



Patient Interest in Pharmacy Services and Willingness to Pay

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Introduction

Ambulatory care pharmacists play a unique role in patient care. Pharmacists in these types of settings have established patient and physician relationships allowing for robust discussions of expansion of services. There are opportunities to expand to other drugs and types of services, especially if payment and laws are conducive. However, in order to expand pharmacist services, it is imperative to know what services patients desire as well as their willingness to pay for these services.

This project aims to enhance practice options in a patient-focused manner by surveying patients' interests and willingness to pay in a clinic setting.

Methods

- An electronic health record (EHR) generated report from the clinic was queried to assist in identifying eligible patients. Patients older than 18 years of age and see one of the supporting physicians at the clinic were included. The target sample size was 32 patients. Patients were randomly selected from this eligibility list to participate in the study.
- Once the informed consent process was completed, a paper survey was given to patients. Patients were asked to independently fill out the survey. Survey results were de-identified and entered into Microsoft Excel for data analysis.
- A focused one-on-one discussion was conducted with each patient based on his/her responses to the survey questions.
- This study was approved by The University of Findlay IRB.

Survey Questions

- Q1.** If a pharmacist could sit down with you in this office and review all of your medications and medication related questions, how likely would you be to utilize this service? *(scale from 1-10)*
- Q2.** If your insurance was unable to cover these services, how likely would you be to utilize the above service? *(scale 1-10)*
- Q3.** If a pharmacist were available via phone even when the office was closed, how likely would you be to utilize this service for medication related questions? *(scale 1-10)*
- Q4.** If insurance was only able to cover 50% of the total cost, how likely would you be to utilize the above services? *(scale 1-10)*
- Q5.** How often do you anticipate needing/wanting to sit down and discuss questions with a pharmacist per year? *(fill in the blank)*
- Q6.** At what cost out-of-pocket would you be willing to pay for these services per year? *(multiple choice)*

Discussion

The results of this survey show that the vast majority of patients would be likely to utilize a service where they could sit down with a pharmacist and review medications and medication-related questions (average 8.59 out of a score of 10). However, this score dropped to an average of 4.64 out of 10 if insurance was unable to cover this service. Average scores were in the range of 5 out of 10 to use a service where a pharmacist was on-call to answer questions as well as if insurance would cover 50% of the total cost of a visit. On average, patients preferred to sit down with a pharmacist to discuss questions 4 times per year. When asked what types of services patients preferred, the answers listed, in order of modes, were: review and manage medications, disease state management, pharmacogenomics testing, and preventative care.

The survey results regarding a patient's willingness to pay for pharmacy services included 23 of 34 patients (67%) said they would be willing to pay \$25-\$50 per month. Six of the 34 patients selected that they would not pay anything out of pocket for pharmacy services. One patient selected each of the remaining price ranges. The only price range that was not chosen was the \$175-\$200 range.

Limitations of this study included a small sample size surveyed and minimal demographic diversity. Patients were not given a post-survey so statistical significance was unable to be obtained.

The study investigators are actively working on phase II of this study which is piloting a concierge pharmacy service to 5 patients. Our hope is that the service is utilized and further strengthens the need for pharmacists to be involved in direct patient care.

	Question	Mean	Median	Mode
Results	Scaled 1-10			
	Q1	8.59	10	10
	Q2	4.64	4.5	1
	Q3	5.74	5	1
	Q4	5.44	5	5
	Average Number Per Year			
	Q5	3.97	3	2

Conclusion

Based on the results of the survey, patients would like to sit down with a pharmacist to review medications and medication-related questions. The barrier to this service seems to be cost. If pharmacists were reimbursed for this non-dispensing service through insurance, more patients may be willing/able to use this service.

References

- Lebovitz L. Transforming discussion into action cannot wait for the editorial process. American Association of Colleges of Pharmacy, Council of Deans Connect Community. August 2019.

Patient Demographics

N=34

Characteristic	Total
Female	14
Male	20
Caucasian	34
≥ 3 Disease States	34
Average Age in Years	
Age	71.39

Q6. At what cost out-of-pocket would you be willing to pay for these services per year? *(multiple choice)*

