

NewsRelease

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NACDS Supports New Public Policy to Bolster Opioid Abuse Solutions

Pharmacists' experiences shape public policy agenda that complements longstanding collaboration with law enforcement and health professionals

Recommendations include seven-day initial supply for acute pain; mandatory e-prescribing; national PDMP; medication mail-back envelopes

Arlington, Va. – In a <u>letter</u> to President Donald Trump, representatives of the Administration, and members of the United States Congress, the National Association of Chain Drug Stores (NACDS) today formally announced support for four new public policy proposals intended to build on existing collaborative efforts to address the opioid abuse epidemic while providing quality patient care.

"These four integrated public policy strategies would further reduce the volume of unneeded and unused opioid medications entering the public domain, and reduce the chances that they fall into the wrong hands – while taking into account the needs of those most severely affected by chronic pain as a result of cancer and other serious illnesses," said NACDS President and CEO Steven C. Anderson, IOM, CAE, in releasing the letter. "The fact that these public policy proposals are gaining traction among those in the healthcare and enforcement communities reflects that much-needed consensus may be starting to build for additional and sound approaches to this epidemic."

The four new public recommendations include:

• Legislate a seven-day supply limit for initial opioid prescriptions issued for acute pain.

This limit is consistent with the Centers for Disease Control and Prevention (CDC) Guideline for Prescribing Opioids for Chronic Pain. CDC's clinical evidence suggests that a greater amount of initial opioid exposure is associated with a greater risk for long-term use and addiction. Nearly 20 states already have taken action, and federal legislation is needed for consistent patient care.

 Legislate a requirement that all prescriptions be issued electronically, with limited exceptions.

E-prescribing enhances security and curbs fraud, waste and abuse. Drug Enforcement Administration (DEA) e-prescribing requirements call for two-factor authentication, reducing the likelihood of fraudulent prescribing. Federal and state action would be timely, as e-prescribing of controlled substances has only been legal in all 50 states since September 2015. Only 14 percent of controlled substance prescriptions are issued electronically.

• Create a national prescription drug monitoring program (PDMP) through collaboration.

Most states use data to help identify and prevent drug abuse and diversion, but program variances limit their effectiveness. It is necessary to harmonize state requirements for reporting and accessing PDMP data, and to create one system with unified expectations by healthcare providers and law enforcement. A national PDMP would leverage e-prescribing to provide guidance for prescribers and dispensers in real-time when providing patient care.

 Provide manufacturer-funded mail-back envelopes for unused opioid drugs, available to patients at pharmacies upon request.

Currently, many pharmacies offer disposal programs as appropriate by community and by store. A program featuring mail-back envelopes provides an option that is universally workable. State legislation could facilitate a mail-back program. Educational materials also are in use, and could be expanded in appropriate ways.

The new proposals complement existing pharmacy initiatives, and build on prior <u>comments</u> submitted to the President's Commission on Combating Drug Addiction and the Opioid Crisis. Existing and extensive pharmacy initiatives include: DEA compliance programs; pioneering e-prescribing; drug disposal options for consumers; pharmacist and patient education; pharmacy security initiatives; fostering naloxone access; stopping illegal online drug-sellers and rogue clinics; and more. NACDS described these existing initiatives in today's letter.

NACDS' letter also focused on the need to stop the flow of synthetic opioids entering the United States; the need to continue to advance prescriber education tools through the Food and Drug Administration's Risk Evaluation and Mitigation Strategies for opioids; the need for a one-document solution for patient medication information; and the need for enhanced access to treatment for individuals with substance abuse disorders; among other additional approaches.

"As public health authorities have indicated, face-to-face interactions between pharmacists and patients have made pharmacists keenly aware of the extreme challenges and complexities associated with this epidemic," Anderson wrote in the letter. "Based on this first-hand experience and our commitment to the patients and communities we serve, NACDS remains steadfast in our efforts to partner with law enforcement agencies, policymakers, and others to work on viable strategies to prevent prescription drug diversion and abuse, including prescription opioids. Chain pharmacies engage daily in activities with the goal of preventing drug diversion and abuse."

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NACDS represents traditional drug stores, supermarkets and mass merchants with pharmacies. Chains operate 40,000 pharmacies, and NACDS' more than 100 chain member companies include regional chains, with a minimum of four stores, and national companies. Chains employ more than 3.2 million individuals, including 178,000 pharmacists. They fill over 3 billion prescriptions yearly, and help patients use medicines correctly and safely, while offering innovative services that improve patient health and healthcare affordability. NACDS members also include more than 850 supplier partners and over 60 international members representing 21 countries. Please visit nacds.org.