

Evaluation of the Impact of a Clinical Pharmacist-Led Patient Engagement Program on Cost Savings

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Background

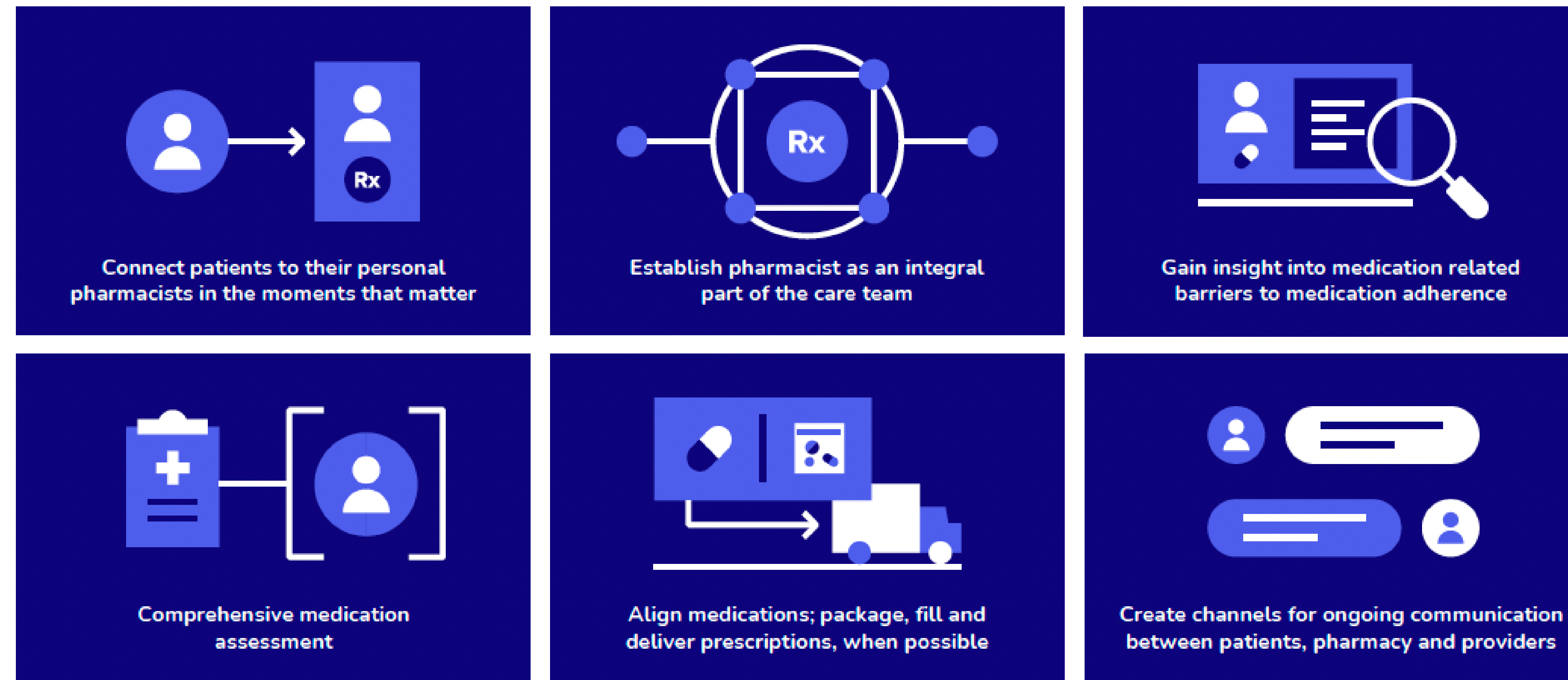
- Chronic conditions affect 60% of adults within the United States with approximately half of these patients classified as being non-adherent to their medication regimens.^{1,2}
- Importantly, medication non-adherence contributes up to an estimated \$300 billion annually in avoidable health care costs.³
- Studies have shown that medication adherence, health outcomes, and healthcare costs can be improved through clinical pharmacist-led engagement.⁴
- This clinical pharmacy-driven network focuses on patient engagement in those with chronic diseases and provides patient-centered care using clinical workflow and data management systems.
- The service's goal is to increase medication adherence, improve health outcomes, and reduce healthcare expenditures through individual case review and pharmacist-led patient outreach by supporting change and empowerment.
- The primary objective of this study is to evaluate potential medical expense cost savings associated with this clinical pharmacist-led patient engagement program.

Methods

- This is a multicenter, retrospective, quasi-experimental evaluation of patients pre- and post-enrollment into this clinical pharmacist-led patient engagement program.
- This program provides personalized medication optimization, medication education, behavioral modifications, and can also align medication delivery at patients' requests with a minimum of once-monthly live appointments and two digital clinical assessments per quarter (**figure 1**).
- Baseline per member per month (PMPM) medical costs had been calculated over the 12-month period prior to enrollment and over at least a 9-month period following enrollment.
- Patients with total medical expenses exceeding \$120,000 in either the pre- or post-enrollment 12-month period were excluded.
- The primary outcome is medical expense cost savings PMPM for patients enrolled in this engagement program.
- Secondary objectives include identifying those patients who may benefit most from program enrollment.
- Descriptive statistics were utilized for analysis.

Service or Program

Figure 1: General Process of the Pharmacist-Led Medication Engagement Program

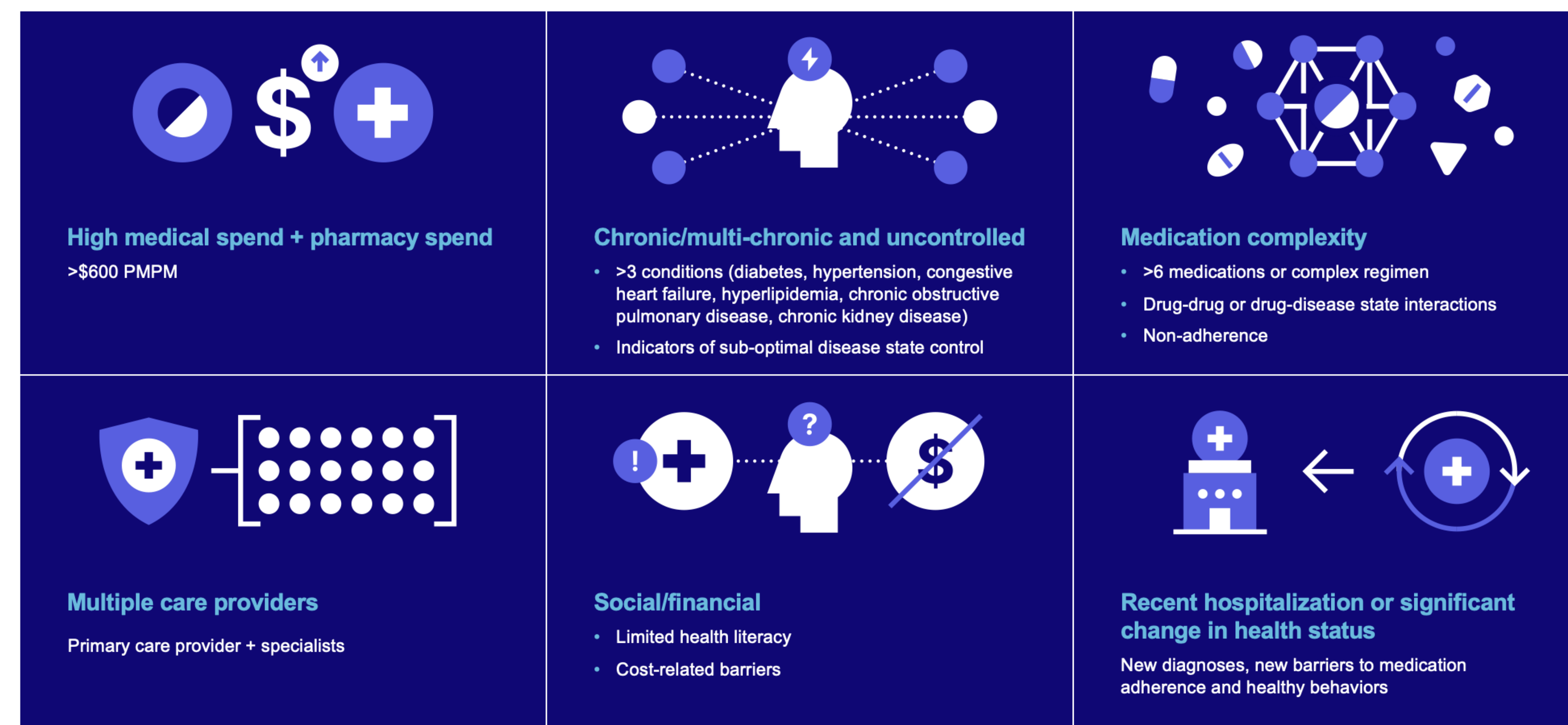


Results

Table 1: Pharmacist-Led Medication Engagement Program: Medical Expense Cost Savings

	Per Member Per Month (PMPM)	Per Member Per Year (PMPY)
Medicare Advantage Patients	\$113.60	\$1,363.20

Figure 2: Predictive Indicators and Key Criteria for Evaluating Patients' Needs for Medication Engagement



Results

Figure 3: Demonstration of Patient Impact



- 868 Medicare Advantage patients were enrolled.
- There was a medical cost savings of \$113.60 PMPM (\$1,363.20 per member per year) for patients of whom were enrolled in the program for at least nine months (**Table 1**).
- Patients who received the greatest benefit from the program are shown in **figure 2**.

Conclusions

- This clinical pharmacist-led patient engagement program was shown to reduce medical spend in over 850 Medicare Advantage patients.
- Further research should evaluate the impact of this clinical pharmacist-led service on clinical outcomes.

References

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Disclosures

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