Consultant Pharmacists

Providing clinical excellence
Our industry-leading consultant pharmacists are dedicated to providing clinical support customized to the individual needs of our customer facilities and their staff. The Omnicare® Clinical Services staff consists of highly tenured, extensively trained, long-term care pharmacists that develop meaningful and impactful relationships across thousands of facilities.

Consultant pharmacists routinely exceed an 80% overall satisfaction rate on quarterly customer satisfaction surveys. Customer feedback on Greg Coats, a consultant pharmacist in Illinois, is further proof that our customers value the relationship with their consultant pharmacist. “Greg is exceptional. He is a huge part of why we maintain the five-star rating on quality measures. His keen attention to details has been most valuable for Lake Zurich, especially on the area of medication review and recommendations. His work is very thorough from reviewing problems such as adverse drug reactions, drug interactions, excessive use of medications, inappropriate and duplicative therapy, GDRs, looking at fall incidents, in relation to medications, lab results and follow-up. His manner is professional and courteous. He is responsive to questions, and requests related to pharmacy services. Lake Zurich is fortunate to be on his area of assignment.”

In addition to building relationships, our clinical teams partner with customers to provide quality clinical care for patients that extends beyond the CMS requirements for Medication Regimen Review and look to target key areas in order to reduce the cost to the payer. Some of these value-added services include:

- Admission Medication Regimen Review (aMRR)
- Fall Assessment and Reduction Programs
- On-site clinical specialists

**Admission Medication Regimen Review (aMRR)**

Each year, our consultant pharmacists complete approximately five million Medication Regimen Reviews for our clients. These reviews focus on ensuring that the patient is receiving the correct medication and dosage for their conditions. Consultants review for potential drug interactions, polypharmacy, appropriate monitoring and untreated conditions that may pose a significant risk to the patient.

When a patient is transitioned from a hospital to a long-term care setting, there are many activities that need to happen in a short amount of time to support a smooth transition and optimize patient care. Ensuring patients receive the medications they need to effectively manage their conditions is a critical and complex component of this process, requiring close collaboration and communication across multiple stakeholders.

Over the past several years, Omnicare’s Clinical Services Team has designed a clinical program to address the timely completion of chart reviews for newly admitted or readmitted patients within 72 hours of their arrival to the facility. We are now conducting over 55,000 monthly admission reviews, in addition
Admission Medication Regimen Reviews (aMRR)

5,000,000
Patient medication chart reviews

592,000+
aMRRs conducted annually

to the monthly medication regimen review, in order to quickly impact cost, mitigate risk and prevent re-hospitalization.

During an Admission Review of a newly admitted patient with an active pulmonary embolism, a consultant pharmacist noted a potentially significant drug interaction between clopidogrel and omeprazole which can lead to reduced effectiveness of the anticoagulant, as well as an increased risk of bleeding associated with the patient’s combination orders of clopidogrel and enoxaparin. The consultant pharmacist worked closely with the facility and prescriber to recommend and implement a consolidation of clopidogrel and enoxaparin to rivaroxaban, helping to avoid not only the drug interaction but also a potential for a serious bleeding event due to the combination of the two anticoagulants. By completing a chart review within the 72-hour window of admission, the consultant pharmacist was able to impact the patient’s quality of care and cost to the facility, eliminating and consolidating medication therapy and preventing a potential serious event that could have resulted in re-hospitalization. Preventing re-hospitalization also helps facilities avoid a 2% penalty on reimbursement from CMS.

In January 2019, the Agency for Healthcare Research and Quality (AHRQ) noted that 50% of the over 1.5 million patients in long-term care fall annually; 22% of these falls resulting in serious injury and 6.4% resulting in hospitalization. According to the CDC, the average cost of a fall resulting in hospitalization is over $30,000.

We have also utilized customers’ feedback over the past year to expand our fall assessment program and look forward to the continued improvement of the comprehensive fall risk assessment and prevention program.

Falls assessment and reductions program

~4,500
Fall prevention-related recommendations monthly

Consultant pharmacists can offer a fall risk assessment and fall prevention program in order to mitigate the risk of falls and complications stemming from falls. We will partner with facility staff to identify patients with a high fall risk and complete a focused review of their medication therapy, making recommendations to prescribers in order to reduce that risk. The program also allows for a risk assessment and focused medication review upon admission and post fall. Currently our consultant pharmacists make approximately 4,500 recommendations around fall
prevention each month. We are excited to expand on the program and offer additional resources to our customers based on their focus on falls reduction.

“Yesterday, I was completing an admission review on a patient that had a recent hip fracture repair. She was receiving several newly ordered psychotropic medications due to delirium that she had experienced during her hospital stay, including an antipsychotic and a benzodiazepine. Upon reviewing her admission records to the hospital, I noted that she had fallen at home, which resulted in the broken hip, but that she had also not been receiving these highly anticholinergic medications prior to being admitted to the ER. I also noticed that her vitals were out of range and that a recent urine culture and sensitivity and urinalysis showed potential signs of infection.

Due to the patient’s high risk of subsequent falls, the medications that were started in the hospital with associated risk for falls and her untreated urinary tract infection, I immediately reached out to the prescriber and discussed possible treatment plans. We were able to stop the antipsychotic and change the benzodiazepine to an as-needed dose and start antibiotic therapy for her, which will likely reduce her symptoms of delirium and reduce further risk of fall.” – Melissa, consultant pharmacist.

**On-site Clinical Specialists**

For customers that admit a large number of rehabilitation-focused patients on a monthly basis and those that have significant patient turnover, we can employ a full-time on-site pharmacist who is dedicated to a specific facility and acts as the clinical specialist and main point of contact for Omnicare. These specialists have enhanced clinical knowledge that goes beyond clinical geriatrics in order to provide care for higher acuity, short-stay patient populations. Patients often transfer to these facilities after a hospital stay and require a higher level of care before they can be discharged to home. They vary in age and condition, and may not always be geriatric patients. The Omnicare on-site pharmacist is fully integrated with the care team at the facility and participates in every facility meeting, patient discharge planning, infection control committee meetings, and financial / cost management meetings. As part of this integration, clinical specialists work to identify potential cost-saving opportunities for the facility. In May of 2019, the on-site pharmacist for one customer identified 93 opportunities for cost savings, which potentially could have saved the facility approximately $30,000 that month. These cost savings are a result of recommendations for dosage change, drug discontinuation, and order clarifications.

In facilities where patient turnover is high and patients are more acutely ill than those in a traditional LTC facility, it’s important for the customer to have an on-site pharmacist to monitor labs, daily or weekly changes in medications and possible frequent changes to patient condition. The benefit of being on-site is that the pharmacist is available in the event there is an immediate need for a review or recommendation for medication change. Traditional consultant pharmacists are integrated with facility care teams just like the clinical specialists, but are not always on site from day to day and may not participate in every facility meeting. Having a clinical specialist on site provides immediate access to their expertise, and helps to mitigate the risk of medication errors, drug interactions and the use of inappropriate dosages.

Ryan Feeney, current clinical manager and previously an on-site clinical specialist, came across a patient who was admitted at 4 PM, after the physician had left for...
the evening. The patient had orders for insulin glargine 22 units at bedtime and insulin lispro 5 units with meals without monitoring. Ryan was on site and able to review the patient's chart and make the recommendations for needed monitoring. His recommendation was for the nurse to order glucose monitoring four times a day.

Glucose monitoring ensured the patient's diabetes was under control and that the patient was receiving the proper amount of insulin; preventing a serious complication from mismanaged diabetes.

Summary:
More than a consultant

At Omnicare, consultant pharmacists are clinical experts who work directly with the nurses, prescribers and administrators at skilled nursing and assisted living facilities.

In his clinical role, Cliff Kibbe, a clinical manager, helps his facility achieve the most optimal outcomes by reviewing patients' medical charts to provide guidance on any potential drug interactions or duplications and educating the facility staff on new compliance regulations. Cliff also works closely with Omnicare operations and account management to help meet the broader pharmacy and customer services needs of his facility. “Cliff is a partner to us – he is more than a consultant coming in,” said Ira Schoenberger, Executive Director, Heritage Hall North, a skilled nursing and rehab facility and nursing home in Agawam, MA. “He is very much involved in providing us with resources, a bridging between pharmacy and the center, and between state regulations and federal changes as well.”

Cliff Kibbe has been a pharmacist in long-term care for over 30 years. “One of the reasons I love my job is I can see the difference I am making,” said Cliff. “I can see someone get better.”