

**Guest column: Medicaid cuts will limit access to pharmacies -
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By CHRISTOPHER T. DIMOS**

Across the country, the local pharmacist is often the most accessible health care provider. Pharmacists not only provide patients with medications, but also offer counseling to patients regarding drug interactions, generic equivalents and medication therapy management for conditions such as diabetes. Low-income patients especially rely on their pharmacists, but their access to prescription drugs could soon be threatened.

Here in Montana, access is truly a primary concern as communities are separated by miles and miles. Throw a good helping of winter into the mix, and the miles aren't the only concern. No one wants to travel farther than they should for the pharmacy services they need.

The federal Centers for Medicare and Medicaid Services recently issued a new regulation that will take a staggering \$8.4 billion from drug payments to community pharmacies over the next five years - an overall reduction of 30 percent of Medicaid's current generic drug reimbursement. This regulation employs a critically flawed formula that would underestimate the costs for pharmacies to purchase prescription drugs.

As a result of these cuts, pharmacies could lose money on every generic prescription they fill under Medicaid. That's bad for business and bad for patients.

A recent Government Accountability Office report shows that pharmacies will be reimbursed at 36 percent below their costs to purchase generic drugs, on average. When the cuts are implemented, it will mean that many of the 40 million Medicaid patients could lose access to the prescription medicines they depend on each day.

Fortunately, Congress has taken notice of the looming impact that Medicaid cuts will have on pharmacies and their patients. In the U.S. Senate, Sen. Max Baucus, D-Mont., chairman of the Senate Finance Committee, knows the value of pharmacies and is leading the charge against these reckless cuts. Baucus recently introduced the Fair Medicaid Drug Payment Act, which will ensure that pharmacies are reimbursed fairly and protect pharmacy access for Medicaid patients.

In rural and inner-city areas with high Medicaid populations, reimbursement cuts could seriously threaten patients' ability to receive the prescription medications they depend on. Preventive medicine plays a key role in controlling health care costs. But if patients cannot obtain their medications, this could lead to expensive catastrophic care and emergency-room visits.

Pharmacists also play a key role in encouraging the use of lower cost generic medications. But inadequate reimbursement rates reduce incentives for

pharmacies to dispense generics, directly contradicting present efforts to implement cost-saving measures in the Medicaid program.

On behalf of our 20 Albertsons/Sav-on pharmacies across Montana, I would like to personally recognize Baucus' leadership on this issue. Baucus has demonstrated his commitment to preserving patient access to prescription drugs. Leaders in the U.S. House have promised to work in support of similar legislation to address the regulation put forth by CMS. With Congress facing a full agenda this fall, let's hope that these bills remain a priority.

Our pharmacists across Montana, from Glendive to Missoula and Havre to Bozeman, are on the front lines each day helping patients. They offer a variety of health-care services, equipment and supplies, often filling health care voids for communities as frequently as they fill prescriptions. Our pharmacists are highly trusted, highly trained medical professionals who advise and help their patients, often most hours of the day, seven days a week. Congress and CMS must intervene immediately to help preserve community pharmacies' critical role.

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