

## THINKING OUT LOUD

By: David Benoit

### SPECIAL POINTS OF INTEREST:

- **NPSC Spotlight Vendor** (pg. 3)
- **FluBlok Marketing Available** (pg 7)

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### INSERTS

EZCPAK  
FFF  
FRANKLIN EYEWEAR  
H D SMITH  
RETURN SOLUTIONS

Thanks to all of you who attended the EXPO. It was another very successful program with as many pharmacies attending as ever. We also provided ACPE CE credits for pharmacists. The last day to claim your CE credits is Monday, June 26. We are already thinking about next year's EXPO. If you have never been, you have no idea what you are missing, which has nothing to do with CE!



The implementation of NADAC is still causing a lot of friction and access problems to certain medications. While all of the low cost prescriptions now make at least \$10, the very expensive brands and specialty items are too frequently reimbursed under cost. That problem has created patient issues with access to expensive medications. Who wants to stock them to make \$10?

We have revisited the DEA rule that all controlled substance prescriptions must bear the prescribing physician's signature. Some pharmacies, in CT for sure, are receiving fax orders for controls that are invalid RXs; they lack an actual physician signature. These invalid Rx's create quite an audit risk, especially in Medicaid extrapolation. Of course, e-Rxs for controlled substances have their own rules. When a prescription goes from computer to computer, the authorized signature is always present: the transaction ID, the SureScript Prescriber ID, and the time and date stamp.

Gabapentin seems to be enjoying

renewed interest by prescribers. As I understand the situation, doctors who are avoiding opiates may prescribe something like gabapentin a non-controlled substance instead. Patients then mix a variety of drugs including opiates and benzos in order to achieve a high. It seems that gabapentin is a potentiator. Thus, the PMP program in Mass will require the reporting of gabapentin prescriptions beginning August 1. We do know that several pharmacy systems are prepared to implement this new reporting. If you have any questions about meeting the August 1 deadline, please contact your software vendor.

October is not all that far away. Medicare's open enrollment for 2018 plans will start mid-month. What plans do you have to help patients find better plans? What resources will you use? Which personnel will be involved? Will you generate reports from your pharmacy software system to identify which patients have plans that seem anemic? Give these matters some serious thought now and enjoy a happier, healthier 2018. I continue to be amazed when I hear a store tell me the sad tale of how many Aetna patients they have; usually they also tell me that they cannot afford iMedicare either. To me, that combination is the worst of all possibilities.

Will Amazon jump in to the market for filling prescriptions? Maybe. Here are some maybe not reasons: There is not very much cash business and lots of

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competition for it. The vast majority of Americans have prescription insurance. What PBM is going to contract with Amazon to cannibalize their mail order or specialty business? Amazon is in a “no-touch” business. Pharmacy and specialty in particular are very “high touch” businesses. They could build their own PBM, but that would take a lot of time and money; it would also be very risky. Lastly, they could commoditize prescriptions even further by becoming a central fill powerhouse, but for whom?

If we are operating in an environment that’s as isolated as being in a submarine, it is imperative to put up the periscope regularly and see what is going on in the world around us.

Regards, Dave.

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## UPCOMING IMMUNIZATION TRAINING



July 17, 2017

Sept 1, 2017

Long Island University AMS College of Pharmacy

7:30AM-5:00PM

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Thursday, March 29, 2018

Aqua Turf

Plantsville, CT

7:00AM-5:00PM

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 State of Connecticut

 Governor Dannel P. Malloy | Search:



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<b>Pharmacy Audit Training</b>	<b>Connecticut Valley Hospital- Merritt Hall</b>	<b>7/12/2017</b>	<b>09:00 to 12:00</b>
<b>Medical Equipment Audit Training</b>	<b>Connecticut Valley Hospital - Merritt Hall</b>	<b>10/11/2017</b>	<b>09:00 to 12:00</b>

TO REGISTER, GO TO: <http://www.ctdss.net/osdevents/default.aspx>

**SPACE IS LIMITED – REGISTER EARLY!**

# NPSC Signs a New 3 year Agreement with Anda, Inc. Beginning July 1, 2017

By Pat Monaco

NPSC has had a contractual relationship with Anda, Inc. since 2009. Since that time, there have been many changes in the marketplace and Anda has stepped up to try and be a good secondary provider to our network stores throughout. In August of 2016, Anda was acquired by Teva, the largest global manufacturer of generics in the world.

In this new agreement, the incentive program for our network stores is richer. We are working on other promotional opportunities available to our network stores in an attempt to help in this very difficult reimbursement environment.

Network pharmacies should contact their Anda representatives for more information.

## NPSC SPOTLIGHT VENDOR: INFOSHRED



**InfoShred** has expanded its shredding services since they joined NPSC's preferred vendor network to include microfilm and microfiche disintegration, computer media destruction, VHS tape destruction, product destruction and media vaulting: Visit their website at [www.infoshred.com](http://www.infoshred.com) to learn more about their services. NPSC has a group purchasing agreement for document shredding which provides pricing for either mobile or onsite destruction. Contact: Scott Cremens, Director of Business Development at 860-627-5800 ext. 136 or 888-800-1552 to discuss your needs and get a

price quote.

### *Congratulations*

*to Jay Sibulkin from Allen's Pharmacy  
in Manchester, MA.*

Jay is a recipient of the 2017 Cape Ann's Small Business Person of the Year Award. Each year, the Cape Ann Chamber of Commerce recognizes small business entrepreneurs for their extraordinary contributions, entrepreneurial achievements and notable community involvement. Jay was one of four business owners to receive the award at the Chamber's 37<sup>th</sup> Annual Small Business Week Luncheon on Friday, June 9<sup>th</sup>. An individual complementary evening reception was held to honor Jay in the Manchester Community on June 5<sup>th</sup>. Great job, Jay!



- ◆ Beacon Prescriptions, East Haven, CT
- ◆ Eaton Apothecary #2400, Boston, MA
- ◆ Plainville Community Pharmacy, Plainville, CT
- ◆ The Medicine Shoppe 1442, Rockville, CT
- ◆ Unity Pharmacy Park Ave, Bridgeport, CT

## Maine Pharmacies Get Another Win This Legislative Session

Ron Lanton, NPSC Lobbyist, True North Political Solutions

On May 5, 2017, the Maine pharmacists were greeted to news that Governor LePage signed the Pharmacy Clawback Bill. LD 6 sponsored by Senator Gratwick (D-Bangor) and titled An Act To Prohibit Insurance Carriers from Charging Enrollees for Prescription Drugs in Amounts That Exceed the Drug's Costs was signed into law by the Governor on May 5, 2017. The bill will prohibit insurers from charging consumers more for their prescription drugs and will allow pharmacies to communicate with their patients about prescription alternatives without fear of penalty. Specifically, this bill states that:

- A carrier or PBM may not impose on an enrollee a copayment or other charge that exceeds the claim cost of a prescription drug.
- If information related to a patient's out of pocket cost or the clinical efficacy of a prescription drug or alternative medicine is available, the insurer/PBM cannot penalize a pharmacy for disclosing that information to the patient.

Additional information on the bill itself can be found at [http://www.mainelegislature.org/legis/bills/display\\_ps.asp?id=6&PID=1456&snum=128](http://www.mainelegislature.org/legis/bills/display_ps.asp?id=6&PID=1456&snum=128)

There are a few other issues that Ron Lanton, Maine's pharmacy lobbyist has been watching. LD 1600 which proposed taxing opioid manufacturers for medications dispensed in the state has been killed this session. LD 572 sponsored by Senator Volk (R-ME) which proposed calling for pharmacy recognition has been rejected in the House after being passed by the Senate. The bill faces an uncertain future. LD 455 sponsored by Representative Chace (R-ME) passed both the House and Senate, which allows pharmacists to order and dispense OTC nicotine replacement products.

## MA Legislative Update

Dennis G. Lyons, R.Ph., Legislative Consultant to MIPA

The 2017-2018 legislative session is well under way with some 6,500 total bills files including many pharmacy related measures. The ongoing debate about health care costs is strong both in Washington and at the State House in Boston. Rising drug costs has become a major issue and continues to be a big part of the overall political debate. There are at least 22 drug pricing related bills in one committee alone this year. This couples with the ongoing concerns about the opioid drug abuse problem plaguing Massachusetts and the nation.

The Massachusetts Independent Pharmacist Association (MIPA) in collaboration with the Massachusetts Pharmacists Association (MPhA) have sponsored three major pieces of legislation.

I. **Senate 583 / House 2185** – An Act to

ensure access to generic medications: - This bill seeks to address the problems faced with MAC drug lists and rising generic drug costs. The bill will force PBM's to update their files and allow for pharmacists to appeal claims paid for "under water" MAC amounts. This bill faces a major challenge from the insurance industry but the good news is that many members of the legislature are becoming more aware of the role that profitable PBM's play in rising drug costs and how consumers as well as pharmacies are being subjected to their unregulated power. This bill will continue to shed light on PBM rebates, charge backs, claw backs, audits and a host of other practices that results in huge profits under the guise of "managing prescription

benefits”. Currently in the Joint Financial Services Committee

2. **Senate 523** - *An Act ensuring access to medications*: - This bill amends the state existing “Any Willing Provider” law and defines specialty pharmacy and what specialty drugs really are. Again, many powerful interests are against having consumer choice for their pharmacist and several PBM’s have opened their own “specialty Pharmacies” which are really not very special at all besides their high-ticket price. The Massachusetts Attorney General is also looking into the practices of the specialty drug benefits and has found that despite restrictions (restricted networks and rebate arrangements) currently imposed by the insurance industry, the costs for these drugs continues to rise. Currently in the Joint Financial Services Committee
3. **Senate 1240/House 1214** – *An act recognizing pharmacists as healthcare providers*: - This bill is also a refiled piece from the previous session. It would finally recognize pharmacists as providers thus allowing a pathway for payment for clinical services and expand the current Collaborative

Drug Therapy law to allow pharmacists to engage in many more disease states including pain management. This would add significant opportunity for pharmacists to engage patients who may require more appropriate narcotic drug therapies as the pharmacist’s role in the prescription monitoring program expands. This bill is currently in the Joint Committee on Public Health, and scheduled for a hearing on June 27.

Lastly, MIPA in collaboration with Northeast Pharmacy Services Corporation are currently supporting a special program to help members engage with their elected officials to more effectively represent the interests of Massachusetts Pharmacists. This program is open to all members who wish to participate and may involve visits to pharmacies by elected officials or meetings in the district offices. We have found in the past that these interactions are extremely effective and help to build a positive relationship with the local pharmacists and his or her representative in the legislature.

Anyone interested in participating is urged to contact me at [hiddgl@gmail.com](mailto:hiddgl@gmail.com) for more details.

## CT Legislative Update

*Kevin Hill, NPSC Lobbyist, Powers, Brennan & Griffin, LLC*

Last evening the House and Senate adjourned at midnight to close their regular session. They did not adopt a budget or budget implementing bills and legislators will convene a Special Session for those items later in the month.

NPSC had a successful year at the state Capitol. We have become a known entity whereas staff and legislators seek out our expertise when crafting legislation that affects our industry.

We monitored and acted upon dozens of pieces of legislation this year. The following are some highlights I would like to bring to your attention:

SB 445, An Act Concerning Fairness in Pharmacy and Pharmacy Benefit Manager Contracts.  
<https://www.cga.ct.gov/2017/BA/2017SB-00445-R02-BA.htm>

We fought throughout Session on this bill with the help of Democratic and Republican leaders in the Senate. The PBMs and insurance industry attempted to kill this bill on several occasions but we were able to pass this bill in both chambers on the final day of session. In short, this bill prohibits gag clauses and claw backs in PBM contracts.

HB 7052, An Act Preventing Opioid Diversion and Abuse.

<https://www.cga.ct.gov/2017/BA/2017HB-07052-R01-BA.htm>

This bill further changes the state’s opioid prevention laws. Of note, we worked with Sen. Kennedy and the Public Health Committee to ensure that standing orders were merely allowed for opioid antagonists and that pharmacists could still prescribe them after receiving the proper training.

HB 5077, An Act Concerning the Return of Prescription Drugs to Pharmacies.

<https://www.cga.ct.gov/2017/BA/2017HB-05077-R01-BA.htm>

This bill allows DCP to establish regulations for pharmacies to accept unused drugs if the pharmacy chooses to participate. Originally, this bill mandated pharmacies to accept the drugs.

HB 7124, An Act Concerning Maximum Allowable Cost Lists.

<https://www.cga.ct.gov/2017/BA/2017HB-07124-R000230-BA.htm>

*Continues on page 6*

“CT Legislative Update” continued from pg. 5

Our MAC bill was voted out of the Insurance Committee nearly unanimously this year. We had excellent advocates for the bill but a fiscal note of \$3 million essentially halted any further action on the bill.

While working with Senate leadership at the end of this legislative session I approached them about how important the MAC bill is and they agreed to work with me in the off session to draft language that could minimize or remove any costs the state would incur. I will be meeting with them in July to begin drafting ideas.

### The State Budget and Pharmacy Reimbursement

Earlier this year the state surveys came in via DSS and we were given our new dispensing fee as mandated by the federal government. However, we must change state statute in order to fully comply. We will ensure that the proposer budget language is included when the legislature finally adopts their state budget plan.

As always, please let me know if you have any questions about any legislation. It continues to be a pleasure working with NPSC.

## CT Pharmacists Going on The Road to Dispense Naloxone!

Karen Hekeler

As the word spreads in CT that pharmacists are able to go off site, I am getting frequent calls from a variety of event organizers that wish to have a pharmacist at their event. The process to be able to go off site to dispense is simple. Pharmacy submits request form along with protocol 30 days in advance of event (both forms located on DCP site). DCP is approving these in a timely fashion so there is generally no waiting. Once approved, pharmacy can notify event organizer so they can promote a pharmacist will be on site. Pharmacist brings laptop, pre-printed labels and Naloxone. I have created a list of tips for pharmacists to use when preparing for an event which can be found at [www.northeastpharmacy.com](http://www.northeastpharmacy.com) under Resources: Connecticut. Please contact me if you have any questions regarding off site naloxone prescribing. (203 671 3847) or via email at: [Karen@northeastpharmacy.com](mailto:Karen@northeastpharmacy.com)



As of this writing over a dozen off site naloxone prescribing events have taken place in CT and there are equally as many scheduled for upcoming weeks/months. Some of the events are public opioid epidemic forums, others are solely for purpose of naloxone training and some are private events at recovery houses. NPSC would like to thank all the pharmacies that have taken on one or more of these events.

### TUESDAYS AT 10



Argosy Group offers the NPSC network FREE monthly webinars with the best in DME information! This is a wonderful service that many of our network stores have come to look forward to. It will be the best 30 minutes you spend all day!

### Next Webinar

Date: July 11, 2017 Time: 11:00 EST

Topic: Business/Operational Topic

Register: [www.northeastpharmacy.com](http://www.northeastpharmacy.com)

Click on Tuesday at 10 Tab

# Have You Had Enough with DIR Fees?

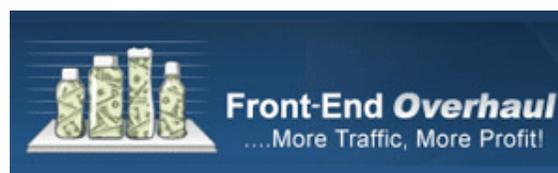
By Pat Monaco

iMedicare (an NPSC vendor) has made some new modifications to their software so it has real-time integration with most pharmacy systems. When you are filling an Rx for a patient that has an option to lower the DIR fees, an alert will pop up with a link straight to iMedicare where you are already logged in and there are no additional fees! It also identifies your patients that have low adherence on diabetes, statins and blood pressure medications and prioritizes which are most important and brings them to your attention. Finally, while MTM opportunities are important, some are most important as they have impact on your DIR. iMedicare identifies the DIR impact opportunities for you so you can make the best use of your time. If you have questions: email: [support@imedicare.com](mailto:support@imedicare.com)

# Need Some Help In Your Front Store?

By Pat Monaco

At our Expo in 2016, we had Gabe Trahan from NCPA – the guru of front store merchandising and marketing for pharmacies teach and entertain us during his two hour presentation and then came back for a boot camp program 6 months later for 4 hours.



We got rave reviews from everyone that attended these programs. Have you visited Gabe's area of the NCPA website? It's called "Front End Overhaul" and Profit Makers. In this section you will find help with marketing and signage, merchandising specific products, pricing, seasonal information and store operations help. As a member of NCPA you have access to all that this site has to offer. You can contact Gabe directly to discuss your specific store questions: 802-922-1205. Visit the NCPA website at: [www.ncpanet.org](http://www.ncpanet.org) – all you need to have full access is your NCPA Member number.

**Flublok<sup>®</sup>**  
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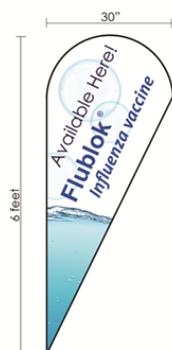
FDA approved for 18 and older

**FREE FLUBLOK MARKETING MATERIALS for 2017-2018 SEASON NOW AVAILABLE!**

The order form and photos of what is available this year is on our website. Click on Vendor information. Here are a few samples of what is available:



"Available Here" Flag:



"Available Here" Poster:



11"x14" or 16"x20"

Stickers:



# BUY 1

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When you order Tri State's revolutionary Pillboard® containers, you get the containers *plus* our entire marketing and graphics team! That's right, we put our talented graphics and marketing professionals to work for YOU - **absolutely FREE** - helping you design marketing & promotional messages on Pillboard® caps & labels that work for you to build your business. **It's FAST, EASY and EFFECTIVE! Remember, any other vial can only ever be a cost to your operation.** Only the Pillboard® programs can help add customers, protect your customer base, and increase sales and profitability ... **we are not just the best vial for the community pharmacy, we are the only vial you should be using.** **This gives a whole new meaning to "free goods"!**

**Call TSD today, and ask for marketing coach Ken Penland. 1-800-392-9824 x6189**

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