TABLE OF CONTENTS

Acknowledgements ........................................................................................................................... iv

Introduction: Access, Cost, and Quality ................................................................................................. 1

Section 1: Access ....................................................................................................................................... 3

  Chapter 1: Who Provides the Care? ......................................................................................................... 5
  Chapter 2: Healthcare Settings ............................................................................................................. 18
  Chapter 3: Roles of Ambulatory Care Pharmacists ............................................................................. 25

Section 2: Cost ......................................................................................................................................... 39

  Chapter 4: From Insurance Basics to Plan Selection ............................................................................ 42
  Chapter 5: Prescription Insurance ........................................................................................................ 65
  Chapter 6: Pharmacy and Therapeutics Committee ........................................................................... 83
  Chapter 7: Billing and Reimbursement for the Ambulatory Care Pharmacist ..................................... 91

Section 3: Quality ................................................................................................................................... 107

  Chapter 8: Quality Measures and Improvement .................................................................................. 109
  Chapter 9: Introduction to Statistics and Research Design .................................................................. 113
  Chapter 10: Evidence Based Medicine ................................................................................................. 134
  Chapter 11: Risk Evaluation and Mitigation Strategies ....................................................................... 144
  Chapter 12: Household Disposal of Prescription Drugs ....................................................................... 154

Conclusion: Value ................................................................................................................................... 160
ACKNOWLEDGEMENTS

Thank you to the following current and former students for their help with this text. Danielle Stone, Cory Hellems and Joseph Dunn for helping to draft content. Grace Conroy, Alana Juodvalkis, Morgan Vance, Lindsay Koch, Grace Lewis for serving as student reviewers. Grace Conroy for helping with reference work.
INTRODUCTION TO ACCESS, COST, AND QUALITY

The United States healthcare system is complex and sometimes controversial. Despite attempts to improve quality of healthcare and access to it, costs in the United States (US) are high and continuing to rise. Projections suggest US health expenditures could exceed $4 trillion by the year 2020, or approximately 20% of the US gross domestic product.\(^1\) Conservative models have estimated that waste accounted for nearly 20% of total US expenditures in 2011, or approximately $500 billion.\(^2\) Despite spending more than other countries on healthcare, the US falls short on improving overall health and wellbeing as a nation.

A 2017 study by the Commonwealth Fund ranked the US last (11\(^{th}\) out of 11) in overall healthcare among other industrialized countries. Despite spending the most per capita, the US ranked 5\(^{th}\) in care process, 10\(^{th}\) in administrative equity and last 11\(^{th}\) in access, equity, and health care outcomes.\(^3\) A 2016 report by the Centers for Medicare and Medicaid Services (CMS) showed that the annual National Healthcare Expenditures (NHE) for the year reached $3.3 trillion dollars, an average of over $10,300 per person.\(^4\) The CMS report also shows that the US had spent 17.9% of its gross domestic product (GDP) on healthcare in 2016, which far exceeds the amount spent by any other country in the world.\(^4\) The following chapters will discuss how cost, access, and quality are impacted in interactions between patients, payers, and providers.

Access, cost, and quality are three major factors used to evaluate healthcare systems.\(^5\) Countries maintaining a good balance between these components have more effective healthcare systems. Optimizing the balance can be difficult because changes or improvements to one may come at the expense of the others.
REFERENCES


