

Bridget Graham MSN, RN-BC, CNL & Felicia Slabbekoorn RN

Identification of Need

Hospital readmissions due to not filling meds upon discharge can be very costly to the hospital. Additionally, patients are discharged home on medications that may not actually be covered by their insurance therefore, they are never filled. When patients are discharged, they are given prescriptions and it is assumed they will fill these prescriptions upon being discharged from the hospital. The truth of the matter is that sometimes these prescriptions are not filled and the patient can end up readmitted to the hospital due to not having their medications available.

Target Population

The older adult inpatient that is to be discharged home with new or continued prescription medications.

Goal

3 Lacks goal is to provide a convenient service to our patients that will decrease hospital readmissions and also be financially solvent.

Program Description

Meds to Go is a program that fills new prescriptions for patients prior to the patient being discharged home. The patient is given 340b pricing. 340b is a government program that allows Saint Mary's to purchase prescription medications at discounted prices when medical care is provided by a Saint Mary's physician and the medication is dispensed through a Saint Mary's pharmacy.

Program Description

A pharmacy tech meets with the staff RN each morning to determine what patients will be discharged home. The pharmacy tech then goes to those patients and introduces the Meds to Go program to them. They sign the patient on to the program and place a notification flier in the patient chart. At discharge the physician places the prescriptions into the chart and the nurse calls the pharmacy tech to come fill the prescriptions.

The pharmacy tech runs the patient's insurance, fills the scripts, and then receives payment from the patient via cash, check, or charge. Their mobile computer charts are equipped with all payment options. Coverage and pricing is known prior to the patient leaving the hospital. The nurse reviews each new medication with the patient at the time of discharge.

Outcomes

From 12/3/12 to current:

- ✓ Net Profit for the program ~ \$220,300
- ✓ Net profit for 3 Lacks ~ \$45,300
- ✓ Average percentage of patients using the program on 3 Lacks: 35%
- ✓ Average number of prescriptions filled each week on 3 Lacks: 34
- ✓ HF Readmission rates: 17.4 to 16.7

Lessons Learned

- ✓ We now know if a patient can't afford to fill a necessary medication and the physician has the ability to prescribe an equivalent medication at a cheaper price to the patient.
- ✓ Need to keep patient informed of time needed to fill prescriptions.
- ✓ Currently only able to service patients that are being discharged home Monday-Friday.

Conclusion

- ✓ Patients have experienced a more convenient way to receive their medications at time of discharge.
- ✓ Easily replicated in any inpatient setting
- ✓ Financially profitable