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Community Pharmacists Emerge as a Critical Solution to Rising Healthcare Costs and Access Gaps

(Sources: An article by Heather Landi for FiercePharma & an article by Sandra Levy for Drug Store News)

Healthcare systems worldwide are increasingly recognizing community pharmacists as an under-utilized resource capable of improving patient outcomes, reducing healthcare costs, and expanding access to essential care. At the same time, persistent "pharmacy deserts"—communities with limited access to pharmacy services—are accelerating demand for digital health solutions, underscoring the need for integrated strategies that combine expanded pharmacist roles with innovative care delivery models.

Evidence supporting pharmacist-led care continues to strengthen. A recent report from the Health Action Alliance found that pharmacy-based clinical services, including medication therapy management, chronic disease management, preventive screenings, and pharmacist prescribing, can generate returns ranging from US$1.29 to US$18.50 for every dollar invested. Community pharmacy services have also been shown to lower treatment costs, reduce unnecessary emergency department utilization, and improve outcomes for chronic conditions such as diabetes, cardiovascular disease, cancer, HIV, mental health disorders, and respiratory illnesses. These findings are prompting policymakers in the United States and internationally to expand pharmacists' scope of practice as a means of relieving pressure on overburdened healthcare systems.

International experience further demonstrates the potential of pharmacist-led care. Scotland's *Pharmacy First* program and England's subsequent expansion of pharmacist prescribing authority illustrate how community pharmacies can successfully manage common acute conditions while improving access to care and reducing demands on physicians and hospitals. Similar legislative reforms in Canada have likewise resulted in fewer emergency department visits, reinforcing the growing evidence that pharmacists can serve as frontline healthcare providers for a broad range of routine medical needs.

However, maximizing these benefits requires addressing significant disparities in pharmacy access. A recent national analysis found that pharmacy deserts remain widespread across rural America, with states such as South Dakota, Alaska, North Dakota, Montana, and Wyoming experiencing the greatest access challenges. As physical access declines, consumers are increasingly turning to digital alternatives. Online searches for "prescription refill online" have increased by 440% since 2022, while overall online pharmacy searches have risen more than 150%, reflecting growing consumer reliance on virtual pharmacy services where traditional access is limited.

(continued on page 2)

In Brief...

- **McKesson Corporation** will build a highly automated regional distribution center in Oklahoma which will replace an existing distribution center, expand current capacity and modernize capabilities to support future demand. Additionally, the site will increase McKesson's capacity and throughput and strengthen operational resilience with 100% standby power to support safe operations in adverse conditions. "The healthcare supply chain grows more complex, from supporting advanced therapies with specialized handling and storage to navigating modernization, security and supply constraints. Patients are counting on consistent, reliable access to critical therapies," said Gene Cavacini, President of U.S. Pharma Distribution for McKesson.
- **Merck KGaA** announced that it will acquire Minneapolis-based lab tools manufacturer **Bio-Techne** for US$11.3 billion (US$73 per share in cash) representing a 24% premium to its June 24 closing prices. The acquisition is Merck's largest since its US$17 billion **Sigma-Aldrich** purchase in 2015. Bio-Techne will strengthen Merck's life science until in cell and gene therapy, precision diagnostics and recombinant proteins.
- The **U.S. Food and Drug Administration** (FDA) approved **Pfizer's** CDK4/6 ihibitor *Ibrance* as a maintenance option for patients with HR+-positive, HER2+-negative locally advanced or metastic breast cancer after induction treatment. CDK4/6 inhibitors such as Eli Lilly's *Verzenio* and Novartis' *Kisqali* are well established treatments for HR-positive, HER2-negative breast cancer, but the HR+/HER2+ indicates a new frontier. With today's FDA approval, *Ibrance* becomes the first and only CDK4/6 inhibitor indicated for patients for HR+ metastic breast cancer patients regardless of HER2 status, extending

(continued on page 2)

Community Pharmacists (cont'd.)...

Taken together, these developments highlight an important evolution in pharmaceutical care. Expanding pharmacists' clinical responsibilities offers a cost-effective strategy for strengthening healthcare delivery, but workforce shortages and geographic access barriers threaten to limit those gains. Future healthcare models will likely depend on successfully integrating community pharmacy services with digital health technologies, ensuring patients have timely access to both in-person clinical expertise and virtual pharmacy resources. For policymakers, healthcare providers, and pharmacy leaders, addressing both scope-of-practice expansion and pharmacy access will be essential to creating more resilient, equitable, and sustainable healthcare systems.

Artificial Intelligence Reshapes the Digital Health Investment Landscape

(Source: A staff article by FiercePharma)

Artificial intelligence has become the defining force driving digital health investment in 2026, signaling a fundamental shift in how venture capital is evaluating healthcare innovation. According to Rock Health, digital health companies raised US$7.4 billion during the first half of 2026, representing a significant rebound in funding after the sector's post-pandemic correction. While overall investment activity has strengthened, capital is increasingly concentrated among a relatively small group of high-growth companies leveraging AI to solve complex clinical and operational challenges.

Rather than broadly funding digital health startups, investors are prioritizing companies capable of demonstrating measurable clinical impact, scalable AI applications, and sustainable business models. Nearly half of all venture capital deployed during the first half of the year flowed to just 20 financing rounds exceeding US$100 million. Companies specializing in clinical AI, physician decision support, telepsychiatry, remote care, and data-driven healthcare infrastructure attracted the largest investments, reflecting growing confidence that AI can deliver meaningful improvements in healthcare delivery and operational efficiency.

The report also highlights a notable evolution in competitive strategy. As foundational AI technologies become increasingly accessible, differentiation is shifting away from proprietary algorithms toward workflow integration, clinical validation, strategic partnerships, and seamless implementation within existing healthcare systems. Collaborations with organizations such as the American Heart Association, the American Academy of Family Physicians, and the American Health Information Management Association demonstrate that healthcare providers are placing greater emphasis on trusted, evidence-based AI solutions capable of integrating into routine clinical practice.

Beyond venture funding, the digital health sector is entering a new phase of market maturity characterized by increasing mergers, acquisitions, and preparation for future public offerings. Consolidation activity accelerated during the first half of 2026 as companies sought to expand capabilities, broaden customer ecosystems, and strengthen competitive positioning. This trend reflects growing investor expectations that long-term success will depend not only on technological innovation but also on an organization's ability to deliver measurable return on investment, establish strategic partnerships, and embed AI into clinical workflows at scale. Collectively, these developments suggest that artificial intelligence is transitioning from an emerging technology to a foundational platform that will shape the next generation of digital health innovation and healthcare delivery.

In Brief (cont.)

its impact to patients who continue to face challenges with treatment resistence," said *Aamir Malik*, Pfizer's U.S. commercial chief.

- Consumer health giant **Haleon** has tapped **Microsoft** to incorporate AI across its operations, joining a growing wave of large healthcare and life sciences corporations turning to big tech to execute enterprise-wide digital overhauls of their systems. Under a new five-year agreement, Haleon plans wider adoption of AI-powered tools to assist employees "automate routine tasks, collaborate more effectively and focus on higher-value work," Haleon announced.
- Newly-appointed Takeda CEO, *Julie Kim*, set out her priorities for guiding Takeda through the anticipated loss of exclusivity for its top-selling medication *Entyvio (vedolizumab)* and delivering sustainable growth during what she said could be at least a decade. Takeda is gearing up to launch three medicines over the next 12 months, including *oveporexton* for narcolepsy type 1, *rusfertide* for polycythemia vera, and *zasocitinib* for psioriasis. "The three assets we are launching in the coming 12 months will help return us to growth, but they are not sufficient to reach a high level of sustainable growth," Kim said at a June press conference. Takeda plans to follow with a second wave of late-stage pipeline growth assets – *mezagitamab* for IgA nephropathy, *fazirsiran* for alpha-1 antitrypsin-associated liver disease and *elritercept* for anemia associated with myelodysplastic syndrome, as well as others.
- **Vertex Pharmaceuticals** has made a deal with **Crinetics Pharmaceuticals** worth US$10 billion, bringing Crinetic's newly approved blockbuster *Palsonify*, and *atumelnant*, (an investigational treatment for congenital adrenal hyperplasia, which has shown promise as a therapy for the treatment of Cushing syndrome) to Vertex's portfolio of drugs.
- **Novo Nordisk** launched the *Wegovy* pill in the United Kingdom as the company looks to build a lead in the global oral obesity therapy market. For now, it is bypassing the country's **National Health Service**. The U.K. and the United Arab Emirates are the first two launch markets for *Wegovy* after the U.S. where it debuted in January. The response reflected a huge demand for a daily pill rather than a weekly injection. U.K. regulatory approval for the *Wegovy* pill came from the **Medicines and Healthcare Products Regulatory Agency** for weight management in adults with obesity (BMI of 30 or more) and overweight (BMI of 26 to more than 30) with at least one weight-related condition.

(Sources: Company Press Releases, Drug Store News, FiercePharma, and PharmaVoice)