

# Defense Wins Championships: Creating an Ambulatory Practice to Win in Patient Outcomes

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Speaker has no conflicts of interest to disclose

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## Learning Objectives

- Describe the value of ambulatory pharmacist patient care services and the responsibility and accountability of the pharmacist provider.
- Identify the resources needed to support the ambulatory service and develop an implementation process for the integration of the service.
- Identify optimal revenue generation sources based on the service to be provided.
- List critical elements that create a winning program of best patient outcomes.



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## Value and Roles



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# What defines value to you and the stakeholders in your ambulatory program.

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## Required Attributes of Any Program

- Value – health outcomes that matter to patients /cost (Porter)
- Scalable – ability to expand and upgrade
- Reproducible – re-create at another site
- Sustainable – maintain a positive value/cost ratio

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Porter M. What is value in health care? N Engl J Med.2010;363:1471-81.

## Evidence Supporting Ambulatory Pharmacist Practice

- Approximately 40 summative supportive publications (examples)
  - Long B, Abrams M, Milkstein A, et al., eds. Effective Care for High-Need Patients: Opportunities for Improving Outcomes, Value and Health. Washington, DC: National Academy of Medicine, 2017.
  - Thomas-Henkel C, Turner S, Freda B; Center for Health Care Strategies. Opportunities to Enhance Community-Based Medication Management Strategies for People with Complex Health and Social Needs. Hamilton, NJ: Center for Health Care Strategies, 2018. [www.chcs.org/resource/opportunities-to-enhance-community-based-medication-management-strategies-for-people-with-complex-health-and-social-needs/](http://www.chcs.org/resource/opportunities-to-enhance-community-based-medication-management-strategies-for-people-with-complex-health-and-social-needs/). Accessed February 18, 2019.
- > 200 publications studying various services (examples)
  - Victor RG, Lynch K, Li N, et.al. A Cluster-Randomized Trial of Blood-pressure Reduction in Black Barbershops. N Engl J Med. 2018;378: 1291-1301.
  - Brummel A, Lustig A, Westrich K, Evans MA, Plank GS, Penso J, Dubois RW. Best practices: improving patient outcomes and costs in an ACO through comprehensive medication therapy management. J Manag Care Pharm 2014;20:1152-8.

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## Medication Management Services

Spectrum of patient-centered, pharmacist-provided, collaborative services that focus on medication appropriateness, effectiveness, safety and adherence with the goal of improving health outcomes.

JCPP press release: <https://nasp.us/wp-content/uploads/2018/03/Press-release-MMS-2018-1.pdf>



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Are all pharmacists able to or have the skills to provide the full landscape of services?



Because pharmacists are people they have different strengths and skills

<https://0.us.com/3.ta1st.com/27v.600400/went6dual.dhew.us>



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Care should be provided around groups of patients with particular needs versus around what providers do in any particular setting.

Porter ME, Lee TH. What 21st century health care should learn from 20th century business. <https://doi.org/10.1016/j.jamcoll.2018.08.001>  
pubs.nlm.nih.gov/pubmed/30111118  
Peer-Review: 2018 Nov 11  
Peer-Review: 2018 Nov 11



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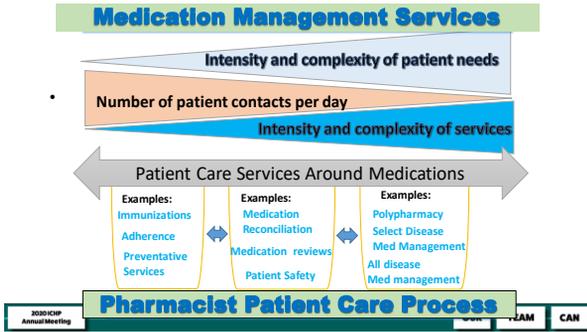
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Services Listed by Advisory Board for a Clinical Pharmacist

- Medication therapy management
  - Medication history
  - Medication reconciliation
  - Patient education
- Patient assessments
- Evaluate patients' medication treatment plans on an ongoing basis
- Preventive care
- Transitional care support
- Panel management
- Immunizations
- Team leaders for high-risk patients with complex medication regimens
- Chronic disease education and management
- Care team education
- Quality improvement projects
- Annual wellness visits
- Connecting patients to medication-related financial assistance.

Adherence to evidence-based medicine

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Comprehensive Medication Management

<b>Location of services</b>	<ul style="list-style-type: none"> <li>• Fully integrated with a health care team</li> <li>• Internal medicine clinic</li> </ul>
<b>Service specifics</b>	<ul style="list-style-type: none"> <li>• Responsible for optimizing medications for all patients in practice with chronic medication conditions utilizing high risk or greater than 6 medications.</li> <li>• Accountable for all adverse drug events, hospitalizations due to medications, medication related process and outcome metrics.</li> <li>• Responsible for coordination of care, follow up and work related to medications of referred patients.</li> </ul>

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### Comprehensive Medication Management

**Intensity and Duration**

- 30 to 60-minute patient visits
- Depending on resources and supportive help 12 to 20 patients seen a day

**Pharmacist work expectations**

- Care of patients is a 24/7 job
- Committed to investing in skills and knowledge
- Maintains current knowledge by staying up to date in primary literature, best practices and evidence-based medicine.

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### Use Best Practices Documents for Defining Roles

[https://www.accp.com/docs/positions/misc/CMM\\_Care\\_Process.pdf](https://www.accp.com/docs/positions/misc/CMM_Care_Process.pdf)

Optimizing Medication Use in Patient-Centered, Team-Based Care Settings

ACCP, ACP, ASHP, ANIM, etc.

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### IHI Guidelines for Workforces

- Standardize what makes sense in order to reduce unnecessary variation
- Recognize that healthcare systems are embedded in a network that reaches well beyond traditional walls

Lochrer S, Feeley D, Berwick D. 10 New Rules to Accelerate Healthcare Redesign. *Build capabilities to guide healthcare organizations during an era of reform.* Healthcare Exec. 2015;34(6):46-52.

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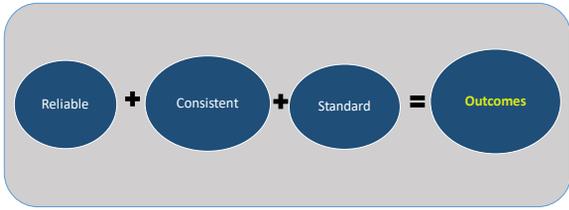
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### Provision of Services




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## Resources and Implementation




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**The most critical resource is the ambulatory pharmacist. Which of the following is the most important characteristics in choosing a pharmacist to practice in the ambulatory setting?**

- A. Philosophy of practice
- B. Communication skills
- C. Knowledge of chronic disease
- D. Empathy for patients

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### Competency desirable for the pharmacist provider

**Competence**

- Self-directed learning
- Knowledge
- Applied skill
- Proactivity
- Wisdom

**Connection**

- Compassion
- Empathy
- Self control
- Kindness
- Influence

**Character**

- Honesty/integrity
- Humility
- Responsibility
- Service
- Moral Courage

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### Essentials of a Patient Care Practice

- A philosophy of practice



- A patient care process



- A practice management system



<http://1130.blogspot.com/2020/08/10-10-2020.html>

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### Comprehensive Medication Management

**Choosing a Pharmacist Competency and Characteristics**

- Understands the “art” of practice, with emotional intelligence and strong communication skills
- Practices patient centeredness and understands fully patient engagement
- Strong comprehensive knowledge base and current on evidence-based medicine
- Scores high on the Taxonomy of Professionalism
- Able to make and responsible for difficult decisions
- Credentials such as residency or board certification valuable helpful

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### Additional Resources to Consider

- Additional Personnel
  - Support staff for non-pharmacist related duties
  - Use of learners
- Space, equipment and supplies
  - Visit room size and needs
  - Furniture,
  - Office and medical supplies




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### Marketing Resources: 7 P's of healthcare marketing

✓ Product	Service provided is understood and clear
Price	Value equation
Place	Access
Promotion	For all "customers"
People	Competencies available
Physical Evidence	Comfort Welcome & responsiveness
Process	Ease Wait times

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### Patient Care Services Hospital



### Patient Care Services Ambulatory




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# Revenue Generation



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Which of the following is the optimal process for generating revenue for pharmacist services?

- A. Established patient codes
- B. Facility fee billing
- C. CCM, PCM codes
- D. Not worth the effort

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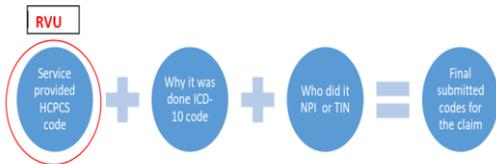
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Basic structure of health care services payment



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# Quality and Outcomes



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## Hospital Pressures

- 2020 penalties for Illinois Hospitals: 32/125 (25%)
- High cost of hospitalizations (Kaiser Report of 2018 data average cost/day)

	Illinois	United States
State/local government hospitals	\$2,892	\$2,260
Nonprofit hospitals	\$2,650	\$2,653
For-profit hospitals	\$2,023	\$2,093

<https://www.ahrq.gov/press-releases/2018/08/2018-08-20-ahrq-report-hospital-costs>  
<http://www.kff.org/health-costs/issue-brief/2018/08/2018-08-20-ahrq-report-hospital-costs/>

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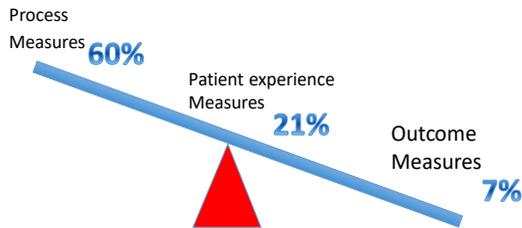
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## Measure Imbalance



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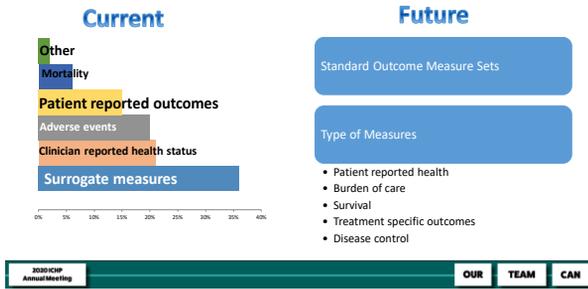
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### Current and Future Outcome Measures




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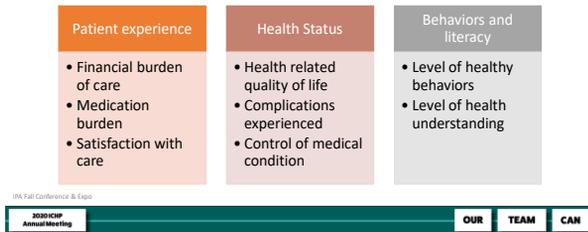
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### Measuring Quality – Time to shift focus

International Consortium for Health Outcomes Measurement




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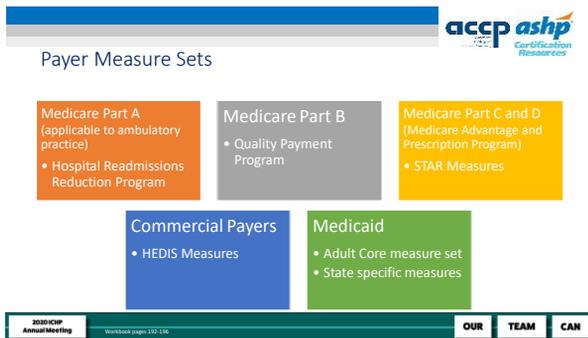
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**Attribution**

-  Sets of rules used to determine which provider or group of providers is responsible for a patients care from a quality, cost or payment perspective.
-  171 attribution models are in use across the US.
-  Attribution is the base of population-based models

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## SELF-ASSESSMENT QUESTIONS

### Defense Wins Championships: Creating an Ambulatory Practice to Win in Patient Outcomes

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1. The ROI for patient care services provided by pharmacists is?
  - A. 4.8/1
  - B. 2.2/1
  - C. 12/1
  - D. 8/1
  
2. Essential elements of a patient care practice besides a standard process and practice management system are:
  - A. Reimbursement model
  - B. Philosophy of care
  - C. Adequate trained staff
  - D. A value equation
  
3. Which of the following is the best revenue source for ambulatory pharmacist patient care services?
  - A. Facility gee billing
  - B. Established patient codes
  - C. TCM, CCM, PCM codes
  - D. All of the above
  
4. Which of the following is the best metric for measuring quality of a pharmacist patient care ambulatory service?
  - A. Acceptance of pharmacist recommendation
  - B. Number of patient visits per day.
  - C. Medication related hospitalization rate
  - D. Patient satisfaction with services
  - E. None of the above

Answer key: 1) A; 2) B; 3) D