



Expanding Access to Patient Care and Ensuring Pharmacy Continuity of Operations during COVID-19

In addressing the coronavirus (COVID-19) global pandemic, every state has declared a state of emergency, with several more moving to implement executive orders. Further, President Trump declared COVID-19 a national emergency. At the request of many state leaders and partners, the National Association of Chain Drug Stores (NACDS) has developed key considerations for inclusion in state executive orders, proclamations, and/or declarations related to declared emergencies – all of which would benefit access to care for patients and enhance business continuity. Pharmacies are trusted partners in emergencies, working closely with public health partners and others to ensure patients have access to the chronic and preventive care and medications they need.

We urge governors and their state teams to ensure the best patient care experience during COVID-19 and remove needless barriers and restrictions, we offer several recommended priorities for inclusion in state executive orders. We urge governors and their state teams to consider and act upon these recommended priorities to ensure Americans have broad, uninterrupted access to care and medications they need at pharmacy healthcare destinations.

Recommended Priorities: State Executive Orders, Proclamations and/ or Declarations:

Expand Access to Care/Testing: Community Pharmacies as Healthcare Destinations

- To provide community testing to vulnerable populations, allow pharmacists to partner with federal, state, and local authorities to conduct COVID-19 testing.
- To preserve scarce hospital and acute setting resources, expand access to care by allowing pharmacists to initiate treatment for flu, strep, and minor ailments.
- Authorize pharmacists to conduct therapeutic interchange and substitution without authorization of a physician when and if product shortages arise.
- Expand current pharmacist immunization authority (or remove restrictions) to include all CDC/ACIP-recommended and FDA sanctioned vaccines, including the forthcoming novel vaccine for COVID-19 for all ages.
- Eliminate refill prior authorizations by third parties; called Standard Submission Clarification Codes. Third parties are requiring pharmacies to call third-party help desks for overrides, which cause significant delays and major administrative burdens for pharmacy staff.
- Remove/waive proof of delivery requirements for pharmacists (e.g., collect patient signature upon delivery or mailing of a prescription during emergency period).
 - Instead, consider mirroring New York's Medicaid Pharmacy Guidance that allows pharmacy to confirm delivery of medications from sick patients through phone call, text or email, in lieu of a signature.
- Waive mandatory face-to-face patient counseling to minimize infections.

Reimbursement

- Execute infrastructure for pharmacies/pharmacists to receive appropriate coverage and reimbursement for the provision of care services.
- Co-pay waivers for essential, life-sustaining medications (e.g. insulin, among others) are implemented based on specific days supply (i.e. 14-day or 30-day supply). Given instances of drug shortages/rationing, copay

waivers should be implemented regardless of a specific days supply amount, and pharmacies should be reimbursed for the cost of dispensing.

- Waive PBM restrictions on mail delivery by retail pharmacies.
- Eliminate DIR fees for duration of public health situation.

Pharmacy Operations: Credentialing & Workflow

- Authorize pharmacies to temporarily operate in an area not designated by permit.
- Authorize implementation of central fill operations to facilitate patient access to prescription medications.
- Allow pharmacists and pharmacy technicians with valid licenses to operate across states other than where their license was issued to provide services.
- Authorize pharmacists and pharmacy staff to conduct routine pharmacy tasks remotely as necessary (i.e. prescription data entry and script verification), including outside state efforts to ensure business continuity. Authorize additional expanded authority for pharmacy staff:
 - Allow pharmacy technicians to transfer prescriptions, excluding controlled substances.
 - Allow pharmacy technicians to accept and document the refusal of patient counseling.
 - Allow technician product verification (TPV) otherwise known as tech-check-tech.
- Designate pharmacists and pharmacy staff delivering prescription medications to be considered essential personnel during periods of enforced travel restrictions.
- Allow remote prescription verification by licensed pharmacies in instances where a store cannot be staffed by a pharmacist, especially in rural health areas.
- Ability to fill 90-day prescriptions for maintenance medications that currently do not allow pharmacist conversion.
- Ability to dispense early refills and emergency refills for maintenance medications.
- Waive pharmacy technician ratios.
- Allow pharmacies to continue operating by providing a reasonable grace period for pharmacy personnel shifts (e.g. keep pharmacy open when pharmacist is on the way, but not on the premises).
- Enforce grace period for pharmacy staff to renew CPR certification and/or renew their licenses.

Drug Shortages

- Waive any and all requirements to facilitate the transportation of any essential medication within and among states to address spot shortages or product shortages.
- Waive FDA restriction on compounding pharmacies to only ship out of state 5% of their overall prescription volume.