Comments of the American College of Clinical Pharmacy

Statement in Response to the Request for Input on the Development of Cures 2.0 Legislation

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The American College of Clinical Pharmacy (ACCP) appreciates the opportunity to provide the following statement to the House Committee on Energy and Commerce related to the Cures 2.0 “Call to Action” to modernize access and coverage to innovative therapies.

ACCP is a professional and scientific society that provides leadership, education, advocacy, and resources enabling clinical pharmacists to achieve excellence in patient care practice and research. ACCP’s membership is composed of more than 17,000 clinical pharmacists, residents, fellows, students, scientists, educators and others who are committed to excellence in clinical pharmacy practice and evidence-based pharmacotherapy.

ACCP believes that in order to achieve a health care system that delivers better care, smarter spending, and healthier people and communities, it is vital to establish a truly team-based, patient-centered approach to health care consistent with evolving delivery and payment models currently available under private and commercial health plans.

It is estimated that $528 billion dollars a year, equivalent to 16 percent of total health care spending, is consumed due to inappropriate or otherwise ineffective medication use. Given the central role that medications play in care and treatment of chronic conditions, combined with the continuing growth in the range, complexity and cost of medications -- and greater understanding of the genetic and physiologic differences in how people respond to their medications -- the nation’s health care systems consistently fails to deliver the full promise medications can offer.

Comprehensive medication management (CMM) is a direct patient care service, provided by clinical pharmacists working as formal members of the patient’s health care team that has been demonstrated to significantly improve clinical outcomes and enhance the safety of medication use by patients.

The team-based service of CMM is supported by the Primary Care Collaborative (PCC), in which ACCP and the major primary care medical organizations are actively involved. As part of the effort to reinvest in our nation’s primary care infrastructure, these groups recognize that CMM helps ensure that seniors’ medication use is effectively coordinated, and in doing so enhances their health care outcomes. Since much of the Cures 2.0 draft deals with Medicare, CMM is especially important as it contributes directly to Medicare’s goals for quality and affordability. CMM can ensure the right drug for the patient is taken as intended as part of an overall effort to improve the quality and affordability of the services provided to Medicare beneficiaries.

In “getting the medications right,” CMM also contributes to enhanced productivity for the entire health care team, allowing all team members to more fully focus on their own particular patient care responsibilities. By fully utilizing the qualified clinical pharmacist’s skills and training to coordinate the medication use process as an interdependent team member, physicians and other team members are essentially freed to maintain focus on respective patient care activities that align with professional responsibilities as defined by scope of practice that reflect their particular area of expertise.
In April, 2019, ACCP partnered with a diverse range of stakeholders including Johnson & Johnson and Quest Diagnostics to launch the Get the Medications Right (GTMRx) Institute – dedicated to advancing practice transformation, payment and policy solutions to optimize medication use through team-based, patient-centered care delivery and advanced diagnostics.

ACCP would also like to bring to your attention an important study currently underway examining the feasibility and scalability of implementing CMM in contemporary primary care medical practices. The study is being conducted by the University of North Carolina’s Eshelman School of Pharmacy through a grant of more than $2.4 million from ACCP and the ACCP Foundation.

Areas of ongoing work within the CMM grant include:

- Measuring the impact of CMM on clinical quality measures, health care costs, and the return on investment that can be realized from CMM
- Evaluating the role of a defined process of improvement cycles for scaling up the delivery of CMM services
- Developing, implementing, and validating a measure of fidelity to CMM
- Assessing provider perception of the value and influence of CMM on medical provider well-being in primary care settings
- Developing strategies for deploying resources to accelerate CMM implementation and practice improvement
- Assessing patient engagement and satisfaction with CMM services.

As Congress continues to tackle the serious issues laid out in the Cures 2.0 framework, including Medicare coverage and payment for digital health and personalized medicine infrastructure, we urge you to consider how these structures can integrate with evolving team-based, quality-focused payment and care delivery models that shift Medicare payment policy for providers toward value of care and away from volume of services. We would welcome the opportunity to provide further information, data, and connections with successful practices that provide CMM services as part of this effort to optimize the use of medications in our country.

In summary, we thank you for the opportunity to provide feedback as part of the Committee’s Cures 2.0 “Call to Action” to modernize access and coverage to innovative therapies. ACCP is dedicated to advancing a quality-focused, patient-centered, team-based improvement in health care delivery that (1) helps assure medication optimization, (2) enhances patient safety (3) promotes value-based rather than volume-based care to patients and (4) contributes to greater affordability and sustainability for the Medicare program. CMM is the foundation of that better approach.