

## Statement from the American Health Care Association

### 21<sup>st</sup> Century Cures Initiative

4/30/2015

The American Health Care Association (AHCA) is the nation's largest association of long term and post-acute care providers with more than 12,000-plus members who provide care to approximately 1.7 million residents and patients every year. Members include not-for-profit and proprietary skilled nursing facilities, assisted living communities, and residences for persons with developmental disabilities.

AHCA commends the Committee for its work on the 21st Century Cures initiative to advance medical innovation and promote patient centered care. Unfortunately, the document contains a provision that has the unintended potential to harm the beneficiaries we serve in our facilities.

AHCA strongly recommends long term care pharmacies who serve Part D beneficiaries living in long term care facilities are exempted from the lock-in provision contained in the latest draft. Access to medications is highly controlled in long term care facilities. Long term care facilities are required by federal regulations to have medications packaged, labeled and stored according to specific conditions and medication therapy started on a timely basis appropriate for the patient's needs. Multiple medication management systems can lead to adverse events including medication errors and inefficient use of clinical resources that deters staff time from providing needed hands on care to long term care facility residents or patients.

Many pharmacies cannot meet the federal requirements for medication management in long term care facilities. Long term care pharmacies are adept at meeting these specialized regulatory requirements. Locking in a long term care facility resident or patient to a non-long term care pharmacy would present the following risks to the beneficiary and to the facility:

- Medication delivery by mail versus controlled delivery by long term care pharmacy.
- Medication delivery with significant processing time (ex. by mail) versus scheduled delivery by long term care pharmacy.
- Medications dispensed in bulk bottles versus unit dose medication management system that offers additional verification of medications that helps decrease errors.
- Medications dispensed in large supply such as 90 days' supply versus 30 days' supply from long term care pharmacy which presents risk and potentially unnecessary medication costs.

- Long term care facilities perform critical medication control procedures where nursing staff are required to count medications on a scheduled basis. Manually counting bulk medications in large quantities is very time consuming compared to unit dosed controlled substances in much smaller quantities that are typically dispensed by a pharmacy dedicated to servicing long term care facilities.

The lock-in provision would unnecessarily restrict access and delay obtaining needed medications for long term care facility residents or patients which could cause adverse events or unintended negative health outcomes for individual beneficiaries. Long term care pharmacies should be exempted from this lock-in provision. Thank you for your consideration.