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Project #62: Collaboration is Key: Embedded Clinical Pharmacists in Primary Care Clinics Collaborate to Help Patients with Diabetes and Cardiovascular Risk

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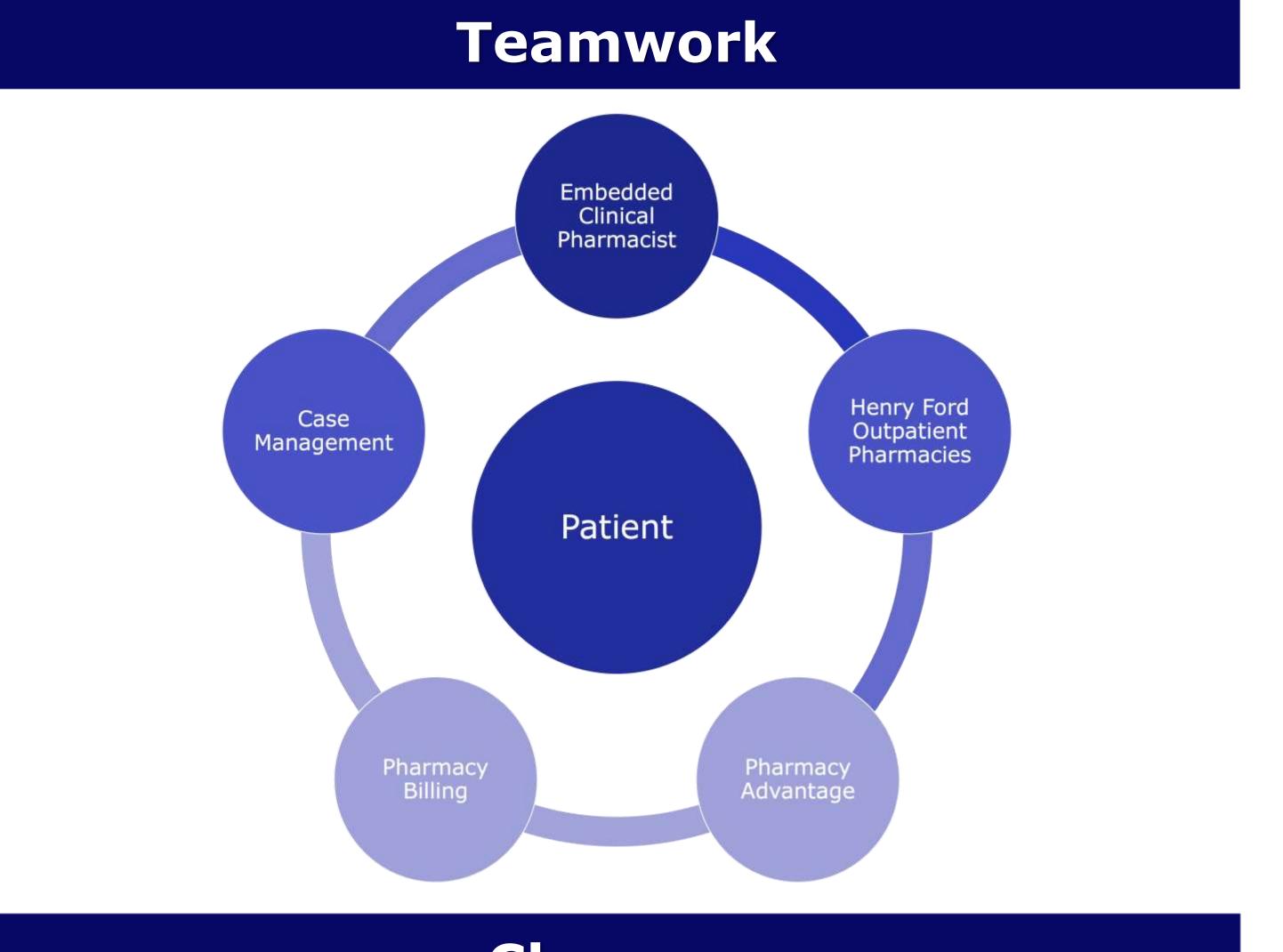
Aim

Embedded clinical pharmacists within primary care clinics optimize pharmacologic care for patients with high-risk disease states including Type 2 Diabetes Mellitus (T2DM) and established cardiovascular disease.

Glucagon-like peptide 1 receptor agonists (GLP-1 RA) and sodium-glucose cotransporter 2 inhibitors (SGLT2i) are two classes of evidence-based therapies for these indications. However, medication access is a common barrier for these medications due to high cost, drug shortages, and need for insurance prior authorizations.

The overall goal of this initiative was to improve access and increase utilization of GLP-1 RA and SGLT2i by:

- Improving teamwork and communication between key internal teams to help patients access GLP-1 RA and SGLT2i.
- Assessing utilization of Henry Ford Pharmacies for GLP-1 RA and SGLT2i in clinics with embedded clinical pharmacists.
- Describing the impact of the patient care team on connecting patients to the Henry Ford Pharmacy Patient Financial Assistance Program (HF PFAP).



Changes

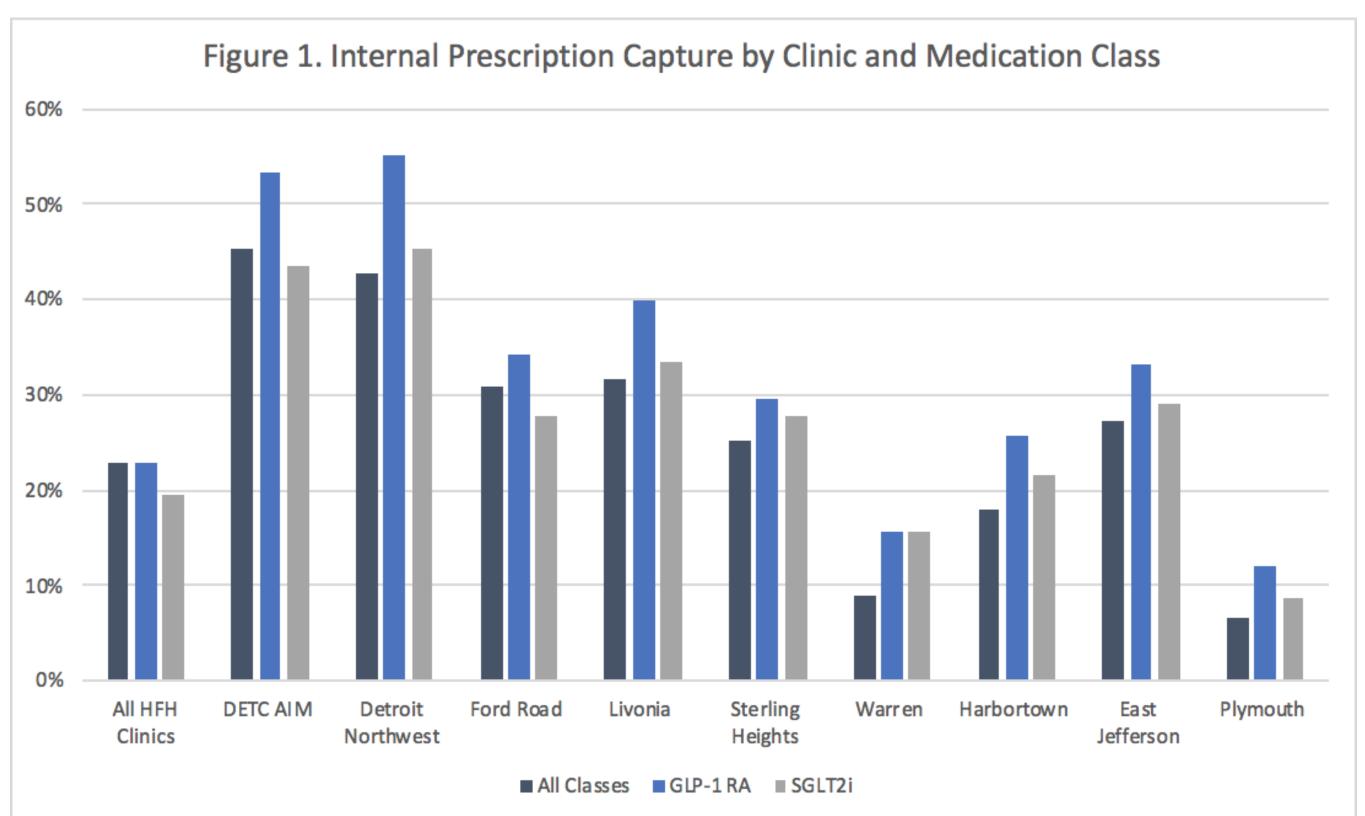
- Encourage patients to use Henry Ford Outpatient Pharmacy or Pharmacy Advantage to leverage assistance with navigating insurance barriers
- Establish direct line of communication between embedded clinical pharmacist team and Pharmacy Advantage via Webex group chat to promptly address specific patient prescription issues and update on drug shortage status daily
- Create a new method of submitting Henry Ford Pharmacy Patient Financial Assistance Program (HF PFAP) on behalf of patient via secure email to pharmacy billing team
- Share above experience and knowledge with Case Management team so that more patients may benefit from financial assistance to afford medications

Collaboration is Key: Embedded Clinical Pharmacists in Primary Care Clinics Collaborate to Help Patients with Diabetes and Cardiovascular Risk

Measures & Results



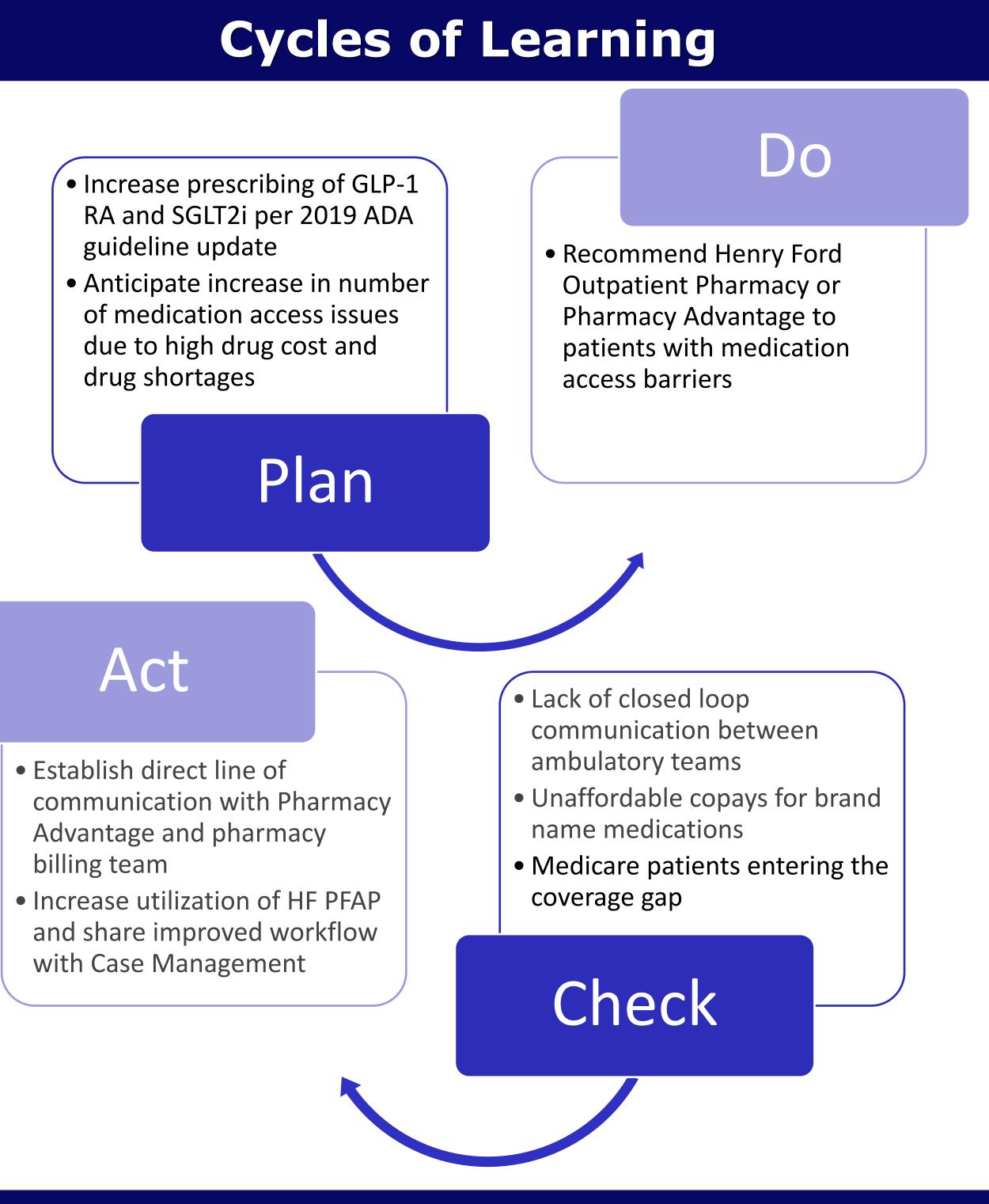
- The embedded clinical pharmacist team completed a total of 3,229 patient visits from September 2022 to December 2023. This includes both in-person and telephone visits for new and returning patients. Each visit is an opportunity for the pharmacist to optimize a patient's diabetes regimen based on cardiovascular risk and to address any medication access barriers.
- Figure 1 represents Henry Ford clinics where an embedded clinical pharmacist is located. In general, GLP-1 RA and SGLT2i internal prescription capture rates were higher than overall clinic internal prescription capture. This suggests that the presence of an embedded clinical pharmacist may influence rates of internal prescription capture for these agents.



- In 7 of 9 clinics with an embedded clinical pharmacist, the internal prescription capture of GLP-1 RA and SGLT2i are overall higher than the system wide capture rate.
- The clinics with the highest prescription capture rates have full-time embedded clinical pharmacist with an established practice >5 years.
- Table 1 shows the number of patients enrolled in HF PFAP based on Henry Ford Outpatient Pharmacy clinic location and how many were assisted by the embedded clinical pharmacist.

Table 1. HF PFAP Patients by Outpatient Pharmacy Location from January to October 2023

Outpatient Pharmacy Location	Total # of Patients Enrolled in HF PFAP	# of Patients Assisted by Embedded Clinical Pharmacist
Henry Ford Main Hospital (Lobby/Discharge/K15)	97	21
Livonia	18	8
East Jefferson	11	3
Plymouth	13	3
Detroit Northwest	31	15
Sterling Heights	22	9
Ford Road	24	15
Total	216	74



- access issues
- GLP-1 RA and SGLT2i therapy
- various teams

Keys to Success & Insights

- delivering quality patient care

Sustain & Spread

• Daily communication between embedded clinical pharmacist team and Henry Ford Outpatient Pharmacy and Pharmacy Advantage team members to complete prior authorizations and resolve medication

• Ongoing collaboration between embedded clinical pharmacist team and pharmacy billing department to ensure that patients enrolled in HF PFAP reapply annually to avoid lapse in financial assistance for

• Expansion of embedded clinical pharmacist team in 2024, along with additional PGY2 Ambulatory Care Pharmacy residents to increase bandwidth and work on process improvement in collaboration with

• Expanding the embedded clinical pharmacist team to additional primary care clinics will help more patients access evidence-based medications, including GLP-1 RA and SGLT2i

• In an ever-changing health care setting, ongoing and daily communication between all team members involved is crucial for

• With increasing usage of brand name medications, it is important to consider patient social determinants of health when initiating high cost, evidence-based medications and collaborate with partners such as case management to better address patient needs