

# Analyzing the Process of “Simple” Prescription Renewal

Team: Maureen Roccia RN, Amanda Yano MS, Dr. James Hennessey MD

## Introduction

Over a period of twelve months, beginning 1/3/17 and ending 12/29/17, we looked at the process of prescription renewals, in order to improve efficiency.

## Goal

To improve efficiency by identifying obstructions to renewing prescriptions in a timely way.

## Definition of Terms

- **Scripts Processed:** Prescriptions that were either queued to the doctor or the need for a prescription was e-mailed to the doctor.
- **Duplicates:** Duplicate faxes of prescription renewal requests from pharmacies.
- **Pharmacy Error:** A prescription request from a pharmacy when there is an existing prescription in place with adequate refills.
- **Joslin Patients:** Patients that see their endocrinologist at Joslin, not BIDMC.
- **Patient Error:** A patient requests a prescription renewal when adequate refills are in place for the indicated prescription.

## Interventions

1. The process is initiated by an awareness of the need for a prescription renewal. The prescription renewal request is transmitted from the pharmacy or patient, by phone, fax, e-mail, or in person.
2. The patient must be identified in the OMR.
3. The prescription renewal request is compared to the medication list and latest prescribing doctor's note in the OMR. All should agree in brand (if “no substitutions”), dose, frequency and special instructions.
5. Mail order vs local pharmacy: A mail order pharmacy requires a dispense of 90 days, with two extra weeks to allow for shipment time.
6. At a local pharmacy, the medication is prescribed for 30, 60 or 90 days, dependent on the insurance. A local pharmacy can “retrieve” a prescription from another local pharmacy as long as refills are still available.
7. Once all these parameters are reviewed, a prescription can be queued to the prescribing doctor, if there are insufficient refills until the next appointment. If there are sufficient refills, the pharmacy is contacted to determine the problem.
8. If there is no f/u appointment, a new appointment needs to be scheduled. If the patient has been contacted several times to make a f/u appointment, and has not made one, and it has been greater than a year since the last attended appointment, then the patient is informed that he should get his next renewal from his PCP.

### The Team:

Maureen Roccia RN

Amanda Yano MS

24 Endocrinologists & 4 Fellows

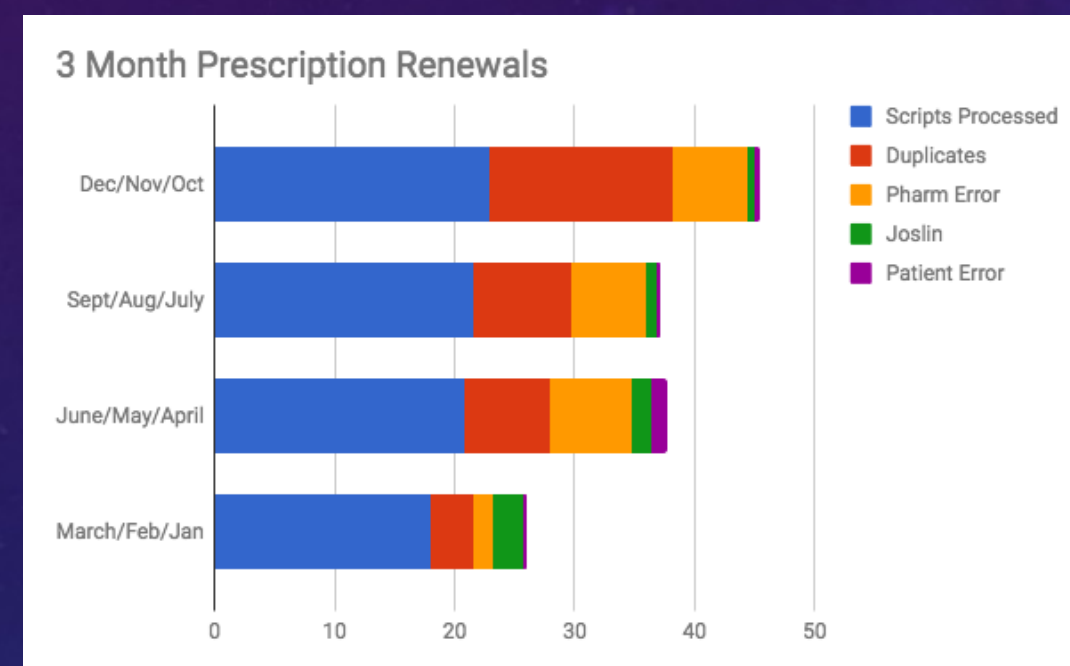
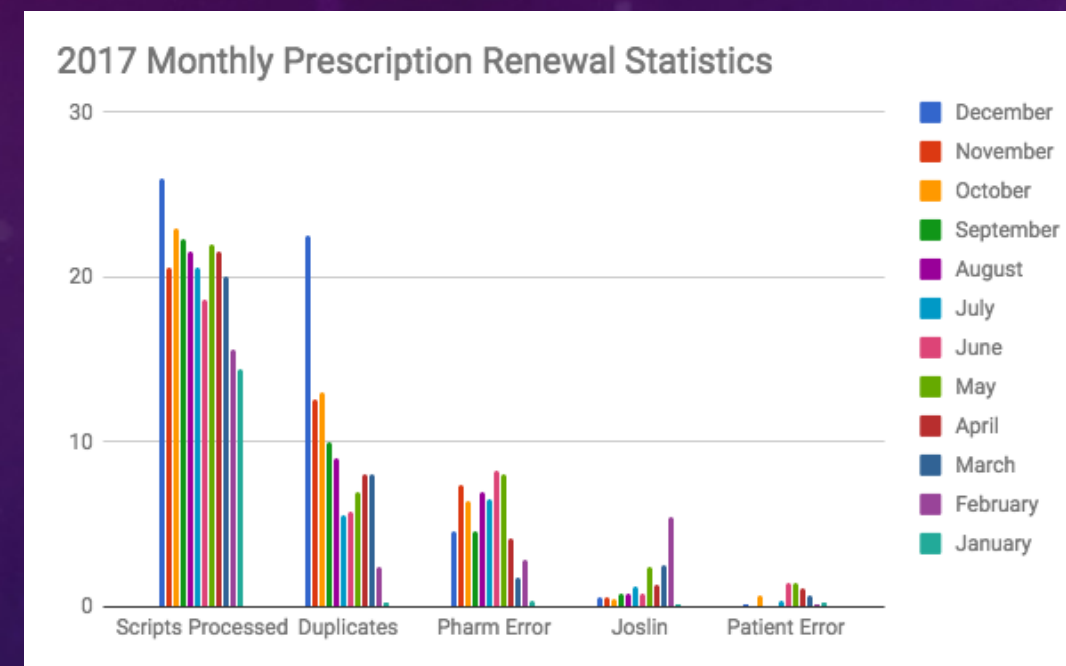
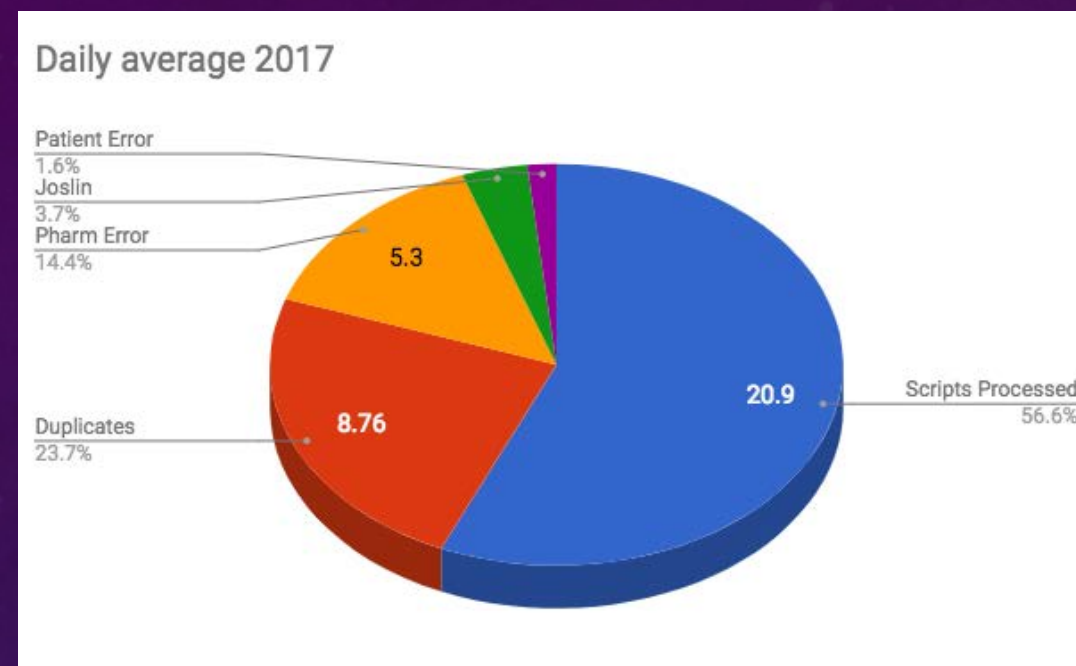
6 Endocrinology Office Staff & 6 Endocrinology Clinic Staff



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## Progress to Date



## Lessons Learned

Time is lost with:

- Processing excessive prescription requests
- Sending the same prescription to more than one local pharmacy or calling a local pharmacy to “retrieve” a prescription for a patient.
- Identifying pharmacy errors.
- Eliminating unnecessary duplicates.
- Faxing prescription requests to Joslin and the originating pharmacy
- Contacting patients and administrative assistants to make f/u appointments
- Finding patients with a different name than in the OMR, no birthdate, no record in the OMR (Joslin patients), or poorly transmitted information.

## Next Steps

- Place signage in the waiting room reminding patients to ask their doctors to renew their medications at their appointment.
- Educate the patients to ask the new local pharmacy to “retrieve” a prescription from the last local pharmacy used.
- Educate the patients to call the pharmacy and speak to a pharmacy technician when an automatic program denies a refill request.
- Continue to work with the doctors to encourage the renewal of prescriptions at the appointment.
- Capture more patients at checkout to make f/u appointments.
- Educate patients to be aware of the insurance limitations on the frequency of prescription refills at a local pharmacy.

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