



October 28, 2020

# COVID-19 TOWN HALL

# Agenda

- COVID-19 State and National Updates
- VEKLURY® (remdesivir) Update
- ROPA-Update & Clarification
- COVID-19 Vaccine Provider Onboarding Reminder
- Q & A



# State and National Updates

Kelly Fine

Executive Director | Arizona Pharmacy Association

# Worldwide Cases

JOHNS HOPKINS  
UNIVERSITY & MEDICINE

CORONAVIRUS  
RESOURCE CENTER



COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)



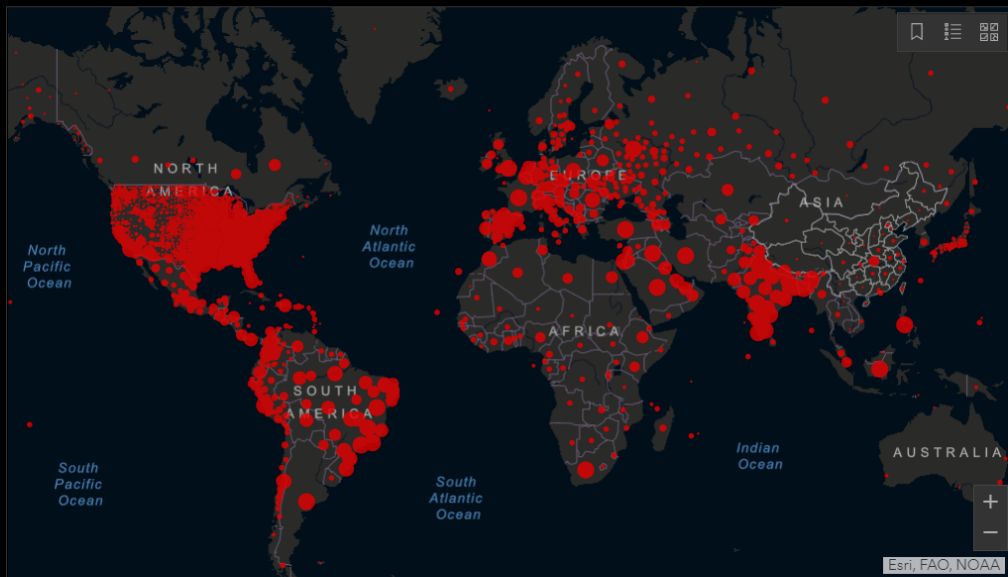
Global Cases

**44,059,551**

Cases by Country/Region/Sovereignty

8,779,839 US  
7,990,322 India  
5,439,641 Brazil  
1,553,028 Russia  
1,244,242 France  
1,116,738 Spain  
1,116,609 Argentina  
1,033,218 Colombia  
920,667 United Kingdom  
901,268 Mexico  
892,497 Peru  
717,851 South Africa  
588,648 Iran

Admin0 Admin1 Admin2



Cumulative Cases

Active Cases

Incidence Rate

Case-Fatality Ratio

Testing Rate

**180**

Lancet Inf Dis Article: [Here](#). Mobile Version: [Here](#). Data sources: [Full list](#). Downloadable database: [GitHub](#), [Feature Layer](#).

Global Deaths

**1,168,568**

226,728 deaths US  
157,946 deaths Brazil  
120,010 deaths India  
89,814 deaths Mexico  
45,455 deaths United Kingdom  
37,700 deaths Italy

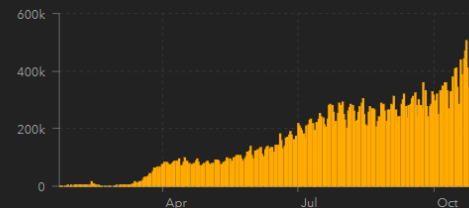
Global Deaths

US State Level

Deaths, Recovered

33,433 deaths, **79,230** recovered New York US  
18,061 deaths, **763,108** recovered Texas US  
17,480 deaths, recovered California US  
16,505 deaths, recovered Florida US  
16,306 deaths, **36,609** recovered New Jersey US

US Deaths, Recovered



# National Cases



Centers for Disease Control and Prevention  
CDC 24/7: Saving Lives, Protecting People™

## US COVID-19 Cases Reported to the CDC in the Last 7 Days, by State/Territory

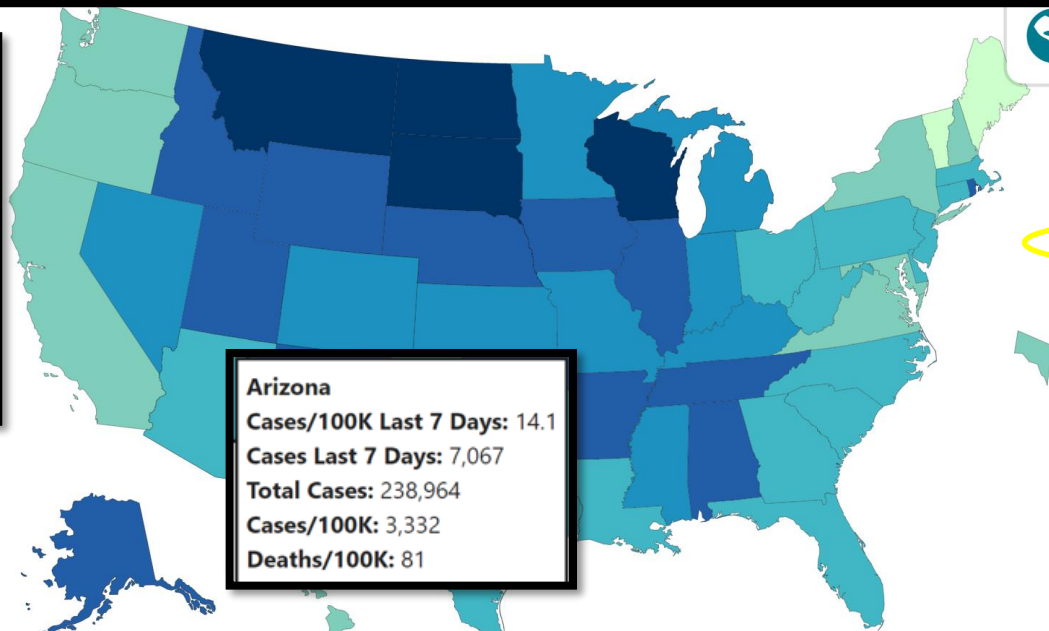
TOTAL CASES  
**8,680,611**

+63,589 New Cases

CASES IN LAST 7 DAYS PER 100K  
**21.2**

TOTAL DEATHS  
**225,084**

+483 New Deaths



## Cases per US State (Deaths)

**915,847** California (17,480)

**904,769** Texas (18,061)

**786,311** Florida (16,505)

**498,646** New York (33,433)

**387,687** Illinois (9,838)

**353,372** Georgia (7,844)

**263,883** North Carolina (4,211)

**251,774** Tennessee (3,207)

**240,122** Arizona (5,891)

**231,331** New Jersey (16,306)

**206,311** Wisconsin (1,852)

**203,520** Pennsylvania (8,683)

**202,740** Ohio (5,239)

**186,437** Alabama (2,892)

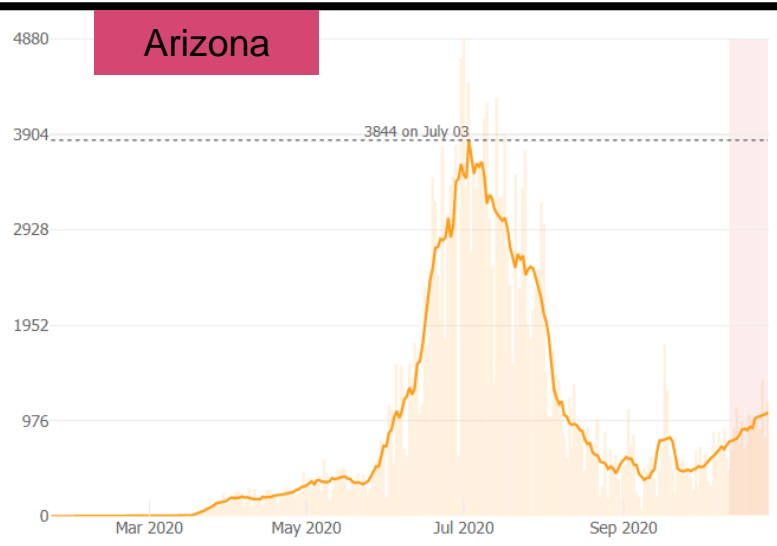
**182,344** Michigan (7,585)

**180,991** Louisiana (5,872)

# Daily confirmed new cases (3-day moving average)

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UNIVERSITY & MEDICINE

CORONAVIRUS  
RESOURCE CENTER



Line shows 3-day moving average of **new cases per day** in this state. Dot corresponds to most recent day.



The **greener** the background, the bigger the **downward trend** of new cases in this state.



The **redder** the background, the bigger the **upward trend** of new cases in this state.

Daily New Cases per 100k people. Data shown from 1/22/20 to 10/27/20.





## Arizona

[Tweet](#) [Share](#)

Current  $R_t$

**1.10**

Cases

**238,962**

Tests

**1,714,772**

### Effective Reproduction Rate · $R_t$

$R_t$  is the average number of people who become infected by an infectious person. If  $R_t$  is below 1.0, infections will slow. [Learn More](#)

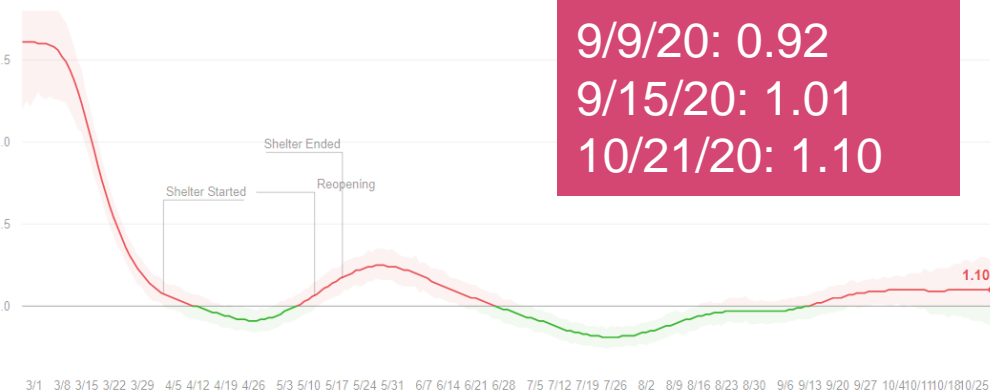
$R_t$

9/2/20: 0.81

9/9/20: 0.92

9/15/20: 1.01

10/21/20: 1.10



Number of  
Cases

240,122

Number of  
Deaths

5,891

Number of  
COVID-19 Tests

2,040,792

Number of New Cases  
reported today\*

1,157

Number of New Deaths  
reported today\*

16

Number of New Tests  
reported today\*

11,941

Rate of cases, per 100,000  
population

3,340.1

Rate of fatalities, per  
100,000 population

81.94

Total Percent Positive\*\*

9.7%

Total COVID-19 Diagnostic  
Tests\*\*\*

1,724,647

New Diagnostic Tests  
reported today\*

9,841

Diagnostic Tests Percent  
Positive\*\*

10.2%

Total COVID-19 Serology  
Tests

316,145

New Serology Tests reported  
today\*

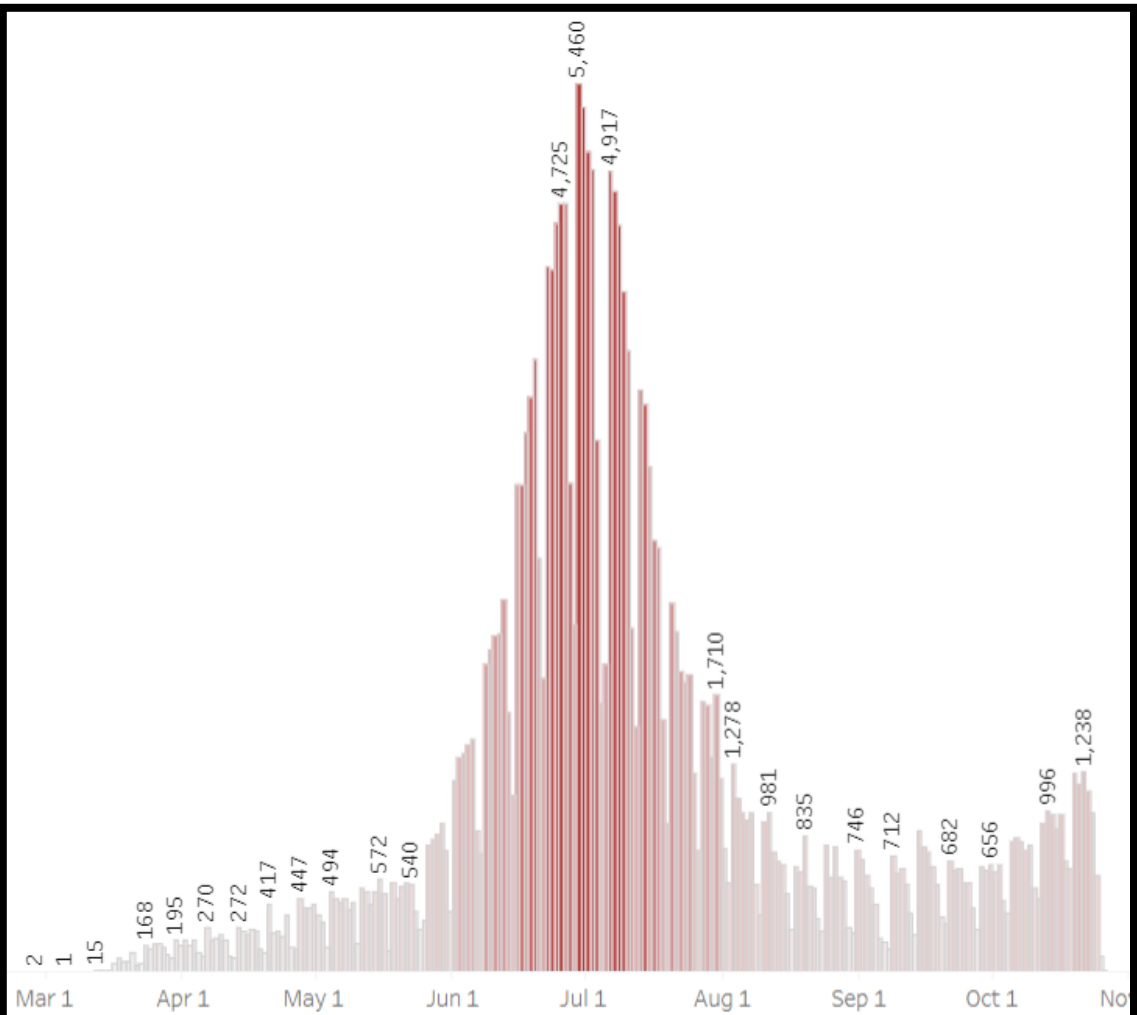
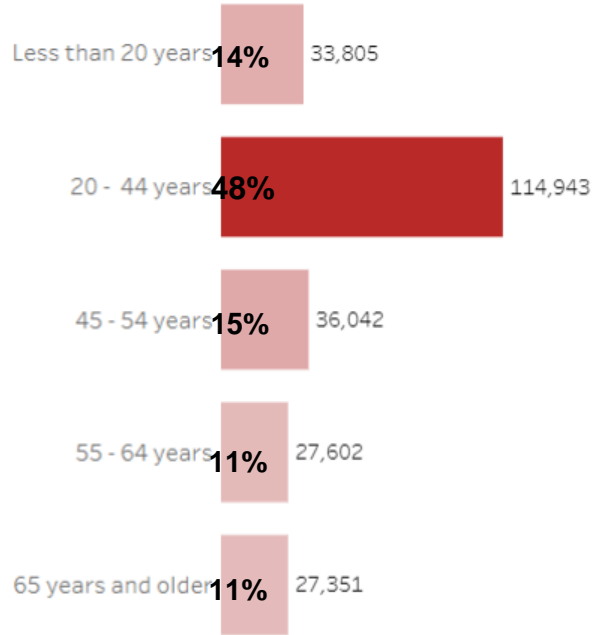
2,100

Serology Percent Positive\*\*

6.5%

# Cases by Day & Age Group

COVID-19 Cases by Age Group





# Laboratory Testing



ARIZONA DEPARTMENT OF HEALTH SERVICES  
Health and Wellness for All Arizonans

All tests completed for COVID-19

2,040,792

All tests reported yesterday in Arizona

11,941

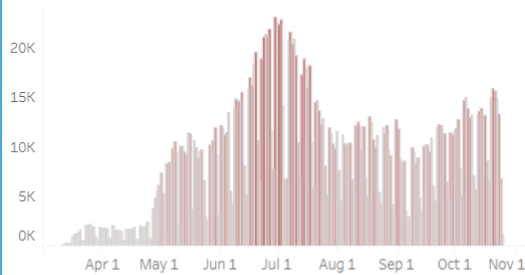
Total % Positive COVID-19 All Tests

9.7%

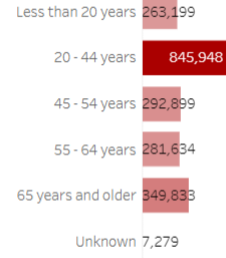
## PCR Positivity %

6/28/20 = 21%  
7/5/20 = 19%  
7/12/20 = 16%  
7/19/20 = 12%  
7/26/20 = 10%  
8/2/20 = 8%  
8/9/20 = 6%  
8/23/20-10/4/20: 4%  
10/11/20: 5%  
10/18/20: 6%  
10/25/20: 8%

All tests by date of collection



All Testing by Age Group

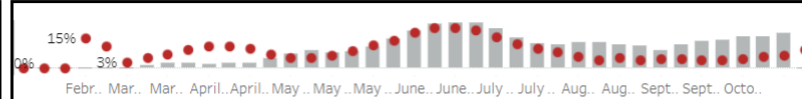


Positive by week

Positive test result, reported electronically out of all people with COVID-19 testing reported electronically completed in AZ. Diagnostic tests

Total % Positive COVID-19 Diagnostic Tests

10.2%



Total % Positive COVID-19 Serology Tests

7.0%



Date	Total % Positive	PCR % Positive	Sero % Positive
6/17/20	7.1%	8.7%	3.1%
6/24/20	8.6%	10.5%	3.0%
7/1/20	9.9%	12%	3.2%
7/8/20	11.3%	13.6	3.4%
7/15/20	11.9%	14.2%	3.7%
7/22/20	12.4%	14.6%	4.4%
7/29/20	12.7%	14.6%	4.9%
8/5/20	12.6%	14.4%	5.3%
8/11/20	12.4%	13.9%	5.7%
9/1/20	11.5%	12.6%	6.4%
9/8/20	11.2%	12.2%	6.5%
9/15/20	11%	11.9%	6.6%
10/20/20	9.9%	10.4%	6.9%
10/27/20	9.7%	10.2%	7%

# Hospitalizations & Ventilator Use

INPATIENT BEDS IN USE		
Date	Total (in use %)	# COVID
6/15/20	6,231 (81%)	1,506
6/22/20	6,469 (83%)	2,136
6/29/20	6,488 (85%)	2,793
7/6/20	6,472 (82%)	3,356
7/13/20	6,721 (85%)	3,517
7/20/20	6,636 (83%)	3041
7/27/20	6,386 (81%)	2564
8/3/20	6,487 (81%)	2024
8/11/20	6,476 (81%)	1469
8/31/20	6435 (81%)	729
9/7/20	6300 (79%)	657
9/14/20	6352 (80%)	550
10/19/20	7175 (83%)	777
10/26/20	7278 (85%)	861

ICU BEDS IN USE		
Date	Total (in use%)	# COVID
6/15/20	1,307 (80%)	502
6/22/20	1,412 (84%)	614
6/29/20	1,435 (86%)	683
7/6/20	1,481 (90%)	869
7/13/20	1,498 (88%)	970
7/20/20	1,448 (85%)	865
7/27/20	1,433 (84%)	814
8/3/20	1443 (83%)	638
8/11/20	1378 (80%)	510
8/31/20	1289 (77%)	253
9/7/20	1265 (76%)	212
9/14/20	1294 (78%)	138
10/19/20	1355 (81%)	170
10/26/20	1377 (83%)	187

VENTILATORS IN USE		
Date	Total (in use%)	# COVID
6/15/20	707 (38%)	340
6/22/20	716 (41%)	386
6/29/20	773 (45%)	455
7/6/20	895 (51%)	544
7/15/200	996 (52%)	674
7/20/20	952 (49%)	608
7/27/20	920 (47%)	574
8/3/20	795 (41%)	474
8/11/20	679 (36%)	346
8/31/20	556 (30%)	150
9/7/20	541 (29%)	112
9/14/20	460 (25%)	76
10/19/20	463 (25%)	91
10/26/20	524 (29%)	100

# FDA Waives Some Track and Trace Requirements

- The FDA announced it will delay enforcement of certain provisions of the Drug Supply Chain Security Act (DSCSA) until November 2023 due to the pandemic.
- The FDA will not enforce that dispensers (i.e., pharmacies) must investigate product identifiers on suspect and illegitimate product.
- The FDA is also delaying enforcement of the distributor verification requirement for saleable returned product. Both were scheduled to take effect next month.

# HHS Partners with CVS and Walgreens to Provide COVID-19 Vaccine to Long-Term Care Facilities

- [HHS and DOD announced a CDC partnership](#) with CVS and Walgreens to provide vaccine services in nursing homes and assisted living once a COVID-19 vaccine has been approved and authorized.
- **Facilities can partner with CVS, Walgreens, [or existing LTC pharmacy](#) and indicate what that is. The program is not limited to CVS and Walgreens.**
- Facilities need to sign up between October 19<sup>th</sup>-November 6<sup>th</sup> and indicate their pharmacy preference through the [NHSN portal](#). Assisted living facilities will indicate their pharmacy preference through an [online sign-up form](#).
- [FAQ](#)

# CDC Expands Definition of Close Contacts

- CDC revised how it defines "**close contact**" in relation to how people can contract the novel coronavirus.
- CDC previously defined close contact as someone who spends 15 minutes or more time within 6 feet of an infectious person.
- The agency now says it is someone who spends a cumulative 15 minutes or more within 6 feet of someone who was infectious over 24 hours. This indicates that the time spent does not have to be consecutive.

[CLICK HERE](#)

# Pharmacists MUST have an NPI Number



SEARCH NPI REGISTRY ⓘ

## Create a New Account

You need an Identity & Access Management System (I&A) User ID and Password to create and manage NPIs.



[Individual Providers](#), [Organization Providers](#), [Users working on behalf of a provider](#)

If you don't have an I&A account, need to update your existing I&A account, or don't remember your User ID or Password, select the CREATE or MANAGE AN ACCOUNT button below to go to I&A.

Once you have successfully created your I&A account, your existing Type 1 NPI will be associated with your I&A account.

After successfully creating your I&A account, return to NPPES and use your I&A User ID and Password to log into NPPES where you can create and maintain the NPI data associated with your provider(s).

[CREATE or MANAGE AN ACCOUNT](#)

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Medicare & Medicaid Services



## NPI: What You Need to Know



# VaccineFinder

## COVID-19 VACCINE ADMINISTRATION DATA REPORTING

- Jurisdictions will be required to report CDC-defined data elements related to vaccine administration daily (i.e., every 24 hours). CDC will provide information on these data elements to jurisdictions.
- All vaccination providers may be required to report and maintain their COVID-19 vaccination information on CDC's [VaccineFinder](#).
- CDC has prioritized jurisdiction onboarding to the Immunization (IZ) Gateway\* to allow Immunization Information Systems (IISs) to receive data directly from national providers, nontraditional vaccination providers, and other external systems, as well as to report vaccine administration data to CDC.
- Data Use Agreements (DUAs) will be required for data sharing via the IZ Gateway and other methods of vaccine administration data sharing with CDC and will be coordinated by each jurisdiction's immunization program.

### *To be determined:*

- *Jurisdiction responsibility/involvement concerning reporting of data from multijurisdictional providers*
- *Method and frequency for vaccination providers to report information to VaccineFinder*

# HHS Order #1

FOR IMMEDIATE RELEASE  
August 19, 2020

Contact: HHS Press Office  
202-690-6343  
[media@hhs.gov](mailto:media@hhs.gov)

## HHS Expands Access to Childhood Vaccines during COVID-19 Pandemic

The U.S. Department of Health and Human Services (HHS) [issued a third amendment - PDF\\*](#) to the Declaration under the Public Readiness and Emergency Preparedness Act (PREP Act) to increase access to lifesaving childhood vaccines and decrease the risk of vaccine-preventable disease outbreaks as children across the United States return to daycare, preschool and school.

"Today's action means easier access to lifesaving vaccines for our children, as we seek to ensure immunization rates remain high during the COVID-19 pandemic," said HHS Secretary Alex Azar. "The Trump Administration has worked to allow pharmacists—alongside all of America's heroic healthcare workers—to practice at the top of their license, empowering the public with more options to protect their health and well-being."

The amendment authorizes State-licensed pharmacists (and pharmacy interns acting under their supervision to administer vaccines, if the pharmacy intern is licensed or registered by his or her State board of pharmacy) to order and administer vaccines to individuals ages three through 18 years, subject to several requirements:

- The vaccine must be approved or licensed by the Food and Drug Administration (FDA).
- The vaccination must be ordered and administered according to the CDC's Advisory Committee on Immunization Practices (ACIP) immunization schedules.
- The licensed pharmacist must complete a practical training program of at least 20 hours that is approved by the Accreditation Council for Pharmacy Education (ACPE). This training program must include hands-on injection technique, clinical evaluation of indications and contraindications of vaccines, and the recognition and treatment of emergency reactions to vaccines.
- The licensed or registered pharmacy intern must complete a practical training program that is approved by the ACPE. This training program must include hands-on injection technique, clinical evaluation of indications and contraindications of vaccines, and the recognition and treatment of emergency reactions to vaccines.
- The licensed pharmacist and licensed or registered pharmacy intern must have a current certificate in basic cardiopulmonary resuscitation.
- The licensed pharmacist must complete a minimum of two hours of ACPE-approved, immunization-related continuing pharmacy education during each State licensing period.
- The licensed pharmacist must comply with recordkeeping and reporting requirements of the jurisdiction in which he or she administers vaccines, including informing the patient's primary-care provider when available, submitting the required immunization information to the State or local immunization information system (vaccine registry), complying with requirements with respect to reporting adverse events, and complying with requirements whereby the person administering a vaccine must review the vaccine registry or other vaccination records prior to administering a vaccine.
- The licensed pharmacist must inform his or her childhood-vaccination patients and the adult caregivers accompanying the children of the importance of a well-child visit with a pediatrician or other licensed primary care provider and refer patients as appropriate.





# HHS Order #2

FOR IMMEDIATE RELEASE  
September 9, 2020

Contact: OASH Press Office  
202-205-0143  
[ashmedia@hhs.gov](mailto:ashmedia@hhs.gov)

## Trump Administration Takes Action to Expand Access to COVID-19 Vaccines

Today, under the leadership of President Trump, the U.S. Department of Health and Human Services (HHS), through the Assistant Secretary for Health, issued guidance under the Public Readiness and Emergency Preparedness Act (PREP Act) to expand access to safe and effective COVID-19 vaccines when they are made available. This guidance authorizes state-licensed pharmacists to order and administer, and state-licensed or registered pharmacy interns acting under the supervision of the qualified pharmacist to administer, COVID-19 vaccinations to persons ages 3 or older, subject to certain requirements.

"This action builds upon our Administration's progress toward delivering a safe, effective, and widely available vaccine by 2021," said Assistant Secretary for Health ADM Brett P. Giroir, M.D. "Allowing pharmacists to order and administer COVID-19 vaccines will greatly expand convenient access for the American people."

To qualify as "covered persons" under 42 U.S.C. § 247d-6d((i)(8)(B) when administering COVID-19 vaccines authorized or licensed by the U.S. Food and Drug Administration (FDA) to persons ages 3 or older, state-licensed pharmacists and pharmacy interns licensed or registered by their state board of pharmacy must satisfy the following requirements:

- The vaccine must be FDA-authorized or FDA-licensed.
- The vaccination must be ordered and administered according to the Advisory Committee on Immunization Practices' (ACIP) COVID-19 vaccine recommendation.
- The licensed pharmacist must complete a practical training program of at least 20 hours that is approved by the Accreditation Council for Pharmacy Education (ACPE). This training program must include hands-on injection technique, clinical evaluation of indications and contraindications of vaccines, and the recognition and treatment of emergency reactions to vaccines.
- The licensed or registered pharmacy intern must complete a practical training program that is approved by the ACPE.
- The licensed pharmacist and licensed or registered pharmacy intern must have a current certificate in basic CPR.
- The licensed pharmacist must complete a minimum of two hours of ACPE-approved, immunization-related continuing pharmacy education during each state licensing period.
- The licensed pharmacist must comply with recordkeeping and reporting requirements of the jurisdiction in which he or she administers vaccines, including reviewing the vaccine registry or other vaccination records prior to administering a vaccine.
- The licensed pharmacist must, if the patient is 18 years of age or younger, inform the patient and the adult caregiver accompanying the patient of the importance of a well-child visit with a pediatrician or other licensed primary-care provider and refer patients as appropriate.
- The licensed pharmacist and the licensed or registered pharmacy intern must comply with any applicable requirements (or conditions of use) as set forth in the Centers for Disease Control and Prevention COVID-19 vaccination provider agreement and any other federal requirements that apply to the administration of COVID-19 vaccine(s).

The authorization preempts any state and local laws that prohibit or effectively prohibits those who satisfy these requirements from ordering or administering COVID-19 vaccines as set forth above. The authorization does not preempt state and local laws that permit additional individuals to administer COVID-19 vaccines to additional persons.

<https://www.hhs.gov/about/news/2020/09/09/trump-administration-takes-action-to-expand-access-to-covid-19-vaccines.html>



## HHS Order #3

<https://www.hhs.gov/about/news/2020/10/21/trump-administration-takes-action-further-expand-access-vaccines-covid-19-tests.html>

FOR IMMEDIATE RELEASE  
October 21, 2020

Contact: ASH Press Office  
202-205-0143  
[ashmedia@hhs.gov](mailto:ashmedia@hhs.gov)

### Trump Administration Takes Action to Further Expand Access to Vaccines, COVID-19 Tests

Today, under the leadership of President Trump, the U.S. Department of Health and Human Services (HHS), through the Assistant Secretary for Health (ASH), issued [guidance - PDF\\*](#) under the Public Readiness and Emergency Preparedness Act (PREP Act) authorizing qualified pharmacy technicians and State-authorized pharmacy interns to administer childhood vaccines, COVID-19 vaccines when made available, and COVID-19 tests, all subject to several requirements. This guidance clarifies that the pharmacy intern must be authorized by the State or board of pharmacy in the State in which the practical pharmacy internship occurs, but this authorization need not take the form of a license from, or registration with, the State board of pharmacy.

"Pharmacists and their staff are critical to the COVID-19 response," said Assistant Secretary for Health ADM Brett P. Giroir, M.D. "Together with pediatricians and family physicians, they are ensuring that Americans receive the vaccines they need where they need it."

This guidance authorizes both qualified pharmacy technicians and State-authorized pharmacy interns acting under the supervision of a qualified pharmacist to administer to FDA-authorized or FDA-licensed COVID-19 vaccines to persons ages three or older and to administer FDA-authorized or FDA-licensed ACIP-recommended vaccines to persons ages three through 18 according to ACIP's standard immunization schedule, if the requirements listed below are satisfied:

- The vaccination must be ordered by the supervising qualified pharmacist.
- The supervising qualified pharmacist must be readily and immediately available to the immunizing qualified pharmacy technicians.
- The vaccine must be FDA-authorized or FDA-licensed.
- In the case of a COVID-19 vaccine, the vaccination must be ordered and administered according to ACIP's COVID-19 vaccine recommendation(s).
- In the case of a childhood vaccine, the vaccination must be ordered and administered according to ACIP's standard immunization schedule.
- The qualified pharmacy technician or State-authorized pharmacy intern must complete a practical training program that is approved by the Accreditation Council for Pharmacy Education (ACPE). This training program must include a hands-on injection technique and the recognition and treatment of emergency reactions to vaccines.
- The qualified pharmacy technician or State-authorized pharmacy intern must have a current certificate in basic cardiopulmonary resuscitation.
- The qualified pharmacy technician must complete a minimum of two hours of ACPE-approved, immunization-related continuing pharmacy education during the relevant State licensing period(s).

- The supervising qualified pharmacist must comply with recordkeeping and reporting requirements of the jurisdiction in which he or she administers vaccines, including informing the patient's primary care provider when available and submitting the required immunization information to the State or local immunization information system (vaccine registry).
- The supervising pharmacist is responsible for complying with requirements related to reporting adverse events.
- The supervising qualified pharmacist must review the vaccine registry or other vaccination records prior to ordering the vaccination to be administered by the qualified pharmacy technician or State-authorized pharmacy intern.
- The qualified pharmacy technician and State-authorized pharmacy intern must, if the patient is 18 years of age or younger, inform the patient and the adult caregiver accompanying the patient of the importance of a well-child visit with a pediatrician or other licensed primary care provider and refer patients as appropriate.
- The supervising qualified pharmacist must comply with any applicable requirements (or conditions of use) as set forth in the CDC's COVID-19 vaccination provider agreement and any other federal requirements that apply to the administration of COVID-19 vaccine(s).

### **COVID-19 Testing**

This guidance also authorizes qualified pharmacy technicians and State-authorized pharmacy interns to administer COVID-19 tests, including serology tests, that the FDA has approved, cleared, or authorized.

# Resources

**Well-Child Visit Templates:** A Task Force on Pharmacist Engagement in State-Based COVID Vaccination comprising APhA, NASPA, and NCPA and state pharmacy association executives developed three tools for use by pharmacists to satisfy the requirement under the HHS Amendments authorizing pharmacists to administer childhood and COVID-19 vaccines.

- [Well-Child Visit Brochure](#) (PDF)
- [Template Referral Form Well-Child Visit](#) (Word)
- [Well-Child Checkup Letter](#) (Word)

## Pediatric Vaccine Refresher for Pharmacists



**\*NEW\***

## AzPA Vaccine Administration Training Program for Technicians.

**Live and On-demand program!**



## CPR Training That Fits Your Schedule

What is HeartCode® BLS?

HeartCode® BLS is the online portion of BLS blended learning. It uses a variety of eLearning assets such as dramatizations, eSimulations, animations, self-directed learning, and interactive activities to teach students BLS knowledge and skills. After completing the online portion, students must attend a structured Instructor-led hands-on session that focuses on meaningful skills practice, debriefing, team scenarios, discussions of local protocols, and skills testing.



## Advisory Committee on Immunization Practices (ACIP)

### Final - October 27, 2020

#### Friday, October 30, 2020

<b>10:00</b>	<b>Coronavirus Disease 2019 (COVID-19) Vaccines</b>	
	Introduction	Dr. Beth Bell (ACIP, WG Chair)
	Update from Vaccines and Related Biological Products Advisory Committee (VRBPAC) meeting	Dr. Doran Fink (FDA)
	NVX-CoV2373 Vaccine Candidate	Dr. Filip Dubovsky (Novavax)
	Janssen's SARS-CoV-2 Vaccine Program	Dr. Jerry Sadoff (Janssen)
<b>11:45</b>	<b>Break</b>	
<b>12:00</b>	Update on vaccine implementation planning	Dr. Janell Routh (CDC/NCIRD)
	Vaccinate with Confidence	Dr. Amanda Cohn (CDC/NCIRD)
<b>12:30</b>	<b>Lunch</b>	
<b>1:15</b>	FDA safety surveillance systems	Dr. Steven Anderson (FDA)
	Post-authorization safety monitoring plans	Dr. Tom Shimabukuro (CDC/NCEZID)
	Modeling strategies for the initial allocation of COVID-19 vaccines	Dr. Matthew Biggerstaff (CDC/NCIRD)
	Discussion	
<b>2:30</b>	<b>Break</b>	
<b>2:45</b>	Updates to immunity and epidemiology to inform COVID-19	Dr. Megan Wallace (CDC/NCIRD)
	Ethical principles for early vaccine allocation	Dr. Mary Chamberland (CDC/NCIRD)
	Work Group interpretation of data	Dr. Sara Oliver (CDC/NCIRD)
	Policy questions, Evidence to Recommendation Framework, and	Dr. Kathleen Dooling (CDC/NCIRD)
	Discussion	
<b>4:45</b>	<b>Adjourn</b>	

FDA approves first treatment for COVID-19

# VEKLURY® (remdesivir)

**Dawn Dynak**

*Associate Director, National Accounts - Strategic  
Accounts West (AZ, CA, NV)*

*Gilead Sciences, Inc.*

**Betty Chan PharmD, AAHIVE, BCGP**

*Principal Medical Scientist*

*Gilead Sciences, Inc.*

[\*\*Package Insert\*\*](#)

[\*\*Product Information\*\*](#)

# ROPA- (Referring, Ordering, Prescribing and Attending)

UPDATE



# ROPA- (Referring, Ordering, Prescribing and Attending)

The [Patient Protection and Affordable Care Act \(ACA\)](#) and the [21st Century Cures Act \(Cures\)](#) require that all health care providers who provide services to, order (refer), prescribe, or certify health care services for AHCCCS members must be enrolled as an AHCCCS provider.

- Until these Acts passed, referring, ordering, prescribing and attending providers were required to obtain a National Provider Identifiers (NPI's) but were not required to be enrolled as an AHCCCS provider.
- **After Jan. 1, 2021 claims which include referring, ordering, prescribing or attending providers who are not enrolled with AHCCCS will not be reimbursed.**

[CLICK HERE](#)

# ROPA-Continued

- AHCCCS informed us that pharmacists do **NOT** have to register with AHCCCS as providers as we discussed on the call. They have created an exception process and are in the process of gathering immunization trained pharmacist's NPI's, State Board of Pharmacy license numbers, and necessary demographic information.
- If you work for Fry's, Safeway/Albertsons, Walgreens, CVS, Walmart, Bashas, or Costco: your company will be working directly with AHCCCS to provide this information on your behalf therefore you do not need to do anything.
- **If you are an immunization trained pharmacist (or will be before January 1, 2021) that works for another pharmacy who plans to offer vaccines to AHCCCS members please fill out this survey and I will submit the information to AHCCCS to follow-up on.**

[CLICK HERE TO COMPLETE SURVEY](#)

# COVID-19 Provider Onboarding



## Pandemic Vaccine Provider Onboard Form 1

The Arizona Immunization Program Office (AIPO) does not know if/when COVID-19 vaccines will become available. However we want to be prepared and engage our partners now, so we are ready when vaccines are available for distribution in Arizona.

Both VFC and non-VFC providers who would like to administer future COVID-19 vaccines must complete the Pandemic Provider Onboarding survey forms.

After submitting this form, you will be sent to a page with a series of subsequent survey forms. The forms serve two purposes: 1) to ensure the signatory provider knows the requirements, and 2) to ensure the facility is able to meet each requirement. The signatory provider is required to complete all of the surveys and be approved by the AIPO before this facility will be able to order future potential pandemic vaccines.

As we learn more about future vaccines we may add additional survey forms to the onboarding tool to pass the information along.

Onboarding is not an instantaneous process. It will take AIPO time to add providers to ASIIS and review requirements. Onboard now. Plan for it to take time.

The onboarding tool has the high level requirements for the signatory provider. Provider staff can go to [AIPO Train](#) to learn how to order, receive, store, administer, document, and account for pandemic vaccines in ASIIS.

We appreciate your continued efforts to help Arizonans be healthy and vaccinated.

[CLICK HERE](#)

Every pharmacy that wants vaccine from the state allocation needs to complete the Pandemic Provider Onboarding Form.

You do not have to be a VFC provider to order COVID vaccine but will require many of the same requirements.

# Pandemic Provider Onboarding Cont...

The signatory physician responsible for overseeing the vaccines (Kelly Fine) is required to complete a series of forms (surveys) before Arizona Pharmacy Association can order vaccines. The forms serve two purposes:

- 1) Ensure the signatory provider (Kelly Fine) knows the requirements.
- 2) Ensure the facility is able to meet each requirement.

Please click on the "Begin Survey" button below to complete the next form.

**The CDC Agreement survey forms will appear after the first few forms are completed.**

**All survey forms must be submitted before they will be reviewed by the AIPO**

As new information about pandemic vaccines becomes available, we may add more surveys to the survey queue.

Status	Survey Title
✔ Completed	Storage and Handling
✔ Completed	Arizona State Immunization Information System (ASIIS)
<a href="#">Begin survey</a>	Vaccine Planning
<a href="#">Begin survey</a>	CDC Agreement Section A
<a href="#">Begin survey</a>	CDC Agreement Section B
<a href="#">Begin survey</a>	Prescribing Providers (part of CDC Agreement) — #1

## MY COURSES

<https://aipo.myabsorb.com/#/signup-form>



Date Enrolled



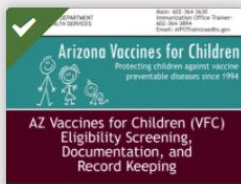
Dose Accountability Webinar  
September 22nd

View



ASIS Inventory Reconciliation  
Online Course

Start



Documentation and Record  
Keeping (Pandemic Providers)  
Online Course

Completed



How to Login to ASIS &  
Patient Record Management  
Online Course

Start



How to Place an Order in ASIS  
Online Course

Start



Mass Immunization (Pandemic  
Providers)  
Online Course

Start



Onboarding Resources  
(Pandemic Providers)  
Online Course

Start



Vaccine Inventory (Pandemic  
Providers)  
Online Course

Completed



Vaccine Storage and Handling  
(Pandemic Providers)  
Online Course

Resume



VFC 400 LogTag Data Logger  
Set Up Instructions & Training  
Online Course

Start



VFC 400 LogTag Online User  
Guide  
Online Course

Start

All COVID-19 vaccine providers  
need to complete this training

Questions?