

2022-2023 New Business Review Committee Report

San Antonio, Texas

March 19, 2022

The APhA House of Delegates New Business Review Committee (NBRC) met on Saturday, March 19, 2022, and presents the following report. Added language is shown in red and underlined while language proposed to be removed is shown in red with a ~~strike-through~~:

NBI #1 – 2018 Integration of a National Immunization Information System (IIS)

The APhA New Business Review Committee recommends **ADOPTION** of New Business Item #1 Whole Numbered Statement #1 as **AMENDED**.

3. APhA calls for a National Immunization Information Systems (IIS) ~~database~~ to receive and report ~~all immunization data~~ vaccination data from among all ~~state~~ registries for the purpose of providing ~~pharmacists and other~~ health care professionals with accurate and timely information to assist in clinical decision making ~~related to immunization services~~.

Committee Comments on NBI #1: The NBRC recommends removing the word “state” to broaden the scope of the policy to include all forms of registries such as municipal, local, state, and territorial registries. This feedback was provided by delegates during webinars and the open hearing. Other recommended amendments to this statement are to simplify the statement and more accurately reflect the original intent of the New Business Item author.

The APhA New Business Review committee moves a substitute motion to present new statements in place of New Business Item #2 and New Business Item #7.

The APhA New Business Review Committee recommends **ADOPTION** of Substitute Motion - Whole Numbered Statement #1 as **WRITTEN**.

1. APhA supports the expansion of patient access to diabetes education, support, and prevention, including but not limited to the National Diabetes Prevention Program or DSME/S.

The APhA New Business Review Committee recommends **ADOPTION** of Substitute Motion - Whole Numbered Statement #2 as **WRITTEN**.

2. APhA calls upon public and private payers to expand reimbursement for pharmacist-based services as providers of diabetes education, support, and prevention regardless of practice setting.

The APhA New Business Review Committee recommends **ADOPTION** of Substitute Motion - Whole Numbered Statement #3 as **WRITTEN**.

3. APhA advocates for campaigns focused on increased community wellness awareness and health benefits for diabetes education, support, and prevention.

Committee Comments on Substitute Motion: The NBRC recommends adoption of these three statements to substitute the prior submissions of new business items 2 and 7. Delegates recommended combination of these two separate new business items during multiple webinars and the APhA2022 open hearing. The committee has developed this substitute motion to streamline the process for handling the combined new statements. Additionally, the NBRC wished to have the Speaker of the House add policy statement 2012, 1981 Pharmacist Training in Nutrition into the 2022-2023 policy review committee's charge to consider incorporation of exercise within these two statements as mentioned in the background of new business item 7.

NBI #2 – Reimbursement for Diabetes Education Services

The APhA New Business Review Committee recommends REJECTION of New Business Item #2 Whole Numbered Statement #1 as WRITTEN.

1. APhA supports the expansion of patient access to diabetes self-management education and support.

The APhA New Business Review Committee recommends REJECTION of New Business Item #2 Whole Numbered Statement #2 as WRITTEN.

2. APhA calls upon public and private payers to recognize and reimburse pharmacists as providers of diabetes self-management education and support regardless of practice setting.

The APhA New Business Review Committee recommends REFERRAL of New Business Item #2 Whole Numbered Statement #3 as WRITTEN.

3. APhA supports the development of a guide for pharmacists seeking appropriate reimbursement from payors for diabetes self-management education and support.

Committee Comments on NBI #2: The NBRC recommends delegates review the presented substitute motion found on page 1 of this report that will be presented by the Committee. This substitute motion is to meet feedback from delegates to efficiently combine new business items 2 and 7. If approved, the substitute motion will replace new business items 2 and 7 entirely. If the substitute motion fails, then delegates will consider the recommendations for new business items 2 and 7 as listed within this report.

NBI #3 – Data to Advance Health Equity

The APhA New Business Review Committee recommends ADOPTION of New Business Item #3 Whole Numbered Statement #1 as AMENDED.

1. APhA urges pharmacists to use patient-specific data and their social determinants of health ~~evidence-based data~~ to address health ~~inequities~~ disparities, ~~equitably distribute resources~~, and drive decision-making in ~~advocacy and~~ practice and public health advocacy.

The APhA New Business Review Committee recommends REFERRAL of New Business Item #3 Whole Numbered Statement #2 as WRITTEN.

2. APhA supports the collection, analysis, reporting, and exchange of disaggregated data regarding race, ethnicity, language, sexual orientation, gender identity, and social determinants of health in partnership with the impacted communities.

Committee Comments on NBI #3 statement #2– The NBRC recommends referral of this statement to the Board of Trustees for additional review of the language to ensure this is the best process and list of disaggregated data. Additionally, this statement may be read as implementation for other statements within this policy topic and the Board is encouraged to review other opportunities to implement this statement during its review.

The APhA New Business Review Committee recommends REJECTION of New Business Item #3 Whole Numbered Statement #3 as WRITTEN.

3. APhA urges schools and colleges of pharmacy to prioritize and incentivize the collection and analysis of disaggregated data as part of institutional research efforts towards health equity.

Committee Comments on NBI #3 statement #3: The NBRC reviewed multiple comments from delegates regarding this statement reading as an implementation step and that it should only apply to specific institutions or researchers who engage in this type of work.

NBI #4 – Procurement Strategies and Patient Steerage

The APhA New Business Review Committee recommends REFERRAL of New Business Item #4 Whole Numbered Statement #1 as WRITTEN.

1. APhA supports medication procurement strategies that meet chain of custody standards for pharmaceutical products moving from one entity to another; ensuring the exchanges are accurate, timely, and follow best practices prior to administering the product to the patient; and preserve the economic viability of pharmacy practices.

The APhA New Business Review Committee recommends REFERRAL of New Business Item #4 Whole Numbered Statement #2 as WRITTEN.

2. APhA opposes required procurement strategies (e.g., site of care steerage, brown bagging, and white bagging) that restrict the patient's and providers' ability to choose treatment options that may lead to or result in fragmented care between the patient, pharmacist, and other healthcare providers.

The APhA New Business Review Committee recommends REFERRAL of New Business Item #4 Whole Numbered Statement #3 as WRITTEN.

3. APhA calls for the creation of operational efficiencies that allow the patient's choice of pharmacy and site of care; do not restrict or delay care; and ensure continuity of care through collaborative efforts between providers that leads to optimal patient health outcomes.

Committee comments on NBI #4: The NBRC recommends referral of all four policy statements within this new business item for further review of the language. The NBRC recommended this as a potential policy topic to be considered through the formal policy development process as opposed to the new business item process.

NBI #5 – Pharmacists Prescriptive Authority and Increasing Access to Medications for Opioid Use Disorders

The APhA New Business Review Committee recommends **ADOPTION** of New Business Item #5 Whole Numbered Statement #1 as **AMENDED**.

APhA ~~advocates for pharmacist prescriptive authority of buprenorphine to expand patient access to opioid use disorder treatment. supports expanding access to medication-assisted treatments (MAT) by permitting pharmacists' prescriptive authority for the management of substance use disorders.~~

Committee Comments on NBI #5: The NBRC recommends amending the statement to align with the intent as defined in the background materials that specifically note buprenorphine. Additionally, substance use disorders has been changed to opioid use disorder treatment to reflect comments from delegates during open hearing sessions.

NBI #6 – Supporting the Integration of Pharmacists into the Clinical Research Workforce

The APhA New Business Review Committee recommends **REFERRAL** of New Business Item #6 Whole Numbered Statement #1 as **WRITTEN**

1. APhA supports the integration of pharmacists as clinical research team members in all forms of clinical research, including but not limited to healthcare outcomes research, pre-marketing clinical trials, and post-marketing studies.

The APhA New Business Review Committee recommends **REFERRAL** of New Business Item #6 Whole Numbered Statement #2 as **WRITTEN**.

2. APhA encourages pharmacists and student pharmacists to build clinical research enterprise knowledge and specialized skills.

Committee Comments on NBI #6: The NBRC believes these statements can be integrated into existing work of the APhA member academies and through ongoing projects within APhA. As such, the Committee recommend referring both statements to the Board of Trustees for implementation into ongoing activities.

NBI #7 – Pharmacist and Pharmacy Technician Roles in Type 2 Diabetes Prevention

The APhA New Business Review Committee recommends **REJECTION** of New Business Item #7 Whole Numbered Statement #1 as **WRITTEN**.

1. APhA advocates for the recognition and utilization of pharmacists, student pharmacists, and pharmacy technicians to address diabetes prevention, such as through Centers for Disease Control and Prevention's (CDC) National Diabetes Prevention Program's (National DPP) lifestyle change program.

The APhA New Business Review Committee recommends **REJECTION** of New Business Item #7 Whole Numbered Statement #2 as **WRITTEN**.

2. APhA advocates for campaigns focused on increased community wellness awareness and health benefits knowledge in areas such as healthy eating and physical exercise for diabetes prevention and diabetes self-management education and support (DSMES). APhA recommends expanding the pharmacist's role and pharmacy services, and building on the competencies noted in "EDUCATION, CURRICULUM AND COMPETENCE FOR PHARMACISTS, Pharmacist Training in Nutrition" to leverage pharmacists and pharmacies as a means of increasing patient education on nutrition and physical exercise in relation to diabetes prevention and DSMES.

The APhA New Business Review Committee recommends **REJECTION** of New Business Item #7 Whole Numbered Statement #3 as **WRITTEN**.

3. APhA encourages the development of pharmacy curricula and continuing education on the topics of diabetes prevention and health promotion through improvements in modifiable risk factors.

Committee Comments on NBI #7: The NBRC recommends adoption of these three statements to substitute the prior submissions of new business items 2 and 7. Delegates recommended combination of these two separate new business items during multiple webinars and the APhA2022 open hearing. The committee has developed this substitute motion to streamline the process for handling the combined new statements. Additionally, the NBRC wished to have the Speaker of the House add policy statement 2012, 1981 Pharmacist Training in Nutrition into the 2022-2023 policy review committee's charge to consider incorporation of exercise within these two statements as mentioned in the background of new business item 7.

NBI #8 – 2007 Pharmacy Personnel Immunization Rates

The APhA New Business Review Committee recommends **ADOPTION** of New Business Item #8 Whole Numbered Statement #1 as **AMENDED**.

3. APhA encourages federal, state, and local public health officials to recognize pharmacists, student pharmacists, pharmacy technicians, and pharmacy support staff among the highest priority groups to receive medications, ~~and immunizations~~ vaccinations, and other protective measures as essential healthcare workers. ~~during pandemics, and/or other disaster preparedness, or emergency response situations~~

Committee Comments on NBI #8: The New Business Review Committee reviewed the other two statements within the 2007 policy statement and the proposed amendments are intended to put this policy more in line with the original intent.

NBI #9 – Pharmacists’ application of professional judgment

The APhA New Business Review Committee recommends **ADOPTION** of New Business Item #9 Whole Numbered Statement #1 as **AMENDED**.

1. APhA supports pharmacists, as licensed health care professionals, in their **unrestricted** use of professional judgment throughout the course of their practice to act in the best interest of patients.

Committee Comments on NBI #9 statement #1: The NBRC recommends removing the word unrestricted to more accurately reflect the appropriate use of professional judgement in practice.

The APhA New Business Review Committee recommends **ADOPTION** of New Business Item #9 Whole Numbered Statement #2 as **WRITTEN**.

2. APhA asserts that a pharmacist's independent medication review and use of professional judgment in the medication distribution process is essential to patient safety.

The APhA New Business Review Committee recommends **ADOPTION** of New Business Item #9 Whole Numbered Statement #3 as **AMENDED**

3. APhA opposes ~~the creation of~~ state and federal laws that ~~negate~~ **limit** a pharmacist's right to exercise professional judgment in the best interest of patients' clinical outcomes.

The APhA New Business Review Committee recommends **ADOPTION** of New Business Item #9 Whole Numbered Statement #4 as **AMENDED**.

4. APhA calls for civil, criminal, and legal liability protections for pharmacists ~~and pharmacies~~ if ~~the right~~ **their responsibility** to use professional judgment is limited by state and federal laws.

Committee Comments on NBI #9 statement #4: The NBRC discussed that protections for pharmacists and pharmacies are different subjects in the context of professional judgment.

Urgent New Business Item #1 – Addressing American Medical Association’s Policy Related to Pharmacists Scope of Practice

The APhA New Business Review Committee recommends **ADOPTION** of Urgent New Business Item #1 Whole Numbered Statement #2 as **AMENDED**.

2. APhA ~~urges~~ calls on the American Medical Association (AMA) to rescind its policies ~~y~~ opposing expanded scopes of practice for ~~pharmacists practitioners, such as pharmacists,~~ who ~~can aim to~~ increase access to care, address health inequity, and improve health outcomes, ~~and to reconcile AMA policy with AMA’s efforts to address public health equity and access to care.~~

The APhA New Business Review Committee recommends **ADOPTION** of Urgent New Business Item #1 Whole Numbered Statement #3 as **AMENDED**.

3. APhA ~~adamantly supports the continuation and expansion of calls for collaboration~~ collaborative patient care models among between medicine and pharmacistsy, physicians, and other healthcare professionals to ~~identify and implement patient care models that~~ promote patient access to care and health equity.