February 2, 2021

Drug Enforcement Agency Federal Register Representative
Attention: Desk Officer for DOJ
Office of Information and Regulatory Affairs
Office of Management and Budget
Washington, DC 20503

Re: DEA-2020-0035 Partial Filling of Prescriptions for Schedule II Controlled Substances

Dear DEA Federal Register Representative:

The Federation of American Hospitals (FAH) is the national representative for over 1,000 leading tax-paying hospitals and health systems throughout the United States. FAH members provide patients and communities with access to high-quality, affordable care in both urban and rural America. Our members include teaching and non-teaching, acute, inpatient rehabilitation, behavioral health, and long-term care hospitals and provide a wide range of inpatient, ambulatory, post-acute, emergency, children’s, and cancer services.

The FAH appreciates the opportunity to provide comments to the Drug Enforcement Administration (DEA) regarding the Partial Filling of Prescriptions for Schedule II Controlled Substances Proposed Rule with comment published on December 4, 2020. This proposed rule amends DEA regulations in accordance with the Comprehensive Addiction and Recovery Act (CARA) that expand on partial filling of a Schedule II (C-II) prescription. Currently pharmacists can partially fill any prescription for non-controlled substances as well as most Schedule III, IV, and V controlled substances. However, C-II controlled drugs are only permitted as partial fills under three instances. This proposed rule seeks to extend exceptions for partial fills of C-II prescriptions.

This proposed rule would allow a partial fill of a C-II prescription at the request of the patient or prescriber (when not prohibited by State law). The FAH views this expansion of exceptions for partial fills of C-II prescriptions as positive change and agrees that partial fills should occur at the request of the patient or prescriber. **However, the FAH would like to request that the proposal ensure that the prescription for a C-II controlled substance be partially filled at the request of the patient with an accompanying recommendation of the pharmacist as pharmacists are aware of patient tolerance and compliance history.** This would help ensure that patient safety is not compromised.

In addition, the FAH requests further clarity from the DEA on how the pharmacy should record and document partial fills and whether there is a way to send the information of a patient-based request of a partial fill of their C-II prescription back to the provider in an electronic fashion. Finally, many patients
have co-pays, and the FAH requests further clarity on how a partial fill of a C-II should be adjudicated by pharmacies to calculate the patient out-of-pocket costs so as to ensure cost does not create access issues for patients.

Thank you for your consideration. If you have any questions regarding our comments, please do not hesitate to contact me or a member of my staff at (202) 624-1534.

Sincerely,