

Evaluation of Interprofessional Collaboration with Inclusion of Ambulatory Care Pharmacists in a Patient Centered Medical Home Model on Heart Failure and 30-day Readmissions.

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Preventing heart failure (HF) readmissions has been a large focus to reduce costs and improve patient outcomes. The Centers for Medicare and Medicaid Services utilize the Hospital Readmission Reduction Program to encourage health-systems to improve communication and care-coordination to avoid readmissions, and a payment reduction is applied for excess readmissions. Transitions of care (TOC) between hospitals and outpatient settings is crucial in avoiding readmissions and pharmacists can play a crucial role.

The purpose of this study is to determine if clinic-based ambulatory care pharmacist intervention during TOC will reduce 30-day readmissions for HF. Secondary endpoints are to assess pharmacist collaboration with physicians, types of interventions made, and non-HF readmission rates. A final purpose of the study is to assess readmissions rates between telemedicine and face-to-face encounters.

Endpoints will be assessed through pharmacist visits with the patient post-hospital discharge. A list of patients discharged was reviewed daily for eligible subjects. Subjects were included if they were 18 or older, followed a primary care provider in two Internal Medicine clinics in Lawrence, KS, and had at least stage C heart failure identified by the authors. Subjects were excluded if discharged with hospice or a nursing facility. Identified interventions related to heart failure, diabetes, or other comorbidities were relayed to the provider for their follow-up appointment. Descriptive statistics and chi-square analysis will be conducted to compare groups.

The results of the study will be used to assess the benefit of pharmacists on TOC and co-visits with providers at LMH Health outpatient clinics and assess need for pharmacist presence in cardiology clinic and TOC workflow.

Learning Objective:

- Discuss effect of ambulatory care pharmacy intervention on heart failure 30-day readmissions