nontopical
 - 1 or more select disease states
 - CHF, AF, HTN, Ischemic heart disease, Dyslipidemia, Osteoarthritis, GERD, PUD, Depression, Diabetes, Asthma, COPD

Patient Selection – Provider Access

- At-risk patients' prescription history was matched to determine access to a PCM pharmacist provider.
 - If 50% or more of a patient's prescriptions were dispensed at a PCM pharmacy, the patient was assigned to that pharmacy for PCM services.
 - If no PCM pharmacy dispensed 50% or more, patient was assigned to the control group.

Patient Selection – Pharmacist Notification

- Eligible pharmacists were notified of the opportunity to participate in the project.
- Upon agreement, each pharmacist reviewed their eligible patient list and accepted patients to whom they could provide PCM services.

Patient Notification

- Once accepted by the pharmacist, patients were mailed a letter from Farm Bureau encouraging participation and indicating potential eligibility. Patient is asked to contact their pharmacist.
- Pharmacists received draft letters and a telephone script to recruit eligible patients.

Patient Letter



January 18, 2005

Dear Farm Bureau Member,

The Iowa Farm Bureau knows that health care costs are a major concern for our members. From health insurance, a suite of supplemental programs, preventive and outreach services, we are committed now more than ever to helping our members gain access to quality health care services within their means.

Prescription medication costs continue to soar – rising an average of 17 to 18 percent each year. Through Farm Bureau's unique partnership with the Iowa Pharmacy Association (IPA) and Wellmark Blue Cross and Blue Shield of Iowa, you may be selected to receive a valuable service from your local pharmacist that can help you offset some of these expenses.

The service is called Pharmaceutical Case Management (PCM) and is being offered to you free of charge. PCM allows you and your pharmacist to spend one-on-one time together to talk about your various medications. Through this service, your pharmacist will answer any questions you may have about your prescription medications and work closely with you and your doctor to:

- Help you save money on your medication
- Check that your medications do not cause problems like side effects
- Confirm your medications work correctly for you.

Learning how to take control of your health is important to your well-being and your pocket book. Your local pharmacist may contact you shortly to set up an appointment time. Be sure and take advantage of this valuable service and thank you for selecting Farm Bureau for your health insurance needs. If you should have any questions about this service, please feel free to call Wellmark Blue Cross & Blue Shield at (800) 245-6105 or the IPA at (515) 270-0713.

Sincerely,

David Lyons
Chief Business Development Officer
Iowa Farm Bureau

5400 University Avenue, West Des Moines, IA 50266-5997 / (515) 225-5400

- Sent to potentially eligible patients on Farm Bureau letterhead
- No patient specific information on the letter

Pharmacist-to-Patient Communications

- Available on IPA website (www.iarx.org)
- Letter to Eligible Patients from Pharmacist
 - Informs patients of PCM eligibility
 - Encourages them to set appointment
- Telephone Script
 - Suggested language for recruiting patients via the telephone or in person
 - Answers to commonly asked questions

Notice in *The Spokesman*

- Weekly Periodical Sent to All Farm Bureau Members

IFBF members asked to join drug cost study

Some Farm Bureau members with chronic health issues will be asked to participate in a pilot to control prescription costs.

The Iowa Pharmacy Association has received a \$75,000 federal grant to establish a training program for pharmacists called Pharmaceutical Case Management (PCM).

Farm Bureau is participating in the pilot because of the organization's commitment to help members gain access to quality health care. The program will help members control prescription drug costs, which have been rising 17 to 18 percent annually.

"Under PCM, identified members will have one-on-one time with their pharmacists to talk about your medicines," explains David Lyons, chief business officer for the Iowa Farm Bureau.

"Your pharmacist will answer any questions you may have about your prescription medication and work closely with you and your doctor to save money, to make sure medications do not cause side effects and to make sure medications work correctly."

Pharmacists will contact Farm Bureau members identified for the pilot to set up consultations. The 18-month service will start in February and is free to members.

Notice in *Blue Ink*



Attention: Iowa Providers

Farm Bureau/IPA Pilot Program to Review Medication Use

Starting February 1, 2006, Farm Bureau and the Iowa Pharmacy Association (IPA) will pilot a program to provide pharmaceutical case management (PCM) to patients at high risk for problems related to medication. The program is modeled on the successful Iowa Medicaid Pharmaceutical Case Management program, and involves many of the same pharmacists.

Pharmaceutical Case Management allows pharmacists to support physicians by tracking the prescriptions filled by members, who may be receiving drug therapy from more than one provider. If a patient presents a prescription which reacts with medications already being taken, the pharmacist notifies the prescribing physician(s) and may offer suggestions for alternatives which fit into the physician's plan of care.

Approximately 250 Iowans with Wellmark Blue Cross and Blue Shield health coverage through Farm Bureau were selected for PCM services. Patients identified will receive a letter from Iowa Farm Bureau inviting them to join the pilot program. Their primary pharmacist will then contact the patient to set up an appointment.

The goal of PCM is to prevent drug therapy complications by monitoring

for adverse drug reactions and seeking ways to optimize medication therapy. If review of a patient's medications reveals potential problems, the pharmacist will alert the prescribing physicians. All care provided will be coordinated with the patient's primary physician.

We would appreciate your cooperation in this one-year pilot program. If you have any questions, contact Wellmark at 800-362-2218.

Blue Ink

Patient Assessment Types

Same assessment types as Iowa Medicaid

- Initial Assessment
- Follow-up Assessment
- New Problem Assessment
- Preventative Assessment

Initial Assessment

- Reimbursement Amount - \$75
- Reimbursement Limit – One per lifetime
- Pharmacist MUST:
 - Create an initial medication list
 - Rx, OTC, herbal, supplement, etc.
 - Ask and document two health status questions
 - Create an action plan
 - Plan a follow-up assessment

Initial Assessment Activities

- Take a medication history – *create initial medication list*
- Determine the indication for each medication and record progress toward achieving treatment goals
- Assess patient compliance
- Detect any side effects or side effect risks that can be reduced
- Assess the need for regimen change, patient self-management education, and administration and monitoring device training
- Create an action plan and make recommendations to the physician as necessary
- Coordinate interventions with other Wellmark programs if applicable

Potential Action Plan Elements

- Changes in medication regimen
- Focused patient or caregiver education
- Periodic assessment for changes in the patient's condition
- Periodic monitoring of the effectiveness of medication therapy
- Patient self-management training
- Provision of patient-specific educational and informational materials
- Compliance enhancement
- Reinforcement of healthy lifestyles

Follow-Up Assessment

- Reimbursement Amount - \$40
- Reimbursement Limit – 4 per 12 months
- Pharmacist MUST:
 - Update the medication list
 - Ask and document two health status questions
 - Update the action plan
 - Plan a follow-up assessment

Follow-Up Assessment Activities

- Update the medication list
- Assess progress toward achieving objectives of the action plan
- Update the action plan as necessary
- Assess for new drug therapy problems
- Make recommendations to the physician as necessary
- Coordinate interventions with other Wellmark programs if applicable

New Problem Assessment

- Reimbursement Amount - \$40
- Reimbursement Limit – 2 per 12 months
- Pharmacist MUST:
 - Update the medication list
 - Ask and document two health status questions
 - Update the action plan
 - Plan a follow-up assessment

New Problem Assessment Activities

- Update the medication history
- Identify aspects of new or adjusted medications that increase risk of side effects, compliance problems, or difficulty in achieving treatment goals
- Make recommendations to the physician as necessary
- Coordinate interventions with other Wellmark programs if applicable

Preventative Assessment

- Reimbursement Amount - \$25
- Reimbursement Limit – One per 180 days
- Pharmacist MUST:
 - Update the medication list
 - Ask and document two health status questions
 - Update the action plan
 - Plan a follow-up assessment

Preventative Assessment Activities

- Update the medication history
- Assess patient compliance
- Assess progress toward achieving treatment goals
- Reinforce desired self-management behaviors
- Detect new risk factors
- Assess the need for regimen change and new patient education
- Make recommendations to the physician as necessary
- Coordinate interventions with other Wellmark programs if applicable

Medication History and Medical History

Collected by: _____ Date: _____

Patient Name: _____ Sex: _____ Birth Date: _____ Ht: _____ Wt: _____ LBW: _____ Race: _____

Prescribed Medications (Rx and OTC)					
Name/Strength	Dose/Sig	Duration	Indication	Dr	Comments

Past Medications Not Currently Taking (Rx and OTC)					
Name/Strength	Dose	Duration	Indication	Dr	Reason for Stopping

Optional Medication List Form

Health Status Questions

Must be asked at each assessment

“Overall, how would you rate your health in the past month?”

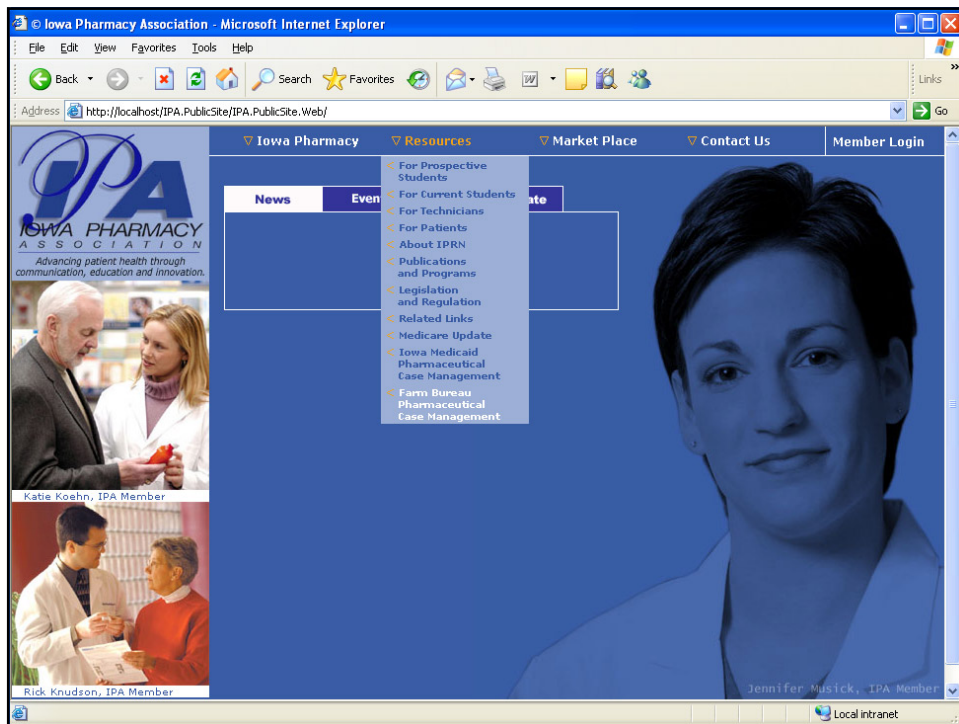
- Excellent
- Very Good
- Good
- Fair
- Poor

“Overall, how would you rate your health in the past month compared to others your age?”

Claims and Data Submission

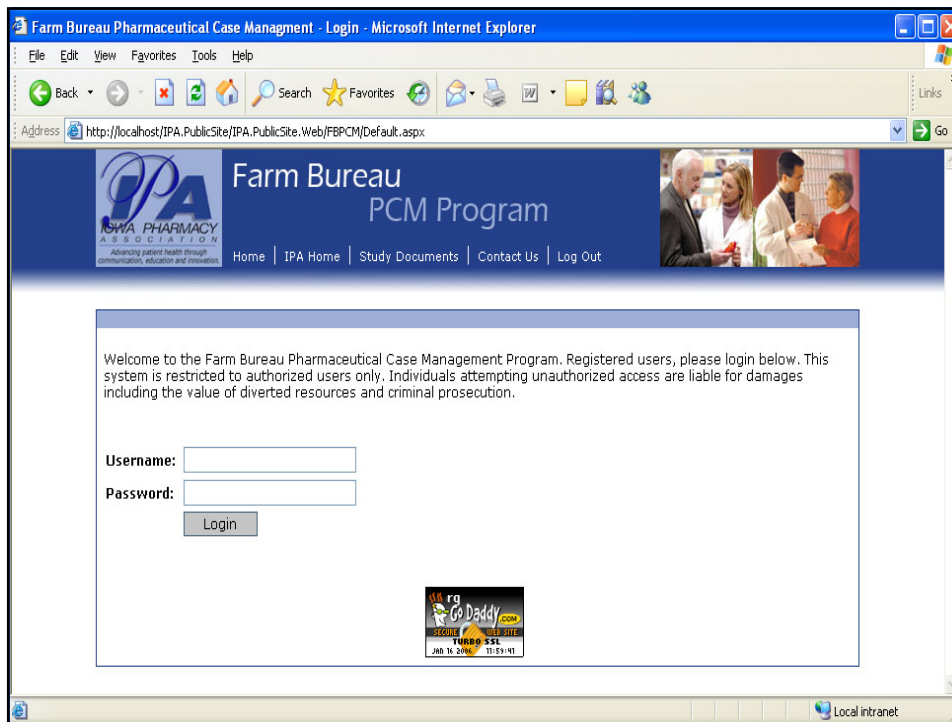
Claims Submission

- IPA website offers a mechanism to submit claims
 - www.iarx.org
- Other systems may be used if the system allows transfer of the required data elements to IPA for processing
- For any special needs, see IPA staff



IPA Website – www.iarx.org

- Sign in using your Pharmacist ID and your password
- Obtain password from the IPA staff



IPA Website – www.iarx.org

- Select the pharmacy practice site
- Most pharmacists will only have one option to select
- Pharmacists who are eligible to provide services at different pharmacy location will have multiple sites to select

Farm Bureau Pharmaceutical Case Management - Patient List - Microsoft Internet Explorer

Address: http://localhost/IPA.PublicSite/IPA.PublicSite.Web/FBPCM/Patients.aspx

Farm Bureau PCM Program

Home | IPA Home | Study Documents | Contact Us | Log Out

Welcome to the Farm Bureau Pharmaceutical Case Management Program. Your associated pharmacies are listed in the drop down box below. Please choose the pharmacy you will be working with and proceed to enter data. Thank you for your cooperation.

Pharmacy:

- Bauder Pharmacy Inc - 1234566
- Bauder Pharmacy Inc - 1234566
- Dahl's - 1234565
- Medicap Pharmacy - 1222222

Assigned Patients sorted by Next Assessment Date

Last	First	Next Assessment	Last Assessment	Reset Next Assesment
Upah	Andy			<input type="text"/>
Protzman	Eric	1/23/2006	1/9/2006	<input type="text"/>
Bierman	Michael	1/26/2006	1/2/2006	<input type="text"/>

Assigned Patients with Pending Issues sorted by Assessment Date

Last	First	Next Assessment	Problem Type	Medication/Problem	Resolved Status
Bierman	Michael	1/11/2006	Need additional drug therapy	B-blocker post MI	<input type="radio"/> Yes <input type="radio"/> No
Bierman	Michael	1/11/2006	Adverse drug reaction	Paxil-weight gain	<input type="radio"/> Yes <input type="radio"/> No

Local Intranet

IPA Website – www.iarx.org

- Once you have selected the pharmacy, you may:
 - Proceed to enter a claim
 - View a reminder screen

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 Bauder Pharmacy Inc - 1234566

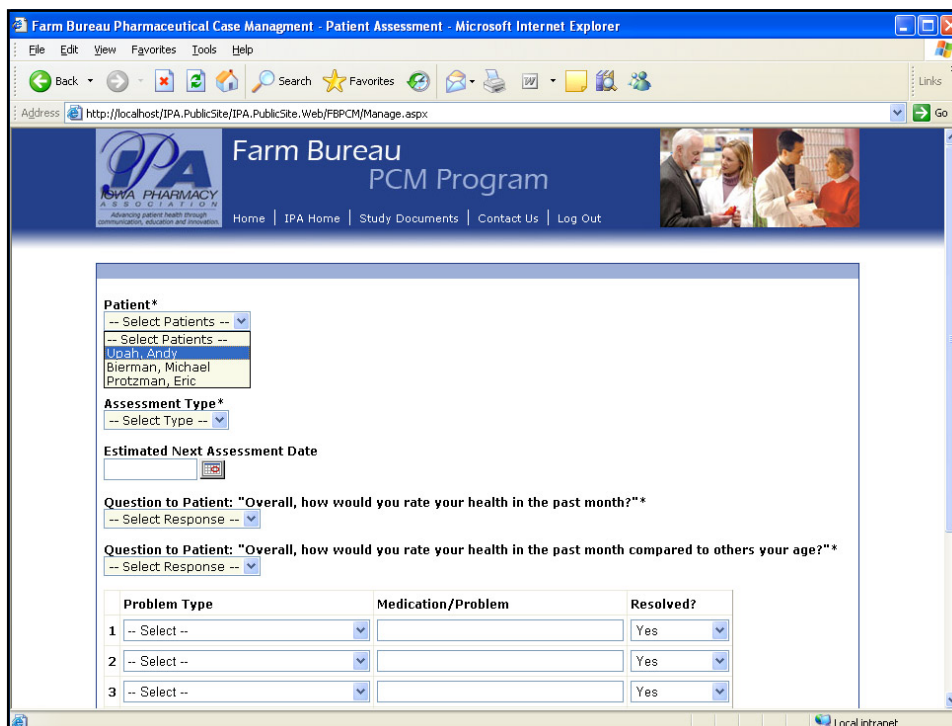
• [Click Here to Enter a New Claim](#)

Assigned Patients sorted by Next Assessment Date

Last	First	Next Assessment	Last Assessment	Reset Next Assesment
Patel	Purvi			<input type="text"/>
Protzman	Eric	1/23/2006	1/9/2006	<input type="text"/>
Upah	Andy	1/26/2006	1/12/2006	<input type="text"/>
Bierman	Michael	1/27/2006	1/2/2006	<input type="text"/>

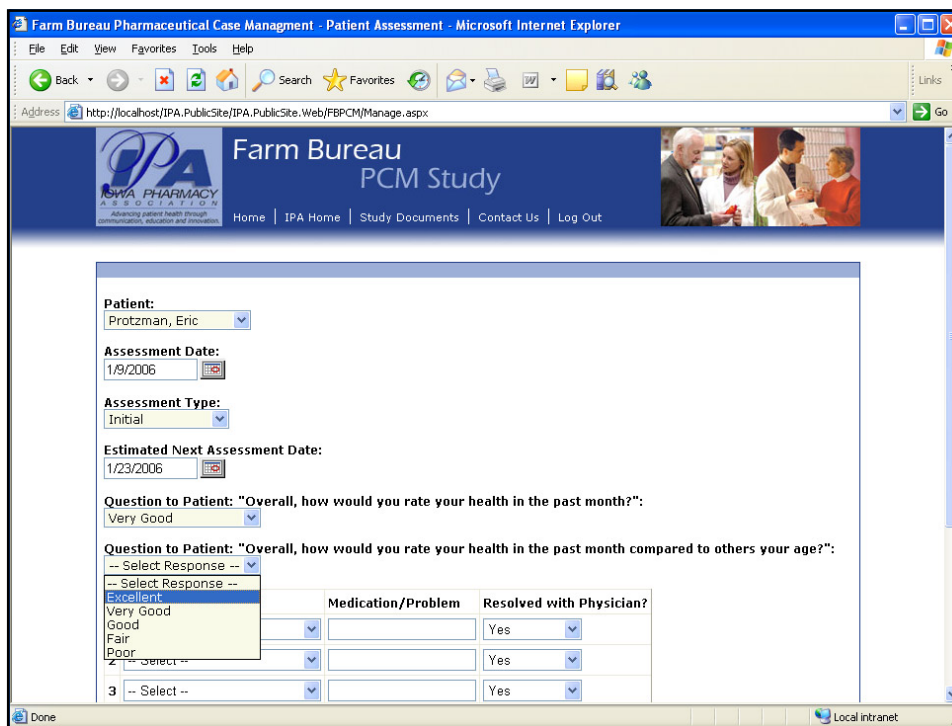
IPA Website – www.iarx.org

- Select patient from the drop down list
- Only your assigned patients are listed



IPA Website – www.iarx.org

- Select using drop down menu or date picker:
 - Date of Assessment
 - Assessment Type
 - Date of Next Encounter
 - Health Status Answers



IPA Website – www.iarx.org

- Records drug therapy problem information identified at the assessment
- NOT a documentation system – does not replace your patient charting
- Information is recorded in a database and is no longer available to you

IPA Website – www.iarx.org

- Type of drug therapy problem
 - Drop down menu
 - May repeat types
 - Up to 9 entries
- Medication/problem
 - Up to 20 characters of free text
- Resolved?
 - Drop down menu
 - Yes, no, or pending

IPA Website – www.iarx.org

- Drug therapy problem types
 - Unnecessary drug therapy
 - Wrong drug
 - Dosage too low
 - Adverse drug reaction
 - Dosage too high
 - Inappropriate compliance
 - Need additional drug therapy
 - None

Farm Bureau Pharmaceutical Case Management - Patient Assessment - Microsoft Internet Explorer

Address: http://localhost/IPA.PublicSite/IPA.PublicSite.Web/FBPCM/Manage.aspx

Patient*
Upah, Andy

Assessment Date*
1/12/2006

Assessment Type*
Initial

Estimated Next Assessment Date
1/26/2006

Question to Patient: "Overall, how would you rate your health in the past month?"*
Excellent

Question to Patient: "Overall, how would you rate your health in the past month compared to others your age?"*
Very Good

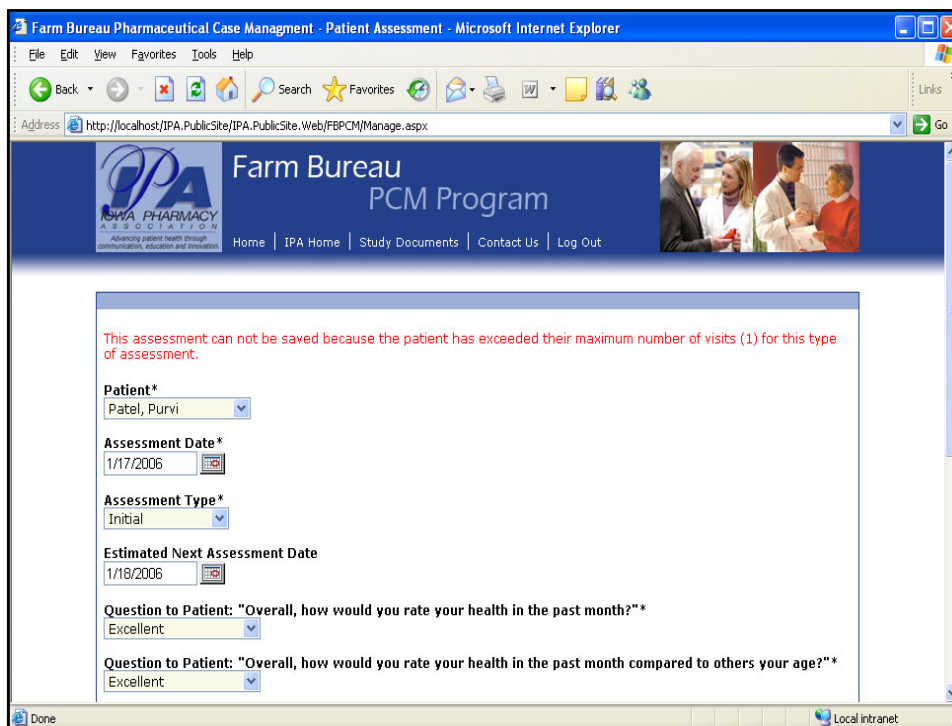
Problem Type	Medication/Problem	Resolved?
1 Unnecessary Drug Therapy	Claritin for Cold	Pending
2 -- Select --		Yes
3 -- Select --		Yes
4 Unnecessary Drug Therapy		Yes
5 Wrong Drug		Yes
6 Dosage too low		Yes
7 Dosage too high		Yes
8 Adverse Drug reaction		Yes
9 Inappropriate compliance		Yes
10 Need additional drug therapy		Yes
11 None		Yes
12 -- Select --		Yes

Submit Cancel

Local Intranet

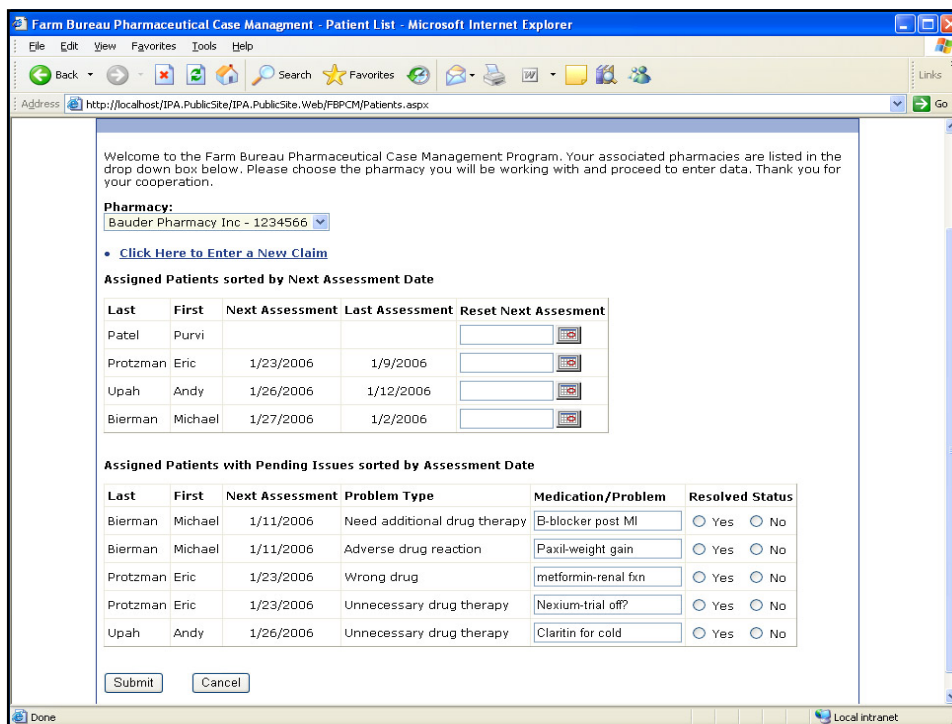
IPA Website – www.iarx.org

- Hit Submit button
- Direct any claims problems to IPA staff



IPA Website - www.iarx.org

- **Reminder Screen - Patient List**
 - Upcoming assessments
 - Overdue assessments
 - Action available: May change date of next assessment
- **Reminder Screen – Drug Therapy Problems**
 - Pending drug therapy problems
 - Action available: May change “Resolved” field to yes or no



IPA Website – www.iarx.org

- Resources available from links at the top of all screens
- “Study Documents”
 - Forms
 - Instructions
- “Contact Us”
 - Email contact to IPA

Farm Bureau Pharmaceutical Case Management - Patient List - Microsoft Internet Explorer

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Local intranet

Claims and Data Submission

- Optional Claims and Data Form
 - For use during patient assessment
 - Facilitates website entry by other pharmacy staff
 - Not intended as a documentation system

Farm Bureau PCM Project

Patient name: _____ **Date of assessment:** _____

Assessment type: (Circle one) **Date of next encounter:** _____

Initial Assessment
Problem Follow-Up Assessment
New Problem Assessment
Preventative Follow-Up Assessment

Pharmacist's Initials: _____

Health Status Questions:

1. Overall, how would you rate your health in the past month?

Excellent Very Good Good Fair Poor

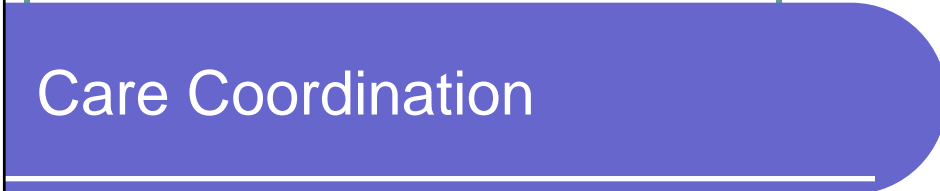
2. Overall, how would you rate your health in the past month compared to others your age?

Excellent Very Good Good Fair Poor

Drug Therapy Problems:
 Document DTP type, medication and problem (up to 20 characters), and status of DTP (resolved, not resolved, or pending). Document up to 9 DTPs using these charts and back of form.

DTP type	Medication/ problem	Resolved/Unresolved/Pending		
		R	U	P
Unnecessary Drug Therapy		R	U	P
Wrong Dose		R	U	P
Dosage too low		R	U	P
Dosage too high		R	U	P
Adverse Drug reaction		R	U	P
Inappropriate compliance		R	U	P
Need additional drug therapy		R	U	P
None				

DTP type	Medication/ problem	Resolved/Unresolved/Pending		
		R	U	P
Unnecessary Drug Therapy		R	U	P
Wrong Dose		R	U	P
Dosage too low		R	U	P
Dosage too high		R	U	P
Adverse Drug reaction		R	U	P
Inappropriate compliance		R	U	P
Need additional drug therapy		R	U	P
None				



Care Coordination

Care Coordination

- Wellmark's existing patient care programs
 - Performance Rx
 - Caremark therapeutic substitution program
 - Recognize and Reward Best Practices (RRBP)
 - Physician clinic-based incentive program
 - Case Management
 - Internal Wellmark program
 - Wellmark's BluePrints for Health Disease Management Program
 - Administered by American Healthways

Performance Rx

- Pharmacists providing PCM should continue to utilize the Caremark Performance Rx program as appropriate.
- When detected during a PCM assessment, recommended changes to generic and therapeutic alternatives may be entered as a "wrong drug" drug therapy problem.

RRBP

- Physician-directed reporting on clinical outcomes
 - Based on national guidelines for standards of care
- Often involve chronic disease parameters
- Financial incentive for demonstrated improvement
- Potential ways for physicians to benefit from PCM

Case Management

- Episodic in nature; 6 month average placement
- Patient selected due to high-risk or high-dollar events or potential events
 - Repeated ER or hospital admission
- Determination of service needs and set goals
- Coordination of care and support systems
- Depression screening and referrals
- Telephonic intervention
 - Education, goal setting, coaching

Disease Management

- Chronic disease care
 - Diabetes, Asthma, CHF, COPD, Cardiovascular
- Protocol-driven telephonic educational intervention and coaching
 - Healthy lifestyle, disease-specific education, goal setting
- Patient receives workbook
- Liaison shares information with physicians
- Medication list provided to primary care provider twice yearly

Coordination

- Performance Rx: no coordination activities needed.
- RRBP: no coordination activities currently available.
- Case Management & Disease Management: Approximately 34% of the patients identified for PCM are in either of these programs.

Coordination

- Pharmacists will be notified if their PCM patients are in either case management (CM) or disease management (DM).
 - Last two columns on your patient list
- CM and DM staff will be notified of patients who are PCM eligible.
- IPA, CM, and DM staff will meet weekly to share information related to mutual patients.
 - Process already in place for CM and DM
- IPA will share pertinent information between the CM and DM staff and the pharmacists.

Coordination

- Ways to share information:
 - Website (www.iarx.org)
 - Date of next assessment
 - Drug therapy problems identified
 - Drug therapy problems pending resolution
 - Health status answers
 - Email (kpuetz@iarx.org) or telephone (515.270.0713)
 - Referrals to CM or DM
 - Unique problems

Evaluation

Evaluation

- Interim data will be collected via the claims and data submission on the IPA website
- Formal evaluation by the University of Iowa will begin after 12 months of services
- Research process will be similar to that used for the Iowa Medicaid PCM evaluation

Evaluation

- Research will examine
 - Medical claims data (Wellmark)
 - Pharmacy claims data (Wellmark)
 - Drug therapy problems (IPA)
 - Health status (IPA)
 - Pharmacist recommendations (Pharmacists)
 - Physician responses (Pharmacists)
 - Medication Appropriateness Index (Pharmacists)

Evaluation

- Evaluation team will extract data from patient charts in the pharmacies
- Evaluation Needs from Pharmacists
 - Beginning and ending medication list
 - List should be updated in the last 60 days of the program evaluation (Plan an assessment for December 2006 or January 2007)
 - Progress notes for recommendations, physician responses, and other pertinent information

Next Steps

Check List

- **Contact IPA to:**
 - Complete business associate agreement
 - Obtain your patient list
 - Update contact information
 - Obtain password for the website
 - Accept the patients who you will provide PCM services
- **Contact patients to:**
 - Set up initial assessment

IPA Staff

- Contact IPA staff for:
 - Any questions
 - Resources to assist you
 - Referrals to CM or DM
- IPA staff will contact you with:
 - Pertinent information on CM or DM patients
 - Performance reminders
 - Monthly payments for your services!

Optional Q & A Session

- IPA staff will be available at the IPA Educational Expo
 - January 27-29, 2006
 - Marriott Downtown Des Moines
- Optional Q & A session will be held after the law review session on Sunday
 - January 29, 2006 at approximately 2:00pm

IPA Staff Contacts

Kate Puetz
515.270.0713
kpuetz@iarx.org

Cheryl Clarke
515.270.0713
cclarke@iarx.org

IPA website
www.iarx.org
Under "Resources"
Under "Farm Bureau
Pharmaceutical
Case Management"
Select "Contact Us"

Questions?

Thank you for attending this training session. Your attendance is appreciated as we know your time is valuable.