

Via Electronic Submission to: www.regulations.gov

June 16, 2020

Shannon Lee Centers for Disease Control and Prevention 1600 Clifton Road NE, Mailstop S106–9 Atlanta, GA 30329

Re: Management of Acute and Chronic Pain: Request for Comment (Docket No. CDC-2020-0029)

Dear Ms. Lee:

The American Pharmacists Association ("APhA") appreciates the opportunity to provide comments to the Centers for Disease Control and Prevention ("CDC") on the management of acute and chronic pain. Founded in 1852, APhA represents pharmacists, pharmaceutical scientists, student pharmacists, pharmacy technicians, and others interested in improving medication use and advancing patient care. APhA members provide care in all practice settings, including community pharmacies, hospitals, long-term care facilities, specialty pharmacies, community health centers, physician offices, ambulatory clinics, managed care organizations, hospice settings, and the uniformed services.

APhA is committed to working with the CDC and other health professionals and stakeholders to curb opioid misuse and abuse, while ensuring that the millions of patients with acute and chronic pain have access to appropriate prescription pain medications. Pharmacists are important providers on the patient's health care team and play a critical role in all facets of acute and chronic pain care management, including prescribing, dispensing, and counseling on both opioid and non-opioid pain medications, as well as non-medication pain management techniques and strategies.

As medication experts, pharmacists are uniquely qualified to provide opioid stewardship, medication-assisted treatment (MAT) for opioid use disorders (OUD), comprehensive medication management, dose optimization, appropriate tapering of pain medications, and education on safe storage and disposal methods. In addition, pharmacists aid opioid overdose reversal efforts by dispensing naloxone and training patients and community members on its use. In the Federal Register notice (85 FR 21441), CDC requests input on the following topics:

- Experiences managing pain, which might include the benefits, risks, and/or harms of the pain management options listed above (e.g., opioid pain medications, non-opioid medications, or non-pharmacological treatments).
- Experiences choosing among the pain management options listed above, including considering factors such as each option's accessibility, cost, benefits, and/or risks.
- Experiences getting information needed to make pain management decisions.

In response to CDC's request for comment, APhA would like to bring attention to two APhA resources:

- OPIOID USE DISORDER PHARMACOTHERAPY provides an overview of pharmacologic agents used for the treatment of OUD, including methadone, naltrexone, and buprenorphine, and naloxone for overdose reversal. This pharmacists' guide includes information on mechanism of action, pharmacokinetics, dosing, drug interactions/ toxicities, and special considerations for the use of each of these medications. This resource was developed by the APhA Academy of Pharmacy Practice & Management (APhA–APPM) Pain, Palliative Care, and Addiction Special Interest Group (SIG) and is accessible to APhA members. APhA would be happy to provide a copy to the CDC upon request.
- <u>Taking Care: The Pharmacist's Role in Caring for Patients with Pain</u>, produced in partnership with the American Chronic Pain Association ("ACPA"), provides resources pharmacists can use to help patients assess their pain, manage their medications and non-pharmacologic treatments, reduce adverse drug reactions and side effects such as opioid induced constipation, and improve patient satisfaction and outcomes.

In order to leverage pharmacists' expertise, APhA urges CDC to collaborate with the Centers for Medicare and Medicaid Services ("CMS") to address barriers to the integration of pharmacists into pain management teams by providing for adequate Medicare reimbursement of pharmacists' patient care services. In addition, APhA urges CDC to work to support and expand MAT for opioid use disorders, and pharmacists' critical role in providing MAT for OUD patients.

APhA appreciates CDC's work on this important issue. If you have any questions or need additional information, please contact Karin Bolte, Director of Health Policy, at kbolte@aphanet.org or (301) 648-0673.

Sincerely,

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Senior Vice President, Pharmacy Practice and Government Affairs