



NATIONAL ASSOCIATION OF
CHAIN DRUG STORES

August 5, 2020

Mr. James Hansen, RPh, President
Colorado Department of Regulatory Agencies
Board of Pharmacy
1560 Broadway, Suite 1350
Denver, CO, 80202

RE: Support for Proposed Pharmacy Board Rules for Access to HIV Prevention Medications

Dear Mr. Hansen and Members of the Board:

On behalf of our members operating more than 600 pharmacy locations in Colorado that employ more than 70,000 people in the state, the National Association of Chain Drug Stores (NACDS) greatly appreciates the opportunity to comment on the Colorado Board of Pharmacy's (the "Board") proposed rules for recently enacted House Bill 20-1061. First and foremost, NACDS applauds the state of Colorado for tremendous efforts in identifying opportunities to modernize and reform the current practice of pharmacy to secure more value, drive innovation, and provide cost-effective healthcare services to improve the health and well-being of Colorado residents.

Upon review of the proposed changes to the Board Rules, NACDS supports the proposed new Appendix C, with minor modifications, to implement Colorado House Bill 20-1061— as it recognizes pharmacists' value in playing an increased role in providing patient care services and to expand pharmacy practice to exemplify as such. To further enhance the delivery of healthcare, NACDS recommends broader, less prescriptive language which creates the appropriate environment for pharmacists to use their training and expertise to provide accessible and convenient patient care throughout Colorado.

NACDS represents traditional drug stores, supermarkets and mass merchants with pharmacies. Chains operate over 40,000 pharmacies, and NACDS' over 80 chain member companies include regional chains, with a minimum of four stores, and national companies. Nationally, chains employ nearly 3 million individuals, including 157,000 pharmacists. They fill over 3 billion prescriptions yearly, and help patients use medicines correctly and safely, while offering innovative services that improve patient health and healthcare affordability. NACDS members also include more than 900 supplier partners and over 70 international members representing 21 countries. Please visit nacds.org.

Pharmacist HIV Prevention Training Program:

NACDS supports the inclusion of pharmacists training in the Board's proposed rule; however, employers should maintain flexibility to develop their own training should they choose. Employers should have the ability to determine the program appropriate for their employees whether developed internally or by another entity. Additionally, NACDS requests the Board to remove the restrictive requirement for ACPE-accredited training programs from the proposed rules. NACDS recommends allowing pharmacists to complete a 1-hour training program, consisting of topics required by statute, which may be developed or determined appropriate by the employer, as sufficient training to properly prepare pharmacists to provide HIV prevention services. With numerous variations of workflow and different expectations between pharmacies, employers are in the best position to tailor the program to their employees' needs.

Proposed NACDS Modification (edit in red text):

5. Complete a one-hour training program ~~accredited by the Accreditation Council for Pharmacy Education, or its successor entity,~~ pursuant to the protocol (in compliance with Board Rule 17.00.50 b.2.)

Records and Documentation Requirements:

For documentation purposes, NACDS urges the Board to remove administratively burdensome requirements that prevent pharmacists from focusing on providing quality care. Specifically, NACDS requests the Board to allow pharmacists to document the delivery of HIV prevention services within the pharmacy system and available to share upon patient request. Requiring pharmacists to maintain separate patient medical records is administratively burdensome as employers ensure that pharmacists have the appropriate workflow and platform to document patient care interventions. As long as pharmacists can retrieve the appropriate documentation and records in a timely fashion, no additional requirements should be enforced.

Additionally, NACDS requests the Board to develop a comprehensive list of primary care providers for pharmacies to distribute to patients who do not have a provider. Given the constant changes in providers available within communities, the Board is in the best position with appropriate resources to identify primary care providers located throughout the state and maintain such information. Pharmacies will share this information with patients appropriately; however, requiring pharmacists to develop and maintain such a document would be administratively burdensome. NACDS has proposed the following modifications for the proposed rules as well as where applicable within the statewide protocols:

Proposed NACDS Modification (edit in red text):

Records:

- a. Pursuant to Pharmacy Board Rule 17.00.50, a process shall be in place for the pharmacist to ~~communicate with the patient's primary care provider and document changes to the patient's medical record. If the patient does not have a primary care provider, or is unable to provide contact information for his or her primary care provider, the pharmacist shall~~ provide the patient with a written record of the drugs or devices furnished, and lab test(s) ordered, and any test results upon patient request.

Documentation: (incorporate for each mention within protocol)

- The pharmacist will provide the patient with a written record of the drugs or devices furnished, and lab test(s) ordered, and any test results upon patient request ~~notify the patient's primary care provider of a record of~~ all medications prescribed. If a patient does not have a primary care provider, the pharmacist will provide the patient with a list of providers and clinics, developed by the Board of Pharmacy, for which they may seek ongoing care.

NACDS recognizes the amazing work conducted by the Colorado Board of Pharmacy thus far in expanding access to care for Coloradoans via community pharmacies. Successful implementation of pharmacy practice rules related to the provision of HIV prevention services will empower pharmacies across the state to better care for their patients given evolving healthcare needs. NACDS strongly urges the Board to take this opportunity, along with NACDS' minor modifications, to modernize and broaden the practice of pharmacy for the betterment of their residents. We greatly appreciate the consideration of our recommendations for the proposed new Appendix C. We welcome the opportunity for further discussion; for any questions, please contact NACDS' Mary Staples at mstaples@nacds.org or 817-442-1155.

Sincerely,

A handwritten signature in black ink, appearing to read "Steven C. Anderson". The signature is fluid and cursive, with a large initial "S" and "A".

Steven C. Anderson, FASAE, CAE, IOM
President and Chief Executive Officer

CC:

Patricia A, Evacko, PharmD, Vice President
Laura Holladay Rang, RPh
Wesley Hunter, RPh

Casey Frank, JD, MPH
Kristen Wolf, PharmD, BCSCP
Brian C. Gonzales, MSW, LCSW, LAC