
Expanding Patient Care in Community Pharmacies



Expanding the role of pharmacists in treating minor illnesses could potentially save millions in healthcare costs, according to new research led by Washington State University. The findings suggest that increasing pharmacists' clinical services, including prescribing medications, can enhance healthcare access amid a shortage of primary care providers. The study is published in *ClinicoEconomics and Outcomes Research*.

The study revealed that treating minor health issues such as urinary tract infections, shingles, animal bites, and headaches in pharmacies costs an average of \$278 less than treatment at traditional primary care, urgent care, or emergency room settings. Follow-ups indicated that nearly all patients' conditions resolved after the initial visit with a pharmacist.

If all the illnesses treated at traditional sites in the three-year study had been managed by community pharmacists instead, an estimated \$23 million in healthcare expenses would have been saved.

Pharmacists, especially in the outpatient community setting, are a viable solution to patient access to care problems. Pharmacists are trained and qualified to do this work, yet they are underutilised. They can significantly impact how quickly patients access care, minimising the complexity and progression of conditions.

Study researchers analysed data from nearly 500 patients who received care from 175 pharmacists at 46 pharmacies across Washington from 2016 to 2019. The team compared these cases with insurance data from patients treated at doctor's offices, urgent care facilities, or emergency rooms for similar conditions.

Pharmacy care was effective and significantly less expensive for almost every minor illness studied. For example, an uncomplicated urinary tract infection treated in an emergency room costs \$963 on average, \$121 at a primary care office, and only \$30 at a pharmacy.

These findings underscore the benefits of expanding physician-pharmacist collaborations that allow pharmacists to prescribe medications. Pharmacists are trained in clinical evaluation of common illnesses and regularly recommend over-the-counter treatments. Prescribing authority allows them to provide higher-level care when needed.

Pharmacists also refer patients to other providers for complex conditions requiring further testing or treatments beyond medication. This study shows that pharmacists with prescribing authority can fill a gap in care, especially in rural areas or during off-hours.

More public awareness is needed to expand pharmacy-based treatment so people expect these services, similar to how they do with vaccinations. Pharmacies must also address the financial sustainability of expanded patient care services.

Source: [Washington State University](#)

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