



Expanding Patient Access to Care: Pharmacist Provider Status Supportive Data

“There's a glaringly simple answer to a growing problem in the US healthcare system,” John Gums, The Conversation, (Posted on BusinessInsider.com on Jan. 5, 2016)

- Within the next 10 years, there is estimated to be a 27% shortage of primary care providers (PCPs) in the US — about 90,000 fewer PCPs than the US health care system requires.
- There are approximately 300,000 pharmacists in the US; the number of pharmacists in the US increased by approximately 19% from 2003-2013.
- Pharmacists are well versed in preventative care, patient counseling and health and wellness. They know how to manage chronic diseases, including high blood pressure, diabetes and high cholesterol.
- A pharmacist can manage a treatment plan initiated by a physician, order basic laboratory tests, and adjust medication dosages, adding or subtracting medications as needed.
- Collaborative care models have been shown to improve outcomes in patients with hypertension, diabetes, clotting disorders and high cholesterol.
- Putting a pharmacist on the care team can reduce adverse drug reactions and lower costs. If patients can go to a pharmacist for day-to-day management of their condition, physicians can spend more time seeing the patients that really need their expertise.

Exploring Pharmacists' Role in a Changing Healthcare Environment, Avalere Health (2014)

- Payers and policymakers should explore ways to leverage pharmacists' accessibility in the community to provide preventive care services, especially within alternative payment and delivery models such as ACOs and patient-centered medical homes.
- Pharmacist-provided educational and behavioral counseling can contribute to better outcomes in chronically ill patients, and can also support broader health and wellness in the population.
- Collaborative team-based care has been shown to improve therapeutic outcomes in areas such as diabetes, hypertension, dyslipidemia, and anticoagulation.
- Pharmacist-provided medication reconciliation can help reduce medication discrepancies and may be an important component of improving transitions of care moving forward.

The Expanding Role of Pharmacists in a Transformed Health Care System, National Governors Association (2015)

- Studies of pharmacists providing medication therapy management (MTM) services to improve therapeutic outcomes indicate that such services can improve outcomes and reduce costs.
- Pharmacists typically provide MTM services in interdisciplinary teams through collaborative practice agreements (CPAs). Such agreements with other health care providers allow a licensed provider to refer patients to a pharmacist and delegate the delivery of clinical services under supervision.
- Challenges to CPAs include lack of provider recognition in federal and state law governing compensation of pharmacists who provide direct patient-care services.
- California, Montana, New Mexico, and North Carolina have created the advanced practice pharmacy (APP) designation, which allows pharmacists to provide direct patient care, including primary care.
- In a 2007 survey, 45 percent of community pharmacists who reported providing direct care to patients received no compensation for those services. Medicare and Medicaid compensation policies also limit pharmacists' ability to practice, particularly within integrated care teams.

Thinking Outside the Pillbox: Improving Medication Adherence and Reducing Readmissions, Network for Excellence in Health Innovation (2012)

- Hospital readmissions are costly and frequently occur soon after discharge. Estimates of the total cost of readmissions range from \$15 billion to \$25 billion per year.
- Researchers have estimated that up to 19 percent of discharged patients experienced an adverse event after discharge, of which roughly two-thirds were attributed to medications.
- The aggregate cost of hospital admissions related to medication adherence has been estimated to be roughly \$100 billion per year.

Comprehensive Medication Management Programs: Description, Impacts and Status in Southern California, 2015

- Comprehensive Medication Management (CMM) is an evidence-based preventive clinical service demonstrated to decrease health care costs and improve chronic disease treatment outcomes by ensuring optimal prescribing, monitoring, education, and use of medications that engages physicians, pharmacists, and patients.
- When directed at complex high-risk patients, CMM is proven to improve: quality of life, access to other healthcare providers, patients' health literacy and decision making, physician and other non-pharmacist provider satisfaction, and continuity of care.
- Advances in pharmacy education, training, and credentialing uniquely position pharmacists to offer CMM as part of a quality interprofessional collaborative practice.
- California is one of six states in the U.S. that recognizes pharmacists as health care providers.
- Challenges in adopting CMM include lack of reimbursement mechanisms.
- CMM is inherently team-based and patient centered, and thus requires the buy-in from pharmacists, patients, other healthcare providers, and health systems.
- Opportunities to align CMM through readily accessible community pharmacies with priorities of government and private payers and providers, as well as public health, are abundant and have the potential to develop into a mutually beneficial model, especially as the shift continues towards full risk for medical providers and value-based payments.

Improving Patient and Health System Outcomes through Advanced Pharmacy Practice - A Report to the U.S. Surgeon General (2011)

- Pharmacists are uniquely positioned (through their accessibility, expertise and experience) to play a much larger patient care role in the U.S. health care delivery system.
- Pharmacists may be the only health professionals (who manage disease through medications and provide other patient care services) who are not recognized in national health policy as health care providers or practitioners.
- For pharmacists to continue to improve patient and health system outcomes as well as sustain various roles in the delivery of care, they must be recognized as health care providers by statute via legislation and policy, and be compensated through additional mechanisms commensurate with the level of services provided (and with other practitioners providing comparable services).
- Medications are involved in 80 percent of all treatments (and impact every aspect of a patient's life), and drug-related morbidity and mortality cost this country almost \$200 billion annually.
- One of the most evidence-based decisions to improve the health system is to maximize the expertise and scope of pharmacists.
- With expanded practicing privileges, pharmacists could significantly improve the health care delivery system in the U.S., particularly related to chronic care, access to care, and provider workforce.
- For each dollar invested in the clinical pharmacy service over the period from 1988 to 2005 (nearly two decades), the overall average benefit gained was \$10.07 per \$1 of allocated funds.

Supportive Data
As of October 21, 2015

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