



September 4, 2020

Dr. William H. Foege, Co-Chair
Dr. Helene D. Gayle, Co-Chair
Committee on Equitable Allocation of Vaccine for the Novel Coronavirus
National Academies of Science, Engineering, and Medicine
500 Fifth St. NW
Washington, DC 20001

Re: Discussion Draft of the Preliminary Framework for Equitable Allocation of COVID-19 Vaccine

Dear Co-Chairs Drs. Foege and Gayle:

The Academy of Managed Care Pharmacy (AMCP) thanks the National Academies of Science, Engineering, and Medicine (NASEM) for the opportunity to provide comments in response to its *"Discussion Draft of the Preliminary Framework for Equitable Allocation of COVID-19 Vaccine"* issued on September 1, 2020. We appreciate the opportunity to leverage our members' expertise in providing feedback on this discussion draft.

AMCP is the professional association leading the way to help patients get the medications they need at a cost they can afford. AMCP's diverse membership of pharmacists, physicians, nurses, biopharmaceutical professionals, and other stakeholders leverage their specialized expertise in clinical evidence and economics to optimize medication benefit design and population health management and help patients access cost-effective and safe medications and other drug therapies. AMCP members improve the lives of nearly 300 million Americans served by private and public health plans, pharmacy benefit management firms, and emerging care models.

AMCP thanks the Committee on Equitable Allocation of Vaccine for the Novel Coronavirus (the Committee) for its development of this thoughtful Preliminary Framework for the distribution of a COVID-19 vaccine when it becomes available. As the Committee continues its work and develops a final equitable allocation framework, we urge the Committee to optimize the use of pharmacists and pharmacies to meet the extraordinary vaccine distribution and administration needs. AMCP urges NASEM and the Committee to consider the following recommendations as the framework development process continues moving forward:

- 1. Allocation and distribution of a vaccine for the novel coronavirus must include pharmacies, and pharmacists must be authorized to administer any coronavirus vaccine given their high accessibility in the community, and**
- 2. Pharmacists must be included in Phase 1 of the allocation prioritization as frontline health care workers.**

1. *Allocation and distribution of a vaccine for the novel coronavirus must include pharmacies and pharmacists must be authorized to administer any coronavirus vaccine.*

Pharmacists are the most accessible health care provider in the community, with 90% of the U.S. population living within five miles of a pharmacy, including in underserved communities.¹ Pharmacists are also more easily accessible as appointments are rarely required to see a pharmacist, making them direct points of contact for individuals across the country. Pharmacies have been playing a vital role in ensuring that patients receive access to the care and medications that they need during the ongoing COVID-19 public health emergency (PHE). According to the results of a recent consumer survey conducted by AMCP and the Alliance of Community Health Plans, nearly half of all respondents (49%) report feeling “very comfortable” picking up prescriptions at their local pharmacy and speaking with their pharmacist about their medications. This confidence is critical, particularly as the survey results also showed that consumers are delaying visits with other health care practitioners due to safety concerns (41% report having delayed health care services and 38% report intentions to delay future care, treatment, or procedures).² Given that consumers have been comfortable visiting their local pharmacy during the PHE, allowing pharmacists to administer COVID-19 vaccines and including pharmacies for allocation and distribution is essential.

Hospitals and primary care physicians are overburdened by the ongoing COVID-19 PHE, and flu season will only exacerbate that strain. The Centers for Disease Control and Prevention (CDC) estimate that more than 34,000 flu deaths occurred during the 2018–2019 flu season, of which 75% were individuals age 65 and older.³ The CDC also estimates that 79% of deaths due to COVID-19 occurred in the 65 and older population.⁴ Pharmacists are uniquely positioned to help alleviate the burden on America’s health care system. Indicating that pharmacists play an important role in community vaccination and that they are highly trained and qualified to administer vaccines, every state authorizes pharmacists to administer vaccines to patients.⁵ The inclusion of pharmacists as immunizers has proven to be extraordinarily effective, helping to reduce the time needed to reach an 80% vaccination rate, the minimum rate required for herd immunity, by as much as seven weeks.⁶

The federal government has recognized the importance of pharmacists for immunization, particularly during the ongoing COVID-19 PHE. The Department of Health and Human Services (HHS) has authorized state-licensed pharmacists to order and administer vaccines to children between the ages of 3 and 18 years in order to correct a reported drop in childhood immunization rates as families delayed doctor appointments and missed routine vaccinations.⁷

¹ NCPDP Pharmacy File, ArcGIS Census Tract File. NACDS Economics Department.

² See: <https://achp.org/research-breakdown-of-changes-in-consumers-health-care-behavior-during-covid-19/>

³ Retrieved from CDC.gov: <https://www.cdc.gov/flu/about/burden/2018-2019.html>

⁴ Retrieved from CDC.gov: <https://data.cdc.gov/NCHS/Provisional-COVID-19-Death-Counts-by-Sex-Age-and-S/9bhg-hcku>

⁵ Cason D., Schmit, JD, et al., Expanding State Laws and a Growing Role for Pharmacists in Vaccination Services, (published online Aug. 12, 2017), available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5704925/>

⁶ Schwerzmann, Joy et al. “Evaluating the Impact of Pharmacies on Pandemic Influenza Vaccine Administration.” Disaster medicine and public health preparedness vol. 11,5 (2017), available at <https://pubmed.ncbi.nlm.nih.gov/28219461/>

⁷ See: <https://www.hhs.gov/about/news/2020/08/19/hhs-expands-access-childhood-vaccines-during-covid-19-pandemic.html>

Broad access to the immunization services of pharmacists for all patient populations is vital to achieving equitable access to COVID-19 vaccines for vulnerable populations and essential workers, as well as all equitable access to other clinically recommended vaccines to combat immunization rates that have fallen nationally since COVID-19 cases started increasing in the United States. **We strongly urge the Committee to include pharmacists and pharmacies in the allocation, distribution, and administration of any approved COVID-19 vaccine.**

2. Include pharmacists in Phase 1 of the allocation prioritization as frontline health care workers

Throughout the ongoing COVID-19 PHE, pharmacists have continued working on the front lines to ensure consumer access to needed medications and other health care services. As mentioned above, consumers have reported feeling comfortable visiting the pharmacy and discussing health care needs with a pharmacist, even as they have delayed accessing care in other clinical settings.⁸ Beyond ensuring that patients have access to their prescribed medications and providing other vaccinations, pharmacists throughout the PHE have also been counseling other health care providers and patients on medications for COVID-19 treatment and symptomatic support, compounding drugs to mitigate and prevent shortages, and offering expanded access to home delivery and curbside pick-up of prescriptions to minimize patients' exposure to the coronavirus.

Pharmacists provide direct patient services and serve as critical points of health care access. For underserved Americans, including many of those identified by the Committee as priority vaccine recipients and minority groups at higher risk, pharmacists are the only health professional they can easily access. Pharmacists often offer immediate care that is close and convenient to home and serve as a bridge between patients and other health care providers. This supports the key role pharmacists and pharmacies should have in ensuring patient access under an equitable allocation of the COVID-19 vaccine and supports including pharmacists in Phase 1 of the allocation prioritization as frontline health care workers.

The Preliminary Framework recommends that frontline health care workers be included in Phase 1 and states that these are "health professionals who are involved in direct patient care." As previously mentioned, pharmacists are engaged in direct patient care on a daily basis, increasing their risk of exposure to COVID-19 and potentially precluding them "from performing their professional duties if not adequately protected."⁹ Pharmacists are at high risk for 3 of the 4 risk criteria identified by the Committee for inclusion in Phase 1, including: Criterion 1: Risk of Acquiring Infection; Criterion 3: Risk of Negative Societal Impact; and Criterion 4: Risk of Transmitting Infection to Others given their status as direct patient care providers. Therefore, **the Committee should recommend that pharmacists be included for vaccination priority in Phase 1a as high-risk health care workers.**

Including pharmacists in Phase 1 of vaccination prioritization is consistent with the recommendation of the CDC's Advisory Committee on Immunization Practices (ACIP) COVID-19 Vaccine Workgroup that health care personnel, specifically including pharmacies, be included in the earliest stages of vaccination allocation.¹⁰ ACIP's COVID-19 Vaccine

⁸ See: <https://achp.org/research-breakdown-of-changes-in-consumers-health-care-behavior-during-covid-19/>

⁹ Discussion Draft of the Preliminary Framework for Equitable Allocation of COVID-19 Vaccine; page 54

¹⁰ See: <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-08/COVID-08-Dooling.pdf>

Workgroup also identifies other health care settings in which workers should be prioritized for vaccination, including hospitals and long term care facilities. It is important to note that pharmacists also work in these settings, reinforcing that pharmacists should be included in the earliest phases of vaccine allocation.

Conclusion

AMCP appreciates the opportunity to comment on the "Discussion Draft of the Preliminary Framework for Equitable Allocation of COVID-19 Vaccine." We thank NASEM and the Committee for its work in developing this thoughtful Preliminary Framework. We are committed to serving as a valuable resource to NASEM and the Committee as this work and the efforts to end the COVID-19 pandemic continue. If you have any questions regarding AMCP's comments or would like further information, please contact me at 703-684-2600 or scantrell@amcp.org.

Sincerely,

A handwritten signature in cursive script, appearing to read "Scantrell".

Susan A. Cantrell, RPh, CAE
Chief Executive Officer