

PBMs Are Taking Action to Promote Patient Access to Prescription Drugs During the COVID-19 Pandemic

During this time of public health emergency, pharmacy benefit managers (PBMs) are taking action and recommending multiple approaches to help the patients we serve stay safely at home through reliable, convenient access to their needed prescription drugs.

Facilitating Reliable, Convenient Access to Needed Prescription Drugs

PBMs are committed to helping the patients we serve stay at home safely with reliable, convenient access to their needed prescription drugs. PBMs recognize that home delivery can provide an alternative way of safely accessing needed maintenance medications and other prescription drugs. Some PBMs, in partnership with health plans and pharmacies, are making home delivery more accessible, including by:

- Providing home delivery of prescriptions at no additional cost;
- Working with pharmacy partners to assist with mailing prescriptions; and
- Supporting social distancing recommendations by allowing pharmacists to service their normal patients through home delivery of prescription drugs.

Promoting Safety of Patients and Pharmacy Staff

PBMs recognize home delivery can provide an alternative way of safely accessing prescribed medications. To promote expanded access to home delivery, PBMs are temporarily waiving requirements for pharmacies to obtain proof-of-receipt signatures from patients, unless required by law.

Because of the high transmission risk posed by the novel coronavirus (COVID-19), proof-of-receipt requirements may represent an unintentional pathway for pharmacy professionals, patients, and mail carriers alike. PCMA recommends states, including their Boards of Pharmacy or Medicaid agencies, as appropriate, temporarily waive proof-of-receipt/delivery requirements and instead consider:

- Permitting the practice adopted by several PBMs and health plans of allowing pharmacists to write "COVID-19" in the signature box; or
- Mirroring New York's Medicaid Pharmacy Guidance that allows pharmacies to confirm delivery through phone call, text, or email, in lieu of a signature.

PCMA also recommends the Centers for Medicare & Medicaid Services issue guidance to states clarifying that they may temporarily relax signature log and similar requirements (relating to delivery) without program integrity or audit repercussions. While not expressly required under federal Medicaid regulations, many states' Medicaid signature requirements were established in response to program integrity concerns and to demonstrate services billable to Medicaid were delivered.

Helping to Keep the Drug Supply Chain Functioning Well

To minimize impacts on patient care associated with drug shortages, PBMs are leading cross-industry collaboration, including with pharmaceutical manufacturers, pharmacies, hospitals, and health plans, to facilitate Americans' continued access to a safe, effective, and reliable supply of prescription drugs. If a shortage or supply disruption for a specific medication does occur, PBMs will work with the patient, their prescriber, and their health plan to identify a covered therapeutic substitute and help minimize patient impact caused by a shortage.

To avoid worsening any potential shortages or supply disruptions, not only of medications to treat COVID-19 but other essential prescription drugs, PCMA recommends federal, state, and local government leaders:

- Urge patients to consider their personal circumstances, and if needed, consult their health care prescriber or pharmacist if they feel they need an early refill or other flexibilities;
- Avoid policies that may have an unintended impact on the supply of pharmaceuticals in the United States (e.g., stockpiling or hoarding);
- Issue clinical guidelines for health care providers to ensure that patients who have been on therapies for FDA-approved indications prior to the spread of COVID-19 still have appropriate access, as well as those with COVID-19;
- Require greater and more timely reporting of shortages and/or supply disruptions, recognizing real-time data allows for the most optimal management of any disruptions to existing supplies, including to minimize patient impact; and
- Allow PBMs and health plans to consider individual patient needs and clinical guidelines, particularly in cases where a greater supply is medically inappropriate and potentially unsafe.

Promoting Pharmacy Staffing Flexibility to Deliver

To help facilitate access to our nation's nearly 70,000 retail pharmacies, PBMs are actively providing information to RxOpen, a central hub created after Hurricane Katrina to help promote uniform, consistent supply-chain information for stakeholders. PBMs also are supporting policy solutions that ease operational barriers and help empower pharmacy professionals to support our nation's COVID-19 response.

PCMA echoes the recommendations of the National Association of Chain Drug Stores, National Community Pharmacists Associations, National Alliance of State Pharmacy Associations, and others in asking states or their Boards of Pharmacy to provide pharmacy professionals and others facilitating access to pharmacy care with increased workflow flexibility, including by:

- Allowing pharmacists and pharmacy technicians with valid licenses/certifications to temporarily operate across state lines;
- Authorizing pharmacists and pharmacy staff to conduct routine pharmacy tasks remotely when the technology allows, including those licensed outside the state and including technicians, so long as their work is verified electronically by the supervising pharmacist;
- Issuing licensing waivers and expediting conditional approval for pharmacy technician duties;
- Waiving pharmacy technician ratios or allowing the supervising pharmacist to expand the ratio at their discretion; and
- Ensuring pharmacy professionals are designated essential personnel.

Focusing Pharmacy Audits on Areas of Greatest Need

During this time of public health emergency, PBMs know the importance of pharmacies remaining focused on providing patient care. PBMs believe there needs to be a balance between helping pharmacies manage the influx of COVID-19 related patient needs and continuing to serve employer, health plan, and government clients – including helping to prevent fraud, waste and abuse, and not neglect or inadvertently exacerbate other public health concerns, such as the opioid crisis.

Consistent with state and federal government agencies, pharmacies, and clients, many PBMs are limiting routine pharmacy audits, unless required by law or as a result of certain fraud, waste, and abuse investigations.