

Monday, June 1, 2020

Dr. Slaoui and General Perna Operation Warp Speed U.S. Department of Health and Human Services 200 Independence Avenue SW Washington, DC 20201

Via email: Dr. Slaoui and General Perna CC: Dr. Redfield, Dr. Cohn, Dr. Messonnier, and Dr. Wharton

RE: Accelerate Distribution of COVID-19 Vaccines to Americans through Community Pharmacies

Dear Dr. Slaoui and General Perna,

On behalf of the National Association of Chain Drug Stores (NACDS), we appreciate the Trump Administration's leadership to prioritize pandemic vaccine planning and stand up Operation Warp Speed as a public-private partnership to facilitate the development, manufacturing, and distribution of COVID-19 countermeasures at an unprecedented pace. This letter offers insight into how the chain pharmacy industry is a critical asset and partner in distributing and administering federally purchased pandemic vaccine to hundreds of millions of Americans in a timely manner.

NACDS represents traditional drug stores, supermarkets and mass merchants with pharmacies. Chains operate nearly 40,000 pharmacies, and NACDS' 80 chain member companies include regional chains, with a minimum of four stores, and national companies. Chains employ nearly 3 million individuals, including 155,000 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.

For more than a decade since the 2009 H1N1 pandemic, government planning to distribute and administer federally purchased pandemic vaccine to the American public rapidly, efficiently, and safely has included modeling that heavily draws on the strength of chain pharmacies, pharmacists, and private sector distribution channels. About one in three adults (38 million) who received the influenza vaccine in 2018-2019 did so at their community pharmacy, administered by their pharmacist. Americans appreciate the opportunity to receive their vaccinations at pharmacies, and with more than 60,000 community pharmacies nationwide – in which nearly 90% of all Americans live within 5 miles of a pharmacy – pharmacies stand ready to support Operation Warp Speed's efforts to safely and efficiently bring the COVID-19 vaccine to the American public.

Modeling Data: The Nation Needs Pharmacy to Efficiently Distribute Vaccine. The federal government and other stakeholders have conducted extensive pandemic vaccine modeling and have quantified the value of pharmacy's

contributions.^{1,2,3,4,5} One pivotal study indicated that community pharmacies can mitigate against 23.7 million pandemic symptomatic cases, yielding a cost savings of nearly \$100 billion.⁶ Additionally, the model illustrated that by extending pharmacy hours, the nation could make an even greater impact. Another study led by the federal government demonstrated that weekly national vaccine administration capacity increased to 25 million doses per week when retail pharmacist vaccination capacity was included in the model. Importantly, the study also established that *time to achieve 80% vaccination coverage nationally was reduced by seven weeks when community pharmacies were included* in vaccination distribution and administration, assuming high public demand for vaccination.⁷ To further support these efforts, many community pharmacies can also deploy mobile vaccine pharmacies is lower cost for patients and the U.S. health system. In the Department of Defense's (DoD's) final rule expanding the authority of retail pharmacies to provide vaccinations, the DoD estimated saving more than \$1.8 million by vaccinating at pharmacies rather than through the medical benefit in the first 6 months.⁸

The Pharmacy Model Has Been Tested in a Prior Pandemic. For a brief 3-month period during the 2009 H1N1 pandemic response, the federal government leveraged the strength of 10 of the largest chain pharmacies in America to distribute 5.5 million doses of federally purchased pandemic vaccine to more than 10,700 retail stores nationwide. This initiative accounted for 23% of all vaccine distributed during the same time period. This initiative leveraged the strength of the private sector's distribution channels – used every day and during an emergency – to swiftly ensure the vaccine reached Americans who needed it. In order to reap the benefits of efficiency derived by the models discussed above, leveraging existing systems are needed to distribute hundreds of millions of doses of vaccine. For more than a decade, the federal government has been convening states and pharmacies to prepare for the next pandemic, leverage these lessons learned, and build on this existing infrastructure for distributing and administering federally purchased federal pandemic vaccine.

Conclusion

NACDS remains steadfast in its commitment to supporting the Administration's COVID-19 response and recovery efforts to ensure the health of communities nationwide. The chain pharmacy industry stands ready to support Operation Warp Speed's vaccine distribution planning efforts, and we would like to schedule a conference call in June to discuss these issues in greater depth.

We appreciate your leadership and dedication to ensuring swift vaccination distribution and uptake throughout the country.

Sincerely,

Steven C. Anderson, FASAE, CAE, IOM President and Chief Executive Officer National Association of Chain Drug Stores

- ⁵ Ying Liu, Albert A Gayle, Annelies Wilder-Smith, Joacim Rocklöv. Journal of Travel Medicine. March 2020. <u>https://academic.oup.com/jtm/article/27/2/taaa021/5735319</u> ⁵ Bartsch SM et al. Epidemiologic and economic impact of pharmacies as vaccination locations during an influenza epidemic. Vaccine. November 2018. <u>https://www.ncbi.nlm.nih.gov/pubmed/30340884</u>
- ⁷ Schwerzmann J, Graitcer SB, Jester B, Krahl D, Jernigan D, Bridges CB, Miller J. Evaluating the Impact of Pharmacies on Pandemic Influenza Vaccine
- Administration. Disaster Med Public Health Prep. 2017 Oct;11(5):587-593. https://www.ncbi.nlm.nih.gov/pubmed/28219461 ⁸ Federal Register, Vol. 76, No. 134, p. 41064

¹ Chowell G, Miller M, Viboud C. Seasonal influenza in the United States, France, and Australia: Transmission and prospects for control. Epidemiology and Infection. July 2007. <u>https://www.ncbi.nlm.nih.gov/pubmed/17634159</u> ² Aronson JK, Brassey J, Mahtani KR. Oxford University Center for Evidence Based Medicine. April 2020. <u>https://www.cebm.net/covid-19/when-will-it-be-over-an-introduction-to-viral-reproduction-numbers-r0-and-re/.</u> ³ del Rio C, Malani PN. COVID-19—New Insights on a Rapidly Changing Epidemic. JAMA. February 2020. <u>https://jamanetwork.com/journals/jama/fullarticle/2762510</u>

⁴ Sanche S, Lin YT, Xu C, Romero-Severson E, Hengartner N, Ke R. High contagiousness and rapid spread of severe acute respiratory syndrome coronavirus 2. Emerg Infect Dis. 2020. <u>https://wwwnc.cdc.gov/eid/article/26/7/20-0282 article</u>