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James Evans, 76, of Durham consults Rite Aid pharmacist Prasanna Bafna during a visit to the Fayetteville Road store. 'When it's time for my medicine, it's right on time,' Evans says.

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Pharmacies embrace expanding medical role

After years of adding everything from groceries to grills to their inventory, drugstore chains are once again emphasizing their pharmacies.

Pharmacists are being asked - and paid by insurance companies - to monitor their customers' health. That could include counseling them on chronic diseases, making sure they're taking their medications, and screening for maladies from diabetes to high cholesterol.

While many pharmacists have long done more than dispense pills, this is the first time many have been able to offer such a wide range of medical services - partially because of changes in the way pharmacists are educated, and partially because of legislative changes that have cleared the way for an expanded role.

For pharmaceutical chains, the change is an opportunity to develop new sources of revenue in a highly competitive industry.

For customers, it's another option for health care, and one that may be less expensive and take less time than a trip to the emergency room or an urgent care clinic.

"I think it's a mixture of everything that's going on," said David Catalano, a Raleigh pharmacist who works for Walgreens. "[Customers] are trying to get some advice as quick as they can from someone they can trust."

The emphasis on pharmacists makes economic sense for health insurers. Pharmacists have expertise and often have a customer's entire medical picture, so they can catch prescription overlaps or possible drug interactions. Nor do they command the same fees that a physician does from a health insurer.

The push toward enlisting pharmacists to do more than dispense drugs comes as the nation is trying to lower health care costs. A 2007 study from the New England Healthcare Institute estimated that 13 percent of total health care expenditures - more than \$290 billion a year - are made simply because people don't take their medications as prescribed. Those people have a higher likelihood of winding up in the emergency room or with other complications because they did not follow their doctor's instructions.

But not everyone is happy with pharmacists treading on turf that was once solely the territory of doctor's offices and urgent care clinics.

"Store-based health clinics can offer patients an option for episodic care but cannot replace the patient-physician relationship," said Rebecca Patchin, a doctor from California and board member of the American Medical Association.

"Patients deserve timely access to affordable, high-quality care provided by health care professionals that are appropriately and adequately trained. Convenience should never compromise safety."

'Closer than my doctor'

Over the past four years, James Evans has come to rely on Prasanna Bafna, a pharmacist near his Durham home, for much of his medical advice.

On Thursday, Evans was at his Rite Aid for an hourlong counseling session with Bafna.

They reviewed Evans' medications, including drugs for diabetes, high blood pressure and poor circulation.

Though the pharmacist didn't tell him to make any major changes, Evans said the opportunity to speak with a medical professional for such a length of time is invaluable.

"It's wonderful," said Evans, 76, of Durham. "When it's time for my medicine, it's right on time. I don't have to stand there and wait on it. The other pharmacist I used to go to, you'd have to sit and wait for hours. ... [Bafna] is closer than my doctor. My doctor is eight or nine miles from here."

Proponents of the expanded role of pharmacists say that getting customers like Evans to utilize the new services being offered is key to making the system work and lowering health care costs.

Reimbursement rates

In general, pharmacists are not reimbursed as much money as doctors are for immunizations and the like, said Dan Mendelson, CEO of Avalere Health, a health care advisory company in Washington, D.C., and a Duke University adjunct professor.

"Most pharmacies are not allowed to bill for a pharmacy visit," he said. "They're allowed to bill for a vaccine, but there's no routine office visit into the pharmacy that gets paid for by the insurance."

The insurance companies may choose to reimburse the pharmacists more money or for additional services if there is a shortage of doctors or other circumstances in a particular region, Mendelson added, but "it depends on what the insurance company is trying to accomplish with respect to its network."

The model is getting a boost from federal legislators. Some changes triggered by the new health care law will take effect later this month, with other changes rolled out in the years to come.

As of this year, laws in all 50 states also allow pharmacists to administer immunizations, something that also clears the way for expanded services.

Some companies are using the additional services simply as another way to get customers through the door, even if some of the services are not yet reimbursed by insurance, Mendelson said.

"It's really about bringing purchasers into the box," he said. "That's what they call it. The box is the four walls in the pharmacy. If you can bring purchasers into the box then you're doing fine. If a consumer comes in and they buy all kinds of other stuff, you're doing well."

Enhanced training

In addition to legislative changes last year, there have also been changes in the pharmacy industry that have helped pharmacists reach this point, said Edith Rosato, senior vice president of pharmacy affairs for the National Association of Chain Drug Stores.

She credits federal plans which began paying pharmacists to counsel Medicare and Medicaid patients in the hopes of improving results. She also said that an academic change was also key: Students earning a pharmacy degree must now get a year of training on counseling and interacting with patients.

That set the foundation for the industry to focus more on patient care services, Rosato said.

So far, studies have indicated the services are working.

Raleigh-based Kerr Drug has taken the lead in this state in offering preventive care and has gone so far as to design some stores to focus exclusively on health and wellness. In Asheville, the company partnered with the city and the Mission-St. Joseph's Health System to see whether pharmacists with expanded roles could help diabetes patients better manage their diseases and save in overall health care costs.

Kerr found that the annual health care costs for the diabetes patients participating in Asheville declined by 9.8 percent per year. One employer had an average reduction of 41 percent in sick days taken by participating patients, which equated to an estimated \$18,000 in increased productivity for the company.

The need for these types of clinics will only increase as the population grows older and more people are diagnosed with chronic illnesses such as diabetes, said Rebecca Chater, executive vice president of Kerr Health, a subsidiary of Kerr Drug. "Look at the number of people who are now moving into Medicare age," she said. "If you look at medication use in that population, people who are within the Medicare system have 13 different prescriptions on average, with 50 different medications filled each year on average. The opportunity is huge."

But getting to a point where insurance companies are willing to reimburse for more preventive services and pharmacists are willing to offer them is tricky business, said Jay Campbell, executive director of the N.C. Board of Pharmacy.

"There is a bit of a chicken and the egg aspect," he said. "Health care being the huge expenditure it is, folks aren't going to want to spend money until there's a demonstrated benefit for those services. But private insurers have to start seeing enough of a value to provide the reimbursement."

'Cookbook medicine'

Still, some physicians say there are risks to having health care administered by pharmacists instead of doctors.

Linwood Watson, a family medicine doctor with an urgent care clinic called Rex Express Care in Knightdale, said he thinks patients like the new options because they are very transparent. There is a set fee for each service, and no secrets about what things will cost.

"Everyone wants cookbook medicine, but what happens when your body doesn't read the book?" he said.

Pharmacies respond by saying that they work closely with area doctors to offer referrals to customers who do not have a primary care physician or need further medical expertise.

But with so many options and such a fragmented system, Watson said, he feels patients will have to take more responsibility for their own care in order to ensure continuity.

"If you want to go buy a car, and you want a good deal, you're going to have to do some research, keep some records and be prepared," he said. "Are you prepared to do that for your health care?"

What you can get where

While pharmacists are offering a wider range of services that may overlap with those available at a doctor's office, there are still patients who should go to their doctor instead.

Patients who are in a high-risk group or may be at high risk for complications due to other medications they are taking may want to consult their doctor as well as a pharmacist before deciding where to seek treatment.

Here's a list of services pharmacies are providing:

Immunizations, especially the flu shot

Health screenings for diseases like diabetes

One-on-one counseling sessions

Diagnosis of minor ailments like the flu or colds in on-site clinics

Physicals

Skin exams

Doctors' offices and urgent care clinics offer most of those services and are still the primary resources for more complicated procedures, including:

X-rays

Setting broken bones

Chiropractic issues, including neck and back pain

Mental health concerns

Illness involving reproductive, respiratory or urinary problems

Here are other things pharmacy companies are doing:

CVS has found success with its Minute Clinics, in-store health clinics for diagnosing illnesses like colds and the flu. So far there are 500 in CVS stores. Last week, Target announced that it will add five similar health clinics in five Chicago-area stores, bringing its total number to 36 nationally.

Earlier this year, Rite Aid launched a new loyalty program called Wellness+ that not only rewards shoppers with financial incentives but also rewards them with free screenings for problems like high cholesterol and diabetes.

Last month, Walgreens picked Raleigh as one of three markets in which it is heavily promoting its in-store 90-day prescription refill program, something aimed at allowing customers to still interact with a pharmacist without being forced to get drugs through mail-order services.

And, all major pharmacies are now touting the availability of flu shots without an appointment. Some are even offering free flu shots as a part of a store loyalty rewards program. CVS is offering customers a 10 percent-off savings pass if they get flu shots there.