Proactive Site of Care Evaluation for IVIG Infusion: Transition in Cancer Care Patients to Home Infusion
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BACKGROUND
- Cancer care often involves intravenous Immunoglobulin (IVIG) infusion therapy, a crucial supportive treatment for multiple myeloma, lymphoma, and chronic lymphocytic leukemia.1
- IVIG therapy aims to alleviate the adverse effects of cancer treatments and enhance resistance to infections by increasing the antibody titer and antigen-antibody reaction potential.1
- IVIG infusion, traditionally provided in outpatient infusion centers, faces challenges due to its longer infusion time (>3 hours) and thus competes with chemotherapy treatments for chair time and appointment availability.
- A way to combat this challenge is through the transition of IVIG therapies to the health system’s Home Infusion service line, but this process has been historically infrequent and reactive in nature driven by site of care denial.
- This reactive approach results in delays in therapy, suboptimal patient experience, and inefficiencies as it relates to resource allocation.

OBJECTIVES
Primary Objective
- Evaluate the proactive site of care assessment on outpatient chair availability.

Secondary Objectives
- Assess successful transitions of IVIG therapies in cancer care patients to Home Infusion.
- Establish a standard process for site of care evaluation.
- Enhance patient experience and control over treatment location.
- Evaluate reimbursement rates and patient copays for optimal resource utilization.

DEFINITIONS & REFERENCES
- Reimbursement Team: Internal Cancer Care Team at TUKHS comprised of pharmacists who review all high dollar medications to ensure that every drug meets indication and will be approved by payers.
- High-Dollar Grouping: IF identifier on pre-determined orders to route orders to reimbursement team’s EPIC status for review.
- Site of Care: Health care location where services are provided.
- Chair Availability: The measure of the number of infusion or treatment chairs accessible and ready for patient use within a healthcare facility at any given time.
- First Dose Observation: The initial monitoring period immediately following the administration of the first dose of a new medication or therapy aimed at assessing the patient’s immediate response and identifying any potential adverse reactions.
- Performance Status: Numerical scoring tool used to assess patient acute level of severity of illness.
- Targeted Clinic Sites: Cancer Care sites at TUKHS selected for the pilot project, which includes the Overland Park and Medical Pavilion clinic locations.

REFERENCES

METHODS
Design:
- Prospective, single-center, pre-post design to assess the impact of proactive site of care evaluation for IVIG infusion in cancer care patients.

Intervention:
- Implementation of a high-dollar grouper for IVIG referrals, coupled with a comprehensive site of care evaluation and Home Infusion eligibility process led by the Cancer Care Pharmacy Reimbursement Team.

Home Infusion Eligibility Criteria:
- Payor; Patient location; History of allergies; Performance Status; Social screen; Signs of reaction during First-Dose Observation

Implementation Process:

PILOT PHASES
Phase 1
- Develop a standardized protocol for proactive site of care evaluation for IVIG infusion in cancer care patients by the Cancer Care Pharmacy Reimbursement Team.
- Identify key criteria and indicators for selecting suitable candidates for Home Infusion.

Phase 2
- Implement the proactive site of care evaluation process within the targeted cancer care clinic sites.

Phase 3
- Evaluate data collection and summarize findings.

DATA COLLECTION
- Proactive Data Collection:
  - Patient identifiers
  - Provider information
  - IVIG order details
  - Home Infusion screening outcomes
  - Home Infusion referral details

- Retrospective Data Collection:
  - Chair hours saved
  - Reimbursement comparisons
  - Patient costs
  - Turnaround time comparisons (time between order placed to therapy initiation)

OUTCOME MEASURES
- Changes in outpatient infusion chair availability
- Successful transitions to Home Infusion
- Improvements in wait times and patient control over treatment location
- Analysis of reimbursement rates and patient copays

BASLINE DATA
- Cancer Care:
  - 1,151 patients had IVIG beacon plans placed since 1/1/2020
  - 2/3 of those plans placed were from the targeted cancer care clinics
  - <22% were aged under 55 years old (for payer considerations)

- Home Infusion:
  - 154 unique IVIG patients (140 from Specialty and 5 from Cancer Care) serviced within Home Infusion since 1/1/2020
  - 3 currently active Cancer Care IVIG patients (site of care denial)

PILOT CONSIDERATIONS & DISCUSSION
- The pilot design incorporates considerations for potential challenges such as Home Infusion capacity issues, software differences (EPIC vs CareTend), and patient and clinic staff awareness of the Home Infusion Service Line.
- The pilot process and outcome measures will guide future implementation strategies for broader application as health care continues to push toward the lower site of care.

CONTACT INFORMATION
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