

## Exploring accessibility of community pharmacy services: A 10-year narrative update

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### Abstract

Over the past decade, community pharmacists have remained among the most accessible healthcare professionals in the U.S. Their role has expanded significantly through regulatory changes and practice innovations, positioning them as trusted educators, public health providers, and essential access points for primary care services. Pharmacists now offer a broader range of patient care services—from test-to-treat programs to contraceptive prescribing—and are helping patients navigate an increasingly complex healthcare system through culturally responsive, patient-centered communication. However, critical challenges remain. Pharmacy closures continue to deepen health disparities in underserved communities, medication affordability remains a barrier, and growing stress and burnout among pharmacy staff threaten the sustainability of the workforce. To realize the full potential of community pharmacy, targeted efforts are needed to strengthen infrastructure, support staff wellbeing, and ensure equitable access to safe, affordable, and high-quality care for all.

**Keywords:** health services accessibility, community pharmacy services, pharmacist, public health, needs assessment, social determinants of health

### Introduction

Nearly 90% of the U.S. population lives within five miles of a community pharmacy.<sup>1</sup> As a result, community pharmacists have been widely recognized as the most accessible healthcare professionals.<sup>2,3</sup> We previously explored the accessibility of community pharmacy services.<sup>4</sup> However, there have been substantial changes within pharmacy practice and the broader healthcare environment over the past decade. This commentary seeks to re-examine strengths and opportunities for improvement related to the accessibility of health services in the community pharmacy setting.

### Gaining entry into the healthcare system

#### *Health insurance*

Since the enactment of the Affordable Care Act, the percentage of people insured has increased from 84% in 2010 to 92% in 2023.<sup>5,6</sup> Additionally, 41 states (including Washington, DC) have expanded Medicaid.<sup>7</sup> However, community members, including those with insurance, face challenges in receiving care. For example, people in communities with fewer resources may struggle to find providers who accept Medicaid due to the low reimbursement rates.<sup>8,9</sup> Furthermore, those who remain uninsured are less likely to receive necessary healthcare due to cost.<sup>10</sup>

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To increase access to healthcare services and prescription medications, community pharmacists may be equipped to refer patients to programs such as the Health Insurance Marketplace, Medicare, and Medicaid. Community pharmacists may also be aware of strategies such as co-pay cards, patient assistance programs, and pharmacy coupons to help patients obtain affordable medications.<sup>11-15</sup>

#### *Health literacy*

Another component of gaining access to healthcare services is having sufficient health literacy to navigate the increasingly complex US healthcare system.<sup>16</sup> While health literacy has not been evaluated nationally since 2006, it is estimated that only 12% of U.S. adults have proficient health literacy.<sup>17</sup> Health literacy remains a recognized component of supporting healthy people and communities, as evidenced by its inclusion in the Healthy People 2030 initiatives.<sup>18</sup> The current definition has been expanded to emphasize the importance of patients understanding the services provided, enabling them to make informed decisions. While pharmacists are trained to explain complex medication and health information to patients, barriers such as insufficient time and staffing need to be overcome to allow this to routinely happen in practice. To further increase access to health information for populations with limited English proficiency, pharmacies that serve patients with Medicaid or Medicare are required to offer interpreter and translation services.<sup>19</sup>

#### **Accessing a health location where needed services are provided**

##### *Pharmacies are closing*

Nearly five percent of the U.S. population lives in a pharmacy desert, defined as a geographic area with limited access to community pharmacies.<sup>20</sup> Pharmacy deserts are often characterized by low-income populations with a higher proportion of people with no health insurance or public

insurance, limited English proficiency, and racial and ethnic minorities. A significant subset of at-risk areas relies on “keystone pharmacies,” single critical outlets whose closure would instantly turn entire communities into pharmacy deserts.<sup>21</sup> Since 2010, approximately one-third of community pharmacies in the U.S. have closed.<sup>22</sup> Pharmacy deserts raise concerns for worsening health disparities, both related to medication access as well as expanded preventive care and chronic disease management services.

One driver for the increase in pharmacy closures is the inflation of drug costs and decreased pharmacy reimbursement rates.<sup>23</sup> Due to the rise of pharmacy benefit managers (PBMs), many independent or smaller chain pharmacies are forced to close because they are not part of the PBMs’ “preferred network,” which encourages patients to go elsewhere and may lead to lower reimbursement rates if the patient remains out-of-network.<sup>24</sup> Satisfying quality measures and other metrics also impact reimbursement rates.<sup>25</sup> A recent study found that between 2018 and 2021, more pharmacies closed than opened, with independent pharmacies and those in predominantly Black and Latinx neighborhoods facing the highest risk of closure, further deepening disparities in pharmacy access.<sup>23</sup>

#### *Types of outpatient pharmacies*

While traditional community pharmacies have been closing, patients are increasingly receiving medications via other types of outpatient pharmacies. For example, specialty pharmacies are becoming more common with the rise of complex, high-cost therapies for conditions like cancer or autoimmune diseases, which often require special handling or monitoring.<sup>26</sup> A 2023 survey found that more Americans are buying prescription medication online than ever before: 52% of adults have used an online pharmacy, marking a 17-point increase since 2020.<sup>27</sup> Companies like Amazon Pharmacy and Cost Plus Drugs are expanding access and price transparency, while offering convenience, such as same-day delivery, and the potential to increase access for individuals in rural areas and those with disabilities.<sup>28</sup> Some patients are also turning to international pharmacies to manage costs, although there are ongoing concerns as the majority are unlicensed.<sup>29</sup> This can pose issues with medication safety and quality, especially for online compounding pharmacies.<sup>30</sup> Despite these concerns, the use of international online pharmacies has been recommended in some literature as a possible strategy to help patients find affordable prescriptions.<sup>29</sup> Pharmacists can educate patients on the potential risks of using these online pharmacy services, as well as strategies to mitigate those risks such as verifying pharmacy legitimacy through certification sites like the NABP’s VIPPS program, recommending the use of manufacturer-sponsored patient assistance programs, and helping patients compare prices using verified discount platforms such as GoodRx or Medicare Plan Finder.<sup>29</sup>

#### *Medication regulatory status changes*

Recent regulatory advancements have significantly increased the availability of essential medications. These developments have facilitated the transition of several prescription medications to over-the-counter (OTC) status, enhancing public access. For example, in 2023, the U.S. Food and Drug Administration (FDA) approved naloxone hydrochloride nasal spray as an OTC medication, simplifying access to this lifesaving medication for individuals and families.<sup>31</sup> In 2024, the FDA approved the first OTC hormonal contraceptive, which removed a major barrier to reproductive care.<sup>32</sup> Modeling by Guillard et al. (2023) estimated that OTC access to a progestin-only pill could significantly reduce unintended pregnancies, particularly among populations with limited access to healthcare.<sup>33</sup> However, changes in regulatory status do not automatically ensure equal access to the medications, as evidenced by disparities in naloxone availability based on factors such as pharmacist perceptions and the medication being less frequently stocked in rural or underserved communities.<sup>34</sup> These findings underscore the importance of sustained investment in policies, pharmacist training, and public education that facilitate uniform implementation.

The FDA’s new regulatory category, Nonprescription Drug Product with an Additional Condition for Nonprescription Use (ACNU), opens up even more possibilities.<sup>35</sup> This framework allows prescription medications to become available OTC, provided that certain conditions are met (e.g., self-screening or pharmacist consultation). Pharmacists, as medication experts, are ideally positioned to manage these conditional OTC offerings and ensure safe use. However, to make this model sustainable, it will be essential to allocate pharmacist time and ensure appropriate reimbursement for these services.<sup>36</sup>

#### *Expansion of patient care services*

Pharmacists have a long-standing history of providing community pharmacy-based patient care services, such as diabetes management, which has been shown to improve patient outcomes and decrease healthcare costs.<sup>37</sup> More recently, an alternative collaboration model has been tested, in which an academic medical center partners with regional community pharmacies to provide hypertension management services, resulting in improved blood pressure control, and high patient, pharmacist, and primary care physician satisfaction.<sup>38-41</sup> A persistent barrier to the expansion of chronic disease management services in the community pharmacy setting is the lack of read and write access in the electronic health record; however, this barrier is expected to significantly decrease within the next five years due to implementation of the 21<sup>st</sup> Century Cures Act.<sup>42</sup> For example, interoperability of healthcare data can be improved via the adoption of Fast Health care Interoperability Resources (FHIR), as it provides a standardized approach to documenting medication lists, orders, and administration.<sup>43</sup>

Pharmacists can increasingly prescribe medications outside of chronic disease management programs, further expanding patient access to necessary treatments. For example, pharmacists are increasingly providing test-to-treat services, in which they assess patients, perform or interpret diagnostic tests (such as for influenza or COVID-19), and initiate appropriate treatment, all within a single encounter, streamlining care and improving timely access to medications.<sup>44</sup> Furthermore, many states now authorize pharmacists to prescribe hormonal contraceptives.<sup>45</sup> This practice not only increases access for patients facing barriers to traditional healthcare but also normalizes pharmacies as destinations for comprehensive health services. A 2021 systematic review reported that patients appreciated the convenience and accessibility of pharmacist-prescribed contraception, while pharmacists noted increased job satisfaction and professional fulfillment through expanded clinical roles.<sup>46</sup>

Technicians are increasingly responsible for patient care services, including administering vaccines and performing point-of-care tests.<sup>47,48</sup> The expansion of immunization services was, in part, due to the COVID-19 pandemic, as the Public Readiness and Emergency Preparedness Act authorized technicians to administer certain immunizations.<sup>49</sup> Pharmacists and patients benefit from elevating technicians' roles to complete these tasks, as it allows pharmacists to have more time to react to the results, enables more patients to be seen, and potentially leads to a reduction in the occurrence of vaccine-preventable diseases.

### Pharmacist-level factors that impact access to care

#### *Patient-centered communication*

Effective communication between pharmacists and patients is essential to identify and resolve drug-related problems, such as non-adherence or adverse effects. For example, the Utrecht Model for Patient-centred Communication in the Pharmacy (UMPA) outlines two key phases of a patient-centered consultation: defining a shared problem and shared decision making.<sup>50</sup> These phases emphasize understanding the patient's perspective, considering their individual context, and collaboratively selecting a management plan. Underlying the model are concepts related to the patient (e.g., the biopsychosocial perspective), the pharmacist (e.g., empathy and communication skills), and the therapeutic relationship (e.g., trust and alliance).<sup>50</sup> However, implementing patient-centered communication requires staff training, thoughtful workflow design, and attention to creating appropriate counseling spaces that support private and effective interactions.<sup>51-54</sup>

As the U.S. patient population becomes increasingly diverse, pharmacists must be equipped to address cultural and social factors that influence health behaviors and outcomes.<sup>55</sup> Pharmacists must recognize that social and cultural factors such as language, religion, beliefs about illness, and historical

distrust influence how patients engage with care.<sup>56</sup> Communication barriers can worsen disparities in health outcomes.<sup>57</sup> This highlights the importance of culturally responsive care that goes beyond medication counseling. Tools like the LARA (Listen, Affirm, Respond, and Add) method and the teach-back method can help pharmacists build trust, clarify understanding, and personalize care.<sup>58</sup>

#### *Expansion of pharmacist communication*

Pharmacists are also increasingly utilizing social media platforms, allowing them to extend their influence beyond traditional settings and engage directly with the public.<sup>59,60</sup> Through platforms like TikTok, Instagram, LinkedIn, and YouTube, pharmacist social media influencers are educating their audiences on medication use and safety, and also increasing awareness of regulatory changes and the evolving roles of pharmacists. This digital presence enables pharmacists to actively combat misinformation, fill knowledge gaps, and promote evidence-based health information. As a result, social media has become an emerging tool to strengthen public trust, promote health literacy, and showcase the profession's growing impact in a rapidly changing healthcare environment.

#### *Pharmacy staff well-being*

Pharmacists play a critical role in ensuring safe, accessible patient care — yet their own well-being is under mounting pressure. Despite the official end of the COVID-19 pandemic, pharmacy staff continue to experience high levels of stress and burnout. In 2024, approximately 90% of pharmacists working in chain and mass merchandiser pharmacy settings reported “high” or “excessively high” workloads.<sup>61</sup> Long-standing challenges, including chronic underfunding, workforce shortages, rising service demand, and ongoing medicine supply issues, persist across all pharmacy sectors. Community pharmacists are especially impacted, with workload pressures and inadequate support being associated with lower job satisfaction and burnout.<sup>62</sup> While some employers have started to introduce strategies to improve wellbeing, these changes are limited and often inconsistently implemented across the profession. Without more widespread, systemic action, there is concern that staff burnout will continue to escalate — ultimately threatening the profession's ability to deliver quality patient care and maintain a sustainable workforce.

#### **Conclusion**

Over the past decade, community pharmacists' role has expanded significantly through regulatory changes and practice innovations, positioning them as trusted educators, public health providers, and essential access points for primary care services. However, critical challenges remain. Pharmacy closures continue to deepen health disparities in underserved communities, medication affordability remains a barrier, and growing stress and burnout among pharmacy staff threaten the sustainability of the workforce. To realize the full potential of community pharmacy, targeted efforts are

needed to strengthen infrastructure, support staff wellbeing, and ensure equitable access to safe, affordable, and high-quality care for all.

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