Achieving Provider Status for Pharmacists

Dr. Abramowitz outlines the Society’s involvement in a profession-wide effort to achieve provider status for pharmacists.

Jan 02, 2013 3 Comments Print

Achieving provider status under Section 1861 of the Social Security Act is important for the profession. It is essential to recognize pharmacists for the patient-care providers that they already are, along with other formally recognized providers, such as nurse practitioners, dietitians, psychologists, social workers, optometrists, nurse-midwives, dentists, and others.

The data are conclusive: Pharmacists improve medication-use outcomes for patients when they are included on the patient-care team. A recent report by the office of the Chief Pharmacist of the United States Public Health Services makes a compelling case for using pharmacists more effectively in the care of patients. Therefore, a logical next step is making the services pharmacists provide eligible for recognition and payment by Medicare, Medicaid, and other third-party payers, including states and private health plans.

Pharmacists today are clinical practitioners who provide distinct direct patient-care services, serving as both pharmacy generalists and specialists. This fact is not in dispute. However, laws often lag far behind mainstream practice and technology. In today’s health care environment, where improving quality of care and decreasing costs are the focus of health care reform, there could not be a better time to recognize pharmacists as providers and as the medication-use experts on the interprofessional team.

Achieving provider status will not be easy. It will take a massive grassroots effort by individual pharmacy practitioners and affiliated state societies leading state-based coalitions. Federal legislators need to see, in their districts and states, pharmacists providing the patient-care services they seek for recognition and payment. Achieving provider status will also require a strong and cohesive national coalition of pharmacy organizations, consumer groups, and other health care organizations that understand the value pharmacists bring to the care of the American people.
During ASHP’s Legislative Day in September, ASHP members met with their representatives on Capitol Hill to discuss provider status, with the goal of setting the stage for a broad-based provider status campaign in 2013. Now and in the coming months the CEOs of the national pharmacy organizations are meeting to discuss how we can work together to pool our resources and collective energies to achieve success on this issue. I am absolutely certain that our organizations must work together to advocate for and achieve provider status. It is also important to recognize that achieving provider status will require a multi-year strategy that includes a strong and unwavering coalition at the state and national levels.

Stay tuned for updates on our progress on this top-priority strategic issue for ASHP. Please also start thinking about ways that you as future recognized providers are going to demonstrate to your elected officials in Washington, D.C., the great work you are doing to achieve optimal medication therapy outcomes for your patients and to decrease health care costs.

Best wishes for a Happy New Year!

Blog about it:

http://connect.ashp.org/ASHP/Go.aspx?c=BlogViewer&BlogKey=e83fd270-14c1-412a-9748-a4b242e4d5bc