## Fundamentals of Managed Care Pharmacy 3<sup>rd</sup> Edition

Module Descriptions and Learning Objectives

Module 1: Evolution a	nd Principles of Managed Care
Contact Hours	0.75
Activity Overview	Understanding the evolution of managed care pharmacy is important to understand the current marketplace. This module delves into the history of managed care and its progression to current practices, the different care delivery models and how each one works to provide patient access to care. This includes discussions of health maintenance organizations (HMOs), preferred provider organizations (PPOs), point-of-service plans (POS's), integrated delivery networks (IDNs), high deductible health plans (HDHPs), and a la carte benefit models.
Learning Objectives	<ul> <li>At the completion of this activity, participants should be able to:</li> <li>Describe the history of health insurance in the United States.</li> <li>Identify the goals of managed care in terms of patient care, outcomes, and costs.</li> </ul>
	ted for both pharmacists and pharmacy technicians. Through a peer review

Module 2: Pharmacy Benefit Management Tools		
Contact Hours	0.75	
Activity Overview	How do pharmacy benefits meet the demands of balancing safety, effectiveness, and accessibility of drug products while also ensuring that the most cost-effective treatment options are used appropriately in the service of optimal health outcomes? This module discusses various management strategies and tools used in the management of pharmacy benefits.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	Discuss common strategies used to manage the cost of medications and access to medications in a pharmacy benefit.	

•	Recognize how various drug cost and utilization management strategies can be combined to design a customized pharmacy benefit.

Module 3: Behind the 5	Scenes: Getting Medications to Patients Through the Pharmacy Benefit	
Contact Hours	0.75	
Activity Overview	This module explores the behind-the-scenes of coverage, prescribing, claims and adjudication processes. Participants will learn about the invisible steps and data exchange that culminate into a filled prescription, ready for pick up. Differences between traditional and electronic prescribing, the use of claims analysis and edits, and the importance of data exchange and reporting are some of the concepts discussed in this module.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	<ul> <li>Describe the insurance coverage and benefits and its various components and participants.</li> <li>Summarize the difference between traditional paper prescribing and electronic prescribing.</li> <li>List the steps involved in adjudicating a prescription drug claim.</li> </ul>	

Module 4: Developing and Managing the Drug Formulary		
Contact Hours	0.75	
Activity Overview	The drug formulary, or preferred drug list, is a listing of drugs covered by a payer such as a health plan or pharmacy benefits manager - and is the backbone to understanding managed care pharmacy. There is extensive work done to prepare and review each medication added to the formulary. This module will detail what a formulary is and how a Pharmacy and Therapeutics Committee develops and maintains a formulary.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	<ul> <li>Explain what a drug formulary is and how it is developed and maintained.</li> </ul>	

•	State the composition, role, and responsibilities of a Pharmacy and
	Therapeutics (P&T) Committee.
•	Summarize the process that begins with the identification of a likely
	new drug approval and culminates in a formulary decision about the
	drug.

Module 5: Trading Partners and Flow of Money in Managed Care Pharmacy		
Contact Hours	0.75	
Activity Overview	The health care of the United States is both unique and complex. It has both state and federal oversight, and many stakeholders must work together to ensure the systems work to get medications to patients. This module also explains the "flow of money" between these stakeholders and how specific fees are calculated.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	<ul> <li>Identify the various stakeholders involved with the prescription drug benefit.</li> <li>Explain how managed care organizations determine pharmacy reimbursement for drug products and associated dispensing fees.</li> </ul>	

Module 6: Understanding Pharmaceutical Manufacturer Discounts and Rebates		
Contact Hours	0.75	
Activity Overview	Managed care organizations and pharmaceutical manufacturers work very closely to negotiate drug prices. There are a few different types of price concessions that can help both organizations in the long run. This module will discuss this close relationship and how it all works.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	<ul> <li>Discuss the structure and impact of rebate contracts offered by pharmaceutical manufacturers.</li> <li>Explain how rebates and formulary decision-making can be related.</li> </ul>	

Module 7: Managed Ca	are Pharmacy Clinical and Educational Programs	
Contact Hours	0.75	
Activity Overview	The overall goals of provider and member clinical and educational programs in managed care pharmacy are to maintain a high quality of care and reduce overall health care costs. This module discusses the role and use of pharmacy clinical and educational programs for providers and patients.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	<ul> <li>Name types of pharmacy clinical and education programs that may contribute to ensuring optimal medication use by managed care plan members.</li> <li>Describe factors contributing to medication adherence challenges.</li> </ul>	
This module is accredit	ed for both pharmacists and pharmacy technicians. Through a peer review	

process, the learning objectives were deemed appropriate for both audiences.

Module 8: Medication Therapy Management		
Contact Hours	0.5	
Activity Overview	This module covers the background and goals of medication therapy management (MTM). It reviews the definition of MTM, processes, and models, eligibility criteria, and other key elements of MTM.	
Learning Objectives	<ul> <li>At the completion of this activity, participants should be able to:</li> <li>Define medication therapy management (MTM) and its key components.</li> <li>Discuss the benefits of MTM for patients, health systems, and payers.</li> <li>Summarize the impact of government and health care quality improvement mandates on the demand for pharmacist-conducted MTM.</li> <li>Describe patient eligibility for MTM services under Medicare Part D, and the types of patients most likely to benefit from non-Medicare MTM services.</li> </ul>	

This module is accredited for both pharmacists and pharmacy technicians. Through a peer review

process, the learning objectives were deemed appropriate for both audiences.

Module 9: Introduction	n to Specialty Pharmacy	
Contact Hours	0.75	
Activity Overview	What is the role and impact of specialty pharmacy on managed care pharmacy? This module looks at specialty medications and what makes them "special." Additionally, learners will review how specialty drugs are managed to improve outcomes and quality, and decrease costs.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	<ul> <li>Describe how specialty pharmacies differ from traditional retail pharmacies.</li> <li>Discuss approaches health plans and pharmacy benefit management companies take to manage specialty drugs.</li> </ul>	

Module 10: Medicare and Managed Care Pharmacy		
Contact Hours	0.75	
Activity Overview	Medicare has greatly evolved since its early conception and has many moving parts. This module will provide an overview of how Medicare has advanced through the decades, while also providing a breakdown of its various components. Participants will gain a better understanding of the differences between Medicare Plans and discover the legal requirements behind Medicare benefits.	
Learning Objectives	At the completion of this activity, participants should be able to:	
	<ul> <li>Explain what is covered by each of the four major components of Medicare (Part A, Part B, Part C, and Part D).</li> <li>Discuss the requirements and structure of the standard Medicare Part D drug benefit.</li> </ul>	
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Module 11: Medicaid and Managed Care Pharmacy		
Contact Hours	0.75	

Activity Overview	During this module, participants will become familiar with Medicaid, how it is administered and funded, a listing of the services covered by Medicaid, dual eligibility, and the complexities and challenges associated with this line of business.
Learning Objectives	<ul> <li>At the completion of this activity, participants should be able to:</li> <li>Explain how Medicaid is administered and funded.</li> <li>Summarize approaches used to manage Medicaid pharmacy benefit management.</li> <li>Describe how Medicaid differs from other lines of business.</li> </ul>

Module 12: The ABC's and Stars of Quality Measures	
Contact Hours	0.75
Activity Overview	This module describes the role of quality measures in managed care pharmacy. Learners will review the various accrediting bodies, the purpose of quality measures, and types of measures. The module will further explore quality measures in the context of the Medicare Stars Rating and the Quality Reporting System used in the Exchanges.
Learning Objectives	<ul> <li>At the completion of this activity, participants should be able to:</li> <li>Review how a health plan can become accredited by national accreditation organizations.</li> <li>Explain the role of quality measures in managed care pharmacy.</li> <li>Describe the Medicare star ratings program and measures that impact managed care pharmacy.</li> </ul>

Module 13: HEOR and Value		
Contact Hours	0.75	
Activity Overview	Health economics and outcomes research, or HEOR, is critical in health care decision-making. This module dives into the value of HEOR and details how evidence is obtained through various study designs.	
Learning Objectives	At the completion of this activity, participants should be able to:	

- Define health economics and outcomes research (HEOR) and its importance in health care decision-making.
- Explain common study designs leveraged to generate HEOR evidence.