



Balls Food's Applegate optimizes patient medication profile from 30 to 8 pills a day

“Ann” had accepted her fate: uncontrolled diabetes, high cholesterol, and nearly 30 pills a day that seemed to do nothing but cause unpleasant adverse effects. She’d give anything to not have to take so many pills, but her doctor wouldn’t change anything. Ann’s employer, Balls Foods, offered employees with diabetes a free, pharmacist-run disease state management program. Ann had little hope a pharmacist could help her, but she enrolled in the program because it would get her a discount on her health insurance.

“She had resigned herself to uncontrolled diabetes and dyslipidemia. She didn’t think there was anything else that could be done,” said Amanda Applegate, PharmD, BCACP, pharmacy clinical services coordinator for Balls Food Stores in Kansas City, KS.

When Applegate reviewed Ann’s medications, she immediately identified ways in which the regimen could be made more efficient. Applegate sent recommendations to Ann’s doctor and helped educate Ann to push for the recommended changes at each doctor visit. Over the course of the next 18–24 months, Applegate helped reduce Ann’s daily pill intake from almost 30 to just 8 pills a day plus one weekly injection.

“We pushed for changing one medication at a time, and slowly but surely, we were able to optimize her medication profile,” said Applegate.

Demonstrating pharmacists’ value

The health concerns of Balls Food employees are no different from those of most Americans. Diabetes, high cholesterol, and all the complications thereof are among the most common causes of illness and death in the United States. But, despite their qualifications, pharmacists can help very few of the people who face these issues because they lack federal provider



Amanda Applegate

status recognition. CMS does not recognize pharmacists as health care providers. Without this recognition, pharmacists can’t bill health insurance for their services. This limits the populations they can serve to self-sustaining programs such as the employee wellness program at Balls Food.

“It’s amazing to see her now. She’s thrilled. She brings in her labs just beaming. She appreciates the care so much because it’s made such a big difference in her life.”

Programs like these demonstrate the value pharmacists could bring to the health care system, given the opportunity. Ann is no longer beholden to the inconvenient and uncomfortable gastrointestinal adverse effects caused by some of the medications, nor must she schedule her life around stopping to take pills five times a day. “Now the

pills are reduced to those she takes in the morning and those she takes at bedtime,” said Applegate. These simple changes increase the likelihood of adherence and reduce preventable illness and associated health care costs. And Ann feels great. Her glycosylated hemoglobin (A1C) and cholesterol are now both at goal.

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Advocacy at state, federal levels

Applegate knows she and her pharmacy colleagues are well equipped to help more people like Ann. “We are the providers best suited to know the effects of each medication and how to optimize care for patients while they’re under medication therapy,” she said. “We also understand when medication may not be the best way to treat a patient, so we can route them back to a physician or other care provider.”

Applegate has traveled to Washington, DC, as well as to the Kansas State Capitol to advocate for pharmacists to gain provider status. “Without provider status, insurance companies have no incentive to compensate pharmacists for our clinical services,” she said. She will soon return to the nation’s capital for further advocacy.

She encourages other pharmacists to advocate for their roles as health care providers, too. Marching on Capitol Hill isn’t the only way, she assures colleagues: “The easiest way to start is writing a letter in your own words—not a form letter—explaining specifically how provider status will benefit your patients and your community.”

Sonya Collins, MA, MFA,
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Provider status stories

Pharmacists are health care providers. In a series of profiles appearing in *Pharmacy Today* and on pharmacist.com, pharmacists explain how their patients would benefit from provider status. And as part of our campaign for provider status, APhA has asked pharmacists to share their story of how they provide care to their patients and how provider status will improve health care. These stories are collected on the APhA YouTube channel at <https://www.youtube.com/user/aphapharmacists/playlists>. If you would like to share your story, please visit PharmacistsProvideCare.com.