GTMR Institute

Get the medications right

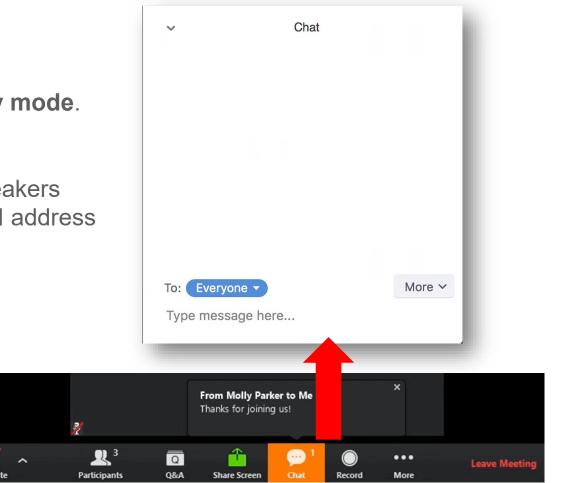
www.gtmr.org

How to Integrate Clinical Pharmacists Into Primary Care

A Few Quick Tips and Reminders

All participants will be in **listen-only mode**.

Please submit questions for the speakers throughout the presentation. We will address them during the Q&A.





The Get the Medications Right Institute gtmr.org

Vision Enhance life by ensuring appropriate and personalized use of medication and gene therapies.

Mission

Bring critical stakeholders together, bound by the urgent need to optimize outcomes and reduce costs by getting the medications right.

Focus Areas

- Practice and Care System
 Transformation
- Payment & Policy Solutions
- Precision Medicine via
 Advanced Diagnostics
- Health IT to Support
 Optimized Medication Use

Multi-Stakeholder Coalition: Launched April 2019 – 1450+ members & 895+ companies





Medication Complexity

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Over 10,000 prescription products marketed in the U.S¹



80% of patients leave their primary care provider office with a prescription.²



Medicare Part D beneficiaries have an average of three to four prescribing providers.³



Nearly 30% of adults take 5 or more medications.¹

Over 4 billion prescriptions annually.⁴

49 seconds of a 15minute patient visit is spent talking about new medications⁵



Medication Errors. June 2017, <u>http://psnet.ahrq.gov/primers/primer/23/medication-errors. Accessed 17 Jan. 2020.</u>
 Watanabe JH, McInnis T, Hirsch JD. Ann Pharmacother. 2018 Sep;52(9):829-837.
 CMS Chronic Condition Data Warehouse Medicare Part D Prescription Drug Utilization 2008-2017.
 Schumock GT, et al. American Journal of Health-System Pharmacy July 2018, 75 (14) 1023-1038.
 Patient Educ Couns. 2008 Aug; 72(2):311-19.

Overburdened Physicians



Increasing demands, less time with patients, limited reimbursement all contribute to physician burnout which effects up to 54% of physicians.⁶



Primary care physicians see an average of 20 patients per day.⁷



After each visit, 16 min spent on electronic health record (chart review, documentation, ordering) ⁸

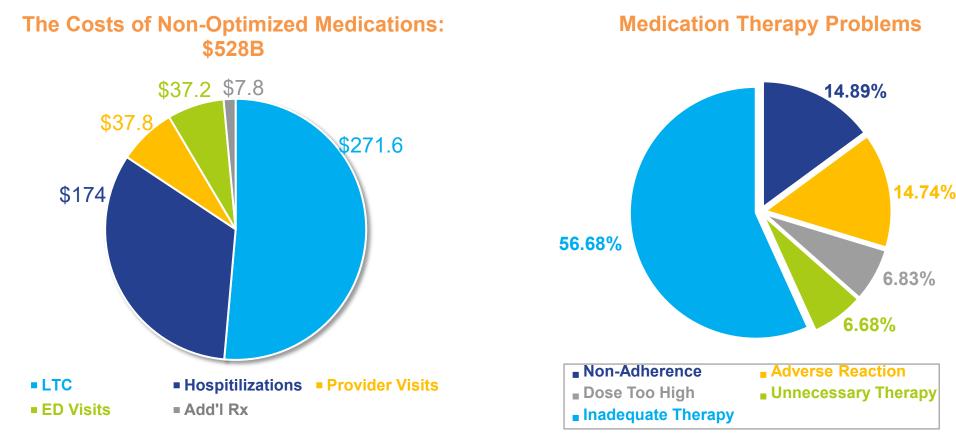


6 National Academy of Medicine. Taking Action Against clinical Burnout. Oct 2019.

7. 2018 Survey of America's physicians practice patterns and perspectives. Sep 2018.

8. Physician time spent on electronic health record during outpatient encounters. Annals of Internal Med. Feb 2020.

The Risk Non-Optimized Medication Therapy



*Watanabe JH, McInnis T, Hirsch JD. Cost of prescription drug-related morbidity and mortality. Ann Pharmacother. 2018;52(9): 829-837.

*Comprehensive medication management in team-based care. American College of Clinical Pharmacy.



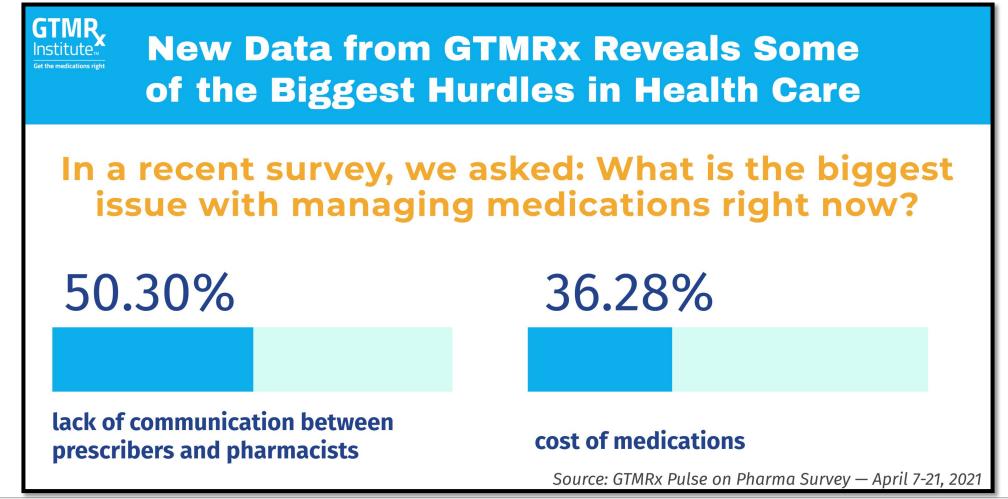
Mitigating the Risk: Optimizing Medication Use Through Comprehensive Medication Management (CMM) in Practice

> CMM: A systematic approach to medications where physicians and pharmacists ensure that medications (whether they are prescription, nonprescription, alternative, traditional, vitamins or nutritional supplements) are individually assessed to determine that each medication is appropriate for the patient, effective for the medical condition, safe given the comorbidities and other medications being taken and able to be taken by the patient as intended.*

* McInnis, Terry, et al., editors. The Patient-Centered Medical Home: Integrating Comprehensive Medication Management to Optimize Patient Outcomes. 2nd ed. PCPCC Medication Management Task Force collaborative document.

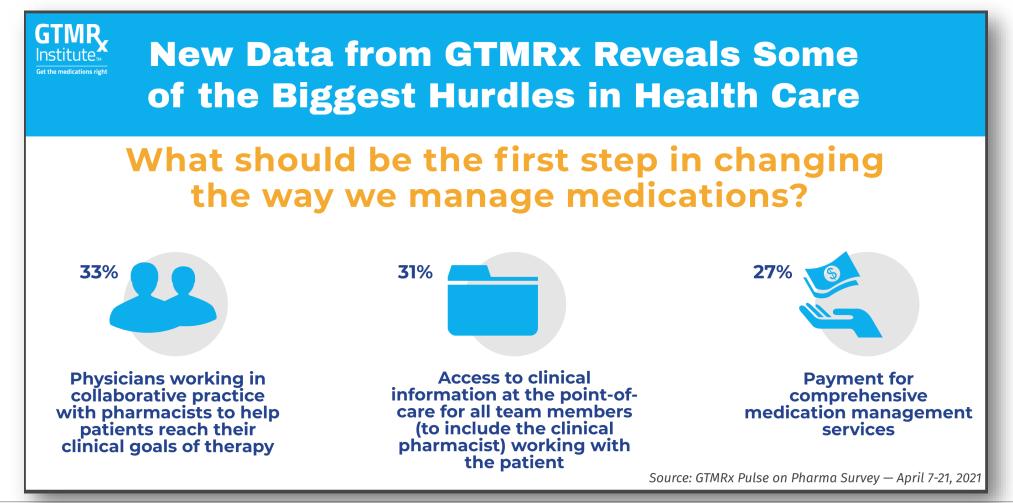
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GTMRx Pulse on Pharma Survey





Further Industry Insight: Pulse on Pharma Survey





Medication Habits of Americans: Consumer Survey GTMRx/ Zogby Analytics





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Today's Presenters



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INTEGRATING CLINICAL PHARMACISTS INTO PRIMARY CARE

Peter Teichman

PETER TEICHMAN, MD, MPA, AND SHAOWEI WAN, PhD, BPharm

How to Integrate Clinical Pharmacists Into Primary Care

Clinical pharmacists can take team-based care to the next level.



n today's practice environment, with increased demands on physicians' time, increased complexity of medication management, and increased performance expectations, primary care physicians need not go it alone. Collaborating with clinical pharmacists is a promising way to expand team-based care.

Clinical pharmacists are among the least understood and most underrated members of health care teams. The duration of their education and clinical training surpasses that of nurse practitioners and physician assistants, yet clinical pharmacists are too often relegated to episodic consultations for individual patients or tinkering at the edges of clinical care in supply-based assignments calibrated below their doctorate degrees. With high ratios of education and training to sphere of practice, clinical pharmacists are capable of stepping into the challenges of daily clinical care, making substantial contributions to care teams, and building robust population health programs. (See "Get to know clinical pharmacists" in the online version of this article at https://www.asfp.org/fpm/2001/0500/p12.html)

12 FPM May/June 2021

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www.aafp.org/fpm

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Key Points

- \circ Medications play an oversize role in medical care.
- $^{\circ}$ We need better oversight and care of medication-based care.
- \circ Clinical pharmacists are well-suited to improve medical care.
- Clinical pharmacists have not been fully invited into or fully engaged at the point of medication decision-making.
- There are multiple effective pathways to integrating clinical pharmacists into the pivotal activities of medical care.



How to Integrate Clinical Pharmacists Into Primary Care

Shaowei Wan, PhD, BPharm Peter Teichman, MD, MPA Health Care Teams Need Clinical Pharmacists' Participation

- Shortage in US health care professionals' workforce worse after the pandemic
- Physician-centric decision-making and performance evaluation model
- Unmet patient needs for safe, effective and affordable treatments
- Complex and expensive medication use (\$528.4 billion dollar waste due to nonoptimized medications)

Clinical Pharmacists can take team-based care to the next level Typically, 4-year PharmD degree with rigorous basic and clinical science curriculum

30% complete 1-2 year residency training

10% attain Board Certified Pharmacotherapy Specialist credential Reimbursement is a Barrier to Expand Clinical Pharmacist Services

- Value-based reimbursement model
 - Improved quality/outcomes and cost reduction
- Fee-for-service reimbursement model
 - Separate payment for each separate service
- Current U.S. health care system mixed payment model

Practical Ideas of Clinical Pharmacists' Services Incidental to Physician Billing



Examples in Population Health

Social determinants of health

- "Low income" (Z59.6) or "Financial hardship" (Z91.120)
- Food insecurities lead to adverse drug events, e.g., hypoglycemia
- Patients with low health literacy

Clinical pharmacists can offer creative solutions to these challenges

- Navigate health plans or patient assistance programs
- Identify affordable options
- Patient screening/education

Discussion / Q&A



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