Community Pharmacist-Led Intervention to Identify Persons with Diabetes Not on Statin Therapy

Authors: Drake ES, Harris DK, Marciniak MW

Practice Site: UNC Eshelman School of Pharmacy and Walgreens Pharmacy – Asheville

Background: Current American College of Cardiology and American Heart Association (ACC/AHA) guidelines on the Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk in Adults and the American Diabetes Association Standards of Medical Care in Diabetes recommend patients 40 to 75 years of age with diabetes be initiated on a moderate- to high-intensity statin. The Statin Use in Persons with Diabetes (SUPD) measure attempts to close a critical gap in therapy. As this performance will be implemented as a display measure in 2017 and Star Rating in 2019, it is critical for pharmacies to implement strategies now to improve patient care and enhance measure performance.

Objective: The objective of this study is to demonstrate the effectiveness of a community pharmacist-led intervention to identify patients with diabetes not receiving statin therapy.

Methods: This prospective, cohort study was conducted within five participating pharmacies within one district of a chain community pharmacy for 90 days (December 2016 to March 2017). Consistent with the measure definition, eligible patients were aged 40-75 years, enrolled in Medicare Part D, had ≥2 fills of a diabetes medication, and without a statin medication on file. Following training on the SUPD measure and study procedures, pharmacists at intervention pharmacies who encountered an eligible patient attached a leaflet to the prescription bag. A standardized patient script was used for discussion of potential statin eligibility and the importance of statin therapy at prescription pick-up or via phone. With patient permission, the pharmacist contacted the prescriber using a standardized template to recommend statin initiation, if appropriate. Descriptive statistics were utilized to analyze study results. Due to delay in availability of data through the Electronic Quality Improvement Platform for Plans and Pharmacies (EQuIPP), current EQuIPP results are based on 60 days of intervention (Dec 2016 through Feb 2017).

Results: At study initiation, EQuIPP reported 103 patients were SUPD measure-eligible at all intervention pharmacies. At study conclusion, 29.1% (n=30) of SUPD measure-eligible patients were identified utilizing the workflow intervention. From those identified, 40% (n=12) gave verbal consent for the pharmacist to intervene with their primary care provider; 58.3% (n=7) statin prescriptions were received in return. Pharmacy A has increased their EQuIPP-based performance measure by 0.7%, Pharmacy B 3.8%, Pharmacy D 0.7%, Pharmacy E 2.6%, and Pharmacy C decreased by 1.6%.

Conclusion: Implementation of a community pharmacist-led identification process successfully identified SUPD measure-eligible patients. Community pharmacist-led intervention results in an increase in the number of statin prescriptions written for measure-eligible patients.