

# faststart

## A dose of drug expertise for patients

Pharmacist Mona Chitre aims to improve health care with work for Excellus, teaching

By SALLY PARKER

**H**er mother's sensitivity to medicines had an impact on Mona Chitre when she was young. She was fascinated by the chemical and biological processes at play—even as she felt bad for her mom.

"My mom dealt with issues around medication, and that was what made me want to pursue pharmacy," she says.

Chitre, 36, is director of clinical services, strategy and policy at Excellus BlueCross BlueShield. She is a registered pharmacist in New Jersey and New York. She ensures that patients receive appropriate medications and the tools to get better. She and her staff of six do this through medication evaluation, clinical programs, provider outreach and adherence to state and federal regulatory requirements.

Clinical programs are her passion. By studying member patient conditions, lab results and the steps members are taking to manage their health, Excellus' pharmacists can find opportunities to improve medication use for better outcomes.

"The pharmacist team ensures our patients are being treated with the best medication for them," she says. "We identify populations at risk, and then we create patient-specific letters to help them manage their medication."

For example, members who have severe asthma and other conditions requiring use of steroids are at risk of developing osteoarthritis. By looking at the data, Excellus' pharmacists can flag such members and recommend weight-bearing exercises and other measures to reduce the risk of fractures.

"Our goal is to be part of the multidisciplinary team," she says. "We want to be the pharmacist at the table. We educate and collaborate with physicians and community members."

Chitre says there is a growing appreciation for the pharmacist's role in patient care, along with doctors, nurses, special-



Photo by Kimberly McKinzie

ists and therapists. Pharmacists who work for insurers have a big-picture view of the care members receive; they can untangle a patient's conflicting prescriptions—perhaps written by different doctors—and get them on the right track.

"The pharmacy profession is on the cusp of really being identified as part of the team, as being the drug experts," she says.

Since Chitre joined Excellus 12 years ago, the business has gotten more complex and her job has evolved. Medication management, public health issues and narcotics are growing concerns. Among a range of responsibilities is overseeing Excellus' quality efforts to earn high ratings in Medicare coverage. She also manages commercial, Medicare and safety net formularies—which involves merging concerns of patient care with contract stipulations.

Chitre was 24 when she started at Excellus. A native of northern New Jersey, she has undergraduate and doctoral degrees in pharmacy from Rutgers University. What followed was a primary-care residency with the Veterans Affairs Western New York Health System in Buffalo—a positive experience, she says, that led to ongoing certification in geriatric pharmacy. She was among the first pharmacists in New York to earn the certification; today there are thousands.

Along the way she got married—her hus-

band is Amit Chitre—and had three boys. She is an adjunct clinical professor at Wegmans College of Pharmacy at St. John Fisher College, SUNY Albany College of Pharmacy and SUNY Buffalo College of Pharmacy. Chitre has written numerous papers published in medical journals and has presented study findings at industry gatherings.

Among the concerns she emphasizes in her classroom is medication adherence. It is the No. 1 issue in health care, Chitre says. The Centers for Disease Control and Prevention reports that only one in four medications is taken as prescribed.

This is where the expertise of pharmacists leads the care team, she says.

"One of our goals is to identify and try to figure out why they're not taking it," she says. Chitre and her colleagues reach out to members who are not taking crucial medications as prescribed. Working with the prescribing doctor, they sort out why a drug isn't being taken and come up with a solution.

An Ask the Pharmacist section on the insurer's website also answers common medication questions.

Chitre dispels the common view that health insurers make coverage decisions that weigh cost over efficacy.

"There's the idea that we are financially driven and say no. That is not our goal. As many opportunities I have to say that, I say it.

"Our goal is the same as the provider's goal, and that is to provide quality care for the patient," she says.

Still, cost is a concern in today's health care environment, she adds. Where insurers can find ways to treat illness more frugally, they will. Cost comes into play when good generic drugs are available—such as for high cholesterol and heart disease—and Excellus encourages members to take that route. This allows coverage for exorbitantly expensive drugs and treatments for which there are no alternatives, she says.

"Affordability is critical for containing health care costs," she says.

Managed-care pharmacists can affect the health care of literally thousands of people, Chitre says. Their far-reaching impact is a primary reason she decided to go into managed care rather than hospital or retail pharmacy.

"After 12 years, I'm still learning every day. I get to teach. I get to work with federal agencies. I get to work with pharmaceutical companies. It's really at the center of market dynamics," she says.

"It's definitely a growing area. That's why I teach at the pharmacy schools; (students) need to understand that.

"This system is complex. My goal is to be a patient advocate. We have so many opportunities to help people."

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