

Advantages To Offsite Hospital Pharmacy Procurement Centers

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Learning Objectives

- Explain at least two challenges of non-electronic clinic requisitioning.
- List at least three benefits of electronic clinic requisitioning.
- Identify at least two difficulties with fulfilling clinic requests in an Acute Care setting.
- Describe potential issues with rolling out a new electronic process.

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Clinic Procurement Overview

- 40 Primary Care sites.
- Over 150 Ambulatory Care offices.
- UR research departments and labs.
- One Full-Time Employee/Equivalent (FTE) dedicated to procurement.

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Clinic Procurement - The Old Way



- PAR level forms were created and maintained in Excel or Word.
- PAR level forms were faxed or sent via interoffice mail.

PAR: "Periodic Active Replacement"

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Audience Question

Can anyone provide an example of a potential challenge with filling orders via the processes described?

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Challenges

- **Formulary Changes:** Updating forms for multiple sites was time consuming, and old forms often still lingered in offices.
- **Missing requests:** Didn't you get our fax?
- **Delayed requests:** Snail-mail delays.

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Streamlined Requests

- We created an email distribution list to receive orders electronically via email.
- We moved all our ordering for clinics that use our eRecord system over to electronic ordering through our electronic medical record inventory platform.

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Communication Is Key

- We ensured attendance at Primary Care & Ambulatory Nursing committees to discuss our changes to electronic ordering.
- We sent out email reminders to distribution lists reminding everyone of our cutover date.
- We ensured extra staffing the first week we went live to help triage clinic questions.

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Benefits Of Electronic Ordering

- A clear timestamp of orders being received by our team.
- The ability to run reports in our eRecord system opposed to pulling manual paper requests to investigate previous orders.

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Benefits Of Electronic Ordering (continued)

- Clinics are now able to run their own reporting for expenses that were applied to ledgers related to procurement.
- The ability to adjust formularies across our primary care, and urgent care networks.
- Streamlined additions and removals enterprise-wide.

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Challenges With Electronic Rollout

- Ordering requires completion of an electronic learning module before access is granted.
- Sites continuing to send in paper PAR forms.
- General struggles of utilizing new technology for end users.

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Audience Questions

- How many sites have a **physical** inventory for their clinic stock?
- How many sites have a **virtual** inventory for their clinic stock?

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Challenges Of Physical Inventories In Acute-Care Pharmacies

- **Space:** The acute-care setting receives two full pallets of deliveries at a minimum each day.
- **Compliance:** Holding 340B or Group Purchasing Organization (GPO) stock in the acute-care setting presents a risk to a 340B compliance. Inventory on a designated shelf could accidentally be pulled for the acute-care setting.

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Solution

Move clinic procurement outside of the acute-care setting and into an offsite procurement center.

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Clinic Procurement: The New Way

URMC's Pharmacy Consolidated Services Center (CSC) houses three main services:

- 1) Infusion Center Compounding
- 2) Home Infusion Services
- 3) **Clinic Procurement**

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Challenges

- Wholesaler account setup: Pharmacy CSC location registered as a ship-to location in the Health Resources & Services Administration (HRSA).
- Acute Care vs. Retail Class of Trade (COT): Extension of the main acute-care hospitals. Not a retail pharmacy space.

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Additional Challenges

- Staff onsite at the medical campus were used to picking up requests and were often relying on inpatient Weighted Average Cost (WAC) inventory to help when they failed to order proactively.
- Move to offsite center increased turnaround time for on-demand requests.

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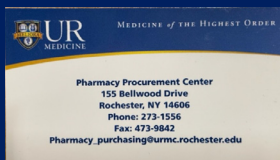
Communication Is Key

- Two months prior to our move to an offsite procurement center, we began attaching flyers to every order that our team filled to remind them of our move.
- We presented at Ambulatory & Primary Care Nursing committees the month prior to and during the month of our move.

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Communication Is Key (continued)

We created a business card magnet that provided our phone number and distribution-list email:



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Physical Inventories

Our CSC allows us to store five (5) different inventories for clinic procurement:

- 1) WAC Inventory
- 2) GPO Inventory
- 3) 340B Inventory for Strong Memorial Hospital
- 4) 340B Inventory for Highland Hospital
- 5) Non-Covered Inventory

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Physical Inventories (continued)

- Distinct physical inventories allow URMC to fill requests for individual meds or “eaches,” reducing waste in ambulatory offices.
- Onsite physical inventories allow for same day requests to be filled by using the appropriate inventory (GPO/340B) while reducing WAC expenses in the acute-care setting.

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Audience Question

May we see a show of hands for individuals who have trouble storing meds in their acute-care hospital?

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Strategic Sourcing

- Drug shortages continue to have a major impact on daily pharmacy operations.
- Establishing an offsite procurement center allows for strategic sourcing.

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Strategic Sourcing

(continued)

- Establish a ship-to account for offsite center with a bill-to of the inpatient acute care pharmacy.
- Establish an additional inventory location within our electronic medical record platform to track inventory perpetually.

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Strategic Sourcing Challenges

For the inpatient accounts utilized by the offsite center, purchasing medications such as Propofol aren't an option due to DEA address listing.

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Sourcing Example

- Heparin 100u/mL-250mL bags on backorder.
- Shortage caused URMC to begin compounding these bags while facing critical staffing shortages.

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Space Is Everything

- We were able to place backorders on multiple presentations and in high quantities.
- We built up a 45-day supply of our Average Daily Usage (ADU) at our procurement center.
- Once we achieved 45 Days on Hand (DOH), we stopped compounding and returned to a commercial product.

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Streamlined Deliveries

- Hospital couriers who deliver meds to ambulatory clinics no longer need to travel through the large med-center campus, and can easily retrieve orders for delivery.
- On-demand courier requests were expedited in less time due to the ease of access.

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Room To Grow

- As URMC continues acquiring or opening new practices, we've seen significant growth in the quantity of orders processed.
- This lead to an incremental FTE dedicated to procurement for both clinics and inpatient overstock.

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Advantages To Offsite Procurement Centers

- Physical space for clinic procurement inventories.
- Physical space for strategic sourcing of medications for acute care/inpatient pharmacy.
- Ease of accessibility for clinics and couriers.
- Increased space in acute-care setting.

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Any Questions?



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