



# Catalyzing Action for Pharmacist-Provided Food Is Medicine Care

## EXECUTIVE SUMMARY

### Introduction

*Catalyzing Action for Pharmacist-Provided Food Is Medicine Care* explores how pharmacies can support Food Is Medicine (FIM) care, the holistic care that accompanies the provision of food in FIM interventions. Most current FIM models rely on primary care physicians, community-based organizations, or health plans to screen patients for eligibility, connect patients to resources, and track health outcomes. Located within five miles of 90 percent of Americans, pharmacies can play an integral role in supporting FIM delivery and care. Many patients visit their pharmacist more often than their primary care provider to pick up medications or receive preventive health-care services, such as vaccines. Pharmacists have extensive clinical training on top of their medication knowledge and can improve health and cost outcomes for both patients and the health-care system broadly.

This report highlights the payment, workflow, and technology infrastructure needed for pharmacies to leverage their unique assets to improve FIM care.

# Recommendations

The Milken Institute's analysis of a literature review, 33 semi-structured interviews, and a 40-person roundtable found that pharmacists are particularly well-positioned to facilitate FIM care for patients with chronic conditions. This report identifies three key opportunity areas needed to scale FIM integration in pharmacies.

## Payment Policies

***Vision: FIM care is a reimbursable service for pharmacists across payer types***

Numerous policy and technological barriers prevent pharmacists from receiving reimbursement for clinical services, including FIM care. Additionally, most current FIM funding pathways reimburse stakeholders only for the food provided and not the surrounding care needed for successful implementation. Report recommendations highlight opportunities to incorporate pharmacies and pharmacists into existing payment pathways so that they can support the FIM care process and close gaps in patients' care journeys in financially sustainable ways.

- **Recommendation 1:** Recognize pharmacists as eligible providers under Medicare Part B to establish reimbursement for clinical services
- **Recommendation 2:** Include pharmacies as reimbursable service providers within state Medicaid Section 1115 demonstration waivers
- **Recommendation 3:** Incorporate FIM interventions into Medication Therapy Management services in Medicare, Medicaid, and private insurance
- **Recommendation 4:** Incorporate community health workers into pharmacy operations to improve patient health-care access through existing reimbursement options
- **Recommendation 5:** Enhance partnerships between employer-sponsored health plans and pharmacies to include FIM benefits

## Pharmacy Workflow

***Vision: Seamless integration of FIM into pharmacy workflow processes without burden on pharmacy teams***

FIM care must be seamlessly integrated into pharmacy workflow operations to ensure that pharmacists can initiate screenings and connect patients to FIM interventions without significantly disrupting their other pharmacy responsibilities, all while meeting patients' personal

needs for effective FIM care delivery. Report recommendations highlight opportunities for care team collaboration inside and outside of the pharmacy to facilitate patient access to appropriate resources.

- **Recommendation 6:** Create a seamless and efficient process to identify FIM-eligible patients so pharmacies can connect them to interventions, either externally or in-store
- **Recommendation 7:** Utilize front-of-store capacities to serve as a one-stop-shop for FIM interventions
- **Recommendation 8:** Foster collaboration between pharmacists and dietitians as part of an interprofessional team to complement a patient's medications with additional lifestyle modifications
- **Recommendation 9:** Refer patients to external FIM resources through social needs aggregator platforms

## Technology Infrastructure

*Vision: Interoperable technology infrastructure to support FIM data sharing throughout the health-care ecosystem*

Despite playing a meaningful role in patients' larger health-care journeys, most pharmacy data and systems lack the multidirectional interoperability needed to share relevant patient data with stakeholders throughout the FIM ecosystem. Report recommendations highlight opportunities for data-sharing and technology solutions to improve communication and coordination across the patient's care team.

- **Recommendation 10:** Improve data interoperability for pharmacists to document their services and exchange clinical information
- **Recommendation 11:** Implement technology solutions to improve and streamline the patient care experience
- **Recommendation 12:** Coordinate evaluation data throughout FIM stakeholders to track health outcomes better and improve care coordination

# Conclusion

As the FIM movement gains traction in the public and private sectors, pharmacists can support these efforts as trusted, frequented, equitable, and qualified cornerstones of patient care. Pharmacists must be recognized as essential members of patients' FIM care teams, particularly for those with diet-related chronic conditions. Effective payment policies, seamless workflow, and supportive technology would enable pharmacies to advance patient-centered care and expand access to FIM for individuals across diverse communities.



To view the full report, scan the QR code below:

