

Upping Your Game

Pharmacies are now competing on so many fronts — to be in payer networks, to offer additional services, to achieve high-quality metrics to retain patients — it is a challenge to evaluate all of the options and determine the best approach to be successful. In each case, elements such as workflow, training, system capacity, facility impact, and reimbursement models all must be considered.

Payer Networks

Participating in payer networks is a critical step in retaining patients. While some may profess loyalty to their pharmacy, the harsh reality is that money talks. If patients are going to have increased costs because your store isn't in their payer's network, they will likely move to a store that is in the network.

Understanding how networks are communicated to patients and prescribers is important — you may need to check websites or call the payer's member services department to validate that your store is accurately reflected in the network. Determine if you are in a state that has "any willing provider" legislation, and then ensure you're contracted for every payer doing business in your state. Develop quick reference materials for your staff that help them determine which payers you accept, including logos for easy recognition. Add a list of accepted payers to your website for patients to check, and consider signage in windows and by the counter.

Additional Services

Your patients know you can fill their prescriptions. Do they know about other services you offer? Be sure they are aware if you provide medication synchronization, automatic refills, blood pressure screenings, medication therapy management, diabetes management, or



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home delivery. If you're not providing these services, why not? These are all services that can increase patient loyalty, improve quality, and drive revenue.

Consider designating technician time to coordinate medication synchronization (med sync), starting with your highest-volume patients. See <https://www.pharmacist.com/med-sync-catching-across-nation> for more information. Research legislation in your state that may support your work, such as med sync rules that facilitate refills and prorated co-pays. Work with your system vendor to determine system capability for implementing and managing these programs. There may be simple reports that can be run to identify patients who will be good candidates for this service. You may also want to contact your top payers to determine how they can help you facilitate this; often you'll need authorization for the inevitable "refill too soon" errors, and you'll want to find out if they support partial co-pay for the fills needed to align the patient's refill schedule.

Have you obtained accreditation for your pharmacy and its programs? The Center for Pharmacy Practice Accreditation (CPPA) (<https://www.pharmacypracticeaccredit.org/>) has programs for community, specialty, and

telehealth settings. Accreditation, whether by CPPA or another entity, can provide a “Good Housekeeping”-type seal of approval that resonates with patients and may impact payer contracts.

Are your biometric screenings, such as blood pressure, done manually or with a kiosk? Many kiosks on the market don’t offer clinical validation, a mechanism to track patient readings, or integration into your pharmacy management system so that you can provide more valuable counseling. The American Society of Hypertension released a statement about the importance of clinical validity in kiosks that is described at <http://www.prweb.com>

[/releases/2015/06/prweb12806846.htm](http://www.prweb.com/releases/2015/06/prweb12806846.htm). As a pharmacist, offering clinically valid programs reinforces your relationship as a trusted care provider and can lead to additional reimbursable counseling opportunities.

If your state allows collaborative practice agreements, have you implemented these with the providers in your community? Having these in place allows you to more effectively manage your patient’s care and improves your visibility as a member of the care team. Having the ability to adjust medications makes perfect sense for pharmacists and allows you to partner with other providers to optimize the patient’s experience. Your system will need to support the additional documentation and exchange of clinical information, and there are national standards in place to enable those functions. This is yet another opportunity to drive revenue and deepen your relationship with your patients.

For all of these types of programs, consider how you will incorporate them into workflow, which may mean adjusting workflow. Think of how you will train staff on new processes.

Quality Metrics

Throughout the healthcare ecosystem, there is a growing emphasis on quality metrics. Patients are more closely evaluating where to obtain care, and quality data plays a role in their decisions. Payers are increasingly using metrics as parameters in developing their preferred provider networks. Quality data is collected by payers and states, and there are numerous entities publishing quality metrics, such as the Pharmacy Quality Alliance (PQA), CMS, NCQA, HEDIS, and the National Quality Fo-

rum. Identifying the metrics you need to track and report on can be daunting, but there are resources available. Understanding how you stack up against your competition can highlight areas of strength and opportunity. As an example, Kinney Drugs has built a strong medication adherence program and received recognition from CVS Health as the leading chain in the country for patient medication adherence (<http://www.watertowndailytimes.com/dco/kinney-drugs-earns-national-recognition-for-medication-adherence-20160615?template=mwdt>). It’s not unrealistic to presume that Kinney is leveraging that recognition in its payer agreements.

System Capabilities

Underlying all of these components of successful pharmacy have to be robust pharmacy management systems. These systems continue to evolve, from processing prescriptions and inventory tools to those that support elements of electronic health records, such as capturing lab values and biometric data, documentation of encounters to support billing, and the ability to exchange information with other entities. If you haven’t yet talked to your vendor about their roadmap for enhancements, now is the time. If you’re intending to participate in accountable care organizations (ACOs), you’ll need greater system functionality to maximize your participation. If you’re not ready for all of that, at least ask about their ability to support integration of prescription drug monitoring programs (PDMPs) into workflow in order to query the PDMP on a person of interest. And keep in mind that CMS will soon be moving the industry to the next version of the NCPDP SCRIPT Standard, which is used for e-prescribing.

This is clearly an exciting and challenging time in pharmacy. There are significant opportunities to reinvigorate your service offerings, which can lead to increased revenue and patient satisfaction. Investments will be needed — in educating your team, in designing new processes, in enhancing your systems, in selling payers on the value you provide — but the effort will allow you to stay competitive and continue to grow. **CT**

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