



Name: **Caitlyn Boltik, CPhT**

Practice: Riverside Pavilion Specialty Pharmacy

Title/Role: Prior Authorization and Patient Assistance Specialist

1) How did you hear about NCODA's Oncology Pharmacy Technician Association (OPTA)?

I learned about OPTA from my pharmacy director when I asked her about resources and opportunities to learn more about oncology medications and patient financial assistance.

2) How can OPTA or NCODA help you and your practice?

It is a tremendous resource to have a network of oncology pharmacy technicians and healthcare professionals that work in this field. So far, I have used the Oral Chemotherapy Education Sheets, and the Financial Assistance program search feature.

3) What type of pharmacy does your practice contain (i.e. Medically Integrated Pharmacy, Retail, etc.)?

Our pharmacy is an integrated specialty pharmacy within a health system. We provide services for both inpatient and outpatient customers. We are ACHC certified and applying for URAC certification later this year.

4) Explain your current role at your practice.

As a prior authorization specialist, I work with provider offices to get medications approved through insurance. Once approved, we will assist with any financial barriers by applying for foundation funding, if available, or applying for free drug through the manufacturer.

5) What do you enjoy most about your current position?

I enjoy helping patients directly. I previously worked in inpatient pharmacy with little to no patient interaction. I enjoy working with my patients to get assistance paying for their copays and being able to tell them that they were approved. I also love the problem-solving aspect of my job and learning new things.

6) What do your day-to-day responsibilities include?

My day-to-day responsibilities include:

- Completing prior authorizations and follow ups
- Applying for patient assistance and completing funding applications
- EMR documentation
- Shipping medications
- Calling patient for refills
- Assessing patients for any changes in care plans
- Troubleshooting insurance barriers for patients

7) Do you assume any specialized duties/responsibilities from time-to-time?

All the specialty technicians all do prior authorizations, copay assistance, follow ups, and documentation daily, but we rotate the following weekly:

- Refill report- Generate report of refills due for the week, call patients and document when each one gets filled into a shared report
- Daily audit- Document each refill over the past 24 hours and follow up with patients and schedule shipments as needed
- Shipping- Print labels and primarily responsible for packing orders and tracking deliveries

8) Do you have any “best-practices” that you use at your practice that you would like to share with other OPTA members?

We have a “tracker” in EPIC that we use for documentation. There is a place for progress notes during the prior authorization or patient assistance process. This allows for our team to cover each other if needed, as well as communicate with the doctor’s office staff, since they have ability to view this information as well.

The tracker also contains a table documenting prescription number, filled date and time, PA approval and expiration, foundation or copay card information, time PA took to complete, and when the medication was shipped or picked up by the patient. We continue to document the refills, new prescription numbers, and fill dates and times in this same table.

We use this data to keep track of our turnaround times and fill volumes, which is needed for accreditation and promoting our services.

9) Are there any areas where you / your pharmacy can improve (i.e. patient education, improved process workflow, etc.)?

We are working on eliminating white bagging within our health system and creating a workflow for determining whether a medication administered in the office is covered through the medical or pharmacy benefit. Our goal is to determine how best to obtain the medication without going through an outside pharmacy to ensure patient safety and medication integrity. Some insurance companies require medications be filled through their network specialty pharmacy, but new legislation in our state (VA) makes this practice no longer acceptable. We are working hard to fill these medications through the medical benefit or obtain overrides to fill at our internal specialty pharmacy. This is an ongoing discussion between our administrative team and medical offices to develop a workflow and system wide process that complies with this new legislation but does not delay patient care.

Legislation:

White Bagging/ Alternate Delivery of Prescriptions 18 VAC 110-20-275

10) What advise do you have for any technicians who are new to the oncology/hematology field?

I am also new to this field; I have only been in my current role for about 9 months. My pharmacist taught me that when doing oncology prior authorizations, it is helpful to pull up the package insert and find the labeled indications for the medication. This gives you a starting point to then search the chart for mutations, labs, or diagnoses that will be needed to complete the prior authorization.