

Together we ensure access to quality and affordable care for cancer patients







## No matter what the circumstances, we will help you take your prescribed drugs on time





MEDICAL ONCOLOGY ASSOCIATION OF SOUTHERN CALIFORNIA, INC.

# Automation delivers Chronic Care Management



#### Automation delivers Chronic Care Management SPAC Model



Automation delivers Chronic Care Management SPAC Model



# WHY SPAC?

- Sargas provides the compliance, adherence, chronic care management and 24/7 medication monitoring by hand holding the patients.
- Sargas captures revenue, visits, scripts and provides better patient care.
- Sargas delivers better outcomes and survival
- Sargas keeps the physicians informed through the entire treatment cycle in real time.







### WHY SPAC?

•SPAC program activates in the exam room when the script is written and then it tracks the delivery of that entire treatment.

- SPAC is a conduit that connects patients, physicians, insurance companies, co pay programs, authorization programs and other patient services.
- SPAC's vision is to provide the patient with the drug in the most efficient manner by working with the providers.







## WHY SPAC?

- •Sargas provides administrative support via a personal phone contact or mobile applications like Apple or Android
- •Sargas helps schedule the follow up and captures patient reluctance (e.g. mouth sores, fatigue) to treatment in real time.
- •Sargas cloud application works with patient, primary care, oncologists, other specialists, and pharmacies and infusion site
- •Sargas follows up on the patient on a daily, weekly and monthly basis





•mHealth applications that engage the patient with their physicians.

•Immediate feedback on patient symptoms and performance status.

•Patient health information exchange portal for the multispecialty.





#### Adherence and Compliance Approach SPAC I phone Flow Diagram



#### Copyright 2012 SPAC International





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#### Adherence and Compliance Approach SPAC Iphone Flow Diagram





#### Take Today

Open from "Take Today" Button Home Screen





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Providing any patient services that do not begin with their physician leads to confusion for the patient and all other service providers.

Sargas has developed its patient centered solutions with the oncologist and their staff such that they are aware and have control over their patient's experiences





A day in the life of a Cancer Patient.





•Minimizing the barriers that prevent patients from quickly accessing their treatments.

•Utilizing all possible means including mHealth to communicate with patients and their caregivers or family members in the way that works best for them. Text messages, phone follow-up and email messages regarding treatment compliance.

•Care teams comprising of nurses and certified health professionals to assist the patients 24/7 with their treatment needs.





#### Automation delivers Chronic Care Management Patient Module



		Prescriptions	Appointments	Procedures	Stories 🔻	Other 🔻	FAQS	Account 👻	
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istics									
ugs To Tak	e	NAME		TIMES					
oday)		Capecitabine (	Xeloda)	09:00 AM					
		Imbruvica (ibru	itinib)	7:00 PM					
		Zytiga		4:00 PM					
		Prednisone		08:00 AM, 8:00	PM				
ext Appoint	ment	No Appointment							



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#### Automation delivers Chronic Care Management Patient Module

shboard	i Dru	ug Schedule	Prescriptio	ns Appo	ointments	Procedures	Stories	→ Othe	er 🔻 🗛	s Acc	ount 👻		
Preso	cript	ion											
- 📥 F	PRESCRI	IPTION DETAIL	-										
Statu	IS	: Act	ive										
Start	Date	: 15	Apr 2014										
Physic	cian	- 01-											
PHYSIC	cian	: Ale	n Test										
Notes		: Ale : with											
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Notes	ī		n milk	Timings	Drug takir		Quantity	Dosage	Day	Refill	Refill	Remaining	End Date
Notes	js	: with	n milk	Timings	Drug takir instruction		Quantity	Dosage	Day Interval	Refill	Refill Units	Remaining Units	End Date
Notes Drug sr. D	js	: with	n milk	<b>Timings</b> 10:30			<b>Quantity</b> 10	Dosage 250 mg	Interval Every 3	<b>Refill</b>			End Date 12 Oct
Notes Drug sr. D	js )rug	: with	n milk Dde(s)		instruction				Interval		Units	Units	

Patient can view prescription detail with dosage information, timings to take and notes.





#### Automation delivers Chronic Care Management Patient Module

Dashboard	Drug Schedule	Prescriptions Appointn	nents Procedures Storie	es 🔻 Other 👻 FAQs	Account 🔻			
Druc	g Schedule							
Drug	, concure							
Physici	an : Gitesh Patel	Drug:	From Date : 20	14-04-07	o Date : 2014-04-07	Go		
, njeno		Enter 3 char. to view mat			20110101			
						Filter :	All Pending Ta	ken Skipped Discontinued
						inter.	Pending Ta	
Sr.	Date	Drug	Scheduled Time	Status	Action	Time Taken	Notes	
1	♦ 07 Apr 2014	≎ Xgeva	≎ 09:15 AM	≎ Taken by Patient		00:45		
1	07 Api 2014	лдеча	09.15 AM	Taken by Patient		09:15		
2	07 Apr 2014	Provenge (Sipuleucel-T)	11:00 AM	Skipped by Patient	View Skip Reason			
3	07 Apr 2014	Provenge (Sipuleucel-T)	11:00 AM	Skipped by Patient	View Skip Reason		test	
4	07 Apr 2014	Xgeva	3:30 PM	Pending	Take Now Skip		Add	
5	07 Apr 2014	Provenge (Sipuleucel-T)	4:00 PM	Pending	Take Now Skip		Add	
						Apply		
								First 1 Last

Patient can view scheduled drug information for today as well as for past and future by changing date range. Patient's action for scheduled drug will be captured here. He can either take the scheduled drug or skip by selecting relevant reason from the drop down list.







Physicians would bill Medicare for chronic-care management using a new G code. It would apply to at least 20 minutes of management services over 30 days for a patient whose multiple chronic conditions are expected to last at least 12 months, or until death, and that represent a significant risk for death, functional decline, or acute exacerbation or decomposition. Chronic-care services must be available on a 24/7 basis, but a clinical staff member can provide them at the midnight hour on an "incident-to" billing basis without direct supervision.





•Regularly updated comprehensive patient centered plan of care (to be provided by the physician) (Patient specific plan of treatment or Regimen or prescriptions)

•Continuity of care through access to established care team (Patient specific doctors) for successive routine appointments (Our system provides access to patient information to the physicians that share the same patient)

•Scheduled preventive service and medication monitoring by our trained staff with custom mobile health applications for patients.





•24/7 Patient access to a care team. After business hours, our staff of nurses and care team is available for the patient to address acute chronic care needs.

•24/7 Patient care team access(all the physicians will have access to each patient's medical information via our cloud physician portal and pharmacy portal)

•There is an opportunity for patients to communicate with our care team by telephone, secure messaging and other communication modalities like email, and live support for 24/7





•We help in the management of care transitions facilitated by electronic exchange of health information via our HIPPA compliant cloud portals

•24/7 access to medical information for care coordination for the patient's medical team and to support each patient's psychosocial needs and functional deficits.





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Medicare will pay for only patients with two chronic diseases. Physicians will have to bill and collect on their own for these services. Patients will have to pay 20% co-payment for these services.





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#### Automation delivers Chronic Care Management Physician Module



#### **Physician Module- Dashboard**

Statistics						
Total Appointments (today)	1 Appointments					
Next Appointment	DATE	TIME	PATIENT			
	10th, Jan 2013	3:15 PM	John Matthew			
New Patients	1					
Quick Links	Profile Patie		pointments	Prescriptions	Logout	





#### Automation delivers Chronic Care Management Physician Module

shboard Quick Acc	ess Patients 👻 Drug S	chedule Prescript	ions 👻 Appoi	ntment 👻 R	EMS Others 👻		
Patient : ryan test	fo						
	surance Details Prescription	s Drug Schedule	Appointments	Procedures	Add Prescription	Add Appointment	Add Procedure
Profile : ryaı	n test (Patient)						Edit Profile
– 📥 PATIENT DETA	IL						
Туре	: Patient		E-ma	ail	: spacpati	ent@gmail.com	
Type First Name	: Patient : ryan			ail ime Phone	: spacpati : 6613741		
			Dayl			156	
First Name	: ryan		Dayl	ime Phone	: 6613741	156 156	
First Name Last Name	: ryan : test		Dayl Even Cell I Best	ime Phone ing Phone Phone Time To Call	: 6613741 : 6613741 : 6613741 :	156 156	
First Name Last Name Address	: ryan : test : Bakersfield		Dayl Even Cell I Best	ime Phone ing Phone Phone Time To Call	: 6613741 : 6613741	156 156	
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First Name Last Name Address City State Zip	: ryan : test : Bakersfield : Bakersfield : California : 93309	h Patel, Alen Test	Dayl Even Cell I Best Leav Rem Acce	ime Phone ing Phone Phone Time To Call re Messages Or inder Preferen	: 6613741 : 6613741 : 6613741 : 6613741 : Yes ce : Yes	156 156	

This is how screen will show patient's detailed profile and have option to add prescription, appointment and procedure. Patient's current insurance detail, prescription and drug schedule can be viewed from here too.





#### Automation delivers Chronic Care Management Pharmacy Module



#### **Pharmacy Module- Dashboard**

Dashboard	Quick Access	Patients 👻	Prescriptions 🔻	Account 👻
Dash	nboard			
Statis	tics			
Drug A	lert		6	
Quick	Links		2	
			Patient	





#### Automation delivers Chronic Care Management Pharmacy Module



		iew matching name	Refill : Within 7 day s.)	/S <b>•</b> Go							
Sr.	Patient ≎	Drug ≎	Diagnosis Code(s)	Prescribe Date ≎	Start Date ≎	Next Refill Date ≎	Units ≎	Dosage ≎	Drug delay ≎	Ordered to company ≎	Ready For Disburse ≎
1	smith test	Capecitabine (Xeloda)	00 : details not available. A052 : details not available.	18 Jun 2014	03 Sep 2014	23 Oct 2014	20	100 mg			
2	smith test	Prednisone	D075 : details not available.	25 Jun 2014	26 Jun 2014	25 Oct 2014	60	5 mg			
3	smith test	Provenge (Sipuleucel- T)	prostate : details not available. D075 : details not available.	28 Jul 2014			0	250 mg			
4	ryan test	Procrit	00 : details not available. K007 : details not available.	02 Sep 2014	03 Sep 2014	23 Oct 2014	5	500 mg			
										First	1 Last

Drug alert will have list of all pending refills for new and ongoing prescription. This is how screen will show up when pharmacy will check drug alert. Here pharmacy can check stock and order drug to manufacturing company if required and once its made available can select option to dispense the same. An alert will be sent to admin to pick up drug.





#### Automation delivers Chronic Care Management Admin Module



#### **Admin Module- Dashboard**

International				Weld	come, 👤 admir	n 📍 Chang	ge Password
iboard Master 👻 Drug Sc S	hedule Prescriptions 🔻	Appointment 👻	Call Log 👻	Patient Stay 👻	Payments 🔻	Others 👻	Reports 👻
Dashboard							
Statistics							
Skipped Drugs		0	Pending Pre	scriptions Guidance	9		17
Pending Stories		0	Pending Ins	urance Verification			17
Pending Patient - Physician	linkups	23	Drugs Read	y to Pickup			0
Pending Patient - Pharmacy	linkups	3	Awaiting Pre	scription's Drug Dis	burse		22
Patients Physic	cians Practices	Appointments	Drug Schedule	Prescriptions	Stories	Pharmacia	<b>H</b>
		Settings	Logout				
SPAC Sargas Pharmaceutic	cal Adherence and					L ONCOLOGY . RN CALIFORN	Association
Compliance Internati	onal			www.s	nacinte	rnatio	nal co

#### Automation delivers Chronic Care Management Admin Module

							E anno 1997	
ers—							Skip Reason 3	× –
Dri	ug Sche	edule					Please specify reason to skip this drug	
							Skip reason if any : Cough	
	tice:		Patient :		Physic	ian : Selec	ct	
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Fron	n Date : 20	14-10-01	То І	Date : 2014-10-1	5	Go Go	Note :	
								-
							4    Þ	310
							Submit Cancel	NACE OF COMPANY
Sr.	Date							
	Duto	Patient	Drug	Scheduled	Status	Action		11.
	¢	Patient ≎	Drug ≎	Time	Status ≎	Action	Taken	//,
						Action		///
1		≎ ryan		Time	\$ Skipped			1
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	♦ 01 Oct 2014	≎ ryan test	≎ Procrit	Time ≎ 2:00 PM	≎ Skipped Patient	by 🗆 Ta Skip Ro	ake Now Skip	
	<ul> <li>♀</li> <li>01 Oct</li> <li>2014</li> <li>02 Oct</li> </ul>	ryan   test   ryan	Procrit Capecitabine	Time ≎ 2:00 PM	≎ Skipped Patient Skipped	by Ta Skip Ro by Ta Skip Ro	ake Now Skip	
2	<ul> <li>O1 Oct 2014</li> <li>O2 Oct 2014</li> </ul>	ryan     test     ryan     test	<ul> <li>Procrit</li> <li>Capecitabine (Xeloda)</li> </ul>	Time ◆ 2:00 PM 12:00 PM	<ul> <li>Skipped Patient</li> <li>Skipped Patient</li> </ul>	by Ta Skip Ro by Ta Skip Ro	ake Now Skip ake Now Skip	

Skip drug status will show up as above screen shot. Admin and Physician both the modules will have same screen to view list of skipped drugs with date, time, skipped by status and skip reason.





#### Automation delivers Chronic Care Management Admin Module

Pre	escriptio	ns							Ad	d Prescription
(Ente	tice: r 3 chars. to vie n Date: 201	w matching na 3-01-01	ames.)	cian : To Date :	2014-10-20					
Sr.	Written Date ≎	Start Date ≎	Physician ≎	Patient ≎	Filter: All	Active Ina Status \$	tive Ins. Appr Insurance Verification ≎	oved Ins. Per Drug Education ≎	nding) Educated Drug Pickedup ≎	Not Educated
1	23 Sep 2014	23 Sep 2014	Alen Test	Lara scott	AFINITOR,Carmustine	Active	*	*	*	View
2	17 Sep 2014	17 Sep 2014	Robert Moore	Lara scott	Carmustine,AFINITOR	Active	*	*	*	View
3	02 Sep 2014	03 Sep 2014	Alen Test	ryan test	Procrit	Active	*	*	*	View
4	05 Nov 2013		Alen Test	ryan test	Xgeva	Inactive		*	*	View

Prescription status will show up like this. When all activities linked with prescription activation is completed, it will show 'active' and if one or multiple activities are pending, it will show 'inactive'.



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### **Over 300 members**

- Cancer Center of Kansas
- The Center for Cancer & Blood Disorders, Fort worth
- Comprehensive Blood & Cancer Centers, Bakersfield
- Marin Specialty Care, Marin Cancer Company, Marin
- Epic Care





- Sargas assists with monitoring patient Symptoms in real time via it software
- We will proactively manage the patient via our reminders and phone follow up.
- Our dashboard assists in identifying patient that need a visit scheduled
- While hand holding the patient on your behalf and we keep you informed





# Our chronic care management (CCM) services includes:

•24/7 patient access to their health care provider to address the beneficiaries' acute chronic care needs;

•continuity of care with a designated practitioner;

•care management for chronic conditions, including systematic assessment of the patient's medical, functional and psychosocial needs;

medication reconciliation;

•oversight of patient self-management of medications;

- patient-centered care plans;
- management of care transitions;
- •coordination with home and community based clinical service providers; and

•enhanced opportunities for communication between patient and caregivers, e.g., via internet, phone, or secure messaging.







•First 25 patients enrolled will be free (\$12,600 value based on Medicare payment of about \$42 per patient per month).

•Additional patients are at \$8.95 per patient per month.





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- 5 products
- 260 patients
- Issues with adherence, education and symptom management was reviewed
- Days on therapy for prostate cancer drugs was reviewed





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Follow up education increases drug tolerance

•30 day follow up visits increased adherence and delivered better outcomes.

•Number of unnecessary patient visits reduced

•Symptom management increased compliance and reduced over all healthcare costs by reducing hospital and nursing home stays.





 Issues with copay's, authorization, education and symptoms were found to be the main reasons of stopping therapy

•Patients were able to be titrated better with real time interventions and live support

• Patients were more engaged with their treatment and were happy to have someone call them and be on their side to provide care.





- Prostate cancer patients were found to be on therapy for 7.9 months and 5.7 months
- Patients skip their days to reduce cost

•Second and third fills had gaps and were found to be 3<sup>rd</sup> to 5<sup>th</sup> month for second refill and 4<sup>th</sup> to 7<sup>th</sup> month for 3<sup>rd</sup> fill

 Bad symptom management resulted in stopping therapy





- First fill times in case of prostate cancer patients was within 4 to 8 weeks.
- In some cases patients follow up status was never communicated to the physicians
- Sargas is the only program that can align the treatments with clinical trials to deliver better outcomes





- 3 years (June 2010 to June 2013)
- 200 patients
- 50 patients were put on 2013
- 150 patients were on drug prior to 2013
- no primary care doctors
- Infusion Services provided by practice.





- Ninety Patients received their six month follow up doses
- Sixty patients missed the follow up out of the 150 patients
- 40% of the patients in this case have missed their follow ups
- Adherence is key to better outcomes and drug efficacy
- Substantial revenue loss both for the practice and the pharmaceutical company
- We did a follow up and researched in the EMR
- We were able to capture information for all the remaining sixty







#### **Issues with the Sixty patients**

- 2 moved to a Nursing home out of his or her town
- 5 called and cancelled did not want a follow up call
- 34 were having co pay, authorization and transportation issues.
- 8 were not scheduled and did not give a reason ( Could be a referring doctor issue)
- 6 were rescheduled for a later date.
- 5 insurance changed.





#### **Conclusion:**

Patients could have been followed up after script initiation

Physician could have helped us because now they are engaged and informed via interfaces, fax and text messaging so that they can proactively treat the patients

Patient's tolerance and resistance to treatment is now better managed

Pharmacy gets refills on time and no skipped months of dosage.





#### **Conclusion:**

Patients could have been followed up at the nursing home and dose could have been recovered

Primary care physician could have helped us get the dose to the patient

SPAC would have hand held the patient to see that authorization, co-pay and transportation issues were resolved on time.

Patient s could have been rescheduled if we contacted the Primary care physician who referred the patient

Patients could have been helped if we had contacted the new insurance







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