

Pharmacy Access Office Hours

October 28, 2021

Focus Topic: What's Your Capture Rate? Tools for Growing Your In-House Pharmacy

THE NACHC MISSION

America's Voice for Community Health Care

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.





Welcome! Housekeeping

- Today's meeting is being recorded
- Looking for the slides? They are on Noddlepod (both the Rx Access or 340B Advocacy sites)
- Slides and recordings will be published to NACHC's 340B archives webpage and emailed to all registrants within two weeks after the event.
- Any tech issues during today's event, please send us a note in the chat or email <u>trainings@nachc.org</u>
- We will email a survey after the event and encourage you to fill that out. Thank you in advance for your feedback!



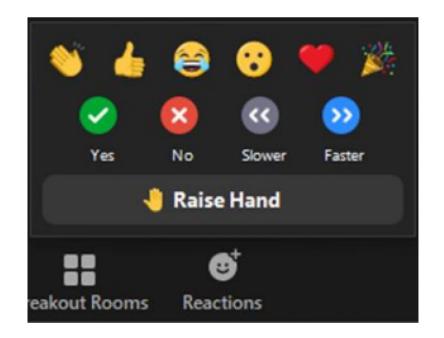


Share Comments and Questions!

 Enter your question/comment in the chat box on the right-hand side of your screen.

OR

- To ask a question verbally, use the raised hand feature by clicking on the Reactions icon.
- We will unmute you so that you can ask your question.
- Please make sure your audio is connected in order to participate.

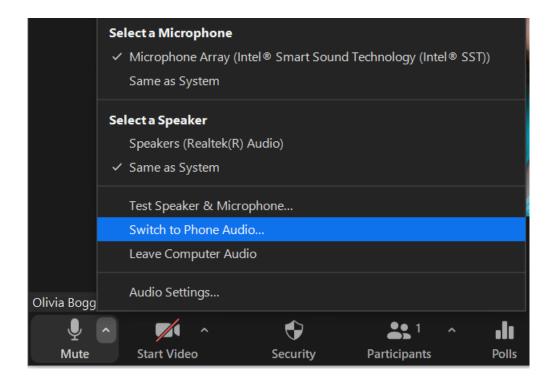




AUDIO CONNECTIONS

Having issues? Try calling in

Click the arrow next to your unmute button and select "Switch audio" Follow the unique instructions on your screen.



Note that all participant lines have been automatically muted. If you would like to ask a question or share a comment verbally, please raise your hand so we can unmute you!





Pharmacy Access Office Hours

October 28, 2021

Focus Topic: What's Your Capture Rate? Tools for Growing Your In-House Pharmacy



As Office Hours are supported with Federal funds, we are prohibited from discussing anything related to advocacy in this forum.



- Welcome and overview
- State Affairs Updates
- Introduction of Speakers and Overview of Focus Topic
 - Jericho Community Health Center Karen Dann, PharmD Director of Pharmacy
 - Central Virginia Health Services, Inc. David Christian, DPh Pharmacy Director
 - HealthPoint Community Health Center Keith Sinay, RPh Vice President Pharmacy Services
- Q&A

State Affairs Update

Jeremy Crandall Director, State Affairs, NACHC

Pharmacy Office Hour

Litigation Update

Vacheria Tutson

Director, Regulatory Affairs, NACHC

Pharmacy Office Hour

340B Updates

- On October 5, 2021, HRSA notified NACHC's legal counsel that a 340B Alternative Dispute Resolution (ADR) panel has been assigned to NACHC's petition representing over 225 CHCs against Sanofi and AstraZeneca.
- In response, on October 6th Sanofi filed a motion for emergency relief to temporarily suspend their obligation to respond to NACHC's ADR petition.
 - Sanofi's current lawsuit challenges the ADR rule and HRSA's authority to issue the May 2021 violation letter.
- On October 6, 2021, Kalderos filed a lawsuit against HHS and HRSA challenging HRSA's authority to prohibit manufacturer conditions on 340B pricing.
 - Kalderos wants to preclude HRSA and HHS from taking any enforcement actions based on the May 2021 letters.
 - In August 2020, Kalderos announced a platform to facilitate 340B discounts using a rebate model.
- Quarterly 340B Program site registration is open from Friday, October 1, through Friday, October 15, 2021. CHCs will be able to register a site that has been verified as implemented and with a site status reflected as "active" in HRSA's Electronic Handbooks Form 5B through Friday, November 26, 2021.
 - <u>Email the 340B Prime Vendor Program</u> or call 888-340-2787 (Monday-Friday, 9:00 a.m.-6:00 p.m. ET) to register a new site or ask questions.

340B ADR Dispute

- On October 22, 2021, the Alternative Dispute Resolution (ADR) panel assigned to review NACHC's petition against Sanofi and AstraZeneca issued initial scheduling orders.
- The orders did not consider the manufacturers' pending extension motions and NACHC's opposition.
- The panel set a 30-day deadline for manufacturers to respond to NACHC's petition.
- We are expecting a ruling in the Sanofi case by November 5th.
- ADR Panel
 - Sean R. Keveney, Deputy General Counsel, the Office of the General Counsel, Department of Health and Human Services;
 - Glenn Clark, Public Health Advisor, HIV/AIDS Bureau, Health Resources and Services Administration, Department of Health and Human Services
 - CDR Timothy Lape, Division of Medicare Health Plans Operations, Medicare Branch, Centers for Medicare & Medicaid Services, Department of Health and Human Services

Program Updates and Introduction of Focus Topic:

Tim Mallett, RPh

340B TTA Consultant, NACHC VP of Pharmacy Services, 340Basics

Pharmacy Office Hour

Update your Noddlepod profile

Your profile

Tim Mallett

📀 online

Email tmallett@340basics.com

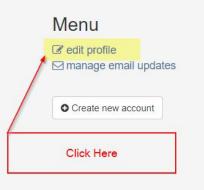
Job title / company NACHC 340B Teaching & Technical Assistance Consultant - VP of Pharmacy Services / 340Basics

Location Kalamazoo MI

Accounts / groups 🔞

NACHC Training and Technical Assistance 340B Advocacy [admin] Pharmacy Access for Health Centers [admin] Coronavirus info for Health Centers





Edit your profile

First name	
Tim	
Last name	
Mallett	
Job title / company	
NACHC 340B Teaching & Technic	al Assistance Consultant - VP of Pharmacy Serv
Location	
Kalamazoo M	
About me	
¶ - B I ≔ ð	© % III "> C' //
Type something	Please add your CHC name and your title. This helps others to know where you are from. Also add Location so we know what city and state your are from as well. This is useful if someone wants to connect with a CHC in a particular state. Feel free to provide any other info in the "About Me" section
Time zone	About We Section
(GMT-05:00) Indiana (East)	-

What's Your Capture Rate? Tools for Growing Your In-House Pharmacy

- Jericho Community Health Center: Karen Dann, PharmD, Director of Pharmacy
- Central Virginia Health Services, Inc.: David Christian, DPh, Pharmacy Director
- HealthPoint Community Health Center: Keith Sinay, RPh, Vice President
 Pharmacy Services

Jericho Road Community Health Center: In-House Pharmacy Growth

PRESENTER: KAREN DANN, PHARMD DIRECTOR OF PHARMACY

Jericho Road Community Health Center

- "Jericho Road Community Health Center provides high-quality medical care for the whole family — especially people with limited access to medical care, like families living in poverty, refugees, and immigrants. We provide full-spectrum care to all, even those without insurance or the ability to pay. All of our services exist for and with our patients in mind."
- 5 clinic sites in Western New York region
- Programs: Hope Refugee Drop In Center, Priscilla Project, ParentChild+, Vive Shelter
- Global Work-Sierra Leone, Congo, Nepal

JRCHC Pharmacy @ Broadway

- Opened: June 2021
- Total Monthly Script Volume: ~13k
- Staffing: 8 pharmacists (including one clinical), 10 technicians, 1
 340B compliance administrator
- Penetration Rate: Approximately 24%
- Total Number of Prescribing Providers: 43
- Total Patients Served (2020): 23,302
- Total Patient Visits (2020): 85,957

Clinical and Dispensing Services

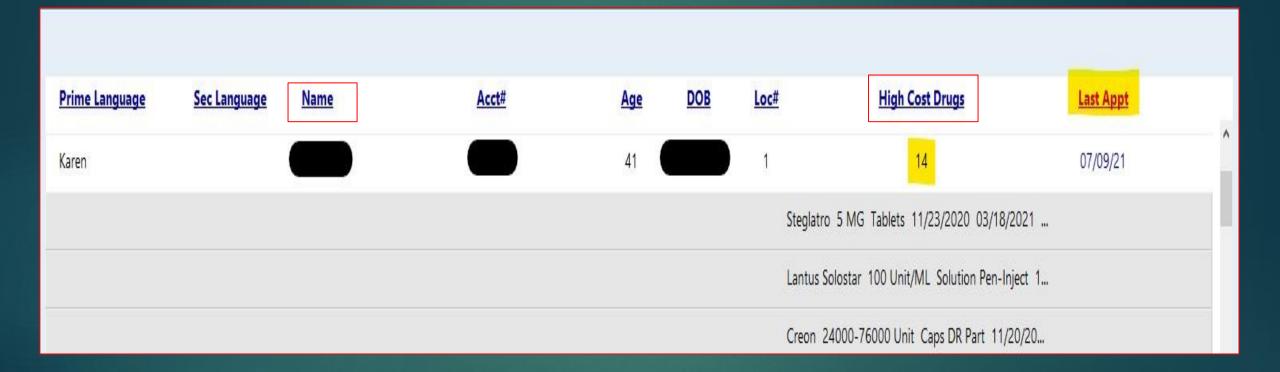
- Sliding Fee Scale patients
- Uninsured patients
- New refugees
- Asylum seekers
- Teach consultations-insulin, inhalers, adherence, pill box setup
- Acute medications
- Transportation/access barriers (we offer free delivery)
- Medipack enrollees
- Patients with complicated disease state management

In-House Pharmacy Growth Process

- 1. Generate monthly financial report in QS/1 software (report originally created by contract pharmacy)
- 2. Third Party Revenue Drug Acquisition Cost = Margin
- 3. Sort report from highest to lowest margin
- 4. Set Margin Cap Value of which medications to include for EMR (Medent) report
 - ► Started with >\$500
- 5. Provide high margin medication list to data specialist (Director of Health Information)

- 5. Create Medent report (update every few months)
 - Focus: Patients using an outside pharmacy as primary pharmacy AND have at least 1 medication on high margin medication list
 - Columns
 - Patient Demographics-Name, DOB, Age
 - Primary/Secondary Language
 - Total Number of Medications
 - Total Number of High Margin Medications
 - Last or Upcoming Appointment Date
 - Primary Location
 - Links
 - Connect to Patient Chart
 - Expanded View-Medications

Medent Report



Two Models Phone vs. In Person

Phone-Non Pharmacy Staff

- Call patient over the phone offering pharmacy services
- Benefits
 - Able to use interpreter team more extensively
 - Model used at the beginning of COVID-19 pandemic when staff was operating at contract pharmacy
 - Able to conduct during more convenient times
- Shortcomings
 - ▶ No Face to Face interaction
 - Staff may not be able to answer all patient questions
 - Must have fill history to generate Medent medication report

In Person-Pharmacist Staff

- Connect with patient during next appointment
- Benefits
 - Meet staff face-to-face
 - Opportunity to walk to pharmacy
 - Opportunity to give information leaflet
 - Opportunity for pharmacist to conduct medication reconciliation/answer questions during visit
- Shortcomings
 - Some patients caught "off guard"
 - ▶ Time constraints with dispensing team
 - Less interpreters on site available during patient visit time
 - Must have fill history to generate Medent medication report

Final Steps

Create triage in Medent (template) if unable to connect with patient over the phone for call back

If patient wants to use our pharmacy services—

- ▶ 1. Change primary pharmacy in Medent
- 2. Send triage to our provider to send new scripts to our in-house pharmacy
- 3. Use Surescripts and/or medication list in chart with patient permission to acquire prescriptions from outside providers

CVHS Health Services Pharmacy

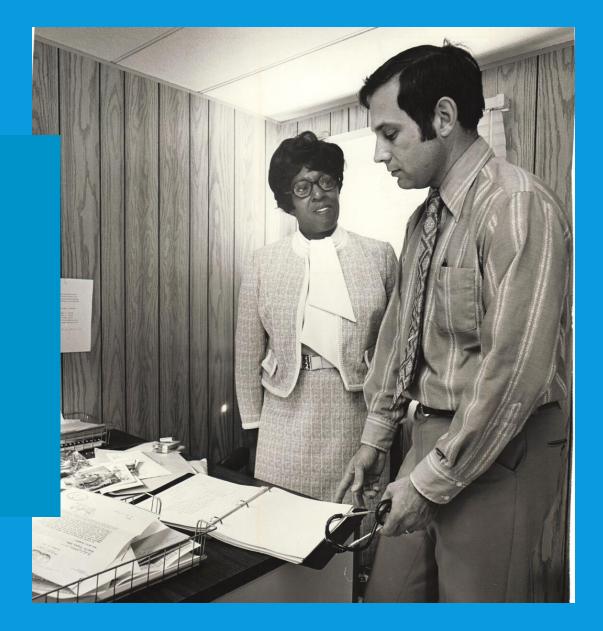
David Christian, Pharmacy Director



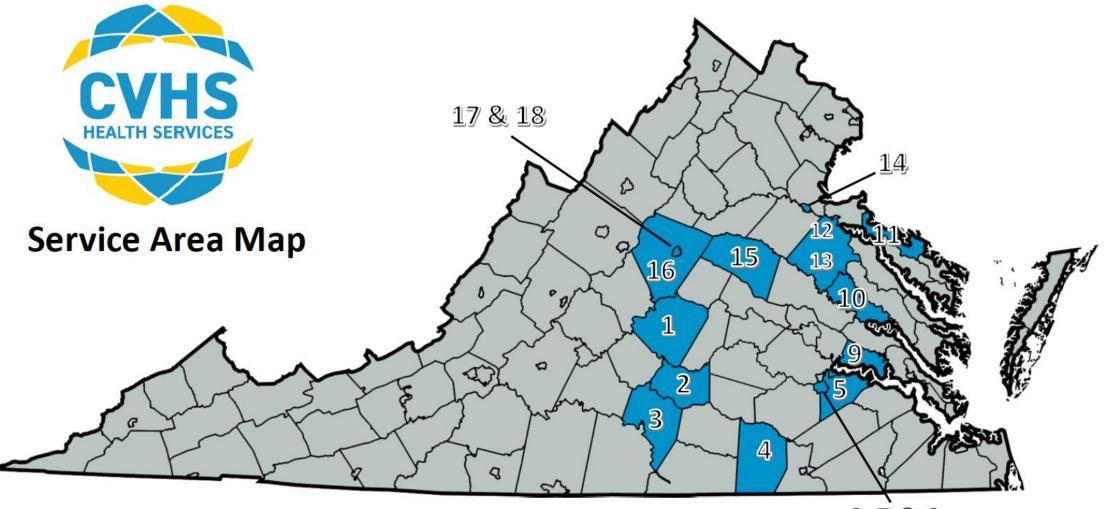


ABOUT US

- Ms. Beulah M. Wiley
 - 1970 Original Site Opened
 - 2021 18 Service delivery sites and 1 administrative site
- Virginia's first community health center
 - First health center in VA to offer Behavioral Health
- Virginia's first full-time, full-service school-based health center (2020) and soon to be opening our second SBHC



Our Service Area



6,7&8



CVHS Pharmacies

- Pharmacy services were included in the original grant for CVHS in 1970.
- Pharmacy was added in Petersburg in 2004
- Staffing:
 - 13 Pharmacists (Administrative, Operations & Clinical)
 - 16 Technicians (Operations & Clinical)
- Annual volumes
 - Buckingham:
 - 119,963 total prescriptions filled annually
 - 74,333 mail order prescriptions filled annually
 - Petersburg
 - 45,401 prescriptions filled annually
 - 5,212 mail order prescriptions filled annually
- 165,364 total prescriptions filled annually
- 79,454 mail order prescriptions filled annually

HOW WE SERVE OUR PATIENTS

Clinical Pharmacy

Medicare Annual Wellness Visits Chronic Care Management Hepatitis C Treatment and Management PrEP for HIV Prevention Management Coordinated Care Prior Authorizations Medication Therapy Management and Outcomes

Who are YOU?

Clinical Pharmacy Offerings

- Medicare Annual Wellness Visits
- Chronic Care Management
- Hepatitis C Treatment and Management
- PrEP for HIV Prevention Management
- Coordinated Care
- Prior Authorizations
- Medication Therapy Management and Outcomes

Pharmacy Operation Offerings

- Sliding Fee Discount
- 340B Drug Purchasing Program Participant

SWOT

SWOT ANALYSIS TEMPLATE		
Strengths	Weakness	
 Specify your business' strengths. In what way your business is better than others. Unique technical or professional skills your business possesses. What are your strengths as perceived by your competitors. 	 What are your weakness according to your internal assessments? In what way your peers stand above you? Improvement areas where you should focus upon. What are your weakness areas as perceived by your competitors. 	
<u>Opportunities</u>	Threats	
 The unique features you can provide to your potential clients. What are the various opportunities being available in terms of regions. What are the different attributes which have positive impact on your business. 	 The absence or lack of any features in your product or service. What are the areas where your peers are doing well above your products or services. The absence of adequate financial resources to support the various potential business opportunities. 	

 \bullet

STRENGTHS

- Examples
- 340B
- Location
 - Pharmacy should be positioned near the exit of the clinic
- EHR Access
 - Reports can be run to determine:
 - Capture rate
 - Pharmacy potential
 - Disease states
- Providers and pharmacy work for the same organization
 - Pharmacy has the opportunity to assist in addressing complex patients
 - Providers know have a relationship with the pharmacy
 - Formulary The clinic an pharmacy can work together to develop a preferred drug list
- PAP (MAṔ) Program
- Slide Pricing
- Prior Authorizations

WEAKNESSES

- Examples:
- Lack of buying power
- Location:
 - You may be too far for a patient to return for a refill
- PBM Restrictions:
 - PBM may limit the number of fills allow at your pharmacy for a particular drug
- Network restrictions:
 - Pharmacy may not be able to participate in a particular insurance network
- Hours of Operation
 - Typical clinic owned pharmacies do not have the same hours as the chain drug stores

OPPORTUNITIES

- Capture 340B savings being restricted at contract pharmacy Target patients being treated with medication manufactured by a company not fully participating in 340B through contract pharmacy Types of reports from the EHR that could show opportunities
 - - Patient/Drug Report
 - NDC
 - Quantity
 - Provider who prescribed it
 - The pharmacy that received the prescription
 - Patient/Diagnosis Code
 - Patient Name
 - Patient Phone Number
 - Diagnosis Code (i.e. Diabetes/Asthma)
 - Patient's Primary Pharmacy

THREATS

- PBM/Insurance is restricting the number of times a chronic medication can be filled at your pharmacy
- Predatory payer contracts for 340B Entity Owned pharmacies
- Pharmacy wait time vs travel time
- Lack of non340B purchasing power
- Network restriction

QUESTIONS????

Contact Information:

David Christian <u>davidchristian@cvhsinc.org</u> 434-581-3271 x 10513

HealthPoint

Keith Sinay

Vice President Pharmacy Services

Overview HealthPoint

Located western region of Washington State

Clinic Overview

- 80,000 patients
- 19 Locations
- Services
 - Medical
 - Dental
 - Behavior Health
 - Pharmacy
 - Case Management
 - Social Services

Pharmacy

- 9 on site pharmacies
- 1 Central Refill/Call Center pharmacy
- 1 specialty pharmacy
- 290,000 scripts annually
- \$27 million revenue
- \$15 million operating margin
- 4 Clinical Pharmacist

Strategic Focus Initiatives

- Mail and Home Delivery
- Specialty Pharmacy
- Patient Engagement
- Internal Capture
- Clinical Pharmacy

Mail/Home Delivery

- Initiated in 2016
- Provide free USPS
- Free same day next day added 2019
 - ScriptDrop
 - Fedex
 - Nimble

Results

278 Prescriptions per day \$2.25 Average cost/Rx

Benefits

- Convenience
- Adherence
- Retention

"We cant be Starbucks but we can be Amazon"



Next Steps

- Add Internal Courier Delivery
 - Driver/Vehicle
 - Prioritize Specialty
- Process Improvement
 - Improve Efficiency
 - Leverage Technology
- Continue Internal/External Marketing

Specialty Pharmacy

- Based on market trends
- Initiated in 2018
- Partner with Community Health Plan of Washington
- Started with Hep-C Clinic

Business Proposal

- Start a Separate Licensed Specialty Pharmacy
- Investment
 - Accreditation
 - Staff
 - IT infrastructure
 - Facilities Design

Build Business Plan

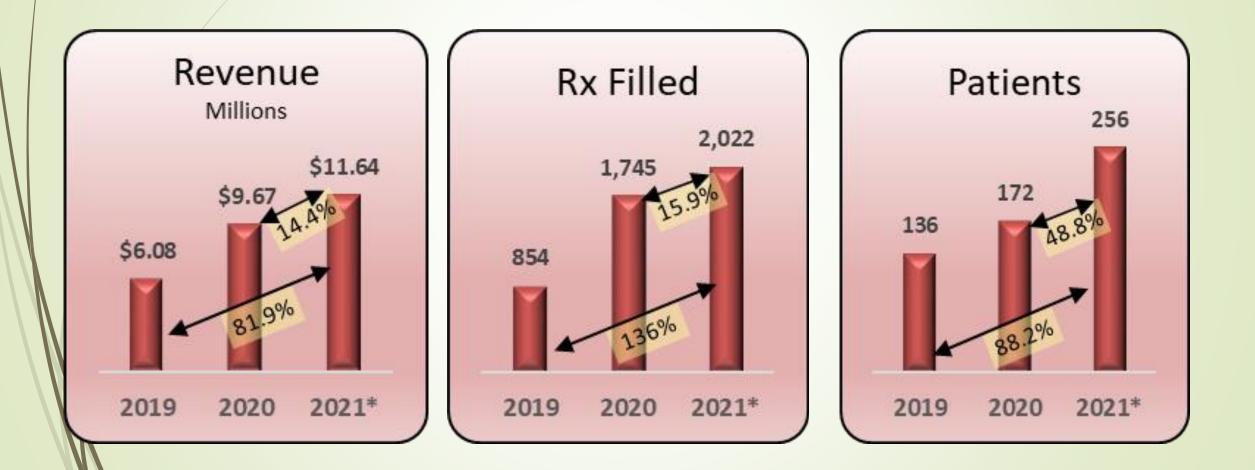
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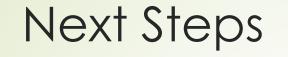
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Legal Considerations
Legislative Risk
340B Compliance
Pharmacy Commission
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References

Specialty Pharmacy Development

- Separate Pharmacy Licensed
- Separate NPI/NCPDP- (Specialty Pharmacy)
- Co-located in Central Fill Pharmacy
- Separate Pharmacy Dispensing Software (QS1)- Patient Management Software (Asembia1)
- Insurance Contracts
- New Job Descriptions
- Hired 1 Pharmacist/1 Technician
- Initiated Accreditation Process

Results





HealthPoint Employees Rx Benefit

- Local Employer Rx Benefit
- Non-340B Patients

Patient Engagement Specialist

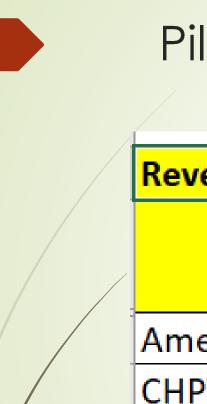
- Modeled after Equiscripts
- Pilot 2019-2020
- Plan partners gave claims data
 - Targeted patients assigned to HP that do not use a HealthPoint pharmacy.

Claims Data

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3/2	22/2021	00131247835	VIMPAT 100 MG TABLET	\$2,924.87	\$0.35	\$0.00	\$2,925.22	30	180	RITE AID #5190
3/1	19/2021	00131247835	VIMPAT 100 MG TABLET	\$2,924.87	\$0.35	\$0.00	\$2,925.22	30	180	RITE AID #5190
3/1	18/2021	00131247835	VIMPAT 100 MG TABLET	\$2,924.87	\$0.35	\$0.00	\$2,925.22	30	180	RITE AID #5190
2/2	22/2021	00131247835	VIMPAT 100 MG TABLET	\$2,924.87	\$0.35	\$0.00	\$2,925.22	30	180	RITE AID #5190
1/1	19/2021	00131247835	VIMPAT 100 MG TABLET	\$2,924.87	\$0.35	\$0.00	\$2,925.22	30	180	RITE AID #5190
2,	/1/2021	16714004610	ENOXAPARIN 100 MG/ML SYRINGE	\$2,888.26	\$0.35	\$0.00	\$2,888.61	30	60	RITE AID #5175
3,	/3/2021	65649030302	XIFAXAN 550 MG TABLET	\$2,878.81	\$0.10	\$0.00	\$2,878.91	30	60	FRED MEYER PHARMACY #391
1,	/8/2021	65649030302	XIFAXAN 550 MG TABLET	\$2,878.81	\$0.10	\$0.00	\$2,878.91	30	60	FRED MEYER PHARMACY #391
3/1	18/2021	63402030830	LATUDA 80 MG TABLET	\$2,811.28	\$0.10	\$0.00	\$2,811.38	30	60	FRED MEYER PHARMACY #053
2/1	17/2021	63402030830	LATUDA 80 MG TABLET	\$2,811.28	\$0.10	\$0.00	\$2,811.38	30	60	FRED MEYER PHARMACY #053
1/2	21/2021	63402030830	LATUDA 80 MG TABLET	\$2,811.28	\$0.10	\$0.00	\$2,811.38	30	60	FRED MEYER PHARMACY #053
			INVEGA SUSTENNA 234 MG/1.5 ML	\$2,790.66	\$0.00		\$2,790.66	28	2	GENOA HEALTHCARE
			INVEGA SUSTENNA 234 MG/1.5 ML	\$2,790.66	\$0.00	\$0.00	\$2,790.66	28	2	GENOA HEALTHCARE

Tracking Form

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724081591			7/16/1957	М	\$	34,672			X		NOT IN NEX	TGEN			
728517078			10/16/1988	М	\$	32,375			X		OUTSIDE PO	P			
727458281			9/12/1952	F	\$	32,018			Х		NOT IN NEX	TGEN			
728207684			3/17/1965	F	\$	31,217			Х		NOT IN NEX	TGEN			
723826792			12/26/1965	M	\$	28,816			X		NOT IN NEX	TGEN			
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Pilot Results

Revenue										
	202	20-Results of								
Plan		Pilot								
Amerigroup MCO	\$	452,732								
CHPW Medicare	\$	110,607								
Health Homes	\$	315,392								
Molina	-									
Grand Total	\$	878,732								

Next Steps

SBAR – Pharmacy Engagement Specialist

Submitted by: Katya Kanevski and Keith Sinay Date: 3/10/2021

Background:

Patients assigned to HealthPoint through Medicaid Managed Care and Medicare plans have a choice in who they use for pharmacy services. Even though they are assigned to HealthPoint, they are not compelled to use our pharmacies. There are many attributes to using HealthPoint pharmacies that are often not recognized by patients or providers with "convenience" being the primary influencing attribute rather than improved care, outcomes and service.

Being an integrated healthcare network, it is our belief that having patients use our pharmacies allows for an increased ability to manage overall care to help improve outcomes. Changes in the reimbursement models from fee for service to value based contracting and outcome incentives as forms a payment, makes it more important to be able to affect, monitor and control the total cost of care while improving outcomes, especially as it relates to medication management.

It is the organizational effort to promote and use HealthPoint pharmacies to help improve patient

Develop Job Description Patient Engagement Specialist (PES)

HealthPoint

JOB DESCRIPTION

JOB TITLE: Pharmacy Engagement Specialist

DEPARTMENT: Pharmacy

FLSA STATUS: Non Exempt

GRADE:

POSITION SUMMARY

Position will coordinate, monitor, and follow-up with patients for the purpose of ensuring a seamless, positive patient experience as patients transfer to HealthPoint pharmacy from another pharmacy. The essential job function also includes performing outreach activities to patients that are assigned by Medicaid/Medicare to HealthPoints primary care services but do not use HealthPoint pharmacies for their prescription needs. This position will also focus on service recovery to periodically review and

Workflow/Monitoring Database

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	Member ID	Program	Pharm City	Pharm NPI	Pharm Phone	Pharmacy Filled		NDC	Drug	Paid	Transf	Transf. Date	Med	Eliminate
	10002583-001	CHPW Mec	TEMPE	649352006	8667071862	EXPRESS SCRIPTS		5615114600	TRUE METRIX GLUCOSE	\$45	\checkmark	4/1/2021		
	10002583-001	CHPW Mec	TEMPE	649352006	8667071862	EXPRESS SCRIPTS		3172207139	PANTOPRAZOLE SOD D	\$16		4/1/2021		
	10002583-001	CHPW Mec	TEMPE	649352006	8667071862	EXPRESS SCRIPTS		8822203	LANTUS 100 UNIT/ML \	\$515	\checkmark	4/1/2021		
	10002583-001	CHPW Mec	TEMPE	649352006	8667071862	EXPRESS SCRIPTS		7470701	SYNTHROID 175 MCG T	\$53		4/1/2021		
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	10002583-001	CHPW Mec	TEMPE	649352006	8667071862	EXPRESS SCRIPTS		6818004790	SIMVASTATIN 20 MG T.	\$16		4/1/2021		
	10002583-001	CHPW Mec	TEMPE	649352006	8667071862	EXPRESS SCRIPTS		1366800100	CITALOPRAM HBR 20 M	\$11	\checkmark	4/1/2021		
	Workflow Notes	CHDW Mor	TEMADE	640250006	0227071020	EVANECE CONTE		E076004010	CHORALEATE 1 CM TAB	¢27		4/1/2021		
		Date	Note						5					
	131965	5/27/20	021 called her	and she was	not home need to	o follow up								
	* 131965													
		6 61 6.0												

Results - Thru 10/15/2021

Revenue										
Plan	20	21 Annualized								
Amerigroup MCO	\$	145,932.00								
CHPW Medicare	\$	337,824.00								
Health Homes	\$	610,260.00								
Molina	\$	59,052.00								
Grand Total	\$	1,153,068								



Refine/Improve Data Collection Expand scope Transferred out Providers sending scripts outside HP





Submit focus topic ideas to bljones@nachc.org or tmallett@340Basics.com

Evaluations will be sent to attendees following the session

ARE YOU LOOKING FOR RESOURCES?

Please visit our website www.healthcenterinfo.org







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Facebook.com/nachc



Instagram.com/nachc



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