
Kansas City VA Medical Center

Setting

The KCVVA Medical Center currently provides services to over 43,000 of the veterans that reside in the Kansas City primary service area. The Medical Center is a tertiary care hospital that serves as a referral center for the Kansas VA Medical Centers in Leavenworth, Topeka, and Wichita as well as the Columbia, Missouri VA Medical Center. This integrated health care system is dedicated to providing quality health care to veterans of mid-America.

In addition to acute care medicine and surgery services, the Medical Center has Primary Care services for all veteran patients. The Community Based Outpatient Clinics (CBOC) housed in Overland Park & Paola, Kansas, and in Belton, Cameron, Excelsior Springs, Nevada, & Warrensburg, Missouri provide an extension of these services to veterans in rural areas. Sub-specialists or Specialty Care is also available to patients for evaluation and management of endocrine, pulmonary, gastroenterology, nephrology, cardiology, hematology/oncology, ID and geriatric disorders. Clinical Pharmacy Specialists play an integral role by enhancing care to all patients at the KCVAMC.

As a principal teaching hospital, the KCVAMC is affiliated with the University of Missouri - Kansas City School of Pharmacy and the University of Kansas School of Medicine and Pharmacy.

Pharmacy Services

The Pharmacy Service provides 24-hour coverage seven days a week. Patient care is provided by a staff of more than 70 pharmacists, residents, students, and technicians practicing in the inpatient and outpatient care setting.

Ambulatory Care The outpatient pharmacy staff provides pharmaceutical services for primary care and specialty care clinic patients. Pharmacists in these areas provide drug information, observations on patient response to therapy, and appropriate recommendations regarding treatment alternatives or additional interventions to maximize patient care outcomes.

Inpatient Service The decentralized inpatient pharmacy staff provides pharmaceutical care to veterans using a systematic process designed to ensure patients are educated and drug therapy is monitored. New orders are evaluated with attention to drug dosing, drug interactions, and drug allergies. Pharmacists' recommendations are communicated on patient care rounds or directly to the medical, surgical, psychiatric, and critical care teams. Drug distribution is accomplished through centralized unit dose and IV admixture services.

Pharmacoeconomics (PE) Division The Director of PE, Applied PE Specialist, and Managed Care Pharmacy Resident provide support to the KCVVA and Veterans Integrated Service Network 15 (VISN 15) P&T Committees, and National VA Pharmacy Benefits Management group. Activities include evaluating new and evolving drug therapies, predicting, tracking and trending pharmacy budget, drug utilization evaluation, analyzing adherence to performance monitors, research, and other administrative duties.

Informatics

The Pharmacy Informatics group at the KCVVA works to develop and enhance technology that improves patient care and enhances work flow for both the clinical and distributive functions of the pharmacy through use of the electronic medical record (Vista/CPRS) as well as outside vendors. Through incorporation of artificial intelligence and clinical decision support practices, the group is also able to focus on developing reports that enhance the ability to provide population based patient centric care.





Residency Programs

PGY1 Pharmacy Practice

PGY1 Managed Care

PGY2 Ambulatory Care



Education and Training

Members of the pharmacy staff precept UMKC and KU Clerkship students. A teaching certificate program is available through the University of Missouri—Kansas City School of Pharmacy.

Benefits

Benefits include health and life insurance, annual leave (vacation), days off for illness/medical appointments/family care and 10 paid federal holidays. The annual stipend is \$41,098 for PGY1 programs and \$44,522 for PGY2 programs with *financial compensation for staffing* in all programs.

Eligibility

- Applicants must be a graduate of an American Council of Pharmaceutical Education accredited School of Pharmacy with a Pharm.D. degree.
- **Applicants must be U.S. citizens – a requirement to be employed by the Department of Veterans Affairs.**
- Applicants for the PGY2 program must complete a PGY1 Pharmacy Practice Residency

Application

The following items are required for application to any program:

- Letter of intent
- Curriculum vitae
- Pharmacy school transcripts
- 3 letters of recommendation

A personal interview is required of all selected candidates. All programs participate in the ASHP Matching Program.

Application materials should be submitted via PHORCAS.
Deadline for application is **January 7, 2013**.

Current Residents

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Postgraduate Year One (PGY1) Managed Care Pharmacy Residency

Purpose

Residents completing the Managed Care Residency Programs will have the knowledge and skills necessary to assume leadership, program management, data analysis, formulary management, and/or quality assurance roles within government and non-government managed care or pharmacy benefits management settings.

Outcomes

- Understand how to manage the drug distribution process for an organization's members.
- Design and implement clinical programs to enhance the efficacy of patient care.
- Ensure the safety and quality of the medication-use system.
- Provide medication and practice-related information, education, and/or training
- Collaborate with plan sponsors to design effective benefit structures to service a specific population's needs.
- Exercise leadership and practice management skills.
- Demonstrate project management skills.
- Provide evidence-based, patient-centered medication therapy management with interdisciplinary teams.



The Managed Care Pharmacy Residency is a 12-month longitudinal program. This specialized residency program will provide the skills necessary for the practical application of managed care pharmacy principles in an integrated healthcare system.

The resident will be involved in managing the formulary system through activities including, but not limited to, drug and drug class evaluations, generic and therapeutic interchange programs, drug usage evaluations, budget impact modeling, Pharmacy and Therapeutics Committee functions, drug policy development, and the design and conduct of at least one drug related outcomes study. In addition, the resident will gain valuable experience in our pharmacy and medical center administrative programs, including Joint Commission compliance, patient safety initiatives, and performance improvement. The resident will participate in projects at the Kansas City VA Medical Center, Veterans Integrated Service Network 15 (VISN 15), and National VA National Pharmacy Benefits Management Group. In addition, the resident will participate in clinical experiences available in both inpatient pharmacy and outpatient pharmacy-based clinics.

Education will include a university research and statistics course, structured didactic pharmacoeconomic sessions, and hands-on application of learned concepts. As adjunct faculty of UMKC School of Pharmacy, the resident will gain experience in lecture preparation, didactic teaching and precepting pharmacy students on site.

Rotations

Structurally, the residency is divided into consecutive one to four month blocks. The rotations are arranged to ensure that instructional objectives are pursued in a logical, systematic progression that allows building of the proper foundation of skills and concepts needed for the next rotations. The length of the rotation varies with the number and complexity of the goals to be achieved during each block. The ambitious goals of the KCVA managed care residency require careful scheduling in order to distribute the workload evenly throughout the year, so as not to overwhelm the resident at any one time. During each block, several required and elective goals and objectives are emphasized. Simultaneously, the resident is expected to prioritize and work on the ongoing, longitudinal clinical, didactic, staffing, and project activities to ensure continuous growth of clinical skills and pharmaco-economic application.

In each experience, the resident works closely with the residency director and the rotation preceptor to develop goals and objectives that will assist the resident in expanding skills for current and future practice. Regular meetings with the residency director ensure that long-term goals are met.

Required Rotations:

Orientation (1 month)
Finance (1 month)
Internal Medicine (1 month)
Plan Development (2 months)
Quality Assurance (2 months)
Formulary Management and
Pharmacoeconomics (4 months)
Elective (1 month)

Longitudinal Rotations:

Chronic Disease Management Clinic
Staffing Practice
Residency Project

Completion of a residency project of the Resident's choosing is also required. Residents work with a Pharmacy staff mentor to plan, carry out and evaluate the results of this project. Comprehensive project results are presented at an ASHP affiliate or ACCP Spring Meeting and at the Midwest Residents Conference in May.



For additional information contact:

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