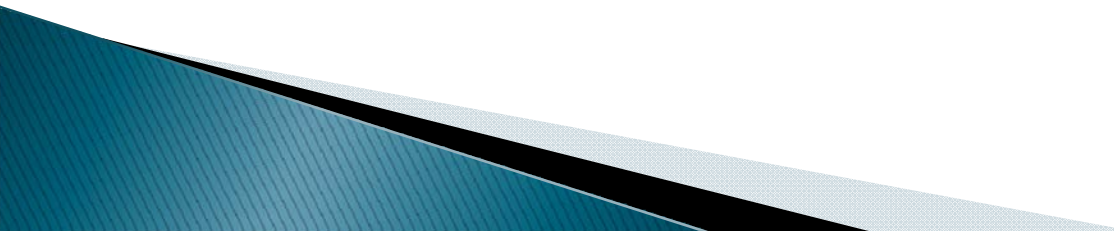


# **What's New in Pharmacy Immunizations**

Brenna Neumann, Pharm.D.

November 19, 2010

# Learning Objectives

1. Identify opportunities for pharmacists to facilitate immunization advocacy and delivery.
  2. Discuss the legal and regulatory issues involved with pharmacy-based immunization programs in Missouri.
  3. Review pharmacists authority to immunize per protocol and per medical prescription order.
  4. List record keeping and notification requirements.
  5. Identify opportunities for community collaborations.
- 

# Pharmaceutical Care

- ▶ Pharmaceutical care is the provision of drug therapy to achieve outcomes that improve a patient's quality of life—these outcomes are<sup>1</sup>:
  - Cure of a disease
  - Elimination or reduction of symptoms
  - Arresting or slowing of a disease process
  - Preventing a disease or symptoms

1. Hepler CD, Strand LM. *Am J Hosp Pharm.* 1990;47:533-43.

# Pharmacists Role

## Advocate

- Educating
- Motivating

## Facilitator

- Hosting vaccination events
- Bring in other vaccine providers

## Immunizer

- Administer

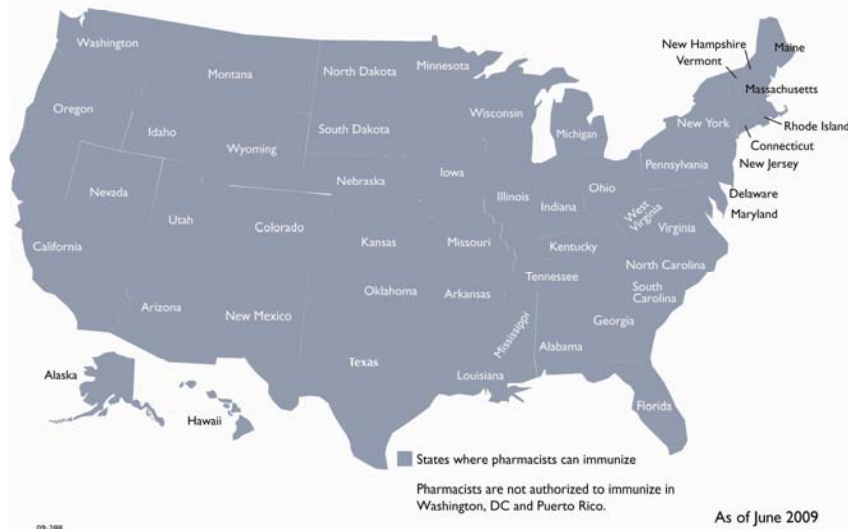
# Advocacy



Education

# Access to Immunizations

## States Where Pharmacists Can Immunize



Pharmacists immunize in all 50 states including Puerto Rico and the District of Columbia

# HEALTHY PEOPLE 2010/2020



# Access to Immunizations

- ▶ ~1,300 pharmacists are registered with the Missouri Board of Pharmacy to administer immunizations
  
- ▶ Pharmacist immunize in a variety of settings
  - Community-based
  - Work-site provided immunizations

# Access to Immunizations

- ▶ Out-of-pocket (i.e., self-pay)
- ▶ Patient reimbursement through employer plans
  - Applied to deductibles, health savings accounts, or flexible spending accounts
- ▶ Private employers (to reduce absenteeism)
- ▶ Medicaid
- ▶ Third-party insurance payers
- ▶ Medicare
  - Part B Vaccines (influenza, pneumococcal)
  - Part D Vaccine (i.e. herpes zoster, Td, Tdap...)



# Scope of Practice in MO

## Chapter 338

## Pharmacists and Pharmacies

## Section 338.010

August 28, 2010

<http://www.moga.mo.gov/statutes/C300-399/3380000010.HTM> -

CSR 2220-6.040; CSR 220-6.050; CSR 2220.6.055

# Steps to becoming a Missouri Pharmacist Immunizer

- ▶ Hold an unrestricted MO license to practice pharmacy
- ▶ Successfully complete an approved certificate program
  - Typically 18-20 hour program encompassing a self-study portion, one-two day live CE session, administration technique training and evaluation, and 100 question written exam.
- ▶ Complete a minimum of 2 hours of continuing education each calendar year related to administration of vaccines
- ▶ Hold current provider level CPR certificate
- ▶ Submit notification to the Missouri Board of Pharmacy on an annual basis

# Pharmacist Authority to Immunize

## Per:

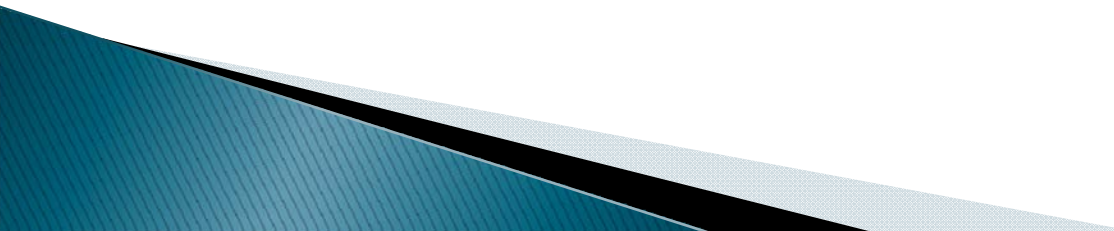
### Protocol

- MO Physician

### Medical Prescription Order

- Physician
- NP

# General Requirements

- ▶ Administer in accordance with CDC treatment guidelines or manufacturer's guidelines.
  - ▶ Comply with all federal and state laws pertaining to VIS and informed consent requirements.
  - ▶ Pharmacist may not delegate the administration of vaccine to another person except to a pharmacist intern who has met stated qualifications
- 

# Per protocol

- ▶ Enter into a written protocol with a MO physician who is actively engaged in the practice of medicine in MO.
- ▶ Physician's practice site must be within 50 miles
- ▶ Valid for a time period not to exceed 1 year unless otherwise revoked by either party in writing
- ▶ For patients 12 years and older
- ▶ Pharmacist and Physician must maintain copy of protocol for 8 years

Influenza

Pneumococcal

Herpes Zoster

Meningococcal

# Protocol Requirements

1. Identity of pharmacist(s) and physician
2. Time period of protocol-not to exceed 1 yr
3. Name of authorized vaccines
4. Identify authorized patients or groups of patients
5. Authorized routes and anatomical sites
6. Provision to create a prescription for each administration
7. Description of course of action to be taken in the event of adverse reaction, anaphylactic reaction and accidental needlestick
8. Length of time pharmacist shall observe for ADR
9. Provision for disposal of supplies
10. Address of all locations where RPH may administer
11. Record-keeping & notification requirements
12. Provision allowing for termination of protocol
13. Signature and date of each provider

# Per Medical Prescription Order

- ▶ Any vaccine or other injectable for which the pharmacist has achieved and maintained appropriate training/CE for that route
  - IM or SQ
- ▶ No age restrictions
- ▶ RPH must maintain policy and procedures covering all aspects of administering drugs

HPV

PPV

Td

B-12

Rho(D) immune globulin

Tdap

Influenza



# Medical Prescription Order

Name of licensed prescriber

Patient name

Date

Drug and dose to be administered

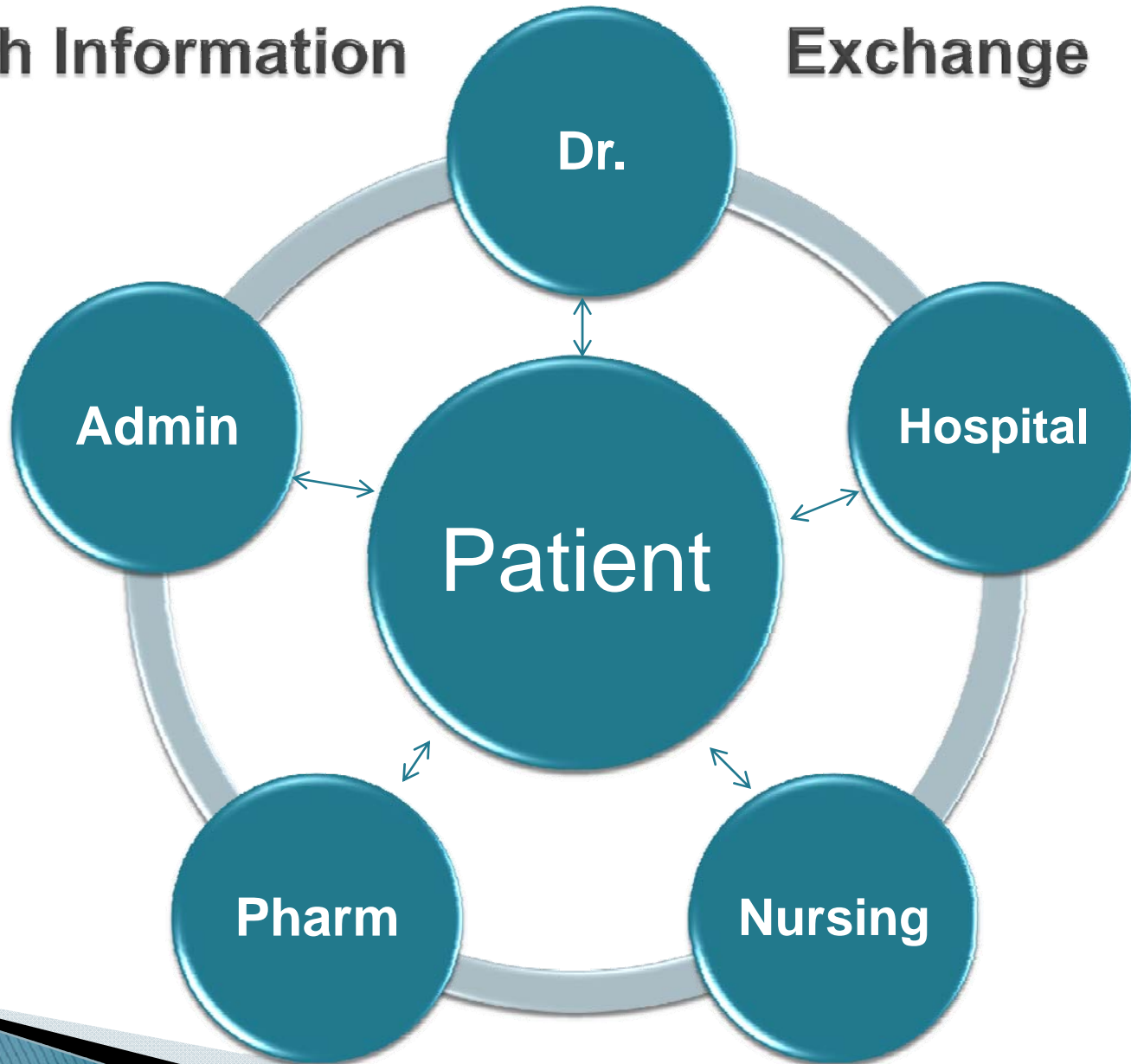
Route of administration

Date or Schedule of administration

Statement that pharmacist is authorized to administer

**Health Information**

**Exchange**



# Record Keeping Requirements

- ▶ Maintain administration records separate from prescription files for a period of 2 years
  1. Names, address, and date of birth of patient
  2. Date, route, and anatomic site of administration
  3. Name, dose, manufacturer, lot, and expiration of drug
  4. Name and address of patient's primary care provider as indicated by patient
  5. Name or identifiable initials of administering RPH
  6. Nature of ADR if applicable
  7. \*If administration is per protocol, a RX must be on record within 72 hours of administration

# Notification requirements

## Protocol

- ▶ Notify protocol Dr. within 72 hours
- ▶ Notify PCP within 14 days
- ▶ Notify both within 24 hours of reported ADR

## Medical RX order

- ▶ Notify authorizing provider with 72 hours
- ▶ Notify within 24 hours of reported ADR

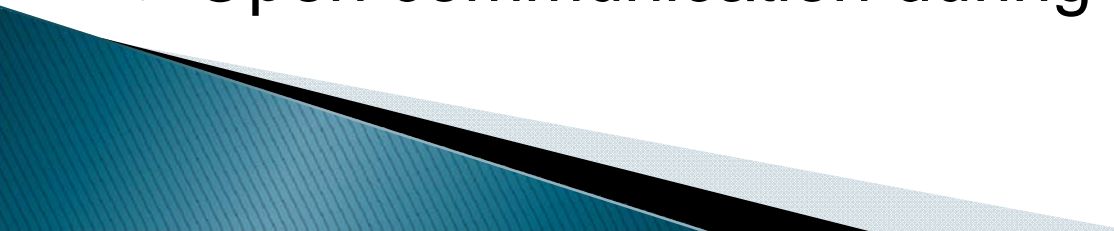
### **Information Required in RPh notification**

1. Patient Name
2. Drug and Dose Administered
3. Route and Site
4. Date

# ShowMeVax

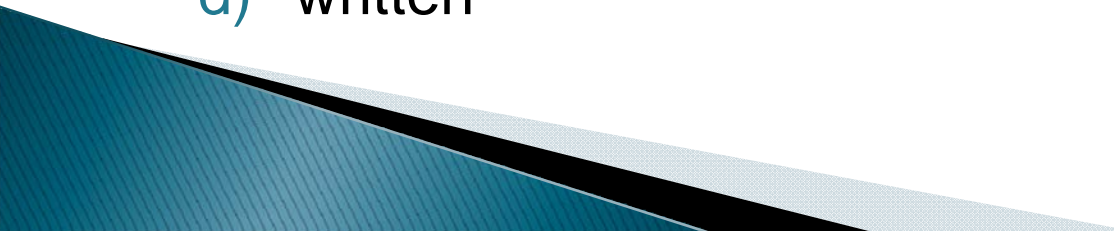
- ▶ Pharmacists will be participating in the State of Missouri's immunization registry
- ▶ MO HealthNet pharmacists providers will have the ability to submit claims for immunizations through the DirectCAREPro™ Platform
  - CyberAccess<sup>SM</sup>

# Opportunities for Partnerships

- ▶ Local Health Department
    - Partnered to administer H1N1
    - Participate in community emergency preparedness planning
  - ▶ Health Systems
  - ▶ School District
  - ▶ Local Employers/businesses
  - ▶ Long-term care facilities
  - ▶ Senior Centers/housing
  - ▶ Open communication during vaccine shortages
- 

# Self Study Question

- ▶ A 65 year old man presents to his PCP for his 3 month diabetes appointment. He inquires about whether or not he should receive the shingles vaccine because his wife just experienced a very painful episode and he would like to avoid getting the shingles. The clinic does not have the vaccine on hand but the local pharmacy does have some vaccine on hand.

- ▶ List the Prescription Requirements necessary for the patient to receive the herpes zoster vaccine from the pharmacist?
  
  - ▶ Which are acceptable methods for transmitting a medical prescription order for a vaccine to a pharmacy?
    - a) Telephone order
    - b) Faxed order
    - c) e-prescription
    - d) written
- 



# References

1. Missouri Code of State Regulations  
CSR 2220-6.040; CSR 220-6.050; CSR 2220.6.055
2. Hayney MS. Doubled immunization efforts for pandemic and seasonal influenza. *JAPHA*. 49:5.Sept/Oct 2009. pages 700-702.
3. *Pharmacy-Based* Immunizations. American Pharmacists Association. March 2010.
4. Kamal KM et al. Pharmacy and Immunization Services: Pharmacists' participation and Impact. *JAPHA*. 43:4. July/August 2003. pages 470-482.
5. MOHSAIC <http://www.dhss.mo.gov/mohsaicmoa/> {accessed November 10, 2010}.
6. Showmevax\_h17\_implementation\_guide.pdf {accessed November 10, 2010}.