

Submitted electronically to HIVPlanComments@hhs.gov

December 14, 2020

The Honorable B. Kaye Hayes
Acting Director
Office of Infectious Disease and HIV/AIDS Policy
U.S. Department of Health and Human Services
330 C St. SW, Rm L001
Washington, D.C. 20024

Re: Draft HIV National Strategic Plan: A Roadmap to End the HIV Epidemic (2021-2025)

Dear Director Hayes,

The National Community Pharmacists Association (NCPA) appreciates the opportunity to provide comments to the Office of Infectious Disease and HIV/AIDS Policy (OIDP) on the draft *HIV National Strategic Plan (HIV Plan)* for 2021-2025. NCPA commends the Office of the Assistant Secretary for Health (OASH) and its OIDP, along with other organizations involved with ensuring a successful and effective execution of the HIV Plan. NCPA is submitting comments on behalf of more than 21,000 independent community pharmacies, which are located in rural and minority communities, and other underserved areas where the HIV epidemic thrives. NCPA has been vigilant in its support of the vision for a place where new HIV infections are prevented, every person knows their status, every person with HIV has high-quality care, treatment, and lives free from stigma and discrimination.¹

Less than one-half (38.9%) of the U.S. population has never been tested for HIV,² 80% of new HIV infections are due to people who do not know they are infected or not receiving care,³ and only 18% of 1.2 million intended for PrEP are receiving it.⁴ A more local, trusted presence within the community is needed to fill gaps in care as well as foster an increase in uptake of the HIV clinical services available. For these reasons, further attempts to expand PrEP access must involve community pharmacies. To this end, NCPA has been working diligently with the U.S. Department of Health and Human Services (HHS) to ensure that additional independently owned community pharmacies will be involved in public/private partnerships for the Ready,

¹ U.S. Department of Health and Human Services. 2020. *HIV National Strategic Plan for the United States: A Roadmap to End the Epidemic 2021-2025*. Washington, DC.

² [National HIV Testing Day](#)-June 27, 2019. MMWR. 2019;68:561.

³ Li Z, Purcell DW, Sansom SL, et al. Vital Signs : [HIV transmission along the continuum of care-United States](#), 2016. MMWR. 2019;68:267-272.

⁴ Harris NS, Johnson AS, Huang YLA, et al. [Vital Signs : status of human immunodeficiency virus testing, viral suppression, and HIV preexposure prophylaxis](#)-United States, 2013-2018. MMWR. 2019;68:1117-1123.

Set, PrEP program. On this initiative to eradicate HIV, community pharmacies stand ready to help confront head on the clinical barriers keeping patients from accessing and maintaining care.

Optimizing Independent Community Pharmacy's Role in HIV Care

Diagnosing HIV infected persons early, linking patients to care, and optimizing prevention measures remains mostly an access challenge. Because pharmacists are the most accessible provider, many patients engage with their pharmacist frequently, many on a monthly basis. Furthermore, like other medical professions, the pharmacy profession has evolved from a dispensing and product reimbursement based industry to a profession with the training and patient relationships to provide outcomes-based services and participate in care coordination efforts.⁵ This invaluable combination of clinical ability and accessibility is prime for engaging prevention measures through PrEP, post exposure measures via PEP, screening with a Food and Drug Administration (FDA) approved HIV CLIA-waived point-of-care test (POCT), collecting data in support of best practices while educating and increasing patient awareness, and ultimately supporting the patient throughout the HIV care continuum. Recognizing the aforementioned, states like California⁶ and Colorado⁷ have enacted legislation to include pharmacists in their HIV Plans. Other states are pursuing regulation to ensure the same. NCPA will continue to advocate for measures that authorize pharmacists to furnish HIV PrEP/PEP and CLIA-waived POCT.

Pharmacy education programs stress to pharmacists the value of team delivered patient-centered care. Hours of training are required for collaborative practice experiences with other healthcare professionals to deliver care. Pharmacists mirror the trust and relationships they have with their patients with the other health care practitioners in their communities. These referral systems are critical to the viability of reaching 2030 goals. For these reasons, NCPA will continue to work with HHS to ensure that public/private federal partnerships on Ready, Set, PrEP include independent community pharmacies.

Whether it be on strategies to prevent new infections, reduce HIV-related disparities, integrate the first ever sexually transmitted infection (STI) National Strategic Plan with the HIV plan, or to better coordinate efforts to achieve targets for ending the HIV epidemic in the United States, community pharmacies stand ready.

NCPA appreciates the opportunity to provide comments on the draft *HIV National Strategic Plan (HIV Plan)* for 2021-2025. We remain committed to resolutions that ensure patient safety and increase access to the highest standard of care. Thank you for your time and consideration, please do not hesitate to contact me at ronna.hauser@ncpa.org should you have any questions.

Sincerely,

⁵ Troy Trygstad, *Payment Reform Meets Pharmacy Practice and Education Transformation*, 78 North Carolina Med. J. 3 at 173-176 (May-June 2017), available at <http://www.ncmedicaljournal.com/content/78/3/173.full.pdf+html>.

⁶ [SB 159](#) HIV: preexposure and postexposure prophylaxis. California Legislative Information.

⁷ [HB 20-1061](#): Human Immunodeficiency Virus Infection Prevention Medications. Colorado General Assembly.

A handwritten signature in cursive script, appearing to read "Ronna B. Hauser".

Ronna B. Hauser, PharmD

Vice President, Policy & Government Affairs Operations

National Community Pharmacists Association