

Courtney McQuade, PharmD
Director of Pharmacy Services
McQuade's Marketplace
106 Main Street
Westerly, RI 02891



Dear Chair Solomon and members of the House Corporations Committee,

I am writing to express my support for HB 5248 titled AN ACT RELATING TO BUSINESSES AND PROFESSIONS – PHARMACIES. I have been a pharmacist for over 20 years and in that time have seen a change in the healthcare landscape. This change is most prominent in regards to the growing issue of Pharmacy Benefit Manager (PBM) audits and their significant impact on patient care. While PBMs are intended to help manage drug costs and ensure appropriate prescription practices, the audit processes employed by these organizations have become increasingly predatory in nature, causing numerous problems within the healthcare system.

First and foremost, PBM audits often impose unrealistic and burdensome documentation requirements on healthcare providers. Specifically, if a prescription is written for a 90 day supply and the patient only wants 30 days, I as the pharmacist has to contact the prescriber and waste my time and theirs getting a new prescription, rather than documenting on the face of the prescription that the patient wanted a quantity that was less than what was prescribed. This happens numerous times per hour and results in delays in patient care and therefore increase cost and waste. These demands can be time-consuming, complex, and sometimes unreasonably retroactive, which diverts crucial resources away from patient care. More concerning is the fact that the stress and complications created by these audits frequently result in delayed or denied access to necessary medications and therapeutic interventions for patients. This not only hinders the quality of care but can lead to severe health consequences when patients are unable to receive timely treatment.

The audit process itself is often a significant source of anxiety for both healthcare providers and patients, as PBMs frequently engage in practices that can be characterized as "punitive" rather than supportive of the overall goal of improving patient outcomes. Instead of fostering collaborative efforts to ensure proper medication use, PBMs have turned audits into a way to reduce costs at the expense of patient well-being. This is particularly problematic when it comes to the treatment of complex or chronic conditions where timely access to medications is paramount.

Furthermore, these audits create unnecessary administrative burdens for healthcare practices, causing delays in critical decisions regarding treatment plans and therapeutic adjustments. The need to comply with PBM demands and defend prescriptions often results in valuable time being lost, which is time that could otherwise be spent delivering the care patients need to manage their conditions effectively.

As someone who is deeply committed to patient health and the integrity of the healthcare system, I implore you to consider the broader implications of PBM audit practices on the care patients receive. It is crucial that we ensure audits are fair, transparent, and conducive to the shared goal of enhancing patient outcomes. I strongly encourage your organization to take proactive steps in addressing these issues, ensuring that audits are focused on improving healthcare rather than becoming a roadblock to timely and appropriate care.

Thank you for your attention to this important matter. I look forward to your response and hope that together we can work toward ensuring better care for all patients.

Sincerely,

Courtney McQuade, PharmD

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