

August 10, 2011

The Honourable Madeleine Dube
Minister of Health, Government of New Brunswick
Department of Health
PO Box 5100
520 King Street, 6th Floor
Fredericton, New Brunswick
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Dear Minister,

My name is Ryan Kennedy and I am the owner and pharmacy manager of Millidgeville Pharmasave in Saint John. My wife and I returned home in 2008 after spending 8 years in the United States and opened the pharmacy in April of that year. Over the past 3 and ½ years, as a result of the personal and interactive nature of our dispensary, we have formed close relationships with many in our community and have come to play a very important role in the provision of health care in our neighborhood. Furthermore, we have created 7 jobs for local residents including the hiring of 3 individuals who were receiving unemployment benefits from the province. I am writing today to express both my support for finding a solution to the rising drug costs that our province is facing and my concern that failing to address adequate compensation for core dispensing and pharmacy services while rapidly decreasing generic drug prices will have negative consequences for my staff and patients.

Having been following industry news closely over the past couple of years, I have learned that health care costs have come to account for a large portion of the province's spending and that the inflation of prescription drugs has been outpacing the average inflation rate in the country for the past several years. Furthermore, several provinces have adopted generic drug pricing policies in order to help control the rising costs. It is important to note that these provinces have also been addressing the fact that the professional allowances received from the sale of generic drugs have been compensating for core dispensing and other pharmacy services which have been underfunded for years.

Currently, professional allowances are allowing my pharmacy to provide free delivery to our clients that have a hard time getting to the store due to health or financial reasons and free compliance packaging for those who need assistance in taking their medications properly. I have hired a delivery driver to serve our clients and it takes a pharmacy technician up to half an hour to properly prepare a compliance pack for a patient and we currently have 30 patients requiring this service. Furthermore, I offer free blood pressure, diabetes, cholesterol, foot care and smoking cessation clinics to my clients on a regular basis. I have also offered financial support to many organizations and initiatives in the community. In the last year, we have bought new hockey jerseys for the minor hockey association, sponsored local hockey tournaments, bought volleyball shorts for a school team, supported a multiple sclerosis fundraiser, sponsored a veterans publication and a fire prevention publication, supported a police association fundraiser, sponsored big brothers big sisters bowl for kids sake, supported the walk for juvenile diabetes and have donated over \$500 in gift baskets for local silent auctions. The financial

uncertainty that comes without addressing the underfunding of dispensing and services puts all of these initiatives in jeopardy.

However, what concerns me the most is the fact that I am presently spending a great portion of my day helping to provide care to those in the community who do not have a family physician. The telegraph journal reported on July 29th that 10,000 individuals in the greater Saint John area do not have a family physician. The impact of this is being felt at the pharmacy on a daily basis. Several times a day, I have patients presenting with ailments requiring medical attention who no longer have a family physician to contact. I spend several minutes assessing their condition before triaging them to either one of the local emergency rooms or one of the after hour clinics for treatment. I am also dealing with multiple requests per day for patients requiring refills for maintenance medications who no longer have a family physician to prescribe them. It takes several minutes to evaluate the patient and determine whether or not it is appropriate to prescribe the refill under my own name. I presently maintain a level of support staff that allows me to spend an appropriate amount of time with these patients. This level is presently funded by professional allowances as there is no compensation for my time spent triaging and no reimbursement for pharmacist prescribing. The level of care that these underserved individuals will receive is certain to deteriorate further should the underfunding of services not be addressed.

I do believe that the province of New Brunswick can achieve the desired savings from reducing generic drug prices without adversely affecting the province's pharmacies and the communities that they serve. My hope is that the province will continue discussions with NBPA and consider all aspects of the practice of pharmacy and reimburse fairly for the services that pharmacies provide.

Thank you very much for your time and consideration of the content of my letter. I look forward to having the opportunity for further dialogue in the future.

Sincerely,

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