**Implementation of a Diabetes-focused Quality Measure Performance Program within a Specialty Pharmacy**

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**Background:** At a specialty pharmacy, there are clinical services provided to assess adherence, tolerability and effectiveness of specialty medications to ensure quality health care that meets accreditation standards. A specialty pharmacy affiliated with a health system has an opportunity to provide similar clinical services for patients prescribed non-specialty medications for better management of their comorbid chronic diseases.

**Objective:** To pilot a medication therapy management (MTM) program at a specialty pharmacy that targets patients who are either non-adherent or most susceptible to non-adherence to their diabetes-related medications.

**Methods:** This prospective cohort study was conducted at an integrated health-system outpatient specialty and home delivery pharmacy. The MTM process consisted of two steps: Pre-Assessment via electronic health record (EHR) reviews and Telephone Assessment Consultations. The inclusion criteria are age ≥18 years, received at least one non-insulin diabetic medication from January 1, 2021, to December 31, 2021 from UNC SSC Pharmacy, and has an active Medicare Part D insurance plan. Patients also had to have received a Diabetes PDC score of less than 80% (Diabetes Group) or a SUPD score of less than 80% (SUPD Group) according to the UNC SSC Pharmacy’s January 2022 ratings. Exclusion criteria are patients with type 1 diabetes, patients taking any form of insulin, or pregnant women with gestational diabetes. The primary endpoint is the number of drug therapy problems identified according to the PQA Medication Therapy Problem categories framework. Secondary endpoints will include the percentage of patients willing to participate in the MTM service and average length of MTM pre-assessment and assessment work-up. Descriptive statistics were used to analyze the demographic, primary and secondary endpoints.

**Results**: A total of 39 patients were identified to participate in the study. During the pre-assessment chart review, only 14 patients qualified for the MTM program - 9 patients within the Diabetes Group and 5 patients in the SUPD Group. In regards to the telephone assessment call, 4 out of 9 patients (44%) and 4 out of 5 patients (80%) participated for the Diabetes and SUPD Groups respectively. For the primary endpoint for both groups, there were two medication therapy problems (MTPs) and one intervention successfully implemented by either the patient or the provider.The most common MTP rationale for non-adherence was ‘patient prefers not to take’. All interventions were documented in the patient’s EHR.

**Conclusion:** The MTM program at UNC SSC Pharmacy successfully identified and addressed patients who could were non-adherent to diabetes related medications. Utilizing the shared electronic health record to document interventions allowed for seamless integration into the pharmacy’s workflow and ensured information transparency with healthcare providers.