



Addressing the COVID-19 Crisis: An Open Forum Webinar Series for Pharmacy

May 13, 2021

For Every Pharmacist. For All of Pharmacy.

[pharmacist.com](https://www.pharmacist.com)



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Executive Vice President
SinfoniaRx a TRHC Solution

President
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Host and Moderator

Today's Webinar

Discuss the long-term effects of COVID-19 and the advantages of COVID-19 vaccination.

Conducted in collaboration with the Society for Infectious Diseases Pharmacists (SIDP).





**Christopher Bland, PharmD, FCCP, FIDSA,
BCPS**

Clinical Associate Professor
University of Georgia College of Pharmacy

Guest Speaker



Stephan Foster, PharmD, FAPhA

APhA Liaison to ACIP

CAPT (Ret.), U.S.P.H.S.

Guest Speaker



Mitch Rothholz, RPh, MBA

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Executive Director
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Subject Matter Expert: Q&A



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Disclosures

Chris Bland, PharmD, FCCP, FIDSA, BCPS has provided the following disclosures:

- WebMD: CE article author

Stephan Foster, PharmD, FAPhA has provided the following disclosures:

- Dynavax: Advisory Committee/Board Member
- Merck Vaccine: Speaker's Bureau
- Pfizer: Advisory Committee/Board Member, Speaker's Bureau
- Seqirus: Advisory Committee/Board Member (Status: Ongoing), Speaker's Bureau
- Valneva: Advisory Board

Mitchel C. Rothholz, RPh, MBA, has provided the following disclosures:

- Merck: Advisory board member, Spouse employer
- Pfizer: Advisory board member

All other individuals involved in the development of this material declare no conflicts of interest, real or apparent, and no financial interests in any company, product, or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria. APhA's editorial staff declare no conflicts of interest or financial interests in any product or service mentioned in this activity, including grants, employment, gifts, stock holdings, and honoraria. For a complete list of APhA staff disclosures, please visit the APhA website at www.pharmacist.com/apha-disclosures.

Learning Objectives

1. Discuss COVID-19 disease and what is known about the systemic impact of infection.
2. Describe common symptoms that result from the long-term effects of COVID-19 infection.
3. Compare the impact of COVID-19 disease against known adverse effects of COVID-19 vaccine.
4. Articulate the advantages of COVID-19 vaccination in the context of the long-term effects of COVID-19 disease.

A number of long-term side effects of COVID-19 occur in many body systems due to the virus initially entering into which receptor?

- a) ACE2
- b) PDP2
- c) ACE3
- d) PDP3

Thrombosis with thrombocytopenia was the cause of the temporary pause in the use of which one of the following COVID-19 vaccines used in the United States?

- a) Pfizer-BioNTech mRNA vaccine
- b) Moderna mRNA vaccine
- c) Janssen/J&J adenovirus vector vaccine
- d) AstraZeneca adenovirus vector vaccine

Considering the dozens of vaccines developed over the last 100 years, vaccine-related side effects are almost always detected within _____ after vaccination.

- a) 6 weeks
- b) 6 months
- c) 1 year
- d) 3 years

Format for Today's Webinar

- 1:00pm:** Introductions
- 1:05pm:** Discussion with Chris Bland and Stephan Foster
- 1:25pm:** Open Forum Discussion: Share Your Questions & Thoughts
- 1:50pm:** Review of APhA's Ongoing Activities & What's Coming

Open Forum Ground Rules

- Use the **Questions** field on the GoToWebinar toolbar to submit comments and questions related to the topic discussion.
- We will try to get to as many comments and questions as possible!
- Refer to the **Handout** in the GoToWebinar toolbar to access today's slides and links to resources.
- This webinar recording will be available in 24 hours.
- CE is only available during the live webinar.

Discussion with Chris Bland and Stephan Foster

Discuss the long-term effects of COVID-19 and the advantages of COVID-19 vaccination.

Manifestations of COVID-19: Multi-system Involvement

Dermatologic

Cardiac

Endocrine

Gastrointestinal

Neurologic

Thromboemboli
sm

Hepatic

Renal

Safety Monitoring

Click on each picture to visit the site!

VAERS is the nation's early warning system for vaccine safety



VAERS

Vaccine Adverse Event Reporting System



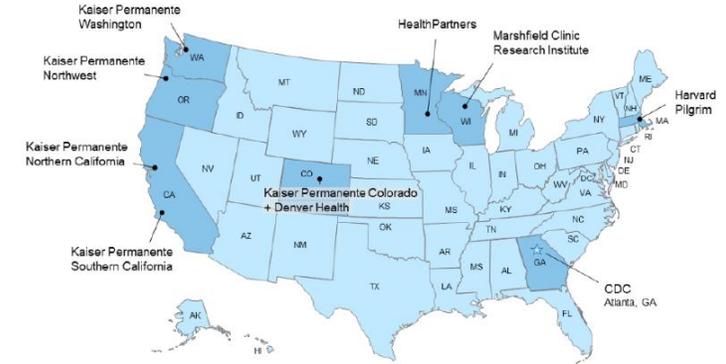
NATIONWIDE



Use your smartphone to tell CDC about any side effects after getting the COVID-19 vaccine. You'll also get reminders if you need a second vaccine dose.



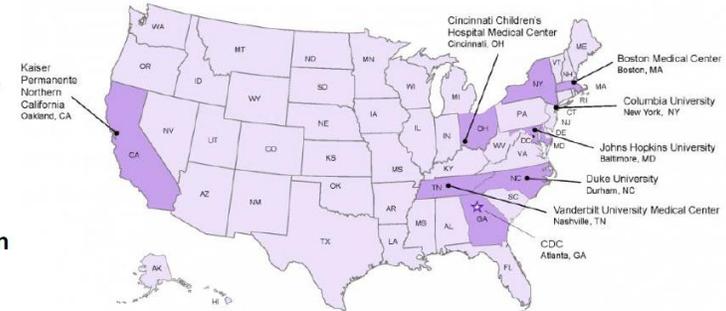

VSD
Vaccine Safety Datalink



- 9 participating integrated healthcare organizations
- Data on over 12 million persons per year



CISA
Clinical Immunization Safety Assessment (CISA) Project



- 7 participating medical research centers with vaccine safety experts
- clinical consult services*
- clinical research

*More information about clinical consults available at <http://www.cdc.gov/vaccinesafety/Activities/CISA.html>

Vaccine Safety Resources

- **U.S. COVID-19 Vaccine Product Information**
- **COVID-19 ACIP Vaccine Recommendations**
- **Emergency Preparedness and Vaccine Safety**
- **Vaccine Safety**
- **Vaccines: COVID-19**

Pfizer/BioNTech authorized for 12-15yo administration

As of May 12, 2021

- Same dose as adults (0.3ml), 2 doses 21 days apart
- Same post-vaccination observation time and processes (15 or 30 minutes)
 - Specifically pay attention to potential syncope
- Inform caregiver of potential vaccine related reactions (local (sore arm, redness at injection site, etc), systemic (fatigue, etc))
 - Post vaccination use of acetaminophen or ibuprofen
- Monitor for safety – V-safe updated to allow parental input and management
- Co-administration permitted with other vaccines – no time interval
 - COVID-19 vaccines can be given on the same day as other routine vaccines instead of waiting 14 days - intended to help boost rates of routine adolescent immunizations, which have seen a sharp decline during the pandemic
 - Applies to all authorized COVID vaccinates
- MMWR release expected on Friday, May 14
- Vial carton shipping size will be modified for smaller quantities

Open Forum Discussion: Share Your Questions & Thoughts

Review of APhA's Ongoing Activities & What's Coming

Recognizing Pharmacists As Providers

Evidence shows that pharmacists make a significant impact on patients' health outcomes and overall health and reduce health care costs. Provider status would align reimbursement with the services pharmacists are trained to provide and give underserved patients more access to crucial care.

Provider Status Legislation Would

- ➔ allow pharmacists in underserved areas to bill Medicare Part B for services within pharmacists' state scope of practice delivered to Medicare beneficiaries
- ➔ and be reimbursed at 85% of the physician fee schedule.

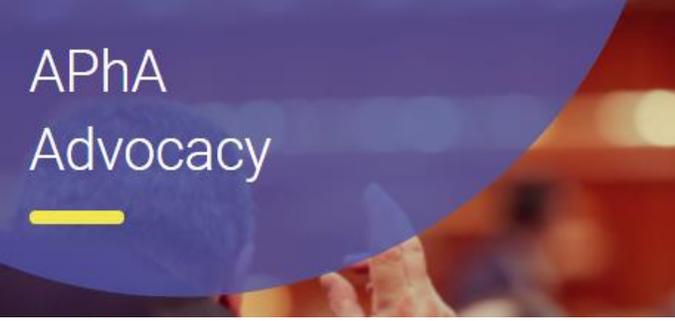
Provider Status Legislation Would Not

- ➔ apply to all Medicare Part B beneficiaries, or
- ➔ grant pharmacists new practice authorities. It would only increase access to already-authorized services.

<https://pharmacist.com/Advocacy/Issues/Medicare-Provider-Status-Recognition>

Contact Congress Today!

Use APhA's pre-written, editable advocacy alert to ask your U.S. Senators and Representative to cosponsor the Pharmacy and Medically Underserved Areas Enhancement Act, H.R. 2759/S. 1362 , or thank them if they have already signed on.



Federal Lawsuit Challenging Retroactive DIR Fees: *NCPA V Becerra*

For years, APhA, its pharmacy partners, and community pharmacies have screamed into the void about retroactive clawbacks from PBMs working with Medicare Part D plan sponsors. PBMs use pharmacies to close their doors, and endanger access to pharmacist-provided care. Now, APhA has signed on as an equal partner in a **federal lawsuit** demanding that HHS take responsibility and

The Complaint

A 2014 **HHS final rule** created a regulatory loophole that allows PBMs to extract fees from pharmacies weeks or months after they dispense prescriptions to Part D patients. While other types of PBM-negotiated price concessions are reflected at the pharmacy counter, a "narrow exception" in the rule characterizes retroactive DIR fees as "price concessions that cannot reasonably be determined at the point of sale." The HHS "exception" has proven to be anything but narrow. Instead, PBMs have exploited the loophole to use retroactive DIR clawbacks as a new revenue stream. HHS even admitted in a proposed rule, that "pharmacy price concessions [including retroactive DIR fees] grew more than 45,000% between 2010 and 2017." PBMs have created a new revenue stream for themselves by destabilizing pharmacy businesses, pocketing savings that rightly belong to Part D patients, and endangering access to pharmacist-provided patient care.

The Problem

PBMs extract retroactive DIR fees from pharmacies weeks or months after they dispense prescriptions to Medicare Part D patients. The fees are based on PBM and Medicare Part D plan "savings," generated by requiring price concessions for pharmacies to be part of their networks. However, since beneficiaries' point-of-sale prices or copays at the pharmacy counter are based on the contracted price before retroactive DIR is extracted, beneficiaries end up paying higher out-of-pocket costs for their prescription drugs.

Furthermore, the retroactive nature of the fees prevents pharmacy businesses from determining whether they can afford to stay open—and many cannot. An October 2019 **paper** published in *JAMA Internal Medicine* reported that one in eight pharmacies closed between 2009 and 2015. Independent pharmacies operating in underserved



Know the Facts (Practice Resources)

Visit the COVID-19 Practice Resource Library

New Resources:

- **HRSA COVID-19 Uninsured Program and Coverage Assistance Fund: Updates for Pharmacy**
- **COVID-19 Vaccine Pharmacy Provider Tool**

Updated:

- **COVID-19 Summary Chart**

APHA COVID-19 RESOURCES: KNOW THE FACTS

HRSA COVID-19 Uninsured Program and Coverage Assistance Fund

Updates for Pharmacy

Pharmacies can be reimbursed for the provision of COVID-19 services, testing, treatment, and vaccine administration to uninsured individuals through the [HRSA COVID-19 Uninsured Program](#). Providers must attest that individuals have no insurance coverage. For individuals who have insurance but whose insurance does not cover COVID-19 services or covers the services with patient cost sharing, providers can collect reimbursement through the [HRSA COVID-19 Coverage Assistance Fund](#).

This resource details instructions specifically for pharmacies.

HRSA COVID-19 Uninsured Program

APHA met with the program lead for UnitedHealth Group, who administers the Health Resources and Services Administration (HRSA) COVID-19 Uninsured Program, to learn how pharmacies can avoid delays in enrollment and payment for providing COVID-19 services. Pharmacies can be reimbursed for COVID-19 service claims provided to eligible patients within the previous 12 months. So it is important to collect necessary patient information, even if you aren't yet fully enrolled in the program.

It is important to note that this program functions like a medical payment is expected to be the same as the Medicare rates for the program and then work with their medical intermediary to submit claims.

The following instructions are detailed for pharmacies. Visit the general enrollment and reimbursement instructions.

Enrollment

- 1) Create an account to [obtain a One Healthcare ID](#) (former program portal).
- 2) Validate your pharmacy's Taxpayer Identification Number for the "Healthcare Relief Program," NOT "Medical," as your mark quickly. You will need to identify one program administrator program administrator can be transferred at any time. The administrator must be approved.
- 3) Set up Optum Pay ACH payments to be reimbursed **AND** is validated, you can move on to both of the following steps. If completed concurrently, it could take a few days to be processed by the program. Helpful video explanations are [how to complete the provider roster](#).

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APHA COVID-19 RESOURCES: KNOW THE FACTS

COVID-19 Vaccine Pharmacy Provider Tool

This tool provides a comprehensive list of references and recommendations to help you verify that your pharmacy and staff are ready to administer COVID-19 vaccines—extending from initiation of a program to follow-up with additional doses and patient care continuity. Depending on where you are providing COVID-19 vaccines, your pharmacy or institution may have established a process. So, use this tool to identify additional learning opportunities and perform programmatic continuous quality improvement.

This tool includes references and recommendations for:

- Education and Training

APHA COVID-19 RESOURCES: KNOW THE FACTS

COVID-19 Vaccine Summary Chart

Find the following information in this quick reference for pharmacy:

- Quick links and guidance
- Dosing and administration
- Storage
- Dose preparation
- Efficacy and safety information
- Clinical considerations
- Special populations
- Ingredients

Quick Links

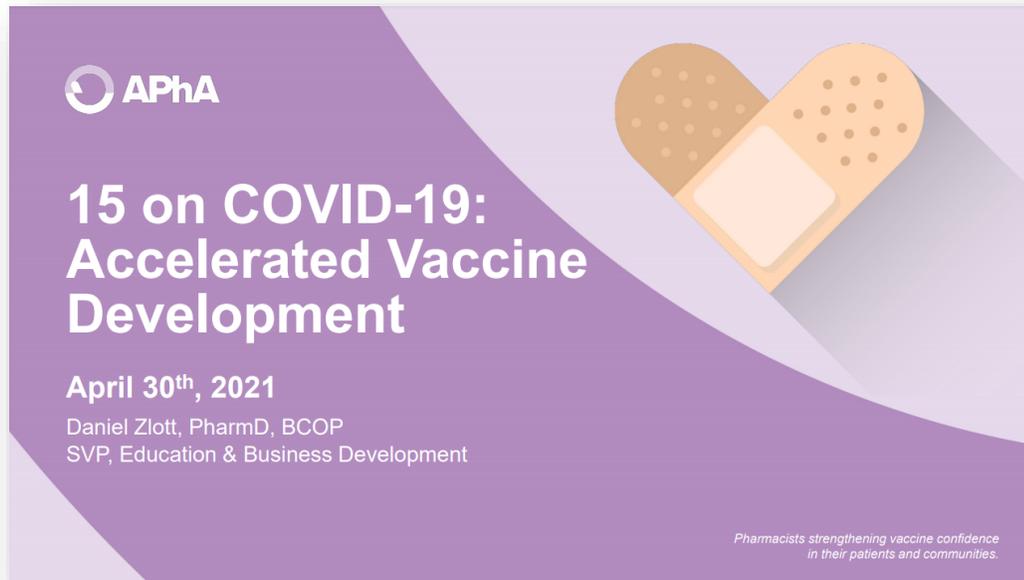
- CDC: [Frequently Asked Questions about COVID-19 Vaccination](#)
- CDC: [Understanding and Explaining Viral Vector COVID-19 Vaccines](#)
- FDA: [COVID-19 Vaccines](#)
- CDC: [V-safe After Vaccination Health Checker](#)
- CDC: [VaxText™ COVID-19 Vaccination Second-Dose Reminder](#)
- USP: [COVID-19 Vaccine Handling: Operational Considerations for Healthcare Practitioners](#)

Vaccine	Pfizer-BioNTech (BNT162b2)	Moderna (mRNA-1273)	Janssen (Ad26.CoV2.S)
EUA	Issued December 11, 2020	Issued December 18, 2020	Issued February 27, 2021
Fact sheet	<ul style="list-style-type: none"> • Health care providers • Recipients/caregivers 	<ul style="list-style-type: none"> • Health care providers • Recipients/caregivers 	<ul style="list-style-type: none"> • Health care providers • Recipients/caregivers
ACIP	Interim recommendation for use: Persons aged ≥16 years for prevention of COVID-19	Interim recommendation for use: Persons aged ≥18 years for prevention of COVID-19	Interim recommendation for use: Persons aged ≥18 years for prevention of COVID-19
CDC resources	Pfizer-BioNTech COVID-19 Vaccine	Moderna COVID-19 Vaccine	Janssen COVID-19 Vaccine
CDC clinical considerations	Interim Clinical Considerations		

Continues.

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[Access APhA's
Library of COVID-19
Education \(CPE\)](#)



[15 on COVID-19: Accelerated Vaccine Development](#)

0.25 hours CPE

Pharmacists have been getting lots of questions about how it was possible to safely develop COVID-19 vaccines so quickly. Join us for this episode of our 15 on COVID-19 series to learn more about the COVID-19 vaccine development process.



[Know the Facts: COVID-19 Vaccines and Vaccine Confidence](#)

Test your knowledge about vaccine confidence basics.

Join us on May 25 for a National Town Hall on Building Vaccine Confidence!

May 25th from 7:00-8:30 pm ET

Share your experiences, successes, concerns, challenges, strategies, and messages around building vaccine confidence in your communities!

We want to hear from you! What's working? What's challenging?
What resources are needed?



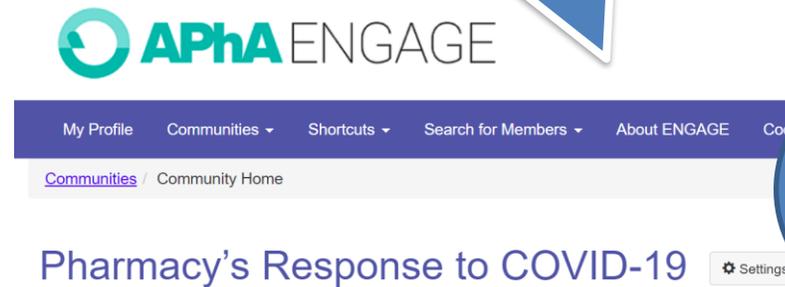
[Register Here!](#)

Post on ENGAGE

Pharmacy's Response to COVID-19

POST your questions
SHARE your lessons learned
SUPPORT your colleagues
ACCESS the latest information

What are the top concerns you're hearing about COVID-19 vaccines?



What resources have you shared with patients?



Join Us!

Thursday, May 27, 1:00-2:00 pm ET

Motivational Interviewing to Address Vaccine Confidence
CDC Sponsored

CPE Available & Registration Coming Soon!

Today's webinar will be available within 24 hours

<https://aphanet.pharmacist.com/coronavirus/weekly-webinars>

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To claim CE...

1. After the webinar ends, return to the “My Training” page on pharmacist.com (<http://elearning.pharmacist.com/my-training>)
2. Log in using your pharmacist.com username and password
3. Click on the “The Long-term Effects of COVID-19 Disease: Impact on Patient Care” session listed in your enrollments
4. Click on “The Long-term Effects of COVID-19 Disease: Impact on Patient Care” under the “Activities” heading
5. Enter the attendance code
6. Complete the evaluation
7. Claim credit