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**Testimony**

**Public Hearing on COVID-19 Waivers for Pharmacist Practice  
Pennsylvania House Professional Licensure Committee  
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Good morning, Chairman Hickernell, Chairman Wheatley and members of the House Professional Licensure Committee. Thank you for this opportunity to provide testimony before you this morning, regarding the expansion of a pharmacist's role in immunizations under the COVID-19 waivers of law and regulation.

My name is Joan Grzybowski, DO. I am a practicing Osteopathic family physician and an associate professor at the Philadelphia College of Osteopathic Medicine (PCOM) and reside in Conshohocken. My testimony this morning is on behalf of the Pennsylvania Osteopathic Medical Association (POMA).

POMA believes it is important to first recognize that pharmacists play an integral part of the health care system in providing some health services. We also recognize the challenges associated with the vaccination process and strongly support that pharmacists continue to be given appropriate training and education regarding vaccine storage, method of administration and potential for immediate or potential post injection reactions. COVID-19 exacerbated not only the pharmacist's important role, but many other healthcare professionals as well.

The onslaught of COVID-19 continues to this day, taxing our state and country healthcare system and its workers in ways none of us have seen before. Think back to the beginning of this pandemic when our knowledge base was very limited, except for the fact that we had a dangerous communicable disease that was killing people and no vaccine to prevent it. At that critical point, the healthcare system became very innovative in providing as much access to care as possible. The stress on the healthcare system is why POMA supported many of the waivers.

Multiple waivers expanded the scope of practice for pharmacists on a temporary basis. One waiver permitted pharmacists with the ability to administer a flu vaccine to patients ages 3 and older. While we don't know how many children received injections by pharmacists, we are happy to report the flu season was mild and the number of influenza cases were dramatically down. The quarantining associated with COVID-19 limited patient exposure to the flu and cases were at an all-time low. Staying indoors, washing our hands, and wearing masks all helped to stop the flu in its tracks from spreading. As a result, while the waiver was well-intended for the times, luckily, it was not pressure-tested because of lower influenza infections rates.

POMA is aware House Bill 1535 would legislate the waiver on vaccination administration, while also expanding its reach. POMA does not support permitting pharmacists to vaccinate children as low as age three with the full panel of required pediatric immunizations that are currently on the market and any that will come to market. It would set in motion a cascade of disruption to the normal cycle of annual physicals and office visits that allow us to observe and record first-hand, parent/child interactions and developmental milestones, both physical and mental. This is blunt policy that deserves more precision and consideration. POMA believes that the current restrictions for pharmacists injecting children with the influenza vaccine on persons 9 and older, is appropriate under normal circumstances. Changing the law to match a waiver which was granted in a time of an emergency pandemic, is not necessary.

On a more positive note, the same legislation, addresses an area of concern that many POMA members have expressed frustration over the last few years. This deals with the communication between a pharmacist and a patient's primary care physician. Current law requires pharmacist notification to the patient's primary care physician within 48 hours of administration. POMA's primary care Osteopathic physician members including - pediatricians, family physicians and internal medicine physicians - have reported spotty compliance with this requirement. The compliance varies by region and by large

pharmacy store provider. This is why, POMA supports an element of the legislation that requires an additional step for pharmacists to enter patient information into the state vaccine registry administered by the PA Department of Health.

Pennsylvania's vaccine registry, the Pennsylvania Statewide Immunization Information System (PA-SIIS) provides tremendous potential to enhance pharmacist-physician communication on patient vaccinations. Patients can, and often do, forget if they have received a vaccination. This is especially true for elderly patients. Unfortunately, POMA understands the database is not user friendly and needs some technological upgrades. However, this is a strong starting point to increase not only the communication between a physician and a pharmacist, but increase vaccination rates and mitigate duplicate vaccinations for patients.

Thank you again for this opportunity to provide this testimony on behalf of POMA. At this time, I would be happy to answer questions or concerns from the Committee to the best of my ability.