

PLEASE NOTE:

This service standard is currently under review and scheduled for revisions in FY 2023-2024.

Local Pharmacy Assistance Program

Definition: Local Pharmaceutical Assistance Program (LPAP) is operated by a RWHAP Part A or B recipient or sub-recipient as a supplemental means of providing medication assistance when an ADAP has a restricted formulary, waiting list and/or restricted financial eligibility criteria.

RWHAP Part A or B recipients using the LPAP service category must establish the following:

- Uniform benefits for all enrolled clients throughout the service area
- A recordkeeping system for distributed medications
- An LPAP advisory board
- A drug formulary approved by the local advisory committee/board
- A drug distribution system
- A client enrollment and eligibility determination process that includes screening for ADAP and LPAP eligibility with rescreening at minimum of every six months
- Coordination with the state's RWHAP Part B ADAP
 - A statement of need should specify restrictions of the state ADAP and the need for the LPAP
- Implementation in accordance with requirements of the 340B Drug Pricing Program and the Prime Vendor Program.

Only RWHAP Part A grant award funds or Part B Base award funds may be used to support an LPAP. ADAP funds may not be used for LPAP support. LPAP funds are not to be used for Emergency Financial Assistance. Emergency Financial Assistance may assist with medications not covered by the LPAP.

Eligibility: Consumers shall meet eligibility requirements as defined in the System-Wide Standards of Care.

1.0 Agency Policies and Procedures

The agencies shall have Policies and Procedures to ensure that the services are accessible to all eligible consumers. Each agency's policies and procedures shall ensure compliance with the following Standards.

1.0 Agency Policies and Procedures

STANDARDS

MEASURES

1.1	All agencies shall comply with Florida State Statutes 465.	1.1	Current license(s) are on file at agency.
1.2	All agencies will comply with Section 340B of P.L. 102-585, the Veteran's Health Care Act of 1992.	1.2	License on file at agency
1.3	Agencies must ensure that original prescriptions are on file and that all medications are on the current approved formulary.	1.3	Original prescription from a licensed Florida medical provider on file
1.4	Agencies shall ensure that medications are distributed to Ryan White eligible consumers that have been screened for ADAP eligibility with rescreening every six (6) months. •	1.4	Documentation of Ryan White eligibility with ADAP screening and rescreening in Provide Enterprise (PE). •
1.5	Agencies shall ensure that a drug distribution system is in place that provides for: • uniform benefits to all enrolled consumers throughout the EMA a record keeping system for distributed and/or destroyed medications	1.5	Total number of consumers receiving Anti-retroviral (ARV)
1.6	An LPAP does not dispense medications as: • A single occurrence of short duration (an emergency); or • Vouchers to clients on an emergency basis.	1.6	Documentation that the LPAP is not dispensing medications as: • A single occurrence of short duration (an emergency without arrangements for longer term access to medication; or • Vouchers to clients on a single occurrence without arrangements for longer-term access to medications.
1.7	The agency must adhere to the current approved Ryan White Part A formulary established by the local pharmacy work group.	1.7	Documentation that the agency adheres to the current approved Ryan White Part A formulary.

1.8	Agencies shall provide Treatment adherence counseling for all drugs dispensed to consumers.	1.8	Percentage of patients dispensed medication with a viral load less than 200 copies/ml at last HIV viral load test during the measurement year
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2.0 Co-pay/Cost Sharing

The purpose of the Share of Cost/Insurance Co-pays standard is ensuring that there are consistent guidelines for determining co-pay and cost sharing.

2.0 Co-pay/Cost Sharing

STANDARDS		MEASURES	
2.1	Agencies must determine share of cost/insurance co-pays based on the following criteria: <ul style="list-style-type: none"> consumers who have an income of 200% or less of the federal poverty guideline have zero (0) share of cost; consumers whose income is between 201% and 400% of the poverty level will receive up to \$200 worth of assistance monthly; 	2.1	Documentation of applied current federal poverty guidelines and income in consumer file.

3.0 Formulary

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Standards		Measures	
3.1	Agency must utilize current approved Ryan White Part A formulary.	3.1	All consumers access only pharmaceuticals listed on the Part A formulary.
3.2	Agencies shall ensure that a representative participates as a member of the Local Pharmacy Work Group.	3.2.	Documentation of participation via minutes