comments from public #3

Martel, Richard, CTR, OASD(HA)/TMA

From: [redacted]

Sent: Wednesday, November 16, 2005 9:58 AM

To: Martel, Richard, CTR, OASD(HA)/TMA

Subject: RE: Make Your Voice Heard! Speak Out on Your Pharmacy Benefit:

"The BAP is composed of non-governmental organizations and associations that represent the views and interests of a large number of eligible beneficiaries."

These organizations and associations of whom you speak are not my doctor, however are being placed in a position of practicing medicine through policy. Doctors, not HMOs and other organizations should be making the decisions about what medications are best suited to treat patients. I understand that costs considerations may mandate the use of generic replacements when available, but some medications apparently don't have generic substitutes. Asking service members to pay for their medical treatment is fundamentally wrong on so many levels; the entire process should be reconsidered! Regardless, thank you for hearing my rants, [redacted]

-----Original Message-----
From: Martel, Richard, CTR, OASD(HA)/TMA [mailto:Richard.Martel.ctr@tma.osd.mil]
Sent: Monday, November 14, 2005 8:16 AM
To: [redacted]
Subject: RE: Make Your Voice Heard! Speak Out on Your Pharmacy Benefit:

Dear [redacted]

We've received your email and will forward it to the Beneficiary Advisory Panel (BAP) members for their consideration at the next meeting. The BAP is composed of non-governmental organizations and associations that represent the views and interests of a large number of eligible beneficiaries.

The BAP reviews and makes comments to the Director, TRICARE Management Activity (TMA), on recommendations made by the Pharmacy and Therapeutics Committee related to changes to the DOD Uniform Formulary (UF). The Director is required to consider the comments before making his final decision.

The Pharmacy and Therapeutics (P&T) Committee makes recommendations to the director, TMA, based on relative clinical and cost effectiveness of drugs within the same therapeutic class.

Although it is true that several drugs have been moved to the non-formulary status in the last few months, it doesn't mean that everyone needs to pay a higher co-pay. All of the drug classes reviewed by the DOD P&T Committee include formulary alternatives to non-formulary agents. Please consider discussing formulary alternatives with your provider to avoid the higher co-pay. If you choose to stay with non-formulary drugs, they are available at the TRICARE Mail-Order Pharmacy (up to a 90-day supply) and the TRICARE Retail Pharmacy (up to a 30-day supply) for $22.

For more information about the Uniform Formulary and the TRICARE Pharmacy Benefit, please go online to http://ww.tricare.osd.mil/pharmacy.

Thank you for taking the time to let us know your concerns.

DOD Pharmacy Program Office

-----Original Message-----
From: [redacted]
Sent: Wednesday, November 09, 2005 11:18 AM
To: Martel, Richard, CTR, OASD(HA)/TMA

Subject: Re: Make Your Voice Heard! Speak Out on Your Pharmacy Benefit:

I hope this is going to the correct person...I followed the published link.

Not so many years ago when I chose to make the Air Force a career, I was promised health care for my family as well as myself for life. While the "co-pay" requirement for family members doesn't represent a large portion of my income, it does represent a step in the wrong direction. The ability of doctors to affectively treat patients is now being undermined by Tri-Care formulary restrictions that allow the HMO to practice "cheep medicine" through pharmaceutical policy. Seemingly on an almost weekly basis I get news of co-pay increases or additional medications being added to a higher co-pay category by Tri-Care. When coupled with what appears to be a retreat from the retiree and active duty health care business via BRAC, I am concerned for the future of our armed forces and the priorities which have allowed us to descend onto this slippery slope. Thank you for listening to my two cents worth. [redacted]