# Pharmacists on the Primary Care Team: Recent Regulatory Changes that Support Collaboration

Suzanne Cohen, Senior Director of Population Health, Health Federation of Philadelphia

# Roles that pharmacists can play on the primary care team

- Medication education and management
  - Behavioral health
  - Hypertension
  - Polypharmacy
  - New agents e.g. weight loss drugs
  - Etc.
- Patient education/counseling
- Support for remote monitoring programs
- Transitions of care
- Substance use counseling
- Medication reconciliation
- Vaccine administration

## Medical Assistance Bulletin

- Effective March 1, 2024
- Enables pharmacists to enroll as providers in the Medical Assistance fee-for-service system,
  whether or not they work for an enrolled pharmacy.
- Establishes MA billing codes and payment for pharmacist services
- Establishes that pharmacists may "fee assign" to a medical practice that employs them or with whom they have a contract, allowing that group to bill for the pharmacist's services.
- FQHC billing still under review

# Fee schedule: New codes

Procedure Code	National Code Description	MA Fee
99408	Alcohol and/or substance (other than tobacco) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes	\$24.93
99605	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, with assessment and intervention if provided; initial 15 minutes, new patient	\$44.80
99606	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, with assessment and intervention if provided; initial 15 minutes, established patient	\$29.18
99607	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, with assessment and intervention if provided; each additional 15 minutes (List separately in addition to code for primary service)	\$27.96

Many additional codes have had the pharmacist provider type added, including vaccine administration, substance use counseling, testing for infectious diseases, ambulatory continuous glucose monitoring, etc.

### What next?

- Some MCOs have already begun to credential pharmacists
- Similar process to credentialing any provider
- If you have an employed pharmacist who sees Medicaid patients makes sense to get them enrolled and credentialed ASAP
- Think about collaborative efforts with community pharmacy potential for them to bill through you (maybe?)
- Waiting for FQHC billing question to be resolved

#### Resources

DHS Bulletin on pharmacists:

https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20OMAP/MAB2024021301.pdf

PAMCO presentation on pharmacist credentialing:

https://www.dhs.pa.gov/HealthChoices/HC-

Providers/Documents/Pharmacist.CredentialingPresentation.PAMCO.April2024.FINAL.pdf