

lowa Department of Public Health Promoting and Protecting the Health of Iowans

Thomas Newton, MPP, REHS Director

Chester J. Culver Governor

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Prescription Medication Usage Study Committee To:

Fr: Medical Home System Advisory Council and Prevention and Chronic Care

Management Advisory Council

Re: Testimony to Committee

Date: October 7, 2009

"What does your organization propose doing to contain the cost of, provide access to,

and improve the quality of prescription drugs?"

The Medical Home System Advisory Council (MHSAC) and Prevention and Chronic Care Management (PCCM) Advisory Council are both established under House File (HF) 2539, and assembled by the Iowa Department of Public Health. The Councils have been meeting monthly since November 2008.

The MHSAC and PCCM Advisory Council work closely together and have many overlapping issues. The PCCM Advisory Council is charged with studying and developing strategies to improve health promotion, prevention, and chronic care management. The MHSAC is charged with developing and implementing a patientcentered medical home system in Iowa. According to HF 2539, "medical home" means a team approach to health care that:

- originates in a primary care setting;
- fosters a partnership among the patient, the personal provider, other health care professionals, and the patient's family when appropriate;
- utilizes the partnership to access all medical and non-medical health-related services needed by the patient and patient's family to achieve maximum health potential;
- maintains a centralized, comprehensive record of all health-related services to promote continuity of care; and
- includes the following characteristics: a personal provider; a provider-directed medical practice; whole person orientation; coordination and integration of care; quality and safety; enhanced access to health care; and payment.

The aspects of a medical home, which include prevention and chronic care management, promote cost containment, improved access to, and higher quality of prescription drugs. The primary care setting is the ideal place to coordinate care among specialists, including pharmacists. As the Institute of Medicine has noted "...because of the immense variety and complexity of medications now available ... the pharmacist has become an essential resource ... and thus access to his or her expertise must be possible at all times".

Pharmacists have extensive clinical knowledge and expertise in the use of medications, and are one of the most accessible of all health care professionals. This makes them uniquely positioned in the health care system to help patients optimize appropriate medication use, reduce medication related problems and improve health outcomes.

Chronic conditions, such as diabetes, asthma, COPD and heart disease, are a key driver of health care costs. The prescription drugs used to treat these conditions can be very complex, and the partnership formed between the provider and pharmacist through care coordination can contain prescription drug expenses and increase access and quality of prescription drugs.

The MH and PCCM Advisory Councils will continue to research and identify methods for pharmaceutical practices that decrease inappropriate medication use in the health care system.