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Automatic dispensing units tested in Vermont

Apr 1, 2009
By: [Christine Blank](#)
Health-System Edition

An automatic dispensing unit (ADU) for prescriptions is helping pharmacists and patients in rural Vermont.

As part of a pilot project, the Health Center in Plainfield, Vt., outside Burlington, is home to the automated cabinet, where the pharmacist holds patients' prescriptions from five different health centers.

The federally funded Community Health Center network, made up of five clinics throughout Vermont, is testing the automated "intelePharmacy" from PickPoint, in Pleasanton, Calif. The ADU is a seven-foot-tall bulletproof cabinet that can hold up to 122 prescriptions. The ADU assists pharmacists and pharmacy technicians as they fill prescriptions in one location for patients from the spread-out clinics, essentially acting as a telepharmacy, according to Jennifer Browe, the pharmacist in charge for the Community Health Center network. The medications are stored in a locked machine similar to a vending machine. Only a pharmacist has access to release medications from the ADU. A registered pharmacy technician runs the remote pharmacy while being observed over a live video feed.

While only one intelePharmacy is in place, the Community Health Center plans to add the units at all locations through a pilot project with the Vermont Board of Pharmacy. "We have things that people need to start right away, such as albuterol inhalers and antibiotics," Browe said. Patients can have their prescriptions filled at other clinics, but this remote system saves them money. "With the PickPoint machine in the MD facility, the patients do not have to travel to get their antibiotics, so they save gas money," Browe said. When patients are unable to travel, the Community Health Center pharmacy mails them their medications, which typically arrive in one or two days.

"People have been getting progressively unhappier about trips from the rural areas and waiting," said John Mathew, a physician at The Health Center in Plainfield. "The more we get into PBMs [pharmacy benefit managers], the more people can't fill their prescriptions," Mathew said. Some PBMs require patients wait two days before returning to the clinic and picking up their prescriptions, Mathew said.

While some have expressed concern about the ADU taking business away from pharmacists, Mathew does not believe this is the case. Most of the patients who visit the rural health centers are "working hard, and do not elect to talk to a pharmacist," Mathew said.

If they choose to talk to a pharmacist, they can speak to one by video phone. "It is not really taking business away from the local pharmacies as people thought it would. Patients can get their prescriptions filled anywhere, not just through us," Browe said.



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Instead, thanks to video phones, pharmacists can be in more places at once. Technically, they might be overseeing the filling of a prescription from home. "We give the pharmacist the ability to control what is going on in a lot of locations," said Kevin Delaney, CEO of PickPoint. In addition, patients' say the system is convenient and saves them money.

"Repetitive trips and waiting are real problems for the public. I have a patient with neuropathy who's walking on ice to pick up his prescription," Mathew said.

Vermont's Health Care Reform Commission hopes the telepharmacies increase patients' accessibility to medications in the state. "We support it. It lets the federally qualified health centers increase the drugs they can dispense," said Jim Hester, director of the Health Care Reform Commission.


While the intelPharmacy technology is new to Vermont, the system is being used in more rural areas of the country, such as certain areas of Alaska and Montana. "We have about 250 of these systems in the field. They are able to dispense the full course of the pharmacy and increase compliance," Delaney said.

CHRISTINE BLANK is a writer based in Orlando, Fla.

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