

National Results of Utilizing the NCODA Cost Avoidance and Waste Tracker Tool: An Online Method of Identifying and Preventing Drug Waste

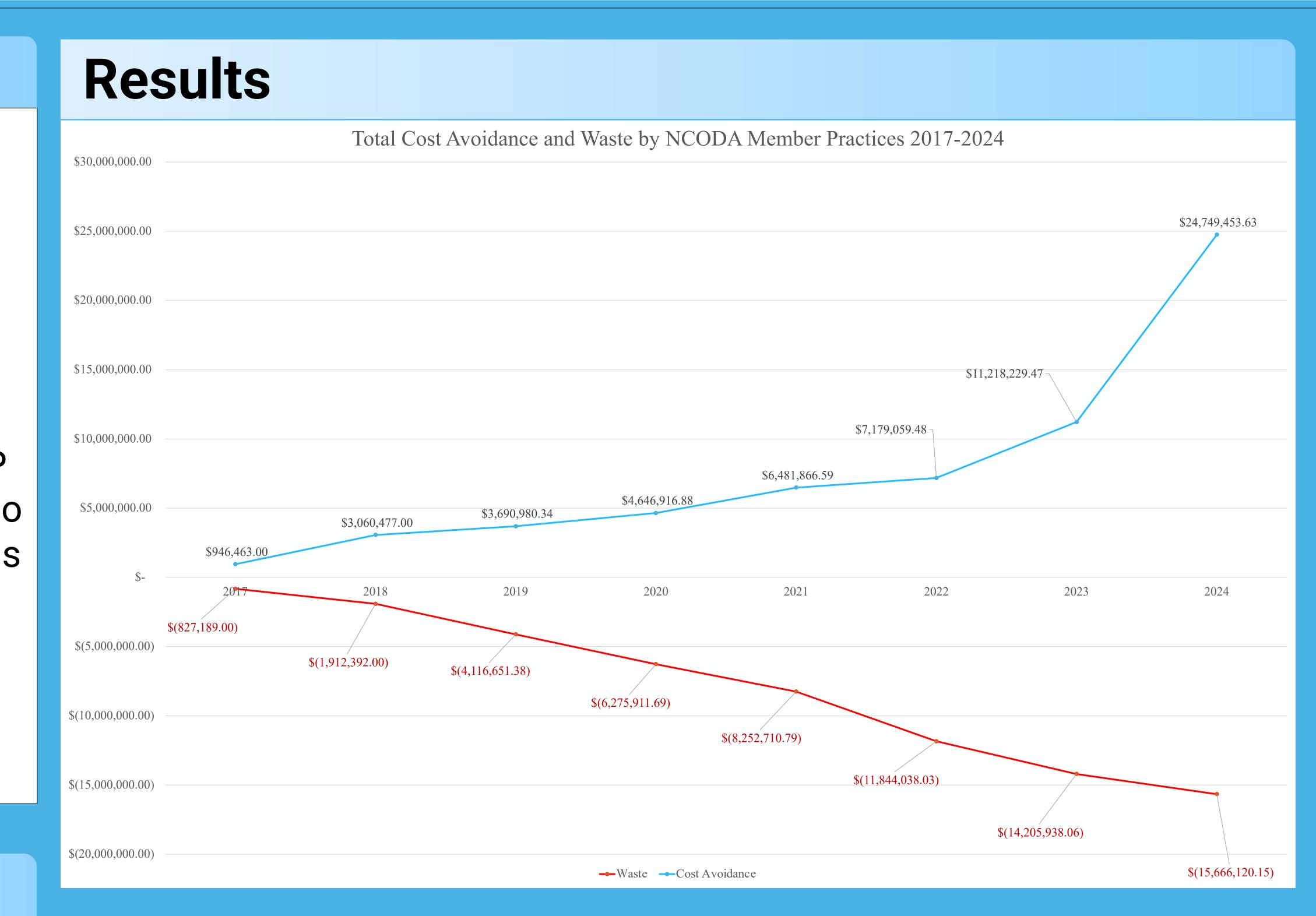
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Background

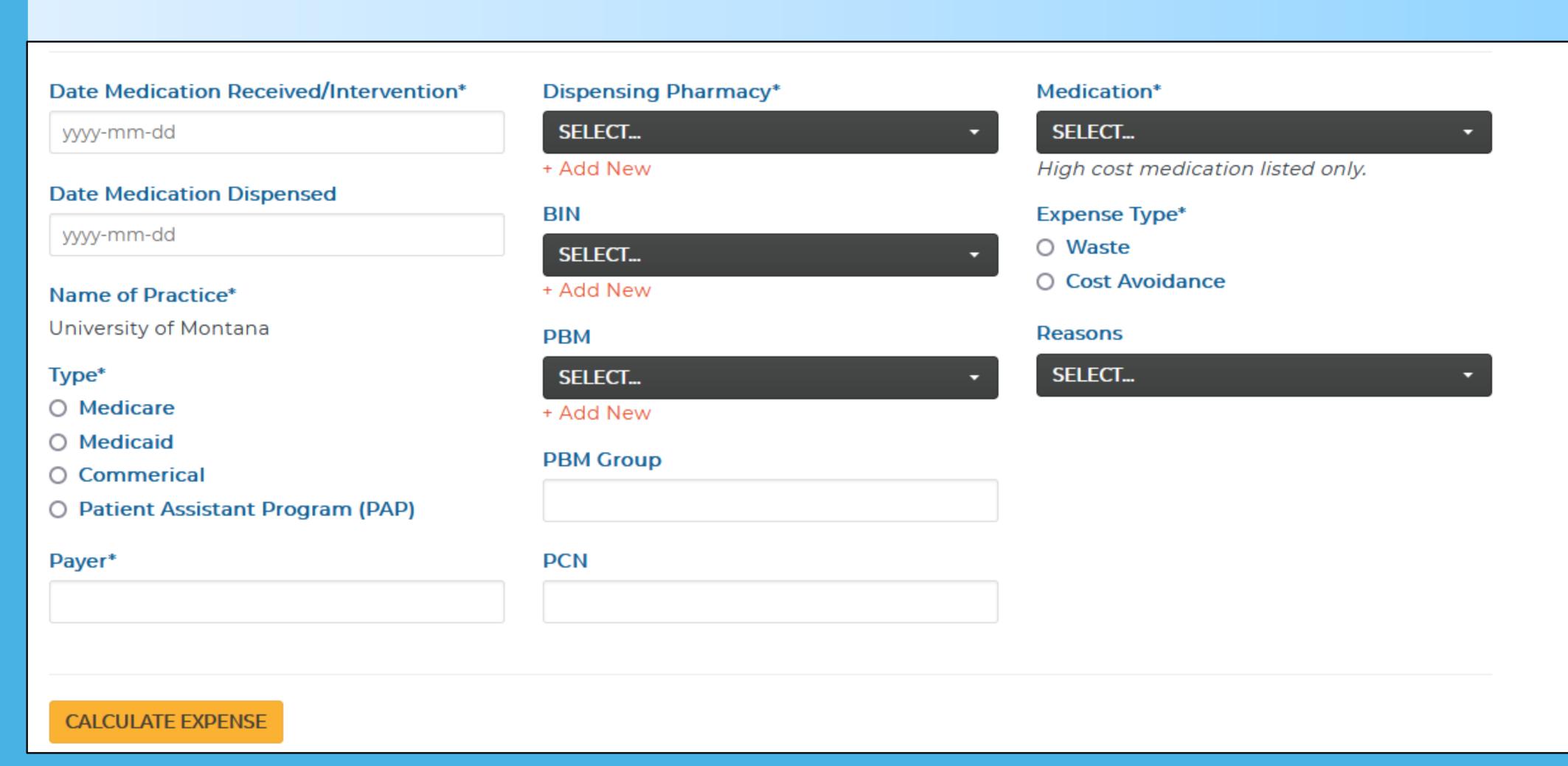
- Quality care within oral oncology dispensing through medically integrated pharmacies (MIP) create proactive interventions which can be significantly impactful but often go unmeasured. MIPs strive to function within the Oncology Care Model by improving quality of care and reducing costs through cost avoidance interventions.
- NCODA sought to measure cost avoidance within an MIP versus the waste produced when prescriptions are sent to outside pharmacies. NCODA created a web-tool known as the Cost Avoidance/Waste Tracker (CAWT) that was made available to the NCODA membership to assist in quantifying this form of positive intervention, improved patient convenience, and satisfaction.

Methods

- A cost analysis of medication costs from voluntary data entries provided by NCODA member practices across the United States from 2017-2024 was performed. Monetary outcomes were calculated using the NCODA CAWT tool which utilizes average wholesale price (AWP).
- A total of 3,053 eligible data entries were included for analysis. Cost avoidance was defined as interventions that are made, before a drug is dispensed to the patient, that preclude an unnecessary prescription from being filled and dispensed or any event in which a medication would have not been used by a patient had an intervention not occurred.
- Waste was defined as drugs that have been processed or prescriptions filled and then for any reason, the drug is not used by the patient.



Cost Avoidance and Waste Tracker Tool



Discussion

- Total cost avoidance amounted to nearly \$24.7 million in addition to \$15.6 million in total reported waste. These numbers are a significant increase from the data in 2022.
- 60 different NCODA member practices across the United States submitted CAWT data.
- The approximated average amount of cost avoidance was \$12,150 per cost avoidance event recorded and \$14,920 per event recorded for waste.
- As more cost avoidance interventions have occurred, we see the impact on the reduction in waste generated.

Conclusion

The results display a significant impact that MIPs have in cost avoidance interventions vs. the waste produced from other forms of oncology distribution and warrants further study to uncover the financial influence and positive change that MIPs can bring to the oncology marketplace.

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