

Community Pharmacy and Medication Therapy Management

Cardiovascular Health Area Networks

Medication therapy management (MTM) is a distinct service or group of services that optimizes therapeutic outcomes for patients. It is a patient-centered, comprehensive approach in which community pharmacists use interventions that engage the patient and prescriber on a frequent and consistent basis. MTM includes five core elements: medication therapy review, a personal medication record, a medication-related action plan, intervention and/or referral to a physician or other health care professional, and documentation and follow-up.



Within the context of CVD prevention, MTM can include a broad range of services, often centering on three areas: identifying uncontrolled hypertension, educating patients on CVD and medication therapies, and advising patients on health behaviors and lifestyle modifications for better health outcomes. MTM is especially effective for patients with multiple chronic conditions, complex medication therapies, high prescription costs, and multiple prescribers. MTM can be performed by pharmacists with or without a CPA (CDC, 2022). Collaborative Practice Agreements (CPAs) create a formal practice relationship between a pharmacist and a prescriber, who is most often a physician. The agreement specifies what functions (in addition to the pharmacist's typical scope of practice) can be delegated to the pharmacist by the collaborating prescriber." The terms used and the functions provided under a CPA vary from state to state based on the pharmacist's and prescriber's scope of practice and the state's collaborative practice laws (CDC, 2017).

Discussion Highlights

Embedding pharmacists in clinical settings has demonstrated return on investment to some health systems and led the systems to cover pharmacist personnel costs. Some benefits of including pharmacists in patient care may impact cost indirectly, such as identifying and administering missing immunizations. This discussion included strategies that states have employed to recruit and engage pharmacies to play a role in chronic disease management. Services that pharmacies have implemented or expanded as a result of partnerships with State Health Departments (SHDs) were shared, along with pharmacy-related data collection and utilization efforts.

Key Take-Aways

A wide range of pharmacy-related stakeholders engaged with state health departments, including:

- Community Pharmacy Enhanced Services Network (CPESN)
- College(s) of Pharmacy
- State Pharmacy Association
- Community-based pharmacies
- Retail pharmacy chains
- Independent pharmacy cooperatives
- Private insurers



The most important elements leading to successful recruitment and/or engagement of pharmacies are:

- Finding a champion in the pharmacy community to advocate for work with state health departments. These professionals can also give insight on which pharmacies serve certain high priority populations
- Leveraging the champion's relationships with others in the pharmacy community to raise awareness of the work and its value
- In-person visits to pharmacies to build relationships, provide training and information

A variety of settings can serve as opportunities for recruitment and engagement:

- Notices of funding opportunities
- Chronic disease partners meetings
- Statewide pharmacy surveys and assessments
- Pharmacist-oriented newsletters
- Presentations at conferences with pharmacists in attendance

Pharmacy Services implemented or expanded as a result of state partnerships:

- Medication therapy management (MTM) sessions
- Collaborative Practice Agreements (CPAs)
- Pharmacists embedded in clinical settings and Team-Based Care
- MTM and/or other trainings – often in collaboration with Schools of Pharmacy
- Enhanced reimbursement
- Chronic disease management program awareness campaigns to reach pharmacists, patients, and providers
- Bidirectional referral pathways between Community Health Workers (CHWs) and pharmacists, which ensures more needs are met for each

SHD strategies to collect and utilize data regarding pharmacies and the populations they serve:

- Statewide pharmacy surveys
- Payer claims data
- Electronic Health Records (EHRs)
- Pharmacist eCare Plan
- Data analysis to determine characteristics of patients who abandon medications and which medications are frequently abandoned to predict and prevent abandonment
- Pharmacy students share MTM encounter data
- Landscape analysis revealed that patients, providers, and payers are often unclear about the role of pharmacists. This led to the development of an awareness campaign and data collection on the campaign's impact

Challenges and Lessons Learned

Financial Constraints:

- Community pharmacies often have a small staff that limits their ability to take on new projects, though their inclusion in team-based care is critical since the pharmacy is the first or only point of entry into the healthcare system for some patients
- Data collection and reporting requirements necessary for pharmacies to receive funding can be a burden, and data sharing agreements can facilitate the flow of information
- Dollars from grant funding and reimbursement through insurance often do not cover all costs incurred by pharmacies to provide services, and this varies by state
 - Offering multiple programs in which pharmacies can engage enables smaller pharmacies to participate since this increases their overall reimbursement for project services
- Services such as MTM are a departure from services traditionally provided by pharmacists and these services present new challenges to overcome
- Pharmacies and clinics without existing relationships face significant start-up barriers to establish shared workflows

Citation:

Centers for Disease Control and Prevention. Best Practices for Heart Disease and Stroke: A Guide to Effective Approaches and Strategies. Centers for Disease Control and Prevention: 2022. doi:10.15620/cdc:122290

Centers for Disease Control and Prevention. Advancing Team-Based Care Through Collaborative Practice Agreements: A Resource and Implementation Guide for Adding Pharmacists to the Care Team. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services: 2017.