



Guideline and Standard Development for Medically Integrated Dispensing Pharmacies for Oral Anticancer Medication: ASCO/NCODA Standards



PASSION FOR PATIENTS

Background

With the growth of medically integrated dispensing (MID) of oral anticancer medications, there has been a gap in proper metrics and standards that best reflect the challenges and benefits provided through this care model. The American Society of Clinical Oncology (ASCO) and NCODA developed The *Patient-Centered Standards for Medically Integrated Dispensing: ASCO/NCODA Standards* as a new methodology to support and evaluate medically integrated dispensaries. The ASCO/NCODA Standards look to ensure standardized processes for dispensing medications through metrics and guidance for quality improvement and documentation.

Methods

- An updated set of NCODA standards was recognized by ASCO as the foundation for the development of the *Patient-Centered Standards for Medically Integrated Dispensing*.
- An expert panel was created consisting of individuals with expertise in medical oncology, pharmacy, nursing, and health care administration, including a patient representative and an ASCO staff member with health research methodology expertise.
- Nine (9) patient-centered standards were developed, building off of the original four (4) NCODA Quality Standards
- Each standard addresses the key question: What patient-centered interventions improve the quality and safety of medically integrated dispensing of oral and other oncology drugs?

Discussion

The ASCO/NCODA standards include an evidence review of interventions to improve outcomes for patients who are being prescribed oral anticancer drugs and supportive care medications in an outpatient setting. The standards provide an updated systematic review of interventions, a table of suggested tools and resources, and a list of best practice foundational elements. The developed guidelines are supportive of ASCO’s Quality Oncology Practice Initiative (QOPI) and QOPI certification program. Specifically developed for the setting of medically integrated dispensing, they will look to expand the benefits of medically integrated cancer care within the US healthcare system. The standards provide a framework to ensure that dispensing processes are centered on patient safety and education while maximizing treatment outcomes. Cohesion with a multidisciplinary team is encouraged to create a comprehensive environment that addresses patient relationships and access, education, adherence and persistence, safety, refilling of prescriptions, documentation, benefits investigation, medication disposal, and patient satisfaction. The standards are reviewed for appropriateness on an annual basis and revised as new evidence becomes available.

Historical Perspective: NCODA Quality Standards

Patient Centered

Positive Quality Interventions

Foundational Elements

Health Information Technology

Components of the ASCO/NCODA Standards

Patient Relationships

Education

Adherence and Persistence

Safety

Refilling of Prescriptions

Documentation

Benefits Investigation

Medication Disposal

Patient Satisfaction

Conclusion

These ASCO/NCODA Standards demonstrate a new methodology for medically integrated dispensing which can be utilized to properly evaluate oncology practices and provide a more accurate measurement of quality and cost effectiveness. Implementation of the ASCO/NCODA Standards is the next step for medically integrated dispensing and warrants further research regarding operational improvements. These standards will continue to evolve as the landscape of oral anticancer medication dispensing progresses.

References: Dillmon MS, Kennedy EB, Anderson MK: Patient-centered standards for medically integrated dispensing: ASCO/NCODA standards. J Clin Oncol 38:633-644, 2020

ASCO/NCODA Quality Standards Committee

Melissa S. Dillmon

- Harbin Clinic - Rome, GA
- CO-CHAIR, Medical Oncologist

Erin B. Kennedy

- American Society of Clinical Oncology - Alexandria, VA

Mary Anderson

- Norton Cancer Institute - Louisville, KY
- Oral Oncolytic Nurse Navigator

Michael Brodersen

- Nebraska Cancer Specialists - Omaha, NE
- Clinical Pharmacist

Howard Cohen

- Yale New Haven Health, Smilow Cancer Hospital – New Haven, CT
- Administrator, Pharmacist

Steve D’Amato

- New England Cancer Specialists - Portland, ME
- Administrator, Pharmacist

Eileen Peng

- Regional Cancer Care Associates, Central Jersey Division - Greater New York City Area, NY
- Administrator, Pharmacist

Luis E. Racz

- Memorial Healthcare System/Florida International University - Pembroke Pines, FL
- Administrator, Medical Oncologist

Ellen Ronnen

- Regional Cancer Care Associates, Central Jersey Division - East Brunswick, NJ
- Medical Oncologist

Bill Wimbiscus

- Oncology Patient - Joliet, IL

Michael Reff

- NCODA, Inc. - Cazenovia, NY
- CO-CHAIR, Pharmacist

Patty Davis

- Oncology Hematology Associates - Springfield, MO
- Nurse Navigator

Gury Doshi

- Texas Oncology - Houston, TX
- Medical Oncologist

Stuart Genschaw

- Cancer & Hematology Centers of Western Michigan - Grand Rapids, MI
- Administrator

Issam Makhoul

- University of Arkansas for Medical Sciences - Little Rock, AK
- Medical Oncologist

Wayne Ormsby

- Utah Cancer Specialists - Salt Lake City, UT
- Medical Oncologist

Rajiv Panikkar

- Geisinger Cancer Institute – Danville, PA
- Institute Chair