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Community Pharmacy Response to a New Provincial Drug Plan Reimbursement Policy

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Area of focus: Health Reform & Policy Analysis

Objectives

The purpose of this study was to gain insights on community pharmacies' implementation of Ontario's first government-reimbursed medication management services: MedsCheck (MC), an adherence-focused medication review between pharmacist and patient; and pharmaceutical opinions (PO), pharmacists' prescriber-directed recommendations for addressing identified drug therapy problems.

Approach

In this qualitative study, 44 semi-structured interviews were conducted with 16 corporate executives (representing banner, chain, franchise, and food store/mass merchandiser pharmacies), 12 pharmacy managers (at least one per participating corporation), 12 pharmacy owners, 5 external stakeholders (government and pharmacy organizations), and 2 recent pharmacy graduates. For the pharmacy owners/managers, purposive sampling was used to obtain diversity in location, ownership type, and prescription volume. Interviews were conducted by telephone or in person. Transcripts were coded and descriptive content analysis used to identify themes in the data.

Results

MedsCheck implementation included systematic and ad hoc corporate and pharmacy-level strategies. The most common were infrastructure change (eg. computer technology, construction of private space), pharmacist training (especially for MedsCheck Diabetes), and marketing strategies. A less common but noteworthy strategy was setting target numbers for completed MCs. Some participants viewed targets as a positive incentive and others as problematic and unprofessional. Common continuing challenges were lack of time, low patient awareness or cooperation, need for pharmacist behavioural change, and economic pressures. Perceptions of service quality were variable, with external stakeholders and pharmacy owners/managers more concerned about quality than corporate executives. For POs, underbilling was a consensus theme, attributed to restricted patient eligibility and unclear service criteria. Overall, implementation strategies were perceived to be successful.

Conclusion

Community pharmacy corporations invested in systematic strategies to facilitate implementation of medication management services. These services are now largely viewed as normal pharmacist practice and a source of professional satisfaction. Provision of MC and POs was motivated by complementary but competing objectives of enhancing patient outcomes and increasing pharmacy revenues.