

ICHP Position Statement - Basic and Necessary Medication Therapy Management Services for Patients Receiving Medications from a Remote Dispensing Pharmacy or Telepharmacy

The Illinois Council of Health-System Pharmacists (ICHP) acknowledges that all patients receiving prescription medications from a remote dispensing pharmacy or telepharmacy, including but not limited to a digital pharmacy or mail order pharmacy, are entitled to basic and necessary medication therapy management services. These basic and necessary services should include but not be limited to:

1. A pharmacist or pharmacy student will provide verbal with or without written counseling for new patients, existing patients with new medications or changes in current medications, as appropriate for each medication and individual patient condition(s). If oral counseling is not practicable (e.g., mail-order pharmacy), a pharmacist must use alternate forms of patient information.
2. The pharmacist will provide medication therapy management services, which include a review of current medication/OTC products, allergies, and adverse drug reaction profiles for each patient to assure safety and appropriateness of all drug therapy based on patient-specific parameters^{1,2}
3. Telephone contact information so patients can call to directly speak with a pharmacist to answer any questions or concerns regarding their medications.
4. A process to handle drug recalls and shortages.
5. Effective quality control measures to assure proper medication sourcing, timely delivery, proper storage, security, and appropriate in-date quantities of drug for the projected duration of therapy.
6. A procedure for advising patients on how to obtain a prescription medication in a timely manner without interruption of care.

ICHP affirms that all pharmacies serving patients in Illinois must be licensed by the Illinois Department of Financial and Professional Regulation and comply with the Illinois Pharmacy Practice Act, unless a more restrictive law from the pharmacy's resident state or federal law would apply.

ICHP believes that all pharmacies serving patients in Illinois which offer at least one digital pharmacy practice must be accredited by the National Association of Boards of Pharmacy (NABP)'s Digital Pharmacy Accreditation Program and the pharmacy's website domain has been verified through NABP's Pharmacy Verified Website Program.

Definitions:

Digital pharmacy: NABP defines a digital pharmacy as a pharmacy that has a website offering at least one digital pharmacy practice (e.g., new prescription orders, refills, transfers, counseling/medication therapy management, patient/prescriber portals, pharmacy care services.)

Medication Therapy Management: distinct service or group of services that optimize therapeutic outcomes for individual patients. MTM services are independent of, but can occur in conjunction with, the provision of a medication product. These services include but are not limited to: performing or obtaining necessary assessment of a patient's health status, formulating a medication treatment plan; selecting, initiating, modifying, or administering medication therapy; monitoring and evaluating the patient's response to therapy; performing a comprehensive medication review to identify, resolve and prevent medication-related problems; documenting the care delivered and communicating essential information to the patient's other primary care providers; providing verbal education and training designed to enhance patient's understanding and adherence to therapeutic regimens; and coordinating medication services within the broader health care management service.^{1,2}

Remote pharmacy: I don't see this defined in the IL Practice Act or in the literature.

Non-resident pharmacy (from IL Pharmacy Practice Act, 225ILCS 85/16a)-A non-resident pharmacy provides services via the Internet, which sell, or offer for sale, drugs, medicines, or other pharmaceutical services in Illinois.

Remote dispensing pharmacy (from IL Pharmacy Practice Act, 225ILCS 85/16a)-Remote dispensing must have adequate security and procedures to comply with federal and state laws; access to and dispensing from an automated pharmacy system shall be limited to pharmacists or personnel who are designated by the pharmacist-in-charge. Beginning January 1, 2021, a pharmacy using the National Council for Prescription Drug Program's SCRIPT standard for receiving electronic prescriptions must enable, activate, and maintain the ability to receive transmissions of electronic prescription cancellation and to transmit cancellation response transactions.

Telepharmacy (from IL Pharmacy Practice Act, 25.15)-Telepharmacy means the provision of pharmacist care by a pharmacist that is accomplished through the use of telecommunications or other technologies to patients or their agents who are at a distance and are located within the U.S., and which follows all federal and State laws, rules, and regulations with regard to privacy and security.

An automated pharmacy or prescription dispensing machine system may be used in conjunction with the pharmacy's practice of telepharmacy after inspection and approval by the Department.

“The current uses of telepharmacy include mail order, patient counseling by telephone, medication therapy management, collaborative drug management, central processing and remote order entry, remote supervision of technician dispensing , automated dispensing, and medication kiosks with 24/7 pharmacist counseling.”^{3,4}

Revised 9/2022

Board Approved 1/2023

References

1. Rodis J. Community Pharmacists and Medication Therapy Management. <https://www.cdc.gov/dhdsp/pubs/guides/best-practices/pharmacist-mtm.htm> (last accessed 8/31/2022).
2. Blumi B. Medication Therapy Management (MTM). APhA Foundation <https://www.aphafoundation.org/medication-therapy-management> (last accessed 8/31/2022).
3. ASHP Statement on Telehealth Pharmacy Practice. <https://www.ashp.org/-/media/assets/policy-guidelines/docs/statements/telepharmacy.pdf> (last accessed 9/7/2022).
4. Le T, Toscani M, Colaizzi J. Telepharmacy: a new paradigm for our profession. J Pharm Pract 2020;33(2):176-182.