Shifting Gears: Are You Driving Change or Hitchhiking?

The Pharmacist Role and Opportunities in the New Health Care Continuum

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Faculty Disclosure and/or Conflicts of Interest

I, Wallene Bullard, do not have a vested interest in or affiliation with any corporate organization offering financial support or grant money for this continuing education program, or any affiliation with an organization whose philosophy could potentially bias my presentation.
Learning Objectives for Pharmacists and Nurses

1. Discuss and understand the current healthcare trends for the pharmacy profession.
2. Identify key areas of healthcare reform that are projected to expand over the next five years.
3. List at least three competencies in skill development needed for healthcare providers to meet the current and future needs in professional practice.
4. Identify technology resources to support advancement of pharmacy and other clinical services.
Learning Objectives for Pharmacy Technicians

1. Review the current trends in healthcare for pharmacy profession.

2. Identify key growth areas of pharmacy practice over the next five years.

3. List three capabilities in skill development necessary for healthcare providers to meet the current and future needs in professional practice.
This educational seminar will focus on examining the current trends in healthcare, focusing on the past five years. This lecture will review the traditional role of pharmacists and identify areas of pharmacy practice that will grow over the next five years. Pharmacists will be able to list three capabilities in skill development necessary to meet future needs in professional practice.

- Specialty Pharmacy
- Immunizations
- Comprehensive Med Reviews/MTM
- Provider Status and/or Expert Credentialing
- Innovative Opportunities to Provide Patient Services
What additional credentials will pharmacists and technicians need to provide point-of-care services in the future?
Pharmacists, along with nurse practitioners and physician assistants, are able to prescribe control substances in the state of Florida?
Congress has passed a bill to allow pharmacists to provide MTM services to Medicare patients in underserved communities who have only one chronic disease?
Driving Change or Hitchhiking?

"All I did was stop for one hitchhiker, next thing I knew this whole bunch of them came out of nowhere and just jumped in!"
Current Pharmacy Practice Settings

Name a Few
Current Pharmacy Practice Settings

- Pharmacy practice
- Hospital clinical setting
- Hospital ambulatory care setting
- Hospital inpatient setting
- Academic setting
- Large retail practice setting
- Independent community pharmacy
- Pharmacy Benefit Management
- Regulatory
- Pharma Industry
- Plus.....
Evolution of Healthcare, the Pharmacy Profession and Pharmacists Role (Historical Perspective)
What am I?

- I will consider the welfare of humanity and relief of suffering my primary concerns.
- I will apply my knowledge, experience, and skills to the best of my ability to assure optimal outcomes for my patients.
- I will respect and protect all personal and health information entrusted to me.
- I will accept the lifelong obligation to improve my professional knowledge and competence.
- I will hold myself and my colleagues to the highest principles of our profession’s moral, ethical and legal conduct.
- I will embrace and advocate changes that improve patient care.
- I will utilize my knowledge, skills, experiences, and values to prepare the next generation of pharmacists.
Evolution of Pharmacy Practice

Pharmacy is a highly regulated profession

- The 1st creed of the Oath of a Pharmacist is to do no harm

- The expanded role of the pharmacist
  - Allows for quality interactions—a key component in patient retention and medication adherence
  - A more active role in medication therapy management (MTM) and other clinical-type services
Evolution of Pharmacy Practice

- Pharmacists provide counseling services
- Pharmacists receive reimbursement for clinical services
- A clear trend is a shift of pharmacy
  - From a dispensing-centric function
  - To a services/patient-centric function
- Back to the basics (with a twist)
1950s & 60s

- Pharmacists were the center of the community for health care needs
- Prepared and dispensed medications and apothecary tinctures
- Provided patient education, medication counseling and recommendations
1960s

- Healthcare was defined by visit to physician and payment for visit (known as fee-for-service)
- Medicare and Medicaid were born
- Prior to 1960s, the Food, Drug and Cosmetic Act was passed in 1938
- Durham–Humphrey Amendment, was enacted in 1951. Prescription medication from this time forward could only be legally dispensed based upon authorization from a prescriber granted prescriptive authority by a state
1970s

- Fee for Service (FFS)
- Health insurance paid for premiums billed by doctor and hospital
- Emergence of Clinical Pharmacy
- Emergence of pharmacy residency programs
- Comprehensive Drug Abuse Prevention and Control Act of 1970,
  - commonly known as the Controlled Substance Act (CSA)
- Poison Prevention Packaging Act (PPPA) was enacted in 1970
1980s

- Introduction of Diagnosis Related Group codes (DRGs)
- The Prescription Drug Marketing Act (PDMA) of 1987
  - Incorporated into the FDC Act
  - To address certain prescription drug-marketing practices that contributed to diversion of large quantities of drugs
1990s

- Omnibus Budget Reconciliation Act of 1990 (OBRA-90)
  - placed expectations on the pharmacist interactions with patients
- Health Insurance Portability and Accountability Act (HIPAA) passed law (1996)
- Growth of Managed Care (MCO) and Health Management Organizations (HMO) – Capitated rates
  - Case Management
  - Internal Medicine “Gate-keepers”
  - Increase emphasis on secondary providers
  - Physician Assistants (PA) & Nurse Practitioners (NP)
1990s

- Pharmaceutical care
  - First coined by Hepler and Strand in 1990
  - ASHP definition – Pharmaceutical care is the direct, responsible provision of medication-related care for the purpose of achieving definite outcomes that improve a patient’s quality of life
- End of Bachelor of Science in Pharmacy
- Start of all PharmD programs
- Emergence of pharmacy specialties, i.e. board certification.
- Elevation of pharmacy technician role, Certified Pharm Tech (CPhT) licensing and credentialing
1990s

- OBRA–90 Medicaid pharmacy providers
- Health Insurance Portability and Accountability Act of 1996 (HIPAA)
  - First comprehensive federal regulation designed to safeguard the privacy of protected health information (PHI)
  - Significant piece of federal legislation at the time to affect pharmacy practice since OBRA–90.
  - Privacy Rule (of HIPAA) took effect on April 14, 2003
2000s

- HIPAA enforcement
- Medicare Modernization Act of 2003
- Affordable Care Act of 2010 (ACA) aka Health Care reform, ie Obamacare
- Accountable Care Organizations (ACO)
- Medical Home
- Health Information Technology (HIT)
- Electronic Health Records (EHR)
- Quality measures, incentive payments and report cards
- ........Next?
Current Role of Pharmacists
Paradigm Shift

- Shifting roles and responsibilities within healthcare teams
- Expanding roles, expectations and credentials across the continuum of care
  - Role of Pharmacy technicians
  - Role of Nurses
  - Roles of other providers
ACA issues of importance to APhA, pharmacists, and the pharmacy profession include

- CMS Innovation Center
- Accountable Care Organizations
- Essential Health Benefits
- Medical Loss Ratio
- Integrated Care Models
- Transitional Care Models
- Improvements to Medicare Part D MTM
In addition to working on collaborative teams, pharmacists will be essential to ACOs in meeting quality and cost targets through medication reconciliation and other value-driven activities.

Connecting pharmacists through HIEs to other members of the care team enhances the quality of the ACO’s care management processes.
In a Forbes article from earlier this year, John Nosta wrote, “From advice to device, the pharmacy has always represented a first line of defense for health information and wellness.

- Pharmacists in Drug Delivery
- Specialty Drugs
- Mail Order
Healthcare Reform: The Changing Role of Retail and Specialty Pharmacy

Pharmacists are seeing their jobs expand to include:
- Front lines in at-risk population identification and adherence programs
- Aiding in improving patient outcomes
- Providing better access to services
- Potential key role in reducing healthcare costs
Newer Roles in Pharmacy Practice

- Provider Status – Pharmacist Practitioner
- Medication Therapy Management (MTM) Specialist
- Informatics
- Specialty drugs
- Immunizations
- Health screening
- Collaborative practice agreements
Pharmacist Credentialing

- Board of Pharmaceutical Specialties
  - Eight specialties plus area of added qualifications
- Commission for Certification in Geriatric Pharmacy
- Certified geriatric pharmacist
- American Health Information Management Association (AHIMA)
  - Certified Healthcare Technology Specialist (CHTS)
  - Consultant Practitioner
Credentialing & Roles of Other Healthcare Professionals

Other Health Professionals

- Pharmacy Technicians
- Nurse Practitioner (NP)
- Physician Assistants
Pharmacy Technician Certification Board

- Founded in 1995
- Goal to establish a national standard for pharmacy technician certification
- More than half million certified technicians nationwide
Pharmacy Technician Role Expansion

- A California bill expanding the role of pharmacy technicians and interns was signed into law by Governor Jerry Brown on September 15, 2014.
- The new law is intended to “make more efficient use of pharmacy personnel,” such as enabling hospital pharmacists to spend more time collaborating with other health care providers.
Effective July 1, 2014

Increases the number of pharmacy technicians a pharmacist can supervise

Requires the Florida Board of Pharmacy to establish rules “under which a licensee who applies to the board for approval may supervise more than 3, but not more than 6 registered pharmacy technicians.”

Requires the board to take several factors into consideration when receiving such requests
  ◦ Average number of prescriptions filled by the pharmacy
  ◦ If the pharmacy is registered as a compounding facility
Advanced practice nursing certifications at ANCC include clinical nurse specialist (CNS) and nurse practitioner (NP) specialties.

Once an advanced practice nurse (NP or CNS) meets the requirements to take the appropriate certification examination and successfully passes the exam, the nurse is awarded a credential from the chart below.
# Advanced Practice Registered Nursing (APRN)

<table>
<thead>
<tr>
<th>Certification Exam</th>
<th>Certification Credential Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nurse practitioners</strong></td>
<td></td>
</tr>
<tr>
<td>Acute Care Nurse Practitioner</td>
<td>ACNP-BC</td>
</tr>
<tr>
<td>Adult Nurse Practitioner</td>
<td>ANP-BC</td>
</tr>
<tr>
<td>Adult–Gerontology Acute Care Nurse Practitioner</td>
<td>AGACNP-BC</td>
</tr>
<tr>
<td>Adult–Gerontology Primary Care Nurse Practitioner</td>
<td>AGPCNP-BC</td>
</tr>
<tr>
<td>Adult Psychiatric–Mental Health Nurse Practitioner</td>
<td>PMHNP-BC</td>
</tr>
<tr>
<td>Family Nurse Practitioner</td>
<td>FNP-BC</td>
</tr>
<tr>
<td>Psychiatric–Mental Health Nurse Practitioner</td>
<td>PMHNP-BC</td>
</tr>
<tr>
<td>Gerontological Nurse Practitioner</td>
<td>GNP-BC</td>
</tr>
<tr>
<td>Pediatric Primary Care Nurse Practitioner</td>
<td>PNP-BC</td>
</tr>
<tr>
<td>School Nurse Practitioner (retired exam)</td>
<td>SNP-BC</td>
</tr>
<tr>
<td><strong>Clinical nurse specialists</strong></td>
<td></td>
</tr>
<tr>
<td>Adult–Gerontology Clinical Nurse Specialist</td>
<td>AGCNS-BC</td>
</tr>
<tr>
<td>Adult Health Clinical Nurse Specialist</td>
<td>ACNS-BC</td>
</tr>
<tr>
<td>Adult Psychiatric–Mental Health Clinical Nurse Specialist</td>
<td>PMHCNS-BC</td>
</tr>
<tr>
<td>Child/Adolescent Psychiatric–Mental Health Clinical Nurse Specialist</td>
<td>PMHCNS-BC</td>
</tr>
<tr>
<td>Clinical Nurse Specialist Core (retired exam)</td>
<td>CNS-BC</td>
</tr>
<tr>
<td>Gerontological Clinical Nurse Specialist</td>
<td>GCNS-BC</td>
</tr>
<tr>
<td>Home Health Nursing Clinical Nurse Specialist (retired exam)</td>
<td>HHCNS-BC</td>
</tr>
<tr>
<td>Pediatric Clinical Nurse Specialist</td>
<td>PCNS-BC</td>
</tr>
<tr>
<td>Public/Community Health Clinical Nurse Specialist (alternate credential for Advanced Public Health Nursing)</td>
<td>PHCNS-BC</td>
</tr>
</tbody>
</table>
Physician Assistants (PA)

- PA graduates must pass the Physician Assistant National Certifying Exam (PANCE)
- A computer-based, multiple-choice test comprising questions that assess general medical and surgical knowledge.
- Specialty Certificates of Added Qualifications (CAQs)
  - Cardiovascular & Thoracic Surgery
  - Emergency Medicine
  - Hospital Medicine
  - Nephrology
  - Orthopedic Surgery
  - Pediatrics
  - Psychiatry
Pharmacists at Point of Care
Value of Pharmacist in Patient Counseling

"Here is the mood elevating medication that you doctor prescribed. The less costly generic version is called chocolate."
Pharmacists at POC

- Provider Status
- Medication Therapy Management Services
- Consultant Pharmacist
- Immunizations
- Collaborative Practice Agreements
Provider Status

- Video Clip
- APhA President Lawrence Brown on Provider Status for Pharmacists
- https://www.youtube.com/watch?v=xWrWB8Ux42E
Pharmacy Provider Status Legislation

2015 law update

- US Representatives, Brett Guthrie (R-KY), G.K. Butterfield (D-NC), Todd Young (R-IN), and Ron Kind (D-WI)
- Introduced the Pharmacy and Medically Underserved Areas Enhancement Act (HR 592)
- Originally proposed in last year’s 113th Congress

See more at: http://www.pharmacytimes.com/news/Pharmacist-Provider-Status-Bill-is-introduced-in-Congress#sthash.yKhhjTF8.dpuf
Pharmacy Provider Status Legislation

2015 law update

- Bipartisan support from 123 co-sponsors
- On January 29, 2015, US Senators Charles Grassley (R-IA), Sherrod Brown (D-OH), Mark Kirk (R-IL), and Bob Casey (D-PA) introduced companion legislation (S 314) to the House bill.

See more at: http://www.pharmacytimes.com/news/Pharmacist-Provider-Status-Bill-Reintroduced-in-Congress#sthash.yKhhjTF8.dpuf
Pharmacy Provider Status Legislation

- If passed, it will make state-licensed pharmacists in medically underserved communities eligible for reimbursement as health care providers for certain services under Medicare program.
- This will grant pharmacists federal recognition as members of the health care team.
- Join the cause: [http://www.pharmacistsprovidecare.com/]
Currently, the Medicare Part D MTM program applies only to targeted beneficiaries who have multiple chronic diseases; take multiple Part D medications; and meet an established cost threshold.

Established in 2003 with the Medicare Modernization Act under President George W. Bush
MTM Empowerment Act 2013

- Two new bills introduced in Congress in March 2013 would allow individuals with a single chronic disease to qualify for medication therapy management (MTM) services under Part D of the Medicare program.
- The Medication Therapy Management Empowerment Act of 2013 (H.R. 1024)
  - Would allow the act to be applied for a particular single chronic disease only if overall costs to Medicare would not increase over the following 5-year period.
    - Introduced by Rep. Cathy McMorris Rodgers (R-WA) on March 7
    - Companion bill S. 557, introduced by Sen. Kay Hagan (D-NC) on March 13
Pharmacists at POC

Specialty pharmacy

- Focuses on high cost, high touch medication therapy for patients with complex disease states
- Medications in specialty pharmacy range from oral medications to cutting edge injectable and biologic products
  - Includes new class of agents, biosimilars
- The disease states treated range from cancer, multiple sclerosis and rheumatoid arthritis to rare genetic conditions
Specialty Pharmacy

- Include limited distribution by manufacturers
- Most have Risk Evaluation and Mitigation Strategies (REMS) program by FDA
- Limited network by payers
- Payers and managed care are looking for innovative projects to reduce the cost and burden of these specialty drugs
Consultant Pharmacist

Rules and Statue in Florida

- Separate license from general pharmacist license
- 465.0125 Consultant pharmacist license; application, renewal, fees; responsibilities; rules.—
  - The consultant pharmacist shall be responsible for maintaining all drug records required by law and for establishing drug handling procedures for the safe handling and storage of drugs.
  - The consultant pharmacist may also be responsible for ordering and evaluating any laboratory or clinical testing when, in the judgment of the consultant pharmacist, such activity is necessary for the proper performance of the consultant pharmacist’s responsibilities.
  - Such laboratory or clinical testing may be ordered only with regard to patients residing in a nursing home facility, and then only when authorized by the medical director of the nursing home facility.
Rules and Statue in Florida

Separate license from general pharmacist license

465.0125 Consultant pharmacist license; application, renewal, fees; responsibilities; rules.—

◦ The consultant pharmacist must have completed such additional training and demonstrate such additional qualifications in the practice of institutional pharmacy

◦ A consultant pharmacist may also be responsible for ordering and evaluating any laboratory or clinical testing for persons under the care of a licensed home health agency

◦ In order for the consultant pharmacist to qualify and accept this authority, he or she must receive 3 hours of continuing education relating to laboratory and clinical testing as established by the board.
Pharmacist at POC

- Wide range of health and wellness functions, including working to reduce medication non-adherence, monitoring the health of chronic disease patients
- The number of pharmacists trained to deliver vaccinations, up from 40,000 to 150,000 between 2007 and 2011
Pharmacists are allowed to immunize, to some degree, in all 50 states and DC. In Florida, the requirements are as follows and can be found in Section 465.189, F.S.:

1. Must hold a Florida pharmacist license that is active and in good standing.
2. Must successfully complete an immunization administration certification program of no fewer than 20 hours, approved by the Florida Board of Pharmacy.
3. Must enter into a protocol under a supervisory practitioner who is a physician.
In Florida, the requirements are as follows and can be found in Section 465.189, F.S.:

1. Must maintain at least $200,000 of professional liability insurance.
2. Once certified, must report immunizations administered to the state registry of immunization information, Florida SHOTS.
3. If a pharmacist is planning to administer immunizations outside a pharmacy practice setting, the pharmacist must register with Florida SHOTS as an individual.
Pharmacist Collaborative Practice Agreement (CPA)
A formal agreement in which a licensed provider makes a diagnosis, supervises patient care, and refers patients to a pharmacist under a protocol that allows the pharmacist to perform specific patient care functions
Pharmacist’s right to prescribe
Washington state enacted the first permanent prescriptive authority legislation in 1979.
Resulted in the establishment of 119 protocols, with over 110 physicians & approximately 400 RPhs
Pharmacists may initiate, modify, or continue a prescription therapy in accordance with a protocol developed jointly with a physician and approved by the state board of pharmacy
Collaborative Practice Agreements

- Florida pharmacists possess the only independent prescribing authority in the country
- Granted authority to select a drug based on symptoms
- RPh limited in their choices of medications to a restricted formulary
- Formulary is maintained by a state committee of medical and pharmacy board representatives
Map of States with Laws Explicitly Authorizing Pharmacist Collaborative Practice Agreements, 2012

Note: Physician delegation is considered permissive in MI and WI, allowing physicians and pharmacists to enter into CPAs.
Knowledge Check

- What additional credentials will pharmacists and technicians need to provide point-of-care services in the future?
  - A. Doctorate degrees
  - B. Apprenticeship
  - C. Board certification
  - D. None of the above
What additional credentials will pharmacists and technicians need to provide point-of-care services in the future?

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- B. Apprenticeship
- C. Board certification
- D. None of the above
Pharmacists, along with nurse practitioners and physician assistants, are able to prescribe control substances in the state of Florida?

A. True
B. False
Pharmacists, along with nurse practitioners and physician assistants, are able to prescribe control substances in the state of Florida?

A. True
B. False
Assessing Quality in Pharmacy & Healthcare
Previously volume was the key ingredient to determine profitable entities in the healthcare system
Now value is determining how profitable a healthcare entity will be
Defining value in health care system
Measuring Value in Healthcare

National Quality Forum (NQF)

- Nonprofit, nonpartisan, public service organization that works to catalyze improvements in healthcare
- Reviews, endorses, and recommends use of standardized healthcare performance measures
- Performance measures, also called quality measures are tools used to evaluate how well healthcare services are being delivered
Pharmacy Quality Alliance (PQA)
- Established in 2006 as a 501(c)3 designated non-profit alliance
- Promotes appropriate medication use and develops strategies for measuring and reporting performance information related to medications.
- Educating Pharmacists In Quality (EPIQ)
  - A resource developed by PQA
  - Designed to train practicing pharmacists, health professionals, and pharmacy students in measuring, improving, and reporting quality of care in pharmacy practice

http://pqaalliance.org/measures/default.asp
Measuring Performance in Pharmacy Practice

- Pharmacy Accreditation
- Quality Metrics
- Pay for Performance (P4P)
- Report Cards
- CMS Star Rating
Pharmacy Accreditation

- Accreditation Commission on Health Care (ACHC)
- Center for Pharmacy Practice Accreditation
- Utilization Review Accreditation Commission (URAC)
  - Promotes pharmacy quality through accreditation and education products
  - Community Pharmacy Accreditation
  - Drug Therapy Management Accreditation
  - Mail Service Pharmacy Accreditation
  - Pharmacy Benefit Management Accreditation
  - Specialty Pharmacy Accreditation
  - Workers’ Compensation and Property and Casualty Pharmacy Benefit Management Accreditation
Clinical Quality Measures (CQM)

- Center for Medicare and Medicaid Services (CMS) Tools
- Help measure and track the quality of health care services provided by eligible professionals
- Uses data associated with providers’ ability to deliver high-quality care
- Associated with Electronic Health Record (EHR) Incentive Programs
Clinical Quality Measures (CQM)

- Relate to long term goals for quality health care
- CQMs measure many aspects of patient care including:
  - health outcomes
  - clinical processes
  - patient safety
  - efficient use of health care resources
  - care coordination
  - patient engagements
  - population and public health
  - adherence to clinical guidelines
Pay for Performance (P4P)

- Center for Medicare and Medicaid Services (CMS) tool
- "Pay–for–performance" is an umbrella term for initiatives aimed at improving the quality, efficiency, and overall value of health care
- P4P pays incentives to doctors, hospitals, and other health care providers for attaining targeted service goals, like meeting health care quality or efficiency standards
National Committee for Quality Assurance (NCQA)

- Used by organizations, patients and payers to determine which healthcare provider or facility is providing optimum care
- NCQA defines quality health care as the extent to which patients get the care they need in a manner that most effectively protects or restores their health
- Home of HEDIS standards
- Annual report card list on quality care for various health entities
  - Health plans
  - Health insurance plans rating
  - Physician
  - Hospitals
CMS Star Ratings

- Overall Star Rating
- For plans covering drug services (PDP & MA–PD)
- Measures the overall score for quality of those services
- Covers many different topics that fall into 4 categories
CMS Star Ratings

- 4 categories for Star Rating System
  - 1. Drug plan customer service
  - 2. Member complaints and changes in the drug plan’s performance
    - Includes how often Medicare found problems with the plan and how often members had problems with the plan
  - 3. Member experience with plan’s drug service
    - Includes ratings of member satisfaction with the plan
  - 4. Drug safety and accuracy of drug pricing
    - Includes how accurate the plan’s pricing information
    - How often members with certain medical conditions are prescribed drugs in a way that is safer and clinically recommended for their condition
Which of the following agencies will monitor pharmacists/pharmacies for quality and performance measures

A. NQF
B. URAC
C. CMS
D. All the above
E. B & C
Which of the following agencies will monitor pharmacists/pharmacies for quality and performance measures

- A. NQF
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- C. CMS
- D. All the above
- E. B & C
Health Information Technology
Primary Goals for Nation's HIT Infrastructure

- Ensure protection and privacy of healthcare information
- Improve patient care by reducing medical errors
- Reduce costs by removing administrative barriers that result in duplicative claims and services
- Improve coordination of care among healthcare providers
Electronic Health Records

- The Health Information Technology for Economic and Clinical Health Act (HI-TECH Act)
- Segment of the bill provides incentives for Medicare and Medicaid providers to use certified electronic health records (EHRs) to achieve specified improvements in healthcare and
- Implement a nationwide EHR system by 2014
- Electronic health records (EHRs) offer excellent opportunities for the advancement of patient care by pharmacists
The Medicare and Medicaid EHR Incentive Programs provide financial incentives for the meaningful use of certified EHR technology to improve patient care.

To receive an EHR incentive payment, providers must show that they are using their EHRs by meeting thresholds for a number of objectives.

EHR Incentive Programs were phased in three stages with increasing requirements.

Eligible professionals participate in the program on the calendar year, while eligible hospitals and CAHs participate according to the federal fiscal year.
Providers must attest to demonstrating meaningful use every year to receive an incentive and avoid a Medicare payment adjustment.

To participate in the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs and receive an incentive payment, providers are required to submit CQM data from certified EHR technology.
Pharmacy and Technology
New vs Old: What’s available for medication adherence

Pharmacist: "and which medication reminder device would you like to use with this prescription?"
The objective
- Collect and exchange key information regarding adherence, outcomes, clinical condition and patient education

In conjunction with the expanding clinical role of the pharmacist
- An enormous need to ensure pharmacies can share information across all aspects of the care continuum
- Including the provider, payer and patient
Rx Technology

- Pharmacy Automation
- QR codes on prescriptions for medication information (example - MedsonCue®)
New Technology for Patient Services

- Personalized Digital Intervention (PDI) communication strategies
  - New technology helps facilitate provider-to-patient communication with the channels, content and frequency needed to address individual patients’ specific healthcare needs.
- Center for Disease Control (CDC) & National Public Health Information Coalition (NPHIC) host National Conference on Health Communication, Marketing, and Media
New Technology for Patient Services

- Prescription synchronization
  - Operating process where pharmacies take charge of when prescriptions will be filled; and prescription filling is done in a workflow batch process.
  - Core functions of all synchronization programs are the same
    - Synchronization and scheduling of all prescriptions being taken by a patient
    - Monthly calls with patients to monitor adherence, schedule refills, and detect medication-related problems
    - Pharmacist consultations to patients and professional recommendations to prescribers, as needed
New Technology for Patient Services

Appointment Based Model (ABM)

- A patient care service designed to improve patients’ adherence to medications and build efficiencies in pharmacies
- Each patient enrolled in the ABM has a designated appointment day to pick up all medications.
- Pharmacy staff call patients in advance of their appointment to identify any changes to the medications and confirm that each prescription should be refilled
Career Opportunities in the New Realm of Pharmacy Practice
Questions to Ask

- What are the implications and opportunities for pharmacists in post-ACA world?
- What are the short and long term goals pharmacist should focus on?
- How do pharmacists and other healthcare professionals position themselves to play a meaningful role in driving improvements in patient care?
Similar Titles – Changing Roles

- Consultant
  - MTM practice
  - Telehealth
  - Consulting firm
  - International health

- Pharmacy Managers
  - Specialty
  - PBM
  - Traditional
Growth Areas for Pharmacists

- Quality Assurance
- Regulatory Affairs
- Informatics/Technology
- Pharmacovigilance (Drug Safety)
- Specialty Pharmacy
  - Biosimilars
  - Immunology
  - Oncology
Congress has passed a bill to allow pharmacists to provide MTM services to Medicare patients in underserved communities who have only one chronic disease?

A. True
B. False
Congress has passed a bill to allow pharmacists to provide MTM services to Medicare patients in underserved communities who have only one chronic disease?

A. True
B. False
Driving Change or Hitchhiking?

"All I did was stop for one hitchhiker, next thing I knew this whole bunch of them came out of nowhere and just jumped in!"
How to move forward in career changes

- Divide room into groups to discuss various scenarios and emerging role pharmacists, technicians and other healthcare providers can participate.
- 10–15 minutes discussion
- 5–10 minutes mini presentations
Thank YOU

¬ Ready for a career change?

¬ https://www.youtube.com/watch?v=WpZZ4bT8geA

Any Burning Questions?
References

- http://www.pm360online.com/the-pharmacys-new-role-in-providing-healthcare-services/