Impact of Specialty Pharmacy Collaboration with Rheumatology Clinics to Improve the Achievement of Treat-to-Target Goals in Patients with Rheumatoid Arthritis

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BACKGROUND

Treat to Target (TTT) Strategy in Rheumatoid Arthritis (RA)

- Identify a therapeutic target or goal for the individual patient
- Choose how to assess and when to assess the target
- Change course if the target is not achieved

RAPID3 (Routine Assessment of Patient Index Data 3) Assessment Tool

- Endorsed by guidelines to predict disease control
- Consists of patient-reported answers to a questionnaire that addresses quality of life, pain intensity and global health

Specialty pharmacists are routinely in contact with patients. To assist in management of rheumatoid arthritis patients, Baylor Scott & White Specialty Pharmacy (BSWSP) collaborated with rheumatology clinics and collected RAPID3 responses in accordance with recommendations from clinical guidelines.

OBJECTIVE

To evaluate whether the utilization of specialty pharmacy services (more frequent patient outreach calls for those who have high/moderate disease severity, and provider referral for those who had worsening of disease) led to improved RAPID3 scores.

METHODS

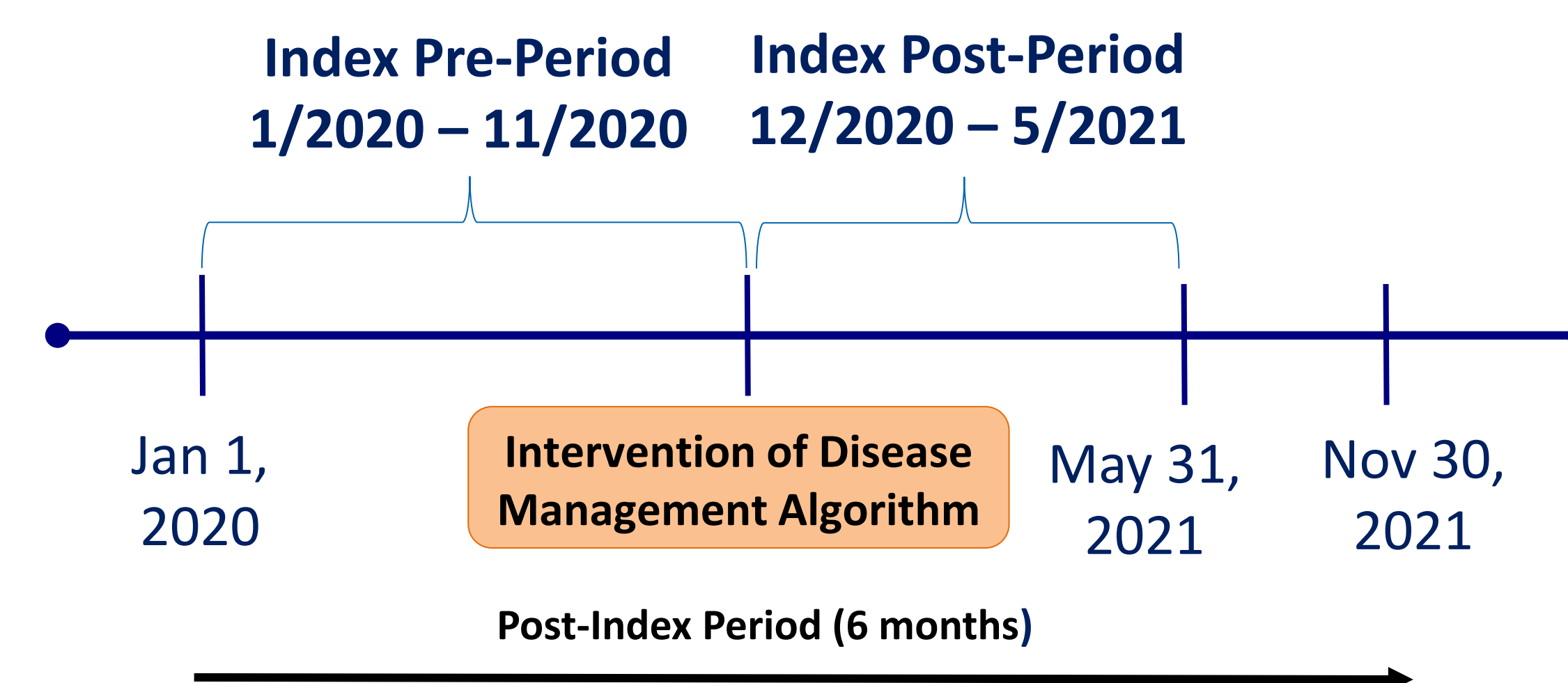**Design:** Quasi experimental, pre-post intervention study

Data Sources: Electronic health record (EHR) data, Specialty Pharmacy Clinical Tracking software

Inclusion Criteria

• ≥18 years of age
• Newly starting or restarting biologic therapy
   • First filled prescription at BSWSP between Jan 2020 – May 2021
   • At least 3 months of fill data for that prescription
• Treated at Baylor Scott & White Rheumatology clinic

METHODS

Study Period

Index Pre-Period 1/2020 – 11/2020
Index Post-Period 12/2020 – 5/2021

Jan 1, 2020

Intervention of Disease Management Algorithm

May 31, 2021

Nov 30, 2021

Post-Index Period (6 months)

- Patients were separated into groups based on index date (first fill date) for each new medication started.
- 6-month follow ups were completed for all patients.

Primary Outcome: Pre- and Post-Period Difference in the proportion of patients achieving low severity or remission in the RAPID3 assessment score within six months of the index date

Data Analysis: Descriptive statistics were performed

BASELINE CHARACTERISTICS

	Pre-Intervention Period (n=7)	Post-Intervention Period (n=10)
Age, Mean	52.4	56.7
Sex, Female, n (%)	7 (100)	7 (70)
Race, White, n (%)	5 (71.4)	10 (100)
Previous Therapies, Mean	1.3	1.2
Years since Diagnosis, Mean	3.4	4

RESULTS

Disease Activity Level	Pre-Intervention Period (n=7)		Post-Intervention Period (n=10)	
	Baseline	6 Month Post	Baseline	6 Month Post
Moderate/High	6 (86%)	6 (86%)	10 (100%)	7 (70%)
Low/Remission	1 (14%)	1 (14%)	0 (0%)	3 (30%)

Change in RAPID3 Disease Category	Pre-Intervention Period (n=7)	Post-Intervention Period (n=10)
Improved	2 (29%)	4 (40%)
No change	4 (57%)	4 (40%)
Worsened	1 (14%)	2 (20%)

- 86% of patients in the pre-intervention group (n=7) compared with 100% of patients in the post-intervention group (n=10) had high/moderate disease activity at baseline.
- Within a 6-month follow-up period in both groups, the percentage of high/moderate disease activity patients remained the same in the pre-intervention group and decreased by 30% in the post-intervention group.
- 40% of the post-intervention group improved in disease activity category level.

CONCLUSIONS

Disease activity scores improved in RA patients participating in more frequent collection of RAPID3 score and standardized provider communication by the specialty pharmacy, although this analysis is limited by the small sample size. These results support the positive impact increased specialty services may have on patient health outcomes; pharmacies should continue to expand and track outcomes of these initiatives.

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DISCLOSURES

Authors of this presentation have no disclosures concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation.