

Speaker Sheldon Silver
NYS Assembly
Legislative Office Building, Room 932
Albany, NY 12248

Assemblymember Deborah Glick
Chair, Assembly Higher Education Committee
Legislative Office Building, Room 717
Albany, NY 12248

March 5, 2010

Dear Speaker Silver/Assemblymember Glick,

As Deans of the seven Colleges of Pharmacy in New York State, we write this letter to request your support and prompt passage of Assembly Bill 6848 (Canestrari), which would allow physicians and nurse practitioners to voluntarily engage in collaborative drug therapy management agreements with pharmacists in Article 28 facilities and certain outpatient settings.

Collaborative drug therapy management (CDTM) has been practiced in approximately 46 States and Veteran's Administration hospitals for many years. With CDTM, pharmacists have an expanded patient care role in the management of medication therapy, particularly for patients with chronic conditions. For example, CDTM is being used in areas of immunizations, smoking cessation therapy, and flu/antiviral therapy. New York State continues to lose many pharmacists to neighboring states due to the fact that pharmacists cannot practice to the fullest extent of their ability, utilizing their knowledge and skills to foster optimal patient care. The enactment of this legislation is vital to recruiting and retaining the students and licensed medical professionals that graduate from our colleges every year.


Currently, all pharmacy graduates in the country receive the Doctor of Pharmacy degree, with the curriculum for pharmacy education held to national accreditation standards. Pharmacy education is focused on the pharmacist's professional competencies to ensure optimal medication therapy outcomes and patient safety. In addition to rigorous work in basic and applied sciences, the Doctor of Pharmacy program includes intensive training in Pharmacotherapy, which focuses on the process of selecting appropriate therapeutic regimens based on individual patient characteristics, and the demonstrated benefits and risks of drug therapy. Pharmacy students are prepared to monitor the effects of medication by taking and utilizing medication histories, assessing physical effects of medication and ordering clinical laboratory tests related to drug therapy management. The knowledge and skill development for a pharmacist begins in classroom and laboratory sessions and culminates in the experiential programs, which integrate classroom learning with practical application in clinical settings in the second through fourth years of the program. Many graduates then continue their education with one- or two-year residency programs in hospitals, physician offices and community pharmacy settings. No other profession receives such extensive, focused preparation in the increasingly complex area of pharmacotherapy.

It has been documented that for every dollar spent on acquiring medication, at least one dollar is spent on treating unwanted outcomes of that medication. There is also a plethora of journal publications that have illustrated pharmacists' involvement in the management of patient's drug therapy regimen greatly reducing the rate of adverse drug events, improving patients' quality of care and saving unnecessary health care expenditures. With the Medicare Modernization Act of 2003, which established the need for medication therapy management services provided by pharmacists for high-risk patients, pharmacists are already recognized as having a key role in improving safe medication use among Medicare part D drug plan recipients. With growing concern about the impact of medication-related adverse consequences in the elderly, the American Medical Directors Association and the American Society of Consultant Pharmacists have supported that collaboration between attending physicians, medical directors, and consultant pharmacists is desirable and feasible to promote improved quality of care in nursing homes.

Given our society's reliance on medications to manage and improve patient quality of life, we believe it is critical to allow the pharmaceutical expert to assist in overseeing patients' drug therapies to build a safer health care system for the citizens in New York State.

We respectfully request the Assembly's prompt consideration of this important legislation in the 2010 Legislative Session. The New York State Senate has passed the bill without opposition during the last four legislative sessions. The time has come for the New York State Assembly to pass A.6848 to allow pharmacists to become an integral component of the delivery of health care services in this State.

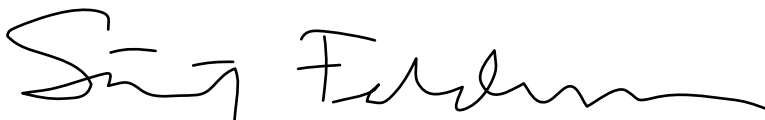
Respectfully,



Wayne Anderson, PhD
Dean, School of Pharmacy and Pharmaceutical Sciences, University at Buffalo



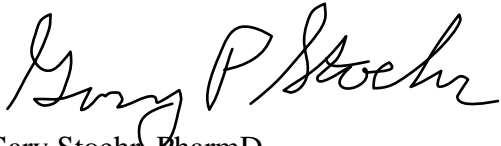
Mehdi Boroujerdi, PhD
Dean, Albany College of Pharmacy and Health Sciences



Stuart Feldman, PhD
Dean, Touro College of Pharmacy



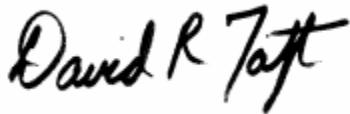
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