

Alvin Thompkins  
Pharmacist/Owner



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May 9, 2011

Law Amendments Committee  
c/o Gordon Hebb, Q.C.  
Legislative Counsel

P. O. Box 1116  
Halifax, Nova Scotia  
B3J 2X1  
Via Fax: 902-424-0547

RE: BILL NO. 17 – FAIR DRUG PRICING ACT

I am writing to request a delay of Bill No. 17 until a comprehensive solution can be reached that not only provides lower drug costs for patients and taxpayers of Nova Scotia, but also fairly compensates pharmacies and pharmacists for core dispensing services and the expanded scope of practice approved by the province in January 2010 through the Pharmacist Drug Prescribing Regulations.

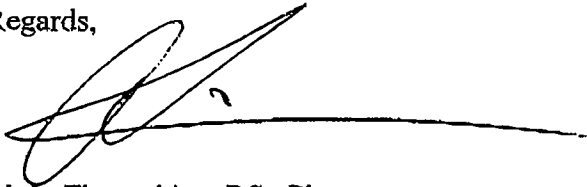
I operate a busy pharmacy in Dartmouth, NS. In an effort to improve access to health care in my community, I recently made the decision and investment to open my pharmacy 24 hours per day, 7 days a week, 365 days per year, with a pharmacist on duty at all times. I have 61 employees in the total store, 19 who are directly involved in patient care in the dispensary. Including myself, I have 9 pharmacists on staff. Providing pharmacy services 24/7 is a costly enterprise, but one that is possible in part by the current reimbursement model. My patients, as well other healthcare providers and the Province's own Healthlink 811 line can rely on access to the knowledge and services of my pharmacy team any time of day or night.

The pharmacy is often the first point of triage before patients decide to proceed to the emergency department after traditional medical clinics are closed. And with the newly introduced enhanced scope of practice, the possibility exists for my pharmacy to be the first stop for treatment of minor ailments day or night, 365 days a year.

Passing Bill No. 17 before negotiating a renewed tariff agreement that fairly compensates core dispensing services or establishing a framework for reimbursement of Pharmacist's enhanced scope of practice will stifle the Government's vision of improved and quicker access to healthcare for Nova Scotians by not fully leveraging the expertise and accessibility of the pharmacist. Without adequate funding of these services, the current \$4 gap for providing core pharmacy services will only grow. To remain viable, I will be forced to reevaluate my business and adjust which existing services I can continue to provide and limit the introduction of new services permitted through an enhanced scope of practice. My pharmacist team will be unable to utilize their newly recognized prescribing authority, and the anticipated benefit to the health of the patients we serve will not be realized. I fear providing 24-hour pharmacy services will no longer be an option.

In closing, while I support the intent of Bill No. 17 to lower drug costs for patients and taxpayers, that support is conditional on a renewed tariff agreement recognizing the true cost of dispensing in combination with a commitment to fully fund expanded pharmacy services.

Regards,

A handwritten signature in black ink, appearing to read 'Alvin Thompkins', with a long horizontal line extending to the right.

Alvin Thompkins, BSc Pharm

CC: Howard Epstein, MLA Halifax-Chebucto  
CC: Andrew Younger, MLA Dartmouth East