



AMCP Praises Passage of 21st Century Cures Act, Says More Must Be Done to Address Prescription Drug Abuse

Alexandria, Va., May 21, 2015 — The Academy of Managed Care Pharmacy (AMCP) applauds the House Energy and Commerce Committee's unanimous passage today of H.R. 6, The 21st Century Cures Act, including a provision to prevent prescription drug abuse of at-risk Medicare beneficiaries. However, AMCP is concerned that onerous requirements in this provision could hinder the ability of Medicare Part D plans to provide timely assistance to at-risk beneficiaries. Furthermore, AMCP is disappointed that H.R. 6 stripped an earlier provision that would have addressed payment fraud in the Medicare Part D prescription drug benefit program.

AMCP Chief Executive Officer Edith A. Rosato, RPh, IOM issued the following statement:

The Academy is pleased H.R.6 included Sec. 3141, which calls for combatting prescription drug abuse by establishing a program in which at-risk Medicare beneficiaries acquire frequently abused drugs through a designated prescriber and pharmacy. The inclusion of this drug management program is an important step in fighting the growing epidemic of opioid abuse. However, AMCP is concerned that several onerous requirements in this section may discourage Medicare Part D plans from pursuing these programs.

For instance, the legislation requires Medicare Part D plans to provide two notices to beneficiaries and two levels of appeal follow each notice. AMCP believes that the notice and appeal time periods will hamper the ability of the health plan to provide critical assistance to the beneficiary that has been identified as at-risk. AMCP supports notice and appeal rights but these provisions are not in the best interest of the patient.

Another onerous requirement calls for Part D plans to provide information on all state and federal

public health resources designed to address prescription drug abuse, including mental health services and other counseling services. AMCP is concerned that requiring each plan to develop such a list could create confusion for beneficiaries in that no two lists would look the same. Having the local government develop such a list and requiring plans to refer beneficiaries to that list would result in greater uniformity in the information being provided to beneficiaries.

In another area, AMCP is disappointed that H.R. 6 stripped an earlier provision that would have authorized Part D plans to suspend payment of claims to pharmacies suspected of a credible allegation of fraud.

AMCP will continue to work with Congress and the Centers for Medicare and Medicaid Services on establishing drug management programs for at-risk beneficiaries that replicate the successes of those in the Medicaid program and private sector, as well as programs that successfully combat fraud and abuse in Medicare Part D.

The Academy has developed detailed positions on both Part D topics.

- On controlled substances, AMCP's position includes amending current law to allow Part D prescription drug plans and Medicare Advantage prescription drug plans to limit patients with a history of abuse to a single prescriber and/or pharmacy (or chain of pharmacies), similar to what already occurs in the private market and the Medicaid program.
- On anti-fraud, AMCP's position includes amending current law to allow health plans to withhold payments to pharmacies that are suspected of fraud in the program. This solution would allow plans to combat suspected fraud before payments are made, instead of attempting to recover the payments after the fact, which is often a difficult, if not impossible, task.