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April 11, 2018

The Honorable Greg Walden Chairman U.S. House Energy and Commerce Committee 2125 Rayburn House Office Building Washington, DC 20515 The Honorable Frank Pallone Ranking Member U.S. House Energy and Commerce Committee 2322A Rayburn House Office Building Washington, DC 20515

Dear Chairman Walden and Committee Members:

As Executive Director of the Kentucky Pharmacists Association, an association representing the thousands of pharmacists in Kentucky providing vital pharmacy services and products to your constituents, I urge you to include H.R. 592, the *Pharmacy and Medically Underserved Areas Enhancement Act* in the opioid legislation the Committee is currently drafting. Pharmacists must be better utilized in the fight against the opioid epidemic given their ability to manage/optimize medication impact, review medications to help prevent overprescribing, tailor care plans to patient needs, recommend non-opioid pain management alternatives, and educate patients regarding opioids.

H.R. 592 would provide access for Medicare beneficiaries in medically underserved communities to covered Medicare Part B services from their pharmacist at 85% of the physician rate, subject to state scope of practice laws. Almost 260 members of the U.S. House of Representatives – and nearly 80% of the House Energy & Commerce Committee – co-sponsored this legislation. Pharmacist provider status can better enable pharmacists to help address the opioid epidemic given the unique role they play in our health care system.

As the most accessible health care practitioner, with 89% of Americans living within five miles of a community pharmacy, pharmacists can use their medication expertise to identify at-risk behaviors, better manage pain treatments, and educate patients and families about the safe use of opioids as well as the potential need for and appropriate use of medications to reverse the effects of narcotic drugs, such as naloxone.

Pharmacists can also provide opioid management/preventive counseling and/or risk factor reduction interventions at the point of service, which has the potential to substantively reduce abuse. Pharmacists are already qualified to provide medication counseling. Their expertise could be leveraged to provide preventive opioid medication counseling for patients deemed to be at high risk of opioid overutilization. This could serve as an early intervention to prevent opioid misuse and could include a referral to additional treatment.

For patients living with chronic conditions, the sheer number of medications creates situations where abuse is a real possibility. As pharmacists often see the patient's complete medication profile on a regular basis and develop personal relationships with beneficiaries, they can help bridge the communication gap between health care providers by coordinating and providing medication-related services. Pharmacists are part of the team helping patients with legitimate pain management needs achieve treatment goals.

Congress must consider initiatives that enhance healthcare capacity and strengthen community partnerships. This can be accomplished by recognizing the value pharmacists offer as a member of the healthcare team and utilizing

them at the top of their training in fighting the opioid crisis. This recognition is especially important in underserved communities specifically addressed in this legislation.

Please ensure H.R. 592 is included in the opioid legislative package so pharmacists can better help in the fight against the opioid epidemic.

Sincerely,

Mark a. Alasser

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