



August 20, 2018

Priscilla Parrilla
Vendor Drug Program
Texas Health and Human Services

By Email: Priscilla.Parrilla@hhsc.state.tx.us

Dear Ms. Parrilla:

We are collectively writing to the Texas Health and Humans Services' Vendor Drug Program to **strongly encourage the agency to open formulary access to the flu vaccine for patients ages 7 and older so flu vaccines may be administered by a pharmacist and billed to the prescription benefit, without going through the Vaccines for Children (VFC) program.** As you are aware, there are barriers to pharmacy participation in the VFC program, which hinders patient access to flu vaccines. Open formulary access will improve patient access and save Texas money by eliminating the barriers posed by VFC to pharmacy participation.

The need for broader patient access to flu vaccines in Texas is readily apparent. Texas is a high utilizer of Tamiflu, indicating the need for improved flu vaccination rates in Texas. To emphasize this point, during the 2017-2018 influenza season, Texas experienced a higher rate of influenza compared to previous years in Texas. In 2018, Medicaid paid \$63.598M for Tamiflu across 296,275 Texas members. Based on these statistics, it is likely that 80.1% of these members (237,316 members) did not receive an influenza vaccine in 2017. At \$30 per influenza vaccine, **it would have cost Texas Medicaid \$7.1M to vaccinate 100% of these members at a pharmacy, instead of paying over \$63 million for Tamiflu.**ⁱ

Texas pharmacists are well-trained and well-positioned as a critical access point for patients ages 7 and older to receive flu vaccines. **Pharmacists are highly educated, trusted, and easily accessible healthcare professionals** who provide patients with important patient care services, including immunization services. In fact, the majority of states explicitly permit pharmacists to perform vaccine administration or otherwise recognize pharmacists' ability to provide this service to patients. Most importantly, pharmacists are trained and experienced in immunization administration techniques and practices.

Along with having the training and expertise necessary to administer immunizations, pharmacists serve as critical access points for patient immunizations. As immunizers, **pharmacists have been shown to increase overall vaccine rates.** In a Washington State pilot study, when eight community pharmacies were allowed to identify patients with vaccine needs and to act on that information, the number of vaccines administered increased by 41.4% in a 6-month period.ⁱⁱ Pharmacists also complement other healthcare professional efforts to increase vaccine rates by reaching populations less likely to be seen by clinicians, especially those who are medically underserved. The Centers for Disease Control and Prevention (CDC) **reports that individuals**

whose last physician’s visit for a routine checkup was at least one year ago were more likely to receive vaccinations in a nonmedical setting, such as a pharmacy, than those whose last physician’s visit for a routine checkup was more recent (53.5% vs 38.8%).ⁱⁱⁱ

Community pharmacies offer a convenient option for the public to obtain their vaccines. The convenience factor appeals to the public and has led to increased vaccination rates for adults and adolescents. According to the PrescribeWellness 2017 Vaccination and Preventive Care Survey, the majority of Americans prefer visiting their local pharmacy to get recommended vaccines, as opposed to visiting the doctor's office. Of the 62% of survey respondents who chose their pharmacy over their practitioner, most of the reasons hinged upon convenience. As many as 26% stated their pharmacy is a “one-stop shop” for many health and wellness needs. Another 24% reported their local pharmacy is easier to get to than the doctor’s office while 21% suggested their local pharmacy is more convenient than visiting a doctor’s office when they have the kids with them. Moreover, study results “illustrate the access and convenience that community pharmacies provide for the typical working-age population (aged 18-49 years), allowing the working population to use convenient times outside of respective work hours to be vaccinated may thus increase vaccination rates and improve productivity.”^{iv}

For more than 20 years, Texas pharmacists have been safely administering flu vaccinations. In 2009, the Legislature lowered the minimum patient age to 7 and older for pharmacists to administer influenza. Due to the regulations and barriers of the Vaccine for Children, children covered by the program have less access than their peers – a contrary outcome to the intended purpose of VFC. We appreciate your attention to this issue, welcome any questions, and look forward to participating in a revised flu vaccine program with improved patient access.

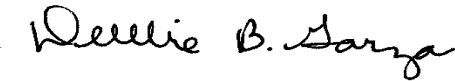
Signed:



Mary Staples
Director, State Government Affairs
National Association of Chain Drug Stores



Audra L. Conwell, CAE
Executive Director/CEO
Alliance of Independent Pharmacists



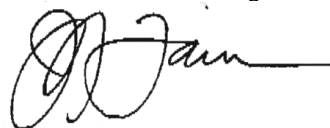
Debbie Garza, R.Ph.
Chief Executive Officer
Texas Pharmacy Association



Bradford T. Shields
Texas Federation of Drug Stores



Michael Wright
Executive Director
Texas Pharmacy Business Council



J.D. Fain, President
Texas Independent Pharmacies Association

ⁱ Population data extracted from Kaiser Family Foundation. Tamiflu data extracted from 2017 CMS prescription drug state utilization data set. Analysis by Texas Children’s Health Plan Pharmacy Benefit Manager, Navitus.

ⁱⁱ Blum B.M., Brock K.A., Hamstra S., Tonrey L. (2018), “Evaluation of the Impact of an Innovative Immunization Practice Model Designed to Improve Population Health: Results of the Project IMPACT Immunizations Pilot,” *Population Health Management*, 21(1), February.

ⁱⁱⁱ Centers for Disease Control and Prevention. Place of influenza vaccination among adults—United States, 2010-11 influenza season. *MMWR Morb Mortal Wkly Rep.* 2011;60(23):781-785.

^{iv} Goad JA, Taitel MS, Fensterheim LE, Cannon AE. Vaccinations Administered During Off-Clinic Hours at a National Community Pharmacy: Implications for Increasing Patient Access and Convenience. *Annals of Family Medicine.* 2013;11(5): 429-436.