TELEPHARMACY: A PATIENT'S PERSPECTIVE

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Anthony Pudlo, PharmD, MBA
Vice President of Professional Affairs
Iowa Pharmacy Association
Telepharmacy: A Patient’s Perspective

Jessica Adams, PharmD
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Disclosures

TelePharm, a Cardinal Health company, has a commercial interest in telepharmacy, but does not reference any commercial products in this presentation.

The opinions and recommendations expressed by the presenter are their own, and are to be used for educational purposes only.
Agenda

1. Patient journey
2. Why it matters
3. Telepharmacy in rural areas
4. Telepharmacy in urban areas
5. Regulatory landscape
The Game of LIFE

Patient edition!
Welcome to Springfield!

❖ Population: 1,800
❖ Nearest retail pharmacy: 12 miles
❖ Local businesses: health clinic, grocery store, bank, convenience store
Your patient journey

You start feeling ill

You visit your local clinic and the doctor writes you a prescription

What do you do next?
Choose a path to start!

You just got handed your prescription at your local clinic, would you rather:

**Option 1**
Fulfill the prescription at the telepharmacy next door?

**Option 2**
Go to the nearest traditional pharmacy?

OR
Choose a path to start!

You just got handed your prescription at your local clinic, would you rather:

Option 1
Fulfill the prescription at the telepharmacy next door?

OR

Option 2
Go to the nearest traditional pharmacy?
Welcome to the telepharmacy

- Brick and mortar location
- OTC and front end products
- Private counseling
- Pharmacist is always available
Telepharmacies look and feel like a traditional pharmacy
Your prescriptions are filled and verified

1. Technician fills prescription, taking images of the process

2. Prescription is remotely verified by a pharmacist via HIPAA-compliant software
Additional services while you wait

- OTC products
- Immunizations when pharmacist is on site
- Consult pharmacist with any questions
Consult with your pharmacist

- Visit with your pharmacist via secure two-way audio-visual software
- Your pharmacist is presented with your patient notes during the call
GAME OVER!

Leave with your medications in hand and your questions answered.
Why telepharmacy matters to patients
Telepharmacy...

Is defined as, "the provision of pharmaceutical care through the use of telecommunications and information technologies to patients at a distance," according to the National Association of Boards of Pharmacy.

Benefits pharmacies, clinics, communities and the healthcare industry as a whole, but its biggest effect is seen on the most important stakeholders - patients.
The four types of telepharmacy

**INPATIENT**
- Remote order entry review
- IV admixture

**OUTPATIENT**
- Retail telepharmacy
- Remote counseling
How it works

1. New prescription arrives at Pharmacy A
2. Technician A fills, taking images of the process
3. Pharmacist B reviews images to verify fill is accurate
4. Patient picks up Rx at Pharmacy A and Pharmacist B counsels

Source: TelePharm
Telepharmacy improves access and adherence

One out of three patients fail to fill their initial prescriptions

95% of patients reportedly filled their initial prescriptions when offered the option by a pharmacist at the point of care

The “Leaky Bucket”

Out of every 100 new prescriptions

50-70 arrive at a pharmacy

48-66 are picked up by the patient

25-30 are taken properly

15-20 are refilled as prescribed

Source: IMS Health Data, March 2011
Independent Rural Pharmacies 2003-2018

7,624

16.1% decrease

2007-2009

7.2% decrease

6,393

1,231 independent rural pharmacies closed

630 rural communities lost their only pharmacy

Source: Update: Independently Owned Pharmacy Closures in Rural America, 2003-2018; RUPRI Center for Rural Health Policy Analysis, Rural Policy Brief July 2018; Abiodun Salako, MPH; Fred Ullrich, BA; Keith J. Mueller, PhD
Current options for patients in medically underserved areas

1. Walk / personal transportation
2. Public transportation
3. Mail delivery
4. Physician dispensing
Impact of telepharmacy to the community

1. Offers convenient access to medication and a pharmacist

2. Compliments local clinic or point of care to improve fill rates and adherence

3. Restores the value of personal relationships

4. Boosts local economy by keeping business local
In what setting do you think telepharmacy is most beneficial to patients?

A. Rural areas  
B. Urban areas  
C. Both
Patients in rural & urban communities benefit from a local pharmacy
Rural access is declining

1,231

64+ million
People in the US living in rural areas

1.7+ million
Residents living in rural pharmacy deserts 10+ miles from the nearest pharmacy

Source: Update: Independently Owned Pharmacy Closures in Rural America, 2003-2018; RUPRI Center for Rural Health Policy Analysis, Rural Policy Brief July 2018; Abiodun Salako, MPH; Fred Ullrich, BA; Keith J. Mueller, PhD
Map of IA pharmacy deserts

10 mile radius around Des Moines
Rural use cases

- Open pharmacies in towns without access to a pharmacist
- Expand hours pharmacy is open
- Keep existing pharmacies open that risk going out of business
- Vacation coverage
Objections to telepharmacy in rural areas

1. “People live in rural areas for a reason, they don’t mind driving 10 miles each way”
2. “Residents won’t like a pharmacist on a screen”
3. “A pharmacist would move to the rural community”
4. “Mail order will take care of rural patients”
5. “People won’t understand the technology”
6. “The population in town won’t support a pharmacy”
Sharon
Telepharmacy patient

- Montezuma, IA
- Population: 1,500
- 20 miles from nearest pharmacy prior to telepharmacy opening
Sharon’s Video Slide
“Sometimes they would call and say our meds were ready and we would get there and they weren’t ready. We had to go back the next day. Now I’m 3 minutes away!”
Dave
Telepharmacy patient

- Montezuma, IA
- Population: 1,500
- 20 miles from nearest pharmacy prior to telepharmacy opening
Dave’s Video Slide
“Just the fact that we have a pharmacy here in town has been a huge benefit. My wife is fighting cancer so to have the convenience to be able to get the drugs here locally is wonderful.”
Christy
City clerk, telepharmacy patient

- Inconvenience to the town and herself when pharmacy closed
- Town voted pharmacy as top business needed in town after it closed a few years prior
- Huge impact on local community
- As a diabetic, knows she will get her prescriptions on time
You’ve arrived at the pharmacy
Need for improved access in urban areas

1+ miles
Distance to the nearest pharmacy in an urban pharmacy desert

32% or 1 million
People in Chicago's 802 census tracts were in urban pharmacy deserts

Urban use cases

- Community Health Centers
- Federally Qualified Health Centers
- Hospitals
- Urgent Care Clinics
- HIV Clinics
- Health Clinics
In-clinic telepharmacy providing 340b

- Located inside a full-service 340b clinic
- Wanted a solution to increase adherence
- Increased physician-pharmacy communication
Telepharmacy in a community health center

- Partnership with clinic
- Allows on-site pharmacy at low volume locations
- Ability to utilize pharmacists more effectively in the clinic
Objections to telepharmacy in urban areas

1. “There’s a pharmacy on every corner”
2. “It’s unfair competition”
3. “This would compete with my pharmacies”
4. “Patients don’t have issues traveling half a mile”
5. “It’s not as good quality of care”
6. “Why not just hire a pharmacist”
Lorraine
Telepharmacy patient

- Chicago, IL
- Walked 6 blocks to the pharmacy prior to the telepharmacy opening in the clinic
- Receives transportation to and from clinic appointments
Lorraine’s Video Slide
Lorraine
Telepharmacy patient

“I used to walk 6 blocks to get my medications and sometimes it wouldn’t be ready when I got there, which means I had to come back later. I call it the Magnificent Mile because it’s a very long walk. Now it’s more convenient. I can come right out from seeing the doctor and pick up my medicine and go straight home.”
"The doctor’s office is convenient where they pick you up and take you home, but without the pharmacy, now they have to figure out how to get the scripts. A lot of times our transportations is the only transportation these patients are going to get. They may have to get on the bus with their wheelchair or walker or needs more help and they don’t have that. Now to hear them say “I have everything, now I can just go home!”, I mean, that’s everything."
Telepharmacy’s impact & regulatory environment
Telepharmacy historical timeline

- 1942: Australia’s Royal Flying Doctor Service
- 2001: North Dakota first state to allow
- 2001: Community Health Association in Spokane, WA launches program
- 2002: NDSU study begins
- 2003: Alaska Native Medical Center program
- 2006: U.S. Navy begins telepharmacy
The growing impact of retail telepharmacy

- 214 Telepharmacy sample
  - 40% urban, 60% rural
  - 71% independent, 24% health system, 5% chain

- 435,000+ patients served

- 6,800,000+ prescriptions filled

- 655,000+ consultations

- 982+ pharmacists
  - 1,142+ technicians

71% independent, 24% health system, 5% chain

40% urban, 60% rural
Frequently asked questions

1. Fill accuracy
2. Safety: staff & location
3. Diversion
4. Internet outages
North Dakota telepharmacy case study

Study conducted from 2002 - 2008

81 telepharmacies

Medication dispensing error rate for telepharmacies

1.3%

Compared to a national average of: ~1.7%

Result: Positive outcomes, mechanisms could be improved

Safety of telepharmacy today

Case Study Sample

- 18 Telepharmacies
- 5 States
- 230,000 Prescriptions Processed
- 2 Years

“In 2018, there were zero error complaints and zero verified diversion cases in Idaho telepharmacies,”

Alex Adams, Executive Director, Idaho Board of Pharmacy
Telepharmacy regulations by state

- **Permitted, but practice may be restricted and/or requires Board approval**
- **In progress**
- **Not permitted**
Which state do you think has the most telepharmacies operating today?
Impact of telepharmacy in Illinois

- State with most operating telepharmacies
- 60 in operation today
- 50% urban, 50% rural
Regulatory considerations

- Pharmacy technician certification hours/experience
- Special rules around controls
- Limits on number of remote sites or technicians
- Security requirements
- Mileage restrictions
- Technology requirements
Iowa legislative & regulatory landscape

- Statutes and regulations permit the operations of telepharmacy
- Telepharmacy site shall be located in IA and 10 miles from nearest pharmacy unless:
  - Hospital setting with inpatient dispensing
  - Located on land owned, operated or leased by state
  - Approved and In operation prior to 1/1/2016
  - Apply to board for waiver
- No restriction on the number of sites a pharmacist can supervise
- Telepharmacy site shall be within a 200 mile radius from managing pharmacy
Iowa legislative & regulatory landscape

- No pharmacist to technician ratio
- Pharmacy technician requirements:
  - Registered and certified
  - Complete training
  - 2000 hrs of experience
  - 4 hrs of CE per renewal period
- Perpetual inventory for all controls (CII-V) with monthly audit by rph
- Telepharmacy site shall be staffed by a rph for at least 16 hrs per month
- Max average script count of 150 rxs per day per 90 days
Your prescription is now ready!
QUESTIONS?
UPCOMING CHANGES FOR DSCSA/DQSA

See You Next Month!

Tuesday
October 8, 2019

Questions? Contact David Schaaf at dschaaf@iarx.org or 515-270-0713