

ASHP BEST PRACTICES AWARD

Automation of Payor-Driven Product Selection in the Electronic Health Record: Optimizing Utilization of Biosimilars, Iron, and 505(b)(2) Products

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Introduction

The Ohio State University Wexner Medical Center

- Multidisciplinary, academic medical center
- NCI-designated Comprehensive Cancer Center
- 7 hematology/oncology outpatient infusion sites
 - 75,000 infusion encounters in FY24
- 20+ ambulatory care clinics
- Electronic Health Record (EHR): Epic with Beacon oncology module

Department of Pharmacy Services

- 12 pharmacy licenses
- 30 pharmacy locations
- 6 specialty/retail locations
- Over 850 pharmacy FTEs

Background

- Prior authorizations (PA's) and step therapy are common payor utilization management tools¹⁻⁵
- PA's are the highest administrative healthcare burden⁶
- Manufacturer rebate structures may lead payors to favor specific products on formularies, even when they are therapeutically interchangeable⁷⁻⁹
- Resources devoted to navigating PA's detract from direct patient care and contribute to provider burnout^{1,3}
- Patient care delays from the PA process can result in prolonged illness, exacerbated health conditions, and increased anxiety^{1,3,12,13}

Purpose

- To leverage EHR technology to develop an automated product selection program based on payor and formulary preferences to streamline prescribing, reduce administrative burden, and improve our patients' experience

Description of the Program

Stakeholder Engagement

- A steering committee was formed with key stakeholders: finance, informatics, oncology infusion, PA, clinical oncology, and drug information teams with the following program goals:
 - Improve financial outcomes
 - Decrease administrative burden
 - Leverage tools available in EHR for automation

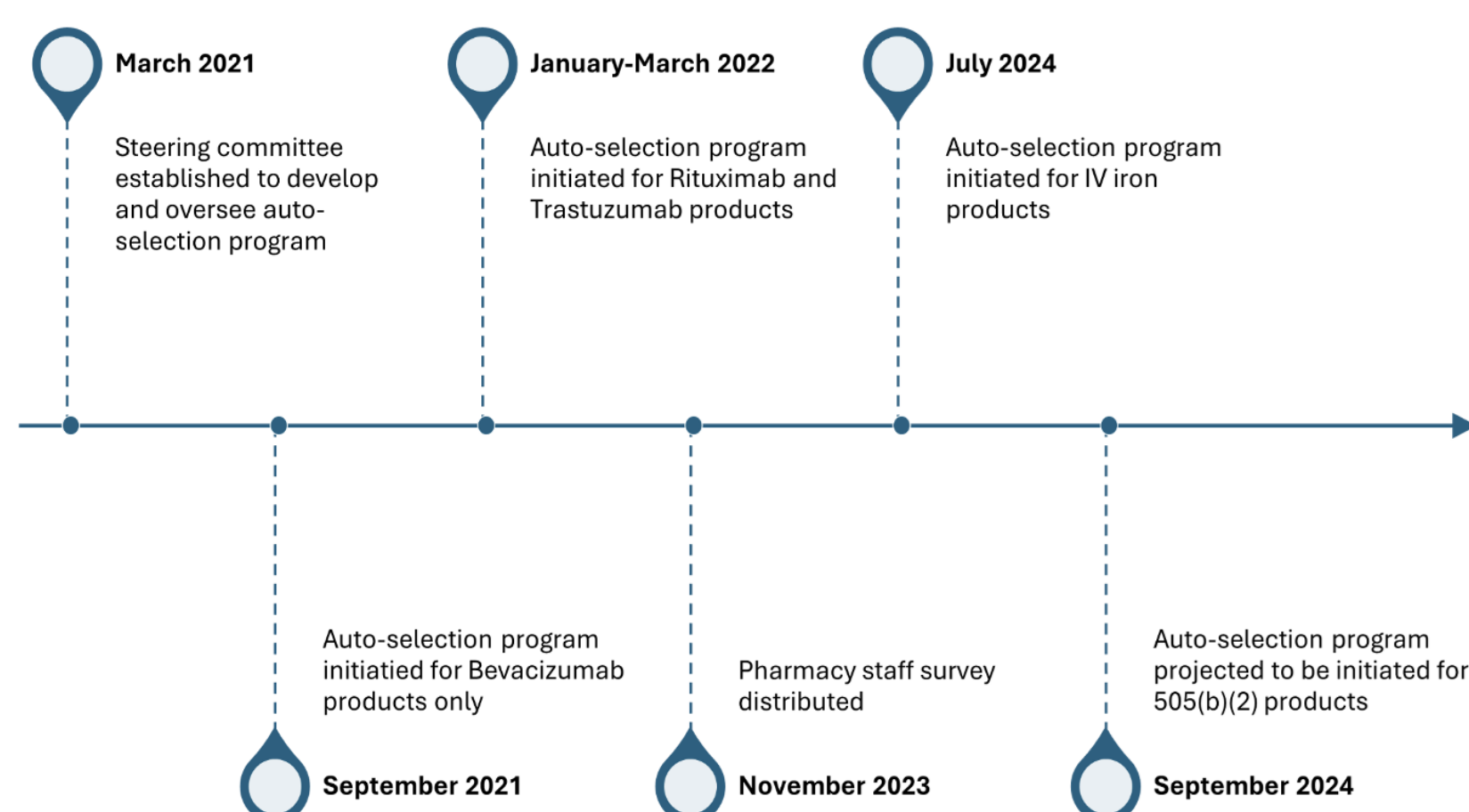
Collaboration with Other Departments

- Created proprietary calculator involving managed care and finance departments
 - Inputs: payor preferences, contractual reimbursement rates, and purchasing contracts.
- Physician stakeholder support at health-system informatics committees

Phased Implementation Strategy

- Phase I: Biologics and biosimilars
 - Utilizes rule-based advanced order groups (AOGs)
 - Initiation with bevacizumab and its biosimilars with eventual expansion to infliximab, rituximab, trastuzumab, and their respective biosimilars
 - Success due to effective communication, testing, validation, training, and education materials
- Phase II: Intravenous (IV) iron
 - EHR suggestion of IV iron product driven by presence of iron deficiency anemia on the patient problem list
- Phase III: 505(b)(2)
 - Product selection utilizes AOG functionality to auto-select either an originator or 505(b)(2) formulation

Figure 1: Project milestones



Experience with the Program

Auto-Select Workflow for Biosimilars/505(b)(2)

Figure 2: Pre-Implementation: Prior Authorization Workflow

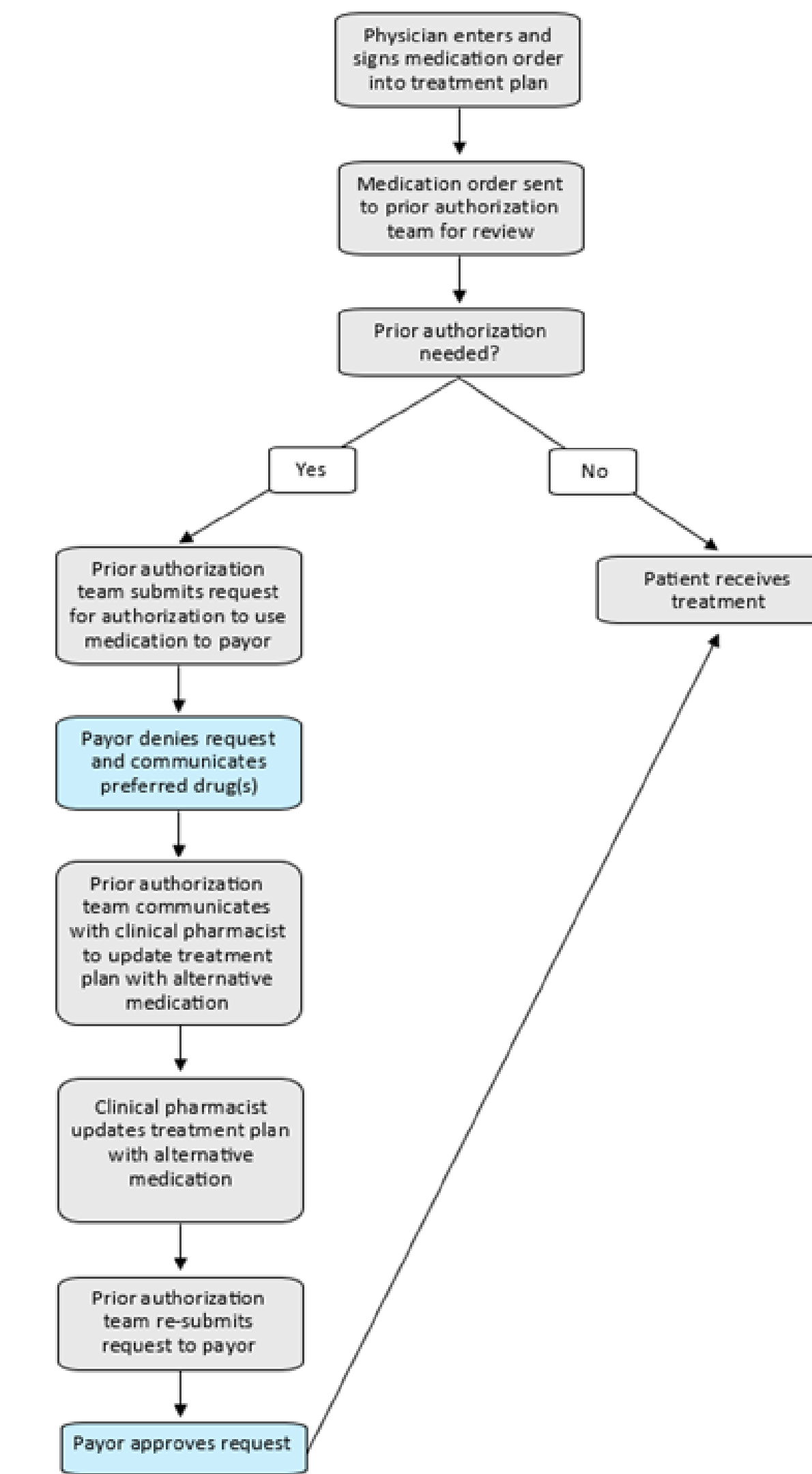
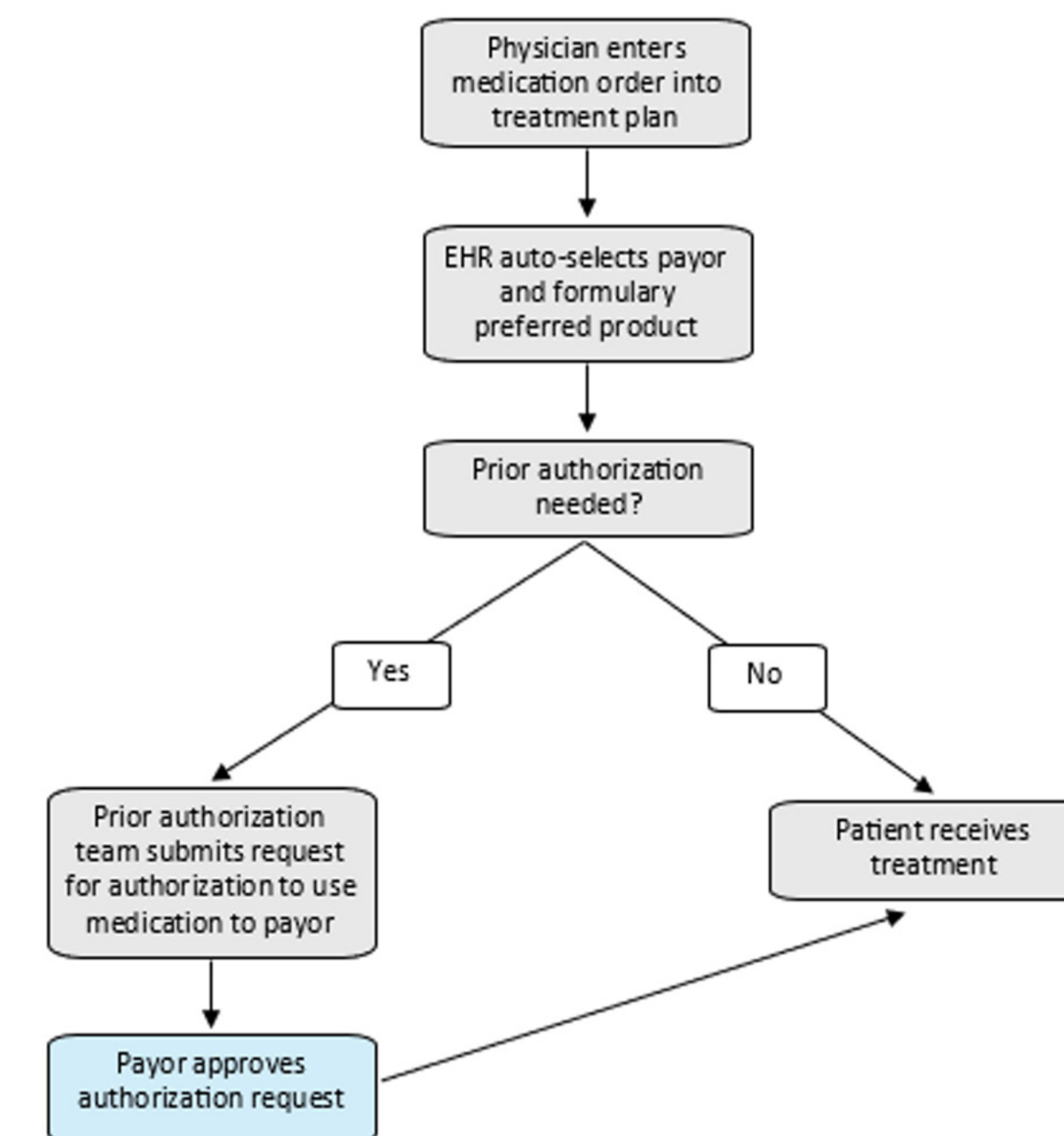


Figure 3: Post-implementation: Prior Authorization Workflow



Growth and Expansion Outcomes

- Increase in biosimilar utilization by 64% and decrease in reference product utilization by 30%
- Post-implementation biological/biosimilar product turnaround time (TAT) for payor approval improved from 9.2 days to 5.8 days (37% decrease)
- A post-implementation survey sent to affected staff about the biosimilar auto-selection component found:
 - 94% were satisfied with the program
 - 100% perceived positive benefit to their job
 - 80% of pharmacist respondents reported a perceived, positive impact on patient care
 - Quantified decrease in time on administrative burden estimated to be 825 total hours saved
- 75% decrease in biologic/biosimilar write offs from fiscal year 2022 to fiscal year 2023

Discussion / Conclusion

Significance of the Program

- Biosimilar workflow is now an official recommendation by Epic
- Highlights the importance of pharmacists in non-traditional health-system roles such as informatics
- Exemplifies how departments of pharmacy can address universal challenges and leverage technology to balance patient care with operational and financial efficiency

Conclusion

- Our automated product selection program has improved medication access, decreased administrative burden on pharmacy team members, and optimized the financial outcomes of our organization

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