



## Improve Patients' Access to Pharmacist Services

As the American healthcare system continues to evolve, a prevailing issue is the adequacy of access to affordable, quality healthcare. Millions of Medicare beneficiaries lack adequate access to primary health care services, and this is only expected to increase as the number of enrollees grows. In addition, nearly two-thirds of the Medicare population has multiple chronic conditions.

According to the Association of American Medical Colleges, by 2020, we will face a shortage of more than 91,000 doctors. Pharmacists are uniquely positioned to help address this anticipated shortage by playing a greater role in the delivery of health care services in collaboration with other health care team providers.

Pharmacists have advanced education and training that equips them to provide many services in addition to their role in providing patients with access to and information about their prescription medications. These services include:

- Point of Care Testing (e.g. Flu, Strep)
- Management of Chronic Conditions and Related Medications
- Blood Pressure and Cholesterol Testing
- Immunization Screening and Administration
- Transition of Care Services

Physicians and certain other health care providers are reimbursed under Medicare Part B for providing these services, while pharmacists are not. The lack of reimbursement for these services limits patient access.

**The Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 592 / S. 109)** will provide access for Medicare beneficiaries in medically underserved communities to covered Medicare Part B services from their pharmacist.

- Medically underserved communities include Medically Underserved Areas, Medically Underserved Populations, and Health Professional Shortage Areas as designated by HRSA.
- The Act would not require Medicare to cover new or different services, but instead would increase access to currently covered services subject to existing state scope of practice laws.
- Pharmacists would be reimbursed at 85% of the physician fee schedule, which is consistent with the precedent established for nurse practitioners and physician assistants.
- The bill would achieve savings for the health care system by increasing access to cost-effective early intervention services, particularly for those seniors with multiple chronic conditions, and reducing the need for higher-cost interventions down the road.

To become an original cosponsor of this Act, please contact Sophie Trainor in Rep. Brett Guthrie's office at [Sophie.Trainor@mail.house.gov](mailto:Sophie.Trainor@mail.house.gov) or Karen Summar in Sen. Chuck Grassley's office at [Karen\\_Summar@grassley.senate.gov](mailto:Karen_Summar@grassley.senate.gov).

**Please enlist as a co-sponsor of the Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 592 / S. 109) and work to pass this legislation in the House and Senate.**

March 2017