FINAL/APPROVED

VIRGINIA BOARD OF PHARMACY MINUTES OF DRUG DONATION WORKGROUP

August 11, 2022

Department of Health Professions Perimeter Center 9960 Mayland Drive Henrico, Virginia 23233

CALL TO ORDER:

The workgroup meeting was called to order at approximately 9:10AM.

PRESIDING:

Dale St.Clair, PharmD, Chairman

MEMBERS PRESENT:

Kristopher Ratliff, DPh, Board of Pharmacy Wendy Nash, PharmD, Board of Pharmacy

Joseph Jadallah, PharmD, Virginia Pharmacists Association

Natalie Nguyen, PharmD, Virginia Society of Health-Systems Pharmacists

Rachel Becker, Virginia Hospital and Healthcare Association

Rebecca Butler, Virginia Association of Free and Charitable Clinics

Alexis Page, PharmD, Virginia Department of Health

STAFF PRESENT:

Caroline Juran, RPh, Executive Director, Board of Pharmacy

Erin Barrett, JD, Senior Policy Analyst, DHP

Beth O'Halloran, RPh, Deputy Executive Director, Board of Pharmacy Ryan Logan, RPh, Deputy Executive Director, Board of Pharmacy

Ellen Shinaberry, PharmD, Deputy Executive Director, Board of Pharmacy

QUORUM:

A quorum was established.

APPROVAL OF AGENDA:

The agenda was adopted as presented.

PUBLIC COMMENT:

The workgroup reviewed a handout of written comment from Sirum. No

other comment was offered.

BACKGROUND MATERIALS:

Dr. St. Clair and Ms. Juran provided an overview of the background materials included in the agenda packet. SB 14 passed during the 2022 General

Assembly Session directed the Board to convene a workgroup to evaluate any challenges and barriers to participation in the prescription drug donation program established pursuant 54.1-3411.1 and ways to increase program participation, education, and outreach. A report is due to the Governor and

General Assembly by December 1, 2022.

DISCUSSION:

Following a robust discussion, the workgroup offered the following

recommendations for inclusion in the report:

- 1. Evaluate benefits of a central donation/re-dispensing model;
- 2. Streamline Board of Pharmacy regulations;
- 3. Increase awareness of pharmacists and the public;
- 4. Increase free clinic participation;
- 5. Program should be revenue-neutral for participating pharmacies.

Evaluate benefits of a central donation/re-dispensing model

While Virginia does not track the success of the current drug donation program, it was believed that participation is low. Currently only 12 pharmacies are registered with the Board as collection sites for donated drugs. It was reported that free clinics receive a very small amount of donated drug for re-dispensing. The workgroup reviewed information from the National Conference of State Legislatures. It was speculated that the few states with robust programs may use a model involving a central collection and re-dispensing site for each state. Virginia's model is not centralized which may result in a lack of coordination and participation. The workgroup stated that an analysis of the various state models, including a determination of benefits, capacity, costs to state or local sites, and oversight, could be beneficial.

Streamline Board of Pharmacy regulations

The workgroup offered the following suggestions:

- Allow a site without a pharmacy to obtain a controlled substances registration for the purpose of participating as a collection site;
- Request Board to create templates, e.g., donor form, and post online for use by collection sites;
- Amend regulation to allow donation of hazardous drugs, e.g., cancer drugs, or limit ineligibility to injectable hazardous drugs or allow pharmacist to determine if formulation is safe for re-dispensing; and,
- Change expiration date associated with eligibility of donated drugs from 90 days to 60 days.

Increase awareness of pharmacists and the public

The workgroup offered the following suggestions for increasing pharmacist awareness:

- Create Frequently Asked Question (FAQ) document for Board website regarding drug donation program to increase awareness and understanding of requirements;
- Determine if the Drug Supply Chain Security Act applies to donated drugs and if not, include in a FAQ;
- Send FAQs to licensees via email and mail:
- Request professional pharmacy associations to highlight drug donation program allowances in their communications;

- Include field on pharmacy permit application and renewal for pharmacy to register as a donation site; and,
- Include question on annual pharmacist workforce survey to collect data regarding their pharmacy's level of participation with drug donation.

The workgroup offered the following suggestions for increasing public awareness:

- Media campaign by VDH or free clinics;
- Partner with schools for collecting unclaimed drugs at end of year;
- Partner with drug take-back events for collecting eligible drugs, in lieu of destruction; and,
- Develop brochures or handouts.

Increase free clinic participation

It was noted that very few free clinic pharmacies are registered collection sites, likely due to lack of awareness or product being donated. The following suggestions were offered:

- Encourage all free clinic pharmacies to register with the Board as a donation site:
- Determine if a central free clinic pharmacy could collect and redispense donated drugs to all free clinics using the allowance for alternate delivery;
- Obtain feedback from currently participating clinics regarding what's working and what's not;
- Explore ability for free clinic without a pharmacy permit, but with a controlled substances registration to re-dispense donated drug; and,
- Request clinics create a list of drugs needed and communicate to donation sites for awareness.

Program should be revenue-neutral for participating pharmacies

It was noted that pharmacies continue to struggle financially with third-party reimbursement rates. Costs associated with the administrative burden of determining eligibility of donated drugs and transferring them to a hospital or free clinic for re-dispensing to qualifying indigent patients may deter pharmacy participation. To increase participation, it was stated that a drug donation program should be revenue-neutral. An incentive of a tax deduction for participating pharmacies or individuals should also be considered.

MEETING ADJOURNED:

With all business concluded, the meeting adjourned at approximately 11:30AM.

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Caroline Juran, Executive Director	
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