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## Comment from Pennsylvania Pharmacists Association

This is a Comment on the **Food and Drug Administration (FDA)**  
Proposed Rule: **Importation of Prescription Drugs**

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### Submitter Information

**Country:**

United States

**State or Province:**

PA

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Patricia Epple

**Category:**

Association - D0003

### Comment

February 25, 2020

[Submitted electronically via <https://www.regulations.gov>]

Stephen M. Hahn, MD  
Commissioner  
Food and Drug Administration  
Department of Health and Human Services  
5630 Fishers Lane, Room 1061  
Rockville, MD 20852

RE: Importation of Prescription Drugs Proposed Rule, Docket No.  
FDA-2019-N-5711

Dear Commissioner Hahn:

Thank you for the opportunity to provide comments on the Food and Drug Administration's proposed rule on importation of prescription drugs on behalf of the Pennsylvania Pharmacists Association. Our organization represents pharmacists across the Commonwealth of Pennsylvania and as such, I have an obligation to help ensure that we provide safe, effective, high quality, and authentic drugs from our members to their patients. The FDA drug approval process and the secure, closed drug distribution system in the United States provide assurances that enable me to fulfill this obligation to my patients. FDA's proposed drug importation program introduces unnecessary risks to patient safety and threatens my ability to optimize medication outcomes working with my patients, as these products are not distributed with the same safeguards as those products distributed in the US. The proposed program is also unlikely to result in a significant reduction in the cost of prescription drugs to the American consumer. I am writing to request that this proposed rule not be finalized.

The proposed importation program jeopardizes patient safety.

The proposed program bypasses important drug supply chain protections that were created to ensure that the drugs we provide to patients are safe. It creates drug supply chain gaps and vulnerabilities

where counterfeits and other unsafe drugs could be introduced. This program would undermine the Drug Supply Chain Security Act (DSCSA), which ensures a closed supply chain to track and trace prescription drugs as they move from manufacturer to distributor to me, the pharmacist. These same safeguards do not exist in Canada. FDA's proposed rule creates a patchwork of interim supply chain measures that introduce gaps and loopholes in the supply chain as drugs are distributed from Canada into the U.S. Pharmacies have invested time and money to put DSCSA systems in place, and the proposed rule creates a disincentive for further investment and compliance, especially for those pharmacies who are already financially constrained. We want to be able to reassure our patients that the drugs they are taking are safe, effective, high quality, and authentic. We cannot do this if there are drugs that are able to bypass DSCSA protective measures.

The proposed importation program is unlikely to produce significant cost savings to American consumers.

High drug costs are a significant problem for American consumers, and we see the negative outcomes of that problem every day. Our members are committed to finding solutions for their patients to ensure they have access to the medications they need, and our association will continue to advocate for changes that we believe will have a real impact on lowering drug prices. FDA's proposed importation program is not a workable solution to lowering drug costs. Most of the highest-cost drugs for American consumers are carved out of the program, such as insulin and other biologics. For the drugs that are included in the proposed program, the additional costs associated with relabeling, testing, complying with the DSCSA workaround, and developing recall and adverse event reporting systems for the imported drugs would outweigh any cost savings realized from purchasing the drugs from Canadian rather than U.S.-based sellers or distributors.

In conclusion, we urge you not to finalize the proposed rule on importation of prescription drugs. The risk to patient safety, combined with the lack of cost savings, makes this proposal an unworkable solution for my patients and for American consumers in general.

Thank you for your time and consideration.

Sincerely,  
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