

SAINT THOMAS HOSPITAL

DISPENSARY

of

HOPE

A MEDICATION ASSISTANCE PROGRAM



**Saint Thomas
Hospital**

Recognizing the Need

Tennessee's state Medicaid program (TennCare) went through dramatic cuts in 2005 resulting in 200,000 individuals being cut from the program. These individuals flooded the healthcare market unable to afford prescription drugs causing an increase in requests for medication assistance through the hospital. Prior to these cuts, Saint Thomas Hospital had always helped its patients who were uninsured or underinsured with their prescription needs (through one of its core values "Service to the Poor"). This was done through the Daughter's of Charity Program with prescription drugs filled through Plaza Pharmacy (Saint Thomas Hospital's outpatient pharmacy). Patients had to be seen by a Saint Thomas Health Services Physician to qualify.

In Fiscal Year 2005 Saint Thomas Hospital gave out \$138,128 in medication assistance. With the TennCare cuts that began in the summer of 2005, increases were seen in requests for medication assistance (through the hospital's admissions) not only for assistance upon discharge but ongoing assistance. Projected medication assistance for Fiscal Year 2006 was projected to reach \$169,867 (with an average of 45 patients per month) based on the first four months of data as more patients came to Saint Thomas Hospital looking for assistance. Saint Thomas Hospital was looking for a creative way to help these previous and newly uninsured patients that supported its faith-based mission and was cost effective. We looked to an innovative program called the Dispensary of Hope (DOH).

The Dispensary of Hope serves as a bridge to help people of need who need medications in either a short term or long term manner. It may be a patient who is unemployed and needs assistance until they find a new job or the patient who is having trouble accessing help within the community and needs short term assistance until they can get into another assistance program. It may be a patient that has enrolled in a drug sponsored patient assistance program but is waiting on the drug to arrive or just simply a patient who needs long term assistance because they do not qualify for local assistance programs.

BRIEF HISTORY OF DOH



Dr. Bruce Wolf

The Dispensary of Hope was originally created in 2003 by Dr. Bruce Wolf, M.D., an Allergist at Saint Thomas Hospital who also practices in Murfreesboro, Tenn. Dr. Wolf saw the number and monetary value of medication samples that his solo practice received and went unused or expired. He saw an opportunity to help patients in need by creating a network to collect and distribute the unused sample medications from physician practices in the region to the medically underserved. In 2004, The Dispensary of Hope became a 501C3 subsidiary of Middle Tennessee Medical Center (owned by Saint Thomas Health Services and part of Ascension Health) and opened its own location in Murfreesboro, Tennessee. It is a stand-alone indigent pharmacy that serves the uninsured and underinsured population through the distribution of sample drugs. Within a matter of a couple of years, they had collected and housed more samples than they could distribute so they were looking for partners to share in this concept.

Program Objectives and Restrictions

The team laid out the framework for how the program would work, what the objectives and restrictions were, and how a patient would access and use the program.

1. The purpose of the Dispensary of Hope Program is to provide medication assistance to the medically underserved while being a steward of resources.
2. The program should be a bridging program when possible to help patient's access additional resources.
3. The focus of medication assistance is on major disease states (e.g., diabetes, hypertension, asthma, etc.) that help reduce hospitalization and emergency room visits.
4. Short term needs are handled through available sample drugs or formulary items to be covered until patient is bridged to another program (Bridges to Care, TennCare, Medicare Part D, local community resources, etc.).
5. Long term needs to focus on Patient Assistance Program (PAP) with drug companies, supplemented with formulary samples and SafetyNet items.
6. Medication assistance must adhere to the drug formulary or available samples. Only a few name brand drugs will be on formulary (for discharge patients only) and only as a bridging point until a patient assistance program is utilized.
7. Samples are on a first come first serve basis and subject to availability. If there are no samples in stock then a formulary drug (e.g., generic drug in same drug class) or another available sample drug must be utilized. Samples in some cases are meant to bridge a patient until they can get on a patient assistance program. If the patient is denied or is not eligible, sample drugs may be used as a continuous solution for the patient.
8. If a patient received a sample drug one month, but it is not available the next month, the doctor will be required to change the drug to a formulary drug if their office does not have the sample drug.
9. No controlled substances will be covered under the program except for one time social service discharges for post-operative pain or cancer pain.
10. No OTC drugs will be covered unless samples are available.
11. No allergy medications will be covered unless samples are available.
12. No benzodiazepines or sedative hypnotics will be covered.
13. A listing of sample drugs available will be maintained on the Internet for reference.
14. There will be no charge to the patient for sample drugs. Drugs on the SafetyNet list will carry a \$3 dispensing fee charge. (There are quantity restrictions of some medications.)
15. If resources are available to the patient, the patient has a responsibility to use those resources. Refusal to use those available resources may exclude the patient from participation from the program or require the patient to cost share.
16. If a patient is eligible for Medicare Part D, they must utilize that option. A 30 day supply to bridge the patient may be used during the enrollment period. If a patient chooses not to participate in Medicare Part D, then they will be ineligible for the charity program.
17. Patients with insurance are not eligible for the program.
18. Patients with TennCare (Tennessee Medicaid) or CoverRX are eligible as a supplement to the program.
19. The patient or designee must pick up refills. Prescriptions will not be mailed unless patient pays for the mailing.
20. Patient must inform social worker if patient assistance drugs are received in the mail or by the physician's office.
21. The Dispensary of Hope – Saint Thomas Program is a resource to assist patients and not an entitlement to patients. We do not have the resources to cover every medication for every patient.

Staffing Requirements

In June 2006 the program officially opened to patients in need that qualify within the community. These include patients from clinics, physician offices, and hospital discharge patients.

Plaza Pharmacy filled approximately 280 prescriptions daily Monday through Friday (prior to Dispensary of Hope), with the following staffing:

- 1 Pharmacy Manager
- 3 Pharmacists
- 4 Pharmacy technicians

Under the retail pharmacy model, existing staff was able to absorb the additional prescription volume during the program initiation. Program volume was anticipated to approximate 50 prescriptions added to each day. By the end of the first 5 months, the program was averaging around 100 prescriptions daily with an average of 14 new patients per day. A pharmacy technician was added in June 2006 to handle the inventory component of the program. Initially, pharmacists handled the application process and initial interview with the patient but this significantly impacted the turn-around times of prescription order entry with all patients of the retail pharmacy. A grant through the State of Tennessee provided a social worker in November 2006 and another technician in January 2007. The grant ended in November 2007 and those two positions are now paid for by the Hospital.

Value of a Social Worker as part of the Pharmacy Team

The addition of a social worker has been a vital part of the program. A social worker is specialized to deal with the socioeconomic complexities of each patient and serves as the access point for patients wishing to enter the program. The social worker works closely with the pharmacy staff and is an employee of the pharmacy department. They are not pulled to cover for inpatient issues and discharges through the outcomes management department. The responsibilities of the social worker are listed below.

1. The program social worker will be the filtering agent for the program.
2. Interviews/processes all new Dispensary of Hope (DOH) patients to include application completion, approval of DOH participation, patient understanding of program requirements and their responsibilities.
3. Validates/documents proof of income during the referral process using the income criteria table.
4. Coordinates the 6 month renewal process.
5. Screens patients for active insurance related to TennCare and Medicare Part D.
6. Assesses patient and determines short term/long term needs of the patient.
7. Determines alternative resources (e.g., Bridges to Care, TennCare, CoverRx, Medicare Part D, County Programs, etc). For low-income seniors, a federal subsidy is available for Medicare Part D premiums.
8. Maintains and oversees all patient files, database and creates/updates patient notes in the pharmacy computer system.
9. Consults with referral clinics and physician offices to address issues with the Dispensary of Hope process.
10. Helps patients navigate the patient assistance process. A one-month supply of a drug on the formulary or sample drug (based on availability) may be dispensed by the outpatient pharmacy until the alternative resource can go into effect.
11. If there is no sample drug available for a non-formulary drug, the doctor's office will be contacted to utilize their sample drug supply or have the drug changed to a SafetyNet drug. (a pharmacist may be consulted for alternative therapies).
12. If no alternative resource exists and the patient is deemed to require long-term assistance, the social worker will begin the drug manufacturer patient assistance process for the patient for eligible drugs.

Dispensary of Hope – Saint Thomas

(Administered by Plaza Pharmacy)

4230 Harding Road Suite A214, Nashville, TN 37205

Phone # 615-222-6216

Fax # 615-222-6189 <http://www.stthomas.org/doh.php>

Patient Application

The following information is required for participation in the Dispensary of Hope Medication Assistance program.

First Name		Middle	Last	Social Security #		
Mailing Address			City	State	Zip	County
Home Phone	Work/Cell Phone	Contact Name/Phone #	Date of Birth	Age	Male/Female	
Drug Allergies						

Are you a US citizen Yes ___ No ___ **IF FEMALE: ARE YOU PREGNANT YES ___ NO ___**
Did you File a Tax Return Last Year? Yes ___ No ___ **ARE YOU NURSING YES ___ NO ___**
Are you a Veteran Yes ___ No ___
Do you receive Food Stamps Yes ___ No ___
Do you have Medicare Yes ___ No ___ (if yes, please list Medicare Number) _____
Has the social security department classified you as disabled Yes ___ No ___
Do you have a prescription Drug Card Yes ___ No ___ (please list) _____
What is your housing status? Rent ___ Own ___ Living with someone else ___ Other _____
Family Status Single ___ Married ___ Widowed ___ Divorced ___ Other: _____
Work status Employed ___ Retired ___ Disabled ___ Unemployed ___ **HOW MANY HOURS/WEEK DO YOU WORK** _____
Do you need assistance from Dispensary of Hope beyond 30 days Yes ___ No ___ (if answered yes, proof of income must be sent)

How much before taxes do you make per WEEK _____ OR per MONTH _____ OR per YEAR _____
(include wages, social security, pension, alimony, child support, unemployment, etc)

How many people are in the household? _____

How much before taxes do other people in the household (including spouse) make
per WEEK _____ OR per MONTH _____ OR per YEAR _____

Name of Physician (s)	MD phone number	MD Fax # (if known)
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Thank you for your information. It will be held securely and will not be shared with anyone who is not involved with the medication assistance programs

YOU WILL BE ASKED TO BRING or SEND PROOF OF INCOME WITHIN TWO WEEKS OF APPLICATION, ANY TAX RETURNS FOR THE PAST YEAR AND A COPY OF ANY INSURANCE CARDS (BOTH MEDICAL AND DRUG CARDS) AT THE TIME OF YOUR APPOINTMENT OR WITHIN THE FIRST 30 DAYS. WE MUST HAVE PROOF OF INCOME TO PROVIDE ASSISTANCE BEYOND THE INITIAL 30 DAYS. (Proof of income and application must be completed every 6 months)

The information above that I have provided is correct and complete. I understand that if I provide falsified information, that enrollment in the Dispensary of Hope program will be revoked.

Rev 9/26/06

Signature of patient _____ Date _____

Office use only

Date of Application _____
Initials _____ Total Household Income _____ Number in Household _____
% assistance provided _____ (Source of Referral) SS MD CAC UNHS OTHER _____

Notes:

FIGURE I

The Patient Process

To qualify for the DOH program, the patient must meet the following criteria:

1. Prove Financial Need: Must show evidence that he/she has income at or below 200% of the Federal Poverty Guidelines. [SEE FIGURE 3]
2. Must not be covered by Commercial Insurance.
3. Must not be eligible for Medicare Part D or must be in the Part D coverage gap (may supplement with samples, but not SafetyNet inventory).
4. Patients on TennCare (Tennessee Medicaid) may access the program to supplement their prescription restrictions two name brand and three generic medications per month.

**Dispensary of Hope-- Saint Thomas (administered by Plaza Pharmacy)
2008 Income Criteria Table**

FAMILY SIZE	BASE + 100% Gross annual income	FAMILY SIZE	BASE + 100% Gross weekly income
1	\$20,800	1	\$400
2	\$28,000	2	\$538
3	\$35,200	3	\$677
4	\$42,400	4	\$815
5	\$49,600	5	\$954
6	\$56,800	6	\$1,092
7	\$64,000	7	\$1,231
8	\$71,200	8	\$1,369
9	\$78,400	9	\$1,508
10	\$85,600	10	\$1,646

** Gross HOUSEHOLD Income is BEFORE taxes and deductions

Patients have no charge on sample drugs

Patients pay \$3.00 per prescription for drugs on the Safety Net Drug List

FIGURE 3



Saint Thomas Hospital

A Member of Saint Thomas Health Services

Dispensary of Hope-Saint Thomas (Administered by Plaza Pharmacy)

4230 Harding Road Suite A214 Nashville, TN. 37205

Phone # 615-222-6216/Option 3 Fax# 615-222-6189

Hours of Operation: **Monday through Friday 9am- 4pm**

Patient Responsibilities

- The Dispensary of Hope- St. Thomas is designed to assist uninsured patients with their medication needs through the use of sample drugs either on a short-term or long-term basis depending on the patient's situation and other resources available to the patient. This includes applying for Patient Assistance Programs to get the medications from the drug manufacturers.
- Dispensary of Hope recipients must complete an application and provide proof of income for the entire household every 6 months.
- To receive medications beyond 30 days, patients must provide proof of income (such as a current tax return, letter from employer, current pay stubs, food stamp letter, or statement from Social Security). **MEDICATIONS WILL NOT BE DISPENSED BEYOND THE INITIAL 30 DAY DAYS IF PROOF OF INCOME IS NOT PROVIDED.**
- Drugs covered under the program must be on the Sample Drug Inventory List or the Safety Net Drug Inventory. Drugs that are not on one of these lists are not covered but may be purchased at a discounted price.
- Sample drugs are available on a first come, first serve basis, depending upon quantities available. Please make sure your doctor prescribes drugs that are on the sample drug inventory list and the safety net drug formulary that can be found by accessing Inventory under our website at <http://www.stthomas.org> (Click on Hospital Services).
- If a sample drug is not available upon the initial fill or refill, your doctor will be contacted to see if they will authorize the change of the drug to a covered drug or you may pay for the drug at a discounted price.
- Please call in your prescription refills at least 2 days early to allow time to contact your doctor in the event the drug you are on is not available as samples. Refills should be called in to the pharmacy refill line at 222-4527.
- **PATIENTS WHO ARE ELIGIBLE FOR MEDICARE PART D MUST SIGN UP FOR MEDICARE PART D.** The program only covers drugs during the transition period.
- **CONTROLLED SUBSTANCES ARE NOT COVERED UNDER THIS PROGRAM.**
- Over the counter items such as Tylenol, aspirin, cough, cold, or allergy medications are not covered under the program unless samples are available.
- You or your doctor may access the Dispensary of Hope website to download application forms and other information about the program at www.stthomas.org (Click on Hospital Services).
- **RETURNED CHECKS, ABUSIVE LANGUAGE, AND INAPPROPRIATE BEHAVIORS ARE GROUNDS FOR DISMISSAL FROM THE DISPENSARY OF HOPE PROGRAM AND FROM HOSPITAL GROUNDS.**

Our Accomplishments

To date (as of July 31, 2008), the Dispensary of Hope – Saint Thomas has gathered more than \$4.2 million dollars worth of samples and dispensed more than \$1.7 million dollars worth of sample drugs to patients in need (representing over 16,000 prescriptions). More than \$89,000 worth of safety net drugs has been dispensed (representing over 23,700 prescriptions). More than \$1.5 million worth of sample drugs has been given to other clinics or mission trips. This program allowed Saint Thomas to expand help from an average of 45 patients per month to over 600 patients per month in a more cost effective manner. Before Dispensary of Hope, the average 45 patients per month were expected to result in \$169,867 in donated services. Currently, the average 600 patients per month are expected to result in \$47,004 in donated services.

Ascension health's focus is to provide 'health care that leaves no one behind.' This program is representative of that system-wide goal as we were able to increase the number of patients served under the Dispensary of Hope program while being economically efficient.

Program information, applications, income criteria and inventory can be found at www.stthomas.org under the tab hospital services. Look for Dispensary of Hope.



**Saint Thomas Hospital receives 'Spirit of Planetree'
Award Honoring Dispensary of Hope**

Expanding the DOH The Next Steps

Each Dispensary of Hope dispensing site (Nashville, Murfreesboro, and Knoxville) is responsible for bringing samples into each of their respective locations, inventorying them, and dispensing them to patients. While each of the dispensing locations shared needed samples, there were inefficiencies in this process as supply and demand for samples were different for each geographical region. One dispensing site may be using one drug more than the other sites with drug expiring on the shelf. In the fall of 2007, the Dispensary of Hope expanded into a true network with a centralized distribution center created to help expand the program state-wide.

The distribution center (a 10,000 square foot facility) has the ability to accept and distribute donated medications in small batches from physicians and full pallets from pharmaceutical manufacturers. Samples are donated directly to the distribution center, processed and placed into an online inventory that each dispensing site can order from on a weekly basis. This consolidates the collection/inventory process removing workload from the individual dispensing sites. It also helps to rotate stock of sample drugs that can be used more efficiently before expiring.

The Dispensary's goal of developing a state-wide network is supported by the State of Tennessee and Governor Phil Bredesen, as the State has pledged \$1 million to the Dispensary of Hope. Construction is underway to build a mail order pharmacy to handle institutional patient assistance drugs (IPAP) for the individual dispensing sites to better supplement the sample supply. With IPAP, pharmaceutical companies provide the mail order pharmacy with bulk drug to dispense based on patient criteria and income rather than relying on sample drugs for dispensing. This will help to handle maintenance drugs for patients without individually applying to each pharmaceutical company for each patient and having to wait (on average 4-6 weeks) to receive the patient assistance drugs.

One of the strengths of the Dispensary of Hope Model is the adaptability of settings. Dispensaries currently exist as a free standing state-licensed indigent pharmacy in Murfreesboro, Tennessee; in Nashville, through an outpatient pharmacy at Saint Thomas Hospital, and in Knoxville, at the Knox County Health Department. Two other Dispensaries are to come into being in the near future. One is in a federally funded neighborhood clinic in inner city Nashville and another Dispensary in Johnson City will be staffed largely by the ETSU School of Pharmacy.

To learn more about the Dispensary of Hope and its expansion to the central distribution location, go to www.disensaryofhope.org.

Challenges

Initially, pharmacists handled the application process and initial interview with the patient but this significantly impacted the turn-around times of prescription order entry with all patients of the retail pharmacy. A grant through the State of Tennessee provided a social worker that is responsible for the initial application/interview process, the six month renewal process, and assistance with patient assistance programs through the pharmaceutical companies. Additional challenges existed with an emerging population of undocumented and Hispanic patients within the community leading to language barriers and inability to transition to other state or drug company programs.

ABOUT US

A LEGACY OF COMPASSIONATE CARE

For 110 years, Saint Thomas Hospital has been devoted to physical, emotional and spiritual healing. Our mission is to serve all persons, with special attention to those who are poor and vulnerable, while improving the health of individuals and communities. Saint Vincent de Paul and Saint Louise de Marillac founded the Daughters of Charity in Paris, France. In 1898, Thomas Sebastian Byrne, the fifth Catholic Bishop of Nashville, asked the Daughters of Charity to establish Saint Thomas Hospital in Nashville.

Today, Saint Thomas Hospital provides adult specialty healthcare to the more than two million residents of Middle Tennessee, Southwestern Kentucky and Northern Alabama. Saint Thomas Health Services' regional health system consists of five hospitals – Baptist and Saint Thomas Hospitals and the Center for Spinal Surgery in Nashville, Middle Tennessee Medical Center in Murfreesboro and Hickman Community Hospital in Centerville – and a comprehensive network of affiliated joint ventures in diagnostics, cardiac services and ambulatory surgery as well as medical practices, clinics and rehabilitation facilities. STHS is a member of Ascension Health, a Catholic organization that is the largest not-for-profit health system in the United States.

BY THE NUMBERS

541 acute care beds, including 40 critical care, 80 special care and 140 telemetry beds

1,800 associates

750 affiliated physicians

21,388 total admissions per year

32,000 ER visits per year

MISSION STATEMENT

Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually centered, holistic care, which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

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