



## COMPLETED GRANT SYNOPSIS

### Establishing a Pharmacist-Led Physician Based Clinic for Providing Medicare Annual Wellness Visits

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Objectives	
To construct a practical, sustainable model for community based pharmacists to partner with physicians and provide Medicare Annual Wellness Visits.	
Methods	
Design	<ul style="list-style-type: none"> <li>Establishing a business agreement with a collaborative physician.</li> <li>Educating and training employees on the AWV process.</li> <li>Developing procedures for appointment scheduling.</li> <li>Gathering self-reported demographic information, medical history, and family history.</li> <li>Obtaining objective patient vitals and routine measurements.</li> <li>Assessing medication therapies to identify medication-related problems.</li> <li>Documenting progress and providing constructive critical analysis of our implementation process.</li> </ul>
Study endpoints	<ul style="list-style-type: none"> <li>A summation of our process.</li> <li>Project blue print as a guide for pharmacists looking to implement this or similar services within another community.</li> </ul>
Results	
<ul style="list-style-type: none"> <li>Executed a business contract with a physician for a 50/50 billing revenue sharing.</li> <li>Contacted 253 patients for Annual Wellness appointments.</li> <li>Completed 58 appointment based Annual Wellness Visits.</li> <li>Billed initial AWV (G0438).</li> <li>Critically analyzed our implementation process.</li> </ul>	
Conclusion	
<p>We successfully provided Medicare Annual Wellness Visits to 58 patients, and we can see other pharmacists doing the same. We formed a successful physician pharmacist collaboration. A different business contract and a larger patient pool would lead to a more financially viable practice model. To that end, obtaining Medicare provider status for pharmacists would allow this service to be self-sustaining by removing our dependence on an outside third party.</p> <p>Even though pharmacists are only able to perform the Annual Wellness Visit under direct physician supervision because, again, they lack provider status under CMS guidelines, the physician continues to benefit financially from the Annual Wellness Visit long after the visit is complete. For this reason, it is vital to communicate to the physician the benefits of improved quality ratings from Medicare as an incentive to his/her office in addition to any monetary agreement from the formation of this partnership.</p>	