Career Changes in Managed Care Pharmacy

by A.J. Jackson II

Pharmacy is changing. Pharmacists who graduated from school more than 10 years ago feel an undercurrent of change in the profession. Most pharmacists know we need to change with the times and do keep up informally, but hesitate to make large commitments to education. This feature describes a process for finding a new pharmacy-related career and incorporates experience from students who work full-time.

The changing workplace—with an emphasis on credentialing—is at the root of the need to consider change. Pharmacists who work with managed care at any level—as dispensing, administrative, or clinical providers—can see that the dynamics of the workplace continue to change in response to pressures from payors, providers, regulatory agencies, and health care providers. Some pharmacists find that their level of competence is lagging; others find that although they possess good skills, they have difficulty competing because their credentials don't reflect their training and expertise in resolving situational problems. Finally, many pharmacists desire increased autonomy or variety in their work and see that enhancing a bachelor's degree with supplementary

education can offer relief from a traditional role.

Career change can be precipitated by isolated business events or by a series of work or life changes. Career stagnation and lack of opportunity are usually key factors in the desire for change. The wave of the future is reassignment of more rote tasks to technical staff and transformation of the pharmacist's position to a more arduous and critical, clinical, thinking role. These changes will prompt pharmacists who are leaders in the field to chart a new career or add missing ingredients to their current career path.

■ The Change Equation

Factors that influence the decision to change careers are different for different people (see Table 1, on page 210). A primary agent of change is a need to update knowledge and approach. A master's degree in public health, or any degree that is related to pharmacy, certainly increases the number of career options available to a pharmacist. Advanced degrees of any kind also can supplement basic knowledge and help the pharmacist add to skills and abilities. The doctor of pharmacy (Pharm.D.) degree, however, is more global than most supplemental

degrees in that it encompasses a variety of different disciplines, focuses the candidate on the critical decision tree, and commands a well-deserved level of respect. In short, it provides comprehensive knowledge. As our profession's terminal degree, the Pharm.D. positions the practitioner to practice at all levels, allows career flexibility, and leaves the practitioner limited only by his or her vision of the future.

■ Getting Started

The decision to pursue a new career or an additional degree can be difficult. Emotional, temporal, and financial challenges of change become more difficult with time. Many of those returning to school to pursue advanced degrees are in their early 30s; the number of students in a given age group declines as age increases. Potential exposure to advanced knowledge and intense subject matter challenges even the most secure individual. Additionally, most health care professionals accumulate family, possessions, and financial obligations as they age. An element of sacrifice applies not only to self but to family as well. In most instances, financial and family obligations must be reviewed and reworked.

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TABLE 1 Factors that Promote Career Change

- Desire to broaden one's clinical role
- Desire for top management position
- Inability to command higher salary
- Desire to differentiate self from others or gain competitive edge
- Loss of employment due to merger, downsizing, or termination
- Desire to conduct research as a principal investigator
- Need for enhanced credentials

The American Council on Pharmaceutical Education has designated the Pharm.D. as the preferred degree after 2000. In response to this move, other degrees—bachelor's, master's, and certificate programs—have paled in comparison. Selection of the Pharm.D. as the preferred degree by many schools of pharmacy has presented a two-tiered system for pharmacists. Many who lack the degree want to upgrade their credentials. In response, more than 40 nontraditional Pharm.D. programs have been established. Various programs have been developed to address the needs of pharmacists at all levels who want or need to update their credentials.

The two major program types are the traditional and the nontraditional. Selection is, again, a personal choice.

Traditional programs require the candidate to enroll full-time in an established program. These are designed for those full-time college students or pharmacists who are able to leave the work force and devote all their energies to school. For most working pharmacists who return to school, such programs require a level of sacrifice that is not realistic.

Nontraditional programs accommodate the work-oriented student better. There are two major types of nontraditional programs. Although educational institutions offering these programs tailor curriculum and presentation methods to some extent, most require both didactic and experiential training.

Distance-learning Pharm.D. programs allow students to tune in to lectures in one of several ways. Some arrange for students to see lectures as they are presented to full-time Pharm.D. candidates in their fourth year of professional study. Others use online learning or threaded discussions or chat rooms. Threaded discussion allows students to comment on situations or virtual patients and review others' comments over a period of hours to days. Online access often gives almost unlimited flexibility and access.

Didactic expectations include acquiring skills, taking exams, and completing a range of clinical rotations. Academics are supplemented with experiential learning—also called clinical clerkship, rotations, or preceptorships. For pharmacists who have been away from the academic environment for more than seven years, emphasis should be placed on academics as well as clinical exposure. The reason is simple: The expanded scope of medical technology in each seven-year period is exponential. Learning the latest theories is important, and applying new skills under supervision is helpful not only in the clinical application of knowledge but also when communicating with other clinicians and specialists. The structure of this type of nontraditional program exposes students to a variety of learning techniques, teaching styles, and professional peer interaction.

Self-paced didactic education allows the pharmacist to learn using written modules on a range of subjects but to apply the knowledge only theoretically. This type of program allows pharmacists to progress more or less at their own speed, although progress must be within certain parameters. Progress is determined solely by how quickly modules are completed as verified by successful completion of exams. Clinical exposure varies, but there is no traditional class work.

Most nontraditional programs require that the student have access to a state-of-the-art computer (usually a Pentium processor with Windows), a modem,

Internet service, an e-mail account, speakers, a sound card, a Web browser, and a printer. Although this list alone can be intimidating for computer-illiterate adults, companies that support computer-based learning can assist the novice.

The difference between video/didactic programs and self-paced didactic-only programs is like the difference between tying a necktie as someone demonstrates and coaches you and tying a necktie as you read directions from a book. For this reason, didactic-only programs may lack credibility with some employers, but they do provide a viable option for some pharmacists. This type of program appeals to pharmacists who have little time, who already have recent or solid clinical experience, or who can apply what they learn in their current work situations.

Once enrolled in a program, mid-career pharmacists almost universally find transition from the work world to academia difficult. Financial and family considerations aside, a return to school requires the use of different skill sets and the creative application of ideas. Study habits must be redefined, and in some cases new forms of study skills must be acquired. Short- and long-term priorities take on new meaning and focus.

Commitment

Commitment to a program and goal is essential to success. Several techniques can help older students cope with their new lifestyle.

Identify options. Professionals who become students have already made a major life change, and they should realize that they always have choices. Working students must identify options that best help achieve their goal. Many candidates drop out, take brief sabbaticals, or even switch programs when the challenge becomes overwhelming. Some programs also waive clerkships based on the candidate's experience; others conduct a competency review in lieu of experiential training or allow creative clinical rotation sites. Part-time preceptorships

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are growing in number and popularity because they meet some unique needs well.

Research options. Much helpful information is available on the Web, including the sites of the American College of Clinical Pharmacists, the International Society of Pharmacoeconomics and Outcomes Research, the American Society of Health-System Pharmacists, and the National Association of Boards of Pharmacy.

Consider age. Age is only a detriment if it is allowed to be. Certainly, the midlife career changer has more concerns and drains on his or her time. But he or she also has more experience, which leads to better study habits and application of knowledge. Students with work experience discern what can actually be applied and look for practical knowledge. They learn, apply, and sometimes improve the application of information. The student with work experience is able to take newly found knowledge and apply it in such a way that the instructors learn, too.

Seek support from family. Usually, the older student has worked in traditional pharmacy roles for a number of years. Many pharmacists have practiced in retail with long hours spread well into the evening and weekends. Families have become accustomed to the pharmacist as the breadwinner and may resist change. Many late bloomers report that the initial six months of school are a significant hardship on the family as the student readjusts to a learning environment. Study time can be a burden. A family that is invested and committed to the ultimate benefit—better quality of life—can be the underpinning of success.

Estimate time accurately. It's hard to estimate exactly how much time each class will take, but many students start with three hours of class time (and the associated three to four hours of preparation and study). The working student will eventually establish a routine for class preparation and study time but will find that flexibility is the key to success.

■ Workplace Support

Colleagues and coworkers may find your decision to improve intimidating, and supervisors may worry about your new commitments. Questions loom large about your level of practice, your satisfaction at your current place of employment, and your future promotion potential. Each midcareer student will have to address these issues in his or her own way, but many pharmacists look for work in a new environment, either while in school or immediately after graduation. This decision sometimes depends on the presence or absence of flexibility and accommodation in the nontraditional program.

■ Who Makes Changes

Many pharmacists make the decision to change. Some envision themselves being paid for cognitive services. Some look for ways to enrich their practice with change. Others want to become prescription benefits managers or to supplement business acumen with a clinical reference. The Pharm.D. provides the pharmacist greater recognition among physicians, nurses, caregivers, payors, administrators, and patients as an important partner in the health care decision process.

■ The Long and Winding Road

The length of commitment necessarily differs with the program's structure and the student's approach. Each university program sets a time limit for didactic and experiential phases, so this will not be an indefinite process. In my class, the average time from the first class to the degree was two and a half years.

The hardest step of any journey is the first one, and on the journey to a Pharm.D., the first step, the application, can be intimidating. Applications can be long or complicated, and they usually require a candidate's résumé or curriculum vitae as well as a statement of interest and references from professional associates about the candidate's motivation and attitude.

■ Financial Fundamentals

Pharm.D. programs can be expensive, ranging from around \$7,000 to more than \$20,000 for the entire program. As good wage earners, most working pharmacists-turned-students do not qualify for scholarships or grants. Need-based loans, however, are available to those students who are enrolled at least half-time. These loans are usually unsubsidized student loans; interest must be paid on them even while the student is in school.

Other avenues of financial assistance include grants from pharmaceutical companies and employer matching or reimbursement programs. In the latter case, employees may incur an obligation to repay the educational support with time on the job.

■ Implications for Managed Care Pharmacists

Many opportunities exist for the Pharm.D. after graduation. Fellowships, residencies, and nontraditional roles abound. Some Pharm.D.'s become contract writers, clinical consultants, study coordinators, scientific writers, or scientific liaisons (using knowledge in a product-specific way).

For others, basic clinical practice is enriched with comprehensive knowledge. Regardless of the choice of practice locales, I have never met any pharmacist who regretted the decision to enroll in a Pharm.D. program.

■ Conclusion

The educational process of the Pharm.D. program is often the pharmacist's first exposure to the concept of pharmacists as clinicians, or as providers who have more to offer than just drug information. It introduces elements of research, analysis, and excitement to practice. Simply having a Pharm.D. won't make anyone a better pharmacist, but applying the knowledge and ethical steps learned with professional maturity and commitment in the workplace certainly will. ■