

PHARMACEUTICAL CARE PRACTICE

The Future for Pharmacists

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DEVELOPMENTAL ACTIVITIES

Make changes internal
to the pharmacy
profession

IMPLEMENTATION ACTIVITIES

Make connections from the profession of pharmacy to the health care system

Brazil

Canada

Cuba

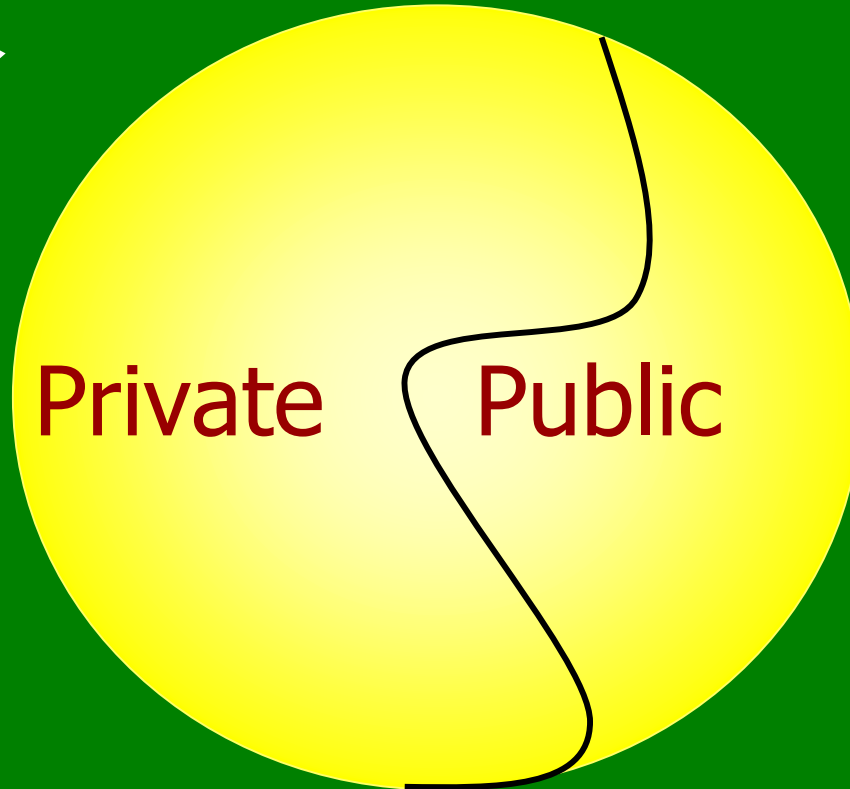
England

Spain

Russia

USA

Germany



Private

Public

Brazil

Canada

Germany

Private

Cuba

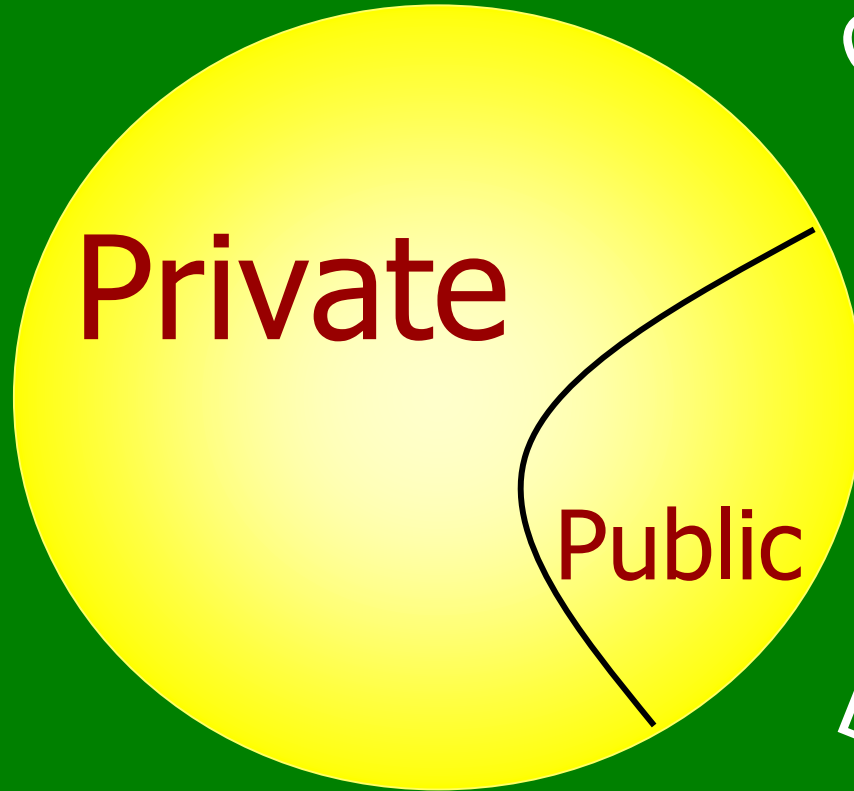
Public

USA

England

Russia

Spain



Brazil

Canada

Cuba

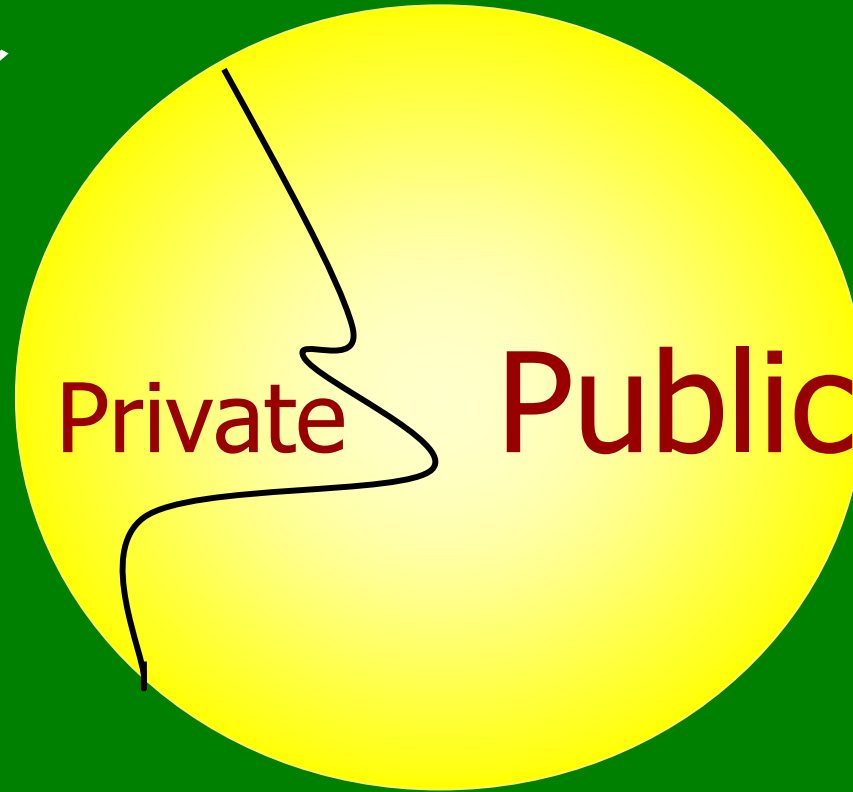
England

Spain

Russia

USA

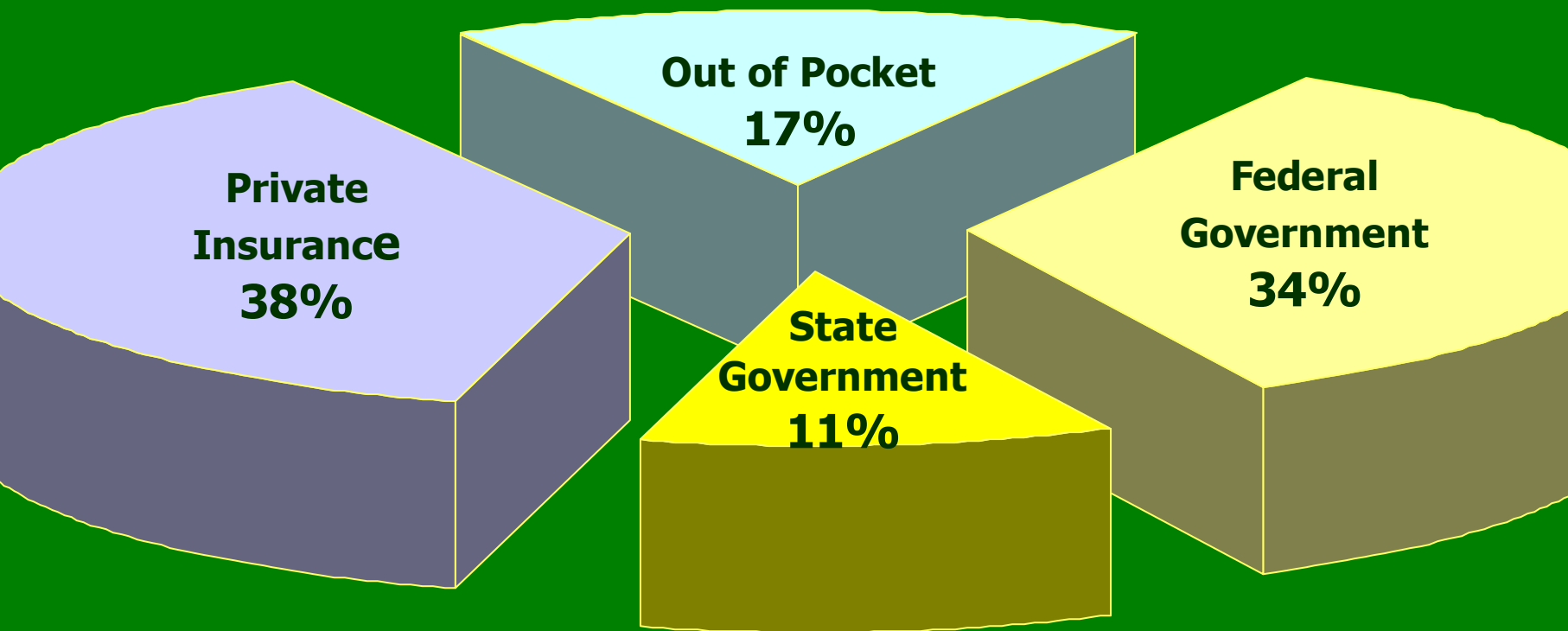
Germany



Private

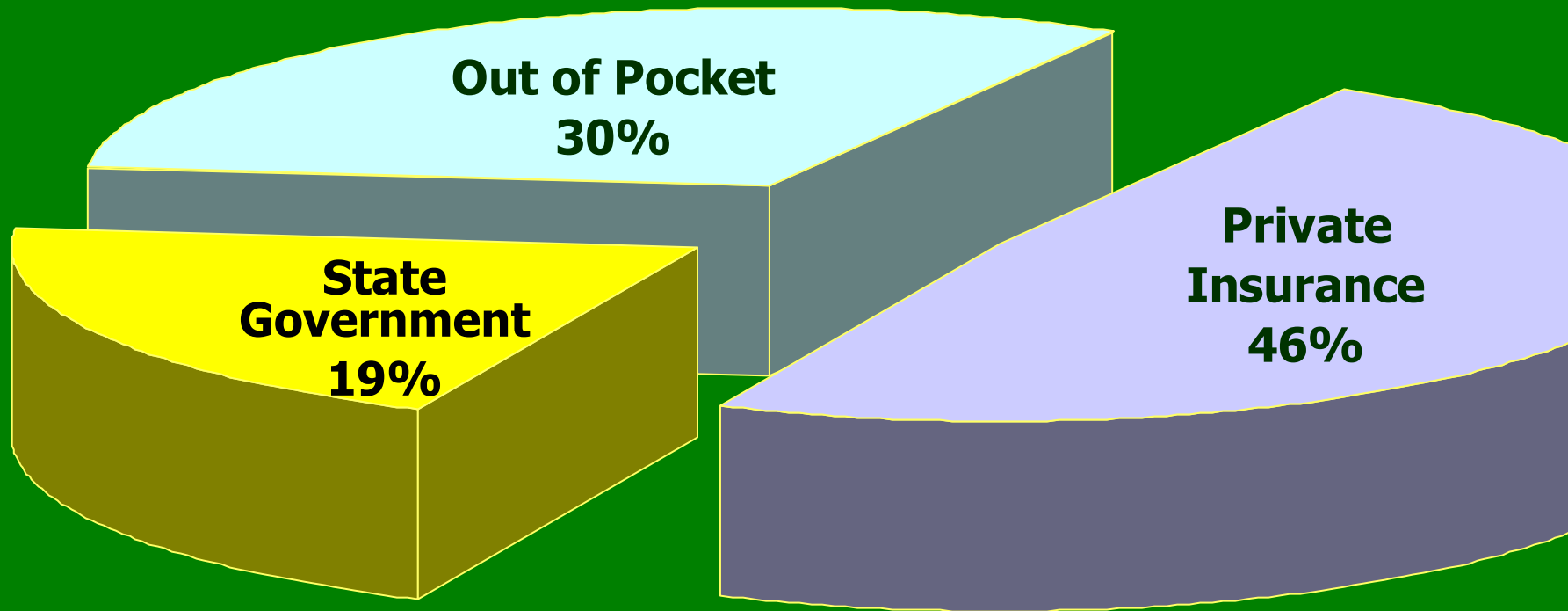
Public

Payment for Health Care Expenditures U.S. 2003



Payment for Prescription Medications

U.S. 2003



COSTS OF DRUG THERAPY PROBLEMS

Total U.S. Costs = \$177 billion / year

Physician/Urgent Care Visits	\$ 14 billion
Added Medications	\$ 3 billion
Emergency Room Visits	\$ 6 billion
Hospital Visits	\$ 121 billion
Long-term Care Stays	\$ 33 billion

HEALTH CARE NEEDS OF A PATIENT



Pharmaceutical Care in Health Care

	Primary Focus	Knowledge Base	Responsibility in the drug use process
Medical Care	Diagnosis and Treatment of the patient's disease	Pathophysiology	Prescribing
Nursing Care	Giving care to the whole patient during the cure or treatment	Biological, psychological, social, or spiritual human responses	Drug administration
Pharmaceutical Care			

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Nursing Care	Giving care to the whole patient during the cure or treatment	Biological, psychological, social, or spiritual human responses	Drug administration
Pharmaceutical Care	Identifying and meeting a patient's drug-related needs	Pharmacotherapy	Identification, prevention, and resolution of drug therapy problems

Minnesota



Minnesota Medicaid Law

- **WHAT**
- **WHO**
- **WHERE**
- **HOW**

Minnesota Medicaid Law

WHAT **Definition of the Practice and Service**

WHO **Qualifications of the practitioner**

WHERE **Description of the practice site**

HOW **Documentation and reporting requirements**

Minnesota Medicaid Law

WHAT **Definition of the Practice and Service**

- Performing assessments of the patient's health status
- Comprehensive medication review to identify, resolve, and prevent drug therapy problems
- Formulating a medication treatment plan
- Evaluating the patient's response to therapy including safety and effectiveness
- Document care provided
- Use an electronic documentation system specifically designed to optimize therapeutic outcomes from medications.
- Communicate and coordinate care with other providers
- Provide information and resources to enhance patient understanding and

Minnesota Medicaid Law

WHAT **Definition of the Practice and Service**

WHO **Qualifications of the practitioner**

- Licensed pharmacist
- Graduated after 1996 or passed approved continuing education courses in pharmaceutical care practice (access this program ce.pharmacy.umn.edu)
- Apply a structured patient care process including assessment, care plan development, and evaluation

Minnesota Medicaid Law

WHAT Definition of the Practice and Service

WHO Qualifications of the practitioner

WHERE Description of the practice site

- Separate from the commercial business
- Be entirely devoted to patient care
- Sufficient size and accommodations to comfortably seat at least 4 people around a table
- Be private—can not be seen or heard by other patients

Minnesota Medicaid Law

WHAT Definition of the Practice and Service

WHO Qualifications of the practitioner

WHERE Description of the practice site

HOW Documentation and reporting requirements

Documentation Requirements

Patient Information

Recipient's full, legal name

Address and telephone number

Gender date of birth

Current medical conditions

resolved medical conditions

Primary physician and contact information

Allergies

Documentation Requirements

Other Patient Information

date and time of encounter and documentation

prescription and nonprescription drugs with their indications

list of drug doses, directions and intended use

relevant medical devices

dietary supplements, herbal products

alcohol and tobacco history

list of environmental factors that impact the patient

Documentation Requirements Continued

Assessment of drug problems identified, including but not limited to:

Determining that the medications are appropriately indicated;

Determining if the recipient needs additional medications;

Determining if the medications are the most effective products available under the conditions;

Determining if the medications are dosed appropriately to meet goals of therapy

Identifying adverse effects caused by medications;

Determining if the medications are dosed excessively and causing toxicity;

Determining if the recipient is taking the medications appropriately to meet goals of therapy;

Written plan including goals and actions needed to resolve current drug therapy problems

Evaluation of success in meeting goals of medication treatment plan

Evaluating effectiveness and safety of current drug therapy

Documentation Requirements Continued

- ✓ **Information, instructions and resources delivered to the patient**
- ✓ **Content of pharmacist's communications to patient's other health care providers**

Practice Results

MOST FREQUENT INDICATIONS FOR DRUG THERAPY (N = 26,238 Patient Encounters)

1. HYPERTENSION

2. HYPERLIPIDEMIA

3. DIABETES

4. OSTEOPOROSIS

5. VITAMIN/DIETARY SUPPLEMENT

6. ALLERGIC RHINITIS

7. ESOPHAGITIS

8. DEPRESSION

9. MENOPAUSAL SYMPTOMS

10. ARTHRITIS PAIN

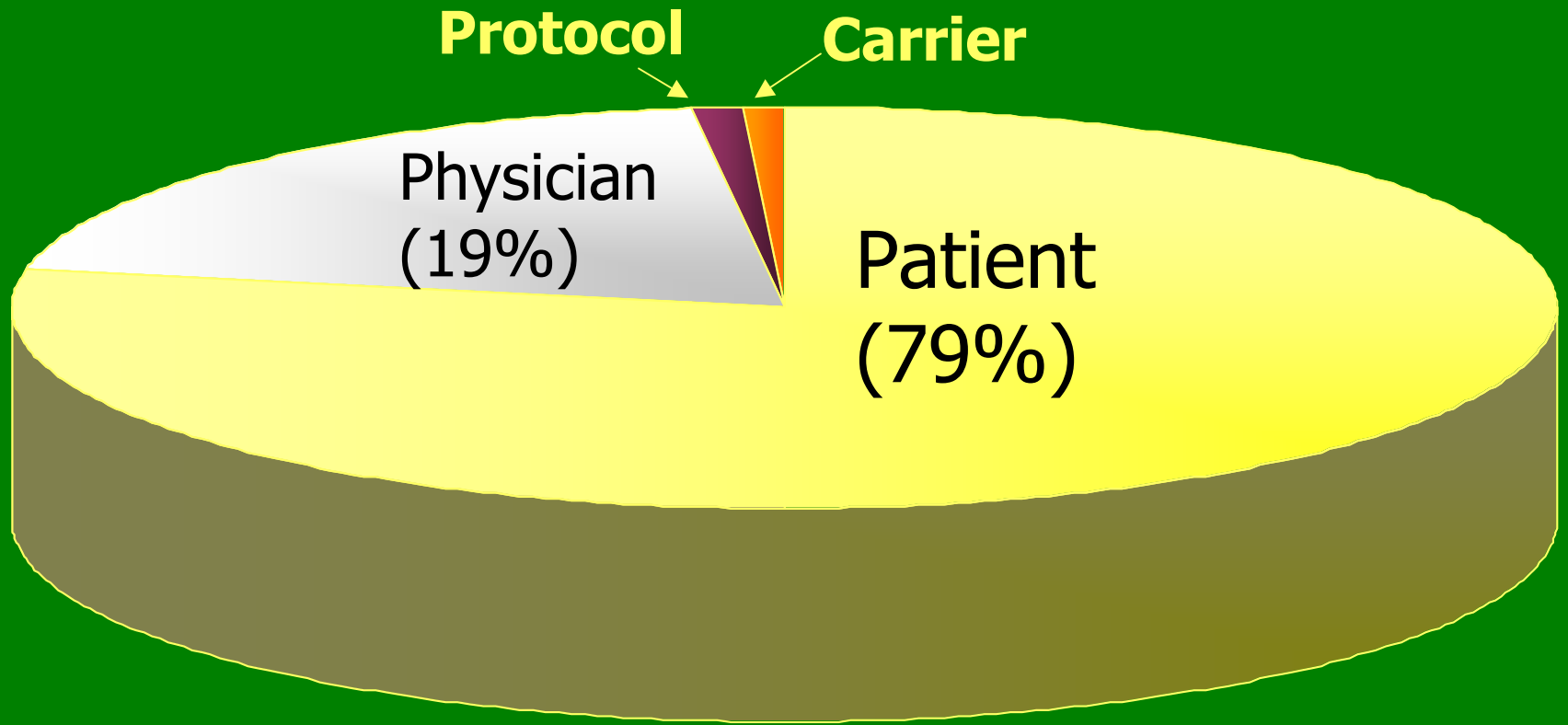
These 10 conditions represent
50% of all indications for drug therapy

DRUG THERAPY PROBLEMS

(N =26,238 Patient Encounters)

		Percent
Indication	◆ Unnecessary Drug Therapy	6 %
	◆ Needs Additional Drug Therapy	28 %
Effectiveness	◆ Ineffective Drug	8%
	◆ Dosage Too Low	20 %
Safety	◆ Adverse Drug Reaction	14 %
	◆ Dosage Too High	5 %
Compliance	◆ Noncompliance	<u>19 %</u>
	Total	(n=11,726) 100%

PRIMARY METHOD OF RESOLUTION OF DRUG THERAPY PROBLEMS



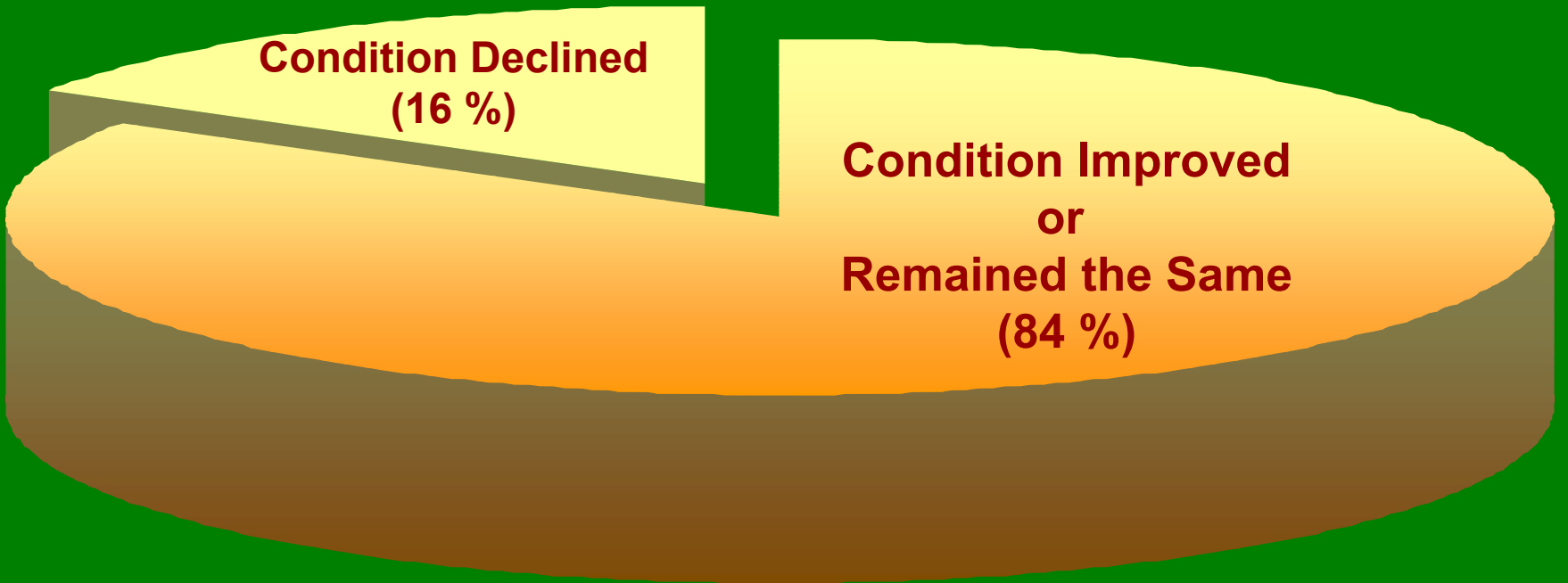
IMPACT OF PHARMACEUTICAL CARE PRACTICE

Resolution of drug therapy problems with *Physicians*

initiate new drug therapy	31 %
change drug dosage regimens	23 %
change drug product	15 %
discontinue drug therapy	15 %
laboratory monitoring initiated	10%
other	6%

Change in Clinical Status at Follow-up Evaluation

4492 Patients and 10,485 Medical Conditions



ECONOMIC IMPACT OF THE PRACTICE

(After 30,000 patients and 80,000 encounters)

Benefit to Cost Ratio
5:1 to 10:1

Patient Care Process

Patient



Patient's wants
and needs
Responsibilities

Medication
Experience

Assessment

Care Plan

Follow-up
Evaluation

Pharmacotherapy
Workup

Practitioner



Philosophy of Practice
Social Obligation
Responsibilities
Patient-centered approach
Caring

Therapeutic Relationship

STANDARD OF PRACTICE

