Greg Woods

From: Greg Woods

Sent: Wednesday, May 8, 2024 2:16 PM

To: cfnrv@cfnrv.org

Subject: Virginia EMS Medication Exchange Crisis

Dear Community Partner:

For several decades, Virginia's Regional Emergency Medical Services (EMS) Councils have played a vital role in facilitating the exchange of medications used by licensed EMS agencies to treat ill and injured patients with hospital pharmacies. Under this system, participating EMS agencies exchange an opened medication kit for a sealed box provided by participating hospitals at no cost to the EMS agency. In November 2023, Virginia's Regional EMS Councils were made aware of a new rule promulgated by the Food and Drug Administration (FDA), the Drug Supply Chain Security Act (DSCSA), with an enforcement date of November 27, 2024. The Virginia Board of Pharmacy (BOP) has indicated that Virginia's kit-for-kit exchange method will not meet the requirements of the DSCSA. Because of electronic tracking requirements, hospitals across Virginia have indicated they will no longer continue restocking medications for EMS agencies.

The transition from the existing program creates logistic and financial challenges for EMS agencies. Unbudgeted costs will include startup and infrastructure costs such as registration fees (BOP and DEA), storage and security (facility renovations, security systems, and lockable cabinets), and medication purchase. In addition, agencies will incur ongoing medication and security costs. These federal regulations are an unfunded mandate for EMS agencies. We have received feedback that some licensed agencies will either downgrade their license to no longer administer medications or cease operations. Either option represents a risk to public health and safety.

A workgroup has been formed at the state level to address this challenge and develop tools and policies to address the pending federal requirements. I have been asked to chair a team exploring potential funding opportunities in assisting EMS agencies with this transition. I am writing to inform you of this issue. Second, I am writing to ask for your assistance. We will post a list of possible funding sources to the EMS agencies in Virginia and include your organization's contact information. I ask that you consider making this a funding focus area for your organization for the upcoming year, as this change could tremendously impact prehospital patient care in your communities. At a minimum, I ask that you speak with EMS agencies to discuss any ways you might be able to assist with this transition. We hope agencies and localities can better budget and plan for ongoing costs in future years.

We thank you in advance for your favorable consideration of this request. Do not hesitate to reach out if additional information or clarification is needed.

Sincerely,

Gregory Woods, Ph.D., M.H.A., M.A., EMT-I

Chair, Financial Assistance Tool Team Regional EMS Medication Kit Transition Workgroup