

MULTIDISCIPLINARY DOCTOR-PHARMACIST COLLABORATION IN THE MANAGEMENT OF REFUNDS POLICIES OF OPHTHALMIC DRUGS AT SANT'ANDREA HOSPITAL , VERCELLI

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| WHEN | Study, launched on November 2018 and still ongoing |
| WHO | All patients undergoing treatment with ranibizumab were involved |
| WHERE | Ophthalmology-Department and Hospital Pharmacy |
| WHAT | Retrospective and prospective study about ophthalmic treatments Weekly meetings, during which the pharmacist presents data relating to the therapies and discuss about problems encountered |
| WHY | Because of difficulty of health personnel in managing the entire drug process to verify any non-refunds or incorrect prescriptions and to guarantee a better allocation of available resources |

We use an Exell file to identify main problems:

- ✓ 400 prescriptions paper-based and without AIFA registration (as it should be),
- ✓ use of paper-based AIFA requests (failure to register the new therapy in patients already sign-in for other diseases or drugs),
- ✓ failure to transfer 4 patients from other centers
- ✓ patients incorrect data

Out of 179 patients treated, 175 dispensations were identified and registered *ex novo*, involving in:

- 43 requests for reimbursement** (obtained from paper-based request),
- registration of 4 patients**
- inclusion of 6 previously unsolicited treatments**
- correction in 6 medical records**

All folders have been registered on AIFA-platform with consequent request of 43 refunds as Payment by Result equal to **26.337.586€** (15.312.55€ derive from 25 dispensing requests emerged thanks to the retrospective control carried out in November 2019).

In Official Gazette n.45 of 23-02-2017, capping agreement introduces, for each eye, the refund of drug's cost following the seventh treatment in naïve patients. The team agreed to continue monitoring prescriptions and this resulted in a saving of about **40.500€** from the request for 90 refunds as a bonus.

On 8th October 2019, AIFA introduced simplified multi-drug monitoring register so the pharmacist does not have to dispense drugs and there are no refunds. Collaboration clinicians-pharmacist is still ongoing and is monitoring the correct transfer of patients from the old to the new register.

It can be deduced that a figure dedicated to the management of drugs can guarantee clinical and economic drug administration, ensuring greater appropriateness and better allocation of resources.

