

Walgreens Q & A Prepared for the New Hampshire Medical Society

Walgreens recently amended its policy on good-faith dispensing of controlled substances, specifically opioids. By letter, sent in early April of this year, Walgreens advised our prescribers nationally of this revised policy. We followed this initial correspondence with a second letter in May to address concerns we had heard from our prescribers.

Generally, we have found that if we have an open discussion, our policy is met with acceptance and a desire by prescribers to partner with us in implementing this important policy.

We appreciate the opportunity you have provided us to discuss our policy openly and respond to the questions raised by your prescribers. Below, in a Q & A format, we have tried to address some of the concerns raised:

Is Walgreens' revised policy a statewide policy for New Hampshire only?

No. Walgreens' revised Good Faith Dispensing (GFD) policy is being implemented at every one of our pharmacies nationwide and Puerto Rico.

Are Walgreens pharmacies required by the DEA to change their dispensing practices?

No. Walgreens took these steps voluntarily for a number of reasons. First is the seriousness of, and rapid increase in, the abuse of prescription controlled substances. The safety of our patients and the general public requires that all healthcare professionals increase vigilance to stem the abuse of these drugs and prevent death and injury. Second, federal authorities are looking carefully at every step of the prescription drug dispensing process, scrutinizing physicians, pharmacists, distributors, manufacturers and even common carriers. Our distributors, regulators and others have encouraged us to work with them to enhance our good-faith dispensing practices.

Are Walgreens pharmacists calling physicians on each and every prescription for a controlled substance?

No. Under our policy, we encourage our pharmacists to exercise their professional judgment when they feel further information is needed in order to satisfy their corresponding responsibility to ensure that each prescription filled is for a legitimate medical purpose (21 C.F.R. 1306.04). Our pharmacists may call physician offices to obtain further information about a patient. Part of that process may include verifying diagnoses or treatment plans as part of the pharmacist's judgment. Under our policy, these are guidelines for our pharmacists, not requirements.

Why are pharmacists asking for diagnoses and treatment plans if pharmacists' only responsibility under DEA regulations is to ensure that a prescription is legitimate?

Pharmacists are not just required to ensure that a prescription for a controlled substance is legitimately written. According to 21 C.F.R. 1306.04, pharmacists are required to ensure that prescriptions for controlled substances are issued for a legitimate medical purpose. The regulation states, in pertinent part, the following:

“The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription. An order purporting to be a prescription issued not in the usual course of professional treatment or in legitimate and authorized research is not a prescription within the meaning and intent of section 309 of the Act (21 U.S.C. 829) and the person knowingly filling such a purported prescription, as well as the person issuing it, shall be subject to the penalties provided for violations of the provisions of law relating to controlled substances. ”

Any time that a Walgreens pharmacist asks for a diagnosis or a treatment plan, that pharmacist is requesting the information to ensure that the prescription for a controlled substance has been prescribed for a legitimate medical purpose.

Can pharmacists ask for patient information protected under HIPAA?

Pharmacies and pharmacists are covered under HIPAA as “healthcare providers,” which includes entities who sell or “dispense a drug, device, equipment or other item in accordance with a prescription.” (45 CFR 160.103 par (3)) Therefore, by law, pharmacists are granted access to protected health information necessary for them to perform their responsibilities. Every prescription on file for our patients is protected health information, which Walgreens has always held as confidential information and protected under federal law (HIPAA). Each and every medical condition or allergy of our patients is similarly held as confidential and used only to ensure the proper dispensing of medications.

Is Walgreens' policy designed to “limit” the quantity of pain medication that can be dispensed to patients?

No. A prescription for a large quantity of narcotics may draw increased scrutiny, but a physician's prescriptions are not denied solely because of the quantity of tablets prescribed.

Similarly, Walgreens does not want to inconvenience our patients by making them go to multiple pharmacies. If one Walgreens pharmacist refuses a specific prescription for an opioid for a patient, that prescription will be refused at all Walgreen pharmacies, as it has been entered in our system as “refused.” Each patient should be given this information to avoid travelling to multiple Walgreens pharmacies in order to fill a prescription.

While Walgreens' policy is not designed to limit our patients' access to needed pain medication, we as healthcare providers must understand that the prescribing and dispensing of opioids is changing and must continue to change in order to stop diversion and unnecessary “accidental” deaths by overdose.

Nationally, wholesalers and distributors are limiting the amount of opioids, which are dispensed to all pharmacies – Walgreens as well as all other pharmacy chains and independents.

Does Walgreens’ new policy “delay” or negatively impact patient care?

We at Walgreens do not wish to delay or negatively impact patient care. In fact, we want just the opposite. Our policy is designed to further the partnership between patients, pharmacists and prescribers. We don’t want to set artificial limits or say “no” to a patient simply because we are near our store’s limit of opioids. Instead, we want our pharmacists to more fully understand why a script is medically legitimate. Our GFD policy is a guideline to help our pharmacists ask the right questions and collaborate with their physician partners and patients.

We at Walgreens believe that opioid abuse and diversion is a national issue of critical importance. We believe our policy takes steps to cure this national epidemic. We know we are not alone in trying to solve this problem and we look forward to working with you in the future to make further strides on this important issue.

We welcome further discussion and thank you for your patience while we implement what we believe is an important policy for the health and safety of our patients.