

## Steve Anderson, President and CEO National Association of Chain Drug Stores

By Steve Anderson

During “NACDS Week in New York City” in December, former governor of Mississippi and former Republican National Committee chairman Haley Barbour said: “Anyone who tells you they know who will win the Republican nomination will lie to you about other things.”

In describing the uncertainty facing Democrats and Republicans alike in the 2016 presidential and congressional elections, he realistically assessed the year ahead — in politics and beyond.

Yet, familiarity exists in the uncertainty. We have been in this place before.

I have been thinking back to the outlook for pharmacy as it stood in 2008 — two presidential elections and four congressional elections ago. That was my second year at NACDS. Then, like today, we were uncertain about what the future would hold, but pharmacy knew that we wanted to help define it.

In anticipation of that election, NACDS published a full-page ad in *The Washington Post* — an open letter to the candidates running for the Republican and Democratic presidential nominations with the headline: “We Extend an Invitation to Better Health Care.” The ad urged greater reliance on pharmacists and advocated for pro-patient and pro-pharmacy public policy. NACDS then launched a campaign to define pharmacies as the “face of neighborhood health care.”

Another development at that time was the work of NACDS, the National Community Pharmacists Association and the American Pharmacists Association on what is now an historic document, titled “Project Destiny.” This effort sought to foster a broad embracing of pharmacy’s health care services beyond medications. Knowing what pharmacy has accomplished since then, it is fascinating to read what the “Project Destiny” report stated: “Pharmacists ... are well suited for providing patient care that ensures optimal medication outcomes and can contribute to the lowering of overall health care costs ... ‘Project

Destiny’ has identified potential mechanisms for offering services to patients that are valued by the health care system which can be replicable, scalable and economically viable for community pharmacy.”

The future that was described in “Project Destiny” then is now the world we call reality in 2016. It is no longer an idealistic and academic exercise of notional ideas. It is a world that pharmacy helped create and the world in which pharmacies now operate.

As we anticipate these next 12 months, I think it is helpful to assess pharmacy’s accomplishments, and pharmacy’s outlook.

**Elections emerge as ultimate arena for grassroots advocacy**  
It is shocking that the NACDS RxImpact Day grassroots advocacy program did not exist prior to the 2008 elections. In 2016, we will present the 8th Annual

*‘The scope-of-practice focus will continue.’*

NACDS RxImpact Day on Capitol Hill — when white-coated pharmacists and other pharmacy advocates meet with their senators and representatives.

In 2016, look for the expansion of NACDS RxImpact Votes — the get-out-the-vote arm of the grassroots program. Our strategy is to strengthen the electoral influence of the people of pharmacy for the candidates of their choice, and to leverage people’s natural interest in politics to expose them to NACDS RxImpact’s opportunities throughout the year. NACDS will show industry members how to facilitate voter registration, social media engagement, campaign volunteerism and voter turnout.

In addition, we anticipate another record-breaking year of impact for the NACDS Political Action Committee (NACDS-PAC). The bipartisan NACDS-

PAC supports pro-patient, pro-pharmacy congressional candidates. In 2014, NACDS-PAC engaged in about one-quarter of the U.S. House races, and in nearly 70% of U.S. Senate races, with disbursements to candidates increasing by more than 40% compared with the 2010 midterm election — an appropriate comparison in the political realm.

**Demonstrating the value of traditional Rx services**  
NACDS identified an important nuance in telling the story of pharmacy: while it is important to describe in-store health and wellness innovations, it is vital to begin the discussion by validating that pharmacies remain committed to traditional pharmacy services — including providing medications. Patients expect that to remain a priority, and even as pharmacies evolve their models, it is important that the federal and state governments appreciate medication access.

It was eight years ago that NACDS and the National Community Pharmacists Association achieved an important legal victory that blocked the devastating Medicaid pharmacy reimbursement cuts of the Deficit Reduction Act of 2005. As I write this, we await the federal government’s rule that will guide reimbursement under the average manufacturer price model — it could be published by the time you are reading this.

NACDS and our allies have fought hard and successfully to mitigate the cuts, using every legal, legislative and regulatory advocacy mechanism at our disposal. In 2016, look for the continuation of our work to advocate for pharmacy patient care on this issue.

In addition, we anticipate continued work at the federal and state levels to preserve patients’ choice of pharmacies in Medicare and Medicaid, and in the Tricare program for military families and veterans. NACDS also will continue to urge improved collaboration among health and enforcement agencies to prevent prescription drug abuse while fostering legitimate medication access.

**Scope of practice as destiny creator**

It was in 2009 that pharmacists finally gained the ability to administer the flu vaccine in all 50 states — when Maine became the 50th state to take that step. Then, in 2015, Georgia became the 50th state in which pharmacists can provide at least three vaccines: influenza, pneumococcal and herpes zoster.

In 2016, the scope-of-practice focus will continue. The data from the 2013, 2014 and 2015 NACDS Victory Vision opinion research surveys show notable increases in support for allowing pharmacies to offer new health services.

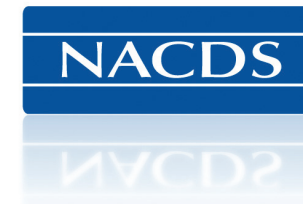
However, not all of the work to achieve pharmacy’s destiny involves expanding the profession’s scope of practice. One example is the Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 592/S. 314) — to improve access for underserved Medicare patients to services that pharmacists can provide under state law, but that currently are not available to patients through Medicare. The bipartisan legislation currently is cosponsored by over one-third of the Senate and well over one-half of the House of Representatives.

NACDS and our allies also advocate for the Medication Therapy Management Empowerment Act (S. 776), which would improve access in Medicare to pharmacist-provided MTM, to improve patient health and ultimately lower health care costs.

Regarding MTM, the Centers for Medicare and Medicaid Services (CMS) delivered a positive step forward in the fall of 2015, announcing a pilot program allowing Medicare Part D plans the opportunity to utilize new and innovative approaches to MTM. NACDS views this as an important opportunity.

**NACDS evolves as laboratory of innovation**

Importantly, NACDS does not attempt to tell member companies how to run their businesses. Still, NACDS can create the environment in which NACDS members can leverage their passion for innovation. That vision has contributed to the



Steve Anderson

industry’s advancements that were envisioned in “Project Destiny.”

Chief among the aspects of this laboratory is NACDS’ annual calendar of meetings and conferences. Participants will see new features woven into the NACDS Regional Chain Conference, the NACDS Annual Meeting, the NACDS Total Sore Expo, and NACDS Week in New York City. It is hard to believe the NACDS Total Sore Expo debuted in 2013. Today, the industry uses it to spur discussions among business partners about the entire store.

Also in 2016, look for the proliferation of an NACDS training program that can help advance the transformation of NACDS members’ stores as the face of neighborhood health care. Launched in 2015, the new point-of-care testing educational certificate program is improving community-based treatment of flu and strep, among other conditions.

The words of former governor Haley Barbour could relate to all that we face in 2016: If somebody tells you exactly what is going to happen, at least a little skepticism is healthy.

That is why our strategic plan is stamped “draft,” and why we remain focused on the needs and expectations of NACDS member companies, and on the ultimate good of the patients and consumers whom they serve.

