



6 Point Plan for Empowering Pharmacists in Response to COVID-19

In the coming weeks, New York's already overburdened healthcare system may reach its breaking point responding to COVID-19 as the number of potential cases could greatly outpace capacity in our hospitals, urgent care clinics, and community healthcare facilities.

As our most accessible healthcare providers, New York's community pharmacists have stepped up to meet this challenge, putting the well-being of their patients and communities ahead of their own health and that of their businesses. This includes implementing measures to accommodate elderly and immunocompromised patients, waiving delivery fees, extending store hours and maximizing staffing.

While we commend our leaders in state and local government for their around-the-clock efforts to keep our state safe, immediate action to fully mobilize pharmacists will substantially enhance New York's response to COVID-19 by expanding capacity and easing the burden on other parts of our healthcare system.

In this spirit we present the 6 Point Plan for Empowering Pharmacists, which will activate thousands of highly trained and educated healthcare professionals, and reinforce New York State and county health departments, health-systems and individual practitioners during the COVID-19 crisis.

- 1. Test:** Pharmacists must be authorized to administer CLIA waived, Point of Care tests to patients for COVID-19 (when available) as well as other conditions like the flu and strep to ease the burden on emergency rooms, urgent care facilities and doctors' offices. Pharmacists currently are not permitted to do administer these tests.
- 2. Vaccinate:** Pharmacists must be authorized to administer all CDC approved vaccines. While a vaccine for COVID-19 is not currently available, preparation should begin to ensure an adequate distribution infrastructure is in place as soon as one is approved.
- 3. Refill Discretion:** Pharmacists must be given discretion to dispense early refills for patients who are chronically ill, and to dispense emergency 30-day prescription refills even if there are no authorized refills remaining on maintenance prescriptions to reduce outreach to clinics and doctors' offices. This will ensure patients have access to essential medication and eliminate additional outings to the pharmacy, as well as free up resources at doctors' offices and clinics to deal with sick patients.
- 4. Limit the Spread:** Restrictions on delivering medication directly to patients' homes (including requirements for patient signature or other delivery verification requirements) that limit pharmacists' abilities to provide curbside delivery or other alternative delivery methods to minimize contact with sick patients must be waived.
- 5. Address Drug Shortages:** Pharmacists must be allowed to compound commercially available prescriptions if there are drug shortages and PBMs must be required to pay for compounds. There may be disruptions in the supply chain or increased demand for certain medications.
- 6. Reform PBMs:** Pharmacies routinely lose money on the prescriptions they dispense due to abusive practices by prescription drug middlemen known as pharmacy benefit managers (PBMs). An overwhelming level of pharmacies in New York have been forced to reduce store hours and lay off employees due to PBMs, and more than 2,000 pharmacies nationwide have closed in the last year alone. It is critical that common-sense PBM regulations are enacted NOW as part of the 2021 New York State Budget, so that pharmacies are freed from PBM obstacles and fully powered to respond to COVID-19.