



May 6th, 2020

COVID-19 TOWN HALL

KAM GANDHI

Executive Director
AZ Board of Pharmacy

BOARD OF PHARMACY UPDATE

- [FAQ'S](#)
- [Submit ?'s](#)
- COVID Task Force Update

KELLY FINE

Executive Director
AzPA

ADHS – Data Dashboard

Data Dashboard

ADHS Home / Public Health Preparedness / Epidemiology & Disease Control / Infectious Disease Services / Coronavirus Disease 2019 (COVID-19) / Data Dashboard



Summary



Demographics



COVID-19 Deaths



Zip Code



Confirmed COVID-19 Cases by Day



Hospitalization



Hospital COVID-like & influenza-like illness Surveillance



Laboratory Testing



Congregate Settings with Positive COVID-19 Cases



Hospital Bed Usage & Availability



Ventilator Usage & Availability



Hospital COVID-19 Specific Metrics

COVID-19 tests completed and percent positive by week

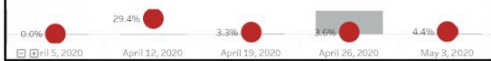
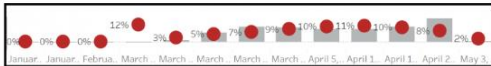
Percent positive is defined as number of people with a positive test result, out of all people with COVID-19 testing completed in AZ.

Total % Positive COVID-19 PCR Tests

8.4%

Total % Positive COVID-19 Serology Tests

3.7%



*NOTE: Results from the last 4-7 days may not be reported yet.

Date Updated: 5/6/2020

[Click Here](#)

Summary

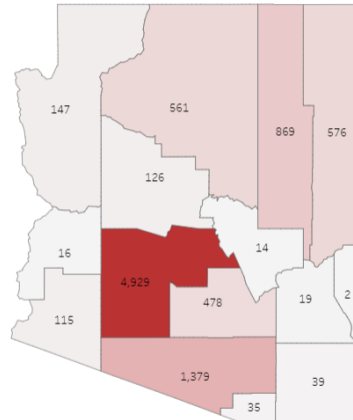
Show case counts or population rates in the map below?

Cases

Select a county to filter the other numbers.

Deaths will not be shown for counties with fewer than three deaths.

| | | |
|---------------------------------------|--------------------------------------------|-------------------------------------|
| Number of Cases | Number of Deaths | Number of COVID-19 Tests |
| 9,305 | 395 | 88,260 |
| Number of New Cases reported today* | Number of New Deaths reported today* | Number of New Tests reported today* |
| 386 | 33 | 3,007 |
| Rate of cases, per 100,000 population | Rate of fatalities, per 100,000 population | Total Percent Positive** |
| 129.4 | 5.49 | 8% |



*Counts of new cases, deaths, and numbers tested reflect increases in the total numbers compared to the previous day.

**Percent positive is the number of people with a positive test result, out of all people with COVID-19 testing completed in AZ.

Executive Order: 2020-33

Effective May 4th: Retailers which are not considered essential, and whose business involves the sale of goods, may operate and offer goods through delivery service, window service, walk up service, through , drive up, curbside, or appointment provided they establish and implement protocols and best practices for business to address COVID-19.

Effective May 8th: Retailers which are not considered essential, and whose business involves the sale of goods, may open, operate and offer goods for sale to customers in their stores provided they establish and implement protocols and best practices for business to address COVID-19.

Protocols must follow social distancing, limiting the number of persons in the physical space, as well as sanitation measures.

[Click Here](#)

Executive Order: 2020-34

Effective Friday, May 8th: barbers and cosmetologists may resume operations provided they establish and implement protocols and best practices for business to address COVID-19, including face coverings for employees and customers, operating by appointment only, and following protocols as directed by CDC, labor department, and ADHS.

Effective Monday, May 11th: dine in restaurant services may resume provided implement protocols and best practices for business to address COVID-19, including enacting physical distancing policies, limiting the number of diners and following protocols as directed by CDC, labor department, and ADHS.

Effective May 15th: Stay at home order expires

[Click Here](#)

Executive Order: 2020-35

Reporting by Nursing Care Institutions, Residential Care Institutions, ICF-IIDs and DD Medical Group Homes to Residents and Families Regarding COVID-19

- a. Report to current residents of congregate settings, next of kin and guardians the number of diagnosed cases and deaths due to COVID-19 occurring within the population of the facility within 24 hours of confirming such information, and provide regular updates on their activities to keep residents safe to residents, next of kin and guardians; and
- b. Upon receipt of a completed application to a congregate setting and a request from a prospective resident, their next of kin or guardian, report the number of cases and deaths due to COVID-19 occurring within the population of the congregate setting to the prospective resident, their next of kin and any guardian; and
- c. Upon acceptance of the transfer of a resident into their congregate setting and upon request from the transferee, but before the transfer is completed, report to the transferring resident, their next of kin and any guardian, the number of cases and deaths due to COVID-19 occurring within the population of the congregate setting.

[Click Here](#)

FDA's Revised Policy on Antibody Tests: Prioritizing Access and Accuracy

FDA announced commercial coronavirus antibody tests will have to meet standards for quality and accuracy.

- Currently authorized 12 antibody tests for emergency use, and is working with companies on authorizations for an additional 200 serology tests.
- Under the new rules, companies already marketing tests will be required to file applications for EUA within 10 business days.
- Makers of new tests will have to file such applications within 10 days of notifying the agency of their plans to go to market.
- If commercial test makers do not submit applications for authorizations within the 10-day time limit, the agency plans to make that information public and consider enforcement action to take the products off the market.

[Click Here](#)

Serology Tests: CDC and ADHS Recommendations

Many factors affect the results of serologic testing and their clinical interpretation. In the early stages of infection, antibodies may be undetectable, and testing may cross-react with antibodies to other common coronaviruses.

- **CDC** does not recommend using antibody testing to diagnose acute infection. It is recommended to use a viral (nucleic acid or antigen) test to diagnose acute infection.
- **ADHS** is not recommending the use of COVID-19 serologic tests to diagnose infection or immunity at this time and does not plan to bring on serological tests for COVID-19 until additional clinical trials have been completed.
 - Note: Serological test results from a clinical laboratory should continue to be reported according to the Arizona Administrative Code and pursuant to applicable Executive Orders.

Symptom-Based Strategy to Discontinue Isolation for Persons with COVID-19 Updated 5-3-20

In the context of community transmission where continued testing is impractical, available evidence at this time indicates that an interim strategy based on time-since-illness-onset and time-since-recovery can be implemented to establish the end of isolation. Practical application of a symptom-based strategy cannot prevent all infections.

Symptomatic people (Symptom based strategy):

- For persons recovered from COVID-19 illness, CDC recommends that isolation be maintained for at least 10 days (up from 7 days) after illness onset (instead of last positive test) and at least 3 days (72 hours) after recovery (instead of after symptoms resolved).
 - Illness onset = defined as the date symptoms begin.
 - Recovery = defined as resolution of fever without the use of fever-reducing medications with progressive improvement or resolution of other symptoms.

Asymptomatic people (Time-based strategy):

- At least 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test. If they develop symptoms, then the symptom-based or test-based strategy should be used.

[Click Here](#)

COVID-19 Vaccines

To increase access to COVID-19 immunizations once they become available, section 3713 of the CARES Act **requires that Medicare and Medicare Advantage plans cover any future COVID-19 vaccines under Part B**. Similar to coverage for flu and pneumococcal vaccines, Medicare beneficiaries will have a \$0 copay for the vaccine and its administration. **Make sure you are set up to bill Medicare Part B**

Note:

- According to MCPH: There won't be enough vaccinations for everyone. – We will have tiered approach to protect the most at-risk and vulnerable (healthcare, first responders, critical infrastructure, those 65 and over, people with chronic medical conditions) similar to H1N1
- AzPA will be offering training this summer and fall for those that need to get certified.

FDA Issues EUA for Potential COVID-19 Treatment

FDA issued an emergency use authorization (EUA) for REMDESIVIR (Gilead Sciences) for the treatment of suspected or laboratory-confirmed COVID-19 in adults and children hospitalized with severe disease.

- The investigational antiviral drug was shown in a clinical trial to reduce the time to recovery in some patients.
- Under the EUA, remdesivir can be distributed in the United States and administered intravenously by health care providers, as appropriate, to treat severe disease.
 - Severe disease indicates patients with low blood oxygen levels or needing oxygen therapy or more intensive breathing support such as a mechanical ventilator.

[Read More](#)

CMS Interim Final Rule: Additional Policy and Regulatory Revisions in Response to COVID-19

COVID-19 Tests:

- Medicare will cover certain COVID-19 tests performed by pharmacists if they are enrolled in Medicare as a laboratory, in accordance with scope of practice and state laws. **Pharmacists should obtain their CLIA Certificate of Waiver!**
- Medicare may cover COVID-19 diagnostic tests when ordered by any healthcare professional, authorized to do so under state law, including pharmacists.
- Pharmacists can work with a physician or other practitioner to provide assessment and specimen collection services, and the physician or other practitioner can bill Medicare for the services under “incident to” billing.

NASPA/AzPA is seeking further clarity from CMS on the below provisions and will update this document accordingly. [CLICK HERE](#)

CMS Interim Final Rule: Additional Policy and Regulatory Revisions in Response to COVID-19

Medication management Services:

- **Under Part B**, pharmacists are considered “auxiliary personnel” and, under the appropriate level of supervision, may provide medication management services “incident to” the services of the billing physician or NPP, if payment is not made under the Part D benefit.
- **Under Part D**, pharmacists may furnish medication management services under a Medication Therapy Management Program (MTMP)

CMS Interim Final Rule: Additional Policy and Regulatory Revisions in Response to COVID-19

Medicaid:

- Medicaid may cover COVID-19 tests, including tests administered in non-office settings (such as parking lots or other temporary outdoor locations), and laboratory processing of self-collected COVID-19 tests that are FDA-authorized for self-collection.
- **Next Steps:**
 - Attend AzPA Pharmacist Directed COVID Testing CE Program: Part 1
 - Get a CLIA waiver!

Pharmacy Technician Certification Board - Testing During COVID-19

Beginning May 4, PTCB is offering online proctored exam delivery of all PTCB credential exams, including:

- Pharmacy Technician Certification Exam® (PTCE®)
- Certified Compounded Sterile Preparation Technician® (CSPT®) Exam
- Technician Product Verification Certificate (TPV) Exam
- Medication History Certificate Exam

The online exam delivery option allows US residents to take their exam online from their own computer under the virtual supervision of a live proctor. The online exam system uses exam security features, including face-matching technology and ID verification.

Visit PTCB Help Center for [Testing During COVID-19 FAQs](#).

Questions?