

# Pharmacy Benefit News

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## Commentary: Wearable Healthcare Technology Is the Next Step

Frost & Sullivan published a list of emerging technologies that will impact healthcare over the next decade, which is noted below. What I find most interesting is that wearable technologies cover about a third of the list; namely, brain-computer interfaces, wearables, and robotic exoskeletons.

In our experience as analysts, the most difficult step is to acquire useable and useful data. Useful data has come from multiple sources including claims, EMRs, patient surveys, and sometimes biometric screens. However, the EMR data is frequently of such poor quality so that it is not useable.

The hope is that laboratory data would be included in the EMR to help track the patient's progress. When wearable technology can provide consistent data, and trends of essential parameters, then treatment of conditions will be significantly improved. Every patient will not require this technology initially, but certainly the most brittle, and serious patients will benefit. It is the trending of information, and the surveillance for acute events that will have the greatest benefit.

### Emerging Healthcare Technology

1. Brain-computer interfaces
2. Wearables
3. Robotic exoskeletons
4. Cognitive computing
5. Predictive modeling
6. 3D printing
7. Natural language processing
8. Telemedicine
9. Mixed reality
10. Big data analytics

Source: [Cardiotrack, September 6, 2017](#)

**Problem:** Several clients did not find the results of Retrospective Audits useful. Many clients also felt that the financial findings that identified problems with the PBMs were too hard to capture or were non-recoverable. As a result, Pro Pharma was presented with the problem of how to improve the Audit Process.

**Methodology:** Pro Pharma addressed the problem from several vantage points –

1. What was the reason for the Audit?
2. What were the client's goals?
3. How would the results be used to improve management of the Plan?

Aside from corporate rationale and Sarbanes-Oxley motivations, the major concern was to use the information to manage the Plan better and at a lower trend. The current approach for reconciling invoices was to sum claims and paid amounts to compare against the invoice totals. The result, essentially was no information to use for managing the Plan. Pro Pharma used this information to digitize the entire Audit and make the results useful monthly, concurrently and at an affordable cost. The rationale for the Audit was to improve management and to direct changes to improve trend. The goals were designed to be both short and long-term in order to manage drivers of short-term and trend for long-term.

**Outcomes:**

The client then had point-of-sale results and accompanying analyses to use for –

1. Identifying the Current Situation for:
  1. Cost accounting for every penny spent
  2. Drivers of spend by demographics, geography, categories of medications, individual medication cost inflation
  3. Trending results by spend, PMPM and PUPM to compare to national and peer results
2. Predictions
  1. Predictions for future spending
  2. Forecasting based on new entrants and demographic shifts
3. Outcomes based on quality and national metrics that were compared to targets for peer-to-peer improvements
4. Action Plans/Recommendations for managing drivers, trend, and the impact of new entrants
5. The result was an Audit that was both retrospective and prospective providing useful goals and objectives that could be prioritized and acted upon to achieve management initiatives.

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## Commentary: Wearable Healthcare Technology Is the Next Step

Frost & Sullivan published a list of emerging technologies that will impact healthcare over the next decade. (Note the earlier commentary on wearable technologies.) Aside from technologies that provide a new avenue for collection of data, i.e., wearables, what is also most interesting is that telemedicine is expected to make an even greater impact than what is currently apparent.

There has been an emphasis over the last decade on the shortage of primary care Physicians, Nurses, Pharmacists and other healthcare professionals. New schools have emerged to train the next generation of primary care and specialists. As the shortages of professionals are filled, one would expect the need for telemedicine to be reduced. This would be consistent with the current use of telemedicine to provide specialty care to areas that are remote or without necessary specialty practices. There is also a need for telemedicine to assist with diagnosis and treatment requiring interpretation of radiology pictures and scans as well as laboratory testing.

Yet, the shortages of primary care physicians have led to increases in Nurse Practitioners and Physician's Assistants.

## Commentary: Older Americans Are Taking Too Many Unneeded Drugs

Utilization is the number of medications that a patient takes on a regular basis. It is the great multiplier in that as the number of prescriptions rises, the risk of drug-induced disease also rises. Estimates are that 25% of people between the ages of 65 and 69 take at least five medications, but that the prevalence rises to 46% between the ages of 70 and 79. Of these groups at least 15% of seniors have suffered medication-related problems including death. At least half of these cases are preventable.

Utilization of multiple medications is known as "polypharmacy". The goal of Medicare, Medicaid and private insurance is to "deprescribe" those medications that are unnecessary. For example, medications that are categorized as high risk have been targeted through the "Beers List" to reduce medications that are harmful to seniors. The "prescribing cascade" occurs when patients develop symptoms from one medication that is interpreted as a new problem, rather than a symptom of the medication currently used.

How do we attack this problem? First, this is a worldwide problem, not just one in the US. Canada and Australia have led



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support of these professionals. What is even more interesting is that healthcare professionals from all over the world can participate in making Physician fees more competitive. This could also lead to a necessary reduction in the need for primary care. Hence, the current shortage, could be the harbinger of a decreased need for so many professionals in the future.

assist with solutions. Second, there is a group of tools that can be deployed; namely,

1. Guidelines for prescribers to "deprescribe" unnecessary medications
2. Reminder to Prescribers to write the rationale for every medication so that it can be evaluated later
3. Emphasis of importance of medications review before and after hospitalizations
4. Provider education on the highest risk problems
5. Integration of comprehensive medication reviews (CMRs) into all patient practice

The Medical community has deployed the "Choosing Wisely" campaign to attack the problem. Advertising of new medications has also been a source of concern. Professionals should inform their patients about the need, or lack of need, for these new agents. Yet, all professional organizations must add their support to these campaigns so that overprescribing does not become the opiate epidemic of the future.

[https://www.medscape.com/viewarticle/890017\\_print](https://www.medscape.com/viewarticle/890017_print)



# IS

## Invoice Screens™

### Concurrent Audit and Analyses

Pro Pharma Invoice Screens™ targets Providers, Physicians, and Pharmacies responsible for rejected claims that did not meet contract requirements preadjudication by use of the "Three C's":

- Collecting - dollars from inappropriately paid claims
- Correcting - vendor claims processing mistakes
- Controlling - provider "abuse"

Review of biweekly PBM Pharmacy Invoices for Pre-Adjudication Claims can save 7-11% in overall drug spend. Coupled with Claims Review, these screens can also target the Providers, Physicians and Pharmacies responsible for rejected claims that did not meet contract requirements.

*Savings for most clients are realized when Pharmacy Invoice Amounts are verified and Billing Details are Screened in the following areas:*

*Formulary Compliance  
Eligibility  
Pricing/MAC Compliance  
Invalid Claims  
Excluded Benefits*

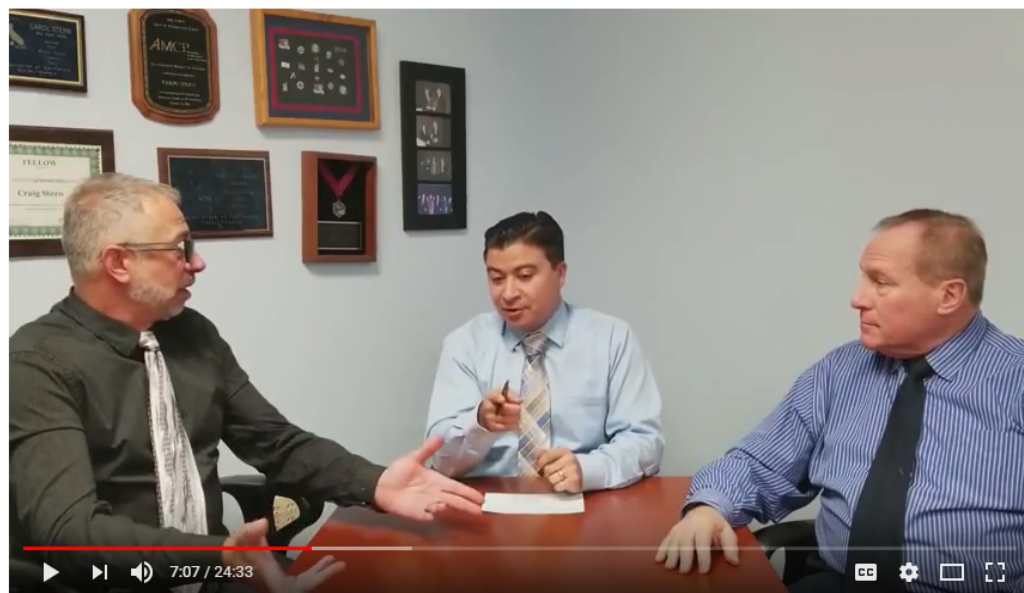
### *Benefits of Screening Invoices Every Two Weeks at Check Write:*

- Turn-Around Time (TAT) is within one week of receipt complete data sets, to prevent payment on rejections*
- Peripheral Identification of Physician and Pharmacies responsible for outlier and/or for potential "abuse"*
- Put Dollars Back in Your Pockets Concurrently!*

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Pro Pharma Pharmaceutical Consultants, Inc. has assisted payers and providers for over 31 years to maintain quality while controlling costs.

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