Practice Advancement Initiative (PAI)

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Disclosure

• The presenter for this continuing education activity report no relevant financial relationships.

• No off-label uses of medications will be described in this presentation.

Learning Objectives

(Pharmacists)

• Identify steps the pharmacy profession may take to help advance patient care contributions

• Describe Practice Advancement (PAI) implementation, activities, and resources

• Discuss the use of the PAI Hospital and Ambulatory Care Self-Assessments as strategic planning tools to advance pharmacy practice

• Identify three ways a state affiliate can leverage use of the self-assessments to advance practice
Learning Objectives
(Pharmacy Technicians)

- Describe the PAI pillars, activities, and resources
- Identify three areas of greatest progress for the Practice Advancement Initiative
- Evaluate opportunities for pharmacy technicians to participate in practice advancement activities

<table>
<thead>
<tr>
<th>Imperative for Change</th>
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<tbody>
<tr>
<td>• MACRA</td>
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<tr>
<td>- Merit-based Incentive Payment System (MIPS)</td>
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<tr>
<td>- Alternate Payment Model (APM) incentive system</td>
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<tr>
<td>- Movement away from volume toward value-based payment</td>
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<td>- Risk-based, care coordination</td>
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<tr>
<td>- MIPS + APM = Quality Payment Program</td>
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<td>• Aging population and declining Medicare beneficiary ratio amplifies unsustainable trajectory of healthcare spending</td>
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<td>• 40 percent of older Americans take at least five prescription medications, and the number is growing</td>
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<td>• Self-care, cost-effective innovations, and infrastructure to support “aging in place” (e.g., CMS Independence at Home demonstration project)</td>
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Distribution of Outpatient vs. Inpatient Revenues

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<tr>
<td>2014</td>
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Essential Strategies to Expand the Pharmacy Enterprise

- Change perspective
- Understand and participate in the C-suite's ambulatory care strategic plan
- Assess revenue cycles
- Invest in outpatient pharmacy, specialty pharmacy, and home infusion
- Population health management
- Transitions of care focused planning
- Develop a layered learner model expanding student and resident training within primary care and ambulatory care
- Actively engage technologies to reach ambulatory care patients
- Market pharmacists' value
- Advocate for the profession

Key Points in 2017 Report

- Growing emphasis on population health management
- Health information technology (e.g., interoperability, single plan of care)
- Managing medication costs
- Therapeutic practice changes (e.g., precision medicine, payer-specific treatment pathways, cost-effective sites of care, AMS program)
- Increasing demand of regulatory requirements
- Leveraging of the pharmacy workforce
- Health-system operations changes in response to healthcare payment models, ambulatory care, quality measurement, and patient empowerment

Source: Avalere Health analysis of American Hospital Association Annual Survey data, 2014, for community hospitals.

Polling Questions

- How many of you have done an ASHP Hospital Self-Assessment?
- What are the two ways one can take the Ambulatory Care Self-Assessment?
- Where can you find a PAI case study or spotlight on the PAI website?
- How many have used the State Affiliate Toolkit?

Origins of PAI

- Pharmacy Practice Model Initiative (PPMI) – started with invitational summit in November 2010
- The PPMI summit resulted in 147 recommendations and statements on the future of health system practice
- An Ambulatory Care Summit (ACS) was held in March 2014, recognizing the acute care focus of PPMI and the clear need to bring focus to ambulatory care practice
- The ACS14 resulted in 25 recommendations specific to practice in ambulatory care
- In 2015, PPMI and ACS14 collectively were rebranded to...
Hospital Self-Assessment

- Complete Hospital Self-Assessment
- Prepare Action Plan – identify priorities based on feasibility and impact
- Consists of 106 questions designed to assess an individual hospital’s alignment with the recommendations
- Covers a wide range of topics:
  - Advancing the application of IT in the medication-use process
  - Advancing the use of Pharmacy Technicians
  - Care team integration
1,725 assessments completed (24.52%) including DC and Puerto Rico.

Nine states have achieved ≥50% completion:
- RI, ND, ME, IA, WI, NH, SC, WA, SD.
HSA Action Plan Opportunities

• Top Three Action List Priorities
  – Residency-trained pharmacists
  – Assigning initiation of medication reconciliation to appropriately trained pharmacy technicians to:
    • Capture admission and discharge medication histories for a reconciled personal medication list
    • Care coordinate patient assistance services for post-discharge medication use (e.g., ensuring patient access to affordable medications)
  – Provision of discharge counseling by pharmacists to include standardized process for hand-offs to next level of care (e.g., skilled nursing facility, home health)

The Hospital Self-Assessment is recommended for use by hospitals because:

A. It provides a gap analysis to assist in identifying priorities
B. It defines a preferred practice model
C. It supports initiating practice change by providing reference sources
D. A and C
Ambulatory Care Conference and Summit

- Held March 2014 in Dallas, TX
- Educational program and consensus recommendation development
  - Attendees participated in discussion and voting on recommendations
  - Proceedings published in AJHP August 15, 2014
- Four Domains:
  - Defining Ambulatory Care Pharmacy Practice
  - Patient Care Delivery and Integration
  - Sustainable Business Models
  - Outcomes Evaluation
- Resulted in 25 recommendations – broad based statements with multiple components

Why do the Ambulatory Care Self-Assessment?

- Assess how your practice aligns with the ASHP Ambulatory Care recommendations
- Reflect on where you are and showcase what is going well
- Identify areas of need
- Two versions of the self-assessment (system and practitioner)
- Create an action plan to improve practice
  - Put data to use (e.g., strategic planning priorities, business plan development)
  - Determine steps to move from current state to a desired future state
- Benchmark against other facilities and measure progress over time

The Ambulatory Care Self-Assessment Tool (ACSAT) was developed to evaluate environments and perspectives to assess adoption of the Ambulatory PAI recommendations at the practice level.

A. True
B. False
Prioritizing Action List

NOTE: no data for DC, DE, GA, HI, NM, and PR
Ambulatory Care Action Plan Opportunities

- Top Three Action List Priorities (System Assessment)
  - Ambulatory care pharmacists actively engaged in transitions of care activities
  - Decrease care fragmentation across the continuum
  - Establishing and engaging in a comprehensive ambulatory care strategy (e.g., community pharmacy, specialty pharmacy, ambulatory care pharmacist in a primary care setting)
- Use of billing codes when providing ambulatory pharmacist patient-care services
  - Use of standardized framework for clinical documentation (i.e., SNOMED CT)
  - Clinical pharmacist engaged in team-based, patient-centered care (e.g., Patient Centered Medical Homes, ACOs, bundled payment arrangements, aging in place demonstration pilots)
  - Creating financially sustainable services
- Active participation by ambulatory care pharmacists in organization-wide committees

The Action Plan developed by use of the Hospital and Ambulatory Care Self-Assessments are strategic planning tools that are focused on impact and feasibility.

A. True
B. False

Barriers to PAI engagement

- Lack of awareness
- Not a state-wide or organization priority
- Lack of time and resources
- Regulatory requirement burden
- Need to flex staffing based on census and exercise other expense reduction actions
- Do not know where and/or how to start
- No deliberate strategic planning process in place
- This is not what is keeping me up at night
- Required to show ROI on all budget requests
PAI is focused on computer modeling of pharmacy workflow to identify strategies for increased pharmacy efficiency.

A. True  
B. False
Small Group Discussion

- Briefly discuss initiatives and activities you are engaged in at your workplace and how they contribute to practice advancement
- How does your department/pharmacy service identify and prioritize goals and objectives for strategic direction?
- Be prepared to offer responses as part of full-audience discussion

State Affiliate Grants

- **Goal:** Promote the dissemination and implementation of PAI
- **Leadership Workshop**
  - Honoraria and travel support
- **$2,000 grant to support advancement-focused programs**

Streamlined Submission

- **ASHP Foundation State Affiliate Grants**
  - Link to the Application Survey
  - Tools to plan your workshop

http://www.ashpfoundation.org/MainMenuCategories/AdvancingPractice/StateAffiliateToolKit
PAI State Affiliate Grants

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<th>End Date</th>
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- 21 total grants awarded
- FL, IA, OH, SC, and WI have been awarded two
- Six grants awarded in 2016

PAI State Affiliate Grant Success Stories

- Establishing and engaging in a comprehensive ambulatory care strategy (e.g., community pharmacy, specialty pharmacy, ambulatory care pharmacist in a primary care setting)
- Advancing the roles and responsibilities of pharmacy technicians to expand services
- Discharge and/or admission medication reconciliation pilots
- Education and training on current reimbursement practices and options for pharmacists/pharmacies to create financially sustainable services
- Plan to leverage technology for improved medication safety

PAI State Affiliate Grant Success Stories

- Leverage use of students/residents for outreach (e.g., survey completion, projects)
- Develop state affiliate strategic plan for advancing pharmacy practice across all pharmacy practice settings
- Development of a Tech-check-Tech toolkit (hospital/ambulatory)
- Technician recruitment and retention
- Regulatory requirement demands (sterile compounding USP <797>; antimicrobial stewardship)
Maximize Resident and Student Society Participation

- Pharmacy practice more reliant on resident and student pharmacist engagement for the provision of essential patient care services
- Student pharmacists can work with pharmacy and/or senior leadership to engage extenders and advance pharmacy practice
- Value of student pharmacists in experiential education
  - Layered-learning models
  - Ability to expand services with neutral effect on FTEs
  - Projects to help target self-assessment gaps in quality/safety

PAI Consensus Regarding Students

- “Develop a plan to allocate pharmacy student time to drug therapy management services”
  - Consensus statement B24c
- “Pharmacy education must prepare pharmacists for an expanded role...”
  - Training to include roles of safety and quality in the medication-use process and transitions of care
  - Consensus statements B26, B27, E4m, E4n

Pharmacy Forecast: 2015 – 2019

- The use of students in essential patient care activities can enable pharmacists to allocate their time to patients with complex medication-use needs
- This will enrich students’ educational experiences and support development of a pharmacy workforce that is better prepared for provision of patient care
Probing Questions for PAI Engagement

- In what ways do pharmacists work with an inter-professional care team to provide medication therapy management?
- How are pharmacists involved with clinical decision support (e.g., order set development, smart infusion pump analytics)?
- How is the pharmacy staff involved in transitions of care?
- How often is medication reconciliation performed by pharmacy staff?

What You Can Do Now

- Complete the self-assessments and share with your pharmacy team to develop actionable plans
- Engage in discharge counseling after monitoring inpatient
- Medication reconciliation at admission and discharge
- Get involved with ambulatory care (e.g., community, specialty, population health)

Some Priority Focus Areas for PAI

- Progress measure review and update to reflect PAI integration
- Tools to help advance student pharmacist exposure to direct patient care activities
- Provider status readiness resources to help prepare pharmacists to practice at the level we envision
- Clinical documentation standardization for pharmacy services
- Tools to help individual practitioners overcome PAI barriers
Key PAI Takeaways

• Develop a state-wide outreach strategy to complete the assessment(s) and use the action list and reports to develop specific ACTIONS to turn weak areas into state priorities
• Apply for a State Affiliate PAI Grant
• Student pharmacist/resident engagement
• Reach out to those states or organizations that have had success

Open Discussion

• How do organizational/affiliate leaders identify gaps and formulate plans to address those things that keep them up at night?
• As part of an outreach strategy, schedule time with sites and help facilitate self-assessment completion?
• Focus on health-systems who are looking for expansion to/invest in an ambulatory care strategy?
• For those of you who have already completed, what good has come of the self-assessment(s) and action plan(s)?

Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 592 and S. 109)

• Early reintroduction signals commitment of lead sponsors
  — Grassley, Guthrie
• Strong, bipartisan support
  — H.R. 592: 107 co-sponsors
  — S. 109: 26 co-sponsors
• New administration, new Congress has little impact on strategy
Next Steps

Build On Momentum From 114th Congress
Negotiate with Committee Staff
Identify Medicare-Related Legislation

Questions?