**Title**: Implementation of a Specialty Pharmacy Accreditation Standards Audit Tool

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**Background**: The four specialty pharmacy accreditation agencies available in the United States include the Utilization Review Accreditation Commission (URAC), Accreditation Commission for Health Care (ACHC), The Center for Pharmacy Practice Accreditation (CPPA), and the Joint Commission. While the standards for each accrediting body may vary slightly, to the purpose of these agencies is to ensure specialty pharmacies are meeting specific standards in order to provide exceptional patient care services. In doing so, such specialty pharmacies gain access to certain specialty medications through contracts with insurance payors and/or drug manufacturers. Therigy is an electronic platform utilized by NH NHRMC specialty pharmacies to document all patient care activities in a centralized location. Accredited specialty pharmacies utilize platforms such as Therigy a means to confirm accreditation standards for patient care are met with every encounter. The newly accredited NH NHRMC specialty pharmacies currently lack standard processes for auditing of such patient care activities within Therigy to ensure that standards are being met for re-accreditation purposes. Developing and utilizing a Therigy audit tool would allow internal review to occur, identifying any gaps in protocols or workflows. Once identified, changes to workflows could be implemented ensuring accreditation standards are met at present as well as for future re-accreditation processes.

**Objective**: The primary objective of this study was to develop and utilize the Therigy audit tool as a means to evaluate to what degree NH NHRMC Specialty Pharmacy is documenting appropriately within Therigy in order to meet select accreditation standards. The secondary objective of this project was to identify standards that the specialty pharmacy is noncompliant with for further correction.

**Method**: This was an institutional review board-exempt retrospective study completed at the NH NHRMC specialty pharmacies. Descriptive statistics were utilized for all data. The review took place from November 2021 through March 2022. Monthly reports of all completed Therigy activities were collected and randomized to select 100 unique patient charts for review each month. Patient charts were reviewed to confirm whether or not the following information was appropriately documented: patient was informed of their co-pay responsibility and financial assistance, patient was given the option to speak to a pharmacist and tracking information for medications shipped to the patient from the pharmacy. Patients were included in the study if they had a patient care activity completed within Therigy during the study timeframe; patients were excluded from the study if they were not being clinically followed by the specialty pharmacy. After gaps in workflows were identified during the initial data analysis from November 2021- January 2022, mandatory specialty pharmacy employee education was implemented to review the importance of meeting accreditation standards as well as changes in workflows to unify the specialty pharmacies at each NH NHRMC location. Education was given in the form of a recorded presentation for employees to complete with an accompanied attestation of completion. Post-education data was then collected for February and March 2022.

**Results**: A total of 500 patient charts were reviewed, 339 charts reviewed pre-intervention and 161 charts reviewed post-intervention. Prior to any interventions, per Therigy documentation, 99% of patients were informed of co-pay responsibility and 48% of patients informed of financial assistance. Post-intervention where education was provided regarding how to calculate the co-pay responsibility and financial assistance informing patients of co-pay responsibility and financial assistance was 96% and 72% respectively. Pre-intervention, patients were offered an opportunity to speak to a pharmacist only 47% of the time. Post-intervention where this particular question was made mandatory within the Therigy documentation compliance with this standard increased to 99%. Due to inconsistency between workflows at the two specialty pharmacy locations around the shipping process, pre-intervention compliance for completion of a shipping activity and documentation of the tracking number were 59% and 88%. After workflows were aligned, compliance in these areas increased to 100% and 98%.

**Conclusion**: The development of a Specialty Pharmacy accreditation documentation standard audit tool helps to determine the degree to which the NH NHRMC Specialty Pharmacy locations are meeting select accreditation standards. Through auditing, once deficits in meeting accreditation standards are identified interventions can be made as a means to close these gaps ensuring URAC and ACHC standards are being met for re-accreditation purposes.