

# May More Voices: At the Pharmacy

Category: At the Pharmacy

written by Paul Gross | May 1, 2024

Dear Readers,

When I was a first-year medical student, I was diagnosed with type 1 diabetes—and soon found myself a frequent visitor at a mom-and-pop Bronx pharmacy just a block from the medical school.

Kind and efficient Mr. Tepper, the pharmacist, dispensed my insulin, my syringes and my glucose test strips. As I made the rude transition from excellent health to chronic illness, it softened the blow that the man handing me my lifesaving supplies knew my name, was aware of my sad tale and made sure that I didn't run out of anything.

These days, I get my supplies at the hospital pharmacy, a bustling fulfillment center with employees who don't know me from Adam. When I need a refill, I leave a voice mail message. Every few months I wait on line and pick up my supplies. After nineteen years, I do recognize some of the faces behind the counter, but aside from a hello and perhaps a smile, there isn't much time for chit-chat.

As a physician, most of my interactions with pharmacists follow a common script: I get a message from a patient saying that their insurance won't cover a medication. Sometimes it's a new pill I've just prescribed; sometimes it's something they've taken for years.

I call the pharmacy and wait on hold.

Because pharmacists often seem harried, I'm frequently impressed by how pleasant they are when they pick up. I try to be pleasant myself, knowing that I'll be asking them to do some extra work.

"It's Dr. Gross," I say, "calling about a mutual patient. Here's the date of birth."

"Name?"

I give the name. "For some reason the insurance company isn't covering this medication, could we try some alternatives?"

"What do you have in mind?"

And we're off, I'll make a suggestion, and I hear the pharmacist's fingers tapping it into their system.

"No good. Not covered. How about we try—"

More tappity-taps.

We may go back and forth a few times. If we're lucky, we hit pay dirt.

"They'll cover that one. I'll enter that as a verbal. How much do you want to prescribe?"

But sometimes nothing is covered.

"I can't understand it. What's this patient supposed to do?"

"I don't know, doc. You could try a prior authorization."

"I guess I'll have to. Oy."

"Sorry, doc. Have a good one."

My patients patronize many different pharmacies in the Bronx—so I don't get to know these pharmacists by any name other than "Pharmacist." I wish it weren't that way.

I empathize with pharmacists. They have a lot on their plates—many prescriptions, lines of patients at their windows—with little room for error. They're always on the phone—with a patient, a doctor, an insurance company. They're the ones breaking bad financial news: "You're insurance doesn't cover that medicine. Out of pocket that will cost you two hundred seventy-five dollars.'

They get the patient's cry of outrage, a cry that should rightly be heard by higher-ups at insurance and pharmaceutical companies.

And now pharmacists are giving immunizations—one more thing to do, another time-consuming responsibility.

Mr. Tepper's pharmacy is no longer. The space is now occupied by a bodega.

That makes me sad. I liked his pharmacy. I liked him.

He made a difference to me.

Our May *More Voices* theme is [At the Pharmacy](#). Tell us about your experiences with a pharmacy or a pharmacist—as a patient or clinician, as an employee or as a proprietor.

Share your story using the [More Voices Submission Form](#). For more details, visit [More Voices FAQs](#). And have a look at last month's theme, [Scars](#).

Remember, your health-related story should be 40-400 words. And no poetry, please.

We look forward to hearing from you!

With warm regards,

Paul Gross  
Editor