

The Honorable Dave Burke, Chair
Senate Committee on Medicaid
Ohio Statehouse
Columbus, OH 43215

October 20, 2015

RE: National Community Pharmacists Association (NCPA) Support of H.B. 116

Dear Senator Burke:

I am writing on behalf of the National Community Pharmacists Association (NCPA) in support of H.B. 116. This legislation represents a step-forward to improving patient care and lessening the burden on the citizens of Ohio with complicated medication regimens due to chronic illness. Simply put, supporting H.B. 116 means you are supporting Medication Synchronization. This service would be provided by licensed pharmacists and 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 Ohio who often make multiple trips to the pharmacy to pick up any number of medications throughout the month.

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 Ohio, there are 549 community pharmacies which employ approximately 5,435 residents full-time. In addition to creating jobs, community pharmacies fill a significant portion of Part D and Medicaid covered prescriptions. In 2012, independent community pharmacies filled 11.3 million Part D prescriptions and 6 million Medicaid prescriptions.

A major driver of rising health care expenditures is the cost associated with treating chronic illnesses. For many of these chronic illnesses, 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 beginning a new chronic medication regimen 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 and the associated economic costs are estimated to be \$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 and has been supported by the Centers for Medicare and Medicaid Services within federal programs. So far, twelve states have enacted legislation that would allow for Medication Synchronization. H.B. 116 is an essential step for Ohio to take in order to reduce healthcare costs and improve access to health care services.

In conclusion, NCPA urges the support of H.B. 116—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 Medicaid