

# MI-CRE 2025 Annual Research Symposium and Policy Forum

## *Evaluating Commonwealth-funded pharmacy services: who gets MedsChecks?*

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**Is the presenter an HDR student?** Yes

**Has this research been submitted or presented elsewhere? If so where and when?** No

### **Abstract**

**Background and Aims:** MedsCheck services are in-pharmacy consultations and medicine reviews paid by the Commonwealth government. In the 2023-24 financial year, \$56 million was spent by the government on 730,312 MedsCheck services.<sup>1</sup> Despite this significant investment, there has been no formal evaluation of this service. MedsCheck services are recorded in various dispensing software, including MedAdvisor. This study aimed to describe MedsCheck data collected in MedAdvisor, to understand the demographic details and medication profile of people receiving MedsChecks.

**Design and Methods:** We obtained data from MedAdvisor on all MedsCheck services recorded, 1 October 2021 to 31 October 2022. We summarised: basic patient demographics and medicines most commonly taken by people receiving a MedsCheck.

**Results:** There were 232,121 MedsChecks recorded from 2357 pharmacies using MedAdvisor during the study period. This captures 78% of the 3037 pharmacies who claimed for MedsChecks from the Commonwealth government. Most of the MedsChecks were in people aged 70 – 79 years (27%, n=63356), followed by those aged 60 – 69 years (21%, n=47524) and 80 – 89 years (14%, n=38498); 55% (n=126417) of MedsChecks were for females. Most people resided in metropolitan areas (66%, n=155430) followed by 12% in small rural towns (n=28456) and 10% in regional centres (n=22751). [These areas contain 71%, 7% and 9% of the general population, respectively]. The median number of medicines people were taking was 6 (IQR = 4-9). The top five medicines recorded were: rosuvastatin (20%), atorvastatin (19%), pantoprazole (17%), amlodipine (15%) and esomeprazole (15%).

**Conclusions:** Most people receiving MedsChecks were older adults living in metropolitan areas, however on a population basis, rural and regional areas are overrepresented. Medicines most commonly taken reflect those commonly used in the population. Planned further analyses include comparison with unlinked Pharmaceutical Benefits Scheme data and including relative use of medicine combinations and

polypharmacy. In addition, we will request data from the Commonwealth government's 7CPA dataset to obtain complete capture of MedsCheck services in Australia.

## References

1. Department of Health and Aged Care, Australian Government. Community Pharmacy Agreements (CPAs) – Program Data – Agreements 4 to 7 [Internet]. Canberra; 2024 Aug [cited 2025 Aug 6] p. 1–18. Available from: <https://www.health.gov.au/resources/publications/community-pharmacy-agreements-cpas-program-data-agreements-4-to-7?language=en>