

‘IT WILL PUT US OUT OF BUSINESS’



ALLISON BROPHY CHAMPION, CULPEPER STAR-EXPONENT

Pharmacist Travis Hale of Remington Drug Co. says corporate-run Pharmacy Benefit Managers are putting small town pharmacies out of business.

Remington pharmacist fights corporate fees, under-payments

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Culpeper Star-Exponent

REMINGTON — A local pharmacist is joining voices calling for reform and oversight of corporate-run “Pharmacy Benefit Managers” (PBMs) he said are straining the historic small-town pharmacy he runs, located on Main Street since 1913, still with its original soda fountain. Travis Hale, PharmD, president of Apothecary Solutions Inc., doing business as Remington Drug Co., said the payment practices of the prescription drug middlemen are responsible for community

pharmacies closing at an alarming rate.

Those still open, like his in Fauquier County, are operating at tremendous staffing shortages and shortened hours, according to a recent news release from Hale, citing Community Pharmacy Enhanced Services Network, a group of independent community pharmacies of which he is part.

Like the local pharmacist, the network blamed PBMs for the decline in small-town pharmacy shops.

Pharmacies

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Hale said there are already several counties in Virginia without a pharmacy and many with only one, creating pharmacy deserts where people have to drive 30 miles to get medicine. For the Medicaid population, transportation is difficult, Hale said, and gas expensive. A pharmacist for more than 15 years, the Culpeper resident has become an advocate for the cause.

“I am trying to put the message out that these economics are going to lead to access to care issues,” he said. Marked increases in PBM fees has led to staff cuts at Remington Drug Co., Hale said.

“We do a surprising amount of business in this small-town. We are in a very healthy population area, good solid business,” the pharmacist said. “But our (financial) trends are just crazy. It’s crazy to have to lay someone off for the first time ever.”

The power of PBMs, cost impacts

A recent survey of 28 community pharmacies in Virginia found they lost \$19.6 million in revenue over the past five years — due to below cost reimbursements and random fees PBMs impose months after prescriptions have been filled, according to Community Pharmacy Enhanced Services Network. Last year, Remington Pharmacy paid more \$220,000 in these “direct remuneration” fees to PBMs, according to Hale. That’s compared to \$40,000 in 2018.

The largest PBM in the United States is CVS Caremark, owned by CVS Health, according to an article on “PBM Abuses” by the National Community Pharmacists Association. In 2021, three PBMs controlled 80% of the market, including Express Scripts, owned by Cigna, and OptumRx, owned by United Health.

Pharmacy Benefit Managers have a lot of power, including which pharmacies will be included in a prescription drug plan’s network. They decide how much pharmacies will be paid for their services, often incentivizing their own mail order pharmacy, according to the pharmacists association.

PBMs also determine which medications are covered by the health plans and drug manufacturers often pay “rebates” to PBMs to get their drugs on the list.

The Federal Trade Commission is currently investigating the largest PBMs related to their impact on accessibility and affordability of prescription drugs.

The implications for Remington Drug Co. of operating in a world of PBMs means having to make moral decisions on who they can provide medications to, including the most vulnerable — Medicaid patients — where reimbursements are often times underwater, Hale said.

“It’s a population that in general has more needs,” he said. “From a pharmacy standpoint, we are stuck in that moral quandary, we want to care for the community and take care of folks, but we can’t keep our doors open if we do.”

According to CVSHealth.com, CVS Caremark plays a critical role in the health care system by negotiating low net costs for customers while supporting safe and clinically effective products for consumers. The company says it uses “an integrated model to increase access to care, deliver better health outcomes and help lower overall health care costs.”

Education and services, all at a cost

All costs at Remington Drug have increased with inflation



ALLISON BROPHY CHAMPION PHOTOS, CULPEPER STAR-EXPONENT

Debbie Grzech of Remington Drug Co. consults with a customer at the soda counter on a recent afternoon. Grzech has worked at the pharmacy for 19 years.



Customers pick up prescriptions at the local pharmacy, which features the original wood cabinets from when the business first opened in 1913.

while the demand for their services remains high, Hale said. Maintaining adequate staffing is an issue, just like in chain pharmacies, he noted. PBM fees are unknown when processing a prescription, Hale added, as payments are retroactive.

“It’s really impossible to figure out if what you’ve been dispensing is actually a loss or a positive ... we can’t make business decisions. We have to tell people coming for 30 years, ‘I can’t fill your prescription anymore,’ because we’re losing \$100 bucks when we do — that sucks.”

Remington Drug made the decision last spring to not carry popular injectable weight loss drugs anymore due to them being “insanely expensive,” Hale said. Meanwhile, the drugstore is ramping up its CDC-approved diabetic education program for patients.

“We are in the top half of programs in NOVA and we are not even carrying the best diabetic drugs on the market because we can’t afford the hit,” Hale said during a visit to the shop. “I’ve been complaining about this for a long time.”

It’s a direct relation to PBMs and how they make money, the pharmacist said. The fees are the biggest hit, Hale continued, adding it’s a problem when the insurer doesn’t know what the pharmacy is being paid. He described “spread pricing,” when PBMs receive a reimbursement from health plans that’s higher than what they pay to pharmacies, keeping the difference.

“We are underpaid and overfeed to death to the point it will put us out of business.”

Hale said the network of community pharmacists would love for the commonwealth of Virginia to carve out PBMs from Medicaid, a move he claims would create a ton of savings.

A pharmacy is vital to a com-

munity’s health, the pharmacist said, and it’s not that they don’t want to take people’s insurance plans.

“We do take a lot of losses and try to look at the big picture,” Hale said, describing a pharmacy’s importance. Pharmacies provided 60% of COVID vaccines statewide during the pandemic and their workers provided same day delivery to people who can’t get out. They also offer test-and-treat, prescribing medicines on the spot without a doctor’s appointment, Hale said.

Pharmacies are one of the most accessible forms of healthcare, he stated, as primary care practices struggle to meet demand.

“We’re raising the bar for what a pharmacy can do to help take care of the basic stuff, but we are getting run out of business by these PBMs.”

Advocacy and history

The pharmacist is calling for a grassroots effort to reform the system and preserve community pharmacies. Hale has been in conversation with state and federal legislators, community leaders and organizations.

Measures are afoot, led by groups like the National Community Pharmacy Association and Community Pharmacy Enhanced Services Network. He encouraged everyone to contact their legislators about the issue and to file a complaint with the Virginia SCC and the FTC.

“How has your health care or your choice been affected?” he asked. “Behind the scenes, it’s expected for businesses to complain about reimbursements, all health care — nobody is paid enough, but hang on, and really look at what is going on. It’s not right. The playing field is so unlevel. In the pharmacy and medical side, PBMs provide zero benefit.”

In additions to patient impacts of fewer choices and higher costs,

other local drugstores are being impacted, including Dan’s Pharmacy, Orange Pharmacy, Elkton Pharmacy, Greene Pharmacy and Mayson’s Pharmacy, according to Hale.

“We desperately need this grassroots effort to succeed or we’re going to continue to see local pharmacies close their doors.”

Remington Drug Company is the oldest pharmacy in Fauquier County and in the Piedmont, north of the Rapidan River, according to drugstore history.

In 1913, William Walden Ashby opened the pharmacy in a brick building at 207 E. Main St., previously occupied by A.W. Smith’s Dry Goods and Notions. He died of the flu during the pandemic of 1918 which resulted in his brother, Evan, and Dr. George Russell Cottingham taking over the pharmacy, which remained under family ownership until being sold by pharmacist Wilber Heflin in 2015 to Hale and Al Roberts.

“Remington Drug has been a fixture in the community for over a century, providing remedies, recommendations and relief from the hustle & bustle while one sits at the marble soda fountain enjoying a scoop of ice cream or a milkshake,” according to remingtondrug.com.

A family feel

The drugstore bustled with customer activity on a recent autumn day with people constantly entering and exiting with prescription packages. The place features its original wood cabinetry with glass fronts filled with a wide variety of notions, potions, toiletries, vitamins and other drugstore items. The ice cream counter is a real throwback, and functional.

Debbie Grzech has worked at Remington Drug Co. for 19 years and helps oversee decoration of its elaborate holiday windows for all seasons. During COVID, all they did was run around delivering

medicine, she said.

“You got to really know people, I know pretty much everybody that walks in the door. You learn their families, you learn all their difficulties, positive stuff in their life. They share so much with you ... if somebody passes away in the family we send them a sympathy card,” she said.

“I’m a hugger so lots of hugs every day. We have people in hospice, get to know the family members, you bend over backwards.”

The place stays busy, Grzech said, describing a line through the store and the phone constantly ringing as the day progresses. “You need two people up front all the time.”

Some customers can’t afford their medications. An unofficial slush fund people donated to is able to help them out, she said. To a limit.

Hale said it was scary investing in the drugstore eight years ago due to declining business trends.

“We made some big changes, turned it around, we’re busier than ever, but the reimbursements are so bad we have to cherry pick insurance plans,” he said. “We just had our annual phone call with our accountant and it’s tough — our competitors essentially control what we get paid.”

PBMs on the national scene

In Arizona, Attorney General Kris Mayes filed a lawsuit recently against several PBMs and drug manufacturers. The suit alleges they schemed to inflate the price of insulin and other diabetes drugs in violation of the Arizona Consumer Fraud Act. Mayes said in a statement that, for two decades, the price of insulin has increased “many times faster than prices for consumer goods and services.” She said it’s because pharmacy benefit managers and drug companies had a “secretive system of baseless price increases and kickbacks.”

In September, the U.S. Senate Finance Committee introduced the Modernizing and Ensuring PBM Accountability Act. Chairman Ron Wyden, D-Oregon, and Ranking Member Mike Crapo, R-Idaho, stated the package would bring more transparency, accountability and competition to PBM practices, according to a release from the National Community Pharmacists Association.

Congressional members across the aisle have introduced at least a dozen bills so far this year that would address the impact of increasing consolidation among PBMs and lack of transparency into prescription drug access and pricing, according to a report in September from The Hill.

Cynthia Warriner, co-network facilitator for CPESN VA, was asked if legislators are interested in reforming the system, which she said was a loaded question.

Issues can become very partisan and sometimes the actual issue gets swept up, she said.

“I am not sure ‘reform’ would be the proper terminology,” said Warriner, a pharmacist and pharmacist consultant based in Chester. “Legislators will want to save the state money, provide needed services and balance the budget. The insurance industry has a lot of influence on Medicaid policy, but there are also 53 new legislators this year, so not really sure. I do know it is important for legislators to hear from constituents at home that they are representing.”

She encouraged people to contact their delegate and senator and let them know how important local access to needed medication and their community pharmacy is.

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Officials focus on teen drug use

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Culpeper Police say narcotics may have been a contributing factor in the recent death of a local teenager.

The opioid epidemic has not spared Culpeper County, and as the death toll mounts across the country, an influx of fentanyl is making it even more difficult to control. The potent opioid is making its way into counterfeit pills, vape cartridges and even cannabis, according to local authorities. A local mom reached out with a

story about her daughter, who she said overdosed, and survived, while vaping last spring with her friends in a high school bathroom.

“Stay the hell away from it because you don’t know what you are getting,” she said.

“This is me trying to make a change ... for myself and my children and for other people ... it’s terrifying to know you send your children to school and this is in the environment,” she said. “It’s a nationwide problem — this is not Culpeper’s problem, this is everywhere.”

Youth Risk Behavior Report updated, anxiety on rise

According to the woman, her teenage daughter was revived with Narcan, administered by a Sheriff’s Office school resource officer. She feels officials should put more effort and resources into monitoring school bathrooms.

“My goal would be to try to build some kind of platform or outlet to get things changed,” she said. “[It] is not OK to tell a parent whose kid almost died you don’t have the staff to put someone out-

side of every bathroom.”

Last month, the Culpeper County Sheriff’s Office reported another teen girl overdosed at school on fentanyl disguised to look like a Percocet pill.

She was revived with Narcan. Three other high school students were charged with drug dealing in the case. According to local police, fentanyl pills pressed to look like Percocet 30s is a local trend.

Of an estimated 3,000 7th–12th graders surveyed last summer in Culpeper County Public Schools, 16.2% said they had been offered, sold or given an illegal drug on

school property, according to the 2022 Culpeper Youth Risk Behavior Report through University of Virginia Weldon Cooper Center. That’s up from 10.6% in the 2017 survey.

Culpeper County Public Schools Executive Director of Student Services, Dr. Russell Houck said the division’s discipline data supports the finding.

Houck led a discussion on the risk behavior report at a recent meeting of the Health Advisory Board, addressing student

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wellness related to nutrition, physical activity, social well-being, emotional well-being and drug use.

The wellness areas are all related, Houck said.

Many youth risk behaviors increased during the pandemic, the survey showed.

More than 14% of students said they were offered, sold or given illegal drugs outside of school. And 6.6% of students said they took prescription pills without a doctor's prescription or differently than how a doctor told them to use it, according to the survey.

Of students surveyed, 6.3% said someone who lives in their home uses illegal drugs, or excessively uses alcohol or prescription pills.

Nearly 28% of local teens said they had tried vaping and nearly 14% said they currently vape; 14.2% of middle and high school students said they use alcohol and 10.7% use marijuana, according to the Weldon Cooper survey.

Asked if they had ever used cocaine, 1.4% of students responded yes; 1% admitted to using heroin; inhalants 4.3%; methamphetamines 1.1%; ecstasy 1%; and hal-

lucinogenic drugs 3.7%.

Nearly 10% of the CCPS students reported someone in their household had gone to jail for illegal drug use.

Perhaps the most eye-opening finding was that more than 65% of Culpeper middle and high school students reported they experienced extreme anxiety with 48% missing school because of it.

More than 45% said they feel sad or hopeless for two weeks or more at a time, and 23% of students said they had seriously considered suicide.

Open communication, dangers of fentanyl

Culpeper Police early on Wednesday responded to a Birch Drive home on a 911 call for an unresponsive male juvenile. He was declared dead on the scene, according to authorities, who said narcotics appear to be a potential factor in the death.

Culpeper Police Captain Tim Chilton said nothing is worse than responding to the death of a child.

"We have to do better as parents. We have to do better as friends," he stated. "Open lines of communications with these young folks are imperative. Please be concerned

for our young folks—check their rooms, check their cars and listen to your instincts. We are gonna do better I promise you that, but we have to have your help."

According to the local health department, there have been reports from other states where fentanyl was found in a vaping device. Products have also been identified that were laced with high-potency THC and methamphetamines.

The Drug Enforcement Administration last fall advised the public of an alarming emerging trend of colorful "rainbow" fentanyl, a new method used by drug cartels to sell highly addictive and potentially deadly pills made to look like candy to children and young people.

Brightly-colored fentanyl is being seized in multiple forms, including pills, powder, and blocks that resembles sidewalk chalk, according to the DEA. Fentanyl is a synthetic opioid that is 50 times more potent than heroin and 100 times more potent than morphine.

School Health Advisory Board developing strategies

Local community leaders and the public schools are in the process of adopting strategies to re-

spond to the drug crisis, and how it's impacting students. It's also up to parents to be educated about dangerous substances like fentanyl and to know signs of drug use in their child, like Chilton said.

The police captain said they had the go-ahead to bring back the "Hidden in Plain Sight" program that uses a mock teen bedroom to highlight risky behavior.

Last week, community leaders and public school faculty filled the forum at Eastern View High School for a two-hour meeting of the School Health Advisory Board. Among many other topics, student drug use was touched upon, an issue more extensively examined in the 2022 Culpeper Youth Risk Behavior Report that was the focus of the Feb. 9 meeting.

It was a follow up to the October meeting to review highlights of the report as well as to update the school division's 2018 student wellness goals and strategies plan, according to CCPS spokesperson Laura Hoover.

"What's important is this is a community issue that we are trying to improve upon," Houck said.

CCPS has strategies in place to deal with student substance use, Hoover stated in an email leading up to the meeting.

The 2018 student wellness goals and strategies plan includes addressing substance use in students, albeit briefly.

New strategies more thoroughly explore school involvement including curriculum on substance use and abuse, referrals to counselors and community partners for awareness campaigns.

"These wellness strategies are intended to foster partnerships between the schools, law enforcement, local government agencies, nonprofits and private service providers to develop a comprehensive community approach to address the issues," Hoover said in an email.

Culpeper Wellness Foundation gave a grant to update the Culpeper Youth Risk Behavior Report, Houck said.

Some of the results are saddening, he said, and some are shocking.

"But also not unsurprising, if you've been paying attention to what's going on in society, particularly locally," he said.

This is the first in an ongoing series on teen vaping and drug use, community response and impacts.

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Local nurse speaks out on MedExpress RN cuts

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A former registered nurse at Culpeper MedExpress, who is an advocate for the essential profession, is speaking out amid national reports that the urgent care center is eliminating all nursing positions nationwide.

Malynda, who asked that her last name not be used, moved to Culpeper in 2015 with her husband and three children. She attended Chancellor High School in Fredericksburg before graduating nursing school at Germanna Community College at the end of 2019.

Malynda began her nursing career at the Culpeper hospital at the start of a



Malynda

global pandemic. She said she left the hospital for a mental break after working through much of the worst of COVID and went to work at the MedExpress, which opened in 2013 on South Main St.

“It is really busy at MedExpress. We saw anywhere from 80-100 people usually,” she said of her daily load.

Malynda worked for more than a year and a half at the local urgent care center until June when she sensed something was

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A MedExpress Urgent Care opened in Culpeper in 2013. According to nurse.org, the national company plans to eliminate registered nurse positions at locations across the U.S.

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off. She said the nurses felt like they were being pushed out.

“We were told that once an RN quits that another one will not be hired ... I made the decision to look for another job,” Malynda said. “I was sad to feel like I had to leave. I feel like the company chooses profits over patient care every day and I feel like my knowledge and skill set is overlooked.”

Headquartered in West Virginia, MedExpress operates hundreds of locations across the U.S. The company did not address specifics of nursing layoffs at the Culpeper location in a response to a request for information from the Culpeper Star-Exponent. Minnesota-based Optum is the parent company.

MedExpress spokesperson Kristin Anderson, with Optum, provided a statement, also provided to other media outlets, about the reported nursing cuts.

“MedExpress continually assesses and evolves our staffing models to better reflect urgent care industry standards. As always, we will support team members affected with job placement resources and seek to deploy them where possible to any open roles within the company,” Anderson stated.

According to Malynda, RNs are the only ones allowed to give muscular medication, high alert medications, read TB tests and insert IVs at MedExpress.

“They are now depending on the doctors to do these things which they stated they were not happy about,” she said.

Malynda holds an associates of science with a major in nursing and is one class away from her bachelor’s degree. While at MedExpress, she said she wanted to return to bedside care and missed working at the local hospital.

Malynda said is lucky to have gotten hired back at UVA Culpeper Medical Center since leaving the urgent care center. She added she is grateful they had some kind of warning so all the nurses she worked with could find new jobs.

“MedExpress was a great place to work and I will miss all my co-workers there tremendously,” Malynda said.

She previously worked night shift before leaving the hospital.

“Now I’m on day shift. Everyone at the hospital is so welcoming, warm and encouraging that it just felt like coming home,” she said.

More than 3,500 people, including the Culpeper nurse, have signed a Change.org petition, started Aug. 14, asking to “reverse the decision to fire all nurses at MedExpress Urgent Care nationwide.”

“I think nurses play a vital role in any healthcare setting because we are trained to recognize when situations are critical and able to do more within our scope of practice to know what to do in those situations,” Malynda said. “I think they have many smart (medical assistants) that work there, but not all have the same licensing as



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MedExpress Urgent Care opened in 2013 on Main Street in Culpeper.



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Malynda, a registered nurse, starting working at UVA Culpeper Medical Center at the beginning of the COVID-19 pandemic after graduating from Germanna Community College.

each other.”

MedExpress Urgent Care announced plans Aug. 11 to eliminate registered nurse positions at nearly 150 locations across the U.S., according to nurse.org, a top source for nursing news compiled by nurses.

The surprise layoffs are part

of a larger restructuring by the company to revamp staffing models and cut costs, the website reported.

The past two years, the Culpeper nurse has marched alongside thousands of others in her profession in Washington, at the National Nurses March. The an-



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A vaccinated RN, Malynda, of Culpeper, during the pandemic.

nual assembly raises voices for safe patient ratios and to encourage lawmakers to pass laws to keep healthcare workers safe from violent patients or families, Malynda stated.

“The more patients a nurse takes on the higher the risk for error,” Malynda said, commenting on the march. “I think that the only way to be heard is to stand up

for yourself and others who may be afraid to voice their concerns for fear of retaliation.”

The marches are held during National Nurses Week in May, usually on Florence Nightingale’s birthday, she said.

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