



Integration of Clinical Pharmacists is Essential to Advanced Primary Care

Decades of evidence have proven that whole-person primary care leads to better care, lower costs and improved health. Harvard Medical School's Center for Primary Care [Primary Care Investment Guide](#) sheds light on how primary care can be implemented most effectively to achieve those aims. The guide breaks down how advanced primary care services such as clinical pharmacy services, behavioral health integration, care management, population health and social needs interventions lead to better outcomes for patients. It brings together insights from more than 40 stakeholder interviews, case studies, spending analyses, and literature reviews, providing a better understanding of which primary care functions create the greatest value. It also includes a closer look at 5 states that are leading in the primary care investment space.

The guide states that the following 6 team-based services improve health outcomes, reduce costs, enhance patient experience, support workforce well-being, and advance equity:

- **Embedded Clinical Pharmacists** to optimize medication management and chronic disease control
- **Behavioral Health Integration**, including the Primary Care Behavioral Health model and the Collaborative Care Model
- **Care Management** for patients with complex medical or social needs
- **Population Health Programs** that use data to close care gaps and proactively manage chronic disease
- **Social Determinants of Health and Disparities Initiatives**, including systematic screening and community health worker support
- **eConsults**, enabling rapid, specialist input and reducing avoidable referrals

Integrated clinical pharmacy services showed a strong level evidence of impact from the literature. This impact was also demonstrated in the [review of evidence](#) from GTMRx.

Impact of Advanced Primary Care Services

APC Service	Insights from Health Organization Leadership		Evidence of Impact on Cost/Utilization from the Literature (n)
	Impacts on Cost/Utilization	Other Reported Impacts	
Behavioral Health Integration	↓ ED visits ↓ readmissions	Improved depression/anxiety management; ↑ PCP confidence; ↓ clinician burden; ↑ access for vulnerable patients	Limited evidence (8)
Clinical Pharmacy Services	↓ ED visits cost savings	Improved diabetes/hypertension control; ↑ adherence; ↓ PCP workload	Strong (33)
Care Management	↓ hospitalizations ↓ re-admissions	Improved chronic disease control; Better follow-up after discharge; ↑ continuity; ↓ provider burden	Moderate (39)
Population Health	↑ revenue from meeting incentives ↓ hospitalizations and readmissions from RPM	Improved screening; improved chronic disease outcomes; ↓ care gaps; ↑ equity ; ↓ burnout; ↑ job satisfaction	Moderate* (11)
Social Determinants of Health	↓ ED visits for social crises	↑ access to supports; ↑ engagement; ↑ family stability; ↑ provider satisfaction	Limited evidence (1)
E-Consults	↓ unnecessary referrals	Faster clinical decision-making; ↑ access; ↑ provider and patient satisfaction; Enhanced PCP capability	Limited, but Strong (8)

Courtesy of Amie Alley Pollack at Harvard Medical School

The Investment Guide details how policymakers, employers, provider organization leadership, practices and health plans can holistically assess, plan and prioritize investments in team-based advanced primary care services.

[Access](#) the executive summary and recommendations.

[Access](#) the full report.

Listen to the report authors discuss key highlights and findings in this Journal of the American College of Clinical Pharmacy [podcast episode](#).

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