CHARACTERIZATION OF AN ORAL ONCOLOGY DRUG REPOSITORY PROGRAM FOR HEMATOLOGY AND HEMATOPOIETIC CELL TRANSPLANT PATIENTS AT A COMPREHENSIVE CANCER CENTER

A.WALLER[1], J.TOSSEY[1], L.FRAZIER[1], P.KUMAR[1], T.FREEMAN[1], M.FLEMING[1], S.JAMES[2], A.MIMS[3]

1. Department of Pharmacy, The James Cancer Hospital and Solove Research Institute at The Ohio State University, Columbus, OH
2. Department of Pharmacy - Medication Access, The Ohio State University Wexner Medical Center, Columbus, OH
3. Division of Hematology, Department of Internal Medicine, The Ohio State University Comprehensive Cancer Center, Columbus, OH

The James
THE OHIO STATE UNIVERSITY COMPREHENSIVE CANCER CENTER

Introduction

- Cancer patients face many barriers to timely access of oral anti-cancer agents, including delays in insurance approval, high costs, and enrollment in patient assistance programs (PAP)
- Our institution launched a pharmacist-led Oral Oncology Drug Donation Repository (OODDR) program in 2020, which allows patients to donate unused oral oncology medications with the intent to re-dispense the medication to patients in need
- **OBJECTIVE:** To present an updated analysis of our institutional experience with the OODDR in select hematologic disease states

Methods

- Retrospective chart review of Hematology and Transplant (HTC) patients at OSUCCC-James Cancer Hospital who received at least one dispense of oral chemotherapy or supportive care medications from the repository between Feb 2020 to Feb 2025
- Patients identified through outpatient pharmacy repository prescription dispense records

Donation Workflow

Drug collected from patient at pharmacy or clinic visit (patient attests has been stored appropriately/untampered)

Pharmacist performs visual inspection of donated supply and ensures medication meets eligibility criteria

If Yes, medication is accepted and added to inventory, managed through OSU on-site retail pharmacy; if No, medication appropriately disposed of

Re-Dispensing Workflow

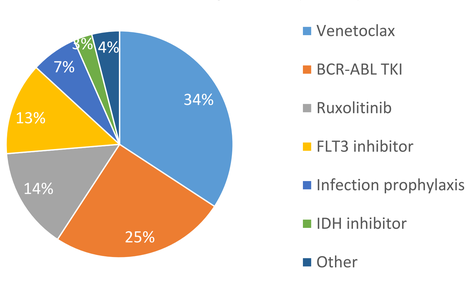
Medication Assistance Program ensures recipient meets eligibility requirements and works on long term medication access

Care Team must educate patient about the repository program and document in the EHR

Patient must attest awareness of receiving donated supply and no guarantee of future drug availability

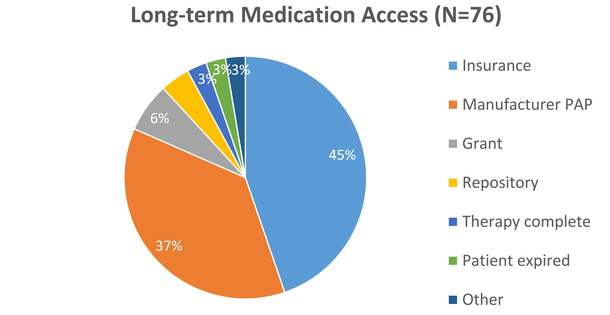
Results

Table 1. Patient Baseline Characteristics	N= 73 (%) Unique patients
Median age, years (range)	58 (18 to >89)
Sex, male	47 (64%)
Race	
White	59 (81%)
African American	5 (7%)
Other	9 (12%)
Type of prescription insurance	
Commercial	35 (48%)
Medicaid	4 (5%)
Medicare	15 (21%)
Veteran's Affairs benefits	1 (1%)
None	18 (25%)
Diagnosis	
Acute leukemia	41 (56%)
Chronic myelogenous leukemia	11 (15%)
MDS and/or MPN	6 (8%)
Graft-versus-host disease	
Acute	3 (4%)
Chronic	6 (8%)
Infection prophylaxis	4 (5%)
Other supportive care	2 (3%)



Results

Table 2. Medication Use Details	N= 76 (%) access encounters
On-label use	47 (62%)
Outpatient therapy initiation	45 (59%)
Bridge therapy to definitive access	67 (88%)
Total quantity dispensed	
< 1 month or cycle	47 (62%)
1 month or cycle	23 (30%)
> 1 month or cycle	6 (8%)



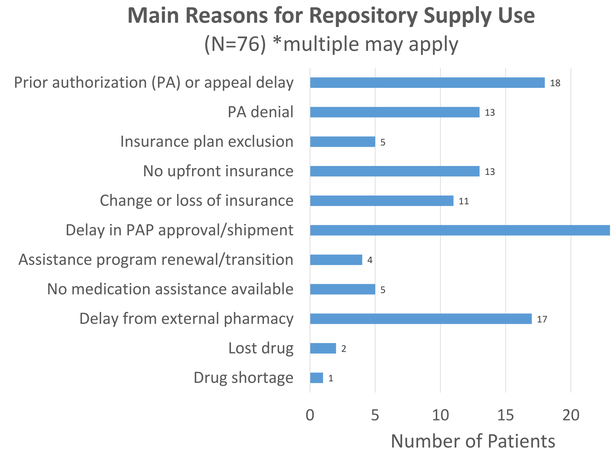


Table 3. Time to Medication Access and Cost Savings	N= 76 access encounters
Time to Medication Access	
Median time from RX to repository supply start	5 days (IQR 1-9 days)
Median time from RX to non-repository medication access (N=66)	14 days (IQR 14-26 days)
Cost Savings	
Total retail cost of drug dispensed	$554,988.22
Average retail cost of drug dispensed	$7,302.48
Inpatient acquisition cost saved (N=30)	$82,571.14

Discussion

- The OSUCCC Repository is a major resource for patients and care teams to **improve access** to and **reduce waste** of oral oncology medications
- Patients with acute hematologic and transplant-related diagnoses were able to **initiate therapy sooner** using the OSUCCC Repository than would have otherwise been possible using routine insurance and assistance program processes
- The OSUCCC Repository assisted with medication access in both the inpatient and outpatient settings, with over 200 doses of oral oncology medications available for inpatient use to initiate or continue therapy, providing **cost savings to the institution**
- **Increased efforts to improve medication access and awareness of medication assistance platforms are vital to optimize care of hematology patients**

© 2024 American Society of Hematology. Reused with permission. This abstract was accepted and previously presented at the 2024 American Society of Hematology Conference. All rights reserved.

SOHO2025

THE OHIO STATE UNIVERSITY