

# Open Hearing on 2021 Proposed Policy Statements

Joey Mattingly  
Speaker of the House, APhA House of Delegates

Micah Cost  
Chair, 2020-21 APhA Policy Committee

# Webinar Information

- Dial-in and use access code and audio pin on your control panel to limit audio issues and background noise during the webinar
- Submit your comments/questions during the webinar using the chat box on your control panel or email [HOD@aphanet.org](mailto:HOD@aphanet.org)
- Select “raise hand” button to request to speak and you will be recognized by the moderator as time permits
- Note: all comments/questions received will be considered by the Policy Reference Committee
- This webinar is being recorded for future access on the House of Delegates webpage, [www.pharmacist.com/apha-house-delegates](http://www.pharmacist.com/apha-house-delegates)

# Webinar Information

- Webinar scheduled for 60 minutes
  - 10 minutes for overview
  - 20 minutes per topic
  - 10 minutes for questions/general information
- Moderators will clarify issues, but will not engage in debate

# Policy Committee

**Micah Cost, Chair**  
Nashville, TN

**Jenny Arnold**  
Sammamish, WA

**Andrea Brookhart**  
Milford, OH

**Renaë Chesnut**  
Johnston, IA

**Erin Fox**  
Salt Lake City, UT

**Christopher Harlow**  
Prospect, KY

**Zachary Hitchcock**  
Springfield, MO

**Mary Klein**  
Abilene, TX

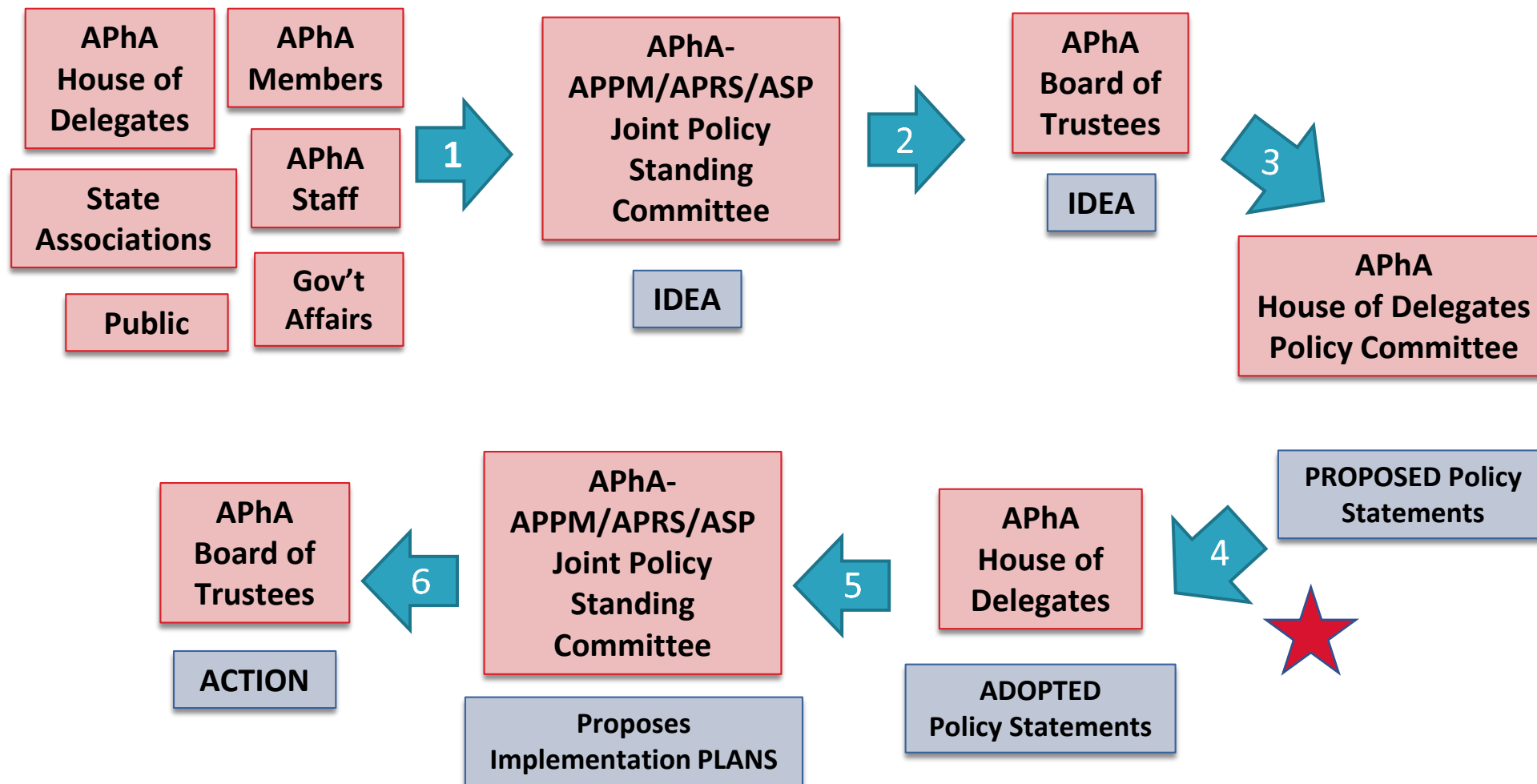
**Rawan Latif**  
Hubert, NC

**Monet Stanford**  
Washington, DC

**Tamara McCants**  
Washington, DC

# Policy Process Roadmap

*Transforming Ideas into Action*



# Current Policy Information

## Policy Manual

- Online searchable database:
  - <http://www.pharmacist.com/policy-manual>
- Online PDF version:
  - [https://media.pharmacist.com/hod/APhA\\_Policy\\_and\\_Procedures\\_2018.pdf](https://media.pharmacist.com/hod/APhA_Policy_and_Procedures_2018.pdf)

# 2021 Policy Topics

Multi-State Practice of Pharmacy

Continuity of Care and the Role of Pharmacists During  
Public Health and Other Emergencies

# Multi-State Practice of Pharmacy



# Multi-State Practice of Pharmacy

## (8 statements)

1. APhA affirms that pharmacists are trained to provide patient care and have the ability to address patient needs, regardless of geographic location.

[Refer to Summary of Discussion Items 5]

2. APhA advocates for the continued development of uniform laws and regulations that facilitate pharmacists, student pharmacists, and pharmacy technicians' timely ability to practice in multiple states to meet practice, and patient care needs.

[Refer to Summary of Discussion Items 6 and 7]

3. APhA supports individual pharmacists' and student pharmacists' authority to provide patient care services across state lines whether in person or remotely utilizing appropriate telecommunication or other telehealth technologies in accordance with harmonized state pharmacy practice acts and regulations.

[Refer to Summary of Discussion Items 8,9,10,11,12, and 13]

# Multi-State Practice of Pharmacy

(8 statements)

4. APhA supports consistent and efficient centralized processes across all states for obtaining and maintaining pharmacist, pharmacy intern, or pharmacy technician licensure and/or registration.

[Refer to Summary of Discussion Items 14,15,16,17,18,19,20,21, and 22]

5. APhA urges state boards of pharmacy to reduce administratively and financially burdensome requirements for licensure while continuing to uphold patient safety.

[Refer to Summary of Discussion Items 21,22,23,24,25,26,27 and 28]

6. APhA encourages the evaluation of current law exam requirements for obtaining and maintaining initial state licensure, as well as licensure in additional states, to enhance uniformity and reduce duplicative requirements.

[Refer to Summary of Discussion Items 29 and 30]

# Multi-State Practice of Pharmacy

(8 statements)

7. APhA urges state boards of pharmacy to involve a member of the board of pharmacy and a practicing pharmacist in the review and updating of state jurisprudence licensing exam questions.

[Refer to Summary of Discussion Items 31]

8. APhA calls for development of profession-wide consensus on licensing requirements for pharmacists and pharmacy personnel to support contemporary pharmacy practice.

[Refer to Summary of Discussion Items 32]

# Related Existing Policy

- **2017, 2012** *Contemporary Pharmacy Practice*
- **2004, 1991** *Updating of State Pharmacy Practice Acts*

# Multi-State Practice of Pharmacy

**Time for Discussion**

# Multi-State Practice of Pharmacy

1. APhA affirms that pharmacists are trained to provide patient care and have the ability to address patient needs, regardless of geographic location.
2. APhA advocates for the continued development of uniform laws and regulations that facilitate pharmacists, student pharmacists, and pharmacy technicians' timely ability to practice in multiple states to meet practice and patient care needs.
3. APhA supports individual pharmacists' and student pharmacists' authority to provide patient care services across state lines, whether in person or remotely utilizing appropriate telecommunication or other telehealth technologies in accordance with harmonized state pharmacy practice acts and regulations.
4. APhA supports consistent and efficient centralized processes across all states for obtaining and maintaining pharmacist, pharmacy intern, or pharmacy technician licensure and/or registration.
5. APhA urges state boards of pharmacy to reduce administratively and financially burdensome requirements for licensure while continuing to uphold patient safety.
6. APhA encourages the evaluation of current law exam requirements for obtaining and maintaining initial state licensure, as well as licensure in additional states, to enhance uniformity and reduce duplicative requirements.
7. APhA urges state boards of pharmacy to involve a member of the board of pharmacy and a practicing pharmacist in the review and updating of state jurisprudence licensing exam questions.
8. APhA calls for development of profession-wide consensus on licensing requirements for pharmacists and pharmacy personnel to support contemporary pharmacy practice.

# Continuity of Care and the Role of Pharmacists During Public Health and Other Emergencies

# Continuity of Care

(9 statements)

1. APhA asserts pharmacists, student pharmacists, pharmacy technicians, and pharmacy support staff are essential members of the healthcare team and should be actively engaged and supported in surveillance, mitigation, preparedness, planning, response, recovery, and countermeasure activities related to public health and other emergencies.

[Refer to Summary of Discussion Items 6 and 7]

2. APhA reaffirms the 2016 policy on the Role of the Pharmacist in National Defense and calls for the active and coordinated engagement of all pharmacists in public health and other emergency planning and response activities.

[Refer to Summary of Discussion Items 8,9, and 10]



# Continuity of Care

(9 statements)

3. APhA advocates for the timely removal of regulatory restrictions, practice limitations, and financial barriers during public health and other emergencies to meet immediate patient care needs.

[Refer to Summary of Discussion Items 11]

4. APhA urges regulatory bodies to recognize pharmacists' training and ability to evaluate patient needs, provide care, and appropriately refer patients during public health and other emergencies.

[Refer to Summary of Discussion Items 12 and 13]

# Continuity of Care

(9 statements)

5. APhA advocates for pharmacists' authority to ensure patient access to care through the dispensing, prescribing, and administering of medications, as well as provision of other patient care services during times of public health and other emergencies.

[Refer to Summary of Discussion Item 14,15,16 and 17]

6. APhA calls for fair and equitable processes to ensure access and availability to all pharmacies and pharmacist patient care services during public health and other emergencies.

[Refer to Summary of Discussion Item 18]

# Continuity of Care

(9 statements)

7. APhA calls on public and private payers to establish and implement payment policies that compensate pharmacists providing patient care services, including during public health and other emergencies, within their recognized authority.

[Refer to Summary of Discussion Items 19]

8. APhA advocates for the inclusion of pharmacists as essential members in the development and implementation of alternate care sites or delivery models during public health and other emergencies.

[Refer to Summary of Discussion Item 20]

# Continuity of Care

(9 statements)

9. APhA reaffirms the 2015 Interoperability of Communications Among Health Care Providers to Improve Quality of Care and encourages pharmacists, as members of the healthcare team, to communicate care decisions made during public health and other emergencies with other members of the healthcare team to ensure continuity of care.

[Refer to Summary of Discussion Item 13]

# Related Existing Policy

- **2016,2011,2002,1963** *Role of the Pharmacist in National Defense*
- **2015** *Disaster Preparedness*
- **2011,2002,1996** *Health Mobilization*
- **2005,2002** *Emergency Preparedness*
- **1979** *Dispensing and/or Administration of Legend Drugs in Emergency Situations*
- **2014** *Use of Social Media*
- **2011** *The Role and Contributions of the Pharmacist in Public Health*
- **2007** *Pharmacy Personnel Immunization Rates*
- **2007** *WHO Policy on Infectious Diseases*

# Continuity of Care and the Role of Pharmacists During Public Health and Other Emergencies

**Time for Discussion**

# Continuity of Care

(9 statements)

1. APhA asserts pharmacists, student pharmacists, pharmacy technicians, and pharmacy support staff are essential members of the healthcare team and should be actively engaged and supported in surveillance, mitigation, preparedness, planning, response, recovery, and countermeasure activities related to public health and other emergencies.
2. APhA reaffirms the 2016 policy on the Role of the Pharmacist in National Defense and calls for the active and coordinated engagement of all pharmacists in public health and other emergency planning and response activities.
3. APhA advocates for the timely removal of regulatory restrictions, practice limitations, and financial barriers during public health and other emergencies to meet immediate patient care needs.
4. APhA urges regulatory bodies to recognize pharmacists' training and ability to evaluate patient needs, provide care, and appropriately refer patients during public health and other emergencies.
5. APhA advocates for pharmacists' authority to ensure patient access to care through the dispensing, prescribing, and administering of medications, as well as provision of other patient care services during times of public health and other emergencies.
6. APhA calls for fair and equitable processes to ensure access and availability to all pharmacies and pharmacist patient care services during public health and other emergencies.
7. APhA calls on public and private payers to establish and implement payment policies that compensate pharmacists providing patient care services, including during public health and other emergencies, within their recognized authority.
8. APhA advocates for the inclusion of pharmacists as essential members in the development and implementation of alternate care sites or delivery models during public health and other emergencies.
9. APhA reaffirms the 2015 Interoperability of Communications Among Health Care Providers to Improve Quality of Care policy and encourages pharmacists, as members of the healthcare team, to communicate care decisions made during public health and other emergencies with other members of the healthcare team to ensure continuity of care.

# General Discussion

Multi-State Practice of Pharmacy

Continuity of Care and the Role of Pharmacists During Public Health and Other Emergencies



# House Keeping

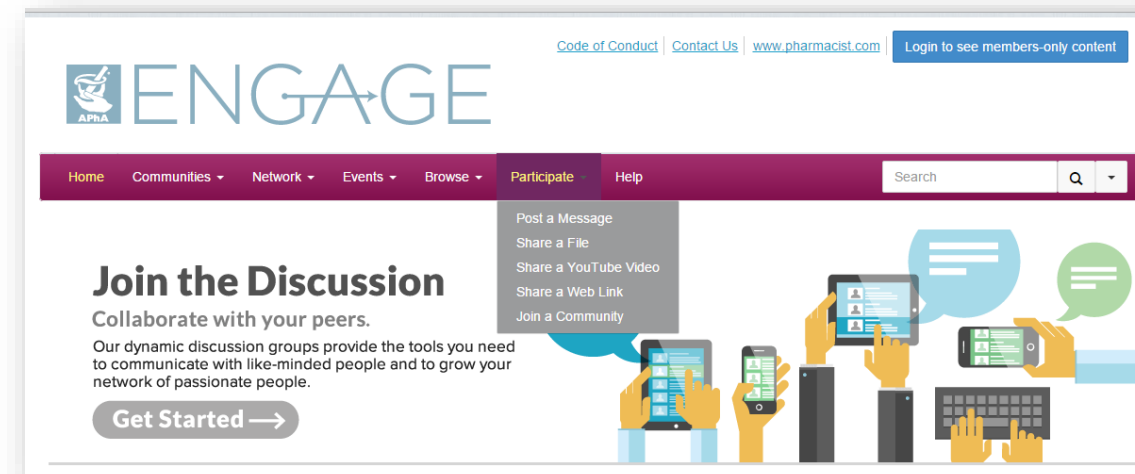
- New Business Items are due **February 10, 2021**
- House Committee reports available at [www.pharmacist.com/apha-house-delegates](http://www.pharmacist.com/apha-house-delegates)
- Contact your state association or recognized national organization to secure your Delegate seat
  - All Delegate materials will be sent **electronically** this year
  - *A limited number* of Delegate books will be available onsite
- **Policy Review Committee Webinars**
  - January 27, 12:00-1:00pm (ET)**
  - February 3 , 6:00 – 7:00pm (ET)**
- **New Business Item Webinars**
  - February 24, 3:00 – 4:30pm (ET)**
  - March 3, 6:00 – 7:30pm (ET)**

# Continue the Conversation

## Visit APhA Engage

APhA Engage makes joining the conversation easy!

1. Visit [engage.pharmacist.com](http://engage.pharmacist.com)
2. Login using your APhA username and password
3. Click “Participate” then “Join a Community”
4. Find the HOD community
5. Click “Join” and follow the prompts on your screen



# 2021 House of Delegates

## **Additional Open Hearing Sessions**

Friday, March 12 – Sunday, March 14

Times are still being finalized

## **Virtual House of Delegates Session**

Monday, March 15, 1:00 to 4:00pm ET

# Ideas for Future Policy Topics

- Are there topics we should consider for the 2022 House of Delegates?
  - These are topics needing more development than through the new business process
  - Tell us now or send to [HOD@aphanet.org](mailto:HOD@aphanet.org)

# Open Hearing on 2021 Proposed Policy Statements

Thank you for your time and attention!

[www.pharmacist.com/apha-house-delegates](http://www.pharmacist.com/apha-house-delegates)

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