

HCR is moving—Are you?

America's health care system cannot continue in its present form, and change is coming. That is now the clear consensus in Washington, as legislators and the Obama administration consider just what changes will make things better for patients, providers, the economy, and our society. The big remaining question for pharmacy and pharmacists is simple: What will the changes mean for us, our patients, our families, and our communities?

By the time you read this, the Senate committees developing health care reform (HCR) proposals should be close to finalizing their ideas for HCR, and House committees are expected to release their versions soon, as all committees are facing deadlines of July 31—before the August recess. After that, a conference committee will meet in late summer and fall to reconcile differences in House and Senate legislation. The task

professional future, the health care system you and your family rely on, and the role your profession will play on the new health care team—those are just some of the things that depend on your action today!

Contacting Congress: Spiro shows how it's done

If you hear the Majority Leader of the Senate praising pharmacists for their MTM services and advocating coverage of those in HCR legislation, you can thank a pharmacist who provided the voice of her profession in April. Rachelle F. Spiro, BPharm, FASCP, made an appointment with the district office of Sen. Harry Reid (D-NV) during the Easter recess, and the 15-minute timeslot turned into an hour-long visit with a key aide. By following several of the 10 steps recommended by APhA for successful

“We must get our Members of Congress to think about pharmacists as providers of care instead of medications.”

before us now is to make sure that, when President Barack Obama signs a bill sometime before year's end and his administration begins the long process of interpreting that language in regulations, we will have done all we could to make pharmacy's voice heard and ensure coverage of medication therapy management (MTM) services—also known as pharmacy's future—in the health care system that emerges from this historic debate.

In short, the game is on. Are you? Take a look at the checklist to the left, and make sure you are doing all you can personally to advance pharmacy's messages to your Members of Congress and on the healthreform.gov website. Ask patients who have benefited from your MTM services to do the same. Visit the district office of your Senator or Member of Congress and work to set up an in-pharmacy visit with your Representative and/or Senators during the Fourth of July break or the August recess. Your pro-

visits with Members of Congress (available online by clicking the Get Involved link at www.pharmacist.com/GA), Spiro was invited to participate in a telephone roundtable that the Senator conducted with 20 Nevada health providers, providing another opportunity to make pharmacy's messages heard not only by Reid himself but also other key stakeholders in this ongoing debate.

The full story of Spiro's interactions with Reid and his staff can be accessed in the HCR news archives on pharmacist.com. An important take-home message is this advice that Spiro offers to fellow pharmacists: “Call your congressional members while they are in their home districts during the summer breaks. Tell them that you want to talk about pharmacists' role in the new health care system. Make an appointment with staff and talk about how pharmacists make a difference in patient care. Be real, and provide anecdotes on



HCR checklist:

What you need to do NOW!

- ❑ **From last month:** You accessed the Government Affairs section of pharmacist.com, learned how to Get Involved, signed up as an APhA Advocacy Key Contact, studied the process of contacting your Members of Congress and hosting them in your pharmacy practice setting, and if you weren't already a member, joined APhA.
- ❑ **Take Action!** During Congress's Fourth of July break and Labor Day recess, Members of Congress will be home. Contact their offices to set up visits to your pharmacy practice setting or to visit them in their district office. Details are available in the Government Affairs section of pharmacist.com.
- ❑ **Be Alert!** Votes of key committees and the full House and Senate could occur at any time. Watch for e-mail messages from APhA providing information on actions you should take immediately.
- ❑ **Involve Colleagues!** Talk with pharmacists, technicians, and staff in your pharmacy about getting involved in the political process. Last year's elections proved the importance of grassroots efforts; implement those lessons. And don't forget about new and future pharmacists (see boxed item on other side of this page).
- ❑ **Next month:** As legislation moves to the floor of the House and Senate and then to a conference committee that will reconcile differences, be ready to convey specific messages that APhA will send out via the Legislative Alert System.



HUB ON HEALTH CARE REFORM

provides readers with practical information on health care reform issues, what APhA is doing to keep pharmacists' important role front and center with decision makers, and simple ways for pharmacists to participate in the processes that will determine the structure, function, and processes of a reformed American health care system. To offer suggestions for future content, ask questions, or make comments, send an e-mail message to APhA at gvtaff@aphanet.org.

hubonhealthcarereform

how your care in whatever setting makes a difference to your patients. We must get our Members of Congress to think about pharmacists as providers of care instead of medications.”

Playbill for HCR



At both ends of Pennsylvania Avenue, many players are involved in the HCR debate in the nation's capital. Listed here are a few of the people to watch. If any of the Members of Congress are your Senator or Representative, then APhA and pharmacy especially need you to get involved STAT!

Senate Finance Committee (finance.senate.gov)

■ **Max Baucus (D-MT):** Chair of this important committee, which is out in front on developing HCR language. Elected to Senate in 1976 after one term in House; served ever since. As a fiscally conservative Democrat, Baucus has values similar to those of the Blue Dog Coalition in the House.

■ **Chuck Grassley (R-IA):** The Ranking Member of Finance is a real watchdog over federal agencies; has been a frequent and vocal critic of FDA, pushing the agency to streamline antiquated systems and do a better job of keeping Americans safe. As a native of the state that launched Barack Obama to the White House, Grassley will be a key Republican to watch to gauge the solidarity of the minority party on HCR.

Senate Health, Education, Labor, and Pensions (HELP) Committee (help.senate.gov)

■ **Edward M. Kennedy (D-MA):** The last of his generation from this clan of Massachusetts politicians serves as Chair of HELP. Diagnosed with brain cancer, the Senator views HCR as a legacy issue that has long been on his to-do list; second-longest serving Senator, having been elected in 1962 to fill the unexpired term of his brother, President John F. Kennedy.

■ **Michael B. Enzi (R-WY):** The Ranking Member has served on HELP since arriving in the Senate in 1997; has roots in small business; is a quiet conserva-

tive who pushes on some unexpected issues (opening up trade with Cuba; battling AIDS).

House Ways and Means Committee (waysandmeans.house.gov)

■ **Charles B. Rangel (D-NY):** Chair of Ways and Means represents New York's Harlem district; has served since 1971 and is an ardent supporter of HCR.

■ **Dave Camp (R-MI):** The Ranking Member represents northwest and mid-Michigan and came to the House in 1991. Health care and taxes have been signature issues for this attorney; will provide a strong foil to Democrats when it comes to how to pay for HCR.

House Energy and Commerce Committee (energycommerce.house.gov)

■ **Henry A. Waxman (D-CA):** A member of the House since 1975, the Energy and Commerce chair represents a diverse area of southern California, from West Hollywood through Ventura County and into parts of Santa Barbara; has championed health and environmental issues, in particular, since first joining this committee in 1979; was coauthor with Utah's Republican Sen. Orrin Hatch of the 1984 generics legislation.

■ **Joe Barton (R-TX):** Ranking Member on this committee represents the 6th district of Texas, stretching along I-45 from the Dallas suburbs southeast toward Houston. More recognized for leadership in energy policy, Barton expresses concerns about the adequacy of rural and mental health.

White House (www.whitehouse.gov and healthreform.gov)

■ **Kathleen Sebelius:** Sworn in as HHS Secretary in April, this former Kansas governor brings a bipartisan approach along with experience as insurance commission and legislator in the Sun-

flower State. Newborn screenings, childhood immunizations, and children's health coverage were signature issues as governor.

■ **Nancy-Ann Min DeParle:** Counselor to the President and Director of the White House Office of Health Reform. DeParle is an attorney with experience in both the private and public sectors; worked in the Clinton administration on Medicare, Medicaid, and the State Children's Health Insurance Program (SCHIP); worked in the financial industry during the second Bush administration.



HCR 101: Basic Definitions

■ **Accountable Care Organizations (ACOs):** As outlined in *Health Affairs* (<http://content.healthaffairs.org/cgi/content/abstract/hlthaff.28.2.w219>), ACOs would address fragmented payment and delivery systems, the link between more care and more payments, and the presumption that reduced care means rationing. ACOs would be organizations of primary care and specialty physicians who have agreed to care for a group of patients, measure the quality of care provided, and share in savings that would reward improved efficiency.

■ **Patient-Centered Medical Homes:** The Patient-Centered Primary Care Collaborative (www.PCPC.net) defines these as payer-independent entities that reward primary care physicians for coordinating the care of patients by serving as a conductor for the orchestra of health care providers and professionals. The specifics on how this model would work are few. The role the pharmacist should play in this model is detailed in a document available online at www.pharmacist.com/GA/MedHome.

Help is on the way: Get new and future pharmacists involved!

As the health care debate moves quickly this year, be sure to involve residents, new pharmacists, and student pharmacists in the effort to make direct contact with Members of Congress, post stories on healthreform.gov, engage others using social media such as Facebook and Twitter, and ask patients to do the same by videotaping vignettes or collecting testimonials about pharmacists' MTM services. Graduates of the nation's pharmacy schools are making the transition to residencies and practice this summer, and your encouragement to get them involved in this historic opportunity to reshape pharmacy could be one of the most important factors influencing their future professional lives. Direct your new colleagues to the Health Care Reform Hub at www.pharmacist.com/hcr, and be sure they see this and future issues of the Hub on Health Care Reform. The inaugural May edition is available online at pharmacytoday.org.