



# Tennessee Pharmacists Association

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April 9, 2018

The Honorable Greg Walden  
Chairman  
House Energy and Commerce Committee  
2125 Rayburn House Office Building  
Washington, D.C. 20515

The Honorable Frank Pallone  
Ranking Member  
House Energy and Commerce Committee  
2125 Rayburn House Office Building  
Washington, D.C. 20515

CC: The Honorable Marsha Blackburn  
Member  
House Energy and Commerce Committee  
2125 Rayburn House Office Building  
Washington, D.C. 20515

**RE: *Inclusion of Pharmacists as Patient Care Providers in the Fight Against the Opioid Epidemic***

Dear Chairman Walden and Ranking Member Pallone,

On behalf of the members of the Tennessee Pharmacists Association (TPA), I greatly appreciate the opportunity to submit these comments regarding the House Energy and Commerce Committee hearings on the opioid crisis. As the only 501(c)6 professional organization in Tennessee representing approximately 3,000 pharmacists, student pharmacists, pharmacy technicians, and associate members in all pharmacy practice areas, TPA's mission is to advance, protect, and promote high-quality pharmacist-provided patient care in Tennessee. TPA would like to acknowledge and thank you for your efforts to address this very important public health issue.

I am writing to you today to express my support and appreciation for your efforts to address the opioid epidemic and to offer potential solutions to our nation's current opioid misuse and abuse epidemic. Pharmacists in Tennessee have been, and remain, committed to working with state and federal legislators, as well as other health professionals and stakeholders, to identify and implement strategies which support pharmacist involvement in preventing opioid abuse and misuse and positively impacting treatment for opioid addiction. Perhaps the most pressing and concerning issue with respect to our pharmacists' ability to play a more active role in combatting this opioid crisis is our notable absence from inclusion on the patient's health care team at the federal level. As the medication experts, it is essential that our pharmacists are fully empowered to improve outcomes for Medicare patients and to reduce medication-related challenges, including those related to opioids.

Pharmacists play a unique role in patients' care, and with 89% of Americans living within five miles of a community pharmacy, frequently the health care professional that a patient will see the most. 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. Unfortunately, because our health care system is not currently fully engaging the most accessible and

knowledgeable medication expert, patients and other health care providers are placed at a significant disadvantage.

Tennessee is now the second state, following the state of Washington, to enact state-level legislation which formally recognizes pharmacists as medical providers and compensate them as such for the care and services that are provided within their scope of practice. The enactment of this legislation in Tennessee has opened up many discussions with payers and other health care providers about ways to more fully integrate pharmacists as providers to positively affect the patient's health care journey. One of the most important discussions occurring in our state right now is the exploration of ways for our pharmacists to play a more significant role in increasing patient access to opioid abuse prevention and opioid addiction treatment services.

Here are some ways TPA believes pharmacists can play a more integral role in the fight against opioid misuse and abuse:

- Pharmacists are equipped to provide opioid management, preventive counseling, and risk factor reduction interventions to patients at the point of care every day. These efforts have the potential to substantively reduce prescription drug abuse, especially for our patients who may be at high risk for opioid abuse and misuse.
- Pharmacists' expertise can be leveraged to provide preventive opioid medication counseling for patients at risk of opioid overutilization, as well as play a greater role in Screening, Brief Intervention, and Referral to Treatment (SBIRT).
- Pharmacists can provide long-term management services for patients in recovery through the administration of long-acting injectable medication therapies, such as naltrexone and buprenorphine, to treat opioid dependence and addiction. By increasing patient access to these medication therapies through local community pharmacists, our patients in recovery from opioid dependence will have a greater chance of achieving positive therapeutic outcomes and maintaining successful long-term recovery.
- Pharmacists can serve as primary providers for emergency opioid reversal agents such as naloxone which will help to save lives through the prevention of opioid-related deaths. Pharmacists' role in providing naloxone was recently reinforced by US Surgeon General (VADM) Jerome Adams, MD, MPH.
- Pharmacists can help patients living with chronic conditions, who often take a large number of medications, by identifying and mitigating the potential for patients' misuse of medications.
- Pharmacists have access to the patient's complete medication profile, which places them in a unique position to coordinate care and bridge the information and communication gap related to medication therapies between all health care providers, and especially those patients with legitimate pain management needs to help them achieve their treatment goals.
- Pharmacists can leverage their respect and trust with patients to enhance healthcare capacity and strengthen community partnerships. Including pharmacists as essential providers of care and formally recognizing the value pharmacists offer as a member of the healthcare team will allow our health care system the ability to utilize pharmacists to the full scope and extent of their training to help in the fight against opioid misuse and abuse, especially in our rural and underserved communities.

Unfortunately, because pharmacists' services are not currently covered under Medicare Part B, our pharmacists are still limited in their ability to care for our seniors, who are among our most vulnerable patients. As a result, beneficiaries' access to the health care practitioner with the most medication-related education and training is limited, and restricted mainly to services related only to the dispensing

of medications. By not including pharmacists among other Part B providers whose services are covered, Medicare also effectively makes it more difficult for other members of the health care team and patients to work with pharmacists as a part of a coordinated, team-based approach to care.

### **Conclusion**

On behalf of the Tennessee Pharmacists Association, I want to commend you and thank you again for efforts to combat the opioid epidemic. Pharmacists stand with you in the fight against this opioid epidemic. As one of the most accessible members of the health care team, pharmacists are willing and ready to help manage and optimize medication-related health outcomes, review medications to tailor care plans to patient needs, provide recommendations for non-opioid pain management alternatives, and educate patients regarding opioids. I urge you to consider including pharmacists in this federal opioid reform legislation through the inclusion of the *Pharmacy and Medically Underserved Areas Enhancement Act* (H.R. 592).

Thank you for your time and for this opportunity to submit these comments for your consideration. Please feel free to contact me if you have any questions.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Micah Cost', is positioned above the typed name.

**Micah Cost, PharmD, MS**  
Executive Director  
Tennessee Pharmacists Association  
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