



Careers for Pharmacists

IN MANAGED HEALTH CARE ORGANIZATIONS



Pharmacists in managed health care organizations are responsible for the delivery of health care and prescription drug benefits to nearly 300 million Americans. These organizations include health plans, pharmacy benefit management (PBM) companies, accountable care organizations (ACOs), and integrated delivery networks (IDNs). Pharmacists employed within these managed care organizations are responsible for a broad and diversified range of clinical, quality-oriented medication management services to ensure that patients within a population receive the appropriate medication therapy at the appropriate time.

Current estimates suggest that approximately 18,000 pharmacists are working for health plans and pharmacy benefit management companies in the United States. As the number of ACOs and IDNs increases, there will likely be more pharmacists and other health care professionals needed to provide medication management services to populations served by these entities.

What Do Managed Care Pharmacists Do?

Managed care pharmacists work with other health care professionals to provide a range of services that seek to ensure patients served by a health plan or similar organization receive appropriate medication therapies, conveniently and cost effectively. Pharmacists must possess both clinical skills and the ability to evaluate scientific evidence and apply these principles to patient care.

Pharmacists working in a managed care setting support a variety of services, including:

- Developing and implementing evidence-based clinical programs and medication therapy management (MTM) programs and services
- Instituting practices to ensure patient safety
- Communicating and collaborating with patients, prescribers and pharmacists
- Designing pharmacy benefits for health plans
- Managing quality and cost effectiveness

Managed care pharmacists are the people who help patients get the medication they need at a cost they can afford.

Developing and Implementing Evidence-Based Clinical Programs and MTM Programs

To enhance patient care, particularly for patients with chronic conditions whose quality of life depends on prescription medication therapies, managed care pharmacists design programs and provide services that:

- **Evaluate scientific evidence** to provide appropriate medications for a patient population. This review of evidence is conducted by a panel of pharmacists and physicians and other health care professionals on a pharmacy and therapeutics (P&T) committee.
- **Assess the effectiveness and safety** of new treatments for diseases compared to standards of care.
- **Use evidence-based clinical and research data to create disease management and MTM programs** that help patients manage their therapies so they can live healthier lives with their medical conditions. Pharmacists, physicians and nurses work collaboratively in the management of chronic and complex disease by monitoring regimens, assisting with cost saving strategies, and counseling patients to improve adherence.
- **Explore ways of managing patients** with chronic conditions who are dependent on comprehensive medication therapies.
- **Design and conduct outcomes-based research** to identify medication therapies that achieve the desired patient outcomes, and improve their quality-of-life.



Patient Safety Initiatives

Managed care pharmacists help ensure patient safety by researching and analyzing prescription claims data to identify actual and potential adverse drug reactions, communicating with prescribers and patients to help correct such problems, and educating prescribers about best practices associated with the use of prescription medications. These pharmacists design and administer:

- **Drug Utilization Review (DUR) programs:** This process, whether at the time of adjudication or as a retrospective report, can identify potential prescription-related problems such as: drug/drug interactions; duplication of drugs; known allergies; sub- or super-therapeutic dosing; or inappropriate therapy.
- **Fraud, Waste and, Abuse Programs:** Programs that review key drug classes and monitor for patterns of inappropriate use.
- **Prior Authorization (PA or “Prior Auth”) programs:** An approval process that encourages proper use of medications and discourages inappropriate prescribing of medications. The goal of all PA programs is to ensure that patients receive the appropriate medications that will produce the best clinical outcomes at the lowest possible cost.
- **Monitoring programs:** Some medications require lab-based monitoring or genomic testing (i.e. personalized medicine) for product selection or dosing. Monitoring programs ensure that medications are prescribed safely, used appropriately, and that patients receive the best possible outcome. Programs also involve monitoring patient regimens for drug interactions and medication adherence.
- **Quality Assurance (QA) programs:** Standard of care programs that enhance patient safety, improve the ways in which patients use medications, and ensure delivery of the highest quality and most current treatment options.

Communication and Collaboration with Patients, Prescribers and Pharmacists

Managed care pharmacists design and use communication protocols, such as those used within a call center or MTM program, to ensure that there is an exchange of necessary information between patients, their prescribers and their pharmacists. Communications are required to:

- **Notify physicians and other prescribers of drug safety alerts** and clinical updates to assist them in their evaluation of patients' therapies.
- **Help physicians and other prescribers choose medications** that will meet patients' needs and be eligible for coverage.
- **Provide patients with information** on their individual prescription history through personalized reports.
- **Educate patients on their disease state and on the medications they are taking or those being suggested by their physicians.**
Provide the point-of-care pharmacist with a more complete patient profile and guidance on coverage issues to aid him or her in the delivery of patient care.
- **Help patients manage their health care** and help prescribers address complex medication therapy questions.
- **Advise pharmacists in the community** setting with important information about their patients' pharmacy benefit through effective prescription drug claims messaging, smart claims processing logic, and timely written notification about initiatives that may impact the experience at the pharmacy counter.

Plan Benefit Design

Managed care pharmacists collaborate with other health care providers to design effective pharmacy benefit structures that will serve a specific population's needs. The pharmacist uses clinical knowledge and practical experience to address such design matters as:

- **How to structure a formulary** (the approved list of medications that a plan will cover) to encourage appropriate and cost-effective therapy. The level of patient cost-sharing for generic and preferred brand-name medications, as well as non-formulary medications, must also be established.
- **Whether a “participating” pharmacy network should be established;** if so, how expansive should the network of pharmacies (i.e., community, mail order and/or online) be to serve the population properly; and what quality assurance criteria should participating pharmacies be expected to meet.
- **What criteria and procedures for drug utilization should be established** to help maximize patient safety and best outcomes. This design must also ensure that patients receive the correct dosage of the correct drug, understand why they are being asked to take the drug, and adhere to their medication.
- **How to establish a specific plan design for specialty medications** (i.e., high-cost medications that may require special handling, administration or monitoring and are used to treat chronic, complex disease states). Plan designs may include limiting distribution, establishing specific specialty drug cost-shares, and implementing utilization management requirements.



Managing Quality and Cost Effectiveness of Medications

Managed care pharmacists help health plans and other payers (e.g., employers, HMOs, trust funds, and Medicaid) evaluate and improve their pharmacy benefit by:

- **Encouraging prescribers** to make cost-effective drug choices that are clinically appropriate.
- **Integrating quality improvement measurements** that use patient experience and data to improve health outcomes.
- **Introducing system interventions** that enhance the quality of patient care and reduce costs.
- **Using data to identify adherence and non-adherence** with prescribing guidelines, and, by creating measures for assessing physician performance, identify prescribing patterns and determine opportunities for improvement.
- **Ensuring a scientific evaluation of cost** for new medications by applying pharmacoeconomic principles.



Medication Distribution Process in the Managed Care Setting

The pharmacist in the managed care setting manages the medication distribution process through one of four approaches:

- **Through the managed care organization's pharmacies:** Some managed care organizations, such as IDNs or health plans, operate their own pharmacies. Pharmacists working in these settings may oversee dispensing functions and also provide MTM services to patients served by the pharmacy.
- **Through community pharmacies:** Managed care organizations such as PBMs contract with broad-based networks of participating pharmacies to fill the prescriptions of their members. Managed care pharmacists may be expected to manage the pharmacy network, perform drug utilization reviews, minimize fraud and abuse, and initiate quality assurance programs to ensure that the organization's members have local access to high quality, affordable pharmacy services.
- **Through mail order or online services:** Some managed care organizations own or contract with mail order and/or online pharmacies. Managed care pharmacists manage these services to promote less-costly options and ensure quality outcomes.
- **Through collaboration with physicians and other health care professionals:** Managed care organizations use technology and other resources to coordinate the medication distribution process to ensure patient safety. Pharmacists within managed care organizations review patients' medications to help safeguard against unintended side effects in new and existing prescriptions. They work with prescribers and other health care professionals to ensure that the medications prescribed are eligible for coverage and are affordable.

Who is AMCP?

AMCP is the professional association leading the way to help patients get the medications they need at a cost they can afford. AMCP's diverse membership of pharmacists, physicians, nurses, and professionals in life sciences and biopharmaceutical companies leverage their specialized expertise in clinical evidence and economics to optimize medication benefit design and population health management and help patients access cost-effective and safe medications and other therapies. AMCP members improve the lives of nearly 300 million Americans served by private and public health plans, pharmacy benefit management firms, and emerging care models.

AMCP advocates at the national and state level for developing and applying evidence-based medication use strategies that improve access to medication, enhance patient and population health outcomes, and safeguard the wise use of health care dollars.

We invite you to join us if you are a practicing pharmacist or someone who is involved in the practice of managed care pharmacy. Explore our website at www.amcp.org and learn more about who AMCP is and what we do.

AMCP Mission

To improve patient health by ensuring access to high quality, cost effective medications and other therapies.



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