



Community pharmacy efforts to increase performance scores

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BACKGROUND

- The shift to value-based health care led to the creation of a star rating system used by the Centers for Medicare and Medicaid Services (CMS) to measure the quality of Medicare plans.¹
- Medication-related measures such as adherence are weighted heavily in the star ratings calculations, giving pharmacies opportunities to affect these ratings.¹
- Pharmacy performance scores are metrics that measure a pharmacy's performance in several categories such as proportion of days patients are covered by a particular medication class.²
- Establishing and maintaining high pharmacy performance scores can increase a pharmacy's inclusion in Medicare plans and its ability to receive appropriate reimbursement from a plan.¹
- Little has been published about the attempts by pharmacy owners, pharmacists and technicians to increase these pharmacy performance scores.

OBJECTIVES

- Assess methods used by pharmacy owners, pharmacists and technicians of independent community pharmacies to increase their pharmacy performance scores
- Evaluate the effectiveness of the methods used to increase pharmacy performance scores

METHODS

- A cross-sectional survey was distributed to community pharmacy owners, pharmacists and technicians in the United States using REDCap electronic data capture tools hosted at the University of South Carolina.^{3,4}
- The questions assessed knowledge of CMS star ratings and pharmacy performance scores, efforts to increase the scores, and perceptions of how effective the efforts have been.
- Surveys were distributed by email to listservs of independent pharmacy owners, individual pharmacists at independent pharmacies and by social media to accounts pertaining to independent community pharmacy.
- Data analysis included comparison of responses to stated pharmacy performance.
- The study received an exemption from Human Research Subject Regulations by the University of South Carolina's IRB.

Table 1 Respondent Demographics

Table 1. Respondent Demographics					
Demographic	Number				
Total number of responses	51				
Average age in years (+/-SD)	48 (+/-11.6)				
Male	31				
Role in pharmacy					
Owner	41				
Pharmacist	9				
Technician	1				
Race					
White	46				
Asian	3				
Other	1				
Hispanic/Latino ethnic group	1				

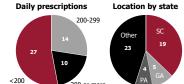


Table 2. Strategies implemented to improve performance scores*

RESULTS

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		Percentage of respondents reporting 80% or better performance in various metrics								
	Number of	Proportion of days covered: statins		Proportion of days covered: diabetes		Proportion of days covered: RASA^		Statins in diabetes		
Strategy	respondents using strategy (%)	Strategy NOT utilized	Strategy utilized	Strategy NOT utilized	Strategy utilized	Strategy NOT utilized	Strategy utilized	Strategy NOT utilized	Strategy utilized	
Medication therapy management (MTM)	43 (84.3)	50.0%	79.1%	62.5%	76.7%	50.0%	79.1%	37.5%	39.5%	
Medication delivery	41 (80.4)	80.0%	73.2%	70.0%	75.6%	80.0%	73.2%	50.0%	36.6%	
Medication synchronization (not appointment-based)	38 (74.5)	76.9%	81.6%	53.8%	81.6%	53.8%	81.6%	38.5%	47.4%	
Adherence reminder calls	33 (64.7)	61.1%	81.8%	61.1%	81.8%	61.1%	81.8%	27.8%	45.5%	
Adherence packaging	29 (56.9)	72.7%	75.9%	68.2%	79.3%	68.2%	79.3%	18.2%	55.2%	
Auto refill	26 (51.0)	76.0%	73.1%	76.0%	73.1%	76.0%	73.1%	32.0%	46.2%	
Appointment-based medication synchronization	24 (47.1)	70.4%	79.2%	66.7%	83.3%	70.4%	79.2%	40.7%	37.5%	
Technician-managed										
adherence programs	24 (47.1)	63.0%	87.5%	70.4%	79.2%	66.7%	83.3%	37.0%	41.7%	
Adherence reminder texting	22 (43.1)	65.5%	86.4%	72.4%	77.3%	69.0%	81.8%	44.8%	31.8%	
Employee incentives	6 (11.8)	75.6%	66.7%	73.3%	83.3%	75.6%	66.7%	42.2%	16.7%	

*Not all strategies surveyed were included on this poster. See appendix for full results. ARASA: Renin-angiotensin system antagonists.

CONCLUSIONS

Limitations

- Pharmacy performance scores and methods used to improve scores were reported by survey participants and could not be verified.
- No baseline data exists for pharmacy performance scores prior to strategy implementation.
- The scope of survey distribution was limited; a larger sample size is needed to perform statistical analysis and draw stronger conclusions.
- Participants volunteered to complete the survey and may not adequately represent independent pharmacies as a group.
- An understanding of terms used in the survey could have varied among participants.
- Pharmacies were asked to report their performance scores within a range. Exact performance scores would have allowed more specific data analysis.

Conclusions:

- Pharmacies offering medication synchronization (appointment-based or not) scored higher in most categories than those who didn't offer the service.
- Higher scores were seen in adherence metrics (proportion of days covered) for pharmacies offering adherence reminder calls, texting and packaging.
- Neither auto refill nor employee incentives seemed to help performance. Delivery led to mixed results.
- Pharmacies offering medication therapy management and technician-managed adherence programs had higher scores in the four categories.
- Implementing strategies that correlated positively to performance scores could help pharmacies increase reimbursement from Medicare plans.
- Further research is needed to determine the beforeand-after effect of implementing these strategies.

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Disclosures

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 For full results, visit bit.ly/pharmacy_scores or scan the QR code:



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