

January 29, 2014

The Honorable Claire Ayer, Chair
Senate Committee on Health and Welfare
Vermont State House, Room 17
Montpelier, Vermont 05633

RE: National Community Pharmacists Association (NCPA) Support of S.236

Dear Senator Ayer:

I am writing on behalf of the National Community Pharmacists Association (NCPA) in support of S.236. This legislation represents a step-forward to improving patient care and lessening the burden on the citizens of Vermont with complicated medication regimens due to chronic illness. Simply put, supporting S.236 means you are supporting healthier citizens and savings to the health care system. Medication synchronization services would be provided by licensed pharmacists who would coordinate a patient's prescribed medications for chronic conditions to allow all of a patient's prescriptions to be refilled on the same date each month. This legislation allows for a more coordinated and efficient delivery of care; resulting in healthier patients and reducing overall costs to payers and the health care system. It would also lessen the burden on the citizens of Vermont who often make multiple trips to the pharmacy to pick up any number of medications throughout the month. With these patient centered goals in mind, NCPA respectfully requests that you offer S.236 your full support.

NCPA represents America's independent community pharmacists, including the owners of more than 23,000 community pharmacies, pharmacy franchises and chains. Together, they employ over 300,000 full-time employees and dispense nearly half of the nation's retail prescription medicines. In Vermont, there are over 35 community pharmacies which employ approximately 376 residents full-time. These pharmacists and small business owners represent a vital component of Vermont's economy.

A major driver of rising health care expenditures is the cost associated with treating chronic illnesses. For many of these chronic conditions, medications are the most cost-effective treatment, and yet patients routinely miss doses, fail to refill a prescription, or stop taking medications without consulting a health care professional. Patients starting out on a new chronic medication may have adverse reactions and must be switched to other available options before an effective and acceptable option is determined. All of these actions constitute medication non-adherence, the associated economic costs are estimated at \$290 billion annually. Medication synchronization has become increasingly recognized as a tool that can improve adherence when patients are on a regular chronic medication regimen. It has been supported by the Centers for Medicare and Medicaid Services (CMS) who as made it an integral part of the Medicare Part D benefit for millions of seniors. Legislation like S.236 is now an essential step for states to take to reduce healthcare costs and improve access to health care services.

In conclusion, NCPA urges the support of S.236—which would coordinate a patient’s prescribed medications for chronic conditions and allow all of the prescriptions to be easily refilled and picked-up on the same date each month. If you have any questions, please do not hesitate to contact me at matt.diloreto@ncpanet.org or at (703) 600-1223.

Sincerely,



Matthew J. DiLoreto
Senior Director - State Government Affairs

Cc: Members of the Senate Committee on Health and Welfare