Kaiser Permanente medication management for CalPERS

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Kaiser Permanente

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Agenda

- Medication and pharmacy management overview
- Better care with Kaiser Permanente HealthConnect®
- Better value and clinical quality
Medication management continuum

- Evidence
- Evaluation
- Formulary Decision
- Into Practice
- Outcomes
Case study: Avastin for lung cancer—evidence shows lower dose is just as effective

AVAiL trial: PFS curves with bevacizumab at 7.5 mg/kg and 15 mg/kg

- Chemo + bevacizumab 7.5 mg/kg vs. placebo
  - Placebo + CG
  - Bev 7.5 mg/kg +CG
  - HR vs. placebo: 0.75
  - P = 0.0026

- Chemo + bevacizumab 15 mg/kg vs. placebo
  - Placebo + CG
  - Bev 15 mg/kg +CG
  - HR vs. placebo: 0.82
  - P = 0.0301

Manegold, Proc ASCO 2007, #7514
### KP HealthConnect: Beacon oncology protocols

Embedding evidence-based protocols into practice

<table>
<thead>
<tr>
<th>ID</th>
<th>Template</th>
<th>Description</th>
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<tbody>
<tr>
<td>268</td>
<td>CNCA ANAGRELIID</td>
<td>Anagrelide (AGRYLIN)</td>
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<tr>
<td>151</td>
<td>CNCA BLADDER CISPLATIN BEFORE AND WITH RT</td>
<td>CDDP(100)q21d x 2, then 3rd dose with xRT, M</td>
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</table>
Kaiser Permanente rapidly adopted the practice

Avastin efforts for lung cancer moved to 2.5 mg/kg/week* dosing (demonstrating increased use of the lower dose)

Avastin usage for lung cancer

*2.5mg/kg/week x 3 week treatment period = 7.5mg/kg
Doctors are the decision makers

Formulary decided by doctors based on analysis, clinical research, and pharmacist recommendations and expertise (Drug Information Services)

- **Track** new drug approvals by the Food and Drug Administration
- **Analyze** published drug literature, unpublished studies, and comparative prices of existing therapies
- **Study** drugs and patient outcomes using KP HealthConnect
KP HealthConnect: Medical history and all Rx’s
Click checkbox for SmartSet—includes preferred medications

**DISEASE MANAGEMENT REMINDER:** Patient is member of diabetes registry with poor glycemic control. ACTION: Adjust treatment plan to achieve home glucose measurements: pre-prandial blood sugars of 80-120 and post-prandial blood sugars <160 or lab FBS 90-130. Re-measure A1c in 8 weeks.

Last HbA1C=11.0 on 4/30/2007

No related orders found in patient record.

Open SmartSet: DIABETES TREAT TO TARGET TTT PCM SCAL
KP HealthConnect: Alternative medication alerts

**Alternative Selection**

Pioglitazone (ACTOS) 15 mg Oral Tab: 1 TAB PO DAILY. CHECK FBS BEFORE BREAKFAST DAILY. IF FBS ABOVE 120 AFTER 4 WEEKS, INCREASE TO 2 TABS PO DAILY. IF FBS STILL ABOVE 120 AFTER ANOTHER WEEKS, INCREASE TO 3 TABS PO DAILY. CALL MD IF FBS FALLS BELOW 80 OR STAYS ABOVE 120, Disp-100, R-3, Oral, starting 7/26/2012 until 7/25/2016, Fill Later

* Non-Formulary (30 mg and 45 mg strengths only) with Guidelines
* BOXED WARNING: Pioglitazone is contraindicated in patients with NYHA Class III or IV heart failure. Not recommended in patients with symptomatic heart failure. May cause symptoms of congestive heart failure. Monitor patients carefully for signs and symptoms. See prescribing information for complete BOXED WARNING
* Pioglitazone is not recommended in patients with bladder cancer (active or prior history)
* Combinations including metFORMIN plus glipiZIDE plus insulin are preferred over any use of pioglitazone due to potential side effects. Consider initiating (or titrating) NPH insulin instead of pioglitazone if the patient is not at their goal A1C despite treatment with optimal doses of metFORMIN and a sulfonylurea
* See link to Guidelines for use of pioglitazone for additional warnings and precautions
Example #1

SAFETY ALERT! Promethazine should always be avoided in people age 60+. Promethazine has potent anticholinergic and sedative effects which are not well tolerated by older adults. It is used in elderly members primarily for the treatment of cough/cold and allergy symptoms and there are many suitable OTC and Rx alternatives available. ACTION: Change to an alternative drug. See SmartSet for alternatives.

(No related orders found in patient record)

Open SmartSet: ELDERLY AND PROMETHAZINE (DSSC - SCAL)

Example #2

SAFETY ALERT: If a beta-blocker is indicated for patients with asthma, use a cardioselective beta-blocker at the lowest effective dose. ACTION: Open the SmartSet below for ordering.

Open SmartSet: ASTHMA AND BETA BLOCKER DSSC SCAL
Better value for medication management

- **Average monthly cost per member**
  - Fully Integrated Model: $38.72
  - California PPOs: $73.21

- **Average cost per prescription**
  - Fully Integrated Model: $56.78
  - California PPOs: $131.72

Source: PPO data from MarketScan, a service of Thomson/Reuters. As of June 2010.
Highest generic prescribing and highest clinical results

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<td>Annual savings</td>
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Rated #1 in California and top 10th percentile nationally
Antidepressant medication management and cholesterol control for patients with diabetes and cardiovascular disease

* Source: MedImpact
Setting the benchmark for medication and pharmacy management

HMO comparative performance: pharmaceutical management

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Source: eValue8™, a health plan performance tracking tool created by the National Business Coalition on Health, a nonprofit organization that represents more than 10,000 employers across the United States.
Questions?