

Regulatory aspects of introducing new health services in the community pharmacies in RN Macedonia

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Introduction

Pharmacy services encompassed a wide range of practical applications or technique that can be classified into 3 groups: activities directed to the patients, activities directed at health care professionals, and assessments to gather patient – related information in order to support the previous activities (Sabater – Hernandez et al., 2016).

Pharmacy - provided services and interventions have been shown to reduce the risk of potential adverse drug events and improve outcomes, and majority of published studies show that these pharmacist activities are cost – effective or have a good cost: benefit ratio (Dalton and Byrne, 2017).

Over 40 types of distinct pharmacy services and activities were identified as being provided in community pharmacies across Europe by the questionnaire developed for PGEU Facts and Figures Database 2018-19. The services/activities provided in the community pharmacies across Europe according to the Data Base are categorized into 5 groups: Medicine supply services (10), Medicine use, adherence and management services (10), Screening, prevention and health education services (14) Administration of medicines (2), eHealth services (6) and Miscellaneous services (3). The services/activities were sub – divided into those which are standardly implemented (all countries), highly implemented (between 15-30 countries), occasionally implemented (between 5 and 14 countries) and emerging services (up to four countries) across the different European countries (PGEU, 2020).

Services provided in community pharmacies in RN Macedonia are: supplying and dispensing medicines and medical devices, supplying and dispensing of medicines

containing opioids and preparation and dispensing of pharmaceutical preparations.

Aims and objectives

This paper has intention to point out the possibility of introducing new pharmacy services in Macedonian community pharmacies taking into account the current provisions in the Macedonian legislation.

Materials and methods

Analysis of the Regulatory Acts from Macedonian legislation where pharmacy and pharmaceutical services are regulated was conducted. The following Acts were analyzed:

1. Law on Medicines and Medical Device (Off. Gazette, 2007) and Bylaws
2. Law on Health Protection (Off. Gazette, 2012) and Bylaws
3. Law on Health Insurance (Off. Gazette, 2000) and Bylaws

Results and discussion

The results of the analysis have shown that pharmacies and pharmacy services and activities are regulated in the Law on Medicines and Medical Devices, where conditions for supplement, storage and dispensing of medicines and medical devices are met in the Law on Health Protection where pharmaceutical services as a part of a primary health care are regulated. The way of payment and the prices of the services that are covered by Health Insurance Fund are regulated by the Law on

Health Insurance. The further analysis of the bylaws has shown that small changes in the conditions for space, equipment and the professional staff in the pharmacy could provide appropriate conditions for establishing new services. The introduction of the new service is regulated in the Article 26 Paragraph 3 of the Law on Health Protection where stands that List of services are part of the health care protection and are brought by the Minister of Health. That means that carefully and completely developed service that fulfills the requirements of the health system could be added to the List of services for example to List of services that community pharmacies provide. The pathway of establishing new services would be: analysis of the gaps in the health system and determining the missing service(s), then, developing the service(s), introducing the new service(s) to the Ministry and Minister of Health, convincing the Minister to extend the List of services, extending the List by the Minister and implementing the service into the practice. Since the health services are paid by Health Insurance Fund (HIF), the changes in the bylaws of the Law on Health Insurance could provide partial or total remuneration of the service. This could be accomplished by convincing the HIF that remuneration of the certain service would provide cost savings in the health system and improvement of the health care in general at the same time.

Conclusion

The present article shows that pathway for the establishment of new service(s) in the community pharmacies in RN Macedonia is well determined in the Macedonian legislation. The pharmaceutical professional community together with the academia organized and supported by the professional organizations should take steps in starting the process of establishing new service(s) in order to improve pharmaceutical care, health care in general by creating activities and processes that would improve personal and public health in RN Macedonia.

References

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