PHARMACISTS AND PHARMACY TECHNICIANS:
FACTS AND FIGURES

Studies indicated that nearly 60 percent of all Americans took at least one prescription drug in 2012 and 15 percent took at least five.1 As the primary dispensers of these medications, pharmacists and pharmacy technicians serve a growing role in our health care system. Generally, pharmacists dispense medication, counsel patients on the use of prescription and over-the-counter medication, advise patients about general health topics, and often complete third-party insurance forms and other paperwork, serving as an important liaison between the patient and a complex insurance regulatory system. Pharmacy technicians assist in this important process. Under the direct supervision of a registered pharmacist, they compound medical prescriptions, perform clerical duties, verify stock, and enter data to maintain inventory records.

This fact sheet outlines: general workforce information, wages and wage differences, women and minorities in pharmacy work, the current labor market, the implications of an aging population, government programs, online pharmacies, and union benefits for pharmacists and pharmacy technicians.

Trends in Training and Employment

• In 2015, there were 282,000 pharmacists2 and 397,430 pharmacy technicians3 employed in the United States.

• Since 2005, the number of pharmacists in the U.S. has fluctuated, but overall has increased approximately 13.7 percent in the last decade.4 The number of pharmacy technicians increased significantly in the same period, adding over 130,640 workers from 2005-2015, a 49 percent increase.5

• The U.S. Bureau of Labor Statistics (BLS) projects employment of pharmacists to grow three percent and employment of pharmacy technicians to grow nine percent from 2014-2024,6 however changes to the industry or economic events could temper or hasten this growth.

• In August 2014, the Aggregate Demand Index (ADI) calculated by the Pharmacy Workforce Center was 3.48; indicating a roughly balanced supply and demand of pharmacists across the country.7 Also in August 2014, 35 states reported a balanced market, while 13 reported moderate demand for pharmacists, and three reported a moderate surplus.8 While it is possible that the supply and demand of pharmacists within some of these states with balanced markets is actually unbalanced, the available research does not provide this level of analysis.

• While reports once suggested demand for pharmacists would outpace supply in the coming decade9, trend data show that this has not been the case over the past 10 years.10
While each state has nuance in their laws regarding licensing of pharmacists, all states require, at minimum, both graduation from an accredited first professional degree program from a pharmacy college and passing the North American Pharmacy Licensing Examination.11

As of 2013, there were 63,460 students enrolled in a first professional degree program.12 Cohorts typically experience an average attrition rate of 10.8 percent between enrollment and graduation.13

While there are no national training standards for pharmacy technicians, many of the 135 pharmacy colleges and schools and 353 pharmacy continuing education programs offer pharmacy technician programs, with some level of accreditation status.14

Laws regarding training, licensing, and staffing of pharmacy technicians vary dramatically by state. In 2012, 16 states and the territory of Guam had no legal limit on the number of technicians a pharmacist may supervise at one time. The remaining states had ratios of technicians to pharmacists ranging from 2:1 to 6:1.15 Thirty-five states, Guam, and the District of Columbia require neither licensing nor certification of pharmacy technicians, however, of these, 27 did require registration of technicians.16

Proponents of stricter regulations on ratios cite concerns over increased workloads for pharmacists, deskilling of the industry, and risks to patient safety.17

**Employment Overview**

- In 2014, about 54 percent of pharmacists worked in retail pharmacies that were either independently owned or part of a larger chain, store, or merchandiser. The majority of these pharmacists were salaried, though some were self-employed owners. About 19 percent worked in hospitals, while others worked in clinics, mail-order pharmacies, wholesalers, home health care agencies, or the Federal government.18

- In 2014, about 70 percent of pharmacy technician and aide jobs were in retail pharmacies, either independently owned or part of a drugstore chain, grocery store, department store, or mass retailer. About 13 percent were in hospitals. A small proportion of pharmacy technicians and aides worked in mail order and internet pharmacies, clinics, pharmaceutical wholesalers, and the Federal government.19

- About one in five pharmacists worked part-time in 2014 according to the BLS. Because many pharmacies are open 24 hours a day, some pharmacists work nights and weekends.20 Technicians work similar hours, though as their seniority increases, technicians often acquire increased control over the hours they work. In both retail and hospital settings many technicians work part-time.21

- In 2015, Gallup Poll measured public perceptions of professional ethics and honesty and respondents placed pharmacists second only to nurses, with 68 percent of participants responding that pharmacists have “very high” professional ethical standards.22

**Wages**

- In May 2015, the estimated median annual earnings for pharmacists were $121,500. The lowest 10 percent earned an average of $89,790 while the highest 10 percent earned more than $154,040.23
• While pharmacists experienced an 11.4 percent increase in real wages between 2005 and 2015, median annual earnings for pharmacy technicians and pharmacy aides did not fare as well. Median annual earnings for pharmacy technicians were $30,410 in 2015, representing just a 2.73 percent increase in real wages since 2005. Pharmacy aides reported median annual earnings of $24,450, which represents a 6.5 percent increase in real wages between 2005 and 2015. As pharmacy chains and pharmaceutical companies report record profits, not all workers share in this windfall.

• Reported earnings vary by industry, type of employment, and region. Health and personal care stores report the highest concentration of pharmacist employment and those working in other retail stores have the highest annual mean wage.

**Women and Underrepresented minorities**
• In 2015, 57 percent of pharmacists were women.
• The pharmacist workforce was 8.7 percent Black or African American, 15.3 percent Asian, and 5.4 percent Hispanic or Latino in 2015.
• The American Association of Colleges of Pharmacy (AACP) reported that 61.4 percent of enrollees in first professional degree programs in 2015 were women and 13.6 percent were underrepresented minorities. However, of Pharm.D.’s awarded in 2014-2015, 55.6 percent went to men.
• In 2015, the gap between median weekly earnings for men and women employed as full-time pharmacists was 14.45 percent, with male median weekly earnings at $2,117 and female median weekly earnings at $1,811.

**Challenges of an Aging Population**
Pharmacists continue to play an integral role in health care as the U.S. population ages and increasingly relies on prescribed medication.
• The population of middle aged and elderly people, the largest consumers of prescription drugs, is increasing.
• Over the next 20 years, about 10,000 baby boomers will reach retirement age every day.
• In May 2016, more than 26.2 percent of pharmacists were 55 years or over in age. The average age for pharmacists was 42.9.

**Public Policy**
The goal of the Patient Protection and Affordable Care Act (PPACA) of 2010 was to improve health care quality, reduce health care costs, and expand health insurance coverage. The resulting expansion of health care access due to the PPACA will likely increase demand for pharmaceutical services in the coming years. Pharmacists, as medication-use experts, are key stakeholders in improving patient care, quality, and outcomes.
• Currently, federal law and national health policy do not recognize pharmacists as health care providers or practitioners, despite their extensive education in the use of medications and their administration of patient care services. Unions are working with their pharmacist members to advocate for the reclassification of pharmacists as health care providers and the expansion of access to patient electronic health records to ensure quality patient care and outcomes.
On January 28, 2015, H.R. 592 was introduced in the House of Representatives by Congressman Brett Gutherie. H.R. 592 would amend Title XVIII of the Social Security Act to expand coverage to medically necessary and preventative health care services provided by pharmacists under Medicare Part B. Passage of the bill would recognize pharmacists as health care providers. The bill currently has 288 co-sponsors. A companion bill introduced in the Senate by Senator Chuck Grassley currently has 47 co-sponsors.

- Medicare Part B reimburses physician and specific non-physician health care professionals for medically necessary and preventative health care services, but rarely reimburses pharmacists for health care services. Unions are advocating for expansion of Medicare Part B to cover medically necessary and preventative health care services provided by pharmacists.

**Online Pharmacies and Counterfeit Medication**

According to the AARP, the cost of brand name prescription drugs increased by 13 percent in 2013. The increasing cost of prescription drugs and the rise in popularity of online shopping have resulted in more Americans purchasing medication from online sources. While many internet pharmacy sites comply with state and federal laws, some unregulated online pharmacies based abroad sell illegal and potentially dangerous counterfeit drugs to U.S. consumers.

- The global market value for counterfeit or fake drugs is estimated at $75 billion annually.
- A 2012 Food and Drug Administration survey of more than 6,000 adults making online purchases found that more than 23 percent of respondents reported using the Internet to buy prescription medicines. Twenty-one percent of those respondents reported buying from an online pharmacy based outside the United States.
- In 2013, the National Association of Boards of Pharmacy reviewed 10,275 websites selling prescription drugs and found that 96.7 percent did not comply with federal or state laws and/or other pharmaceutical industry standards. Consumers purchasing prescription drugs through illegitimate websites risk buying counterfeit medication.
- The National Association Boards of Pharmacy runs the VIPPS (Verified Internet Pharmacy Practice Sites) accreditation program, which certifies that online pharmacy retailers comply with state and federal laws.
- A study conducted at Washington University in St. Louis showed that purchasers of prescription drugs from online pharmacies suffer higher rates of adverse effects. The researchers surmised that one possible explanation for the high rates of adverse effects was lack of physician oversight.

**Unionization**

- In 2015, an estimated 13.4 percent of pharmacists were union members, up from eight percent in 2010.
- In 2015, unionized pharmacists reported mean weekly earnings that were 25.6 percent higher than those for non-union pharmacists ($2,560 compared to $2,037).
- A number of unions represent pharmacists across the country including the American Federation of Government Employees, American Federation of Teachers, Office and
Professional Employees International Union, Retail, Wholesale, and Department Store Union, and United Steelworkers.

- Collective bargaining agreements negotiated by these unions protect professional integrity, provide for reimbursement for continuing education and professional development, establish procedures and compensation for overtime, and require advanced posting of schedules.

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For more information about professional and technical workers, check DPE’s website: [www.dpeaflcio.org](http://www.dpeaflcio.org).

The Department for Professional Employees, AFL-CIO (DPE) comprises 22 AFL-CIO unions representing over four million people working in professional and technical occupations. DPE-affiliated unions represent: teachers, college professors and school administrators; library workers; nurses, doctors and other health care professionals; engineers, scientists and IT workers; journalists and writers, broadcast technicians and communications specialists; performing and visual artists; professional athletes; professional firefighters; psychologists, social workers and many others. DPE was chartered by the AFL-CIO in 1977 in recognition of the rapidly-growing professional and technical occupations.

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30 Ibid.
32 Ibid.
39 Library of Congress, Congress.gov. Retrieved on June 21, 2015 from https://www.congress.gov/bill/114th-congress/senate-bill/314?q=%7B%22search%22%3A%5B%22%3A%5B%22%22%5D%7D&resultIndex=1
49 Ibid.