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Minnesota 2020

High Tech Prescription for Rural Pharmacy Loss

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In a rural town, losing a pharmacy means more than losing a small business. Minnesota 2020's [earlier article](#) examined this loss. Today, we're exploring a solution: telepharmacy.

"It's just like being there," says pharmacist Jill Reinhardt, describing the video link connecting First Choice Pharmacy in Gaylord, Minn., to a satellite site in nearby Henderson.

When Henderson's traditional drug store closed four years ago, driving to a neighboring community seemed to be the only way to fill prescriptions. But telepharmacy eliminates the trip, connecting a main pharmacy to a satellite site where patients consult with a pharmacist virtually face to face and a technician dispenses the medication.

North Dakota, a highly rural state, has emerged as a national telepharmacy leader. The North Dakota Telepharmacy Project (NDTP) says its 36 satellite locations have contributed around \$12 million to the state's economy while creating 40 to 50 jobs in rural communities. According to a Minnesota Board of Pharmacy estimate, about 10 telepharmacies have sprung up in this state.

Telepharmacy "provides a safe, effective, efficient, fairly low cost" pharmacy model, says Ann Rathke of NDTP. She cites quick passage of enabling legislation, cooperation between the North Dakota Pharmacy Board and the North Dakota State University College of Pharmacy, and federal grant money as key factors in North Dakota's telepharmacy success.

Minnesota is not North Dakota. "North Dakota faces significant challenges in access as communities are more remote and further distanced from population centers" than in Minnesota, Andrew Traynor, assistant professor and assistant director of residency programs at the University of Minnesota-Duluth College of Pharmacy, said in an email interview.

While the needs and circumstances of North Dakota and Minnesota are different, telepharmacy has something to offer both states: "In Minnesota," Traynor said, "as closures continue and expand to larger communities, patients are going to have to travel further for medications and more people will be impacted ... We may see more telepharmacy being utilized to maintain medication access."

A telepharmacy can survive where a traditional pharmacy may not. "Even with [Medicare] reimbursement being so poor, you don't need the same volume of prescriptions to survive as a regular retail pharmacy," says Reinhardt of the Gaylord-Henderson operation. Via telepharmacy, one pharmacist can serve two locations.

Telepharmacy cannot exist in a vacuum: It requires Internet bandwidth not always available in rural areas. "The technical part was probably our biggest concern" in starting the Gaylord-Henderson telepharmacy, Reinhardt said. According to a recent study by the Center for Rural Policy and Development, 59.4 percent of rural Minnesota's population was connected to the Internet in 2006 and only 39.7 percent had broadband. While these numbers are on the rise, they still lag significantly behind the Twin Cities.

Telepharmacy can help communities facing the loss of pharmacy services. Traynor noted, however, that “if we can, we should be working to keep pharmacies from closing first.”

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