

# Flip the Pharmacy October 2021 Change Package

## Pharmacy Champion Checklist for October 2021

- ☐ Understand the purpose of the introductory change package and the structure of Flip the Pharmacy
- ☐ Help the pharmacy team understand the FtP initiative and changes are coming to improve patient care
- ☐ Register for the FtP Webinars (page 4)
- ☐ Submit a test eCare Plan (reviewed on pages 5-8)

Begin enrolling patients into medication synchronization and documenting real eCare Plans!

## Intentions of this Change Package:

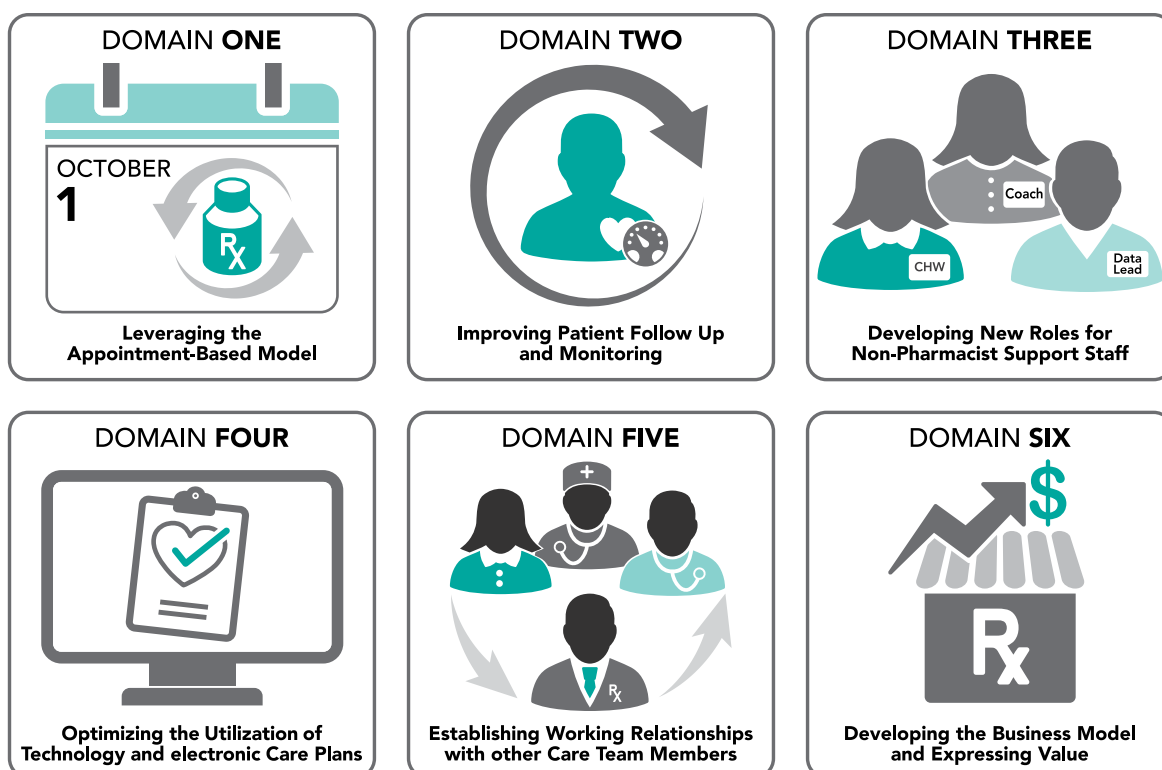
1. Help ease into the Flip the Pharmacy initiative by understanding what it is, your role, and your Practice Transformation Coach's role
2. Understand what resources are available to you as a participating CPESN pharmacy undergoing practice transformation
3. Provide understanding of how to document the care provided through the eCare Plan

Pharmacy practice transformation takes time and is incremental. The Flip the Pharmacy Change Packages are designed to:

1. **Share workflow innovations** of what community pharmacy staff members (*referred to as Subject Matter Experts*) are doing across the country
2. **Offer a stepwise approach of how to implement the workflow innovations.** These can be tailored to best fit your workflow and patient population
3. **Transform your patient care**

Over the course of **2** years, we will review **4** different progressions:

1. **Hypertension**
  - November 2021 – April 2022
2. Opioid Stewardship and Management
3. Immunizations
4. Diabetes and Social Determinants of Health



More details on each Domain are provided below and will be expanded on with each progression of each of the 6 domains.

**Domain 1: Leveraging the Appointment-Based Model** – Medication Synchronization is at the core of the ABM model, yet what are the patient evaluation, care coordination, and medication use support services that may be efficiency layered alongside the mechanical Medication Synchronization process.

**Domain 2: Improving Patient Follow Up and Monitoring** – Community-Based Pharmacies have great opportunity to lead the health care system in effective patient follow up and monitoring utilizing system-leading number of patient touch points.

**Domain 3: Developing New Roles for Non-Pharmacist Support Staff** – Gone should be the days of limiting pharmacies to two types of roles: Pharmacist and Pharmacy Technician. Roles that address common challenges to the healthcare system such as patient engagement and activation, care team communications, social determinants of health, and analysis of data are essential to successful population health management and accountable care.

**Domain 4: Optimizing the Utilization of Technology and electronic Care Plans** – The eCare Plan is fundamental to the successful operationalization of Domains 1 – 3 and 6. Working hand in hand with software companies, pharmacies should develop best practices documentation processes.

**Domain 5: Establishing Working Relationships with other Care Team Members** – Results from CCNC's CMMI innovation project showed that pharmacies who built and maintained meaningful working relationships with other care team members.

**Domain 6: Developing the Business Model and Expressing Value** – What is the return on investment to the pharmacy for moving towards longitudinal, patient level health care services delivery.







# Overview of the Pharmacy Champion and Practice Transformation Coach Roles

**Pharmacy Champion:** the leader at the pharmacy who will be the point person for implementing the Flip the Pharmacy practice transformation initiative and involving the staff.

**Pharmacy Staff Huddles:** During October it would be good to help your pharmacy understand Flip the Pharmacy and how this is a practice transformation effort. They may see many changes occur in the course of the next 2 years but it will be guided with certain ideas to implement each month.

**Practice Transformation Coach:** Local support person who will visit with you face-to-face or virtually each month. At minimum, the Coach will meet with you monthly to offer assistance to help maximize understanding of FtP and the available resources, share best practices from other pharmacies, and serve as a liaison with eCare Plan documentation.

**Expect your Practice Transformation Coach to reach out to you soon!**

Flip the Pharmacy PERFORMANCE DASHBOARD				
MONTH		GOAL	ACTUAL	LAST MONTH
	<b>Pharmacist eCarePlans</b> # of eCare Plans # of BP Measurements			
	<b>EQuIPP Scores</b> PDC Diabetes Medications PDC RASA Medications PDC Statin Medications Statin Use in Diabetes			
	<b>Medication Synchronization</b> # of Patients Sync'd % of Patients Sync'd			
	<b>Immunizations</b> Flu Pneumonia Shingles Other			
	<b>Other Enhanced Services</b>			
	<b>This Month's Shoutout</b>			

Moving beyond filling prescriptions at a moment in time to caring for patients over time

Special appreciation and acknowledgement to                                  

 Community Pharmacy Foundation

 CPESN  
www.cpesn.com

 FtP

**Score Board:** If you have a white board, it would be great to share the eCare Plan numbers, number of blood pressures taken/collected, number of blood glucose/A1c collected. **Make transformation fun!**

**Newsletter:** Each month, the pharmacy champion will receive the Flip the Pharmacy newsletter. Share the details with the pharmacy staff! **Create excitement!**

Click [HERE](#) to download

**INVOLVE YOUR TEAM!** Share the monthly focus and goals with your team.

- **Team Huddles:** Join the team together for a short 5 minute team huddle to share information.
- **Newsletter:** Share details and post for all to see.
- **Designate a champion:** This person will lead the change and handle team questions.

**Ask your coach if you need more details!**

# eCare Plan Documentation Requirements

## FtP Pharmacy Requirements:

### ■ Cohort 3 Pharmacies

- Submit a test eCare Plan
- Begin enrolling patients in medication synchronization and submitting eCare Plans for patients enrolled into medication synchronization
- Between October - December 2021, submit **10** eCare Plans

### ■ Cohort 2 Pharmacies

- Submit **10** eCare Plans monthly
- Going back to the basics: enroll patients in your medication synchronization process and submit eCare plans for those you enroll.
  - See Step 4 on Pg 8 for a documentation form.
- Consider submitted the test eCare Plan if you need a refresher

### If you're interested in learning more about the eCare Plan:

#### ■ **Pharmacist eCare Plan: Back to the Basics** Recording (49:17): Click [HERE](#)

The webinar provides a good perspective outside of the FtP Coordinating Center/CPESN USA staff on the importance of documenting eCare Plans

#### ■ **What is eCare [plan] and why do I care?** Recording (4:48): Click [HERE](#)

Student pharmacist at the time, Nevin Radechael, involved with the ACT (Academia CPESN Transformation) provided this quick review while on rotation with CPESN Iowa FtP Coach Erin Ulrich.

## Register for FtP Webinars:

### ■ FtP Best Practices Webinar: Click [HERE](#) to register

- **Description:** Allows for all pharmacies to join to hear from everyone around the workflow aspects regardless of eCare Plan Vendor
- **Offered:** 2nd Tuesday of each month at 1 pm ET beginning November 2021
  - November 9th at 1 pm ET

### ■ FtP Workflows Webinar: Click [HERE](#) to view each Technology Partner's Series

- **Description:** eCare Plan vendors host this series. This serves as a way for pharmacy staff members to join and ask questions directly to the technology partner.
- Join in October to ask questions or provide feedback to the eCare Plan Partners

# Workflow Innovation:

## Getting ready for the Hypertension Progression

➔ **Submit a Test eCare Plan** (Goal: Complete by end of October)

### STEP ONE: Review the Sample Persona/Case (see Pages 7-8)

- For the Hypertension progression, you will receive a sample case each month.  
Click [HERE](#) to listen to a description of the Sample Persona and Case (length: 4:53)
- The persona is intended to help give pharmacies a picture of a real patient who may be visiting your pharmacy
  - French Fry is our test case
- Please note that the medication related problem, intervention, and goal sections have different color text. This particular information is reflective in the patient case. The intent is to help you realize the patient care aspects that you are performing can be correlated into eCare Plan documentation (*see Sample/Test Care Plan Case*).

### STEP TWO: Watch the recorded demo for your eCare Plan technology vendor to learn how to complete the Test Care Plan for French Fry

Note. These are normally listed in the *Workflow Wednesdays* email from CPESN USA. However, the recording links are listed below for the Introductory Change Package

#### Technology Solutions Partners with French Fry Test Case Recording Links



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)



Click [HERE](#)

## STEP THREE: Document the Test/Sample Case (see Page 8)

- The Sample Case should be **documented exactly as shown** in the Sample Document
- Build French Fry's Profile in your documentation system for the eCare. The demographics **MUST** match up so that French Fry is flagged as a Sample Care Plan at CPESN USA.
  - **Option 1:** If your system allows you to have a fake zip code
  - **Option 2:** If your system does not allow a fake zip code, 24563 is a real place (Hurt, VA)

Demographics	Option 1	Option 2
First Name	French	French
Last Name	Fry	Fry
Street Address	241 Cheeseburger Hwy	911 Fentora Drive
Zip Code	00000	24563
Date of Birth	1/13/1979	1/13/1979

*Note. If the demographics are not one of the options above, the test case submitted will not be flagged as a test eCare Plan.*

- The Sample Case should be documented with the information exactly as shown in the sample case (see Page 8)
  - **Medication Related Problem: Noncompliance with medication regimen**
  - **Intervention: Medication synchronization** (or **synchronization of repeat medication**)
  - **Goals (Free-Text):** Set a reminder alarm on cell phone to take medications every day
- Prescriber information may be different if easier than creating a new prescriber (i.e., Dr. Coach Wellness)

**Medication Related Problems (MRPs) and Interventions:** Categories of SNOMED CT Codes. SNOMED CT codes allow CPESN USA to receive the data from your technology partner in a standardized way.

**MRP or Intervention Notes:** Free-text that provides specific information related to the MRP or intervention.

**Goals:** Free-text that you type in to the care plan that is individualized for each patient. The intent of the goal is to help achieve the intervention that is being set.

## STEP FOUR: Enroll patients into medication synchronization and document eCare Plans for REAL patients

- Submitted eCare Plans will count toward your eCare Plan Goal.
  - Use the same MRP and Intervention as you did with the test case
- Click [HERE](#) for a patient encounter documentation form, which will help the pharmacy staff capture when an eCare Plan is needed for a patient.

# French Fry

Submit a Test eCare Plan

**DATE OF BIRTH:** January 13, 1979**RACE:** White**GENDER:** Male**OCCUPATION:** College Professor**ADDRESS:** 241 Cheeseburger Hwy, Pickle Junction, OH 00000**PROBLEM LIST:** Hypertension. Overweight (calculated BMI = 29.6)

## HISTORY OF PRESENT ILLNESS

Patient was diagnosed one year ago with essential hypertension following complaints of headaches that persisted for several days. His blood pressure at the clinic was 195/105. He was started on hydrochlorothiazide (HCTZ) 12.5 mg and eventually lisinopril was added. He is currently taking a lisinopril/HCTZ 20/12.5 combination tablet—2 tablets every day. Amlodipine 5 mg every day and Potassium Chloride 20 mEq—2 tablets every day have been added.

## PAST MEDICAL HISTORY

Right ankle—torn ligaments—multiple episodes, Left knee—torn meniscus X 3, hypokalemic

## ACTIVE MEDICATIONS

Lisinopril/HCTZ 20/12.5—2 tablets every morning, Amlodipine 5 mg every morning, Potassium Chloride 20 mEq—2 tablets every morning.

**Prescriber:** Coach Well, MD

## FILL HISTORY

HCTZ 12.5—discontinued after 3 months. Due to uncontrolled hypertension—started on combination tablet of lisinopril 20/12.5 every day and was titrated to 2 tablets every morning. One month later added amlodipine 5 mg every day after physician visit due to therapeutic goals not achieved. Blood work at this visit demonstrated that he was hypokalemic—also started potassium chloride 20 mEq—2 tablets every morning.

## ALLERGIES

- Penicillin

## SOCIAL HISTORY

FF works as a college professor. He has never smoked and, on average, has 2 alcoholic drinks/week. He doesn't exercise and admits little physical activity.

## VITAL SIGNS AND LABS

- **Vital signs:** Not measured

## MEDICATION RELATED PROBLEM(S)

FF presents to the pharmacy today to refill his lisinopril/HCTZ 20/12.5 tablets. **Pharmacy management system indicates that he is approximately 15 days late filling this medication. Further review indicates that he fills his amlodipine and potassium chloride tablets on different days and that FF doesn't seem to be consistent with the timing and frequency of refills with these medications as well.**

## INTERVENTION(S) AND EDUCATION (RECOMMENDATIONS)

Emphasizing importance of adhering to medications to achieve therapeutic goals. **Recommend Medication Synchronization to get all refills synced up on the same date to reduce patient inconvenience coming to pharmacy multiple times. Also, provide clinical monitoring and patient follow-up utilizing an appointment-based model tied to the synchronization process.**

## GOAL

**Improved adherence: Set a reminder alarm on cell phone to take medications every day.** Overall goal is controlled blood pressure (<120/<80 mmHg).

## MONITORING PLAN AND FOLLOW-UP

Sync date selected. Patient will be called 5 days in advance of medication pick-up to address any changes/patient complaints/concerns/medication issues.

# Sample Care Plan Case

## Patient Demographics:

Patient First Name: French  
Address: 241 Cheeseburger Hwy  
Phone: 919-555-5555

Patient Last Name: Fry  
City: Pickle Junction State: OH

Patient DOB: 1/13/79  
Zip: 00000

**Allergies:** Penicillin

## Prescriber Information:

Name: Coach Wellness, MD  
Phone: 999-999-9999

Address: 222 Healthy Shores Ln, Pickle Junction, OH 00000  
NPI Number: 1234567890

## Active Medication List:

Medication Name	Directions	Prescriber
Lisinopril/HCTZ 20/12.5 mg	2 tablets every morning	Coach Wellness, MD
Amlodipine 5 mg	1 tablet every morning	Coach Wellness, MD
Potassium Chloride 20 mEq	2 tablets every morning	Coach Wellness, MD

## Medication Related Problems (MRPs) and Interventions:

- **MRP:** Noncompliance with medication regimen (SNOMED CT: 129834002)
  - **MRP Note:** Patient is about 15 days late filling lisinopril/hctz 20/12.5 mg. Amlodipine and potassium are filled on different days. FF doesn't seem to be consistent with timing and frequency of refills.
- **Intervention:** Medication synchronization/synchronization of repeat medication (SNOMED CT: 415693003)
  - **Intervention Note:** FF is being enrolled into our sync program and we will be aligning his medication fills on the same day each month with follow-up calls at least 5 days prior to next refills.

## Goals (Free-Text):

1. **Goal Note:** Set a reminder alarm on cell phone to take medications every day