

## 7 steps to cut your practice's medication management burden

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More than 133 million Americans have a chronic condition that requires long-term medication therapy, and more than half of us ingest four prescription drugs daily. These regimens are complicated by patients receiving prescriptions from multiple physicians while also taking over-the-counter medications.

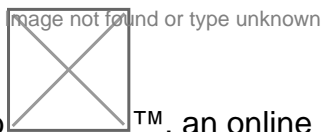
In just a short office visit, physicians must reconcile these medications, make sure they're being taken as prescribed and that prescriptions are refilled on schedule.

These tasks can be efficiently managed, however, through simplification, standardization and automation. A new AMA STEPS Forward™ module, "Medication Management: Save Time by Simplifying Your Prescribing and Refill Process," describes the components of a successful intervention, including:

- Adjustments to practice workflows.
- Creating and streamlining processes for reconciling medications.
- Ensuring that individuals are using the electronic health record (EHR) to its full potential.
- Having open dialogues with patients about adherence and with pharmacist colleagues about how to make the process easier for everyone.

The AMA STEPS Forward open-access modules offer innovative strategies that allow physicians and their staff to thrive in the health care environment. These modules can help you prevent physician burnout, create the organizational foundation for joy in medicine and improve practice efficiency.

The CME module is enduring material and designated by the AMA for a maximum of 0.5 *AMA PRA Category 1 Credit*. Learn more about AMA CME accreditation.



The module is part of the AMA Ed Hub™, an online platform with top-quality CME and

education that supports the professional development needs of physicians and other health professionals. With topics relevant to you, it also offers an easy, streamlined way to find, take, track and report educational activities.

By following the seven steps outlined in this free online module, practices can implement a medication management process that:

- | Reduces medication errors.
- | Improves patient safety.
- | Promotes better health outcomes.
- | Eases clinician workload.
- | Mitigates burnout by addressing aspects of medication management that overburden clinicians.

Here's how to get it done.

**Adopt annual synchronized prescription renewals and standing orders.** Eliminating frequent prescription renewals for chronic conditions is the first step to improving medication management. Hours can be saved every day by writing prescriptions so that a patient receives a 90-day supply filled four times a year.

Learn more with the STEPS Forward module, “Annual Prescription Renewal: Save Time and Improve Medication Adherence.”

Renewing prescriptions once a year is one of three overlooked ways to make your private practice more efficient.

**Create an accurate list by reconciling medications.** Medication errors can be reduced by knowing which medications patients take and when. After developing an accurate list—including name, dosage, frequency, and route—patients can use this list wherever they access the health care system.

Developing this list is a task that can be performed by a nonphysician member of the care team, including nurses, medical assistants, pharmacists or family members. It can be done by a physician, but this is not the best use of his or her time during the patient visit.

**Identify opportunities to deescalate therapy.** Unwarranted polypharmacy can lead to adverse drug events, suboptimal treatment regimens, incorrect or inadequate dosing, drug-drug interactions or poor adherence to a prescribed treatment regimen.

The module provides an algorithm to help decide if de-escalation is warranted using considerations such as potential benefits, potential toxicity, presence of symptoms and whether a potential benefit

from a drug is unlikely to be realized because of limited life expectancy.

**Determine whether patients are adhering to their treatment regimen.** Patients may hide nonadherence, and this can needlessly escalate therapy and lead to additional cost, wasted time and potential harm. It is important to ask about medication-taking behavior in a non-threatening, blame-free way. Patients may have good reasons for not taking their medications and should be reassured that they can be open about it without fear of being admonished.

**Streamline the prior-authorization (PA) process.** PAs can lead to care delays, treatment abandonment and negative clinical outcomes. Streamlining workflows to reduce the number of “touches” required for PA and implementing PA automation can save time. The module includes downloadable guidance on how to reduce PA burdens.

The AMA offers prior authorization resources to support reform, improve practice efficiency and provide data to highlight the need for change.

**Leverage your EHR to confirm refill data and save time.** Create customized commands to quickly insert standard text for commonly used phrases to improve the efficiency of documentation, ordering and prescribing. Leverage your knowledge of your patient panel to create defaults and set preference lists based on your most common prescribed medications, dosages and instructions.

Another AMA STEPS Forward module, “Electronic Health Record Optimization: Strategies for Thriving ,” offers further detail on maximizing the benefits and minimizing the burdens of the EHR.

**Coordinate with pharmacy colleagues to sustain your efforts.** Embedded pharmacists, for example, could be delegated responsibility for completing PAs. Pharmacists can also help coordinate the PA process—especially when prescriptions cannot initially be filled. They can contact patients when PAs are approved and prescriptions are ready. Medicare Part D plans reimburse pharmacists for reviewing medicines as part of medication therapy-management service.

Another STEPS Forward module offers more detail on embedding pharmacists into the practice.

Read more about how to make the pharmacist part of your practice’s team.