Easing the pharmacy experience and stretching the diabetes dollar.

Alyson Blum, PharmD, CDE
Clinical Pharmacist in Obstetrics
Center for Maternal Fetal Medicine at Sacred Heart Medical Center
Clinical Professor Washington State University
Costco Staff Pharmacist

I have no conflicts of interest to disclose.

CONFLICT OF INTEREST DISCLOSURE

- I have no conflicts of interest to disclose.

OBJECTIVES

- Describe the driving forces for community pharmacists
- Identify ways providers can avoid prescription ambiguity and thus calls from the pharmacy
- Identify resources for patient financial help
Generic substitution:
- A generic must be "AB rated" with the brand name to be freely substituted by a pharmacist
- Lasix® and furosemide
- Prinivil® and lisinopril
- Blood glucose meters are not AB rated to each other
- Branded generics
  - Some products aren’t marketed by their chemical name but by different brand names
  - Birth control pills
  - Often very little price break
  - Can be freely substituted by the pharmacist

Generic substitution:
- Many hospital/office computer programs only list the generic or chemical name
  - This does not guarantee a generic product is available in the marketplace
  - Gives patients a false sense of hope about price and insurance coverage
- "Dispense as written" can stop all generic substitution interchanges
- "Loans" cannot be freely changed to "tojes"
PHARMACIST'S DRIVING FORCES

- Insurance companies
  - Audit pharmacies on a monthly basis
  - Looking for reasons not to pay for medications
  - Days supply
    - Major source of audit fines
    - Rounding becomes tricky
    - Often leads to breaking boxes of insulin pens

- Directions
  - "as directed" is not acceptable
  - Makes days supply impossible to know
  - Avoid any ambiguity in directions
    - Avoid pharmacist interpretation

- Refills
  - Must have 80% gone before a refill will be paid by insurance
  - May take 2 days to get product in
  - May fall on a weekend or holiday

- Company policy
  - All companies may be different
    - Costco's policy is that a box of insulin pens is considered a "dispensing unit"
    - Rite Aid policy is to break boxes of insulin pens based on insurance audits
  - Usually not published anywhere
    - Maybe an email 3 years ago
    - Always changing
    - Most difficult barrier for pharmacists
**PHARMACIST’S DRIVING FORCES**

- Information void
- No access to chart notes
- Pharmacist’s don’t know what medication educations was done
- No crystal ball

---

**“PUSHING” BACK**

*How to avoid a call from a pharmacy and ease the pharmacy experience*

---

**“PUSHING” BACK**

- General principals
  - Give pharmacists the info
  - Write notes to the pharmacy
  - Expand your directions
  - Be clear with “DAW” vs “Substitution permitted”
  - Don’t leave anything up to the pharmacist’s interpretation
  - Be understanding of the forces against the pharmacist
  - Calling a doctor’s office takes time out of everyone’s day
  - The average pharmacy is filling over 300 prescriptions a day
  - Pharmacists MUST follow the law and insurance companies
  - SOMETIMES company policies can be changed with community encouragement
"PUSHING" BACK

- Aspart and lispro
  - Cannot be freely substituted
  - Some patients need to have a certain insulin and for some it is not
  - However, there is a way around it

Kyla Ren
Aspart u100 insulin
Inject 10 units three times daily with meals.
*May substitute with lispro if insurance requires.

Alyson K Blum

---

"PUSHING" BACK

- Correction Scale/Insulin to Carb Ratio
  - Impossible for the pharmacist to calculate days supply
  - "All meals?" "Snacks?"
  - However, there is a way around it

Leia Skywalker
Lispro u100 insulin
Use with meals. ICR 1:10, correction scale as directed
*May use up to 100 units daily

Alyson K Blum

---

"PUSHING" BACK

- Pumps
  - Some pharmacists have never seen an insulin pump
  - Impossible for the pharmacist to calculate days supply
  - However, there is a way around it

Luke Skywalker
Aspart u100 insulin
Use in insulin pump.
*May use up to 100 units daily

Alyson K Blum
“PUSHING” BACK

- Problems with breaking boxes
- Company policy/insurance audits
- However, there is a way around it

Han Solo

Lispro kwikpen u100 insulin
Inject 10 units with meals and 3 units with snacks. Add additional insulin for larger carb meals.

*one box = 30 days supply

“PUSHING” BACK

- Titrations
- Impossible to calculate days supply
- Impossible to know how many units will take
- Guestimate high
- No edibles and new patient call with updated dose before selling

Jabba the Hut

Glargine u100 insulin
Inject 10 at bedtime. Increase by 3 units every three days until fasting blood glucose is at target.

*May use up to 30 units daily

“PUSHING” BACK

- Blood glucose Meter
- Not all needed to other meters
- Cannot be freely substituted by the pharmacist
- Insurance formulas are always changing
- Way around it

Bobba Fett

One Touch ultra meter with supplies
Test 4 times daily
Blood glucose Meter
• Re-write the prescription

Blood glucose meter. 100 test strips and 100 lancets
Test 4 times daily
Please fill with the brand covered by patient insurance.

Alyson K. Blum

Day’s Supply to be Filled
• A pharmacist can always decrease the quantity dispensed
  • Written for 90 days supply but insurance only covers 30 days
  • It will be changed to 30 days supply to accommodate the insurance
• A pharmacist cannot increase the quantity dispensed
  • Written for 30 days supply but insurance will cover 90 days
  • Pharmacist must call the doctor to change to a larger quantity

TIME TO SHARE
• Create small groups with the people around you
  • Introduce yourself
  • Share where you work
  • Share your biggest 3 frustrations with pharmacies
• Will come back together and share as a larger group
STRETCHING THE DIABETES DOLLAR

- Advise for patients
  - Shop for a pharmacy
  - Ask your doctor or pharmacy for savings cards
  - Look for coupons on the internet

CASH price matters

- The cash price is the amount the pharmacy is charging patient's insurance company
- If patient has a deductible
  - Go to an expensive pharmacy
  - The price patient pays is the same until the deductible is met
- Flat rate copays
  - Some pharmacies will always charge the copay even if it is more than the cash price
  - Some pharmacies have deals for 30 days or cash price.

SHOP FOR A PHARMACY
SHOP FOR A PHARMACY

- CASH price matters
  - If the patient is on Medicare
    - Go to a inexpensive pharmacy
  - It will take longer to “hit the donut hole”
    - Go to an expensive pharmacy when in the donut hole
    - Get out of the hole faster

SHOP FOR A PHARMACY

- Mail-out vs. Community Pharmacy
  - Some plans offer better deals if you use a mail-out pharmacy
  - Some plans require it
  - 90 day supply often leads to better deals

SAVINGS CARDS

- Often distributed by medication representatives
  - Pharms
  - Pharmacies

- Restrictions
  - Medicare patients
  - Medicaid patients
  - Any commercial insurance

- Limits
  - “one free box” will require a new prescription from the doctor
  - Cannot use, must cards, for refills
Savings Cards - Caution!

- RX Savings Cards are often sent in the mail
- Usually provide no discount
- Exceptions: pharmacies that have a large markup on generics
- Often sell your information
- Safer to stay with the pharmacy's member cards
  - Rite Aid
  - Costco
  - Walgreens

Internet Coupons

- Stick with the manufacturer’s website
  - Offer counseling and ongoing help
  - Can opt out of receiving information from the company
- Generic savings coupons have the same risks as the generic cards
  - Selling of info
  - Spam

Internet Coupon - Examples

- Google “Humalog U200 coupon”
  - Generic coupon sites
    - Example 1
    - Example 2
  - Humalog product site
    - Manufacturer coupon
- Google “Toujeo coupon”
  - Generic coupon sites
    - Example 1
    - Example 2
  - Toujeo product site
    - Manufacturer coupon
“STILL CAN'T AFFORD THE INSULIN”

- Samples
- Mail-in coupons
- Patient assistance programs through the manufacturers (restrictions apply)
  - American Diabetes Association
  - CorronaCare4Care (Novo Nordisk), Lilly Cares, or Sanofi Patient Connection
  - AARP
- Local programs (Tribal, Pharmacies with 340B pricing)
- Pick a different insurance in the following year
  - Lower deductibles
  - Higher premiums/lower co-pays

TIME TO SHARE

- Create small groups with the people around you (same or new)
  - Introduce yourself
  - Share where you work
  - Share your biggest 3 successes with “stretching the diabetes dollar”
- Will come back together and share as a larger group

QUESTIONS