Patient Access to Pharmacists’ Care Coalition (PAPCC)

Value of Pharmacy Services for Medicare Beneficiaries

Patients rely on their pharmacists to meet many of their health care needs. The pharmacist is a trusted, accessible health care professional, who in addition to dispensing medications and making recommendations to other providers, can accurately conduct health and wellness testing, manage chronic diseases, administer immunizations, perform medication management, and work within hospitals and health systems to advance health and wellness and help reduce hospital readmissions.

Pharmacists are especially valued by those that rely on them most – those in rural and underserved communities, older Americans, those experiencing transitions of care, and those patients managing chronic diseases, such as diabetes or cardiovascular disease. Pharmacists are key members of the health care team, and their services can improve health care quality, outcomes and access, and reduce overall health care costs.

Pharmacists Help Meet Higher Health Care Demands

Millions of Americans lack adequate access to primary health care and this is only expected to get worse as demand increases. Over the next two decades, the number of Medicare enrollees is expected to grow from roughly 50 million to over 80 million.\(^1\) In addition, approximately 45% of Americans have at least one chronic condition, and 27% have multiple chronic conditions, rates that are expected to continue to rise.\(^2\)\(^,\)\(^3\) Further, the Congressional Budget Office estimates that an additional 25 million individuals will potentially be gaining health coverage under the Affordable Care Act (ACA). Factoring all of this in, the Association of American Medical Colleges projects that, by 2020, there will be more than 91,000 fewer doctors than needed to meet demand, and the impact will be most severe on underserved populations.

Pharmacists Practice at the Top of Their Education and Training

Pharmacists today are called on to provide a wide range of services to many different types of patients. Pharmacists are capable of filling this role based on their extensive education and training. When pharmacists are able to fully utilize their education and training, they can make a significant impact improving public health. For example, since the federal government called on pharmacists to assist in vaccinating Americans amid the H1N1 outbreak in 2009, pharmacists have been instrumental in increasing the vaccination rate in the U.S.; today, more than 20% of flu vaccinations are administered in pharmacies. Another example is in the area of health and wellness tests and counseling, where pharmacists are increasingly being paid by private payers to perform these important services, which include blood pressure and diabetes testing. In both of these examples, pharmacists have used their education and training to innovate in order to meet the needs of their patients.
Many pharmacists practicing today have a B.S. in Pharmacy, a five-year bachelor’s of science degree in pharmacy that, along with advanced training, enables them to deliver many of the types of services referenced above. Since 2001, graduating pharmacists must earn a Doctor of Pharmacy (Pharm.D.). This high-level, 6-year degree provides today’s pharmacists with the most education related to medication use and management than any other health care professional.

Pharmacists are Part of a Team Approach to Health Care
Increasingly, pharmacists are partnering with physicians, nurses, and other health care providers to meet their patients’ needs. For over 40 years, pharmacists have collaboratively managed disease through improved medication use and other pharmacy services. Currently, 47 states allow pharmacists to provide a wide array of services through collaborative practice agreements with physicians. This collaboration supports continuity of care and improved coordination of care. Importantly, studies and practice-based experience have shown that when pharmacists are involved as members of the health care team, patient outcomes improve, patients report higher rates of satisfaction, and overall health care costs are reduced.

Pharmacists Improve Quality of Care
According to a report issued by the Public Health Service in 2011, pharmacists involved in the delivery of patient care services with appropriate privileges across many practice settings have been successful in improving patient outcomes.iv Expanded pharmacists’ services improve evidence-based quality metrics and health outcomes. For instance, pharmacist involvement in care has resulted in significant reductions of hemoglobin A1C levels in diabetic patients, significantly reduced systolic blood pressure in hypertension patients, and a reduced rate of inpatient admissions among heart failure patients.v

Pharmacists Help to Reduce Health Care Costs
Pharmacists can help reduce the cost of health care in many ways. First, pharmacists can directly engage patients and assist in promoting medication adherence. Medication non-adherence results in $100 billion each year in excess hospitalizations.vi Furthermore, the CBO estimates that a 1% increase in drug utilization causes Medicare’s spending on medical services to fall by 0.2%. Second, pharmacists can help provide health and wellness testing and manage chronic illnesses. Lastly, three quarters of our nation’s annual health care expenditures are attributed to costs associated with chronic disease. Third, pharmacists can play a critical role in reducing medication errors and avoiding costly adverse drug events.

About Us
The Patient Access to Pharmacists’ Care Coalition’s mission is to develop and help enact a federal policy proposal that would enable Medicare beneficiary access to, and payment for, Medicare Part B services by state-licensed pharmacists in medically underserved communities. Our primary goal is to improve medically underserved seniors’ access to pharmacists’ services consistent with state scope of practice laws and regulations.
Contact
Please contact Kristina Lunner at Kristina.Lunner@LeavittPartners.com or (202) 774-1403 for more information.

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i U.S. Congressional Research Service. Medicare Financing (R41436; September 19, 2013), by Patricia A. Davis


