



Open Forum on APhA2023 New Business Items

Matthew Lacroix
Chair, New Business
Review Committee

Brandi Hamilton
Speaker-elect of the House
APhA House of Delegates

Webinar Information

- Dial-in and use access code and audio pin on your control panel to limit audio issues and background noise during the webinar.
- Submit your comments/questions during the webinar using the chat box on your control panel or email HOD@aphanet.org
- Select “raise hand” button to request to speak and you will be recognized by the moderators as time permits.
- Note: all comments/questions received will be considered by the New Business Review Committee. In order to receive comments from everyone, please consider typing comments/questions into the question panel and limit verbal comments to 1 minute.
- This webinar is being recorded for future access on the House of Delegates webpage, www.pharmacist.com/apha-house-delegates

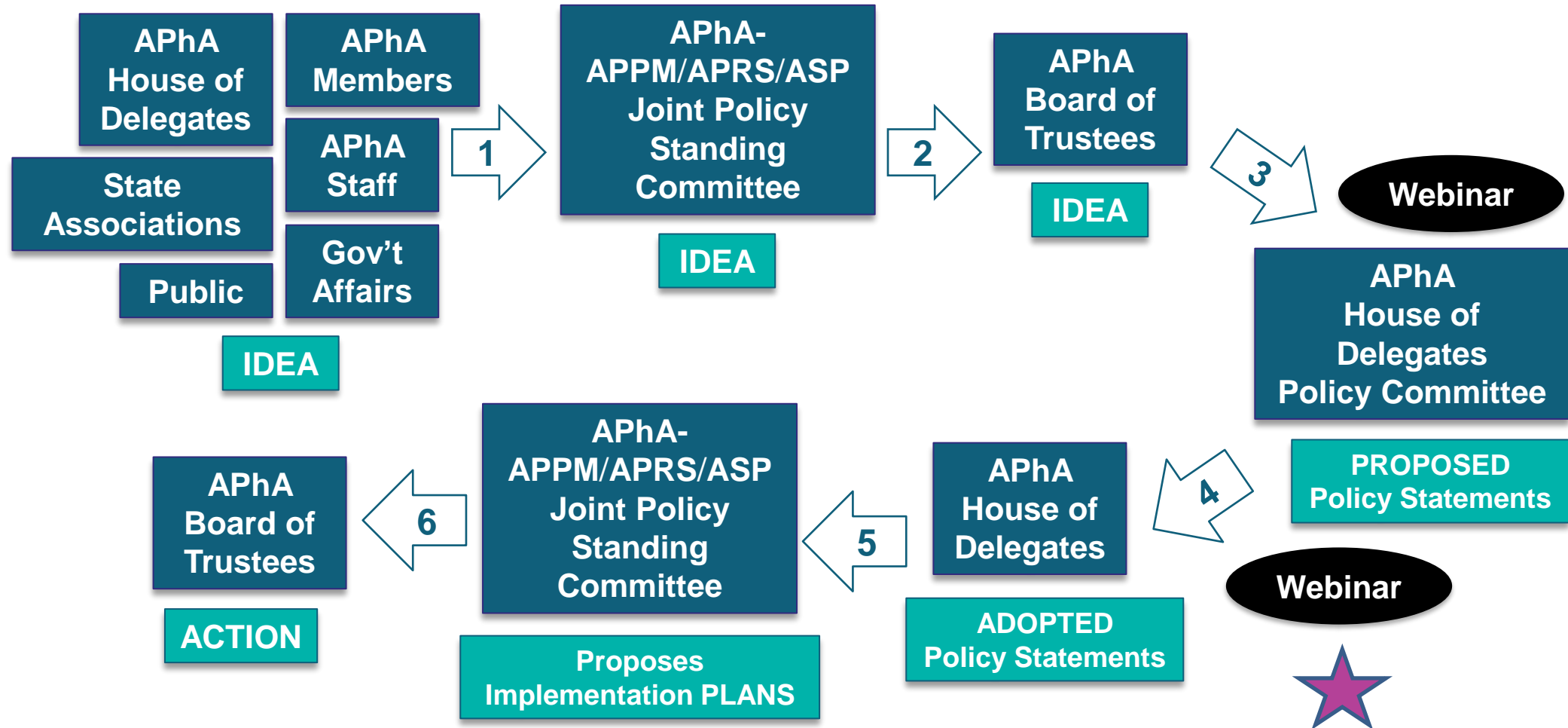
Webinar Information

- Webinar scheduled for 90 minutes
 - **10 minutes for overview**
 - **70 minutes for Review of New Business Items**
 - **10 minutes for closing**
- Moderators will clarify issues, but will not engage in debate

New Business Review Committee

Matthew Lacroix, Chair
Ally Dering-Anderson
Sarah Derr
Shane Garrettson
Mary Gurney
Brian Hose
John Pieper
Traci Poole
Matthew Kirchoff

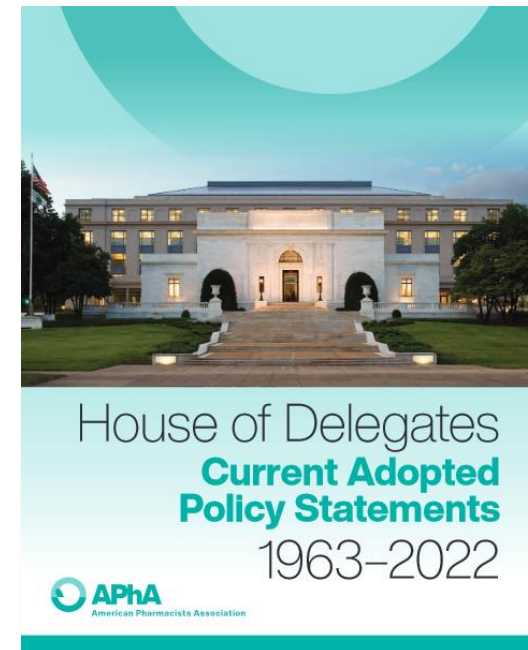
APhA Policy Development Roadmap



Current Policy Information

APhA House of Delegates Current Adopted Policy Statement Manual

- Online searchable database
- Online PDF version



APhA Antitrust Statement

The American Pharmacists Association complies with all Federal and State Antitrust laws, rules and regulations. Therefore:

- 1) Meetings will follow a formal, pre-approved agenda which will be provided to each attendee. Participants at meetings should adhere strictly to the agenda. Subjects not included on the agenda should generally not be considered at the meeting.
- 2) The agenda will be specific and will prohibit discussions or recommendations regarding topics that may cause antitrust problems, such as prices or price levels. In addition, no discussion is permitted of any elements of a company's operations which might influence price such as:
 - 1) Cost of operations, supplies, labor or services;
 - 2) Allowance for discounts;
 - 3) Terms of sale including credit arrangements; and,
 - 4) Profit margins and mark ups, provided this limitation shall not extend to discussions of methods of operation, maintenance, and similar matters in which cost, or efficiency is merely incidental.
- 3) It is a violation of Antitrust laws to agree not to compete, therefore, discussions of division of territories or customers or limitations on the nature of business carried on or products sold are not permitted.
- 4) Boycotts in any form are unlawful. Discussion relating to boycotts is prohibited, including discussions about blacklisting or unfavorable reports about particular companies including their financial situation.
- 5) Whenever discussion borders on an area of antitrust sensitivity, the Association's representative should request that the discussion be stopped and ask that the request be made a part of the minutes of the meeting being attended. If others continue such discussion, the webinar will be terminated.

2023 House of Delegates New Business Item Process

Submission

- Deadline has passed (January 23, 2023)
- Urgent matters may be considered if submitted 24 hours prior to the start of the House session
 - Considered at the discretion of House Leadership or through suspension of House Rules

Webinars / Open Hearing

- Obtain initial feedback for committee
- Two webinars (February 1 and 8)

New Business Review Committee

12 New Business Items

Subject / Motion

Current related APhA Policy & Bylaws

Brief Summary of background

Discussion / Feedback

New Business Review Committee

NBI	Title	Author(s)
1	Development of Veterinary Curriculum	ACVP
2	Uncompensated Care Mandates in Pharmacy	Board of Trustees
3	Patient Access to Reproductive Health Care Services	Reproductive Health Care Task Force
4	Pharmacist Protection	Reproductive Health Care Task Force
5	Employer Responsibilities	Reproductive Health Care Task Force
6	Pharmacist Representation on Medical Staff	US PHS
7	Greenhouse Gas Emissions	US PHS
8	Access to Essential Medicines	US PHS
9	Enforcing Antidiscrimination in the Dispensing of Medications	US PHS
10	Pharmacy Shortage Areas	Public Health Sig
11	Drug Decriminalization	Adrienne Simmons
12	Transgender and Nonbinary Health Care	APhA-ASP

New Business Item #1

ORIGINAL LANGUAGE

Development of veterinary pharmacy curricula in schools and colleges of pharmacy and pharmacy technology

Introduced by Brenda Jensen, Gigi Davidson, Natalie Young, on behalf of ACVP

Motion: To adopt the following policy statements:

1. APhA encourages schools and colleges of pharmacy and pharmacy technology to develop curriculums that educate pharmacists, student pharmacists, and pharmacy technicians in the principles of veterinary pharmacotherapy.

New Business Item #1

POTENTIAL ADJUSTED LANGUAGE

Development of veterinary pharmacy curricula in schools and colleges of pharmacy and pharmacy technology

Introduced by Brenda Jensen, Gigi Davidson, Natalie Young, on behalf of ACVP

Motion: To adopt the following policy statements:

- ~~1. APhA encourages schools and colleges of pharmacy and pharmacy technology to develop curriculums that educate pharmacists, student pharmacists, and pharmacy technicians in the principles of veterinary pharmacotherapy.~~
1. APhA encourages schools and colleges of pharmacy to develop curricular opportunities for student pharmacists to attain competencies in the principles of veterinary pharmacotherapy.
2. APhA encourages training of pharmacists and pharmacy technicians in the principles of veterinary pharmacotherapy.

New Business Item #1

Development of veterinary pharmacy curricula in schools and colleges of pharmacy and pharmacy technology

Introduced by Brenda Jensen, Gigi Davidson, Natalie Young, on behalf of ACVP

Related Policy:

2022, 2004, 1988 Pharmacists Relationship to Veterinarians

2021 Definition of Patient

Background Summary:

On March 15, 2021, APhA HOD approved ACVP's proposal to expand the definition of a "patient" to include both human and non-human species. While this expansion highlights the wide scope of care provided by pharmacists, a gap in veterinary pharmacotherapy education remains. In a 2021, only 26.7% of colleges and schools of pharmacy surveyed responded that veterinary pharmacotherapy training was provided in their curricula. As a result, the authors call for a policy to encourage schools and colleges of pharmacy and pharmacy technology to develop curriculums that provide pharmacists, pharmacy students, and pharmacy technicians with training adequate to provide safer and more meaningful care to all patients regardless of species.

New Business Item #1

TIME FOR DISCUSSION

Development of veterinary pharmacy curricula in schools and colleges of pharmacy and pharmacy technology

Introduced by Brenda Jensen, Gigi Davidson, Natalie Young, on behalf of ACVP

Motion: To adopt the following policy statements:

1. APhA encourages schools and colleges of pharmacy to develop curricular opportunities for student pharmacists to attain competencies in the principles of veterinary pharmacotherapy.
2. APhA encourages training of pharmacists and pharmacy technicians in the principles of veterinary pharmacotherapy.

New Business Item #2

Uncompensated Care Mandates in Pharmacy

Introduced by Randy McDonough, Magaly Rodriguez de Bittner, Stephen Carroll on behalf of the APhA Board of Trustees

Motion: To adopt the following policy statements:

1. APhA expects that all government, manufacturer, and payor policies for the provision of patient care, medical products and supplies, and related administrative services, appropriately recognize the role of pharmacists and pharmacies, and have adequate funding and accompanying mechanisms for reimbursement for pharmacist and pharmacy-provided services.
2. APhA expects that all government entities, manufacturers, and payors incorporate transparent and comprehensive cost analyses associated with the implementation of new programs in establishing reimbursements for pharmacist-provided patient care services, medical products and supplies, and related administrative services.

New Business Item #2

Uncompensated Care Mandates in Pharmacy

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Motion: To adopt the following policy statements:

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- ~~2. APhA expects that all government entities, manufacturers, and payors incorporate transparent and comprehensive cost analyses associated with the implementation of new programs in establishing reimbursements for pharmacist-provided patient care services, medical products and supplies, and related administrative services.~~
1. APhA demands that all payors reimburse pharmacists and/or pharmacies fairly and transparently for all the patient care, medical products, and administrative services that they provide.

New Business Item #2

Uncompensated Care Mandates in Pharmacy

Introduced by Randy McDonough, Magaly Rodriguez de Bittner, Stephen Carroll on behalf of the APhA Board of Trustees

Related Policy:

2020 Providing Affordable and Comprehensive Pharmacy Services to the Underserved

Background Summary:

Reimbursement for pharmacy services has been an ongoing advocacy topic for the pharmacy profession, and uncompensated care mandates is an additional issue that does not currently have sufficient adopted policy. The issues surrounding uncompensated health care mandates were exacerbated during the COVID-19 pandemic, when pharmacists were called on by the government to provide mandatory services such as distribution of PPE, COVID-19 immunizations, COVID-19 Test to Treat clinical assessments, among other roles. Despite the clear value these services had for pharmacy patients, many services were neither consistently nor reasonably resourced, jeopardizing viability of pharmacies and pharmacy services.

New Business Item #2

**TIME FOR
DISCUSSION**

Uncompensated Care Mandates in Pharmacy

Introduced by Randy McDonough, Magaly Rodriguez de Bittner, Stephen Carroll on behalf of the APhA Board of Trustees

Motion: To adopt the following policy statements:

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2. APhA expects that all government entities, manufacturers, and payors incorporate transparent and comprehensive cost analyses associated with the implementation of new programs in establishing reimbursements for pharmacist-provided patient care services, medical products and supplies, and related administrative services.

New Business Item #3

Access to Reproductive Health Care Services

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Motion: To propose the following statements as written

1. APhA supports equitable patient access to evidence-based comprehensive reproductive health care, including, but not limited to, the management of pregnancy loss, ectopic pregnancy, infertility, pregnancy termination, sterilization, and contraception.
2. APhA recognizes patient autonomy in choosing reproductive health care services and the essential role of all health care professionals in facilitating access and advancing informed decision making.
3. APhA supports evidence-based legislation that ensures patient access to comprehensive reproductive health care services.

New Business Item #3

Access to Reproductive Health Care Services

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Related Policy

2012, 2005, 1992 The Role of Pharmacists in Public Health Awareness

2009 Disparities in Health Care

1990, 2004 Freedom to Choose

Background Summary

Reproductive health care plays a vital role in the overall health and well-being of all patients, whether it be disease prevention, or management of acute, chronic, or emergency conditions. As a result, patient access to these services is an important component of health care. When discussing comprehensive reproductive health care services, this may encompass a variety of evidence-based practices, such as the management of pregnancy loss (miscarriage), ectopic pregnancy, infertility, pregnancy termination, sterilization, and contraception. Health care professionals such as pharmacists have a duty to facilitate access to such services as clinically indicated and appropriate through patient education, as well as ordering, dispensing, and counseling patients on pertinent medication therapy. Pharmacists in particular have a role to play, with their unique accessibility to address patient gaps.

New Business Item #3

Access to Reproductive Health Care Services

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DISCUSSION**

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Motion: To propose the following statements as written

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2. APhA recognizes patient autonomy in choosing reproductive health care services and the essential role of all health care professionals in facilitating access and advancing informed decision making.
3. APhA supports evidence-based legislation that ensures patient access to comprehensive reproductive health care services.

New Business Item #4

Pharmacist Protection Related to Productive Health Care Access

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Motion: To propose the following statement as written

1. APhA opposes legal actions against pharmacies, pharmacists, and pharmacy personnel that provide patient access to reproductive health care services that are within pharmacist scope of practice.

New Business Item #4

Pharmacist Protection Related to Productive Health Care Access

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Related Policy

2022 Pharmacists Application of Profession Judgement

2004, 1998 Pharmacist Conscience Clause

Background Summary

Following the Dobbs v. Jackson SCOTUS ruling, pharmacists and other health care professionals, are concerned by new legal implications and threats to their standard patient care services. In states with laws restricting abortion access for example, health care professionals are concerned they may be subject to criminal penalties for helping to provide abortion care, both knowingly and unknowingly. Likewise, there is also concern about preserving rights to exercise professional judgment and conscientious refusal when providing patient care. This proposed policy addresses a need for protections of pharmacists practicing within the scope of their practice, and guidance to help them navigate varying regulations with due diligence and responsibility for patients.

New Business Item #4

Pharmacist Protection Related to Productive Health Care Access

**TIME FOR
DISCUSSION**

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Motion: To propose the following statement as written

1. APhA opposes legal actions against pharmacies, pharmacists, and pharmacy personnel that provide patient access to reproductive health care services that are within pharmacist scope of practice.

New Business Item #5

Employer Responsibilities Regarding Comprehensive Reproductive Health Care Access

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Motion: To propose the following statements as written

1. APhA advocates for employers to provide coverage and access to comprehensive reproductive health care services.
2. APhA demands that pharmacists and pharmacy personnel receive accommodations before, during and after pregnancy, including but not limited to sufficient time and space for breaks, opportunities to sit while working, and access to food and water between breaks.

New Business Item #5

Employer Responsibilities Regarding Comprehensive Reproductive Health Care Access

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Related Policy

2017, 2012, 1989 Equal Rights and Opportunities for Pharmacy Personnel
2015 Prenatal and Perinatal Care and Maternal Health
2012, 2007, 1970 Employment Standards Policy Statement

Background Summary

Although APhA has existing policy related to pharmacy personnel employment standards and employee benefits, the intention behind this proposed policy is to address gaps in employer responsibilities related to reproductive health care services following the Dobbs v. Jackson ruling, and the potential challenges to accessible care as a result of state or local laws. These accommodations for personnel may include, but are not limited to travel out of state to access reproductive health care services (i.e. medical or surgical abortions), adequate time off for recovery, support and accommodations for fertility treatment (such as assisted reproductive technology), and more.

New Business Item #5

Employer Responsibilities Regarding Comprehensive Reproductive Health Care Access

**TIME FOR
DISCUSSION**

Introduced by APhA Task Force on Reproductive Health Care Access Chair, Veronica Vernon

Motion: To propose the following statements as written

1. APhA advocates for employers to provide coverage and access to comprehensive reproductive health care services.
2. APhA demands that pharmacists and pharmacy personnel receive accommodations before, during and after pregnancy, including but not limited to sufficient time and space for breaks, opportunities to sit while working, and access to food and water between breaks.

New Business Item #6

Pharmacist Representation on Medical Staff

Introduced by Hillary Duvivier, on behalf of the United States Public Health Service

Motion: To adopt the following policy statements:

1. APhA advocates for pharmacists to be included as members of the medical staff and to be eligible to vote on bylaws, standards, rules, regulations, and policies that govern the medical staff.
2. APhA supports that pharmacists, as part of the medical staff, have parity in their opportunity to be credentialed and privileged as independent medical providers.

New Business Item #6

Pharmacist Representation on Medical Staff

Introduced by Hillary Duvivier, on behalf of the United States Public Health Service

Related Policy:

2013 Ensuring Access to Pharmacists' Services

2013 Pharmacists Providing Primary Care Services

2012, 2007, 1970 Employment Standards Policy Statement

Background Summary

Official inclusion of pharmacists as medical staff members would be a milestone in recognizing pharmacists' advanced practice roles, and could serve as a steppingstone to provider status and remuneration for their services. However, such inclusion is inconsistently applied, even within states that require compensation under major medical insurance for pharmacists providing health services. Medical staff or allied health staff membership creates an avenue for pharmacists to mirror the processes used by physicians and other providers for granting prescriptive authority and receiving reimbursement for services – chiefly, the credentialing and privileging process.

New Business Item #6

Pharmacist Representation on Medical Staff

**TIME FOR
DISCUSSION**

Introduced by Hillary Duvivier, on behalf of the United States Public Health Service

Motion: To adopt the following policy statements:

1. APhA advocates for pharmacists to be included as members of the medical staff and to be eligible to vote on bylaws, standards, rules, regulations, and policies that govern the medical staff.
2. APhA supports that pharmacists, as part of the medical staff, have parity in their opportunity to be credentialed and privileged as independent medical providers.

New Business Item #7

Greenhouse Gas Emissions

Introduced by Briana Rider, on behalf of the United States Public Health Service

Motion: To adopt the following policy statements:

1. APhA urges stakeholders within the pharmaceutical supply chain to reduce their greenhouse gas emissions.

New Business Item #7

Greenhouse Gas Emissions

Introduced by Briana Rider, on behalf of the United States Public Health Service

Related Policy:

2017 Drug Disposal Program Involvement

2007, 1992 Recycling of Pharmaceutical Packaging

2001 Syringe Disposal

Background Summary

Climate change is harming human health (e.g., extreme weather and climate events, infectious diseases, food and water safety and insecurity) and is listed by the World Health Organization as an urgent health challenge. All stakeholders within the pharmaceutical supply chain (e.g., manufacturers, distributors, pharmacies, health systems) can take actions to reduce their greenhouse gas emissions.

New Business Item #7

Greenhouse Gas Emissions

**TIME FOR
DISCUSSION**

Introduced by Briana Rider, on behalf of the United States Public Health Service

Motion: To adopt the following policy statements:

1. APhA urges stakeholders within the pharmaceutical supply chain to reduce their greenhouse gas emissions.

New Business Item #8

Access to Essential Medicines as a Fundamental Human Right

Introduced by Briana Rider, on behalf of the United States Public Health Service

Motion: To adopt the following policy statement:

1. APhA encourages access to quality and affordable essential medicines as a fundamental human right.

New Business Item #8

Access to Essential Medicines as a Fundamental Human Right

Introduced by Briana Rider, on behalf of the United States Public Health Service

Related Policy:

2016, 1994 – Pharmacy Services Benefits in Health Care Reform

Background Summary

At the 2015 United Nations General Assembly, 193 nations (including the United States) adopted the 2030 Agenda for Sustainable Development, which includes sustainable development goals and targets such as ensuring wellbeing and healthy lives at all ages. Access to quality and affordable essential medicines is a fundamental element of the right to universal health coverage and to health – which is a human right. Essential medicines are defined by the WHO as “those that satisfy the priority health care needs of a population”.

New Business Item #8

Access to Essential Medicines as a Fundamental Human Right

**TIME FOR
DISCUSSION**

Introduced by Briana Rider, on behalf of the United States Public Health Service

Motion: To adopt the following policy statement:

1. APhA encourages access to quality and affordable essential medicines as a fundamental human right.

New Business Item #9

Enforcing Antidiscrimination in the Dispensing of Medications

Introduced by Briana Rider, on behalf of the United States Public Health Service

Motion: To adopt the following proposed policy statement

1. APhA affirms its support of patients obtaining medications from pharmacies, free from discrimination.
2. APhA opposes discrimination on the basis of disability, pregnancy or related conditions.

New Business Item #9

Enforcing Antidiscrimination in the Dispensing of Medications

Introduced by Briana Rider, on behalf of the United States Public Health Service

Related Policy:

2017, 2012, 1989 Equal Rights and Opportunities for Pharmacy Personnel
1979 Consideration of the Equal Rights Amendment

Summary of Background

Since the Supreme Court's ruling on *Dobbs v. Jackson*, the U.S. Department of Health and Human Services (HHS) has received complaints about pharmacies not complying with their federal obligations to fill prescriptions. As recipients of federal financial assistance (e.g., Medicare and Medicaid payments), pharmacies are prohibited from discriminating against pharmacy customers on the bases of disability or sex, among other bases, including with regard to supplying medications. In July 2022, HHS issued guidance to retail pharmacies clarifying their obligations under federal civil rights law, which noted that a pharmacy may be discriminating on the basis of disability if the pharmacy refuses to fill an individual's prescription or does not stock the medication (e.g., misoprostol, methotrexate) because of its alternate uses (e.g., termination of pregnancy)

New Business Item #9

Enforcing Antidiscrimination in the Dispensing of Medications

**TIME FOR
DISCUSSION**

Introduced by Briana Rider, on behalf of the United States Public Health Service

Motion: To adopt the following proposed policy statement

1. APhA affirms its support of patients obtaining prescription medication from pharmacies, free from discrimination.
2. APhA opposes discrimination on the basis of disability, pregnancy or related conditions.

New Business Item #10

Pharmacy Shortage Areas

Introduced by Cory Holland, on behalf of APhA-APPM Public Health SIG

Motion: To adopt the following proposed policy statement

1. APhA recognizes geographic proximity and transportation to pharmacies as key determinants in equitable access to medications, vaccines, and patient care services.
2. APhA calls for laws, regulations, and policies that reduce pharmacy shortage areas and ensure equitable access to essential services.
3. APhA supports the development of financial incentives to establish physical pharmacy locations in pharmacy shortage areas and to prevent the closure of pharmacies in underserved areas.

New Business Item #10

Pharmacy Shortage Areas

Introduced by Cory Holland, on behalf of APhA-APPM Public Health SIG

Related Policy:

2020 Community-Based Pharmacists as Providers of Care

2017 Patient Access to Pharmacist-Prescribed Medications

2013 Ensuring Access to Pharmacists Services

Background Summary

Community pharmacies are a key access point for timely preventative care, acute and chronic disease management. They offer essential public health services such as immunizations, contraception, and naloxone, and treat common illnesses such as strep throat, influenza, and COVID-19. Pharmacists are estimated to have administered >50% of COVID-19 vaccinations in the United States by providing >270 million vaccinations. We commonly hear that 90% of Americans live within 5 miles of a pharmacy. In fact, 48.1% of people lived within one mile of any pharmacy, 73.1% within 2 miles, 88.9% within 5 miles, and 96.5% within 10 miles. However, distance alone does not adequately determine access to a pharmacy. Access is also impacted by the ability to spend money and time traveling to a pharmacy. Areas where access to pharmacies is especially difficult are referred to as pharmacy shortage areas or pharmacy deserts.

New Business Item #10

Pharmacy Shortage Areas

**TIME FOR
DISCUSSION**

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Motion: To adopt the following proposed policy statement

1. APhA recognizes geographic proximity and transportation to pharmacies as key determinants in equitable access to medications, vaccines, and patient care services.
2. APhA calls for laws, regulations, and policies that reduce pharmacy shortage areas and ensure equitable access to essential services.
3. APhA supports the development of financial incentives to establish physical pharmacy locations in pharmacy shortage areas and to prevent the closure of pharmacies in underserved areas.

New Business Item #11

Legalization or Decriminalization of Illicit Drugs

Introduced by Adrienne Simmons on behalf of herself

Motion: To amend the following policy statements as written

1. APhA opposes legalization of the possession, sale, distribution, or use of illicit drug substances for non-medical uses.
2. APhA supports decriminalization of the possession or use of illicit drug substances or paraphernalia.
3. APhA supports voluntary pathways for the treatment and rehabilitation of individuals who are charged with the possession or use of illicit drug substances and who have substance use or other related medical disorders.
4. ~~APhA supports the use of drug courts or other evidence-based mechanisms--when appropriate as determined by the courts--to provide alternate pathways within the legal criminal justice system for the treatment and rehabilitation of individuals who are charged with drug-related offenses and who have substance use or other related medical disorders.~~
5. APhA supports criminal penalties for persons convicted of ~~drug-related crimes, including but not limited to~~ drug trafficking, drug manufacturing, and or drug diversion, whenever alternate pathways are inappropriate as determined by the courts.

New Business Item #11

Legalization or Decriminalization of Illicit Drugs

Introduced by Adrienne Simmons on behalf of herself

Related Policy:

2022 Pharmacists Prescribing Authority and Increasing Access to Medications for Opioid Use Disorders

2021 Diversity, Equity, Inclusion and Belonging

2021 Social Determinants of Health

2020 Providing Affordable and Comprehensive Pharmacy Services to the Underserved

2019 Patient-Centered Care of People Who Inject Non-Medically Sanctioned Psychotropic or Psychotropic Substances

2018 Efforts to Reduce the Stigma Associated with Mental Health Disorders or Diseases

2016 Medication-Assisted Treatment

2015 Role of the Pharmacist in the Care of Patients Using Cannabis

2014 Controlled Substances and Other Medications with the Potential for Abuse and Use of Opioid Reversal Agents

New Business Item #11

Legalization or Decriminalization of Illicit Drugs

Introduced by Adrienne Simmons on behalf of herself

Background Summary:

Although APhA has taken steps to support providing care to PWUD, such as access to naloxone, nonprescription syringes, and medications for opioid use disorder, there is a potential dissonance identified between such policies, and others related to legalization and decriminalization of drugs. A strategy to reduce the number of people who are arrested, convicted, and incarcerated for drug-related offenses is to eliminate criminal penalties for drug use and possession, possession of drug use supplies such as syringes, and low-level drug sales. Drug decriminalization is different from legalization in that it does not establish a legally regulated market or supply chain for the cultivation, production, or sale of drugs. Approximately 1 in 5 people older than 12 years in the United States used an illicit drug in the past year — less than a third of this group, 24 million people, met criteria for a SUD relating to their drug use in the past year — meanwhile, there were 1.5 million drug-related arrests in the United States in 2019 and they were disproportionately among Black, Indigenous, and Latinx people.

New Business Item #11

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5. APhA supports criminal penalties for persons convicted of ~~drug-related crimes, including but not limited to~~ drug trafficking, drug manufacturing, ~~and~~ **or** drug diversion, whenever alternate pathways are inappropriate as determined by the courts.

New Business Item #12

Transgender and Nonbinary Health Care

Introduced by Ronald Levinson on behalf of APhA-ASP

Motion: To propose the following statements as written

1. APhA supports the enactment by state and federal legislatures to establish laws and policies to end discriminatory practices that limit access to care for transgender and nonbinary (TNB) people.
2. APhA advocates for intentional inclusion of the TNB community in clinical research.
3. APhA encourages equity in care for TNB individuals through:
 - a) Offering accredited continuing education on the pharmacist's role in transgender care, gender-affirming therapy, and health disparities in TNB patients.
 - b) Systematic integration and utilization of affirmed name and pronouns, gender identity, and anatomical inventory.
 - c) Availability and implementation of education and resources related to gender-diverse care for all persons employed in health care settings.

New Business Item #12

Transgender and Nonbinary Health Care

Introduced by Ronald Levinson on behalf of APhA-ASP

Related Policy

2022 Data to Advance Health Equity	2009 Disparities in Health Care
2021 People First Language	1990, 2005, 2019 Use of Representative Populations in Clinical Studies
2021 Social Determinants of Health	1979 Consideration of the Equal Rights Amendment

Background Summary

A growing number of state legislators are trying to vilify, ban, and limit access to Gender-Affirming Therapy (GAT). These actions are contrary to the vows pharmacists take to advocate for justice in advancing health equity and to consider the welfare of others above all. Pharmacy organizations have not published any policy statements on the role of pharmacists in caring for transgender and non-binary (TNB) populations. In addition to continuous health care provider education, many health systems still lack the integration and utilization of gender-affirming language and health information within their electronic health record (EHR). Using affirmed names and pronouns for patients greatly improves outcomes in patient care.

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 - c) Availability and implementation of education and resources related to gender-diverse care for all persons employed in health care settings.

New Business Review Committee

**TIME FOR
DISCUSSION**

NBI	Title	Author(s)
1	Development of Veterinary Curriculum	ACVP
2	Uncompensated Care Mandates in Pharmacy	Board of Trustees
3	Patient Access to Reproductive Health Care Services	Reproductive Health Care Task Force
4	Pharmacist Protection	Reproductive Health Care Task Force
5	Employer Responsibilities	Reproductive Health Care Task Force
6	Pharmacist Representation on Medical Staff	US PHS
7	Greenhouse Gas Emissions	US PHS
8	Access to Essential Medicines	US PHS
9	Enforcing Antidiscrimination in the Dispensing of Medications	US PHS
10	Pharmacy Shortage Areas	Public Health SIG
11	Drug Decriminalization	Adrienne Simmons
12	Transgender and Nonbinary Care	APhA-ASP

Housekeeping

Additional New Business Items (NBIs)

- Consideration of “urgent” NBIs must be sent to hod@aphanet.org, 24 hours before the start of the House Session
 - Thursday, March 23 at 2:45pm
 - Evaluated by House Leadership
- Additional consideration of urgent NBIs beyond this deadline will require suspension of House Rules in the final House session

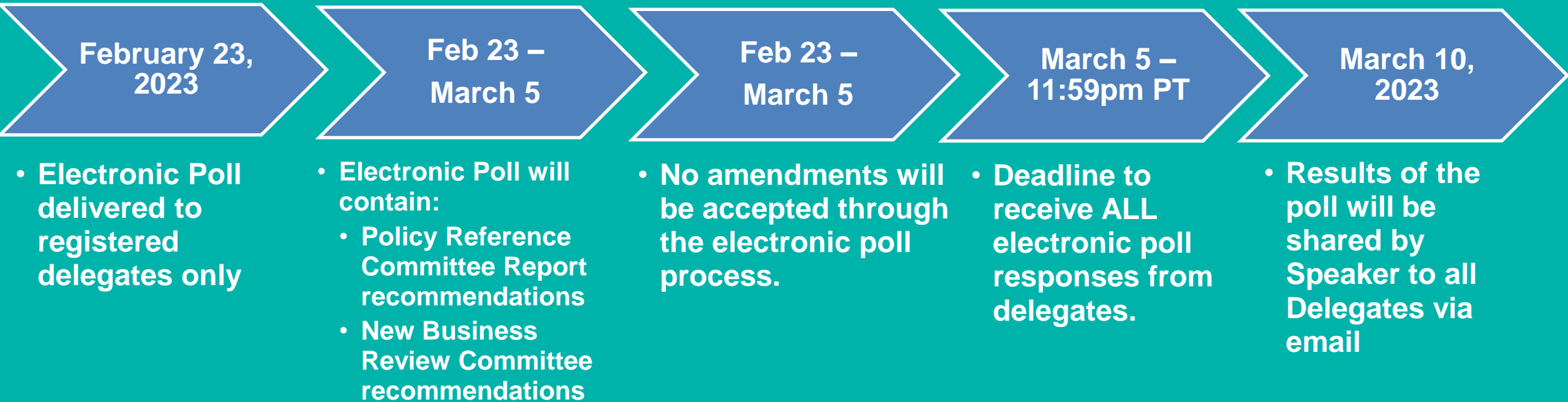
House Committee reports

- Available at <https://www.pharmacist.com/hod>

Delegate Reference Materials

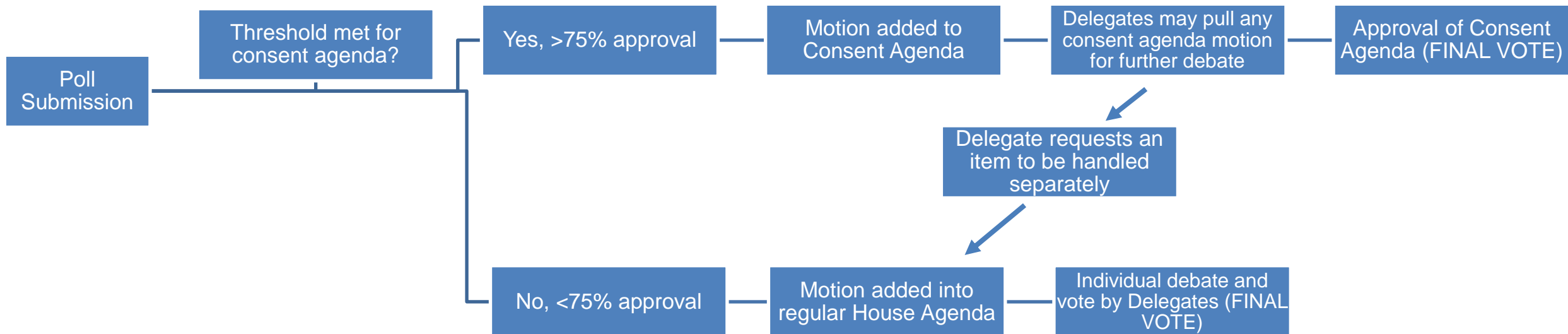
- Electronic version available on HOD webpage and sent out via email

Electronic Poll Process



Use of an Electronic Poll

Process to handle Policy Reference Committee Report



2023 House of Delegates

First Session of the House

March 24 from 2:45pm – 5:00pm PT

New Business Review Committee Open hearing

March 25 from 1:00pm – 2:30pm PT

Policy Reference Committee Open Hearing

March 26 from 1:00pm – 3:00pm PT

Second Session of the House

March 27 from 1:30pm – 4:30pm PT

Ideas for Future Policy Topics

- Are there topics we should consider for the 2024 House of Delegates?
 - These are topics needing more development than through the new business process
 - Tell us now or submit one using the online form here
 - <https://apha.secure-platform.com/a/solicitations/1584/home>
 - Email to hod@aphanet.org



Calling all Volunteers

- Interested in serving on a House committee next year?
 - Submit your background information and interest using the online form here:
 - <https://apha.secure-platform.com/a/solicitations/1716/home>
 - Let us know if you have additional questions on opportunities for engagement at hod@aphanet.org

SCAN ME





Open Hearing on APhA2023 New Business Items

Thank you for your time and attention!

Contact HOD Staff or submit additional
questions or comments at hod@aphanet.org

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