

June 28, 2021

The Honorable Chuck Grassley
135 Hart Senate Office Building
Washington, D.C. 20510

The Honorable G.K. Butterfield
2080 Rayburn House Office Building
Washington, DC 20515

The Honorable Bob Casey
393 Russell Senate Office Building
Washington, DC 20510

The Honorable David McKinley 2239
Rayburn House Office Building
Washington, DC 20515

The Honorable Sherrod Brown
503 Hart Senate Office Building
Washington, DC 20510

Dear Senators Grassley, Casey, Brown and Representatives Butterfield and McKinley:

The undersigned health systems write to express our support for the Pharmacy and Medically Underserved Areas Enhancement Act (S. 1362/H.R. 2759). This legislation would remove barriers to providing optimal medication management to our patients.

In our organizations, pharmacists provide team-based clinical services in both the inpatient and outpatient setting. Clinical pharmacists collaborate with our physicians, nurses, and other healthcare professionals to provide safe and effective medication use and improve patient health outcomes while reducing workload burdens on other clinical staff.^{1,2} They educate patients and caregivers about their medications, monitor drug therapy, and coordinate communication between patients, insurers, and interdisciplinary specialty providers. Pharmacists' management of medication therapy has been shown to improve transitions of care and reduce hospital readmissions.^{3,4}

Unfortunately, the Centers for Medicare & Medicaid Services (CMS) has implemented regulations that significantly undervalue the critical role of our clinical pharmacists in providing medication management services to Medicare beneficiaries. Specifically, CMS recently published a rule preventing pharmacist services from being billed to codes intended to support complex patient management, as part of our care team. This undervaluation of pharmacist services by the Medicare program represents another challenge to health systems that are working to more fully leverage the unique medication-related expertise of clinical pharmacists to care for our most complex patients.

Failure to adequately support Medicare beneficiaries' access to team-based medication management serves as an unnecessary barrier to broader adoption of innovative team-based care that enhances

¹ McFarland, MS, Nelson J, Ourth H, Groppi J and Morreale A. Optimizing the primary care clinical pharmacy specialist: Increasing patient access and quality of care within the Veterans Health Administration. *J Am Coll Clin Pharm*. 2020;3:494-500.

² Funk, K., Pestka, D., McClurg, M., Carroll, J., Sorensen, T. Primary Care Providers Believe That Comprehensive Medication Management Improves Their Work-Life. *Journal of American Board of Family Medicine*. 2019; 32(4): 462-473. doi: 10.3122/jabfm.2019.04.180376

³ Ni, W., Colayco, D., Hashimoto, J., Komoto, K., Gowda, C., Wearda, B., McCombs, J. Budget Impact Analysis of a Pharmacist-Provided Transition of Care Program. *Journal of Managed Care & Specialty Pharmacy*. Feb 2018.

⁴ Budlong, H, Brummel, A, Rhodes, A, Nici, H. Impact of Comprehensive Medication Management on Hospital Readmission Rates. *Population Health Management* 2018. 21(5): 395-400.

quality care for our patients. Adverse drug events contribute to an estimated 275,689 deaths per year and cost \$528.4 billion annually.⁵ Medication management provided by pharmacists, as part of our care teams, is an important tool to improve these outcomes.

Advancing the Pharmacy and Medically Underserved Areas Enhancement Act would help ensure our patients have access to the best possible medication management. Thank you for your leadership on this issue. We look forward to helping you advance this important legislation.

Sincerely,

ASHP (American Society of Health-System Pharmacists)
Adventist Health (CA)
Advocate Aurora Health (WI)
Alameda Health System (CA)
Ascension (AL, AZ, CT, DC, FL, GA, ID, IL, IN, MD, MI, MO, NY, PA, TN, TX, WA, WI)
Associates in Family Medicine (CO)
Avera (SD)
Bacon County Hospital (GA)
Baptist Health South Florida (FL)
Baptist Healthcare System (KY)
Bayhealth (DE)
Baystate Health (MA)
BJC HealthCare (MO, IL)
Bon Secours Mercy Health (FL, KY, MD, NY, OH, SC, VA)
Bronson Healthcare (MI)
Children's Mercy Hospital (MO)
Citizens Memorial Hospital (MO)
Cleveland Clinic Health System (OH, FL)
Common Spirit Health (IL, WA, OR, CA, NV, AZ, NM, CO, TX, KS, NE, ND, MN, WI, IA, AR, IN, OH, KY, TN, GA, PA)
Community Health Network (IN)
Cone Health (NC)
Cookeville Regional Medical Center (TN)
Dartmouth Hitchcock Health (NH, VT)
DCH Health System (AL)
Deaconess Health System (IN, KY, IL)
Desert Oasis Healthcare (CA)
DHR Health (TX)
East Jordan Family Health Center (MI)
Emory Healthcare (GA)
Ephraim McDowell Regional Medical Center (KY)
Fairview Health Services (MN)
Family Health Services of Darke County, Inc.(OH)
Freeman Health System (MO)
Grady Health System (GA)
Geisinger (PA)

Genesis Health-System (IA, IL)
GreenWell Consulting, LLC (OH)
Guthrie County Hospital (IA)
Hennepin Healthcare (MN)
Howard University College of Pharmacy (DC)
Huntsville Hospital Health System (AL)
Indiana University Health (IN)
Inova Health System (VA)
Jackson Health System (FL)
Jefferson Health (PA)
Kaiser Permanente (CA, CO, HI, MD OR, VA, GA, DC)
Lee Health (FL)
LifeBridge Health (MD)
LifePoint Health (TN)
MaineHealth (ME, NH)
Margaretville Memorial Hospital (NY)
Mass General Brigham (MA)
Mayo Clinic (MN, AZ, FL)
Medstar Health (MD)
Memorial Healthcare System (FL)
Mercy Cedar Rapids (IA)
Methodist Health System (TX)
Montefiore Medical Center (NY)
Mount Sinai Hospital (NY)
MultiCare Health System (WA)
Nebraska Medicine (NE)
North Kansas City Hospital (MO)
Northeast Georgia Physicians Group (GA)
OhioHealth (OH)
Olean General Hospital (NY)
OSF Healthcare (IL)
Prime Healthcare (CA)
Providence Medical Center (NE)
Providence St. Joseph Health (AK, WA, MT, OR, CA, TX, NM)
Riverside Health System (VA)
Rochester Regional Health (NY)
RWJBarnabas Health (NJ)
Saint Luke's Health System (MO,KS)
SCL Health (CO, MT)
Southeast Georgia Health (GA)

SSM Health- St. Louis (MO)
The Brookdale Hospital Medical (NY)
The Ohio State University Wexner Medical
Center (OH)
Truman Medical Centers/University Health
(MO)
UC Davis Health (CA)
UC Health (OH)
UCLA Health (CA)
UCSD Health (CA)
UCSF Health (CA)
UnityPoint Health (IA, IL, WI)
University Hospitals of Cleveland (OH)

University of Chicago Medicine (IL)
University of Michigan Health (MI)
University of Pittsburgh Medical Center (PA)
Upton Regional Medical Center (GA)
UVA Health (VA)
UW Health (WI)
VCU Health System (VA)
Vidant Health System (NC)
Virginia Mason Franciscan Health (WA)
Wellforce (MA)
Winona Health Services (MN)
WVU Medicine (WV)
1st Option Health Care Services (LA)

⁵ Watanabe J, et al. Cost of Prescription Drug–Related Morbidity and Mortality. *Annals of Pharmacotherapy*, March 26, 2018. Accessed 3 April 2018. <http://journals.sagepub.com/eprint/ic2iH2maTdI5zfN5iUay/full>.