



ACCP Advocacy and Communications Platform 2011-2012

Background:

The ACCP Advocacy Platform provides a descriptive frame of reference for the areas of advocacy and communication of ACCP that align with the College's current strategic plan. Consistent with the "continuous planning" approach adopted for the current and future strategic planning process of the College, the advocacy platform provides flexibility and responsiveness as relevant strategic directions and objectives that require advocacy and communications by the College, its staff, and members are accomplished or revised.

"Advocacy" in this context incorporates more than the commonly recognized, and still vital, component of "governmental" interaction in areas of legislative or regulatory activities and policy in which the College has interests and objectives. It includes areas of "advocacy and communication" with other audiences and constituencies that are relevant to the singular focus and three priority areas outlined in the ACCP strategic plan. Examples of these are described within the platform "planks" outlined below.

When the College engages any of these audiences and constituencies in seeking to achieve its objectives, it will do so in a manner that clearly articulates and is consistent with the focus and core values of the College contained in the strategic plan. Accordingly, the advocacy and communications activities will emphasize and support:

- The centrality of the patient and the assurance of the quality and safety of his/her medication-related care as the societal and professional purpose of the clinical pharmacist;
- The specific articulation and definition of the clinical pharmacist's practice as one that involves direct interaction with the patient in making appropriate professional contributions to the selection, modification, discontinuation, and monitoring of patient-specific drug therapy as a component of a coordinated patient care process. This is usually accomplished as a member of an interprofessional team or through formal collaborative practice with another healthcare provider.
- The value and importance of demonstrable, and frequently specialized, knowledge and abilities of clinical pharmacists through the expectation of and advocacy for accredited postgraduate residency training, board certification(s) in appropriate areas of specialty practice, and maintenance of certification(s) and competence consistent with the needs of the patients being served and the complexity of care being provided.
- The imperative need for changes in the nation's health care delivery system that achieve:
 - Patient-centered and patient-engaged care that is continuous, coordinated, comprehensive, evidenced-based and safe;
 - Team-based delivery systems, using physically integrated and/or virtual practice structures, that facilitate and promote the full participation of qualified health professionals practicing to their maximum skills and capabilities within their licenses and scopes of practice in delivering care to patients;

- **Payment reforms to incentivize and reward collaborative and coordinated patient care services that achieve quality clinical outcomes and goals, both through the use of medications and other therapeutic and preventative health care services.**

ACCP will seek out and work actively with interested health care organizations and professional societies, relevant government agencies and other policy and advocacy groups that support and foster these broad goals. However, primary emphasis, and resources, will be placed on collaborations that are most likely to facilitate the achievement of specific objectives found in the College's current and evolving strategic plan.

Advances related to these areas are possible for broad segments of the pharmacy profession as a result of specific sections of the Affordable Care Act of 2010 (ACA). The College will continue to participate in and support the efforts of national pharmacist organizations to assure that key provisions of the ACA related to medication therapy management services are appropriately implemented and/or retained in the face of any efforts to diminish or repeal the law.

Nevertheless, it will likely be necessary in some instances for the College to differentiate and distinguish the practice of its members specifically, and clinical pharmacists generally, within the broader spectrum of pharmacy practice in order to promote and achieve the objectives contained in its strategic plan.

Advocacy Platform Planks:

- **Legislative/Regulatory Advocacy at the Federal (and national) Level**
 - **Ongoing ACA implementation, particularly with regard to team-based practice and education provisions, MTM grant programs, community health care teams, health professions education and reform, payment model reform. JCPP and/or Pharmacy Stakeholders as primary collaborators;**
 - **Center for Medicare/Medicaid Innovation – regular communication, project review and comment, public hearings and identification/promotion of clinical pharmacist practices that relate to the Center's areas of concentration, in collaboration with the Patient-centered Primary Care Collaborative (PCPCC) when possible and appropriate;**
 - **Monitor health care reform repeal tactics and bills;**
 - **HRSA/PSPC expansion – collaboration exploration related to ACCP PBRN, practice model and quality outcomes research;**
 - **Coalition for Health Funding – Federal appropriations process;**
 - **Monitor for opportunities for targeted Part B payment reform (and parallel payment reform approaches in the private sector) for clinical pharmacist services within viable legislative vehicles in current and future Congresses.**

- **Legislative/Regulatory Advocacy at the State Level**
 - **Monitor for proposed practice act initiatives or reforms specific to CDTM and medication management/pharmacist involvement in the PCMH – direct advocacy/intervention limited to any significant concerns that undermine the advancement of clinical pharmacists' practice;**
 - **Provide information from staff-maintained summary information on national profile of CDTM policies and regulations upon request to interested parties;**

- **Interprofessional Practice and Education Forums, Coalitions, and Advocacy Groups (National)**
 - **Patient-Centered Primary Care Collaborative – policy, practice model change, payment reform, comprehensive medication management within PCMH practices;**
 - **Institute of Medicine Roundtables – Best Practices Innovation Collaborative, Science-Driven Health Center, “Learning Health System” implementation and advocacy;**
 - **Kaiser Family Foundation;**
 - **Commonwealth Fund;**

- **Physician/Provider Organizations**
 - **American College of Physicians**
 - **American Academy of Family Physicians**
 - **Society of General Internal Medicine**
 - **American Board of Medical Specialties**
 - **American Academy of Physician Assistants**
 - **American Academy of Nurse Practitioners**

- **Payment Policy Coalitions and Payer/Employer Groups**
 - **Patient-Centered Primary Care Collaborative**
 - **National Business Coalition on Health**
 - **Medco Health Services Policy Group**
 - **Blue Cross/Blue Shield Policy Group**

- **Patient/Consumer Advocacy Groups**
 - **AARP**
 - **National Consumers League**

- **Other**
 - **Pharmacy e-HIT Collaborative**
 - **Pharmacy Quality Alliance**

**Approved by the ACCP Board of Regents
April 07, 2011**