# Broad CPAs and Physician Trust Help CMM Program Reach the Underserved

Trust, backed by broad collaborative practice agreements, helps OLE Health deliver CMM services to the underserved in Napa, Calif. Patients come to the program in a number of ways: They may be identified by the complex care management team, by providers or by the clinical pharmacists. They can also self-refer. "All patients receive comprehensive medication management", said Mohamed Jalloh, Pharm.D., BCPS residency site coordinator.

The program isn't limited to specific diagnoses – it includes patients taking any medications.

Touro University California College of Pharmacy pays for the following:

- One full-time faculty pharmacist (1.0 FTE)
- One full-time PGY-1 pharmacy resident (1.0 FTE)
- Two rotation students every 6 weeks in the academic year

OLE Health does not contribute to the salary of the Touro University staff members. However, OLE Health pays for the following:

- One full-time clinical pharmacist
- Three pharmacy technicians (2.4 FTEs). The technicians work on patient assistance and access issues and deal with prior authorization.
- A medical assistant/front office coordinator who calls patients to confirm appointments accounts for about 0.1 FTE.

## AT A GLANCE

**OLE Health**
*Napa, CA*

**Person in charge:** Mohamed Jalloh, Pharm.D., BCPS & residency site coordinator

**Organization type:** FQHC; OLE Health is part of an MSSP ACO: Redwood Community Care Organization with 8,000 fee-for-service Medicare patients.

**Year CMM Launched:** 2010

**Payment sources:** Medicare/Medicaid

**Funding sources:** HRSA grant (funds for clinical pharmacist)

**Number of pharmacists:** 2 full-time pharmacists

**Number of sites:** 1

**Unique CMM patients served in last 12 months:** approximately 750

**Can patients self-refer?** Yes

**Notable findings:**

- Establishing trust with physicians and the rest of the care team paves the way for broad collaborative practice agreements that allow pharmacists to work at the top of their license. Board certification and residency are both key to earning this trust.
- Few FQHCs are part of the MSSP ACO program. OLE Health is one of them.

OLE Health is a patient-centered medical home. Each provider has a care coordination team, and CMM is integrated into that. Pharmacists help construct medication regimens, order refills, order lab testing and order referrals for various disease states. Unfortunately, since pharmacists are not identified as billable FQHC providers, to optimize revenue generation they implement the following to facilitate reimbursement activities:

- Conduct comprehensive medication reviews in the eCW charts for private insurance patients
- Conduct comprehensive medication reviews for OLE Health patients for the contracted pharmacy (Cardinal Health, formerly known as IMGRx) using the outcomes MTM platform.
- Conduct co-visits with billable providers utilizing 99605, 99606 and/or 99607 medication therapy management billing codes

Because OLE Health is so integrated, demonstrating the value of CMM—distinct from the clinic itself— can be challenging. OLE Health is tracking incoming patients for cholesterol, blood pressure, etc.—starting at baseline, then measuring at three and six months. Jalloh and his students are involved in quality improvement projects to determine the impact of pharmacy services on outcomes of A1C, blood pressure, appropriateness of statins, medication adherence, travel health, erectile dysfunction, benign prostatic hyperplasia, naloxone counseling and others.

## Success factors

Dr. Jalloh cites three key elements to CMM program success:

1. **Integration of CMM into Overall Care Workflow.** "If CMM is not integrated into the workflow, the clinic may not find implementing a non-billable provider such as clinical pharmacists useful."
2. **Updated Collaborative Practice Agreements to have generalized statements for creating policy and procedures.** "CPAs should avoid having to create a specific policy for each disease state a pharmacist would like to help manage. I would strongly suggest creating a policy on clinical protocols and updating protocols as needed. This intervention can prevent delays of implementing care by utilizing the pharmacist's clinical skills."
3. **Validation of Clinical Data.** "If you are tracking data, you must ensure that the data is valid. We used a company called 'Relevant;' however, I noticed some significant errors on how Relevant was tracking certain data and alerted the IT team." If you do not have a way to validate the data, the data could be misconstrued to the C-Suite, who relies on that data to make significant decisions.
4. **Value Savings Tracker**. "I generally use the 99211 billing code in conjunction with the 99605/06/07 billing codes when I conduct visits. I strongly recommend having an internal system to track how much economic value that pharmacists provide throughout their tenure within a health system."

## Lessons learned

1. **Provider trust is essential.** "You must have a level of credibility before engaging with providers. To validate this level of credibility, I tried to provide pharmacotherapeutic services in the 'pain points' of complex disease states that required intricate medication therapy management. Also, I tried to engage with providers at a friendly level to understand what their 'love language' was to ensure that my efforts with them was most receptive."
2. **Continued Medical Education is Necessary.** "Many of the providers may not have enough time to thoroughly assess any new medical literature. I learned that I was able to provide key up to date information and apply it directly to patients. The providers felt a sense of pride in integrating new information into their clinical practice without having to spend the strenuous hours digesting the information."

## Training and certification

For Jalloh, both residency and board certification are important. Residency helps pharmacists become established in ambulatory care. Board certification has been especially useful to him personally. This has provided Jalloh a greater level of confidence when engaging with providers.

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