Dear Inspector General Whitcomb,

Recent changes at the United States Postal Service (USPS) have raised serious concerns about timely delivery of prescription medications. Although we welcomed the USPS announcement that it will delay any new changes to services, we remain concerned that changes that have already taken effect may severely compromise timely patient access to medication delivered by mail. Specifically, the bans on postal service overtime and taking additional routes pose a major medication access risk for individuals who have opted for mail-order medication delivery during the COVID-19 public health emergency (PHE) and those who live in rural areas that are serviced solely by USPS.

Switching to an alternate delivery method may not be logistically or financially feasible. Some patients may have to travel long distances to pick up prescriptions, immunocompromised patients may not feel comfortable entering a pharmacy during the PHE, and others, such as TRICARE (Department of Veterans Affairs) patients, may face significant out-of-pocket cost increases if they transfer prescriptions to in-person pharmacy pick up. In order to safeguard patient health and safety, it is imperative that policy changes that adversely impact mail-order delivery be reversed with immediate effect.

USPS handles 1.2 billion prescription drug shipments each year, almost four million shipments a day for six out of seven days of the week. These mail in medications typically are for drugs that help to treat long-term, chronic conditions such as hypothyroidism, high cholesterol, hypertension, and type 2 diabetes just to name a few of the most common. For those with Medicare Part D and large employer plans, half of the top ten drugs filled by mail were for cardiovascular conditions. A single missing or delayed medication can compromise patient health and overall medication compliance, which is critical to managing chronic conditions.

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Some patients are incentivized to receive medications via mail-order and face steep financial penalties for opting out. For instance, the VA provides about 80% of its outpatient prescriptions through the VA Mail-Order Pharmacy, which processes 470,000 prescriptions daily. For some maintenance medications, TRICARE beneficiaries who do not live near a military pharmacy or who do not wish to pick up medications from a military pharmacy must receive those medications through mail order. Accessing these medications at a local pharmacy may result in the VA patient being charged 100% of the medication price. Similarly, VA patients who opt to pick medications up from a network pharmacy rather than receiving medications through mail-order face higher co-payments. Not only do USPS slowdowns threaten patient health, they also create new financial burdens for patients and their families.

During the COVID-19 PHE, mail-order prescriptions have been a lifeline for at-risk populations, such as the elderly and immunocompromised. When stay-at-home orders began in March 2020, mail order prescriptions rose 21% from previous years, showcasing the role mail-order delivery plays in protecting patients from COVID-19 exposure. Given the recent surges in COVID case numbers, particularly in some rural areas, it is critical that USPS provide timely service to ensure uninterrupted patient access and protection.

We understand that your office is currently reviewing the USPS policy changes and we hope the information provided here will assist in your information-gathering process. We appreciate USPS’s efforts to rectify delays in mail delivery to protect against mail-order medication delays, but more work remains. If you have any questions, or if we can be of any assistance, please do not hesitate to contact Tom Kraus, Vice President, Government Relations at (301) 664-8605 or tkraus@ashp.org.

Sincerely,

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