



NATIONAL ASSOCIATION OF
CHAIN DRUG STORES

Statement

Of

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For

United States Senate
Committee on Finance

On

“COVID-19 Health Care Flexibilities: Perspectives, Experiences,
and Lessons Learned”

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Introduction

The National Association of Chain Drug Stores (NACDS) appreciates the opportunity to submit a statement for the record for the Senate Finance Committee’s hearing, *COVID-19 Health Care Flexibilities: Perspectives, Experiences, and Lessons Learned*. NACDS represents nearly 40,000 pharmacies (traditional drug stores, supermarkets and mass merchants with four or more pharmacies) who employ nearly 3 million individuals, including pharmacists and pharmacy technicians, among others.

NACDS commends the Committee’s work to build better health by considering flexibilities granted during the Public Health Emergency. The nation called on pharmacies to deliver COVID-19 testing, vaccination, and other critical preventive care services to communities during the pandemic. Pharmacies seamlessly rose to the challenge, in large part due to more than a decade of pandemic preparedness and collaborative planning. Importantly, the COVID-19 flexibilities granted to pharmacies were instrumental in driving better health and fostering equity across communities. In reviewing lessons learned with an eye toward the future, these flexibilities should be made permanent to foster sustained and equitable access to pharmacy care.

I. A Decade of Pharmacy Preparedness Significantly Strengthened the Nation’s COVID Response

Pharmacies have spent the last decade building upon lessons learned from the 2009 H1N1 pandemic, including piloting pharmacy vaccination strategies. These planning efforts across industry and government paved the way for pharmacy’s central position in the nation’s COVID-19 response.

Consider these highlights demonstrating how this preparedness translated into results for communities across America:

- **Vaccination:** Building on years of pandemic planning and exercises, the Federal Retail Pharmacy Program (FRPP) was established to leverage pharmacy’s strengths for public benefit:
 - Americans can conveniently get COVID-19 vaccines at 40,000 pharmacies nationally thanks to the FRPP, leveraging 21 national pharmacy chains and independent pharmacy networks.¹
 - More than 40% of these sites are already in zip codes with high social vulnerability – a Centers for Disease Control and Prevention (CDC) index identifying communities needing more care.²
 - In March, a fraction of these pharmacies provided over 5 million vaccinations in just 4 days.³ And, recent data show that of all FRPP vaccination doses 46% have been administered to people of color.⁴
- **Testing:** Pharmacies ramped up across states establishing more than 6,000 live testing sites that processed nearly 10 million samples under a public-private partnership with the Department of

¹ <https://www.cdc.gov/vaccines/covid-19/retail-pharmacy-program/index.html>

² <https://www.whitehouse.gov/briefing-room/statements-releases/2021/03/29/fact-sheet-president-biden-announces-90-of-the-adult-u-s-population-will-be-eligible-for-vaccination-and-90-will-have-a-vaccination-site-within-5-miles-of-home-by-april-19/>

³ <https://www.politico.com/news/2021/03/29/covid-vaccine-sites-478233>

⁴ President Biden Meets Virtually with a Bipartisan Group of Governors. Remarks by Dr. Nunez-Smith. May 11, 2021. <https://www.youtube.com/watch?v=e-8oTbbPA94>

Health and Human Services (HHS).⁵

- Nearly three-quarters of these sites serve areas with moderate to high-social vulnerability.⁶

- **Everyday Care:** Beyond providing COVID-19 vaccinations and testing, pharmacies kept their doors open throughout the pandemic, offering needed preventive care, dispensing critical medications, administering routine and catch-up vaccinations to adults and children, and providing patients with education and referrals.

II. Critical Flexibilities Paved Way for Expanded Access to COVID-19 Care at Pharmacies

The significant contributions made by pharmacies in supporting their communities throughout the COVID-19 pandemic were largely made possible by flexibilities granted during the Public Health Emergency. Specifically, federal actions taken under the PREP Act^{7,8,9} leveraged pharmacies to provide enhanced public access to COVID-19 testing, COVID-19 vaccines, and routine and catchup vaccines for those 3-18 years old. Such actions, along with Congress requiring health insurers to cover COVID-19 testing and vaccination costs without out-of-pocket expenses,¹⁰ were monumental. Collectively, these actions unleashed pharmacy teams from onerous and unnecessary federal and state barriers that have historically prohibited them from providing such services to populations more broadly. These actions also removed cost barriers for patients.

Briefly, a high-level overview of flexibilities that were instrumental for expanding access to care at pharmacies include:

- **COVID-19 Testing at Community Pharmacies:** Critical actions taken by Congress, HHS, and the Centers for Medicare & Medicaid Services (CMS) abolished barriers in a stepwise manner to accelerate availability of pharmacy-based COVID-19 testing locations. Effectively, this helped spearhead efforts to break down barriers to pharmacy-based testing across many states and expand community access to the clinical expertise of pharmacies.
 - Through multiple actions under the PREP Act, HHS authorized pharmacists to order and administer COVID-19 tests, and to leverage pharmacy technicians for COVID-19 testing.^{11,12} HHS further clarified that federal guidance under the PREP Act preempts any state or local restrictions.¹³ Additionally, CMS released guidance supporting pharmacy enrollment in Medicare as CLIA labs¹⁴ and limiting cost sharing for COVID-19 testing.

⁵ By the Numbers – Coronavirus Pandemic Whole-of-America Response. March 8, 2021.

https://content.govdelivery.com/attachments/USDHSFEMA/2021/03/09/file_attachments/1717220/By%20the%20Numbers.COVID.FINAL.Mar.%208.2021.pdf

⁶ <https://www.hhs.gov/about/news/2021/01/07/hhs-continues-community-based-testing-sites-covid-19.html>

⁷ U.S. Department of Health and Human Services, August 2020, available at [HHS Expands Access to Childhood Vaccines during COVID-19 Pandemic](https://www.hhs.gov/about/news/2020/08/04/hhs-expands-access-to-childhood-vaccines-during-covid-19-pandemic).

⁸ U.S. Department of Health and Human Services, October 2020, available at [Advisory Opinion 20-03 on the Public Readiness and Emergency Preparedness Act and the Secretary's Declaration under the Act](https://www.hhs.gov/about/news/2020/10/01/secretary-clarifies-public-readiness-and-emergency-preparedness-act).

⁹ U.S. Department of Health and Human Services. (December 2020). Fourth Amendment to the Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID-19 and Republication of the Declaration, available at <https://www.phe.gov/Preparedness/legal/prepact/Pages/4-PREP-Act.aspx>.

¹⁰ <https://www.healthaffairs.org/doi/10.1377/hblog20200326.765600/full/>

¹¹ Guidance for Licensed Pharmacists, COVID-19 Testing, and Immunity under the PREP Act. (April 2020)

<https://www.phe.gov/Preparedness/legal/prepact/Documents/pharmacist-guidance-COVID19-PREP-Act.pdf>

¹² U.S. Department of Health & Human Services Office of the Assistant Secretary for Health October 20, 2020 Guidance for PREP Act Coverage for Qualified Pharmacy Technicians and State-Authorized Pharmacy Interns for Childhood Vaccines, COVID-19 Vaccines, and COVID-19 Testing. <https://www.hhs.gov/sites/default/files/prep-act-guidance.pdf>

¹³ <https://www.hhs.gov/guidance/sites/default/files/hhs-guidance-documents/advisory-opinion-20-02-hhs-ogc-prep-act.pdf>

¹⁴ See Section 6003 of the Families First Coronavirus Response Act and Section 3713 of the CARES Act

- **COVID-19 Vaccinations & Routine Childhood Vaccinations at Pharmacies:** Similar to testing, the federal government took critical actions to clear the pathway for vaccinations at pharmacies throughout the pandemic. Doing so removed barriers that otherwise would have greatly limited the pharmacy team’s ability to serve the public.
 - In addition to expanding access to COVID-19 vaccination, HHS aimed to improve childhood vaccination rates – hindered by stay-at-home orders and a decline in provider office visits. This was accomplished by expanding the ability for the pharmacy team (pharmacists, pharmacy interns, and pharmacy technicians) to provide immunizations to children more comprehensively across states.¹⁵ This action was further clarified and reaffirmed by the agency.^{16,17}
 - Specifically, these actions authorized:
 - Pharmacists to order and administer, and appropriate pharmacy staff to administer, Advisory Committee on Immunization Practices (ACIP)-recommended childhood vaccines for persons 3-18 years old; and Food and Drug Administration (FDA)-authorized or FDA-licensed COVID-19 vaccinations to persons ages 3 and older.¹⁸

These government actions supporting pharmacy-based immunization and COVID-19 testing have been paramount in helping smooth the complex and erratic nature of state-by-state rules and regulations. The existing patchwork outside of temporary flexibilities can create significant patient access barriers, especially in states that have yet to modernize their statutory limits. While not all barriers have been abolished, pharmacies have leveraged these flexibilities effectively to operationalize broader delivery of care services.

III. Recommended Permanent Changes to Drive Health & Foster Equity Beyond the COVID-19 Pandemic

Communities have long relied on pharmacies to deliver quality care to all populations, including the high-risk and socially vulnerable.^{19,20} Through the COVID-19 response, the nation has built an infrastructure that allows Americans to benefit from quality, accessible, and equitable pharmacy care services. As we shift to COVID-19 becoming endemic and a return toward a focus on routine care services, communities ought to maintain their access to pharmacy care. And, as we look ahead to the next pandemic, tremendous opportunities exist to transform these flexibilities from temporary to permanent, preventing duplicative efforts in the future. **NACDS urges Congress to retain and build on the existing flexibilities to**

¹⁵ U.S. Department of Health and Human Services. (August 2020). [HHS Expands Access to Childhood Vaccines during COVID-19 Pandemic.](#)

¹⁶ U.S. Department of Health and Human Services. (October 2020). [Advisory Opinion 20-03 on the Public Readiness and Emergency Preparedness Act and the Secretary's Declaration under the Act.](#)

¹⁷ U.S. Department of Health and Human Services. (December 2020). Fourth Amendment to the Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID–19 and Republication of the Declaration. <https://www.phe.gov/Preparedness/legal/prepact/Pages/4-PREP-Act.aspx>

¹⁸ <https://www.hhs.gov/sites/default/files/third-amendment-declaration.pdf>

<https://www.hhs.gov/sites/default/files/licensed-pharmacists-and-pharmacy-interns-regarding-covid-19-vaccines-immunity.pdf>

<https://www.hhs.gov/sites/default/files/prep-act-guidance.pdf>

¹⁹ Gaskins RE. Innovating Medicaid: the North Carolina Experience, NC Med J. 2017, available at <https://www.ncbi.nlm.nih.gov/pubmed/28115558>.

²⁰ Berenbrok LA, Gabriel N, Coley KC, Hernandez I., Evaluation of Frequency of Encounters With Primary Care Physicians vs Visits to Community Pharmacies Among Medicare Beneficiaries, JAMA Netw Open. 2020;3(7):e209132, available at doi:10.1001/jamanetworkopen.2020.9132.

implement *permanent pharmacy authority and payment mechanisms*. Doing so would help Americans continue reaping the benefits of care services at pharmacies they know and trust into the future.

Conclusion

As we look beyond the COVID-19 pandemic, pharmacies will continue to be important care destinations for patients. Health equity will rightfully remain a driving force in healthcare moving forward with care destinations, like pharmacies, meeting patients where they are. Further, mental health and substance abuse likely will emerge as lasting behavioral health impacts of the pandemic. We raise these forward leaning issues to say that pharmacies have experience providing destigmatizing care and routinely provide for patients essential screenings, counseling, treatment, and linkage to care. Oftentimes, pharmacies are the entry point for patients into the healthcare system, further underscoring their value on a patient's healthcare team. As the COVID-19 response shifts into recovery, pharmacies continue to serve their communities on the frontlines to meet their evolving healthcare needs.

NACDS thanks the committee for the opportunity to offer our support for your tremendous work. We implore you to build on these lessons learned by transforming temporary flexibilities into ***permanent pharmacy authority and payment mechanisms*** to support the health and wellness of Americans beyond the pandemic. We welcome the opportunity to discuss these issues further. Please reach out to NACDS' Chris Krese, Senior Vice President of Congressional Relations and Communications at CKrese@NACDS.org or 703-837-4650.