

THE Medicine Cabinet

A newsletter from MEDPIN – Medicine For People In Need

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Issue 3

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Medpin
Medicine for people in need

Will YOU be Part of Medpin's First Annual Conference?

"Looking Back, Looking Ahead at Providing Medicine for Californians in Need".

Clinic administrators, health care providers, pharmacists, policy makers and others are invited to attend Medpin's First Annual Conference on Friday, May 3, 2002 at the Hilton Oakland Airport from 8:00a.m. – 3:30 p.m.

Conference Highlights:

LESSONS FROM KAISER: The conference begins with a presentation by Sharon Levine, MD, Associate Executive Director, Kaiser Permanente. Dr. Levine will address the impact of rising pharmaceutical costs for safety net providers and the strategies for improving cost-effectiveness. Conference attendees will learn how Kaiser's experiences can assist us in developing systems to control drug costs while maintaining high quality of care.

PURCHASING ALLIANCES TO LEVERAGE BUYING POWER: Larry Levitt, Vice President, Kaiser Family Foundation, will moderate a panel on government purchasing alliances to substantially reduce pharmacy costs for safety net providers.

USING AND IMPROVING PATIENT ASSISTANCE PROGRAMS: Refining strategies to maximize access to free drugs through drug manufacturers' patient assistance programs is the goal of many clinics. H. Denman Scott, MD, Director of Volunteers in Health Care (includes RxAssist), will share his national perspective on PAPs as they are used by safety net clinics. Additional presenters will share their experiences and expertise in developing systems to more effectively access PAPs.

NEW OPPORTUNITIES FOR PHARMACISTS: Pharmacists, clinic administrators and staff can learn more about legal requirements and joint responsibilities of the retail pharmacist and the clinic in forming contracts to dispense 340B drugs. Autumn Jennings of the Association for

Utah Community Health will share the experience of their fifteen clinics contracting with retail pharmacies.

HONORING OUTSTANDING SAFETY NET PROVIDERS AND STAFF: Join Medpin in honoring community clinics, county health systems and clinic consortia for their work in improving pharmacy management during our Awards Luncheon.

OPA PERSPECTIVE: Janet Aiso, PharmD, Consultant, Office of Pharmacy Affairs will close by providing an update on the current level of 340B participation nationwide. Dr. Aiso will also highlight issues of interest and possible concerns to OPA, and report on current or planned OPA demonstration projects.

CONNECT WITH COLLEAGUES AND NEW INFORMATION: Don't miss this opportunity to network with your colleagues, to meet people with different expertise but a shared vision, share experiences, and acquire practical tools and knowledge to reduce pharmacy costs and to improve care for vulnerable populations.

CEU FOR PHARMACISTS: Pharmacists can earn 5 contact hours (0.5 CEU). Additional \$20 for CEU credit.

ACCOMMODATIONS: Medpin is holding a block of rooms at the Hilton Oakland Airport. The group rate is \$149.00. Call (510) 635-5000 by April 2, 2002 to reserve a room at this guaranteed rate.

REGISTRATION DEADLINE IS APRIL 19, 2002.



Register online: www.medpin.org/conference.html

The New Drug Discount Cards: Will they affect PAPs? Your patients?

Find out by participating in the May Teleconference on Drug Discount Cards

Since the beginning of the year, Pfizer, Eli Lilly, GlaxoSmithKline and Novartis each have announced their own version of a drug discount card for low-income seniors. Who else might announce a discount card? Will these new programs help or hurt indigent patients and the drug companies' patient assistance programs? Learn the latest information and discuss implications for safety net providers and patients.

DATE: May 29, 2002

TIME: 10:00 a.m. – 11:00 a.m.

COST: No charge to non-profits

To register email
vevans@medpin.org

Telephone Conference Call CDs Available

If you missed the call on Learning About Generic Drugs: Increasing Utilization Without Compromising Quality of Care, we have a limited supply of data CDs available. (Data CDs can be listened to only on a computer, not on a CD player.) To order a free single CD, email vevans@medpin.org.

Rx For Wellness

Prescription drugs, supplements, and dietary approaches to control high cholesterol

RX

Several recent studies examine the effects of "statin" drugs (Lipitor, Zocor, Mevacor), niacin drugs, and antioxidants (vitamins C and E, beta carotene, and selenium) in lowering high cholesterol among people who already have coronary artery disease and low HDL. What can these studies tell us about people in this group, plus possibly people with high cholesterol but no heart disease?

Combining a statin with niacin is a relatively new idea. These new studies suggest it's a good way to raise low HDL, lower total cholesterol, and reduce the risk of coronary artery disease. However, note that at least one of the statin drugs

has a potentially severe reaction when taken with niacin, which should be discussed with the prescribing physician.

Providers should talk with patients who are taking niacin and a statin plus antioxidant supplements about discontinuing the antioxidants because they may be blunting some of the drugs' effects.

Currently there are no studies of only antioxidants and statins, but such studies are underway. If someone is taking only antioxidants, that cannot be expected to lower total cholesterol or raise HDL.

For more information about these studies, visit: www.wellnessletter.com.

DDP Finishes Its Second Year

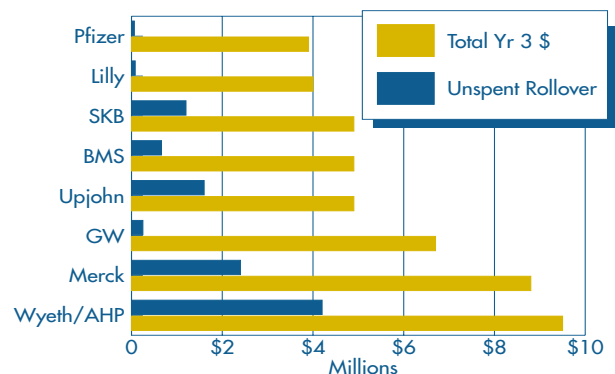
The PIC-Drug Distribution Project (DDP) finished its second year on March 31, 2002, giving 236 California safety net clinics a chance to order prescription drugs at no cost. Thanks to the following drug companies for working with the DDP to provide clinics with brand name products for their indigent patients:

Abbott	Novartis
AHP	Ortho-McNeil
Boehringer-Ingelheim	Pfizer
Bristol-Myers Squibb	Rhone-Poulenc Rorer
Carter Wallace	Roche
Dupont	Schering-Plough
Eli Lilly	Searle
Glaxo-Wellcome	SmithKlineBeecham
Hoechst-Marion Roussel	Upjohn
Janssen	Warner Lambert
Knoll	Zeneca
Merck	

Eli Lilly, and GlaxoWellcome have low rollovers because they have offered DDP participants valuable products with few ordering restrictions. Companies such as Merck and AHP (now Wyeth) have high rollovers from previous years because they have refused to offer sufficient amounts of their valuable products, resulting in significant unspent amounts to date.

Medpin is working with all DDP participant companies to maximize the program's value to indigent patients while minimizing the companies' administrative costs. At Medpin's Annual Conference in Oakland, safety net providers will announce special awards recognizing those pharmaceutical companies whose DDP participation has been especially constructive bringing outstanding benefit to California's indigent patients.

The DDP begins its final year with a total of \$73 million of participating companies' products. The graph shows those companies that have committed the largest amount of their products to the DDP's final year (yellow bar). It also indicates striking differences within this group of companies in their amount and proportion of rollover from previous years (blue bar). Companies such as Pfizer,



Community Clinic Achieves Big Savings Purchasing Through 340B

How has Asian Pacific Health Care Venture, Inc. in Los Angeles reduced its drug costs? This clinic pays for primary care medications for the majority of its patients. Approximately 83% of medical encounters are uninsured. 90% of their patients speak little or no English. The Clinic provides services in Thai, Cambodian, Chinese (Cantonese and Mandarin), Japanese, Lao, Pilipino (Tagalog) and Spanish.

Obtain a Board of Pharmacy Clinic Permit

Dominic Koh, NP, realized that the clinic could reduce its spending on medications if they operated an in-house dispensary. The clinic obtained a permit and since November 1999, APHCV has been getting discounts available through the federal 340B program. Currently, the clinic is purchasing through Cardinal's 340Better program. Koh reports that he initially tried to go through other wholesalers and directly from the manufacturers, but Cardinal has proved to be a reliable single source. Ordering has been easy through the Internet or through a computer and software provided by Cardinal.

The clinic is now dispensing about 200 prescriptions per day. Dispensary staff includes an RN, an LVN and clerk. Drug

expenditures are approximately \$20,000 per month.

In addition to dispensing drugs purchased by APHCV, the dispensary stocks medications obtained at no cost through the PIC-Drug Distribution Project (DDP). Koh reports that his DDP orders concentrate on the more costly, brand name medications, resulting in considerable savings. The clinic supplements its drug purchases and DDP drugs with drug manufacturers' patient assistance programs (PAPs).



photographer: Abraham Ferrer

Koh estimates that 50% - 60% of their patients are utilizing PAPs. One FTE staff person is responsible for oversight of PAPs, saving the clinic \$15,000 to \$20,000 per month. Koh found that paying for a commercial software program was not as cost effective as hiring a staff person to do the PAP work.

Koh advises other clinics considering operating a dispensary for 340B purchases and DDP drugs to "Start slow. Limit your formulary in the beginning. Select one or two of the most commonly used drugs in each category."

Future Plans:

What will Asian Health Care Venture, Inc. do when the DDP ends? Koh responded that the clinic would have to scale back its formulary and increase their efforts to secure drugs through PAPs and drug samples.

Best Buys

for April 2002

Check the Medpin website at www.medpin.org for Best Buys for April.

Most pharmaceutical manufacturers update their prices each quarter of the calendar year. Since April is the start of the new quarter, prices were not available at publication.

Give Us Your Two Cents About the \$170 Million DDP

How has the PIC-Drug Distribution Project (DDP) affected your clinic? What aspects of the DDP have worked well for you and your clinic's indigent patients—and what have not? As we look to the last year of the DDP, it's time to let the participating pharmaceutical companies, interested public officials, and health care providers know how the DDP has affected staff and patients at your clinic. We will be sending an e-mail to all DDP participants asking about the impact of the DDP on your clinic and the patients you serve.

We will collect all the responses we receive and publish a selection of them in a handout distributed at Medpin's May 3rd Annual Conference in Oakland. You can help Medpin let the public and interested groups know about the impact of the DDP, California's unique indigent drug program.

Announcing the Arrival of New FAQs on the Medpin Website

Check out the latest additions to our website at www.medpin.org. We have expanded our **Free and Low Cost Drugs** section to provide you more quickly and efficiently with the information you're seeking.

Under the **340B Discount Program**, you can find answers to questions such as: What is the 340B Drug Pricing Program? Which clinics are eligible and how does my clinic enroll?

Under **Buying Groups**, you'll see answers to questions such as: What are the options for purchasing 340B drugs? What is a buying group and how do I join?

Finally, whether you were unable to attend our

recently completed training workshops, or simply want to check on something you heard there, you can go to **Contract With an Outside Pharmacy** to learn about this new possibility for California clinics dispensing drugs purchased through 340B. There are answers to questions such as: Who owns the 340B drugs? What is a ship to/bill to arrangement? How does a clinic establish its initial inventory? This section also includes a Model Contract that can be used as a starting point for California clinics and pharmacies seeking to develop a business relationship in which that pharmacy dispenses drugs purchased through 340B by that clinic.

Return Service Requested

PLEASE ROUTE TO:

- ____ **Executive Director**
- ____ **Medical Director**
- ____ **Clinic Manager**
- ____ **Nurse Manager**

www.medpin.org • 510.302.3341 • info@medpin.org

340B Coalition Conference in DC

Many of Medpin's education and training programs have focused on the Public Health Service's 340B drug discount program, so it's not surprising that Medpin works closely with the Washington DC-based 340B Coalition, an organization of 340B providers and programs such as public hospitals, community health centers and state health departments throughout the U.S. The Coalition was formed to address various policy and implementation issues related to this important program. You can get the latest information and strategies related to 340B at the Coalition's 6th annual conference in Washington, DC, July 15-17. The conference will focus on the 340B Program, and also will explore other issues confronting providers serving uninsured and indigent patients. Attendees will get an inside look at the national discussion on drug pricing issues from members of Congress, the Bush Administration, and state governments. There will be "basic" classes on the 340B program as well as

in-depth training on various 340B implementation issues, drug company patient assistance programs and other cost saving measures. Officials from the U.S. Office of Pharmacy Affairs and from some state Medicaid programs will be available to answer your questions.

Medpin will again offer a dinner for California conference attendees on Monday, July 15th. This will be a chance for people to come together on the first night of the conference for informal conversation, sharing of ideas and information, and perhaps discussion of conference topics of particular relevance to California or West Coast attendees. For a detailed conference agenda and registration information, visit www.phpc-rx.org or contact Nitin Sud at nsud@naph.org or 202-585-0108.

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