Objectives

The purpose of this project is to determine the impact reimbursement for cognitive reimbursement on the number of screenings and follow-up care for patients with depression.

Methods

The study is a chart review of a clinical service.

Ten pharmacies implemented a new clinical service of depression screenings with a DSIP Study Toolkit.

Depression screenings were conducted using the Patient Health Questionnaire 2 (PHQ-2) survey and if positive results then a PHQ-9 survey was administered and provided linkage to care.

Pharmacy staff identified patients for study and pharmacists were encouraged to offer services once a week. The service was a one-time event and follow up with linkage to care within 7-10 days.

Five pharmacies were randomly selected to be reimbursed at $15 per screening while the other five pharmacies did not receive any payments for the screenings.

Two arms were compared against each other for number of patients’ screened, average cost to administer the service, and patient-centered outcomes.

Results

<table>
<thead>
<tr>
<th>Location</th>
<th>Number of Patients Screened</th>
<th>Number of Positive PHQ-2</th>
<th>Number of Positive PHQ-9</th>
<th>Number of Patients Referred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Store 1</td>
<td>21</td>
<td>17</td>
<td>17</td>
<td>13</td>
</tr>
<tr>
<td>Store 2</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Store 3</td>
<td>9</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

- Stores 4 and 5 were paid for services, and the team did not screen any patients.
- Stores 6 through 10 were not paid for services, and the team did not screen any patients.
- Sixty percent of patients screened (21/35) had a positive screening on the PHQ-2.
- The average PHQ-2 score was 1.54.
- The average PHQ-9 score was 5.42.

Discussion

- Pharmacist that are paid for their clinical services are more willing to implement innovative services.
  - 60% of the paid sites compared to 0% of the unpaid sites implemented the service.
  - Pharmacist that are confident in providing depression screenings have been successful to link patients to care.
    - One pharmacist is extremely passionate about mental health and has really taken ownership of the program.
    - Some pharmacists requested additional training for mental health screening.
- One site discussed the impact to care he/she feels/knows he/she is producing noting a few instances of linkage to care and subsequent follow up.

Conclusions

- The toolkit provided pharmacists the resources needed to perform depression screenings in the community.
- Three out of the ten community pharmacies have shown initiative in these services, but there are continual barriers facing mental stigma and addressing depression screenings.
- Pharmacists are ideal to initiate these innovative services due to increased interaction with patients and to broaden their scope in healthcare.
- The results from this study have shown the potential impact that depression screenings with follow up on referrals from pharmacist have in the mental healthcare community.

Disclosures

- This project was funded by the Community Pharmacy Foundation.
- Additional funding was provided by Our Family Pharmacy (OFF).
- Additional acknowledgements to the teams at Mills Discount Pharmacy and FMS Pharmacy.

References

  - [http://www.uspreventiveservicestaskforce.org](http://www.uspreventiveservicestaskforce.org)