

not always transfer as easily to LTC settings. HIT while vital and extremely beneficial will be useless in the LTC setting if LTC providers are not consulting in the development of it. In additional the Pharmacy cannot be left holding the price tag for updating LTC facilities when it comes to this technology; there must be a way in which we can encourage these facilities to update their own technology and not depend on the Pharmacy to do it for them. Some of these HIT grants should not only be given to LTC Pharmacies but also the Facilities we service.

With the new Bundling system, the unanswered question here is under the pilot program if one hospital receives a bid will they determine which nursing facilities the individual may use? One of the concerns with Bundling is what if the hospital chooses to use nursing facilities which they own or which are related in some manner to the hospital, will patients have a choice as to which facility they want? If not then the question becomes what will protect those facilities, which are currently in business? Those facilities which are related to the hospital may have the technology which non-related facilities lack and then the question becomes who is to provide the technology, across the board, most Long Term Care Facilities are accustomed to Pharmacies providing all of their equipment needs, fax machines, med carts and so forth. If and when this new technology is implemented there will be a vast problem of who is to provide it and furthermore uniformity. Pharmacies cannot bear the burden of providing this to Facilities, and additionally neither should hospitals.

The establishment of CMI within CMS aims to move the fee payment from fee for service based reimbursement toward a salary-based payment; however, providers are not defined, so do Pharmacies fall into this? Additionally under CMS, there is the Medicare Shared Savings Program, which sets up Accountable Care Organizations—with the development of this new organization the question becomes will pharmacies be a group later determined by the Secretary to be part of this process? If so or if not the question then becomes how will these organizations effect our ability to procure business or which homes may be able to willingly choose us for their pharmacy services? All of these issues are left open and yet to be determined, these are rather important issues; and there are so many unanswered questions and with the possibility of this new fee payment reimbursement, which may affect LTC pharmacies.

Under the Medicare Shared Savings Program, subsection (b) Eligible Accountable Care Organization. The payment would be via shared saving; this section does not list pharmacies but allows the Secretary to determine groups of providers and supplies as appropriate. The big question is would this new program affect how we as a pharmacy obtain new business and in some cases keep current customers? Would this limit which nursing facilities, institutions and so forth can utilize our services?

Due to the fact that the bill does not address these above stated questions, we are left wondering how these new programs will affect the Long Term Care industry, specifically the Pharmacies. While there is some concern about how we will be paid, we are more concerned as to what will happen to us and how these programs affect us. There is a concern that because LTC pharmacies aren't mentioned by name, we may not necessarily fall into one of these programs, and under the guise of cost control our reimbursement fees may be cut; which in turn will create a larger problem for us as how to pay our employees and how to continue to provide the

services that we are do and that the facilities are accustomed to.

Our concern with Individuals at Home Demonstration Program, specifically the payment methods governed by (subsection (c)). The issue is the spending targets, which will be determined on a per capita basis, what does that mean for items covered under Part A and Part B and those cuts? While, we agree that there is wasteful spending and that budget controls are needed, we ask that those cuts to remedy the increase in cost do not affect the Pharmacy. As a pharmacy, there is only so much we can provide while not running at a loss and if the spending targets reduce payments to the pharmacy, there is a chance that the pharmacy will not be able to provide to those who are most vulnerable and need all the care we can give them.

While we at Pharmakon agree that Health Care needs to be reformed, we believe that this current Reform Bill will create more barriers in our ability to provide services to the most vulnerable in our society and in addition as a medium size business with mainly hourly employees, we feel that many of these changes will affect our ability to continue to employ many of our employees and will affect them in their personal choices.

Sincerely,

PHARMAKON LONG TERM  
CARE PHARMACY, INC.  
PHARMAKON  
PHARMACEUTICALS, INC.

#### TERA PROPER

### HON. ED PERLMUTTER

OF COLORADO

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, July 13, 2010*

Mr. PERLMUTTER. Madam Speaker, I rise today to recognize and applaud Tera Proper who has received the Arvada Wheat Ridge Service Ambassadors for Youth award. Tera Proper is a 10th grader at Ralston Valley High School and received this award because her determination and hard work have allowed her to overcome adversities.

The dedication demonstrated by Tera Proper is exemplary of the type of achievement that can be attained with hard work and perseverance. It is essential students at all levels strive to make the most of their education and develop a work ethic which will guide them for the rest of their lives.

I extend my deepest congratulations once again to Tera Proper for winning the Arvada Wheat Ridge Service Ambassadors for Youth award. I have no doubt she will exhibit the same dedication and character to all her future accomplishments.

IN RECOGNITION OF JEFFREY AND  
SUZANNE CITRON

### HON. FRANK PALLONE, JR.

OF NEW JERSEY

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, July 13, 2010*

Mr. PALLONE. Madam Speaker, I rise today to recognize Jeffrey and Suzanne Citron for their immeasurable contributions to their communities, and the subsequent honor they have received from the American Cancer Society (ACS) in appreciation of their efforts. The Citrons are valuable members of my district and

assets to their communities. I would like to congratulate them on being the honored individuals at ACS's Annual Golf Classic 2010.

Jeffrey and Suzanne Citron are married, have two children, Kyra and Noah, and are both extremely successful business leaders and philanthropists. Mr. Citron has always been a visionary entrepreneur, even right out of high school, beginning on Wall Street at the age of 17. He revolutionized financial services in the '90s when he founded the computerized trading system known as Island ECN, allowing traders to cut out the middleman in the stock market. He was the CEO for Datek Online Holdings until 1999, and then became the CEO and founder of the VoIP company, Vonage. Founded in Edison, New Jersey, and now located in Holmdel, Vonage is a publicly traded company on the NYSE as of 2007. Mr. Citron has now retired from Vonage and enjoys spending time with his family.

His wife, Suzanne, is also a vigorous philanthropist. Mrs. Citron herself has been a former member of the ACS' Peer Review Committee for Institutional Research Grants, and has also been on the society's Jersey Shore Region Board of Advisors. Together, the Citrons have founded the Charles Laffite Foundation in 1999, which is dedicated to education, medical research, children, and the arts. Their commitment to their communities and the betterment of it, as well as their entrepreneurial business intellect, is a credit to the state of New Jersey and the nation as a whole.

Madam Speaker, I would once more like to thank Jeffrey and Suzanne Citron for their immeasurable contributions to my district and their communities and to again congratulate them for the honors they have received from the American Cancer Society in this year's Annual Golf Classic.

HONORING DON SHERMAN HUBERT  
VETERANS OF FOREIGN WARS  
POST 345

### HON. THADDEUS G. McCOTTER

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, July 13, 2010*

Mr. McCOTTER. Madam Speaker, today I rise to honor and acknowledge the Don Sherman Hubert Veterans of Foreign Wars Post 345 in Redford Township, Michigan, as they celebrate 80 years of service to our veterans, our community and our country.

Named in recognition of Don Sherman Hubert, a 22-year-old private who served in Company A, 25th Infantry Regiment, 32nd Division, who was killed in action on August 29, 1918, during the assault in Juvigny, France, and became the first Redford Township serviceman killed during World War I. Post 345 has been a part of the Redford community since August 6, 1930. Originally located at Seven Mile Road and Dalby St., the post moved to the Metropolitan Club on Plymouth Rd from 1977–1982, before moving to its current location at Schoolcraft and Inkster Roads.

Upholding the commitment begun in 1899 when veterans of the Spanish-American War and the Philippine Insurrection founded local organizations to secure rights and benefits for returning soldiers, the VFW's national voice has been instrumental in establishing the Veterans' Administration, creating the GI Bill, and