



# ACCP Advocacy in Action Newsletter



Connecting Evidence, Policy, and Advocacy to Advance Clinical Pharmacy



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## ACCP Action Alert: Support Medicare Coverage for Pharmacogenetic Consultations Delivered by Clinical Pharmacists

[Click here now to send a message to Capitol Hill.](#)

In 2021, a potentially precedent-setting piece of legislation was introduced on Capitol Hill that included a provision to cover payment for clinical pharmacists delivering “pharmacogenetic consultations.”

[H.R. 6000, known as “CURES 2.0”](#) – introduced by Rep. Diana DeGette (D-CO) – was aimed at speeding up the delivery of groundbreaking, lifesaving cures; treatments; and innovations to those needing them the most. Cures 2.0 generated over 100 cosponsors on Capitol Hill, but despite ACCP’s [continued advocacy](#), Congress ultimately failed to pass the bill into law.

In June 2024, Representative DeGette [wrote to ACCP](#) indicating her intention to reintroduce Cures 2.0, and she invited ACCP to submit recommendations on the draft proposal. Now we need your help.

Members of Congress need to hear directly from clinical pharmacists about the importance of pharmacogenetic testing and the emerging world of precision medicine. Contacting the offices of your elected officials is simple. We have prepared a letter for you to review and edit. [Click here now and follow the instructions to send this message to Capitol Hill.](#)

### Opportunities for Clinical Pharmacists

By directly calling for “clinical pharmacists” to be responsible for delivering pharmacogenetic consultations, Congress is deliberately recognizing the unique contributions of clinical pharmacists to the growing area of precision medicine. ACCP applauds this growing recognition on Capitol Hill of the unique value that qualified clinical pharmacists provide in advanced approaches to the treatment of complex conditions.

For this legislative proposal, the term pharmacogenetic consultation refers specifically to a consultation furnished to an individual with respect to a genetic or genomic test requested by a physician to provide advice and recommendations regarding the dosage, safety, and efficacy of particular drugs, biologicals, and other treatments on the basis of the individual’s pharmacogenetic result.

ACCP has already held meetings with staff members from the lead congressional offices to help these policymakers better understand the potential for pharmacogenetic testing to allow for precisely specified and delivered medical care on the basis of the unique characteristics of an individual patient’s genetic profile plus the patient’s lifestyle and environment.

### Next Steps

ACCP works with a wide range of coalitions focused on legislative and regulatory reform initiatives that integrate team-based, value-driven, evidence-based approaches to achieving patient care outcomes. The pharmacogenetic consultation provision that could cover clinical pharmacists in certain Medicare payment structures, together with growing interest in comprehensive medication management at the Center for Medicare and Medicaid Innovation, provides further evidence of the growing success of ACCP’s strategy to align the profession with high-profile, broadly endorsed, multi-stakeholder legislative efforts on Capitol Hill.

Working with its colleagues at the Colorado Pharmacists Society, ACCP is formally calling on leaders in Congress to include pharmacogenetic language in the Cures 2.0 legislative draft. If you would like to get more involved in this effort, contact ACCP’s Director of Government Affairs, John McGlew, at [jmclew@accp.com](mailto:jmclew@accp.com), or visit the [Pharmacogenomics Payment and Policy Taskforce](#) housed within GTMRx.

## Clinical Pharmacists on Capitol Hill: ACCP Members Take Action to Support PGY1 Residency Funding

ACCP recently joined with colleagues from across the pharmacy profession, and other health professions, to support an effort led by Sen. Amy Klobuchar (D-MN) to protect CMS funding for postgraduate year one (PGY1) pharmacy residency programs.

Over 1300 ACCP members and supporters mobilized in support of Senate action to protect pass-through funding for PGY1 residency programs. Thank you for this show of support.

## Background

Since 2019, CMS has implemented changes to its auditing procedures for clinical pharmacy residency programs, but without updating its regulations or providing guidance on how residency programs can stay in compliance with these auditing procedures.

Medicare pass-through funding for PGY1 residency programs is critical to ensuring the sustainability of the clinical pharmacy profession. However, under these burdensome Medicare auditing procedures, many PGY1 residency programs have been stripped of funding.

## Building Support on Capitol Hill

ACCP is working to support an advocacy effort led by its colleagues at the American Society of Health-System Pharmacists to support an intervention by Congress to protect PGY1 residency funding and prohibit these unnecessary funding clawbacks that jeopardize PGY1 residency programs.

Most recently, in the Senate, Senator Klobuchar (D-MN) led an effort that called for the Labor/Health and Human Services Appropriations Subcommittee to include language directing CMS to provide clear guidance before clawing back residency funding.

Over 1300 ACCP members and supporters came together to send more than 2600 letters urging members of the Senate to support Senator Klobuchar's initiative. ACCP's PRN PAC captains were instrumental in disseminating ACCP's request through their PRN networks. The College thanks everyone who mobilized on this issue.

## Current Status in the Senate

This appropriations request was part of an ongoing legislative effort to seek an immediate resolution to the PGY1 funding issue. The following U.S. senators responded to ACCP's request [and signed Senator Klobuchar's letter](#) to Appropriations Committee leaders:

- Ben Ray Lujan (D-NM)
- Tina Smith (D-MN)
- Debbie Stabenow (D-MI)
- Thom Tillis (R-NC)
- Peter Welch (D-VT)

The College thanks these senators for their bipartisan support. ACCP has worked closely with Senator Welch's office over many years. [ACCP-PAC recently supported his](#) reelection effort.

## Next Steps

As the Senate appropriations process unfolds, ACCP will continue to work with these offices to protect pass-through funds to hospitals for the operation of pharmacy residency programs.

ACCP will also explore opportunities to engage with other allied health professionals who are also affected by Medicare's auditing process, including nurses; clinical pastoral counselors and chaplains; occupational, speech, and physical therapists; medical laboratory scientists; and other integral members of patient care teams and the health care system.

The Washington office will also pursue strategic opportunities to engage with leaders on the Senate Finance Committee, which holds primary jurisdiction over the Medicare program. Please keep the College informed of any local advocacy related to this issue, or other information related to PGY1 residency audits, that might be helpful in support of this effort.

## 2024–2025 Healthcare Policy Fellow Mikayla Harris, Pharm.D., Joins ACCP Team!



Mikayla Harris, Pharm.D., spent July with ACCP's team in the Washington, D.C., office as part of the 2024–2025 American College of Clinical Pharmacy/American Society of Health-System Pharmacists/Virginia Commonwealth University Congressional Healthcare Policy Fellow Program.

Now in its 18th year, the 14-month fellow program in Washington, D.C., the only one of its kind in the nation, offers a unique opportunity for a pharmacist to serve as a staff member in the U.S. Congress, with orientation managed by ACCP and ASHP government affairs offices.

In 2023, Harris earned her Pharm.D. degree from Lipscomb University, where she gained experience as a member of the American Pharmacists Association, the Kappa Psi Pharmaceutical Fraternity, the Tennessee Pharmacists Association, and the Phi Lambda Sigma Honor Society.

Through both educational and firsthand experience with the health care payment system, Harris developed a particular interest in health care payment reform and the barriers associated with health care services.

"Pharmacists are key front-line health care providers and can contribute significantly to this issue that has become a public health crisis," Harris wrote in her application. "Whether in my personal or professional capacity, I am dedicated to using my pharmacy training to effect positive change in communities across America."

Harris previously completed a 1-year executive fellowship in association management at the Iowa Pharmacy Association, where she gained experience in interprofessional collaboration, addressing barriers to comprehensive patient care, and initiating change through discussions with state leaders regarding artificial intelligence, pharmacogenomics, and workforce conditions.

As Harris moves on to the next phase of the fellow program with ASHP, ACCP staff asked her to reflect on her experience so far.

### **What motivated you to apply for the fellow program?**

The fellow program has a strong history of developing great policy professionals. Seeing this and knowing that I wanted to be able to use my pharmacy training to positively influence health policy, applying was a clear decision for me.

### **You moved from Iowa to Washington, D.C. – what has been the biggest adjustment?**

I had the advantage of living in D.C. for a short term a couple of years ago, which helped in learning to navigate the city. Being familiar with public transportation in D.C., I decided not to bring a car this time around, which has made activities like grocery shopping ... interesting. The city has a lot of benefits, though. There are so many different events and things to see, and many of them are free. As a self-identified foodie, the restaurant scene is also a major plus!

### **Can you share any reflections on interviewing for positions on Capitol Hill?**

The fellow program provides a unique opportunity to develop a different skill set. Being aware of where you are and what you hope to get out of the experience is helpful in determining which office you can leverage your clinical knowledge in and grow toward achieving your goals.

### **After your fellow year, what do you hope to achieve in the next phase of your career?**

I am a person that gets very excited about new experiences and have often found myself picturing many different career trajectories. My ultimate goal is to work to ensure that health care professionals are able to provide high-quality, accessible, and affordable care to all patients. In the next phase of my career, I plan to continue to pursue this mission with the new skills and network [that] I will sharpen and develop through the fellowship experience.

### **Do you have any advice for potential applicants to the fellow program?**

Pharmacy practice and the legislative world are very different. That being said, the experiences from working in clinical settings bring an invaluable perspective when considering implications of potential legislative policy. Pharmacy professionals have so many transferable skills that make them so versatile, so don't be afraid to step outside of your comfort zone. Your voice is needed.

## **Alumni Fellows**

- The 2023–2024 fellow, Wasem Gawish, D.Ph., BCPS, BCMTMS, is serving in the office of Senator Martin Heinrich (D-NM).
- Amanda Ferguson, Pharm.D., currently serves as Senior Director, Federal Relations, Healthcare Association of New York State (HANYS).
- Nimit Jindal, Pharm.D., currently serves as Senior Health Policy Advisor, U.S. Senate Committee on Health, Education, Labor and Pensions (HELP).
- Tatiana Bujnoch, Pharm.D., M.S., BCPS, currently serves as Health Equity and Policy Associate at Morgan Health.
- Rita (Habib) Livadas, Pharm.D., currently serves as Director, Global Public Health, Life Sciences at Becton, Dickinson and Co.

## **Applications for the 2025–2026 Pharmacy Healthcare Policy Fellow Program**

Interested candidates should [click here](#) for more information on the 2025 pharmacy Congressional Healthcare Policy Fellow Program and instructions on submitting an application.

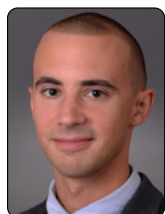
## **Member-Driven Advocacy: ACCP Represented in FDA Compounding Listening Session for Pharmacy Groups**



On May 14, 2024, a former member of the ACCP Board of Regents, Sarah McBane, Pharm.D., FCCP, BCPS, attended the FDA Compounding Listening Session for pharmacy groups. ACCP was represented among several other pharmacy groups such as the American Pharmacists Association and the Alliance for Pharmacy Compounding. The session opened with presentations from FDA staff outlining FDA guidance around compounding, specifically sections 503A and 503B of the Federal Food, Drug, and Cosmetic Act. After the presentations, the session was opened up for questions and comments from the attendees. Most comments centered on a desire for more clarity on FDA guidance and requests for additional flexibility regarding drug shortages and approved bulk ingredients. Because this was a listening session, FDA staff acknowledged comments but declined to provide any specific response outside the previously prepared materials. [Click here](#) to learn more about the FDA's Compounding Quality Center of Excellence.

## ACCP Member Participates in NASEM Public Workshop on Mental Health

The National Academies of Sciences, Engineering, and Medicine (NASEM) hosted a public workshop on July 10 and 11, 2024: Addressing Workforce Challenges Across the Behavioral Health Continuum of Care. The 1½-day workshop explored the needs and challenges in different settings of behavioral health care, such as primary care, schools, and social services agencies, and examined strategies to improve the infrastructure needed to provide greater access to quality mental health care services. Among the invited speakers was ACCP member Thomas Bateman, Pharm.D., BCACP, presenting on the role of clinical pharmacy in mental health management, particularly in populations that are underserved.



Bateman is a clinical assistant professor with Rutgers, Ernest Mario School of Pharmacy. He currently serves as the lead clinical pharmacist of Henry J. Austin Health Center, a federally qualified health center in Trenton, New Jersey, where he also serves as the residency program director for the PGY2 ambulatory care residency program. He was invited by the NASEM Forum on Mental Health and Substance Use Disorders, of which ACCP is a sponsoring member, to discuss the integration of clinical pharmacists and pharmacy navigators into the primary care team and providing care in ambulatory care settings.

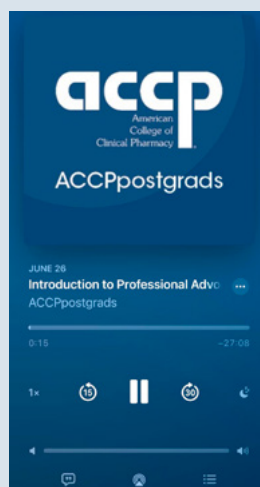
The workshop slides and recording are publicly available and can be accessed [here](#), including those from Bateman's [presentation](#). Proceedings of this workshop will be published in the coming months on the NASEM website.

ACCP would like to acknowledge and thank Bateman for his expertise and participation in this NASEM workshop and in ACCP's advocacy efforts to improve mental health care.

## Positioning and Advancing Clinical Pharmacists: ACCP Endorses Sen. Bernie Sanders' Long COVID Initiative

Earlier this year, Sen. Bernie Sanders (I-VT) issued an open letter to stakeholders calling for input on a draft legislative proposal that would address the Long COVID crisis that is negatively affecting the health of some 22 million Americans. [Click here](#) to read ACCP's comments. On August 6, 2024, Senator Sanders introduced the [Long Covid Research Moonshot Act of 2024](#), which would provide the NIH with \$1 billion in mandatory funding per year for 10 years to support studies, the pursuit of treatments, and the expansion of care for U.S. patients affected by the condition.

## Introduction to Professional Advocacy by ACCPpostgrads



How does ACCP advocate for you, and how can you advocate for your patients and profession? Listen to ACCPpostgrad's podcast, [Introduction to Professional Advocacy – Episode 58](#), to learn from ACCP's Senior Director of Government Affairs, John K. McGlew.



Senator Sanders serves as chair of the powerful Senate Committee on Health, Education, Labor and Pensions (HELP). In January, the HELP Committee held a hearing on Long COVID that featured testimony from patients and the country's leading Long COVID researchers to consider how the United States could advance treatments and improve the health of those living with the illness.

ACCP was joined by 47 national and local organizations in endorsing this important initiative:

#MEAction, American Academy of Physical Medicine and Rehabilitation (AAPM&R), American Association on Health and Disability, American Medical Student Association, Association for Community Organization and Social Action, Association of University Centers on Disabilities, Bay Area Lyme Foundation, BIPOC Equity Agency, Black COVID Survivors Alliance, Body Politic, Center for Popular Democracy Action, COVID-19 Longhailer Advocacy Project, Disability Rights California, Disability Visibility Project, Healthcare NOW, Infectious Diseases Society of America, Lakeshore Foundation, Long COVID Alliance, Long COVID Campaign, Long COVID Families, Long COVID Moonshot, Long COVID Physio, LymeDisease.org, Marked by COVID, Maryland Indoor Air Quality Advocates, Massachusetts ME/CFS & FM Association, ME/CFS Clinician Coalition, Minnesota ME/CFS Alliance, Mount Sinai Health System, National Association of Councils on Developmental Disabilities, National Association of County & City Health Officials (NACCHO), National Organization of Social Security Claimants' Representatives (NOSSCR), National Pain Advocacy Center, National Partnership for Women

and Families, New Disabled South, New Disabled South Rising, Open Medicine Foundation, Pandemic Patients, Patient-Led Research Collaborative, Senior and Disability Action, Solve M.E., Strategies for High Impact/Long COVID Justice, Umoja Health Bay Area, Vaccinate Your Family, Vermont Center for Independent Living, Vermont Coalition for Disability Rights, Workwell Foundation

ACCP's response cited a 2022 paper published in the *Journal of the American College of Clinical Pharmacy (JACCP)* titled "[A Primer on Post-COVID-19 Conditions and Implications for Clinical Pharmacists](#)," which explores how clinical pharmacists are essential team members in optimizing the treatment of patients with a wide range of lingering symptoms collectively known as "post-COVID conditions." Recognition of these conditions as a clinical entity represents the first step in developing a targeted plan for recovery and symptom mitigation.

Clinical pharmacists are a vital addition to the care team managing the transition-of-care process as patients are discharged from the hospital and reenter the community. Medications that may have been used for acute COVID-19 may no longer be appropriate upon discharge. This is an opportunity for clinical pharmacists to intervene and collaborate with other health care professionals to optimize patient care and prevent possible harm. Furthermore, patients who develop post-COVID conditions may benefit from additional therapies to mitigate their new COVID-19 manifestations; however, these medications must be initiated mindfully, regarding both drug clearance and clinically significant interactions with other drugs or disease states. Clinical pharmacists are uniquely positioned not only to evaluate evolving post-COVID literature, but also to balance these new treatment modalities or old treatment options for new indications with existing chronic disease states.

### **ACCP-PAC Election Year Outlook: Extending the Frontiers of Clinical Pharmacy Through Political Advocacy**

ACCP-PAC is the political voice of the clinical pharmacy profession. It is the only federal political action committee dedicated specifically to advancing the practice of clinical pharmacists and the care of their patients. In this pivotal presidential election year, ACCP-PAC is active in its bipartisan support for members of Congress who will work to advance coverage for comprehensive clinical pharmacy services as an integrated Medicare benefit. [Click here](#) to take direct action in this election year!

Through your support for ACCP-PAC, the College can attend fundraising events that provide a unique setting to educate representatives and senators about the essential work of clinical pharmacists improving medication outcomes on behalf of patients.

#### **About ACCP-PAC**

ACCP's Political Action Committee (PAC) allows the College to participate in political campaign activities that strengthen the College's relationships with key policymakers on Capitol Hill. Providing financial support to influential leaders helps raise the profile of clinical pharmacy and demonstrates ACCP's ideological commitment to its core mission.

To maximize its impact, ACCP must be strategic in targeting its limited resources on the health policy leaders best placed to advance the College's agenda. Here's how ACCP's leaders decide who should receive financial support.

Consistent with all of ACCP's initiatives, ACCP-PAC is member driven and managed by a [Governing Council](#), which is responsible for decisions related to how PAC money is spent.

- ACCP-PAC is nonpartisan – committed to working with health policy leaders across all political parties and ideologies.
- ACCP-PAC supports candidates on the basis of their alignment with ACCP's mission to advance the profession and improve human health through research, training, and education.
- ACCP-PAC strategically targets members of Congress who sit on committees with jurisdiction over health care. In the Senate, ACCP-PAC primarily supports members on the Finance Committee and the Health, Education, Labor and Pensions (HELP) Committee. In the House, ACCP-PAC focuses on those who sit on the Ways and Means Committee and the Energy and Commerce Committee.
- ACCP-PAC is committed to transparency – all contributions are reported to the [Federal Election Commission](#), and the information is available to the public.

[Click here to take direct action in this election year!](#)