



NATIONAL ASSOCIATION OF
CHAIN DRUG STORES

February 4, 2019

The Honorable Matt Williams
Chair, Banking, Commerce and Insurance Committee
Room #1401
P.O. Box 94604
Lincoln, NE 68509

RE: Support L.B. 442 to Authorize Medication Synchronization Practices

Dear Chair Williams and Members of the Committee:

On behalf of our members that operate chain pharmacies in the state of Nebraska, the National Association of Chain Drug Stores (NACDS) is writing to convey our general support for L.B. 442, legislation enabling pharmacists to align the fill date of patients' prescriptions (a practice known as "medication synchronization") to enable patients to pick up their medications on the same day each month instead of having to make multiple visits to the pharmacy. Chain pharmacy supports laws that authorize pharmacists to perform medication synchronization, as this serves both to reduce medication waste and to reduce the incidence of poor healthcare outcomes that result from decreased medication adherence.

Poor medication adherence costs the U.S. healthcare system \$290 billion annually – 13% of total healthcare expenditures – and results in avoidable and costly health complications, worsening of disease progression, increased emergency room visits, and hospital stays. This inadequate medication adherence rate is associated with about \$47 billion annually for drug-related hospitalizations, and an estimated 40% of nursing home admissions.

Medication synchronization can help to improve medication adherence. Two recent studies by Virginia Commonwealth University reviewed medication synchronization programs at a regional pharmacy chain. The reports found that, in comparison to control subjects, patients in the medication synchronization program experienced stronger communication with the complete health care team. In one program, patients had 2.8 more refills per year resulting in 84 more days of medication and had 3.4 to 6.1 times greater odds of adherence. Those not enrolled in the medication synchronization program had a 52% to 73% greater likelihood of discontinuing their medication therapy. Similarly, in the second program, patients in the medication synchronization program had a 2.3 to 3.6 times greater odds of adherence and a 33% to 61% lesser likelihood of inappropriately discontinuing their medication within one year.

In another study, researchers at Harvard Medical School found that when medications were not synchronized, patients had adherence rates that were 8.4% lower than patients for which medications were synchronized. Similarly, in a study at George Washington University, medical researchers identified medication synchronization as an important component of improving adherence, noting: “[t]he Medicaid population would benefit from a policy that allowed for flexibility in medication supplies to improve refill consolidation [synchronization]. This would allow a physician or pharmacist to consider appropriate adjustments and improve adherence in this population.”

L.B. 442 addresses health insurance plan design barriers that can impede medication synchronization practices by allowing pharmacists to dispense a partial supply of a prescription for the purpose of synchronizing a patient's medications when the prescriber or pharmacist determines that doing so would be in the best interest of the patient, and by addressing both appropriate patient cost-sharing and provider reimbursement. Altogether, these provisions serve to ensure that patients can receive and benefit from medication synchronization practices.

While chain pharmacy is generally supportive of this bill, we do note that there is an unusual provision specifying that medications eligible for medication synchronization coverage protections “[m]ust be a formulation that can be safely split into short-fill periods to achieve medication synchronization.” We encourage lawmakers to give further consideration to whether including this provision is necessary and/or appropriate given that this is not a common requirement in other states medication synchronization laws.

NACDS thanks lawmakers for considering our comments, and urges support for this legislation.

Sincerely,

A handwritten signature in black ink that reads "Joel Kurzman". The signature is written in a cursive, flowing style.

Joel Kurzman
Director, State Government Affairs