

Pharmacy Office Ho April 16, 2020

Focus Topic: Sto

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WEBINAR LOGISTICS

We strongly recommend calling in on your telephone

Phone: 866-469-3239

Access Code:

632 274 023 #

Your Attendee ID:

Listed below the access code in the box under "Select Audio Connection".

To ask/ answer a question, or share a comments, please use the Chat box on the right hand side of the screen.

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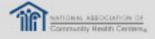
www.nachc.org

THE NACHC MISSION

America's Voice for Community Health Care

The National Association of Community Health C founded in 1971 to promote efficient, high qualit health care that is accessible, culturally and lingu community directed, and patient centered for all





Agenda

- Operational Updates Tim Mallett, RPh
- Focus Topic: Staff 340B Education Jangus Whitne
- Q&A

Discussions box through pres



Operation

As of 4/16/2020

Site registration in the era of COVID-19

- Normal enrollment ended yesterday, April 15.
- HRSA has <u>announced</u> that they will allow CEs immediate enrollment "upon request and review"
- For information on how to register your site please see the FAQs here: https://www.hrsa.gov/opa/COVID-19-resources





340B University JUST for Health Centers

NACHC CHI Conference

- Sat, August 29, 2020, in San Diego, CA.
- Is free, but please preregister (google "340B University" for link)



What is 340B l FQH

- A full-day, free tr aspects of 340B s Apexus, HRSA's 3 arm.
- Unlike other sess
 University, these
 on the specific neared are taught by
- Appropriate for 0 pharmacy staff, 0

Telehealth and 340B

- 340B use for Rxs from Telehealth visits is allowed
 - Prescriber employed by or under contract with CE
 - Medical Records of telehealth visit
 - Within scope of CE's Grant
- From Derek Pihl
 - We just added clarification to our existing "340B Eligible Definition Policy" that "health care services' means in-pertelehealth visits, including either video or telephone, with professional."



Pharmacists response to COVID-19

- APhA offering training for pharmacists on COVID-19 specimen
- http://elearning.pharmacist.com/products/6020/covid-19nasopharygeal-specimen-collection-training This training is free to members and non-members alike.
- NO information on billing
- NCPA issued a fact sheet on COVID-19 testing at Community Pharmacies https://ncpa.org/sites/default/files/2020-04/COVID-19-testing-info-for-NCPA-members.pdf
- Need to have CLIA certificate of waiver <u>https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/Downloads/HowObtainCertificateofWaiver.pdf</u>



Kalderos update

- New platform <u>https://www.prnewswire.com/news-releases/kalderos-launches-review-an-enhanced-340b-claims-verification-platform-301041030.html?tc=eml_cleartime</u>
- Reviewing CAD claims
 - Uses ICN/CCN
 - Option to respond "Cannot locate ICN/CCN"
 - Per Steve at Kalderos CHC will not be at greater risk for a manufacturer audit if they select the option above
- See NP for additional info



One more thing.....

- May Office Hours Focused Topic Sliding Fee Scale: A new approach to assisting eligible patients.
- COVID-19 Noddlepod Please contact me tmallett@340Basics.com or Susan Hansen shansen@NACHC.COM if you would like to have access to this information.
- 340B Health Summer Conference Sue Veer





Please do the one-minute evalua

https://www.surveymonkey.com/r/XTN (Your responses help us demonstrate to BPHC th sessions are a valuable use of their funding



Focus Topic: 340B Education for FQHC S

Jangus Whitner, PharmD, 340B ACE

Clinical Pharmacist & 340B Program Manager
PrimaryOne Health







NACHC Pharmacy Access
Thursday

Disclosure:

I do not have any actual or potential financial conflicts of interest.

Disclaimer:

Always check with legal counsel, Apexus, HRSA another trusted resource before making any check that could impact compliance.

My Health Center



Your first choice for qu

- Tier III NCQA PCMH Accredited Federally Qualified Health
- Serve ~48,000 unique patients annually
 - 35% of patients are uninsured
 - 43% of patients have Medicaid



- 11 medical, 3 dental, 3 vision sites throughout central Oh (Franklin & Pickaway County)
- Services:

Primary Care	Clinical Pharmacy Services
Behavioral Health	Dietary/Nutrition
Dental	Substance Use Disorder
Vision	Physical Therapy

340B Program is contract pharmacy only

My Health Center (cont.)



Your first choice for

- Staff Overview:
 - 315+ total employees
 - 70 Prescribing Practitioners (includes Clinical Pharmacists)
- Pharmacy Dept
 - □ Clinical Pharmacists:
 - 3 full-time, 1 part-time contracted
 - 1 PGY2 Ambulatory Care Pharmacy Resident
 - 340B Team:
 - 340B Program Manager (splits time as Clinical RPh 2 days/
 - 340B Coordinator (full-time)
 - 340B Support Specialist (full-time)

Importance of Staff Education

Who needs educated on 340B?

- First groups to come to mind:
 - Pharmacy/340B Team
 - Prescribing Providers



Reality: EVERYONE (at least to some extent)

Importance of Staff Education (cont.)

- Can you generate 340B savings and never educe single staff member outside of your 340B team
 - Of course you can... but the lost opportunity for organization and your patients is tremendous
- Staff education is ESSENTIAL to optimizing you program
 - Frontline staff are your eyes/ears and have direinteraction with patients
 - How can your patients know how to take advan 340B if your staff cannot explain it to them?

Educational Sessions

Types & Frequency

Our Education Schedule

Туре	Audience	Time	Details	
New Hire Orientation	Any new hire, regardless of position*	30 min	Intro to 340B, program purpose, or program structure, contract phare network, program impact (how w 340B savings), compliance, key po- depending on position	
340B "Lunch & Learns"	Clinic staff at each individual site	30 min + 15 min Q&A	Same as above Most important part of this sessi the time for Q&A	
Pharmacy Mtgs	Clinical pharmacists, pharmacy resident, 340B team	15 min	Updates, troubleshooting 340B is when embedded in the clinic, navigating common PCP question	
Nursing Mtgs	LPNs & RNs	15 min + 10 min Q&A	Clinic Administered Medications (workflows, compliance with diversion/duplicate discount, etc.	
All-Practitioner Mtg	All providers/practitioners (PCPs, dental, vision, pharmacists, BH, PT, etc.)	10 min + 5 min Q&A	Targeted topics such as: cash pro- formulary, prescribing practices	
All-Staff Mtg	All 315+ staff members	15 min	Review of 340B purpose, program updates, and overview of program impact over past year	

Schedule Overview (cont.)

Туре	Audience	Time	Details
Apexus 340B Univ On-Demand	340B Team Members	Ongoing	https://www.340bpvp.com/educa 340b-u-ondemand/
Policy Updates & High Level 340B	340B Oversight Committee & SLT	Varies	HRSA policies, impact of national, legislation, etc.
340B Coalition Conferences	340B Program Manager	2.5 days/ conference	www.340bwinterconference.org/ www.340bsummerconference.or
Apexus 340B University LIVE	340B Team Members & SLT if possible	8-hour day	https://www.340bpvp.com/educa 340b-university/



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Tailoring to the Audience

Tailoring your Content

- At the end of each slide deck, I try to provide a sur of key points related to the role of the audience
- For example:

Prescribing Providers

- Remember: WRITE FOR 90 DAY SUPPLIES!
- E-prescribe controlled Rxs whenever possible (preferred over print)
- Medication not covered on patient's insurance?
 - Before you request to switch that med from Insurance to the 3 Program, you should make a good faith effort to:
 - Choose the preferred drug on insurance formulary OR
 - Complete the Prior Authorization
- Recognize & follow up when a patient may need a Financial Hardsh
 - Send patient back to front desk to ensure Proof of Income is o

DPS, MA, LPN, RN

- Recognize barriers to medication access during visits and inform F
- Identify when to properly use a Prior Authorization (instead of 34
- Identify when patients are not using a 340B pharmacy (both insur uninsured) and offer to patients the option to fill at one of our co pharmacies.

Helpful Tips

- Continuously update the slides <u>after</u> each sessio
 - Listen to & take notes of questions/comments fro
 - Goal: Routinely review and update your slides/har be clearer for next time
 - Slides/Handout should be a RESOURCE for staff to refe when on the job
- Create a running list of FAQs
 - Update that after every education session
- Post the handouts/FAQs on your intranet/shared

Education does NOT stop after your prese

- Make sure your staff know how to reach you!
 - Staff should be comfortable communicating with
 - Better flow of communication =
 - Increased awareness of issues before they snowball
 - Streamlined medication access for patients
 - Opportunity to correct misconceptions early
- Steps we have taken:
 - Shared EMR Inbox for 340B Team
 - Staff do not have to remember 340B team member na
 - Easier to cover queue when a team member is off
 - Shared 340B Phone Extension that rings to all our

Competency Quiz

Quiz Contents

	Possible Options (Individualized for each FQHC)		
Who should take it?	 Just 340B team members 340B Oversight Committee members All Employees Could also consider different quizzes depending on staff to		
How should it be administered?	 Paper Online Survey (e.g. Survey Monkey®) 		
When should it be administered?	 At New Hire Immediately after completing Apexus 340B University Annually for certain staff 		
What should they be quizzed on?	 Basics of 340B program intent/purpose Patient eligibility Compliance considerations specific to your health cent Employee use of 340B drugs (when is it appropria Proper CAD process: prevention of diversion, dup (be specific to your carve-in/out status) Material Breach Threshold 		

Example Competency Quiz

- Hannah Rowell, 340B Program Manager at Erie Family H Centers, has graciously shared the Competency Quiz exa the following slides
- Her approach:
 - She gives the quiz 1x/year to her internal 340B team (mem consist of pharmacy, clinical, purchasing, and finance depts
 - She began with paper format, but has recently converted to SurveyMonkey®
- Access to quiz:
 - https://nachc.noddlepod.com/groups/1577/posts/2

Example Competency Quiz

Erie Family Health Centers 340B Program Competency Quiz

Print Name			

- 1. The 340B program was enacted by Congress in 1992. What was the congressional intent of the program
- 2. "Diversion" is a key 340B compliance item.
 - a. What does "diversion" mean in the context of 340B?
 - b. What is Erie's greatest area of diversion risk?
- 3. "Duplicate Discounts" are prohibited.
 - a. How does a "Duplicate Discount" occur?
 - b. Within Erie's 340B program, what is an example of an instance where a Duplicate Discount could procur?
- 4. Which party is ultimately responsible for 340B program compliance?
 - a. HRSA

- e. Apexus
- b. Walgreens
- f. IL Dept of Healthcare & Family Services

c. Erie

g. AllCare

d. OPAIS

h. Drug Manufacturers

Example Competency Quiz (cont.)

- What makes a patient eligible to receive a 340B drug?
 - Erie has an established relationship with the individual and maintains records of the individual's health
 - b. The individual must receive health care services from a health care professional who either is employed covered entity or provides health care under contractual or other arrangements (such as referral for consultation) such that the responsibility for the care remains with the covered entity.
 - c. The individual must receive health care services that are consistent with the service or range of service: FQHC status.
 - d. All of the above
- 6. Erie follows the "closed loop" model for assessing referral script eligibility. Referral scripts are only deemed eligible if they meet the 340B qualification criteria. Please determine whether the following steps in the "cloop" process are required or optional (circle):

Required - Optional	1) Patient is an Erie patient, seen in the health center by an Erie provi
Required - Optional	2) Erie provider documents a referral out to an external provider.
Required - Optional	3) Patient completes the referral appointment and receives a prescrip
Required - Optional	 The external provider sends a progress note or visit summary to Eri document is saved in patient's EMR chart.

- 7. Can an Erie employee receive 340B drugs? Please explain.
- Please complete the blanks in Erie's 340B Material Breach policy: Material breach = An instance of noncom which exceeds _____% of Erie's ______ and does not self-correct within six (6)
 - a. 2% & annual expenditure for 340B pharmaceuticals
 - b. 5% & annual expenditure for 340B pharmaceuticals
 - 5. 3% & aiiiidal expeliditure nos manufactures
 - c. 2% & 340B expenditure per manufacturer
 - d. 5% & 340B expenditure per manufacturer

Resources

Resources available to you!

- Apexus 340B University On-Demand FREE
 - https://www.340bpvp.com/education/340b-u-ondemand/
- "340B The Basics" Video FREE
 - Previously available on Brainshark
 - Scroll down the bottom of the page at this link, and view the video "Preview 340B University OnDemand"



- Apexus Advanced 340B Operations Certificate
 - Fee associated with this course
 - https://www.apexus.com/340b-certificate-program
- Relias Online Training 340B Drug Discount Program FQHCs

Any questions?



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As of 2/20/2020