

January 28, 2010

The Honorable Harry Reid
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Max Baucus
Chairman
Senate Committee on Finance
United States Senate
Washington, DC 20510

The Honorable Charles Grassley
Ranking Member
Senate Committee on Finance
United States Senate
Washington, DC 20510

The Honorable Tom Harkin
Chairman
Senate Committee on Health, Education, Labor,
and Pensions
United States Senate
Washington, DC 20510

The Honorable Mike Enzi
Ranking Member
Senate Committee on Health, Education, Labor,
and Pensions
United States Senate
Washington, DC 20510

The Honorable Nancy Pelosi
Speaker
United States House of Representatives
Washington, DC 20515

The Honorable Steny Hoyer
Majority Leader
United States House of Representatives
Washington, DC 20515

The Honorable Charles Rangel
Chairman
House Committee on Ways and Means
United States House of Representatives
Washington, DC 20515

The Honorable Dave Camp
Ranking Member
House Committee on Ways and Means
United States House of Representatives
Washington, DC 20515

The Honorable George Miller
Chairman
House Committee on Education and Labor
United States House of Representatives
Washington, DC 20515

The Honorable Buck McKeon
Ranking Member
House Committee on Education and Labor
United States House of Representatives
Washington, DC 20515

The Honorable Henry Waxman
Chairman
House Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

The Honorable Joe Barton
Ranking Member
House Committee on Energy and Commerce
United States House of Representatives
Washington, DC 20515

January 28, 2010

Dear Chairmen, Ranking Members, Senate and House Leaders:

The members of the American Association of Colleges of Pharmacy (AACCP) appreciate and recognize your determination over the past year to increase access to high quality healthcare for all Americans. We write today to encourage you to continue working toward this worthy end regardless of seemingly insurmountable challenges. Nothing has changed in the healthcare environment that would preclude your continued work. In fact, without your attention to reorganizing and strengthening our healthcare system, more people will face the reality of joining the uninsured or spending their life savings to access basic healthcare services. We urge you to remain committed to a comprehensive approach to reorganizing our healthcare system due to the interconnectedness of its many working pieces. A piece-meal approach will only continue the fragmented, uncoordinated system that patients must endure today.

Faculty at colleges and schools of pharmacy share your interests and are focused on improving healthcare in their communities and states. We have shared innovative approaches to patient care delivery with you and your staff. The implementation and evaluation of these innovative approaches provided much of the evidence upon which you base the inclusion of provisions related to improved care coordination and the integration of clinical pharmacy services, including medication therapy management, across the continuum of care.

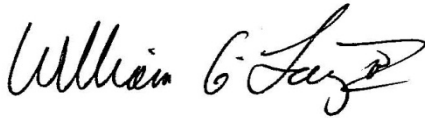
Now that there is a moment to determine next steps, it is important to remember the comprehensive aspect of this undertaking. It is also important to remember the Institute of Medicine states that a key to quality improvement is through the delivery patient-centered and team-based care. Meeting your initial intent puts in motion a series of interconnected actions that may or may not be attainable if undertaken out of a quality context. These interconnected actions include the education of healthcare professionals within programs, such as the Area Health Education Centers and Geriatric Education Centers, and related provisions that support interprofessional education. Interprofessional education provisions are included in both House and Senate legislation and must remain in a final bill.

Improving quality requires a healthcare system reorganized to focus on the needs of patients and to increase their access to healthcare services that prevent illness and improve health. Your interest in the integration of preventive care into primary care is clear in both House and Senate legislative provisions that authorize the establishment of medical home and accountable care organization models. These models approach the care of patients, especially those with chronic illness, in a much more efficient and coordinated manner. Better coordinated care for the chronically ill that includes medication therapy management indicates both House and Senate support for expanding what health professionals and policy-makers currently consider primary care services. Similarly, the provisions related to clinical and community-based prevention in both House and Senate legislation reorganize service and program development to focus on patients and communities with the support of a broader array of healthcare professionals and partners.

We bring these specific concepts and programs to your attention because they are supported by provisions in both House and Senate legislation. These programs, which include prevention and wellness, health professions education, care-coordination and increased access to patient-centered primary care services, have bi-partisan support, can be implemented quickly and can readily improve the quality of care patients receive. Their benefit to individual patients and their communities are essential components of comprehensive healthcare reform legislation that must pass the United States Congress as soon as possible.

There is probably at least one college or school of pharmacy in your state or district you can contact for specific examples of innovation regarding teaching healthcare professionals, evaluating program quality or outcomes and providing patient-centered, team-based care with a strong emphasis on prevention and wellness. Please do not hesitate to contact Will Lang, vice president of policy and advocacy, at wlang@aacp.org if you would like to discuss these innovations with your college or school of pharmacy. We encourage you to find out from your constituents just how important completing your healthcare reform work is to their patients, communities and institutions, and how they are ready to implement the results of that work.

Sincerely,

A handwritten signature in black ink that reads "William G. Lang". The signature is written in a cursive style with a large, stylized initial "W".

William G. Lang, M.P.H.
Vice President of Policy and Advocacy
American Association of Colleges of Pharmacy
703-739-2330 ext. 1038