

Positive Quality Interventions (PQI's) Quality Standard

Positive Quality Interventions (PQI) will be performed by the medically integrated dispensing (MID) team. The Electronic Medical Record (EMR), pharmacy software system and other available resources will be utilized to coordinate all aspects of medication dispensing and to ensure patient safety. All PQI's will be documented in the patient's medical record to ensure that any pertinent information related to the dispensing of oral medication is continuously tracked and available to MID team.

The MID team will advocate on the patient's behalf regarding insurance benefit investigation, coverage determination (including out-of-pocket expenses), and referral to patient assistance programs and foundations.

All PQI's will be tracked for data collection purposes.

Positive Quality Interventions (PQI's):

- **Clinical Reference Tools** - NCODA will establish clinical reference tools for oral cancer drugs. An up-to-date library will be maintained on the NCODA website. Practices should consider utilizing these tools to ensure the dispensary team is offering accurate and consistent information to patients.

- **Patient Education** – NCODA standardized references - Patient education materials will be at 4-6th grade reading level. NCODA website archives education materials that have been reviewed by NCODA leadership and follow a standardized template.

- **Inventory Maintenance** – NCODA practices should maintain adequate inventory of oncolytics in order to provide “at-the-ready” dispenses, enabling timely initiation of therapy.

- **Pharmacist validation prior to dispense:**
 - indication/diagnosis
 - dosage
 - treatment schedule
 - drug interactions (including dietary, non-prescription medications and complimentary medicines)
 - allergies
 - appropriate lab values and companion diagnostics
 - duplicate therapy
 - most recent provider note will be reviewed to validate treatment plan.
 - Medications (first fill and refills) only dispensed after confirmation with physician



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- **Patient Follow Up Calls** – Calls to patients are an important element of patient care when initiating therapy with a new oral oncolytic. To ensure compliance and help management of adverse events, it is recommended that NCODA organizations make an outreach phone call to the patient within seven days after dispense in order to follow up on education, compliance, toxicity issues, and address questions. Subsequent calls to the patient are made based on individual patient requirements and an assessment of patient risk factors (education comprehension, performance status, tolerance to previous therapies etc.). All patient interactions will be documented in the EMR. The prescriber will be contacted directly for issues when identified by the MID team.
- **Safety** - The MID team of an NCODA organizations will verify that a toxicity evaluation and management (E/M) visit with a provider has been scheduled approximately two weeks after initiation of new oncolytic therapy.
 - New prescriptions for an oral oncolytic, either retained internally for processing or referred to an external pharmacy, will be reviewed by the MID pharmacist for potential drug interactions or toxicity risks.
 - If a patient does not pickup a prescription or accept delivery for an oncolytic, the pharmacist will notify the prescriber and verify therapy status.
- **Patient Assistance** – NCODA organizations will strive to ensure that patients have access to oral cancer medications independent of financial status. Goals are to always minimize patient out-of-pocket expenses/co- pays.
 - The MID team will utilize samples, vouchers and starter kits provided by pharmaceutical companies; pharmaceutical companies will be contacted directly to provide free drug when necessary; patient support foundations (PANF, CDF etc.) will be contacted for eligible patients.
 - The MID team will assist patients/caregivers with the completion of required applications/paperwork to expedite and ensure the timely initiation of therapy.
 - Prior authorizations (PA) will be completed by MID team for all prescriptions. If the prescription is referred to an outside pharmacy, the MID team will advise the patient when the PA has been completed.
 - Pre-emptive reauthorizations will be completed by MID team to ensure continuity of care and to minimize treatment gaps.
 - Documentation of all interventions made by the MID team on behalf of the patient will be kept current in the EMR and tracked for data collection purposes.



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P.O. Box 468 Cazenovia NY 13035
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