

September 6, 2016

[Submitted electronically via www.regulations.gov]
U.S. Department of Health and Human Services
Office for Civil Rights
Attn: RFI (RIN 0945-AA02)
Hubert H. Humphrey Building, Room 509F
200 Independence Ave. SW
Washington, DC 20201

Re: Request for Information: Opioid Analgesic Prescriber Education and Training Opportunities to Prevent Opioid Overdose and Opioid Use Disorder

ASHP thanks the U.S. Department of Health and Human Services (HHS) for the opportunity to provide input regarding education and training in pain management and opioid prescribing. ASHP represents pharmacists who serve as patient care providers in acute and ambulatory settings. The organization's more than 43,000 members include pharmacists, student pharmacists, and pharmacy technicians. For over 70 years, ASHP has been at the forefront of efforts to improve medication use and enhance patient safety.

ASHP shares HHS's commitment to combating the nation's opioid overdose and misuse epidemic. We believe pharmacists, as the medication experts on the interprofessional healthcare team, play an essential part in opioid misuse prevention, education, and assistance. ASHP has long prioritized efforts to address this public health crisis, engaging at the state level to strengthen prescription drug monitoring programs (PDMPs) and at the federal level to increase funding for treatment and prevention initiatives.

Recognizing that HHS is seeking input on prescriber education initiatives, and noting that our members do not independently prescribe opioids, we request that HHS consider the following when developing prescriber education tools:

Healthcare Team Education: Collaborative care models are now the gold standard for patient care, so prescribers cannot operate in a vacuum. While prescriber education specific to opioids and pain management is necessary, it must be supplemented with corresponding education for the rest of the healthcare team. Each member of the healthcare team has a role to play in assisting patients in appropriate pain management. Comprehensive education regarding opioids should include a discussion of each team member's role in identification, prevention, and treatment of opioid misuse, as well as strategies for harnessing each clinician's unique practice experience and knowledge base to collaboratively target overprescribing and misuse of opioids. To facilitate better coordination among providers working to combat drug misuse, we encourage HHS to expand interprofessional educational opportunities rather than to focus solely on prescriber education.

U.S. Department of Health and Human Services Prescriber Education RFI September 6, 2016 Page 2

Use of Health Information Technology: ASHP believes that strengthening PDMPs could reduce overprescribing. Although PDMPs are in place in the majority of states, the platforms are not user-friendly, which creates barriers to usage for prescribers and dispensers. A robust, interoperable national PDMP system would allow prescribers and pharmacists to track patient-specific opioid use to prevent overprescribing and potential misuse at the point of prescribing. Additionally, better use of existing systems could also have a positive impact on overprescribing. We urge HHS to evaluate initiatives to enhance existing PDMPs and to improve current use of PDMPs by both prescribers and dispensers.

ASHP appreciates this opportunity to offer our input on this vital issue. As HHS continues its work on opioid education, we encourage the agency to view ASHP as a resource. If you have any questions or wish to discuss our comments further, please contact me via email at <a href="mailto:jschulte@ashp.org">jschulte@ashp.org</a> or by phone at (301)-664-8806.

Sincerely,

Jillanne M. Schulte, J.D.

Director, Federal Regulatory Affairs

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