Improving Patient Care

Improving Patient Outcomes, Quality, and Costs with Pharmacists’ Services

The Current State

Patients benefit when medications are used appropriately. Improper medication use adversely impacts patient outcomes, costs, and the health care system as a whole and puts patients at risk.

The Facts

- The United States spends almost $300 billion annually on medication problems including medication non-adherence.
- Chronic diseases account for $1.7 trillion in health care expenditures and 91 percent of all prescriptions filled.
- Almost 50 percent of people prescribed medications for chronic diseases do not take their medications correctly.
- Nearly 70 percent of Americans are on at least one prescription drug and over 50 percent of Americans are on at least two prescription drugs.
- The number of Americans ages 65 years and older is projected to increase 36 percent by 2020.
- On average, two-thirds of Americans aged 65 and older take 5-9 medications.

A Solution

Pharmacists, with their medication expertise, are uniquely positioned to combat issues plaguing our health care system. Because patients and health care providers need to be able to access pharmacists’ services, the American Pharmacists Association seeks provider status for pharmacists – an effort that includes requesting:

- Payers and policy makers to recognize pharmacists as health care providers who improve access, quality, and value of health care.
- Patients to have improved access to pharmacists’ services.

The Outcome

By including pharmacists as part of the patient’s health care team:

- Patients benefit – enhanced satisfaction, care, and outcomes
- Communities benefit – healthier population, increased access to immunizations
- The health care system benefits – quality, access, and costs are improved

Patients across the United States are receiving better care and achieving better outcomes from pharmacists’ patient care services. Examples of pharmacists’ services include: coordination of medications during care transitions, comprehensive medication reviews and monitoring, chronic disease prevention and management, wellness services, and patient education.
Pharmacists and Unmet Need

Background

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.\(^{ii\,iii}\) Further, the Congressional Budget Office (CBO) estimates that an additional 25 million individuals will potentially be gaining health coverage under the Patient Protection and Affordable Care Act (PPACA). 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.

In the face of this anticipated shortage, pharmacists are conveniently accessible health care professionals who, in coordination and collaboration with other health care team providers, are capable of playing a greater role in the delivery of health care services. While pharmacists remain committed to assisting patients with access and information related to their prescription medications, pharmacists today are providing a broad spectrum of services, within their scope of practice, including conducting health and wellness testing, managing chronic diseases and performing medication management, administering immunizations, and working in and partnering with hospitals and health systems to advance health and wellness and helping to reduce hospital readmissions.

Access to pharmacists’ care

Physicians and certain non-physician health care professionals are reimbursed under Medicare Part B for providing necessary health care services. With very limited exceptions, pharmacists’ services are not reimbursed in this fashion. The lack of
reimbursement of pharmacists for services provided within their state scope of practice unnecessarily limits patient access to certain health care services and the contributions pharmacists can make to their health care and outcomes. Enabling pharmacists to practice at the top of their education and training, and be better integrated into the patient’s health care team, will improve health outcomes and greatly benefit specific populations, especially those with chronic disease such as diabetes and cardiovascular disease.

**Medically Underserved Communities**

The Department of Health & Human Services’ Health Resources Services Administration (HRSA) designates communities with unmet health care need as Medically Underserved Areas (MUAs), Medically Underserved Populations (MUPs), and Health Professional Shortage Areas (HPSAs), based on a number of factors. A description of each follows:

- MUAs identify geographic areas that have too few primary care providers, high infant mortality, high poverty, and a high elderly population.

- MUPs are identified by taking into account the same factors used to identify MUAs, but focus on specific population groups with the same characteristics.

- Health Professional Shortage Areas are areas with shortages of primary medical care, dental or mental health providers.

The Coalition can provide a list of MUAs, MUPs, and HPSAs, within a particular state or legislative district upon request.

**Health Disparities**

A disproportionate number of patients in certain racial and socioeconomic populations suffer from chronic conditions. For example, according to the Centers for Disease Control (CDC), non-Hispanic black adults are at least 50% more likely to die of heart disease or stroke prematurely than their non-Hispanic white counterparts. And the prevalence of adult diabetes is almost twice as great among poor adults than high income adults. This legislation would improve their access to care.
About Us

The Patient Access to Pharmacists’ Care Coalition’s mission is to develop and help enact federal legislation that would enable patient access to, and reimbursement for, Medicare Part B services by state-licensed pharmacists in medically underserved communities consistent with state scope of practice law. Our primary goal is to expand medically underserved patients’ access to pharmacists’ services.

Contact

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


Pharmacists Are Trusted Health Care Providers

83% of voters agree that pharmacists have the education and professional training to do more for patients than just filling prescriptions.

81% agree that pharmacists should be considered part of each patient’s overall health care team.

66% of voters nationwide said they think of pharmacists as “health care providers” though pharmacists are not currently recognized as such under federal law.

Pharmacists and Their Services Improve Health Care Quality

73% of voters nationwide agree if pharmacists were included as members of health care teams, it would improve health care quality.

75% agree if pharmacists were more involved as members of health care teams, patients would have fewer problems with medications.

Pharmacists and Their Services Reduce Health Care Costs

70% of voters agree that pharmacists working more closely with doctors would reduce patient costs.

72% agree that pharmacists working more closely with doctors would reduce overall health care system costs.

Results based on a survey conducted by Clarus Research Group, a nonpartisan survey research firm based in Washington, D.C. for the American Pharmacists Association by live telephone interviewers October 30-November 10, 2013. Sample size: 1,000 registered voters nationwide. Margin of error +/- 3.1 percent.