

Pharmacy Working Group Call

Tuesday, September 26, 2017, 12 pm PT/3 pm ET

1. Introductions

- 32 attendees from various organizations including Veterans Affairs, Grady Hospital in Atlanta, Georgia, Washington State University, Hawaii Department of Health, Walgreens, NASTAD, Temple University and Hepatitis Education Project

2. Update on Pharmacist Vaccination Laws – Cason Schmit, Texas A&M University

- Prior to coming to Texas A&M, Cason was at CDC in a public health law program, looking at the role of law as a social determinant of health. Law is meant to affect behavior and can sometimes have intended and unintended negative and positive results. They looked at how the effects of law can be measured.
- Cason and his team investigated changes in pharmacist vaccination authority over time and focused on 2 types of legal authority 1. Statutes 2. Regulation. They looked at these laws from 2016 all the way back to sometimes 1970s, as far back as they could go.
 - Pharmacist vaccination authority in practice is fairly new. Some laws from the 1970s are similar to laws still in effect today used to support pharmacist vaccination authority.
- lawatlas.org interactive dataset visualization <http://lawatlas.org/datasets/pharmacist-vaccination>
- descriptive publication [http://www.iapha.org/article/S1544-3191\(17\)30779-3/fulltext](http://www.iapha.org/article/S1544-3191(17)30779-3/fulltext) (This dataset is downloadable).
- Pharmacist vaccination authority laws have different attributes. There's a segment of the law due to practice requirements that must be in place prior to vaccination (reporting requirements, being a state-certified immunizer, having malpractice insurance, etc.) These practice requirements don't describe what a pharmacist can do in their practice.
- There are 3 categories of legal attributes that define scope of pharmacist vaccine authority
 1. Pharmacy authorization types - do they need a third party to administer a vaccine or do they have prescriptive authority? Can a third party authorization cover multiple patients? States are adopting or changing laws so pharmacists can do vaccinations with less oversight.
 2. Vaccine limitations - Some laws will list what pharmacists can administer, states are adding more and more vaccines to this list. Some states reference CDC recommendations, clever way that state's statutes stay consistent with current recommendations from CDC. States are generally wanting to include more vaccines.
 3. Patient age restrictions – Some states have an age limit that they apply universally, some states make age restriction patient-specific. Some states don't have age restrictions. We are seeing that age restrictions are getting lower and lower. Cason sees a trend of more pharmacists having prescriptive authority with less physician oversight.
- Barriers to pharmacists giving vaccines

- Plenty of states don't include all recommended vaccines in their restrictions.
 - Lots of states have high patient age restrictions.
3. Hepatitis Elimination Projects and Pharmacy Engagement - Kathleen Moreo, President and CEO, PRIME Education
- Kathleen has been involved with managed care pharmacists for 15 years.
 - PRIME Education provides education in HCV elimination. They're a 24-year-old medical information company, a CE provider, systems-based care and community based care. They do transformative work and research education projects.
 - Current work funded through medical education grants – co-supported by Gilead and AbbVie
 - 10/26 national webinar with Harm Reduction Coalition, will be providing results of substance abuse program. Register at www.primeinc.org/hcv This project involved 25 substance abuse centers and covered HCV risk, how to get tested, and what do with positives. Project data was exciting. This is a CE program but transformative in nature, they try to produce change. The webinar is free and multi-credited for healthcare providers.
 - 642 patients involved in these 25 clinics, all received education with clinic providers. Of those, 40% pledged they'd get HCV testing. 151 were screened and referred for HCV treatment.
 - Also, there's an on-demand accredited video program on strategies for healthcare professionals to do culturally appropriate HCV care.
 - Live symposium on 10/17 in Dallas, TX at the Academy of Managed Care Pharmacy conference. Michelle Martin (NVHR Pharmacy Working Group member) will present with Jorge Mera (Director of Infectious Diseases for Cherokee Nation Health Service). Attendance at AMCP conference is required to attend symposium.
 - Michelle Martin will also present a poster at American Association for the Study of Liver Diseases (AASLD) on HCV elimination through CE efforts.
 - PRIME Education has also been working on board certification for addiction specialists. HCV awareness, screening and treatment protocols should be a part of required board certification knowledge as clinicians are recertified. As of July 1, anyone that's ASAM certified will have HCV knowledge too.
 - Wraparound project in FQHCs throughout the US. empowering them to reach out to their own communities by providing simple social media kits and outreach materials. The material informs the community that the FQHCs are a HCV resource for testing and care.
4. Upcoming Conferences and Opportunities to Meet/Collaborate
- There's a list of conferences within the Working Group's Google group for reference. Check [here](#) and insert your name for conferences you'll be attending or to add other conferences.
 - There is a group roster available [here](#). Please update it with your organization information.
 - [International Conference on Viral Hepatitis - Chicago](#)
 - [AASLD - Washington, DC](#)

5. Updates

- American College of Physicians formed a Hep C Patient Advisory Committee. Patient facts and a guide will go out to all ACP members. An interdisciplinary group created this, including one pharmacist, David Koren, clinical pharmacist from Temple University.
- Oct. 7 - Vietnamese Medical Association will be running a CE activity. 4 speakers (3 are from, UCSD School of Pharmacy) will be discussing a community based model for HCV screening. Binh Tran will send link to Tina.

6. Discussion

- Are any pharmacists on this call part of hepatitis elimination projects? Are there any funding sources for screening?
 - Check out your local American Liver Foundation, they a good resource. Bob Gish (Pharmacy Working Group member) works with them and he can help.
- State bills for pharmacist scope of practice: State executive for TN ran the same language they ran in WA in TN. Language to include pharmacists on medical side of network for billing.
- Asian Pacific Health Foundation, participated with the American Liver Foundation in a legal wellness event in San Diego last weekend. There's a CME event on November 12th where Bob Gish will be speaking.
- Efforts in other states for state level coverage for provider status
 - New York - still strategizing for next legislative session
 - Hawaii - small group of people looking at it for their next legislative session
 - NVHR is happy to collect any best practices so other states can use them who are exploring this.
- Legal action in Indiana, Illinois and Michigan working on taking away all barriers to HCV treatment access
- New Mexico recently expanded HCV treatment access to anyone with chronic HCV. There is no sobriety requirement or specialist requirement.
- NVHR has partnered with Harvard Law School to create a final report: Hepatitis C: The State of Medicaid Access. It will be launched at AASLD, Tina will share more information at a later date.
- No restrictions on Medicaid in Washington. If denied AbbVie's Mavyret, you can submit an appeal and their PAP can get it free with no income requirements. Letter of medical necessity assistance listed on their website.

7. Next Call

- Will be late November or early December
- Contact Tina if you have materials or project updates to share