

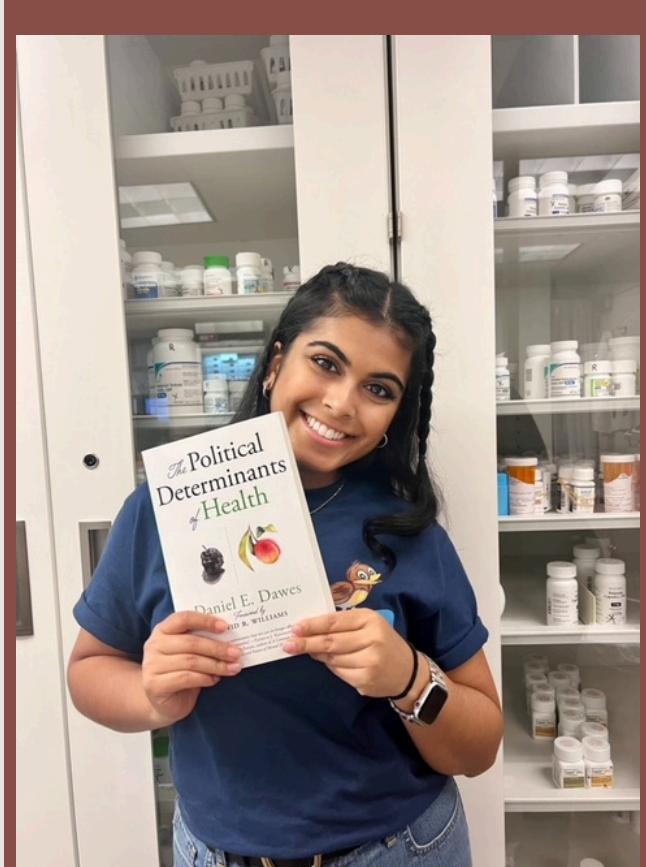
# Nightingale News

Blog Post 1, Page 1

August 09, 2024



On Tuesday, July 30th, I had the privilege of attending PhRMA's Health Equity Symposium Part II alongside my colleague Dr. Shabnum Anwari, PharmD. The symposium followed a previous event that focused on the Social Determinants of Health; this session, however, delved into the Political Determinants of Health.



Pictured: Dr. Neha Dhavalikar with "The Political Determinants of Health" by Daniel E. Dawes

The day commenced with an illuminating presentation by Dr. Daniel Dawes, the author of "The Political Determinants of Health," a book I am currently engaged with. A central theme of his discussion was the notion that only policy can rectify issues that policy itself has created.

Several thought-provoking questions emerged during the session that healthcare providers and stakeholders should consider:

***"Does a patient even have access to a refrigerator to store their medication?"***

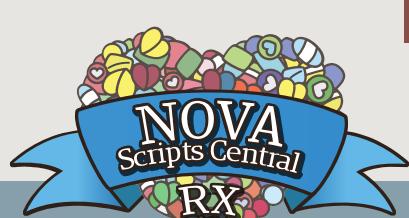
***"While it is crucial for patients to receive the correct medication at the right time, how do they access the pharmacy if they lack transportation?"***

Even if medication is fully covered by Medicaid, shouldn't we expect perfect adherence? What factors contribute to non-adherence—lack of transportation, pharmacy deserts, or inadequate knowledge about medication usage? Clearly, there are systemic barriers that Medicaid needs to address.

These questions are central to my reflections and aspirations as a Safety-Net Health Equity Fellow.



Pictured: Dr. Neha Dhavalikar, current Safety-Net Health Equity Fellow with NOVA ScriptsCentral and American Pharmacists Association (APhA)



Read more 

# Nightingale News

Blog Post 1, Page 2

August 09, 2024



During this fellowship, I aim to deepen my understanding of Medicaid, which I agree with panelist Matt Salo (Salo Health Strategies) is “the most important program in the country.” Nearly 50% of Medicaid recipients are children, and it provides coverage for approximately 18.44 million adult women aged 19 to 64 in the United States. As I reviewed the statistics presented by the panelists, I recognized the pivotal role Medicaid plays as our nation's long-term care program. I wholeheartedly support Melisa Byrd's (DC Medicaid) assertion that “talking about equity is not optional; it is what we do.” As a health equity fellow, acknowledging the significance of Medicaid is crucial.



Pictured: Dr. Neha Dhavalikar and Dr. Shabnum Anwari, Population Health Pharmacist

The panelists discussed future plans, including team-based care, and I was particularly surprised to learn that Medicaid covers doula visits. The most significant takeaway from the discussion was the emphasis on investing in outcomes rather than just processes. Prioritizing outcomes not only leads to better results but also generates cost savings. This principle should guide not only Medicaid but the entire U.S. healthcare system.

During my fellowship, I intend to concentrate on long-term strategies to address health disparities, with a strong focus on empowering patients through enhanced health literacy. Given the deep-rooted nature of inequities, a nuanced approach is essential. A statement from Jamye Chapman (Center for Health Care Strategies) during the lunch hour panel particularly resonated with me. He emphasized the importance of building trust with patients who may feel that “my oppressor is going to help me” — the very system and policies that previously failed them are now attempting to provide assistance. This underscores the value of organizations like NSC, which have established trust within the community through initiatives like the Educate Before You Medicate Workshops.



Read more

# Nightingale News

Blog Post 1, Page 3

August 09, 2024



To conclude, a poignant remark from the symposium was:

***"A mailbox is not a pharmacy. A doorstep is not a pharmacy."***

This underscores the importance of pharmacist consultation. Are we truly serving patients if we overlook this critical step?

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## Who am I?



Dr. Neha Dhavalikar, PharmD is a graduate of The University of Pittsburgh School of Pharmacy where she earned her Doctorate in Pharmacy with an area of concentration in PharmacoAnalytics. She is currently completing a 1-year Safety-Net Health Equity fellowship with NOVA ScriptsCentral and the American Pharmacists Association (APhA). As part of the fellowship, she is working with communities in Northern Virginia and learning population health strategies to improve access and affordability for underserved patients.

Thank you for reading!

**Stay tuned for more Nightingale News as I continue my journey as a Safety-Net Health Equity Fellowship with NOVA ScriptsCentral and the American Pharmacists Association...**

