



Improve Patient Access to Pharmacist Services via Provider Status Legislation

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 healthcare services, and this is only expected to increase as the number of enrollees grows. Moreover, 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 healthcare services in collaboration with other health care team providers.

Pharmacists have extensive education and training that equip 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:

- Health tests and screenings
- Management of chronic conditions and related medications
- Immunization screening and administration
- Point-of-care testing (e.g. flu, strep)
- Transition of care services.

Physicians and certain other healthcare 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)*, sponsored by Representative Brett Guthrie (R-KY) and Senator Chuck Grassley (R-IA), will provide access for Medicare beneficiaries in medically underserved communities to covered Medicare Part B services from their pharmacist.

- The legislation targets beneficiaries in Health Resources and Services Administration-designated medically underserved communities, including those who live in Health Professional Shortage Areas or Medically Underserved Areas, or those considered to be a part of a Medically Underserved Population.
- The Act would not require Medicare to cover new or different services, but instead focuses on currently covered Medicare services.
- These services would be provided 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.

Please enlist as a co-sponsor of the *Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 592 / S. 109)*.