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AmerisourceBergen



From prescription pick-up to personalized care: The evolution of A1C testing in the Pharmacies

Gold Eneyo, Director - Clinical Pharmacy Services, AmerisourceBergen

As the prevalence of diabetes continues to rise globally, the need for accessible and efficient monitoring tools becomes increasingly paramount. A crucial metric in managing diabetes is the A1C level, which reflects average blood sugar levels over the past two to three months.

Traditionally, obtaining an A1C measurement required a visit to the doctor's office or a laboratory, but advancements in technology and healthcare services have made it possible for individuals to conveniently capture their A1C levels at the pharmacy. Pharmacies can offer point-of-care testing such as A1C with a CLIA waiver, states may have additional requirements.

Pharmacies are evolving into more than just places to pick up medications but a healthcare destination. Many pharmacies are now offering point-of-care A1C testing, providing patients with the convenience of monitoring their diabetes right where they pick up their medications. This shift saves time, reduces the burden on healthcare facilities, and empowers patients to take control of their health through regular monitoring.

To implement a point-of-care testing service in the pharmacy, adjustments must be made to workflows and pricing structures since this service is primarily cash-based. Additionally, developing a marketing plan and integrating A1C testing with comprehensive counseling services allows pharmacies to adopt a holistic approach to diabetes care.

Here are 3 things pharmacies can do today to start offering point-of-care testing

- Understand state regulations around offering CLIA-waived tests
- Review our Point of care testing curriculum on [Good Neighbor Pharmacy](#) University

- Order A1C test or other CLIA waived test on [ABC Order](#)

If you require assistance with implementing point-of-care testing, workflow, CLIA waiver or marketing, please get in touch with your Business Coach or reach out to clinicalolutions@AmerisourceBergen.com.

CDC plans to drop 5-day COVID isolation guidelines

Lena Sun, The Washington Post, February 13, 2024

Now that most Americans have built up at least some level of immunity to COVID-19 and fewer people are dying or being hospitalized because of the disease, health officials are pulling back from pandemic-era infection control measures. CDC intends to scrap previous recommendations that people stay home from school and work for 5 days after testing positive for coronavirus. Instead, it will ask the public to use clinical symptoms to determine when they should come out of isolation. Specifically, there would be no need to quarantine after going at least 24 hours with no fever, unaided by medication, and as long as symptoms are mild and getting better, according to agency officials familiar with the discussions. The new recommendations would not apply to hospitals or other health care environments with high-risk populations, CDC emphasized. The proposal, which follows similar policy changes in Oregon and California, still needs sign-off from the White House.

[Read more](#)

Advocacy

States target health insurers' 'prior authorization' red tape

Bram Sable-Smith, KFF Health News, February 12, 2024

Christopher Marks noticed an immediate improvement when his doctor prescribed him the Type 2 diabetes medication Mounjaro last year. The 40-year-old truck driver from Kansas City, Missouri, said his average blood sugar reading decreased significantly and that keeping it within target range took less insulin than before. But when his doctor followed the typical prescribing pattern and increased his dose of Mounjaro — a drug with a wholesale list price of more than \$1,000 a month — Marks' health insurer declined to pay for it.

[Read more](#)

Reminder of new enforcement of Medicare Part B enrollment provisions

NCPA, February 12, 2024

Effective in January, CMS made regulatory changes to the Medicare Program Integrity Manual chapter on enrollment in Medicare Part B, which has implications for pharmacists involved in point-of-care testing, mass immunizers, DMEPOS, and diabetes prevention. Namely, CMS defined “authorized official” for who can enroll in Medicare Part B, indirect ownership, and reporting requirements of indirect owners.

[Read more](#)

Rising syphilis cases alarm U.S. experts

Ethan Covey, Pharmacy Practice News, February 08, 2024

Cases of syphilis are rising across the United States at an alarming speed, reaching levels not seen since the mid-20th century, according to a new CDC report.

Syphilis infections, including infectious, latent and congenital cases, have increased by 80% during the past five years, and rose 17% during 2022 alone.

[Read more](#)

Labeling will change for two cholesterol-lowering medications

Dr Marie Sartain, American Pharmacists Association, January 08, 2024

Effective immediately, FDA has changed the labels on two medications used to bring down LDL cholesterol levels: bempedoic acid (Nexletol) and bempedoic acid/ezetimibe (Nexlizet).

The new language identifies treatment of primary hyperlipidemia “as a qualifier for existing approved populations” and removes a requirement that patients reach their highest tolerated statin dose before initiating bempedoic acid.

[Read more](#)

Finding loose change in your genes

NCPA, February 13, 2024

Pharmacogenomics takes into account all the ways DNA affects the way we respond to drugs. Sometimes that means a bad reaction to a drug that can signal trouble, and sometimes that means a productive reaction that can help you heal. On Feb. 21, join an important Rapid Relief Revenue webinar titled “Unleashing the Potential of Pharmacogenomics.” In this can’t-miss session, you’ll learn how to implement PGx services in your pharmacy and boost the health care of your patients by improving outcomes and increasing clinical service revenue – all without overhauling your pharmacy.

[Read more](#)

Central Pay closure: Presidents’ Day 2024

Due to the Presidents’ Day holiday, no payments will be released on Monday, February 19, 2024. Because the Federal Reserve Bank will be closed, no ACH transactions can be processed on this day. In addition, any funds released on Friday, February 16 may not settle with your bank until Tuesday, February 20, because the Federal Reserve Bank does not operate on the holiday. Central Pay will resume our daily release schedule on Tuesday, February 20, 2024.

Drive OutcomesOne performance utilizing MTM Performance Metrics

Jim McCaslin, Sr Mgr. - Pharmacy Quality Performance, AmerisourceBergen

Your OutcomesOne MTM Center (pharmacy or practice site) is assigned a score between 0 and 5 (5 being the highest) based on your CMR and TIP completion rates to evaluate how well MTM providers perform compared to one another. Based on performance in the evaluation categories, MTM Centers are measured on a curve against all other MTM Centers. Each MTM Center that has at least one primary TIP or CMR opportunity or has completed a service for a non-primary patient is assigned a MTM performance score.

MTM performance metrics on your Dashboard display the MTM performance score, percentile rank and opportunity completion rates for your MTM Center. These performance metrics will update on your Dashboard weekly and represent activity year to date for the current calendar year.



Performance score & percentile rank = how your MTM Center (pharmacy or practice site) is performing compared to all other MTM Centers. Scores are measured on a curve using a scale of 0 (lowest) to 5 (highest) based on successful outcomes for CMR and TIP opportunities for primary and non-primary patients. Percentile is measured on a scale of 1% (lowest) to 99% (highest). Example: 75% indicates that pharmacy is performing better than or equal to 75% of participating pharmacies.

TIP completion rate = percentage of TIP opportunities your MTM Center completed with a successful outcome over total primary opportunities* that were available to your MTM Center for more than 7 days plus any successfully completed opportunities for nonprimary patients.

CMR completion rate = percentage of CMR opportunities your MTM Center completed with a successful outcome over total primary opportunities* that were available to your MTM Center for more than 7 days plus any successfully completed opportunities for non-primary patients.

To improve performance results, work from the top of your MTM Opportunities queue on the Dashboard, which prioritizes patients.

Elevate Pharmacies can enroll in OutcomesOne at www.Outcomesmtm.com. If you need assistance, please contact your Business Coach or pharmacyperformance@amerisourcebergen.com.

ThoughtSpot generics rebate deadline is March 31

[ThoughtSpot 2024](#) takes place at the Marriott World Center in Orlando, Florida, July 24-27, 2024. Check out the schedule and register today.

Get up to a 4% rebate

Once again, we will be offering the generics rebate. Register before March 31, 2024, and you may be eligible to receive up to 4% off of rebatable generics purchases made between April 1, 2024, and June 30, 2024.*

[Register today and save!](#)

** Subject to meeting the applicable requirements in the ThoughtSpot 2024 Generics Rebate Terms and Conditions. To be eligible and maximize your generic rebate, when utilizing multiple locations/stores, each person must be associated to a unique account number.*

Elevate Provider Network Outcomes opportunities

Outcomes opportunities:

Below are current MTM revenue opportunities available to Elevate Provider Network pharmacies through the Outcomes platform as of February 14, 2024:

Total Outcomes CMR opportunities as of 02/14/24: **45,861**

Potential revenue for the following CMRs: **\$2,672,670**

Additional information regarding Outcomes opportunities can be found on the [Outcomes](#) website.

Contracts

Contracts Received

- SmithRx - Specialty Pricing Amendment - Received 2/14/24

Top MAC cases

Each week the Elevate MAC Team analyzes millions of InSite claims, identifying which ones will represent the highest potential financial impact to our members. Although a representative claim might be submitted on behalf of a single Elevate Provider Network pharmacy, the impact may be seen by all our members.

Product Name	NDC	Effective Date	Group	Payer
CLARAVIS 20 MG CAPSULE	00555105586	02/8/2024	COS	Optum Rx
FLUTICASONE PROP 50 MCG SPRAY	60505082901	02/13/2024	BAZMAPD	Catamaran
FLUTICASONE PROP 50 MCG SPRAY	60505082901	02/13/2024	EMMEDD1	Optum Rx
LIDOCAINE 2% VISCOUS SOLN	62135071242	02/13/2024	RXMEDD	Optum Rx
LOSARTAN POTASSIUM 100 MG TAB	65862020330	02/7/2024	MITGEN	Catamaran
METHAZOLAMIDE 50 MG TABLET	62559024101	02/13/2024	PDPLCE1	Optum Rx
METOPROLOL SUCC ER 50 MG TAB	68001050103	02/8/2024	EGWPS032	Catamaran
MOUNJARO 10 MG/0.5 ML PEN	00002147180	02/7/2024	UHEALTH	Optum Rx
NORETHINDRONE 0.35 MG TABLET	68180087673	02/7/2024	CODRPLAN	Optum Rx
PANTOPRAZOLE SOD DR 40 MG TAB	31722071310	02/7/2024	LGALHCGRP	Catamaran

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Visit the MAC Action Center in the Solutions Portal for a complete list of all MAC Cases with favorable outcomes.

Elevate Provider Network

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Elevate Help Desk:

Hours: Monday through Friday, 6:00 am PST - 5:00 pm PST

Phone: (888) 880-1388

General Fax: (833) 765-4454

Email: elevate@amerisourcebergen.com

Advocacy: <https://www.wearegnp.com/advocacy>

Outcomes: (515) 237-0001 or www.outcomes.com

Expo Rx Prescription Savings Card: www.wearegnp.com/expo-rx-prescription-savings-card

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