

**DEPARTMENT OF HEALTH**

**NOTICE OF EMERGENCY AND PROPOSED RULEMAKING**

The Director of the Department of Health (Department), pursuant to the District of Columbia Health Occupations Revision Act of 1985, effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1203.02(14) (2016 Repl.)), and Mayor's Order 98-140, dated August 20, 1998, hereby gives notice of the adoption, on an emergency basis, of the following amendments to Chapter 65 (Pharmacists) of Title 17 (Business, Occupations, and Professionals) of the District of Columbia Municipal Regulations (DCMR).

The purpose of this rulemaking is to temporarily amend the continuing education requirements for pharmacists to waive the requirement for completion of ten (10) continuing education credits through live in-person courses for the renewal, reactivation, and reinstatement periods ending February 28, 2021.

This rulemaking is necessary to protect the health, safety, and welfare of the District's residents by reducing the spread of COVID-19 by enabling pharmacists to satisfy their continuing education requirements through online courses. This waiver is consistent with current social distancing efforts to reduce the spread of COVID-19.

This emergency rulemaking was adopted on October 15, 2020, and became effective immediately on that date. The emergency rule will expire one hundred twenty (120) days from the date of adoption (February 12, 2021), or upon publication of a Notice of Final Rulemaking in the *D.C. Register*, whichever occurs first.

The Director also give notice of her intent to take final rulemaking action to adopt these proposed rules in not less than thirty (30) days from the date of publication of this notice in the *D.C. Register*.

**Chapter 65, PHARMACISTS, of Title 17 DCMR, BUSINESS, OCCUPATIONS, AND PROFESSIONALS, is amended as follows:**

**Section 6513, CONTINUING EDUCATION REQUIREMENTS, is amended as follows:**

**Subsection 6513.4 is amended to read as follows:**

6513.4 For the licensure period ending February 28, 2021, an applicant for renewal of a license shall:

- (a) Have completed a minimum of forty (40) contact hours of continuing education credit in approved programs during the two (2) year period preceding the date the license expires, all of which may be satisfied through approved online courses, and which shall include at least:

- (1) Two (2) hours in Human Immunodeficiency Virus (HIV) training;

- (2) Two (2) hours in medication/dispensing errors training; and
  - (3) Two (2) hours of continuing education on cultural competency or specialized clinical training focusing on patients or clients who identify as lesbian, gay, bisexual, transgender, gender nonconforming, queer, or question their sexual orientation or gender identity and expression (“LGBTQ”) meeting the requirements of D.C. Official Code § 3-1205.10(b)(5); and
- (b) Attest to completion of the required continuing education credits on the renewal application form; and
  - (c) Be subject to a random audit.

**Subsections 6513.6 through 6513.8 are amended to read as follows:**

- 6513.6 With the exception of the licensure renewal period ending February 28, 2021, not more than thirty (30) contact hours of continuing education credit may be accepted in any renewal period, or for reinstatement or reactivation of a license for approved home study or other mediated instruction continuing education courses.
- 6513.7 With the exception of the licensure renewal period ending February 28, 2021, a minimum of ten (10) contact hours of the required continuing education credits for renewal, reinstatement, or reactivation of a license shall be obtained by attendance at live continuing education programs.
- 6513.8 For the licensure period ending February 28, 2021, to qualify for a license, a person in inactive status within the meaning of § 511 of the Act (D.C. Official Code § 3-1205.11) for five (5) years or less, who submits an application to reactivate a license, shall submit proof, pursuant to § 6513.14, of having completed twenty (20) contact hours of approved continuing education credit in the year immediately preceding the date of the application, all of which may be satisfied through approved online courses, and which shall include at least:
- (a) Two (2) hours in Human Immunodeficiency Virus (HIV) Training;
  - (b) Two (2) hours in medication/dispensing errors training; and
  - (c) Two (2) hours of continuing education on cultural competency or specialized clinical training focusing on patients or clients who identify as lesbian, gay, bisexual, transgender, gender nonconforming, queer, or question their sexual orientation or gender identity and expression (“LGBTQ”), meeting the requirements of D.C. Official Code § 3-1205.10(b)(5).

**Subsection 6513.10 is amended to read as follows:**

6513.10 For the licensure period ending February 28, 2021, to qualify for a license, a person in inactive status within the meaning of § 511 of the Act (D.C. Official Code § 3-1205.11) for more than five (5) years, who submits an application to reactivate a license shall submit proof, pursuant to § 6513.14, of having completed approved continuing education credit in the year immediately preceding the date of the application, as follows:

- (a) Forty (40) contact hours of approved continuing education credit, all of which may be satisfied through approved online courses, and which shall include at least:
  - (1) Two (2) hours in Human Immunodeficiency Virus (HIV) training;
  - (2) Two (2) hours in medication/dispensing errors training; and
  - (3) Two (2) hours of continuing education on cultural competency or specialized clinical training focusing on patients or clients who identify as lesbian, gay, bisexual, transgender, gender nonconforming, queer, or question their sexual orientation or gender identity and expression (“LGBTQ”), meeting the requirements of D.C. Official Code § 3-1205.10(b)(5); and
- (b) One hundred sixty (160) hours within a sixty (60) day period of professional practice under the supervision of a pharmacist performing tasks listed in § 6502.2(a).

**Subsection 6513.12 is amended to read as follows:**

6513.12 For the licensure period ending February 28, 2021, to qualify for a license, an applicant for reinstatement of a license shall submit proof, pursuant to § 6513.14, of having completed approved continuing education credit in the year immediately preceding the date of the application as follows:

- (a) Forty (40) contact hours of approved continuing education credit, all of which may be satisfied through approved online courses, and which shall include at least:
  - (1) Two (2) hours in Human Immunodeficiency Virus (HIV) Training;
  - (2) Two (2) hours in medication/dispensing errors training; and
  - (3) Two (2) hours of continuing education on cultural competency or specialized clinical training focusing on patients or clients who

## DEPARTMENT OF HEALTH

### **NOTICE OF SECOND EMERGENCY AND FIRST PROPOSED RULEMAKING**

The Director of the Department of Health, pursuant to the authority set forth under §§ 102(11), 302 (14), and 1006 of the District of Columbia Health Occupation Revision Act of 1985, effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code §§ 3-1201.02(11), 3-1203.02 (14), and 3-1210.06 (2016 Repl.), D.C. Official Code § 47-2885.01, D.C. Official Code § 47-2885.18)), Mayor's Order 98-48 dated April 15, 1998, Mayor's Order 98-140, dated August 20, 1998, Mayor's Order 2020-045, dated March 11, 2020; Mayor's Order 2020-050, dated March 20, 2020, and Mayor's Order 2020-079, dated July 22, 2020, gives notice of the adoption, on an emergency basis, of the following amendment to Chapter 65 (Pharmacists) of Title 17 (Business, Occupations, and Professionals) of the District of Columbia Municipal Regulations (DCMR) by adding a new § 6516 (COVID-19 Testing by Pharmacists).

This emergency rulemaking is necessary to continue to protect the health, safety, and welfare of the District's residents by reducing the spread of COVID-19 by establishing minimum standards for the safe and effective operation of pharmacies where pharmacists, pharmacy interns, and pharmacy technicians under the direct supervision of a pharmacist, participate in COVID-19 testing. This rulemaking further defines and addresses the location standards, distancing requirements, and use of personal protection equipment standards for the different types of COVID-19 testing, and expands the authority to participate in COVID-19 testing to pharmacy technicians.

A Notice of Emergency rulemaking was published in the *D.C. Register* on June 19, 2020 at 67 DCR 007783. Those emergency rules were adopted on June 5, 2020, and expired one hundred twenty (120) days from the date of adoption, on October 3, 2020. Mayor's Order 2020-079, issued July 22, 2020, extended the declared public emergency and public health emergency in the District of Columbia through October 9, 2020. The Mayor's Order included the finding that the spread of COVID-19 remains a continued threat to the health, safety, and welfare of District residents. This emergency rulemaking action is necessary to maintain the continuity of these provisions through the extended period of the public emergency and public health emergency.

This emergency rulemaking was adopted on October 15, 2020, and became effective immediately on that date. The emergency rule will expire one hundred twenty (120) days from the date of adoption (February 12, 2021), or upon publication of a Notice of Final Rulemaking in the *D.C. Register*, whichever occurs first.

The Director also gives notice of her intent to take final rulemaking action to adopt these proposed rules in not less than thirty (30) days from the date of publication of this notice in the *D.C. Register*.

**Chapter 65, PHARMACISTS, of Title 17 DCMR, BUSINESS, OCCUPATIONS, AND PROFESSIONALS, is amended as follows:**

**A new Section 6516 is added to read as follows:**

**6516 COVID-19 TESTING BY PHARMACISTS**

- 6516.1 A pharmacist licensed in good standing in the District of Columbia shall only perform COVID-19 tests as set forth in this section.
- 6516.2 For purposes of this section, the terms "COVID-19 test" and "COVID-19 testing" shall refer to COVID-19 diagnostic tests, COVID-19 antibody tests, and any other tests and testing mechanisms for COVID-19 that are approved by the United States Food and Drug Administration (FDA), or that are authorized under a FDA Emergency Use Authorization (EUA), and for which a waiver has been granted under § 2 of the Clinical Laboratory Improvement Amendments Act (42 U.S.C. § 263a) (CLIA).
- 6516.3 For purposes of this section, the phrase "administer COVID-19 tests" or "administer COVID-19 testing" shall mean to administer a diagnostic COVID-19 test to a patient.
- 6516.4 For purposes of this section, the phrase "observe and facilitate collection of self-administered COVID-19 tests" or "observe and facilitate collection of self-administered COVID-19 testing" shall mean to observe a patient self-administer a diagnostic COVID-19 test to himself or herself.
- 6516.5 For purposes of this section, the phrase "administer COVID-19 antibody test" or "administer COVID-19 serology test" shall mean to obtain a specimen from a patient through fingerstick, nasal swab, or other CLIA-waived point of care test for purposes of testing for COVID-19 antibodies.
- 6516.6 For purposes of this section, the phrase "processing a COVID-19 antibody test" shall mean to analyze a specimen through the use of a CLIA-waived testing mechanism to detect the presence of COVID-19 antibodies.
- 6516.7 Only a pharmacist licensed in good standing in the District of Columbia shall administer, or supervise a licensed pharmacy intern in administering, diagnostic COVID-19 testing.
- 6516.8 The location site where diagnostic COVID-19 testing is administered shall meet the requirements set forth in § 6516.9 of this chapter.
- 6516.9 A COVID-19 testing location operated by a pharmacy in a non-institutional setting that performs diagnostic COVID-19 testing shall:

- (a) Be an outdoor location in close proximity to the pharmacy building, such as a parking lot; which may include drive up, curbside, or walk up access;
- (b) Not be located within six (6) feet of the entrance of the pharmacy building;
- (c) Have and follow a plan for the safe operation of the testing site, and an infection control plan; and
- (d) Maintain a record of all patients who have undergone COVID-19 testing at the testing location. This information shall be maintained by the pharmacy for at least one year unless otherwise directed by the Department of Health.

6516.10 All pharmacists and pharmacy interns involved in administering diagnostic COVID-19 testing shall wear appropriate personal protective equipment (PPE), which shall include at a minimum, a mask, gloves (which may be nonsterile), a face shield, and a protective gown.

6516.11 The pharmacist-in-charge of a pharmacy where diagnostic COVID-19 testing will be administered, shall:

- (a) Implement appropriate policies and procedures for the safe performance of COVID-19 testing at that location, which shall include appropriate training, collection procedures, availability and use of PPE, and proper disposal of used PPE; and
- (b) Staff the pharmacy in a manner to ensure that the pharmacist(s) who is administering or supervising the administration of diagnostic COVID-19 testing is engaged solely in administering or supervising the administration of diagnostic COVID-19 testing and is not dispensing prescriptions or counseling patients in between administering COVID-19 testing. The pharmacist performing COVID-19 testing shall only dispense prescriptions and counsel patients after all COVID-19 testing has been completed for the period during which he or she has been assigned to perform testing, after properly disposing of his or her PPE, and after thoroughly washing his or her hands.

6516.12 Only a pharmacist licensed in good standing in the District of Columbia shall observe and facilitate collection of self-administered COVID-19 testing or supervise a licensed pharmacy intern or registered pharmacy technician in observing and facilitating collection of self-administered COVID-19 testing.

6516.13 The location site where authorized pharmacy personnel observe and facilitate collection of self-administered COVID-19 testing occurs shall meet the requirements set forth in § 6516.14 of this chapter.

- 6516.14 Except as provided in § 6516.15, a COVID-19 testing location operated by a pharmacy in a non-institutional setting where authorized pharmacy personnel observe and facilitate collection of self-administered COVID-19 testing shall:
- (a) Be an outdoor location in close proximity to the pharmacy building, such as a parking lot; which may include drive up, curbside, or walk up access;
  - (b) Not be located within six (6) feet of the entrance of the pharmacy building;
  - (c) Have and follow a plan for the safe operation of the testing site, and an infection control plan; and
  - (d) Maintain a record of all patients who have undergone COVID-19 testing at the testing location. This information shall be maintained by the pharmacy for at least one year unless otherwise directed by the Department of Health.
- 6516.15 A COVID-19 testing location operated by a pharmacy in a non-institutional setting where authorized pharmacy personnel observe and facilitate collection of self-administered COVID-19 testing may perform the observation through a drive through window only if the pharmacy complies with the requirements set forth below:
- (a) The pharmacy implements procedures for a contactless and one-way directional observation and collection process, which shall ensure that nothing passes from the patient into the pharmacy including identification cards, payment, testing orders, or writing utensils;
  - (b) All pharmacy personnel shall remain greater than six (6) feet from the patient or behind a closed glass window at all times during the observation and collection; and
  - (c) The patient places the sealed specimen directly into an outdoor collection bin without aid or assistance from any pharmacy personnel.
- 6516.16 All pharmacists, pharmacy interns, and pharmacy technicians who observe and facilitate collection of self-administered COVID-19 testing shall wear appropriate PPE, which shall include at a minimum, a face mask and gloves.
- 6516.17 The pharmacist-in-charge of a pharmacy where authorized pharmacy personnel observe and facilitate collection of self-administered COVID-19 testing, shall implement appropriate policies and procedures for the safe performance of COVID-19 testing at that location, which shall include appropriate training, collection procedures, availability and use of PPE, proper disposal of used PPE, and appropriate staffing levels.

- 6516.18 Only a pharmacist licensed in good standing in the District of Columbia shall administer or supervise a licensed pharmacy intern to administer a COVID-19 antibody or serology test.
- 6516.19 The location site where COVID-19 antibody or serology testing is administered which requires removal of a patient's mask, or in which the patient's sputum or other bodily fluids may potentially become aerosolized, shall meet the requirements set for in § 6516.9 of this chapter.
- 6516.20 The location site where COVID-19 antibody or serology testing occurs using fingerstick or other point of care testing in which there is no potential for the patient's bodily fluids to become aerosolized, shall meet the requirements set forth in § 6516.21 of this chapter.
- 6516.21 A COVID-19 testing location operated by a pharmacy in a non-institutional setting where authorized pharmacy personnel administer COVID-19 antibody or serology testing in which there is no potential for the patient's bodily fluids to become aerosolized shall:
- (a) Ensure patient privacy;
  - (b) Have and follow a plan for the safe operation of the testing site, and an infection control plan; and
  - (c) Maintain a record of all patients who have undergone COVID-19 testing at the testing location. This information shall be maintained by the pharmacy for at least one year unless otherwise directed by the Department of Health.
- 6516.22 All pharmacists and pharmacy interns who administer COVID-19 antibody or serology testing shall wear appropriate PPE, which shall include, at a minimum, a face mask and gloves.
- 6516.23 The pharmacist-in-charge of a pharmacy where authorized pharmacy personnel administer COVID-19 antibody or serology testing, shall implement appropriate policies and procedures for the safe performance of COVID-19 testing at that location, which shall include appropriate training, collection procedures, availability and use of PPE, proper disposal of used PPE, and appropriate staffing levels.
- 6516.24 All COVID-19 testing conducted in a non-institutional pharmacy location shall be performed by appointment only, which may be scheduled the same day and onsite.
- 6516.25 Prior to performing COVID-19 testing, a pharmacist shall review and familiarize himself/herself with the Center for Disease Control's "Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 (COVID-19)" and ensure that the pharmacist has appropriate PPE to safely



perform the testing.

- 6516.26 The health care practitioner who orders the COVID-19 test, who may be the same pharmacist who administers the test, shall be responsible for receiving the test results and directing a patient with a positive test result to receive care and monitoring.
- 6516.27 A pharmacist licensed in good standing in the District of Columbia may permit a licensed pharmacy intern to administer diagnostic COVID-19 testing or COVID-19 serology testing under the pharmacist's direct supervision, on an individual who is eighteen (18) years of age or older, in accordance with the requirements set forth in this section.
- 6516.28 A pharmacist licensed in good standing in the District of Columbia may permit a licensed pharmacy intern to observe and facilitate self-administered COVID-19 testing under the pharmacist's supervision, on an individual who is eighteen (18) years of age or older, in accordance with the requirements set forth in this section.
- 6516.29 A pharmacist licensed in good standing in the District of Columbia may permit a registered pharmacy technician to observe and facilitate self-administered COVID-19 testing under the pharmacist's direct supervision, on an individual who is eighteen (18) years of age or older, in accordance with the requirements set forth in this section.
- 6516.30 Unless otherwise specified in this section, all pharmacists and pharmacy staff who are within six (6) feet of patients during COVID-19 testing shall wear appropriate PPE, which shall include at a minimum, a mask, gloves (which may be nonsterile), a face shield, and a protective gown.
- 6516.31 Unless otherwise specified in this section, all pharmacists and pharmacy staff who will remain greater than six (6) feet of patients at all times during COVID-19 testing and who will not have direct patient contact shall wear appropriate PPE, which shall include at a minimum a face mask and gloves.

All persons desiring to comment on the subject of this proposed rulemaking should file comments in writing not later than thirty (30) days after the date of the publication of this notice in the *D.C. Register*. Comments should be sent to the Department of Health, Phillip L. Husband, General Counsel, Office of the General Counsel, 899 North Capitol Street, N.E., 6<sup>th</sup> Floor, Washington, D.C. 20002. Copies of the proposed rules may be obtained during the hours of 9 a.m. to 5 p.m., Monday through Friday, excluding holidays, at the address listed above, or by contacting Angli Black, Paralegal Assistant, at [Angli.Black@dc.gov](mailto:Angli.Black@dc.gov), (202) 442-5977.

identify as lesbian, gay, bisexual, transgender, gender nonconforming, queer, or question their sexual orientation or gender identity and expression (“LGBTQ”), meeting the requirements of D.C. Official Code § 3-1205.10(b)(5); and

- (b) One hundred sixty (160) hours within a sixty (60) day period of professional practice under the supervision of a pharmacist performing tasks listed in § 6502.2(a).

All persons desiring to comment on the subject of this proposed rulemaking should file comments in writing not later than thirty (30) days after the date of the publication of this notice in the *D.C. Register*. Comments should be sent to the Department of Health, Phillip L. Husband, General Counsel, Office of the General Counsel, 899 North Capitol Street, N.E., 6<sup>th</sup> Floor, Washington, D.C. 20002. Copies of the proposed rules may be obtained during the hours of 9 a.m. to 5 p.m., Monday through Friday, excluding holidays, at the address listed above, or by contacting Angli Black, Paralegal Assistant, at [Angli.Black@dc.gov](mailto:Angli.Black@dc.gov), (202) 442-5977.



November 23, 2020

Phillip L. Husband, General Counsel  
District of Columbia Department of Health  
899 North Capitol Street, NE, 6<sup>th</sup> Floor  
Washington, DC 20002

Via email: [DCHFpubliccomments@dc.gov](mailto:DCHFpubliccomments@dc.gov)

**RE: DEPARTMENT OF HEALTH PROPOSED AND EMERGENCY RULEMAKING – COVID-19 TESTING BY PHARMACISTS**

Dear Mr. Husband,

The National Community Pharmacists Association (NCPA), the National Association of Chain Drug Stores (NACDS), the National Grocers Association (NGA), and the Food Industry Association (FMI) write again in regard to the recently adopted Department of Health (DOH), Board of Pharmacy (BOP) emergency rule and proposed rule- **§ 6516, COVID-19 Testing by Pharmacists**. We commend the DOH's efforts to curb the spread of the novel coronavirus disease (COVID-19) while protecting the health, safety, and welfare of the District's residents. In addition, we applaud the DOH and BOP efforts in addressing some of our concerns on the previously released emergency rules on COVID-19 testing. However, the proposed rule language needlessly restricts patient access to receive COVID-19 tests at pharmacies by including PPE requirements that exceed federal guidelines, restricting some pharmacy technician activities, and limiting location standards due to misunderstanding on antibody vs. serology test differences.

These requirements have created inefficiencies in the District's efforts to establish minimum standards for the safe and effective operation of testing in pharmacies and it negatively impacts patient access to testing. As such, we urgently request that the DOH and BOP amend these rules, taking into account our following recommendations.

**PPE Requirements 6516.10, 6516.11, 6516.30, and 6516.31**

We support ensuring the safety of patients, pharmacists, and pharmacy staff during testing. However, the PPE requirements within this proposed rule far exceed national guidelines for safe PPE use and may lead to wasteful use of limited resources. Section 6516.11 requires the pharmacist-in-charge to implement policies and procedures for the use of PPE, which may create confusion as the requirements in the rule exceed the Centers for Disease Control and Prevention's (CDC's) national guidelines, which is the typical standard to apply.

As COVID-19 cases continue to surge in Washington, DC and nationwide, PPE guidelines should follow national standards and not needlessly exceed them. **With this in mind, we highly recommend the**

**following amendment to the proposed rule, striking specific PPE requirements and referencing the CDC's national infection control guidelines:**

6516.10 All Pharmacists and pharmacy interns involved in administering diagnostic COVID-19 testing shall wear appropriate personal protective equipment (PPE), ~~which shall include at a minimum, a mask, gloves (which may be nonsterile), a face shield, and a protective gown.~~ in accordance with the Centers for Disease Control (CDC) and Prevention's national infection control guidelines.6516.11 The pharmacist-in-charge of a pharmacy where diagnostic COVID-19 testing will be administered shall:

- (a) Implement appropriate policies and procedures for the safe performance of COVID-19 testing at that location which shall include appropriate training, collection procedures, availability and use of PPE, and proper disposal of used PPE in accordance with CDC's national infection control guidelines.

**Testing Locations**

Section 6516.9 and 6516.14 require that diagnostic and self-administered COVID-19 testing occur outdoors. These safeguards for testing indoors create an unfounded inconsistency and discrepancy between how institutional and non-institutional settings are treated. Given that outdoor space is hard to find in urban settings, requiring diagnostic and self-administered COVID-19 testing to occur only outdoors may prevent pharmacies from participating. Pharmacies are keenly aware of the importance in taking necessary safety precautions when providing patient care services, adhering to CDC guidance and developing the necessary protocols to ensure the safety of healthcare workers and patients. They are well-positioned to determine the location to conduct testing, without additional burdensome requirements.

Additionally, section 6516.14 also prevents pharmacies from participating in convenient off-site testing models including employer-site testing, which is being done in other states and jurisdictions. We have heard from our member pharmacists that they have been asked by businesses in the District to offer such services but cannot participate due to the language in this rule. **Thus, we recommend amending section 6516.9 and striking section 6516.13 and 6516.14 to give pharmacies flexibility in testing location, in accordance with CDC infection control guidelines, as follows:**

6516.9 A COVID-19 testing location operated by a pharmacy in a non-institutional setting that performs diagnostic COVID-19 testing shall may:

- (a) Be in an indoor, outdoor, or offsite location ~~in close proximity to the pharmacy building,~~ based on the pharmacy's preferences, who have put in place appropriate measures in accordance with the CDC's national infection control guidelines, to ensure patient and pharmacy staff safety during testing. ~~Outdoor testing may include a parking lot; which may include drive up, curbside, or walk up access;~~

(b) ~~Not be located within six (6) feet of the entrance of the pharmacy building;~~

### Pharmacy Technician Participation

Although the DOH's Notice of Second Emergency and First Proposed Rulemaking that precedes the Rule language references pharmacists, pharmacy interns and pharmacy technicians participating in COVID-19 tests, sections 6516.7, 6516.10, 6516.18 do not include references to pharmacy technicians. Through the U.S. Department of Health and Human Services (HHS') two-part PREP Act Guidance on pharmacy technicians, qualified pharmacy technicians are authorized to administer COVID-19 testing. **We recommend consistently including pharmacy technicians in this proposed rule, and adding them to sections 6516.7, 6516.10, and 6516.18 that make the rule language consistent with its stated intent.**

### Accessible COVID-19 Testing Services

For the District to reopen safely, testing capacity should be increased significantly. The accessibility and convenience of community pharmacies allows the District's residents to receive quality COVID-19 testing services within their own neighborhood. However, section 6516.24 limits pharmacies' ability to extend their patient reach by requiring appointments for patients to receive COVID-19 testing. This type of language has the potential to limit patient access to testing services without improving efficiency or safety. Pharmacists are well-positioned and capable of conducting COVID-19 testing services by appointment or for walk-ins as determined by the pharmacy. In fact, eight fire houses across the District and other public testing sites across the city offer residents walk-up testing delivered by paramedics and EMTs with no appointment needed. Residents should have the flexibility to do the same at pharmacies. **Thus, we strongly urge striking rule 6516.24 or amend language to allow for each respective pharmacy to decide on a testing system that works best for them, whether it be via appointments or walk-ins.** Recommended amended language:

6516.24 All COVID-19 testing conducted in a non-institutional pharmacy location may be performed by walk-ins or appointment only, which may be scheduled the same day, ~~and onsite.~~ based on the pharmacy's preference.

### Conclusion

Frontline community pharmacists stand ready to continue helping in their authorized capacity, and they remain well-positioned to play an essential role to expand testing and provide mass vaccination to the District's residents once a vaccine is available. The recommendations above remove existing restrictive barriers to testing, establish minimum consistent standards for COVID-19 testing in pharmacies, and enhance patient care in the District. Thank you for your time and consideration, please do not hesitate to contact Jill McCormack, Director of State Government Affairs NACDS at 717-592-8977 or at

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[JMcCormack@nacds.org](mailto:JMcCormack@nacds.org) or Ronna Hauser, Vice President, Policy & Government Affairs Operations at 703-798-0118 or at [ronna.hauser@ncpa.org](mailto:ronna.hauser@ncpa.org) with any questions you may have.

Sincerely,

FMI – The Food Industry Association  
Nation Association of Chain Drug Stores  
National Community Pharmacists Association  
National Grocers Association

Cc:

The Honorable Muriel Bowser

Executive Director Shauna White

City Council Health Committee members: Vincent C. Gray, Mary M. Cheh, Brandon T. Todd, David Grosso, Brianne K. Nadeau