

APhA Board of Trustees (2018–2021), Pair I



Magaly Rodriguez de Bittner, PharmD, FAPhA, is a Professor, Associate Dean for Clinical Services and Practice Transformation and Executive Director of the Center for Innovative Pharmacy Solutions at the University of Maryland School of Pharmacy. Currently, she is a Fellow in Population Health at the University of Maryland Health System. Her role as a pharmacy faculty has led to the development of many nationally recognized innovative programs, includ-

ing the Giant Diabetes Education Program and the Maryland P3 Program- a pharmacist-directed MTM and chronic disease management program prior site of Ten City Challenge- in partnership with the Maryland Pharmacists Association, government and business organizations. Past director of the Community Pharmacy Residency Program and current preceptor. She regularly speaks at national and international forums on development and implementation of pharmacist-directed services. Her work includes collaborations with the CDC and other government agencies. She is past President of the Maryland Pharmacists Association and APhA Foundation Board, APhA Fellow and served on APhA committees and taskforces, including the Forum of the Americas. Recipient of the 2015 APhA Foundation Pinnacle Award for Individual Career Achievement, 2014 Maryland Innovator of the Year, 2013 University of Maryland Entrepreneur of the Year, the 2013 American Pharmacists Association Daniel B. Smith award, the 2010 Group Pinnacle Award; 2007 APhA Community Pharmacy Residency Excellence in Precepting Award and Bowl of Hygeia 2005. She has dedicated her career to advance pharmacy practice and the development of innovative and sustainable patient care programs to maximize the impact of pharmacists in patient care.

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Recognizing that a strong association supports the advancement of the profession, what areas would you focus the organization's limited resources on to achieve APhA's current mission and vision and to advance the profession?

I commend APhA on its efforts to secure provider status for pharmacists—a very important issue for the profession—but I also believe that we must start evaluating our members' needs related to incorporating and integrating pharmacists' services into value-based payment models and accountable care organizations. In addition, we should advocate for legislative and regulatory changes that recognize the essential role of pharmacists on the core care team within these models.

While fee for service will remain a key issue in the next few years, we need to pay attention to the pharmacist's emerging role in these new value-based models, which most likely will continue to exist even in the presence of anticipated changes to the Affordable Care Act. During my time as a Population Health Fellow, I have come to recognize that it is imperative to demonstrate the role of pharmacy in these settings and create resources and tools for pharmacists to integrate their services within these models of care.

While resources are limited, the creation of collaborative efforts with health systems, government agencies, pharmacy organizations, and academic institutions such as schools of pharmacy can advance this important issue without creating significant burden on the association. With the current uncertainty about the future of health care, pharmacy associations and institutions should make every effort to collaborate, maximize resources and whenever possible, speak with a unified voice.

Many health care institutions and schools of pharmacy have started to develop, implement, and evaluate these innovative care delivery models. APhA should serve as an integral partner and collaborator in testing, disseminating, and advocating for these innovative pharmacy services to its pharmacists and student members and the profession at large.