ASHP Update: Current Issues in Pharmacy Practice

Julie L. Webb, R.Ph.
Senior Vice President
Office of Professional Development

Disclosure Statement
• I have no conflict of interest or financial disclosures relative to this presentation

Pharmacists’ Objectives
• Explain the pharmacy profession’s efforts in pursuing provider status at the national level
• Describe the areas of focus for ASHP related to opioid overuse
• Describe the tenants of the Standardize for Safety Initiative
• Discuss the marketplace information on the pharmacy workforce, growth in residency training programs, and BPS credentialing and how the Practice Advancement Initiative (PAI) can impact future pharmacy practice
• Summarize the emerging roles of pharmacy technicians

Technicians’ Objectives
• Explain how provider status impacts pharmacy technicians’ role in the profession
• Discuss the trend of opioid use in the United States over the last decade
• Describe the tenants of the Standardize for Safety Initiative
• Summarize the current marketplace of the pharmacy workforce as it relates to credentialing
• Describe the emerging roles for technicians based on the impact of the Practice Advancement Initiative (PAI)

Current Issue Topics
• Provider Status
• Opioid Overuse
• Standardize 4 Safety
• Workforce Issues/Opportunities
• Question & Answer

Provider Status is About Patients
Achieving provider status is about giving patients access to care that improves:
Patient safety
Healthcare quality
Outcomes
Decreases costs
Why is provider status important for pharmacists?

- Pharmacists are not recognized under the Social Security Act as health care providers
- New payment systems emphasize quality and outcomes
  - Accountable Care Organizations
  - Medical Homes
- Social Security Act determines eligibility

Who Has Provider Status?

- Physicians
- Nurse practitioners
- Physician assistants
- Certified nurse midwives
- Psychologists
- Clinical social workers
- Certified nurse anesthetists
- Speech-language pathologists
- Audiologists
- Registered dietitians
- Physical therapists

Access to Primary Health Care

- Growing number of Medicare beneficiaries
- Increasing patients with one or more chronic conditions
- Newly covered patients via Affordable Care Act
- Projected shortage of physicians
  - Projected shortfalls in primary care range between 14,900 and 35,600 physicians by 2025
  - If currently underserved populations utilized health care at the same rate as the rest of the population, up to an additional 96,000 physicians would have been needed in 2014

Source: AAMC Center for Workforce Studies, April 2016 Analysis

Projected Physician Shortage

Source: AAMC Center for Workforce Studies, June 2010 Analysis

Focus on Medically Underserved Communities

- Help meet unmet healthcare needs
  - Increase patients’ access to care
  - Improve quality
  - Decrease costs
- Strategy follows similar successful paths taken by other healthcare professionals to gain provider status

Patient Access to Pharmacists’ Care Coalition (PAPCC)

- Formed January 2014
- Organizations representing patients, pharmacists, pharmacies and other interested stakeholders
- Drafted legislation in 2014 and 2015
- Facilitated reintroduction of H.R. 592 and S. 109 bills in 2017
Multi-Stakeholder, Interdisciplinary

Albertsons LLC and New Albertsons Inc.  
American Association of Colleges of Pharmacy  
American Pharmacists Association  
American Society of Consultant Pharmacists  
American Society of Health-System Pharmacists  
American Veterinary Medical Association  
Association of Clinicians for the Underserved  
BI-LO Pharmacy  
Cardinal Health  
CVS Health  
Food Marketing Institute  
Fred's Pharmacy  
Fruth Pharmacy  
Healthcare Distribution Management Association  
Healthcare Leadership Council  
Hematology/Oncology Pharmacy Association  
International Academy of Compounding Pharmacists  
Kroger  
League of United Latin American Citizens  
McKesson  
National Alliance of State Pharmacy Associations  
National Association of Chain Drug Stores  
National Center for Farmworker Health  
National Community Pharmacists Association  
National Consumers League  
National Patient Advocate Foundation  
National Pharmaceutical Association  
National Rural Health Association  
Omnicare  
Pediatric Pharmacy Advocacy Group  
Rite Aid Pharmacy  
Safeway  
SUPERVALU Pharmacies  
Target  
The Walgreens Group  
Winn-Dixie Pharmacy

PAPCC Objectives

• Mission: To develop and help enact a federal policy proposal that would enable Medicare beneficiary access to, and payment for, Medicare Part B services by state-licensed pharmacists in medically underserved communities
• Primary Goal: To improve medically underserved seniors’ access to pharmacists’ services consistent with state scope of practice laws and regulations

The Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 592/S. 109)

• Increases access to healthcare for patients in medically underserved areas
• Promotes cost-effective healthcare by increasing opportunities for early interventions
• Allows pharmacists to provide services authorized by state scope of practice

The Pharmacy and Medically Underserved Areas Enhancement Act (Continued)

• H.R. 592  
  • Introduced January 12, 2017  
  • Rep. Brett Guthrie lead sponsor (R-KY)  
  • Introduced with 107 original cosponsors  
  • Maintained bill number from last year  
  • Currently 241 cosponsors
• S. 109  
  • Introduced January 12, 2017  
  • Sen. Grassley lead sponsor  
  • Introduced with 26 cosponsors  
  • Currently 51 senators cosponsoring bill

The Pharmacy and Medically Underserved Areas Enhancement Act

• Services  
  • Managing chronic diseases  
  • Medication management  
  • Manage care as patients transition from hospital to home  
  • Health and wellness testing  
  • Administering immunizations

The Pharmacy and Medically Underserved Areas Enhancement Act

• Overall impact:  
  • Improved health outcomes  
  • Reduced hospital readmissions  
  • Reduced emergency department visits

How Does Provider Status Impact Pharmacy Technicians?

• As the clinical role of pharmacists grows, more will need to be done on the pharmacy operations side  
• The role of pharmacy technicians could be elevated due to provider status  
• Would expect a robust demand for pharmacy technicians going forward
State Provider Status

- ASHP will work with state affiliates to move state legislation to recognize pharmacists as providers
- Expanding state scope of practice so pharmacists can practice at the top of their license

Specific State Affiliate and Individual Actions

- Write to your senators and representative
- Recruit individual health system support of H.R. 592/S. 109
- Solicit other state-level health profession organizations support of H.R. 592/S. 109:
- Visit elected officials/staff in Washington DC or district offices

Assessment

ASHP is part of the Patient Access to Pharmacists' Care Coalition whose goal is to improve medically underserved seniors' access to pharmacists' services consistent with state scope of practice laws and regulations

- True
- False

OPIOID ABUSE EPIDEMIC

- Opioid prescriptions have increased 175% in past 20 years
- ED visits due to nonmedical use of opioids more than doubled between 2006 and 2010
- National Institute on Drug Abuse (NIDA) estimates overall cost of opioid abuse is $700 billion annually
Opioid Abuse Epidemic: Congress
- S. 524 – Comprehensive Addiction and Recovery Act (CARA)
  - Amended the Controlled Substances Act to permit partial fills of Schedule II prescriptions when permitted under state law
  - VA to expand its Opioid Safety Initiative to include all VA medical facilities
  - FDA to refer new drug applications for opioids to an advisory committee before approval
  - Creation of a public–private task force on pain management within two years (pharmacists included)

Opioid Abuse Epidemic: ASHP Activity
- ASHP participated in White House meeting on prescription drug abuse in May
  - Coordinated by the Office of National Drug Control Policy
  - First in a series of meetings with healthcare provider and patient advocacy groups to work to expand access to opioid treatment, prevention, and recovery resources

Three Main Areas of Focus for ASHP
- Education
  - Members, interprofessional
  - Webinars, major meetings
  - Pharmacy school curriculums
  - Specialty traineeships
  - Inventory diversion prevention
- Patient-Specific Pain Plan
  - Tailored to a specific patient
  - May be acute or chronic
  - Needs to be interprofessional (the role of the pharmacist)
- Regulatory/Advocacy
  - Interoperable PDMP’s and mandatory usage
  - Lock-in pharmacy
  - Partial fills
  - Appropriate quantity prescribing
  - Development of abuse-deterrent formulations

ASHP continues to…
- Work with CDC, CMS, FDA and other pertinent agencies and public health groups (including NABP) to promote pharmacists’ concerns and roles in this arena
- Develop resources and education to support the federal initiatives
- Work with state legislatures and boards of pharmacy as they develop and implement related laws and regulations
- Reach out to our members

Assessment
- ASHP is focused to which of the following activities related to opioid overuse?
  - A. Education
  - B. Patient-specific pain plan
  - C. Regulatory issues
  - D. All of the above
Assessment

• ASHP is focused to which of the following activities related to opioid overuse?
  A. Education
  B. Patient-specific pain plan
  C. Regulatory issues
  D. All of the above

Statement of the Problem

• Currently, no national consensus for standard concentrations of IV medications (continuous, intermittent, etc)
• Patients are transferred between patient care areas
  – Within each hospital
  – Within same city
  – Within same state
  – Out of state
• Each time a patient needs an IV medication, there is potential for error if a concentration different from the previous patient care area is used
• Often vulnerable patient populations involved
  – Critically ill
  – Pediatric, neonate
  – Geriatric

Standardize 4 Safety

• Standardize 4 Safety is the first national, interprofessional effort to standardize medication concentrations in order to reduce errors and improve transitions of care
• Standardize 4 Safety is creating, testing, publicizing, and supporting the adoption of these national standardized medication concentrations
• Key partners include AAMI, PPAG, and ISMP

Status of S4S – Half-way Point

<table>
<thead>
<tr>
<th>Phase One, V 1.01 adult continuous</th>
<th>Phase Two, V 1.02 adult continuous</th>
<th>Intermittent IV meds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase One, V 1.01 Cmpd oral liquids</td>
<td>Phase Two, V 1.02 cmpd oral liquids</td>
<td>PCA, epidurals</td>
</tr>
<tr>
<td>Phase One, pediatric continuous</td>
<td>Phase One, standard doses oral liquids</td>
<td></td>
</tr>
</tbody>
</table>

What You Can Do

• START TALKING!!!!
• Be a champion, cheerleader, sponsor
• Don’t just get buy-in, take ownership
• Remember to take an interprofessional approach
• Start talking to the informatics team now
• Everyone can make a difference
• Resources: IPI, Bainbridge Health, ASHP, eBroselow, new potential tools in the pipeline
**PHARMACY WORKFORCE**

How many pharmacists are there?

According to HRSA Bureau of Health Care Professions, there are currently 286,400 pharmacists:

- 63% work in retail settings
- 23.1% work in hospitals
- 13.9% work in other settings*

* Managed care, pharmacy education, long term care, home care, consulting, industry, wholesale, associations, GPOs, trade groups, publishers, office practices, etc

For the 2014 National Pharmacists Workforce Study, pharmacists:

- 44.1% work in indep, chain, mass merch, or supermarket pharmacies
- 29.4% work in hospitals
- 16.7% work in other patient care practices*
- 7.5% work in other settings (industry and non-patient care)

* Defined as HMOs, clinic pharmacies, mail service, nuclear, home care, long term care

**Pharmacists Practicing in U.S. Hospitals**

![Graph showing pharmacists practicing in U.S. hospitals from 2002 to 2015](ASHP national survey of pharmacy practice in hospital settings – 2002-2015)

**What does the future hold?**

Pharmacist supply and demand by 2020

**Pharmacy Practice Initiative**

- 2010 PPMI Consensus Conference
- 2014 Ambulatory Care PPMI Conference
- PPMI = Practice Advancement Initiative
- Enhancing roles for technicians
- Moving pharmacists closer to the patients
- Credentialing opportunities

**ASHP Credentialing Initiatives**

- Residency training
- BPS exam preparation
- BPS recertification resources
- Professional certificates
Percentage of Graduates Seeking Residency

<table>
<thead>
<tr>
<th>Year</th>
<th>Graduates</th>
<th>Participants in PGY1 Match</th>
<th>Percentage of Grads in Match</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>10,199</td>
<td>1,356</td>
<td>13%</td>
</tr>
<tr>
<td>2007</td>
<td>10,282</td>
<td>1,898</td>
<td>19%</td>
</tr>
<tr>
<td>2008</td>
<td>11,327</td>
<td>2,093</td>
<td>19%</td>
</tr>
<tr>
<td>2009</td>
<td>11,516</td>
<td>2,501</td>
<td>22%</td>
</tr>
<tr>
<td>2010</td>
<td>11,487</td>
<td>2,898</td>
<td>25%</td>
</tr>
<tr>
<td>2011</td>
<td>12,346</td>
<td>3,257</td>
<td>26%</td>
</tr>
<tr>
<td>2012</td>
<td>13,163</td>
<td>3,706</td>
<td>28%</td>
</tr>
<tr>
<td>2013</td>
<td>13,207</td>
<td>3,933</td>
<td>30%</td>
</tr>
<tr>
<td>2014</td>
<td>13,838</td>
<td>4,142</td>
<td>30%</td>
</tr>
<tr>
<td>2015</td>
<td>13,994</td>
<td>4,358</td>
<td>31%</td>
</tr>
<tr>
<td>2016</td>
<td>14,556</td>
<td>4,864</td>
<td>33%</td>
</tr>
<tr>
<td>2017*</td>
<td>5,160</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

ASHP Accredited Pharmacy Residency Program Growth

ASHP Resident Matching Program 2007-2017
PGY1

Applicants vs Positions PGY1

Since 2010: Applicants up 77%
Positions up 79%
ASHP Certification Resources

- Review and recertification resources
- BPS-approved provider – oncology, pediatrics, pharmacotherapy, critical care, geriatrics, ambulatory care
- Developing review materials for two new specialties – cardiology and infectious diseases

Product Line Offerings

- Review course – BPS exam preparation
- Recertification offerings
  - Review course – live and on-line
  - Literature studies – 2 offerings/year
  - Intensive studies – at Midyear and on-line
- Core Therapeutic Modules – on-line only

Professional Certificates

- A certificate is NOT certification
- High quality, practical continuing education
- Certificate = demonstration of competence

ASHP Certificates

- Teaching Certificate for Pharmacists
- Pharmacy Informatics Certificate
- Sterile Product Preparation Training & Certificate Program
- Advanced Sterile Product Preparation Training & Certificate Program
- ASHP / ISMP Medication Safety Certificate Program
- Coming soon……..
  - Pain Management
  - Pharmacogenomics

Pharmacy Technicians

- There is growing complexity in medication use and a continued focus on medication safety and quality
- There is a need today for well-qualified, competent pharmacy technicians for the safe provision of medications in all settings
- The existence of competent pharmacy technicians will be fundamental to advancing the patient care role of pharmacists in the future
Emerging Pharmacy Technician Roles and Responsibilities

- Medication reconciliation
- Medication therapy management
- Immunization
- Indigent care prescription programs
- Sterile & non-sterile compounding
- Clinical technicians (e.g., chronic care, appt. scheduling, medication adherence, smoking cessation, vital signs measurements, data management, etc.)
- Tech-check-tech

Non-traditional Pharmacy Technician Activities

| Hospitals with pharmacy technicians utilized in three or more non-traditional |
|--------------------------|-------------------------|
| Staffed beds | % |
| <50 | 22.8 |
| 50-99 | 24.5 |
| 100-199 | 23.3 |
| 200-299 | 28.6 |
| 300-399 | 47.5 |
| 400-599 | 40.9 |
| ≥600 | 57.6 |

About PTCB

Mission Statement

PTCB develops, maintains, promotes and administers a nationally accredited certification program for pharmacy technicians to enable the most effective support of pharmacists to advance patient safety.
PTCB By the Numbers – 12/31/2016

- 618,408 pharmacy technician certifications since 1995
- 283,267 active certified pharmacy technicians
- 53,353 exams conducted in 2016

New PTCB requirements:
- 2015: PTCB only accepting technician-specific CE
- ON HOLD – the 2020 requirement that technicians must complete an ASHP/ACPE-accredited education program prior to sitting for initial certification has been put on hold

Advanced Certification Programs in Development
- Task force met in May 2015 for sterile compounding

Pharmacy Technician Credentials

<table>
<thead>
<tr>
<th>Certification</th>
<th>PTCB Certification</th>
<th>Completed a ASHP-ACPE Accredited Technician Training Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>%</td>
<td>%</td>
<td></td>
</tr>
<tr>
<td>0-50</td>
<td>70.6</td>
<td>6.7</td>
</tr>
<tr>
<td>50-99</td>
<td>81.5</td>
<td>12.7</td>
</tr>
<tr>
<td>100-199</td>
<td>73.6</td>
<td>12.0</td>
</tr>
<tr>
<td>200-299</td>
<td>76.8</td>
<td>9.4</td>
</tr>
<tr>
<td>300-599</td>
<td>77.5</td>
<td>11.8</td>
</tr>
<tr>
<td>600+</td>
<td>50.1</td>
<td>6.7</td>
</tr>
<tr>
<td>All hospitals - 2017</td>
<td>77.8</td>
<td>13.0</td>
</tr>
<tr>
<td>All hospitals - 2016</td>
<td>77.5</td>
<td>13.0</td>
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<tr>
<td>All hospitals - 2015</td>
<td>77.5</td>
<td>17.5</td>
</tr>
<tr>
<td>All hospitals - 2014</td>
<td>73.2</td>
<td>14.0</td>
</tr>
<tr>
<td>All hospitals - 2013</td>
<td>70.9</td>
<td>14.2</td>
</tr>
<tr>
<td>All hospitals - 2012</td>
<td>67.8</td>
<td>13.4</td>
</tr>
<tr>
<td>All hospitals - 2011</td>
<td>66.8</td>
<td>11.7</td>
</tr>
</tbody>
</table>

Source: 2017 ASHP National Survey

Pharmacy Technician Stakeholder Consensus Conference

- Convened by ASHP, ACPE, and PTCB
- Held in February 2017
- Goal – gain consensus among the broader pharmacy community for a national standard in technician education, training, certification, and regulation
- Agreement that a national standard should guide technician education, that technician education programs should be accredited, and that national certification should be required prior to registration or licensure by Boards of Pharmacy

Assessment

<table>
<thead>
<tr>
<th>Are the...</th>
<th>Increasing?</th>
<th>Decreasing?</th>
<th>Staying the Same?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of pharmacists practicing in hospitals...</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Number of pharmacists completing residencies...</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Number of pharmacists obtaining board certification...</td>
<td></td>
<td></td>
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<tr>
<td>Number of technicians obtaining PTCB certification...</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of technicians completing an ASHP/ACPE accredited training program...</td>
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</tr>
</tbody>
</table>