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**CONTACT: Rod Recor [Rod.Recor@cpspharm.com](mailto:Rod.Recor@cpspharm.com); 901-462-9082**

## **Comprehensive Pharmacy Services launches Medication Reconciliation solution**

*Medication Reconciliation program reduces errors and readmissions for JFK Medical Center and other pilot hospitals*

Memphis, TN – Comprehensive Pharmacy Services (CPS), the leading provider of pharmacy services for hospitals and health systems, has launched a new proven Medication Reconciliation Program that helps hospitals reduce adverse drug events (ADEs) and patient medication issues that lead to hospital readmissions and higher costs. The program has been proven to help with transitions of care across the continuum of care from hospital admission through to discharge and beyond.

It is an issue that hospital pharmacy leaders are grappling with across the U.S. The Network for Excellence in Healthcare estimates that inpatient medication errors cost \$16.4 billion dollars annually.<sup>1</sup> According to the Institute of Medicine's *Preventing Medication Errors* report, more than 40% of medication errors are believed to be the result of inadequate medication reconciliation at admission and discharge.<sup>2</sup>

“Patient safety is a top priority across the continuum of care,” said Marvin Finnefrock, PharmD, Division President, Clinical and Purchasing. “Studies show that patients after being discharged from the hospital often are confused and don't know how to take their prescriptions properly. They may take the wrong dosage or medication that is not in their care plan. CPS' Medication Reconciliation Program has now been proven as an effective strategy for preventing adverse drug events and improving patient outcomes because now the patient is taking medications properly.”

After several successful hospital pilot projects, CPS's Medication Reconciliation Program has proved both clinically and financially viable. One of the pilot centers was the JFK Medical Center in Edison, New Jersey. The pilot program focused on creating the most accurate list of all medications that a patient was taking — including drug name, dosage, frequency, and route — and compared that list against the physician's admission, transfer, and/or discharge orders. The goal was to provide correct medications to the patient at all transition points within the hospital from beginning to discharge and beyond when the patient was at home.

“In addition to tracking patient medications at admission and discharge, patients received medication counseling by a pharmacist prior to discharge,” explains Jeff Lackman, RPh, Division President, Telepharmacy. “The majority of patients in the study were contacted by a pharmacist at home after discharge to ensure that they were taking their medications properly and that they were not having any adverse drug events. Our pilot programs have demonstrated that implementing medication reconciliation at all transitions of care is an effective strategy in reducing adverse drug events and readmissions.”

CPS Medication Reconciliation Program improves identification of medication errors and post-charge therapy failures before they can become ADEs. For more information regarding CPS's Medication Reconciliation Program visit <http://www.cpspharm.com/medication-reconciliation>.

### **About Comprehensive Pharmacy Services**

Founded 45 years ago and employing over 2,000 pharmacy professionals, CPS is the nation's oldest and largest provider of pharmacy support services to more than 600 hospitals and healthcare facilities pharmacies. CPS helps hospital pharmacists tackle complex problems such as medication reconciliation, hyper-inflated drug costs, standardization, centralized distribution, retail pharmacies, compliance, 340B programs and much more, leading to increased quality, reduced admissions and lower costs. For more information, visit <http://www.cpspharm.com>.

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<sup>1</sup>“The Economics of Health Care Quality and Medical Errors,” *Journal of Health Care Finance*, Vol. 39, No. 1, (Fall 2012).

<sup>2</sup> Institute of Medicine. Preventing medication errors. Washington, DC: National Academies Press; (2006).

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