

Improving Patient Care and Your Bottom Line with Specialty Pharmacy Services

Dr. Eric W. Dickson, MD, MHCM, FACEP Brian Smith, PharmD April 17, 2017



A TALE OF TWO PATIENTS

HIV Patient with Specialty Pharmacy



HIV Patient without Specialty Pharmacy





AGENDA







- Affiliated Hospitals
 - Heywood
 - Milford
 - + Harrington
 - Day Kimball
 - + Holyoke
 - + Berkshire

- **Owned Hospitals** on 8 Campuses
- + Clinton
- Marlborough
- Health Alliance Burbank
 - Leominster
- UMass Memorial Medical Center
 - Hahnemann Campus
 - University Campus
 - Memorial Campus
 - City Campus

Employed 1100 MDs

Residents 550 /Fellows

> Physicians at 3 45 Federally Qualified Health Centers

- Physicians in the 1700 UMMHC MCN
 - Office based community practices



CHL Community Healthlink

UMass Memorial ACO, Inc.

JV MRI Facilities with Shields Healthcare Group

- 9 Magnets
- + 1 PET/CT

Specialty Pharmacy JV with Shields **Health Solutions**

Outreach Laboratory JV with Quest

7 Urgent Care Sites; 5 through a JV With CareWell, 2 hospital based

Fairlawn Rehabilitation Hospital & Outpatient Center **UMassMemorial** Health Care





WHO WE ARE

FOCUS ON POPULATION HEALTH





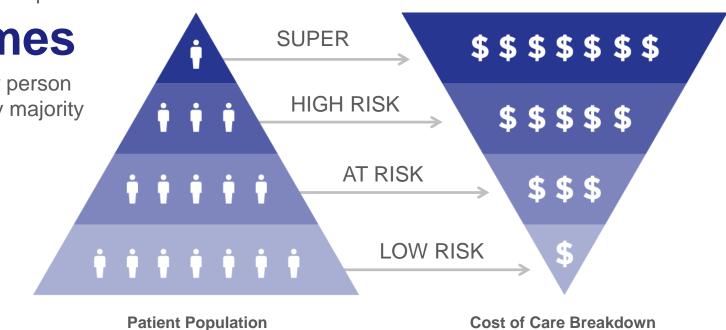
UNDERSTANDING YOUR PATIENT POPULATION

The sickest 5%

of the population spends

50 times

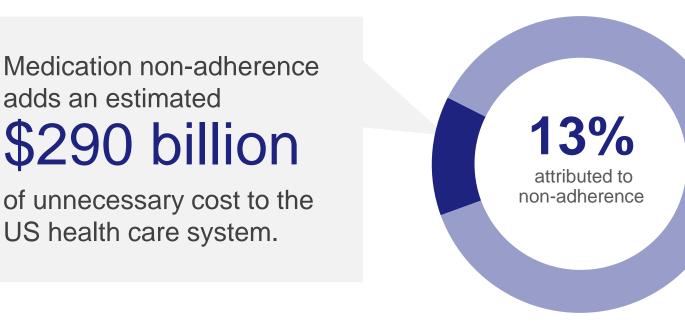
as much per person as the healthy majority







COST OF MEDICATION NON-ADHERENCE



Costs Attributed to Non-Adherence Other

Total Health System Costs

Source: NEHI Research Brief, "Thinking Outside the Pillbox: A System-wide approach to Improving Patient Medication Adherence for Chronic Disease." NEHI, 2009.





SPECIALTY PHARMACY AS THE FOUNDATION OF AN ACO

"This really is an innovative approach, but I'm afraid we can't consider it. It's never been done before."







DEFINITION OF SPECIALTY PHARMACY

Specialty pharmacy focuses on HIGH COST, HIGH TOUCH medication therapy for patients with complex disease states."







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WHAT DEFINES SPECIALTY PHARMACY



Requires special handling, storage, and distribution

Treats complex disease requiring special monitoring



Limited distribution from manufacturer

Treats orphan, uncommon, or rare disease

Indicated for disease already classified as specialty

Source: EMD Serono Specialty Digest, 10th Edition. 2014.





SPECIALTY MARKET

U.S. Pharma Market



Specialty Market Breakdown (2014)

Total (\$ billion)	\$135.1
Other	\$13.1
Pulmonary Arterial Hypertension	\$2.4
Transplant	\$1.6
Growth Hormone	\$1.7
Anti-Coagulant	\$1.9
Macular Degeneration	\$3.5
Hepatitis	\$9.7
IVIG/Hemophilia	\$5.6
Renal	\$6.1
Multiple Sclerosis	\$13.8
HIV/AIDS (including oral solids)	\$13.8
Rheumatoid Arthritis/Crohn's	\$20.6
Oncology (including oral solids)	\$41.2

Source: JP Morgan "Healthcare Technology & Distribution" 08 January 2015.





SPECIALTY PHARMACY IS RAPIDLY GROWING







THE UMASS MEMORIAL SPECIALTY PHARMACY OPENED IN 2012







UMASS MEMORIAL SPECIALTY PHARMACY CARE MODEL



Traditional Pharmacy





UMass Specialty Pharmacy (UMSP)

- + Dedicated pharmacist/pharm-tech
- + Complete drug interaction check in EMR
- Prior authorization completed by UMSP
- + Co-pay assistance advocate if needed
- Delivery in the clinic or to home
- + Patient Support Center
- Feedback to care team from UMSP staff

Script filled through UMSP care team

Information flows back to clinicians



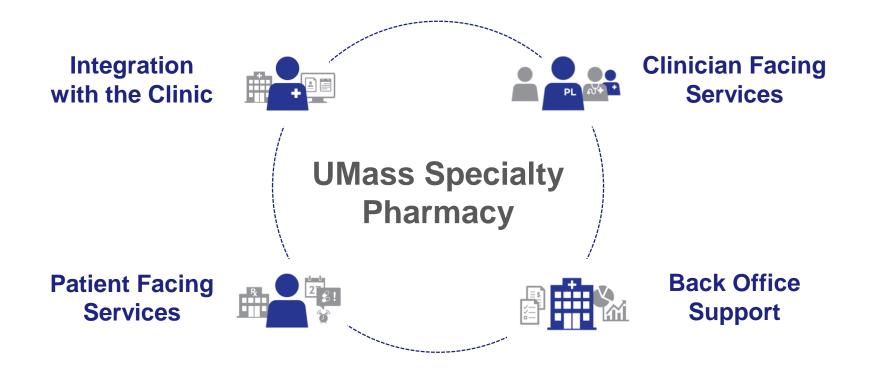
14 Hospital Review

STRATEGIC POSITIONING – UMASS MEMORIAL SPECIALTY PHARMACY

	RETAIL	HOSPITAL	V
Staff embedded in clinic			
Shared EMR	\bigcirc		•
Data Analytics	\bigcirc	\bigcirc	
Hospital Ownership	\bigcirc		
Prior Authorization	\bigcirc		
Billing	\bigcirc		
Home Delivery		\bigcirc	
Patient Support Center	\bigcirc	\bigcirc	
Adherence Monitoring	\bigcirc	0	



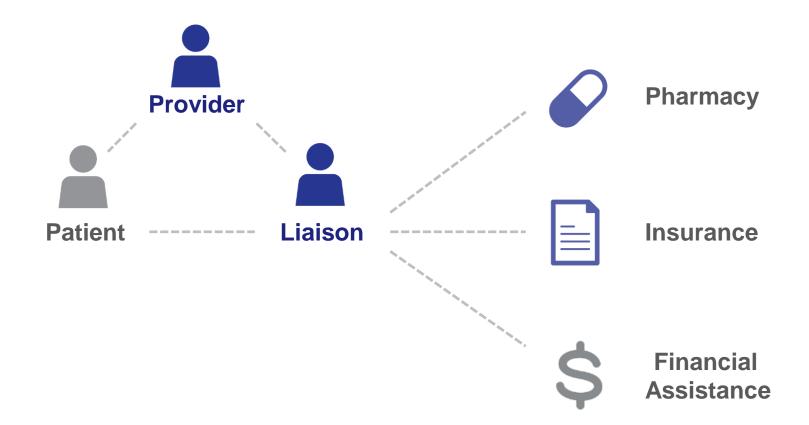
THE VALUE OF BRINGING ON STRATEGIC PARTNERS







COORDINATING CARE THROUGH THE LIAISON







ASSESSING OUTCOMES



Patient satisfaction surveys monthly

Physician Experience

Adherence Metrics

Clinician satisfaction surveys annually

"Couldn't take it away from our physicians" – Dr. Dickson

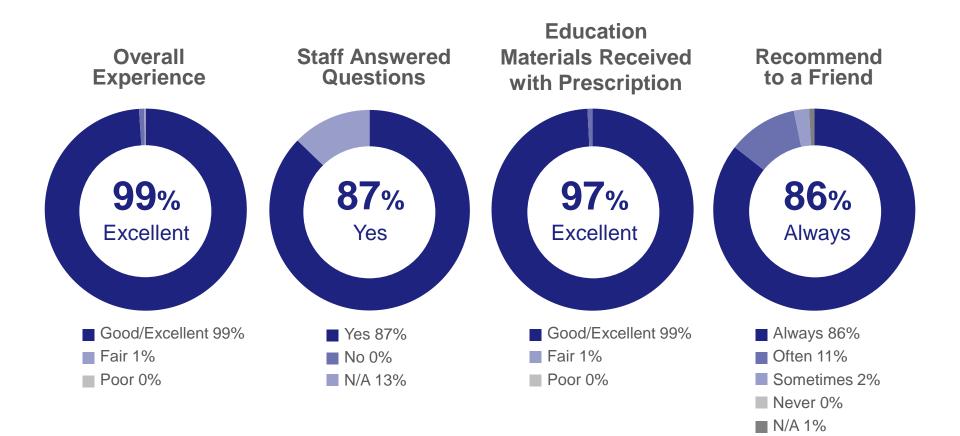
Proportion days covered (PDC) reported quarterly

Volume and Revenue Growth

Top-line specialty pharmacy revenue



PATIENT EXPERIENCE SURVEY RESULT

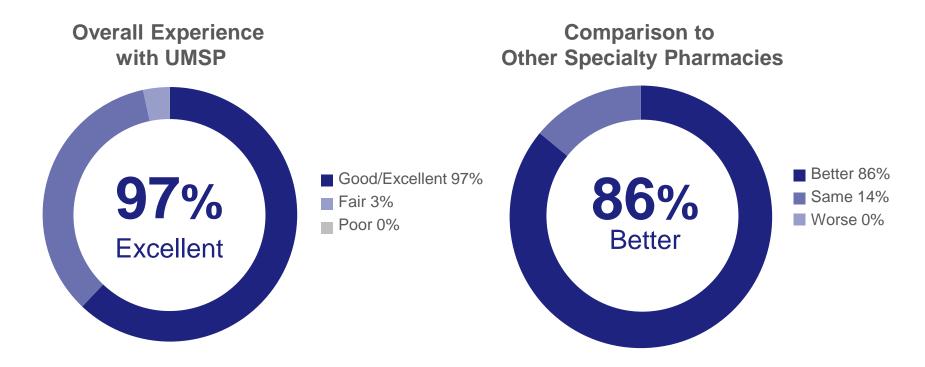


Note: Survey 2013-2016





COMPARISON TO OTHER SPECIALTY PHARMACIES



Note: Survey 2013-2016





MEDICATION ADHERENCE AND PATIENT OUTCOMES

Disease State Outcomes Associated with High Medication Adherence

HIV Viral suppression, CD4 count, viral resistance¹⁻³

Solid Organ Transplant Rejection, graft survival^{4,5}

Chronic Myeloid Leukemia

Complete molecular response to therapy⁶

Hepatitis C Sustained virologic response⁷

- 1. Ann Intern Med 2000; 133:21-30.
- 2. Clin Infect Dis 2002; 34:1115-21.
- 3. Aids 2001; 15:1701-6.
- 4. Transplantation 2009;87:839-847.
- 5. Transpl Int 2005;18:1121-1133.
- 6. J Clin Oncol 2010; 28:2381-2388.
- 7. Aliment Pharmacol Ther 2013; 38:16-27.



Hospital Review

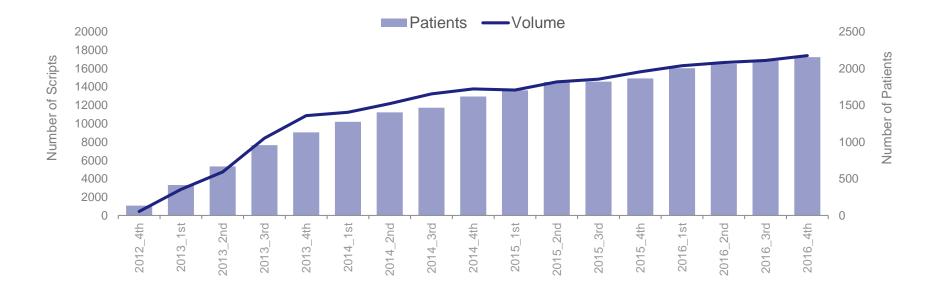
PATIENT GROWTH

Excellent patient and clinician satisfaction

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High rates of medication adherence

Sustained and continued growth

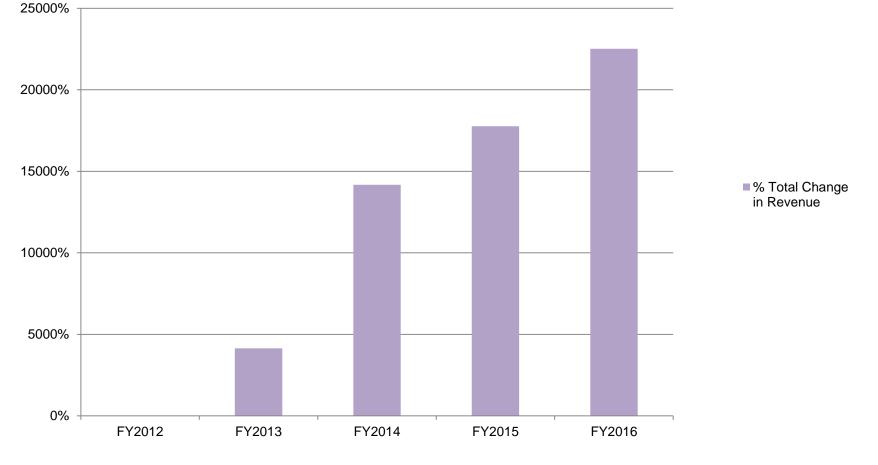




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SPECIALTY PHARMACY REVENUE INCREASE?

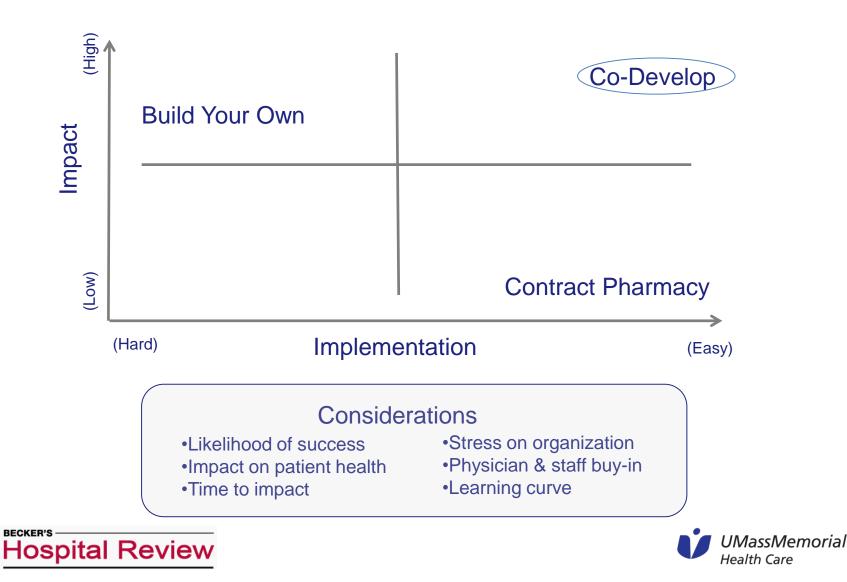
% Total Change in Revenue







CREATING YOUR SPECIALTY PHARMACY



TOOLS TO ENHANCE ADHERENCE







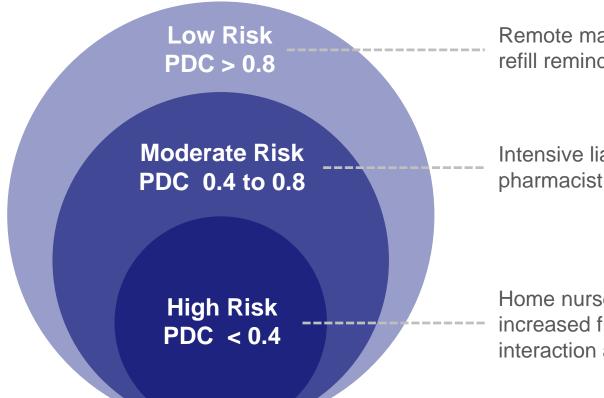
Expanding Use of Mobile App







CARE MANAGEMENT 2.0







Remote management, monthly refill reminders, mobile app

Intensive liaison support, pharmacist therapy management

Home nurse/pharmacist visits, increased frequency of interaction and support

TAKEAWAYS





Specialty pharmacy is a fix for revenue and care Offers **New models** for treating patients outside the hospital, and **retaining them in your care network** Specialty provides a great foundation for long-term stability, ACO compliance, a new world of risk-based payments











INTRODUCTION



Eric W. Dickson MD, MHCM, FACEP



Dr. Dickson rejoined the faculty of the Department of Emergency Medicine in 2009 after serving in many capacities at the Carver College of Medicine and the University of Iowa Hospitals and Clinics including Founding Chair of the Department of Emergency Medicine.

He did his residency at the Emergency Medicine Residency Program of the University of Massachusetts Medical School and is a graduate of the University of Massachusetts Medical School. He received his Masters of Health Care Management from Harvard University.

Prior to being named president and CEO of the health care system, Dr. Dickson served as president UMass Memorial Medical Group and senior associate dean at the University of Massachusetts Medical School. The UMass Memorial Medical Group is a subsidiary of UMass Memorial Health Care and is a 1,100 physician, 1,000 employee multidisciplinary medical group with revenues of over \$470 million.

He was appointed the CEO of UMass Memorial Health Care system, the clinical partner of the University of Massachusetts Medical School. His research interests include hormonal opioids and tissue protection.

INTRODUCTION





Dr. Smith is currently the Vice President Clinical Services and Quality, Compliance Officer for Shields Pharmacy Services. In this role, Dr. Smith oversees the development of clinical protocols with physician practices, medication adherence programs, staff education, quality improvement, safety and compliance.

Dr. Smith graduated from Massachusetts College of Pharmacy and Health Sciences in 1997 with a Bachelor of Science in Pharmacy and 1999 with a Doctor of Pharmacy degree. In 2000, he completed an ASHP Accredited PGY1 Residency at UMass Memorial Medical Center. After residency training, Dr. Smith was hired as a Clinical Pharmacy Specialist, Trauma/Neurosurgery/Burn at UMass.

In 2012, Dr. Smith received the Massachusetts Society of Health-System Pharmacists Service Award. Dr. Smith is also an Assistant Professor of Surgery and Graduate Nursing at University of Massachusetts Medical School where he teaches in the Pharmacology and Advanced Therapeutics courses.

