

Medication Access and Review Program

MARP



*North Carolina Office of
Rural Health and Community Care*

North Carolina Medication Assistance Program and MARP software

- Developed by NC Foundation for Advanced Health Programs, Inc with funding support from the Duke Endowment and the NC Health and Wellness Trust Fund
- Operated by the NC Office of Rural Health and Community Care
- - ◆ NCMAP assists rural and community health care center providers in prescription assistance services to their patients
 - ◆ Facilitates access to over 140 pharmaceutical manufacturer PAP programs and 3400 drugs
 - ◆ NC providers using MARP delivered \$550M for 140,000 patients since the programs' inception

NC Medication Assistance Program

- Medication Access and Review Program (MARF)
 - ◆ Software developed to ease the administrative burden in obtaining free medications
 - ◆ Free software program for establishing and maintaining a PAP program
 - ◆ Free training and installation of MARF software
 - ◆ Free ongoing technical software support

MARP Software

- Database of 3400+ medications from 147 pharmaceutical manufacturers
- Database automates the process of
 - ◆ searching for free or low cost medications
 - ◆ determining patient eligibility
 - ◆ completing applications, tracking requests and reorders
 - ◆ maintains patient medication and medical history
 - ◆ generates prescription bottle labels and prescriptions
 - ◆ extensive pharmacological database for medication management
 - ◆ patient information available in English and Spanish

Software Benefits

- Eliminates handwriting applications
- Checks for patient eligibility against pharmaceutical company criteria
- Checks for patient medication adverse events
- Applications and program notes updated daily
- Tracks monetary value of medications requested and delivered

Benefits (continued)

- Tracks steps necessary to access medications
 - ◆ Completed application / prescription
 - ◆ Provider signed form
 - ◆ Mailed form to manufacturer
 - ◆ Medication received / dispensed / delivered
 - ◆ Reordering (including call-ins)

Benefits (continued)

- Displays information and directions on each manufacturer's program
- Indicates when original application is required
- Manufacturer's applications updated daily
- Medications and pricing updated weekly through data clearing house used by most pharmacy benefit managers

Medication Access and Review Program...

User: Patsy Stone

- Center Administration
- Pharmacist
- Reports
- Utilities
- Help
- Logout



Medication Access and Review Program

Version 7,0,0,5
On the web at [Marp Bulletin Board](#)

Patient Summary Information

Active Patients:	29
Inactive Patients:	2
Total Patients:	31

Program Summary Information

Programs:	147
Medications Available:	3,492

Request Summary Information

Active Requests:	33
Closed Requests:	128
Filled Requests:	75
Total Requests:	236

Patients Overview [View](#)

Medications Overview [View](#)

System Overview

Time Frame:

Date Range

	Quantity	
New Patients:	31	
Patients Served:	31	
New Requests:	140	
Reorder Requests:	96	
Total Requests:	236	
Medications Requested:	130	\$126,193.1
Medications Received:	88	\$21,941.15
Medications Delivered:	79	\$20,425.79

Reporting Data Refreshed: 3/3/2011 12:43:00 PM

[Refresh Reporting Data](#)

MENU

Medication Access and Review Program...

Robert J. Amos
User: Patsy Stone

[Center Administration](#)
[Pharmacist](#)
[Reports](#)
[Utilities](#)
[Help](#)
[Logout](#)

Status:

Entry Date	Last Name	First Name	Middle Name	Phone	Birthdate	Status
02/02/2011	AISTestLast	AISTestFirst		x	12/23/1948	Active
01/05/2011	[REDACTED]	Robert	J.	[REDACTED]	[REDACTED]	Active
12/08/2010	[REDACTED]	I	Am	[REDACTED]	[REDACTED]	Active
02/04/2011	[REDACTED]	Marie	L.	[REDACTED]	[REDACTED]	Active

Patients: 23

MENU

Status: Active Chart Number:

First Name: Middle: Last Name:

Address:

Address:

City: State: Zip: Phone:

Work Phone: Ext: County: State Resident:

Citizenship: Gender: Birthdate: Age:

SSN: Marital Status: Primary Care Provider:

Referral Source: ACS#: Ethnicity:

Facility: Assigned To:

Entry Date: Edit Date:

Use Alternate Contact Info

Name:

Phone: Relationship:

Household & Annual Income Info

Number in Household: Patient & Spouse: \$

Total Household: \$

Prescription Coverage:

Insurance Coverage:

Insurance Company:

Verify Documentation:

- Insurance
- Financial
- SS Letter
- Income
- Medical

Medications Tab Frameset -- Webpage Dialog

Research Patient Medications...

Search by Medication

Name:

Strength: Units: Dosage Form:

Search By Characteristic

Color:

Shape:

Coating:

Marking:

Search Results

Medication	Strength	Units	Dosage Form
Nexium Cap	20	mg	Capsule, Delayed
Nexium Cap	40	mg	Capsule, Delayed
Nexium IV Solution	20	mg	Recon Soln
Nexium IV Solution	40	mg	Recon Soln
Nexium Packet Oral Susp	10	mg	Susp,Delayed Rel..
Nexium Packet Oral Susp	20	mg	Susp,Delayed Rel..
Nexium Packet Oral Susp	40	mg	Susp,Delayed Rel..

Medications: 7

Identification Information Education Contraindications



Medication Access

Center Administration

Pharm

Patient Formulary

Name	Strength
✓ Aciphex Tab	20
✓ Acyclovir Cap	200
✓ Baclofen Tab	10
✓ Cilostazol Tab	50
✓ Nexium Cap	20
✓ Procardia Cap	10

Medications: 7

Medication Interactions

Medication	Medication
■ Cilostazol Tab	Nexium

Duplicative Therapy

Medication	Medication
Aciphex Tab	Nexium

Interaction Detail for Cilostazol Tab - Nexium Cap

MONOGRAPH TITLE: Cilostazol/Esomeprazole; Omeprazole

SEVERITY LEVEL: 3-Moderate Interaction: Assess the risk to the patient and take action as needed.

MECHANISM OF ACTION: The metabolism of cilostazol by CYP P-450-2C19 may be inhibited.(1,2)

CLINICAL EFFECTS: Concurrent use may result in elevated levels of 3,4-dehydro-cilostazol, a metabolite of cilostazol that is 4-7 times as active as cilostazol.(1)

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: The manufacturer states under the "Dosage and Administration" section in the cilostazol prescribing information that a dose of cilostazol of 50 mg twice daily should be considered in patients receiving concurrent therapy with CYP P-450-2C19 inhibitors such as omeprazole.(1)

DISCUSSION: In a study in 20 subjects examined the effects of omeprazole (40 mg daily) on a single dose of cilostazol (100 mg). Concurrent omeprazole increased the cilostazol maximum concentration (C_{max}) and area-under-curve (AUC) by 18% and 26%, respectively. The C_{max} and AUC of the 3,4-dehydro-cilostazol metabolite of cilostazol increased 29% and 69%, respectively. The C_{max} and AUC of the OPC-13213 metabolite of cilostazol decreased by 22% and 31%, respectively.(2) Therefore, the manufacturer of cilostazol recommends that a dose of 50 mg twice daily be considered in patients receiving concurrent therapy with CYP P-450-2C19 inhibitors such as omeprazole.(1) Esomeprazole is the S-isomer of omeprazole, which is a racemic mixture, and also inhibits CYP P-450-2C19.(3)

REFERENCES:

1. Plental (cilostazol) US prescribing information. Otsuka America Pharmaceutical, Inc. November, 2007.
 2. Suri A, Bramer SL. Effect of omeprazole on the metabolism of cilostazol. Clin Pharmacokinet 1999;37 Suppl 2:53-9.
 3. Nexium (esomeprazole magnesium) US prescribing information. AstraZeneca Pharmaceuticals LP June, 2009.

Print

Close

bert
er: Patsy Stone

Add Prima

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Formulary Has Been Review

er Precautions

Medication Info

Medication Price

Home Insert Page Layout References Mailings Review View

Clipboard Paste

Font: Verdana, 11, Bold, Italic, Underline, Text Color, Background Color, Paragraph: Bullets, Numbering, Indentation, Paragraph Spacing, Styles: Emphasis, Heading 1

Medication Access and Review Program

Patient: [Redacted]

Program: AZandMe Prescription Savings Program

Status: Ready..

Use Original Form []

Application for Free AstraZeneca Medicines



Please print clearly in **black** or **blue** ink.

Personal Information

Name Robert [Redacted] Date of Birth [Redacted] (mm/dd/yyyy)

First Middle initial Last

Address [Redacted] City Raleigh State NC Zip 27609

Phone [Redacted]

Marital status:

Married Divorced

Single Widow/Widower

Sex:

Male Female

U.S. Veteran:

Yes No

Primary language spoken: (optional)

English

Spanish

Other _____

Disabled: (approved by Social Security)

Yes No

Please provide your **Social Security Number** if you have one.
This information will only be used to determine if you are eligible and once qualified as described below.

[Redacted]

If you don't have a Social Security Number you must provide **one** of the following:

Green Card Number _____

A copy of the confirmation letter from the government stating that you have applied

Message Center Frameset -- Webpage Dialog

PAC Message Center - All Patients

Patient View:

Activity View:

Date Queued	By	Patient Name	Message	Medication	Due Date
03/23/2011 11:16:27	Kezar, Sara		Generate Pharmacist Formulary Chan...		03/23/2011
03/23/2011 16:19:34	Kezar, Sara		Patient Medication Requires Dispensing	Atenolol Tab	03/23/2011
03/24/2011 08:47:17	Kezar, Sara		Patient Medication Requires Dispensing	Zoloft Tab	03/24/2011
10/18/2010 13:59:29	Pac, Sally		Generate Request Form	Valtrex Tab	10/18/2010
10/27/2010 10:44:32	Pac, Sally		Patient Has Not Picked Up Medication	Nexium Cap	11/01/2010
10/27/2010 10:46:44	Pharm, Billy		Notify Patient Of Medication Availability	Nexium Cap	10/27/2010
11/07/2010 10:57:58	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/07/2010 10:58:00	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/07/2010 10:58:02	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/07/2010 10:58:03	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/07/2010 10:58:04	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/07/2010 10:58:05	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/07/2010 10:58:05	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/07/2010 10:58:05	Pac, Sally		Patient Documentation Review Overdue		11/07/2010
11/16/2010 10:23:32	Administrator, Marp		Generate Request Form	Nexium Cap	11/16/2010
11/16/2010 18:40:33	Administrator, Marp		Check On Receipt of Card/Coupon	Nexium Cap	11/21/2010
11/16/2010 18:41:03	Administrator, Marp		Check On Receipt of Card/Coupon		11/21/2010
11/16/2010 18:43:56	Administrator, Marp		Check On Pharmacist Review		11/21/2010
11/17/2010 10:20:34	Administrator, Marp		Check On Program Form Signature	Nexium Cap	01/01/2011

Rows:

Notes

Print

Process

Close

MARP Benefits, continued

MARP will be moving to web-based architecture by late summer

Potential for data integration with medical data (similar to CCNC model only for uninsured)

NC MedAssist (Central Fill) a program in MARP



NC Health and Wellness Trust Fund MAP Grant Phases

- Phase I:** **23 local grants totaling over \$8.7 million**
January 2003 – December 2005 (3 years)
Value of Medications received: \$48,486,232
- Phase II:** **58 local grants totaling over \$6 million**
July 2004 – June 2006 (2 years) V
Value of Medications received: \$33,148,292
- Phase III:** **51 local grants totaling over \$2 million**
July 2006 – December 2007 (18 months)
Value of Medications received: \$32,905,821
- Phase IV:** **50 local grants totaling over \$2 million**
January 2008 – June 2009 (18 months)
FY 08-09 Value of Medications received: \$51,859,205
- Recertified** **46 local grants recertified totaling over \$2 million**
Phase IV: July 2009 – June 2011
- Phase V:** **15 Directed grants totaling \$680,000**
July 1, 2008 – December 2009 (18 months)
FY 08-09 Value of Medications Received: \$12,591,958
- Phase VI:** **15 Proposals for grants totaling \$637,720**
January 2010 – June 2011 (18 months)

ROI for grant supported sites: 15:1 (*HWTF Chenowith Report, March 2011)



What is NCRx?

- **State Prescription Assistance Program (SPAP) approved by the Center for Medicare and Medicaid (the benefit to being an approved SPAP is that applicants can move between plans other than during the annual enrollment period)**
- **Premium assistance plan to help low-income seniors participate in Medicare Part D prescription drug program. NCRx began paying premium assistance to enrollees in January 2007.**
- **NCRx pays up to \$29 per month toward Medicare drug plan premium on enrollees' behalf**

Who is Eligible?

- **North Carolina Resident**
- **Medicare Beneficiary**
- **Age 65 or older**
- **Income at or below \$18,952 for individuals and \$25,497 for married couples**
 - **Combined savings, investments and real estate (other than your home, car, and \$1,500 per person to cover burial expenses) of \$22,092 or less for individuals and \$33,139 for married couples**
- **Enrolled or will enroll in a Medicare Prescription Drug Plan that participates with NCRx**
- **No other form of drug coverage that is as good or better than Medicare Part D**
- **Not eligible for the full federal “Extra Help” subsidy for Medicare Part D**

ROI (*HWTF Chenoweth Report) 19:1



CheckMedics NC

CheckMedics NC is a Medication Therapy Management program offered to all North Carolina seniors enrolled in a Medicare Part D prescription drug plans.

Medication Therapy Management or MTM is a partnership of the pharmacist, the patient (or their caregiver) and other health professionals that promotes the safe and effective use of medications. This is done through enhancing the patient's understanding of what the medicine is intended to do, increasing the patient's adherence to medications, controlling costs, and preventing drug complications and adverse interactions.

Checkmeds Covered Services

- **Comprehensive Medication Review** (Medication Check-Up, sometimes referred to as a “brown bag” review to review patient’s drug profile to identify any cost-efficacy issues or drug therapy problems) 69% of CMRs identify drug therapy problems or additional interventions required.

Prescriber Consultation (17% of Claims)

- **Cost Efficacy Management** (are there other drugs, perhaps generics, that could be as effective and save the patient money?)
- **Drug Therapy problem resolution** (for example, a patient is post-myocardial infarction and has not been prescribed a beta-blocker; or a drug order with an adverse reaction risk significant enough to render the therapy unsafe including side effects and allergic or idiosyncratic reactions: patient is on statin therapy and reports leg pain.)

Patient Compliance Consultation (is the patient taking their medicine properly? For example, the patient may demonstrate overuse of a drug – a 30 day supply only lasts 15 days; or a patient may demonstrate inappropriate administration or technique of a drug product, such as inappropriate asthma inhaler technique.) 11% of claims

Patient Education and Monitoring (this can include over the counter drugs and interactions with prescribed drugs; includes information related to the therapeutic class of drug, directions for use, side effects, warnings, storage requirements, missed dose actions, and collecting information about change in patient-reportable symptoms or other questions.) 24% of claims

Cost Avoidance Model

- Estimated cost avoidance (ECA) is a model to estimate the drug, medical and/or hospital-related costs avoided as a result of an MTM service (developed and published in peer-reviewed journal in 1995)
- Pharmacists working with Outcomes vendor, assign severity rating to each MTM claim:
 - Level 1: Improved Quality of Care
 - Level 2: Drug Product Costs
 - Level 3: Additional Physician Visit
 - Level 4: Additional Prescription Order
 - Level 5: ER visit
 - Level 6: Hospital Admission
 - Level 7: Life Threatening
 - **ROI (*HWTF Chenoweth Report) 13.55:1**

Questions?

- Further information:
- Contact Ginny Klarman
 - » Medication Assistance Program Manager
 - » Office of Rural Health and Community Care
 - » 311 Ashe Avenue, Raleigh NC 27699
 - » 919-733-2040

ORHCC TECHNICAL ASSISTANCE

North Carolina Office of Rural Health and Community Care staff provides:

Community Needs & Gap Analysis

- Strategic & Business Planning
- Network Development
- Medical, Dental, and Psychiatric Provider Recruitment for Underserved Areas & Educational Loan Repayment
- Architectural Design Support for Capital Projects
- Critical Access Hospital Program
- Medical Access Plan
- Medication Assistance Program
- Community Health Grants Program
- Free software applications for determining eligibility, enrollment, resource commitments, referrals, care and disease management, tracking encounter claims data (CARES and CMIS) and accessing 140+ pharmaceutical manufacturers' free prescription drug programs and 3400+ drugs (MARP- Medication Access & Review Program)

