

December 9, 2014

Acting Director William F. Russo Regulation Policy and Management (02REG) Department of Veterans Affairs 810 Vermont Avenue NW. Room 1068 Washington, DC 20420

Dear Acting Director Russo:

On behalf of the American Academy of Family Physicians (AAFP), which represents 115,900 family physicians and medical students across the country, I write in response to the "Copayments for Medications in 2015" interim final rule published by the Department of Veterans Affairs (VA) in the October 27, 2014 Federal Register.

The AAFP supports the VA's decision to freeze for another year the copayments for medications furnished on an outpatient basis to certain veterans since previous, higher copayments have been shown to reduce the utilization of VA pharmacy benefits. Since medications must be taken as prescribed to ensure effective health care management, it is important to minimize any program feature, like higher copayments, that would interfere with adherence to prescription schedules.

The AAFP disagrees with the VA's position in the interim final rule that "When non-VA providers are also issuing prescriptions, there is a greater risk of adverse interactions and harm to the patient because it is more difficult for each provider to assess if the patient is taking any other medications." As an integrated health system, the VA can easily monitor whether veterans refill prescriptions and check for medications that may interact with each other when these prescriptions are filled within the VA. . However, with the proliferation of e-prescribing and other electronic tools, we believe that the VA can and should ensure the ability of non-VA providers to easily communicate with the VA in order to treat veterans, monitor prescriptions, reduce wait times, etc. This will be especially critical as the VA prepares to implement its Veterans Choice Program. The AAFP urges the VA to allow veterans to fill prescriptions written by civilian family physicians at VA pharmacies in order to reduce significant financial challenges for veterans and maintain some consistency with the delivery of pharmaceutical benefits to veterans

We appreciate the opportunity to provide these comments and make ourselves available for any questions you might have. Please contact Robert Bennett, Federal Regulatory Manager, at 202-232-9033 or rbennett@aafp.org.

Sincerely,

Reid B. Blackwelder, MD, FAAFP

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