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Clinical Pharmacy Implementation and Optimization

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Natural Progression to Clinical Pharmacy

- Operations Pharmacy
 - Working the bench and managing majority of the consults from patients and providers
- Operations with a touch of Clinical Pharmacy Services
 - In Person Comprehensive Medication Reviews
- Diabetic Case Study
 - Objective: To determine that a patient has a greater probability of experiencing positive outcomes in their diabetes management when a pharmacist is directly involved in their care.
- Clinical Pharmacist Role Expanded
 - The 'WHY': ability to practice at the top of our license while bringing in revenue that was not completely tied to 340b.



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Changing the Culture

- Concerns from C-Suite
 - Company goal alignment
 - Demonstrating clear ROI and deliverables
- Concerns from Providers
 - Additional work, inconvenience, less committed to team-based care, and the lack of perceived value
- Concerns from Pharmacy
 - Workflow disruption due to resource constraints
 - Resistance to change



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Clinical Pharmacy Services Offered

- Medicare Annual Wellness Visits
- Comprehensive Medication Reviews
- Chronic Care Management
- Specialty Pharmacy Program
- BrainCheck Neurocognitive Screening
- Prescription Prior Authorization Completion
- Collaborative Practice Agreement
- Pharmacy Quality Assurance Quality Improvement Program



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Clinical Pharmacist AWW Program: Where do you start?

- Research Medicare AWW: requirements for visit completion and progress notes, guidelines for disease state management and preventative services, best practice standards, and proper coding for reimbursement.
- Develop a Strategic Plan
- AWW Workflow: know your plan and be ready to make necessary changes once implemented.
 - This could include EMR templates, flow of the visit, documentation, follow up on patient specific preventative services, clinic staff/provider involvement, and after visit follow up.
 - Effective communication with the entire care team is required.



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STRATEGIC PLAN: AWWCP 2025



STRATEGY GOAL: INCREASE ACCESS FOR PATIENTS

STAKEHOLDERS: CVHS

GOALS	Increase AWW completion rate by 10%. ██████████ AWW (rolling 12 months) goal: 40%
OBJECTIVE	Increase the comprehensive AWW's offered to CVHS patients which are designed to focus on the quality of care provided to each patient and their health outcomes, which follows the Value-Based Care healthcare model.
KEY RESULTS	Increase volume of AWWCP's by approx. 650 visits for 2025.

INCLUSIVE	Providers, CP's, IT, Patients, EMR
COLLABORATION	Providers, Nursing, EMR, IT
CHAMPION	Leslie Hanley
OBJECTORS	Providers, Patients

TIMELINE & TRAINING:

MARKETING PLAN:

START DATE	January 1, 2025
GOAL DATE	December 31, 2025
TRAINING	Ongoing

GOAL	Increased AWW scheduling and Completion
AUDIENCE	Patients and Providers (other clinic staff)
AD STRATEGY	Provider Buy-In (in office). AWV Flyers (share on FB). Postcards (specifics from Kathy). Luma broadcast messages. ██████████ Outreach Programs
KEY RESULTS	Increase in completed AWWCP appointments

Strategic Plan Example

SWOT ANALYSIS

STRENGTHS	WEAKNESSES
<p>Standardization of AWW's.</p> <p>Follow up by CP staff for increase capture of patients for in-house pharmacy, increase patient compliance/med boxes, increase in UDS measure closure, increase in incentive-based payments through ACO</p>	<p>Space!</p> <p>IT Issues- internet and equipment problems</p> <p>Pharmacy Filling System- ██████████ lack of consistency in ability to utilize system at all CVHS sites.</p> <p>Lack of ability to get outside notes. ██████████ assisting some with this currently)</p> <p>No standardization for lab availability across all sites.</p>
OPPORTUNITIES	THREATS
<p>Expansion of lab services and training.</p> <p>Increase in gap closures.</p> <p>Provider recommendations and stack billing.</p>	<p>IT/Internet reliability</p> <p>Global Pandemics</p>



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Clinical Pharmacist AWW Program: Where do you start?

- Start Small
 - Start with a pilot group, one provider at one site, for example.
- Evaluate Program
 - What worked? What didn't work?
 - Make changes. Update workflow procedures accordingly.
 - Appropriate staffing?
- Expand to additional providers/sites.
 - Monitor and evaluate the program's outcomes regularly and make necessary adjustments.



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AWV Tracking and Monitoring

- Data Tracking
 - Spreadsheets
- Reports based on AWW billing codes.
 - Revenue
 - Outcomes
- AWW Audits for Quality Assurance

CVHS UDS measures 2025

Measure	Thru August 2025 Patients with AWW in 2025			Thru August 2025 All Patients		
	percent compliant	total pts for measure	# pt compliant with measure	percent compliant	total pts for measure	# pt compliant with measure
cervical Cancer	71.05%	152	108	61.32%	11,594	7,110
adult BMI & Counseling	98.27%	2,666	2,620	89.51%	32,660	29,235
Tob assess & Counsel	65.61%	2,661	1,746	68.87%	23,749	16,355
Mammo 51-74	45.46%	904	411	31.37%	8,689	2,726
CAD, DM Statin use	89.34%	1,491	1,332	82.57%	12,120	10,007
IVD antithrombotic	93.81%	307	288	91.78%	1,776	1,630
Colo Ca scrn (45-75)	65.70%	1,729	1,136	47.11%	17,983	8,471
depression	97.66%	2,607	2,546	86.91%	33,949	29,504
depression remission	32.14%	56	18	22.27%	1,118	249
HIV testing	67.17%	594	399	55.32%	25,107	13,889
HTN in control	69.33%	1,865	1,293	69.71%	13,887	9,681
Diabetes <9%	80.99%	784	635	71.32%	7,192	5,129



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Lesson's Learned

- Goal: standardization across all sites/providers.
 - Realization: this is hard to accomplish with clinics and providers that operate differently.
- Buy In
 - Be persistent and consistent. Not all providers will see the value in AWWs completed by a clinical pharmacist right away. Positive patient outcomes and success stories are helpful tools to prove the added value of the clinical pharmacist.
- Not all patients are willing to schedule or show up for an AWW. Utilize any tools available to decrease barriers.
- Same day office visit and AWW: both are not reimbursable.
- Indirect Revenue Source
 - AWW billing, care gap closures and insurance specific added incentives, and increase in in-house pharmacy use.



Key Takeaways

- Clinical Pharmacy Programs
 - Proven to be an integral part of Value Based Care Team
- Improved Patient Outcomes through enhanced patient education, disease state management and follow up, and patient specific preventative services.
- Additional Revenue
 - Indirect revenue from AWW billing, increased care gap closure rates, and by the potential for CGM, CCM, clinical pharmacist office visits (CPA), and BrainCheck appointments.
 - Increase revenue in operations pharmacy



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Questions?



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