Perspectives on Current and Future Competency Requirements of Pharmacists: Emerging Care Models

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• “I see a great future for pharmacists if they are willing to embrace disruptive change”
  – Enabling technology to reduce cost, improve quality and efficacy of care
  – Provide value-adding process business models
  – Value - Network
    - Clayton M. Christensen

APhA has been working with Dr. Christensen since February 2011

Dr. Christensen recognizes his book’s oversight of not including pharmacists and has been learning and seeing what pharmacists can do
Expanded roles require:

• **Specificity:** what is it that we provide?
• **Measurability:** how can what we provide be evaluated in regards to value and outcomes?
• **Predictability:** can we consistently provide the needed level of service?
• And, the Innovator’s DNA, including
  – Associating, Questioning, Observing, Networking, Experimenting
ACOs and Medical Homes

• Integrated care models
  – Accountable Care Organizations (ACOs)
    • Financing model; set of providers accountable for the quality and cost of defined patient population; shares risk and year-end savings if quality & cost thresholds are met (MedPAC)
  – Medical Home Models
    • Care model: team-based approach to comprehensive primary care coordinated by a personal physician*
    • Administrative fee to physician to coordinate care and incentives to meet quality measures for care

*www.pcpcc.net/PCMH.AHRQ.Gov
ABSTRACT
Pharmacists can affect the delivery of primary care by addressing the challenges of medication therapy management. Most office visits involve medications for chronic conditions and require assessment of medication effectiveness, the cost of therapies, and patients’ adherence with medication regimens. Pharmacists are often underused in conducting these activities. They perform comprehensive therapy reviews of prescribed and self-care medications, resolve medication-related problems, optimize complex regimens, design adherence programs, and recommend cost-effective therapies. Pharmacists should play key roles as team members in medical homes, and their potential to serve effectively in this role should be evaluated as part of medical home demonstration projects.
Types of Pharmacists’ Services

- Medication management
- Guidance on polypharmacy
- Adherence
- Anticoagulation monitoring
- Transitions in care – medication reconciliation
- Patient and physician education
- Drug information
- Cost management
- Chronic disease management
Getting Started ... Lessons Learned

APhA-APPM Medical Home Workgroup
• To docs: “How can I help you with your patients?”
• Start with basics – what the physician knows
  – Drug information
  – Patient education
• Pharmacy needs to be at the table -connect with state-based initiatives on ACOs and medical homes
• Deploy pharmacists where needed

Medical Association Executive
• “Medical schools don’t teach pharmacology anymore”
Pharmacist Competencies for Practicing in Emerging Care Models

• Practice experience working on teams delivering patient-centered care – validate role on the team
  – Clinical expertise
  – Developing collaborative relationships with physicians
  – Accountability for shared patient goals and patient outcomes

• Communication skills
  – Ability to effectively deliver care using various approaches (face-to-face, telephonic, video, etc)
  – Effective communications skills including motivational interviewing and coaching

• Use of quality metrics
Pharmacist Competencies for Practicing in Emerging Care Models

- Address medication access issues
- Understand implications of health information technology (HIT)
- Understand population management for targeting at risk patients
- Value of pharmacists’ services
  - Payment models
  - Billing
  - Perceived value in the marketplace
- Physical assessment skills?
Pharmacists will be the health care professionals responsible for providing patient care that ensures optimal medication therapy outcomes.

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