





The Role of Medically Integrated Oncology Pharmacy in Improving Patient Medication Adherence

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Disclosures

- I have no current disclosures to report.
- ➤ This presentation has received no financial or in-kind support from any commercial or other organization.



Overview

- Understand the fundamentals of a Medically Integrated Pharmacy
- Discuss methods to leverage a Medically Integrated Pharmacy to increase oral adherence and effectively manage adverse events
- > Review **best practices** for application

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Pharmacy Settings in the United States

1. Retail Pharmacy

- \bullet Large "chain" retail (i.e. CVS, Walgreens) & small community pharmacies
- Dispense regular medications (i.e. insulin, anti-hypertensives)

2. Hospital / Academic Center Pharmacy

• Dispense medications to patients admitted to the hospital

3. Specialty Pharmacy

- Dispense high-cost medications that require high-touch care (insurance, financial assistance for copays, clinical support, delivery of medications)
- Privately-owned specialty pharmacies
- PBM-owned specialty pharmacies (payor-owned)
- Medically-integrated pharmacies (part of a medical practice community, hospital, or academic setting)

4. Home Infusion Pharmacy

• Provide infusions in a patient's home (total parenteral infusion, long-term antibiotics, immunoglobulin infusions, subcutaneous infusions) and nursing services

5. Long-Term Care Pharmacy

For elderly patients

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Medically Integrated Pharmacy (MIP)

"A dispensing pharmacy WITHIN an oncology center of excellence that promotes a patient-centered, multidisciplinary team approach. It is a collaborative and comprehensive model that involves oncology health care professionals who focus on the continuity of coordinated care for cancer patients."

~ NCODA, Inc.

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MIP Models

Organization Type

Community Practice

Health System Outpatient

Academic Medical Center

- Community oncology practice owns and operates the oral dispensing pharmacy within their practice.
- Practice can set up a doctor dispensing operation where the state allows it.
- Practice can set up a pharmacy hub operation where all scripts go to and shipped from. This pharmacy handles the entire processing and prescription deliveries.
- IV therapies are administered in clinics

- Hospitals and Academic centers have a dispensing pharmacy on site.
- Patient picks up the oral medicine on site and receives a clinical counseling with the oncology trained pharmacist on site.
- IV therapies administered in the ambulatory center of each institution.

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Characteristics of Successful MIPs

INTEGRATION

Immediate access to patients Electronic Medical Records

IT support: Pharmacy Medication Dispensing technology and Adherence Platform technology

EDUCATION

Teaching & training the members of interdisciplinary team: physicians, nurses, pharmacists, dietitians, pharmacy technicians.

Patient facing education provided by the team of experts: pharmacists, nurses, and physicians.

COMMUNICATION

Communication and collaboration across the entire multi-disciplinary team to improve patient adherence and mitigating drug toxicities.

Additional services:

Financial support for high copay.

Follow up on prescriptions filled by other pharmacies mandated by patient insurance.

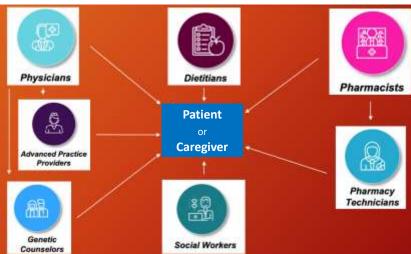
Communication with practice leadership to ensure commitment and support for MIP's mission.

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Medically Integrated Team With A Patient-Centric Approach



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About Florida Cancer Specialists & Research Institute (FCS)

A large, privately owned oncology practice with over **250 oncologists/hematologists** and near **100 clinics**, many have turned into the cancer centers with diagnostic equipment on site (PET scans XRAY machine, radiology treatments, and IV infusion chairs treatments)

Florida Cancer Specialist Oral Oncology Specialty Pharmacy Rx To Go Pharmacy with >140 employees.

FCS oral oncology pharmacy has two board-certified oncology pharmacists and twelve clinical staff pharmacists

Adherence program was developed internally in 2013 and is considered the standard of care for patients on oral oncology medication

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Best Practices for Application of an MIP





Improves patient adherence & outcomes and decreases drug waste²

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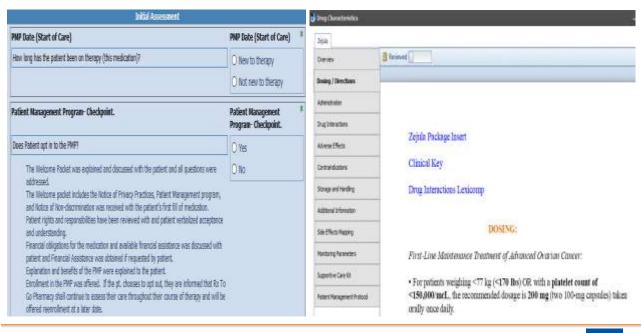
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Focusing on Adherence to Therapy

Tools and Methods	Stakeholder	
Patient is enrolled in pharmacy adherence program	Oncology trained clinical pharmacist	
Patient is counseled on the medication and side effect management		
Schedule pharmacist clinical follow up	Oncology trained pharmacist weekly or biweekly x 2-3 month until stable, then monthly	
Pharmacy care plans or PQI (Positive Quality Intervention) plan of care developed by NCODA	Pharmacist-developed with the focus on drug specific characteristics and AE management	
Adverse event management toolkit	Provided by manufacture or designed by pharmacy (patient education and supportive care medications over the counter); NCODA Treatment Support Kits (TSK)	
Oral Chemotherapy Education (OCE) sheets for patients	Designed by NCODA organization and available to pharmacies members for free	
Patient Education on management of adverse events	Dietitian developed diet recommendations specific to the drug side effects	





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Methods to Improve Medication Adherence

Traditional Tools & Methods	Function		
Pill diaries	Patient's medication-taking		
Pill counts	behavior		
Paper calendars	Reminder for patients		
Pharmacy care plans	Individualized for drugs		
Fulfillment tracking	Tracks & ensures if every written script is filled		

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Possible Methods to Improve Medication Adherence

Non-Traditional Tools & Methods	Function	Advantages	Disadvantages
Mobile medical apps	Alerts patients when to take medications & records when taken	Reminds patients when to take medications	Inexpensive but unreliable data
Smart pill bottles/dispensers	Sensor caps indicate when a bottle is opened & pill is removed		Costly and unreliable data
Smart package systems	High-tech blister/strip packaging; reminds patients to take their medication & tracks dispensed doses		Costly and unreliable data
Bio-ingestible sensors	Embedded into oral drug; once dissolved, alerts a patient's smart phone & physician	Tracks adherence	 Timely to encapsulate drugs in pharmacy Increased cost of medications Needs more data if improves adherence

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- Established in 2015
- ➤ International non-profit 501(c)(3)
- >5,000+ Members (50 US States & 14 Countries)
- >Our Mission is to **empower the Medically-Integrated Oncology team** to deliver positive, patient-centered outcomes by providing leadership, expertise, quality standards and best practices.





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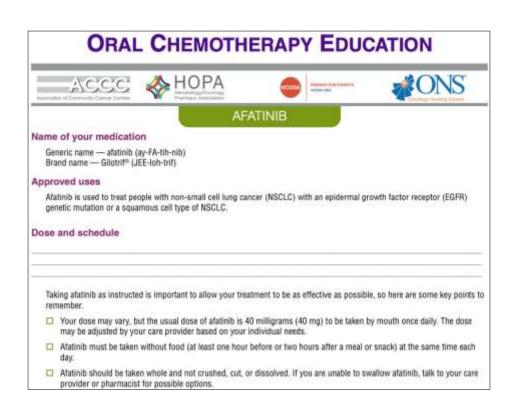
NCODA Resources for MIPs

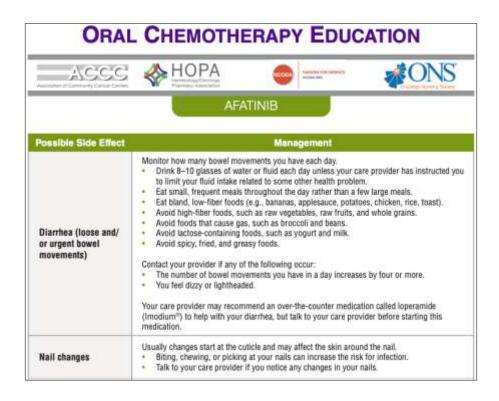
- ➤ Oral Chemotherapy Education (OCE) sheets
- ➤ Intravenous Cancer Treatment Education (IVE) sheets
- ➤ Positive Quality Intervention (PQI) documents
- ➤ Treatment Support Kits (TSKs)
- ➤ Many more!

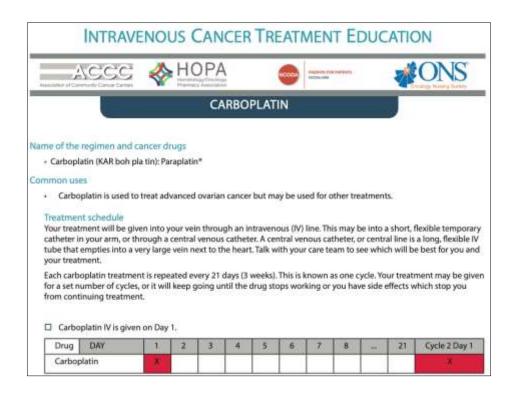


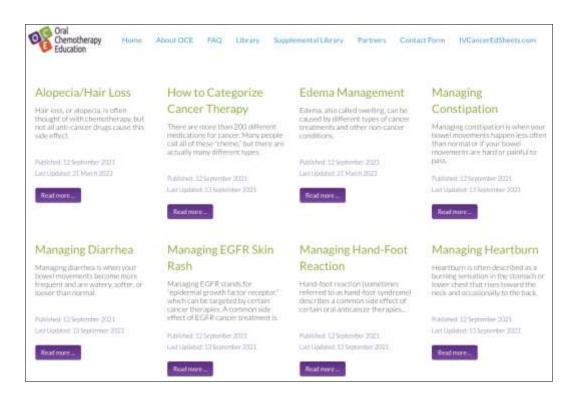


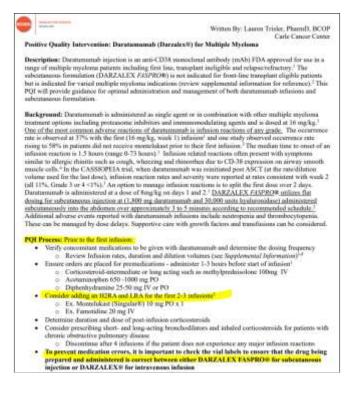












Medication-Specific PQIs

Management of Abemaciclib (Verzenio®) Associated Diarrhea

Written by: Derek Gyori, PharmD and Julianne Orr, PharmD

Advanced Breast Cancer: Appropriate Patient Identification with Abemaciclib (Verzenio®)

Written by: Jan Montgomery, PharmD, South Carolina Oncology Associates and Jacob Dygert, South University School of Pharmacy

Acalabrutinib (Calquence®) in Chronic Lymphocytic Leukemia/Small Lymphocytic Lymphoma

Written by: Trey McNiel, PharmD, Georgia Cancer Specialists

Afatinib (Gilotrif®) Management for Non-Small Cell Lung Cancer

Written by: Chris Sellers, RPh, Texas Oncology

Management of Alpelisib (Pigray®) Induced Hyperglycemia

Written by: Natasha Khrystolubova, RPh, BCOP, Florida Cancer Specialists and Jody Agena, PharmD, Virginia Cancer Specialists

Supportive Care PQIs

Chemotherapy, Oncolytic, Antiemetic Induced Constipation

Written by: Brady Quinn and Britny Rogala, PharmD - University of Rhode Island College of Pharmacy

DPYD Testing Prior to Fluoropyrimidine Treatment

Written by: Dan Hertz, PharmD, PhD - University of Michigan Coflege of Pharmacy

Managing EGFR Inhibitor Induced Rash

Written by: Sara Moran Smith, PharmD, BCOP, M Health Fairview

FGFR Inhibitor Side Effect Management

Written by: Julia Stevens, PharmD, BCOP and Emmeline Academia, PharmD, BCOP – Beth Israel Deaconess Medical Center

Opioid Induced Constipation

Written by: Neal Dave, PharmD and Julianne Orr, PharmD – Texas Oncology and Indiana University



Why Choose NCODA Treatment Support Kits?



Provide patients and caregivers with resources that make sense for adverse event management during treatment with oral anti-cancer medications



Equip patients with unique education and supportive care products



Increase utilization of support kits (avoid manufacturer branding hurdles)



Generic kit options are available





NCODA's Guiding Values



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Ways to Collaborate with ESOP

- > Translate resources to multiple languages
- Share material across the globe
- ➤ Share experience / expertise across the globe
 - "Oncology Pharmacists Without Borders"

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Thank You!

FOR MORE INFORMATION, EMAIL:

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