Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Meeting #2

Shelly Spiro, Co-Chair

Hans Buitendijk, Co-Chair

June 28, 2023

Call to Order/Roll Call

Mike Berry, Designated Federal Officer, ONC

Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Roster

Name	Organization	Name	Organization
Hans Buitendijk* (Co-Chair)	**Oracle Health**	**Shelly Spiro (Co-Chair)**	Pharmacy HIT Collaborative
Pooja Babbrah	Point-of-Care Partners	Deven McGraw*	Invitae Corporation
Chris Blackley	Prescryptive	Ketan Mehta	Micro Merchant Systems
Shila Blend*	North Dakota Health Information Network	Justin Neal	Noble Health Services
David Butler	Curatro, LLC	Eliel Oliveira*	Dell Medical School, University of Texas at Austin
Steven Eichner*	Texas Department of State Health Services	Naresh Sundar Rajan*	CyncHealth
Rajesh Godavarthi*	MCG Health, part of the Hearst Health network	Scott Robertson	Bear Health Tech Consulting
Adi V. Gundlapalli**	Center for Disease Control and Prevention	Alexis Snyder*	Individual
Jim Jirjis*	HCA Healthcare	Fillipe Southerland*	Yardi Systems, Inc.
Summerpal Kahlon	Rocket Health Care	Christian Tadrus	Community Pharmacy Owner
Steven Lane*	Health Gorilla	Sheryl Turney*	Elevance Health
Meg Marshall**	Department of Veterans Health Affairs	Afton Wagner	Walgreens
Anna McCollister*	Individual		

* HITAC Member   ** HITAC Federal Representative

Agenda

10:30 AM   **Call to Order/Roll Call**

- Mike Berry, Designated Federal Officer, ONC

10:35 AM   **Opening Remarks**

- Shelly Spiro, Co-Chair

- Hans Buitendijk, Co-Chair

10:40 AM   **SHORT-TERM Public Health, Emergency Use Authorizations, and Prescribing Authorities**

- RDML (retired) Pamela Schweitzer, Assistant Surgeon General and 10th Chief Pharmacist USPHS

- Lisa Schwartz, Senior Director, Professional Affairs, National Community Pharmacists Association (NCPA)

- Darren Townzen, Senior Director Health and Wellness Billing and Reconciliation, Walmart

- Chad Worz, Executive Director and CEO, American Society of Consultant Pharmacists (ASCP)

- Michael Popovich, CEO and Jason Briscoe, Director of Pharmacy Operations, STC Health

11:05 AM   **Discussion**

- Shelly Spiro, Co-Chair

- Hans Buitendijk, Co-Chair

11:50 AM   **Public Comment**

- Mike Berry, Designated Federal Officer, ONC

11:55 AM   **Task Force Work Planning**

- Shelly Spiro, Co-Chair

- Hans Buitendijk, Co-Chair

12:00 PM   **Adjourn**

Opening Remarks

Shelly Spiro, Co-Chair

Hans Buitendijk, Co-Chair

Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Charge

Overarching charge: Identify recommendations to support interoperability between pharmacy constituents, and the exchange of information necessary for medication management, patient safety and consumer engagement.

Recommendations Due: November 9, 2023

Specific charge:

1. Public Health, Emergency Use Authorizations, and Prescribing Authorities

2. Identify opportunities and recommendations to improve interoperability between pharmacy constituents (prescribers, pharmacists, pharmacy benefit managers, dispensers, payers, intermediaries, PDMPs, public health agencies, HIEs, third party service providers, consumers, etc.) for pharmacy-based clinical services and care coordination.

3. Identify standards needs to support prescribing and management of emerging therapies including, but not limited to specialty medications, digital therapeutics, and gene therapies.

4. Identify policy and technology needs and considerations for direct-to-consumer medication services.

Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Discussion

TOPIC 1 (for discussion June 21 and June 28):

1. Public Health, Emergency Use Authorizations, and Prescribing Authorities

Short-term

    a.   Identify critical standards and data needs for pharmacists and interested parties to participate in emergency use interventions.

    b.   Are there actions ONC can take to enable data exchange in support of public health emergency use cases? For example, Test to Treat and COVID-19 treatment prescribing?

(FYI: The following will be discussed at meetings 3 and 4)
Long-term

    a. Recommendations to better integrate pharmacy systems and data for public health surveillance, reporting and public health interventions.

SHORT-TERM Public Health, Emergency Use Authorizations, and Prescribing Authorities

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Community-based pharmacy practice needs interoperability

Testimony to:

HITAC Task Force on Pharmacy Interoperability and Emerging Therapeutics

Lisa Schwartz, PharmD, RPh, CPC-A
Senior Director, Professional Affairs

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Health information exchange improves each step in the Pharmacists' Patient Care Process*

- **Collect** – HIE is preferred for obtaining health data such as medication history and lab reports

- **Assess** – standardized data can be used by automated processes to suggest medication-related problems

- **Plan** – thousands of pharmacies in the CPESN® USA clinically integrated network use the Pharmacist eCare Plan**

- **Implement** – exchange of a care plan promotes patient-centered care, includes a reconciled med list for the patient and other providers, public health reporting, e-prescriptions, remote patient monitoring

- **Follow-up: Monitor & Evaluate** – electronic referral, lab orders, consultation notes, questionnaires, IIS report/query

Collect

Assess

Plan

Implement

Follow-up: Monitor and Evaluate

Collaborate • Communicate • Document

Patient-Centered Care

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Case study

JJ, a 52-year-old female, came to the community pharmacy inquiring about its test and treat program after 2 days of mild symptoms typical of COVID-19. The pharmacist reviewed JJ's medication list and after a short interview, a SARS-CoV-2 antigen test resulted positive; Paxlovid was indicated. JJ was unsure of her history of renal or liver disease.

Using HIE the pharmacist was able to look at the patient's renal function. Patient GFR was 65. The pharmacist's access to labs allowed her to help JJ start treatment promptly.

72 hours later, the pharmacist called JJ and learned she felt much better and accepted the recommendation to schedule an appointment for a booster.

Interoperability for test to treat

- **COLLECT**
  - Medication list
  - Labs: renal and hepatic function; COVID-19 test
- **ASSESS**
  - Treatment indicated, drug-drug interaction, RPh EUA conditions
- **PLAN**
  - Treatment plan, self-monitoring plan, refer for dose adjustment, refer for other treatment, refer for immediate medical care
- **IMPLEMENT**
  - Write Rx, dispense Rx, report COVID-19 test result
- **MONITOR & EVALUATE**
  - Drug side effects; refer to PCP, ER when needed; query IIS

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Darren Townzen, Walmart

Short Term - Challenges

o What is in pharmacy today?

    o Real-time adjudication/Drug Utilization Review

o What was experienced with the last PHE?

    o Billing complexities that could be distracting from patient care

    o Reduced or no visibility to other vaccine administrations

o What was done?

    o Adaptation – NCPDP Emergency Preparedness Task Group

Short Term – Lessons learned

- What did we learn?
  - It's not all about pharmacy
  - The downside of not being inside the healthcare's data continuum
  - The need to consume and utilize new data elements such as lab results for test to treat

- What needs to be done?
  - Rethinking pharmacy practice management systems to incorporate interoperability to other systems and providers
  - Operationalizing the process into workflow

Health & Wellness

Short Term – Next steps

o What can ONC do?

   o Continued pharmacy and Industry engagement

       o Pharmacist are one of many in the care of a patient

       o The normalization of sharing information

       o Demonstration projects to learn what can be done

Chad Worz, PharmD, BCGP, FASCP

Chief Executive

ASCP

ASCP Overview

Mission

- "Empowering pharmacists to promote healthy aging through the appropriate use of medications."

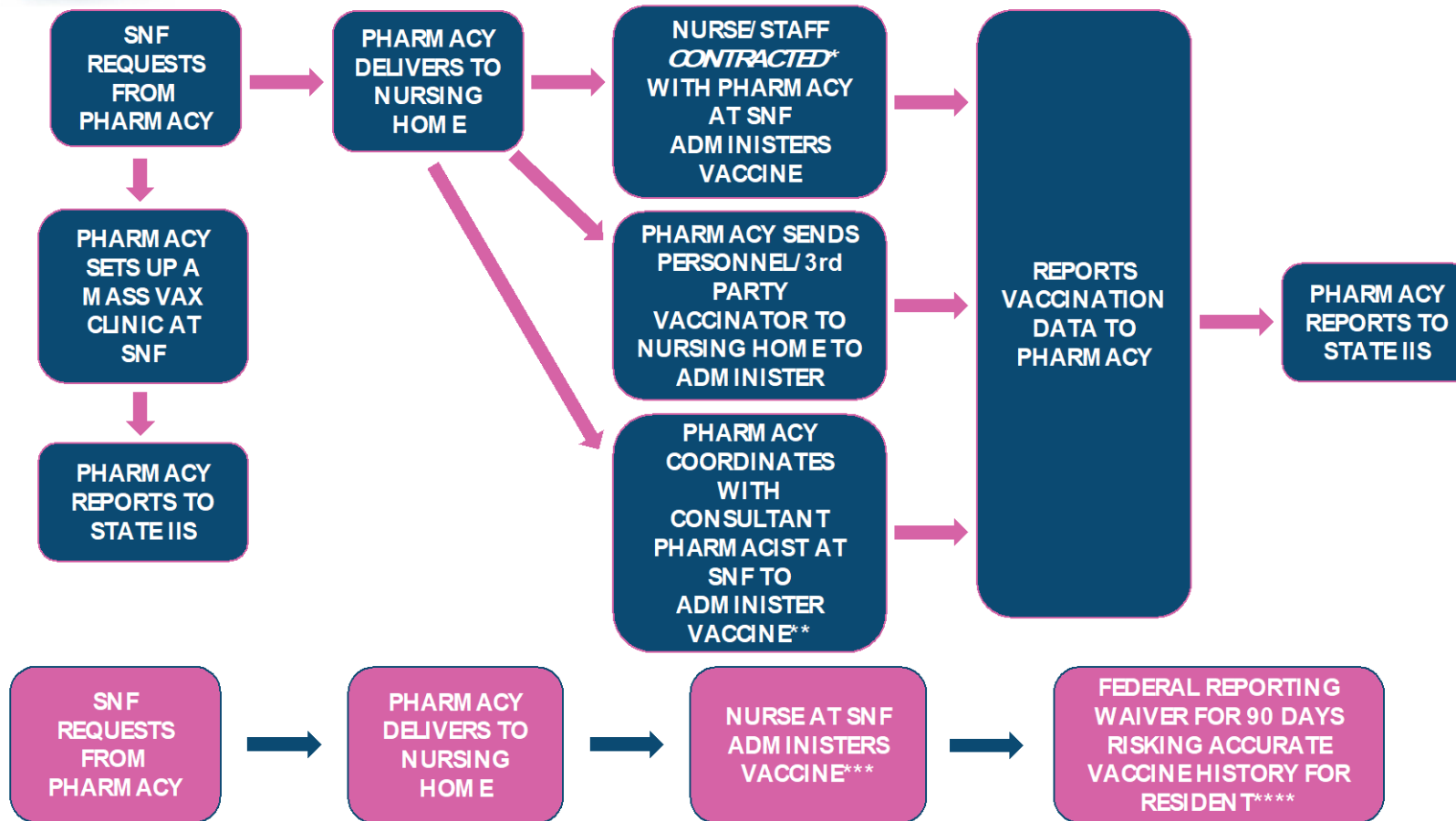## Vision

- "Achieving safe, effective, and appropriate use of medications by all older adults."

Current Pathways for Vaccine Access in Skilled Nursing Facilities (SNFs)

(Process developed by the American Society of Consultant Pharmacists)

SNF REQUESTS FROM PHARMACY →

PHARMACY DELIVERS TO NURSING HOME →

NURSE/STAFF CONTRACTED* WITH PHARMACY AT SNF ADMINISTERS VACCINE →

PHARMACY SENDS PERSONNEL/3rd PARTY VACCINATOR TO NURSING HOME TO ADMINISTER →

PHARMACY COORDINATES WITH CONSULTANT PHARMACIST AT SNF TO ADMINISTER VACCINE** →

REPORTS VACCINATION DATA TO PHARMACY →

PHARMACY REPORTS TO STATE IIS

PHARMACY SETS UP A MASS VAX CLINIC AT SNF →

PHARMACY REPORTS TO STATE IIS

SNF REQUESTS FROM PHARMACY →

PHARMACY DELIVERS TO NURSING HOME →

NURSE AT SNF ADMINISTERS VACCINE*** →

FEDERAL REPORTING WAIVER FOR 90 DAYS RISKING ACCURATE VACCINE HISTORY FOR RESIDENT****

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*Facilities and pharmacies may contract for administration services currently under the pharmacy's CDC provider contract.

**Time "catch up/one off" vaccinations with consultant pharmacist visit.

***Facility must sign Federal CDC facility sub provider vaccination agreement.

**** 26 states require any entity (including nursing homes) to report vaccine data to IIS system. Reporting entities must apply and be approved to report, and many IIS systems take months to be approved. Most LTC pharmacies are already linked and can report if the vaccination is managed through the blue paths above.

Pharmacy Interoperability and Emerging Therapeutics

The Covid Experience – A Network Perspective

HITAC Task Force

June 28, 2023

STChealth, LLC

Michael L. Popovich (CEO)
Jason Briscoe (Director of Pharmacy Operations)

STC
health

1. COVID-19 Vaccination Efforts - Numbers

Pharmacy Pandemic Response – Vaccinations

In the 2009 H1N1 Pandemic — Pharmacy provided ~ 6 Million H1N1 Vaccinations

In the 2020 COVID-19 Pandemic — Pharmacy provided > 50x this @ ~302 Million COVID-19 Vaccinations

85% of these came across STC's National Immunization Network on to state and jurisdictional Public Health IIS and then on to CDC

In 2020 this network connected > 56,000 Pharmacies IIS across the US (Interoperable)

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2. EOP Interoperability Lessons (from ONC Past Initiatives)

COVID-19 Validated:

- Value of Standards
  - HL7 for Immunization Data Exchange
- Value of Meaningful Use (2015)
  - Interoperable Electronic Data Exchange
  - EHR and Pharmacy Management System Integration (in-workflows)
- Value of Investment in IT Modernization
  - SaaS / Cloud IT – Highly Adaptable in Rapidly Changing Environments

- Value of Public – Private Partnerships
  - Under the CDC and PH Mission Umbrella
- Value of Real or Near Real Data
  - Situational Awareness, Gaps, Policy Support, Epidemiology, …
- Value of the Consumer
  - Access to their Records, Vaccine IQ and Awareness

STC health

3. EOP Interoperability Lessons (Barriers)

COVID Demonstrated:

- Impact of Volumes on Supporting IT
  - Importance of Networks – For Rapid Exchange of Information from the Point of Care to the CDC Data Systems
  - Importance of Processing Systems to Performance Scale (Cloud versus On Premises)

- Impact of Volumes on PH Resources
  - Ability to Rapidly On-board Individual Pharmacies for Data Sharing

- Impact of Emerging Disease Insights and Evolving Vaccine Therapeutics
  - Agile Changes to Supporting Applications, Processes, Data Needs
  - Lack of Connectivity to Other Health Information Systems at POC

4. Steps for a New Pharmacy to Insure EOP Readiness + Achieve Successful Day to Day Electronic Data Reporting and Exchange

1. Understand and Determine Your Opportunity (Customer Loyalty, Revenue, Expansion Potential)

   a. Patient-Base Demographics
   b. Area Immunization Gaps and Types
   c. Compliance Reporting (Cost) versus Bidirectional Exchange (Revenue)
   d. Store Target Revenue from Vaccinations

1. Establish Interoperability In Workflow with PMS Integration

3. Initiate PH Onboarding (Link and Data Validation to IIS)

4. Utilize Intelligent Exchange (Bidirectional with Decision Support)

   a. Pharmacy Engagement – Active Immunizers
   b. Patient Engagement
   c. Community Engagement – Marketing
   d. Ecosystem Engagement

5. The Future... from vaccinations to point of care testing... from therapeutics to integrated patient care and outreach...

What If:
- Jurisdictional and Federal Reporting Expands?
- Test to Treat and/or Assess to Prescribe and Treat Remains Critical?
- New Vaccines Prove to Be Revenue and Relevance Accelerators (RSV)?
- Pharmacy Connectivity is Viewed as an Extension to Public Health Infrastructure (i.e. integrated with CDC's IZ Gateway, Notifiable Disease Reporting)?

COVID Demonstrated Being Interoperable with the Larger Health Care Ecosystem Has a Significant Upside.

Pharmacies Should Connect to Public Health for Immunizations to Create the Foundational Framework, Which Establishes Readiness for the Future.

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6. What Can ONC Do?

Request ONC to Open the Door for Pharmacies Interacting with Quality Networks
- Health Records (or segments of) – Diagnosis Codes, Labs, Test Results
  - Example: COVID-19 Therapeutics
- Refined Query on Demand with Quality Network

Continue w/Standards and IT Modernization Movement, To Increase Interoperability with Existing Systems, Examples:

- Consider a New HIT Meaningful Use Effort: Targets Pharmacy (PMS, LTC PMS & EHRs).
- Help Drive Pharmacy Interoperability Demonstration Projects

Lead Efforts for Data Use Agreements at Both State PH, Pharmacy and Provider Levels
- Data for Decision Support
- Data for Research
- Data for the Consumer & Integrated Health Care

STC health

Discussion

Shelly Spiro, Co-Chair

Hans Buitendijk, Co-Chair

Public Comment

To make a comment please

Use the Hand Raise Function

If you are on the phone only, press "*9" to raise your hand

*(Once called upon, press "*6" to mute/unmute your line)*

All public comments will be limited to three minutes

You may also email your public comment to onc-hitac@accelsolutionsllc.com

Written comments will not be read at this time,
but they will be delivered to members of the task force and made part of the public record

Task Force Work Planning

Shelly Spiro, Co-Chair

Hans Buitendijk, Co-Chair

Upcoming Meetings

Month	Task Force Meeting Dates	HITAC Meeting Date
July	12, 19, 26	July 13
August	9, 16, 23, 30	August 17 (TF Update)
September	13, 20, 27	September 14 (TF Update)
October	4, 11, 18, 25	October 19 (TF Update)
November	1	November 9 (Final Recommendation and Vote)

Adjourn