

The Honorable Harry Reid  
522 Hart Senate Office Building  
Washington, DC 20510

The Honorable Max Baucus  
511 Hart Senate Office Building  
Washington, DC 20510

The Honorable Chris Dodd  
448 Russell Building  
Washington, DC 20510

The Honorable Tom Harkin  
731 Hart Senate Office Building  
Washington, DC 20510

Dear Senators Reid, Baucus, Dodd and Harkin:

Respectfully, we wish to bring your attention to a provision contained in H.R.3590, the Patient Protection and Affordable Care Act, addressing pharmaceutical waste in long-term care settings. Specifically, Section 3310 seeks to establish requirements for reducing wasteful dispensing of outpatient prescription drugs in long-term care facilities under prescription drug plans and MA–PD plans.

While we applaud the goal of reducing pharmaceutical waste, we remain concerned with the approach articulated in Section 3310 and the potential consequences such a policy may have on a vulnerable patient population that relies so heavily on accuracy and safety. In order to ensure an approach appropriately meets the intended objectives of reducing waste in pharmaceutical dispensing among the nation’s long-term care facilities, we respectfully request your urgent review and consideration of the following legislative change regarding HR 3590, Section 3310 (new section appears in bold under (2)).

**SENATE COMBINED HEALTH CARE REFORM BILL: Patient Protection & Affordable Care Act, H.R. 3590**  
***SEC. 3310. REDUCING WASTEFUL DISPENSING OF OUTPATIENT PRESCRIPTION DRUGS IN LONG-TERM CARE FACILITIES UNDER PRESCRIPTION DRUG PLANS AND MA–PD PLANS.***

(a) *IN GENERAL.*—Section 1860D–4(c) of the Social Security Act (42 U.S.C. 1395w–104(c)) is amended by adding at the end the following new paragraph:

*“(3) REDUCING WASTEFUL DISPENSING OF OUTPATIENT PRESCRIPTION DRUGS IN LONG-TERM CARE FACILITIES.— (1) The Secretary shall require PDP sponsors of prescription drug plans to utilize specific, uniform dispensing techniques, as determined by the Secretary, in consultation with relevant stakeholders (including representatives of nursing facilities, residents of nursing facilities, pharmacists, the pharmacy industry (including retail and long-term care pharmacy), prescription drug plans, MA–PD plans, and any other stakeholders the Secretary determines appropriate), such as weekly, daily, or automated dose dispensing, when dispensing covered part D drugs to enrollees who reside in a long-term care facility in order to reduce waste associated with 30-day fills.”.*

***(2) Further, the Secretary shall solicit input from the relevant stakeholders individually and convene a stakeholders working group in advance of proposing regulations that would establish such requirements. The Secretary in conjunction with the working group shall consider and study potential mechanisms for reducing waste associated with unused prescription drugs dispensed to Medicare Part***

***D beneficiaries residing in long-term care facilities that do not unnecessarily burden the various stakeholders or that impose uncompensated or undercompensated costs on any such stakeholder.***

(b) *EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to plan years beginning on or after January 1, 2012.*

We appreciate your consideration of this request, and hope you will include this in the Manager's amendment.

Sincerely,