# Analysis of Current Statutes and Regulations Governing Pharmacists' Authority to Administer Cabotegravir for Pre-Exposure Prophylaxis in the United States

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### **BACKGROUND**

- Pre-exposure prophylaxis (PrEP) is underutilized in the United States (US) despite the availability of highly effective oral regimens
- ❖ The "Ending the HIV Epidemic" initiative aims to increase PrEP use among eligible Americans to 50% by 2030
- Pharmacists are well positioned to support these efforts by offering expanded hours of operation relative most clinics, widespread accessibility, and a nonstigmatizing setting for care
- Long-acting injectable cabotegravir (CAB) for PrEP presents an opportunity to improve PrEP utilization and efficacy by eliminating the adherence challenges of oral regimens
- Understanding the current landscape of medication administration privileges for pharmacists is critical to ensuring access to cabotegravir and supporting national efforts to prevent HIV transmission

#### **OBJECTIVE**

❖ To characterize the current legislative landscape of state pharmacy laws pertaining to pharmacists' ability to administer CAB for PrEP in the US, and to identify limitations imposed by variation among pharmacy rules and regulations

### **METHODS**

## Study Design

Cross-sectional analysis of statutes and regulations governing the practice of pharmacy in all 50 US states and the District of Columbia

#### **Data Collection**

- Limited to current laws in effect at the time of data analysis (February 2022)
- ❖ Data were obtained from the publicly accessible, official website of the regulatory agency with jurisdiction over the practice of pharmacy in each respective state

#### Coding

State laws were coded using a set of 6 coding questions and 35 sub-questions that capture legislative variables impacting pharmacist administration authority by state

#### **Mapping**

- States were arranged into 4 broad categories based on pharmacists' ability to administer cabotegravir:
  - 1) Broad authority to administer medications
  - 2) Authority to administer cabotegravir for PrEP limited to pharmacists who meet additional requirements
  - 3) Collaborative practice agreement required to administer cabotegravir for PrEP
  - 4) Unable to administer cabotegravir for PrEP

# **RESULTS**

Figure. Current legislative landscape for pharmacist administration of CAB

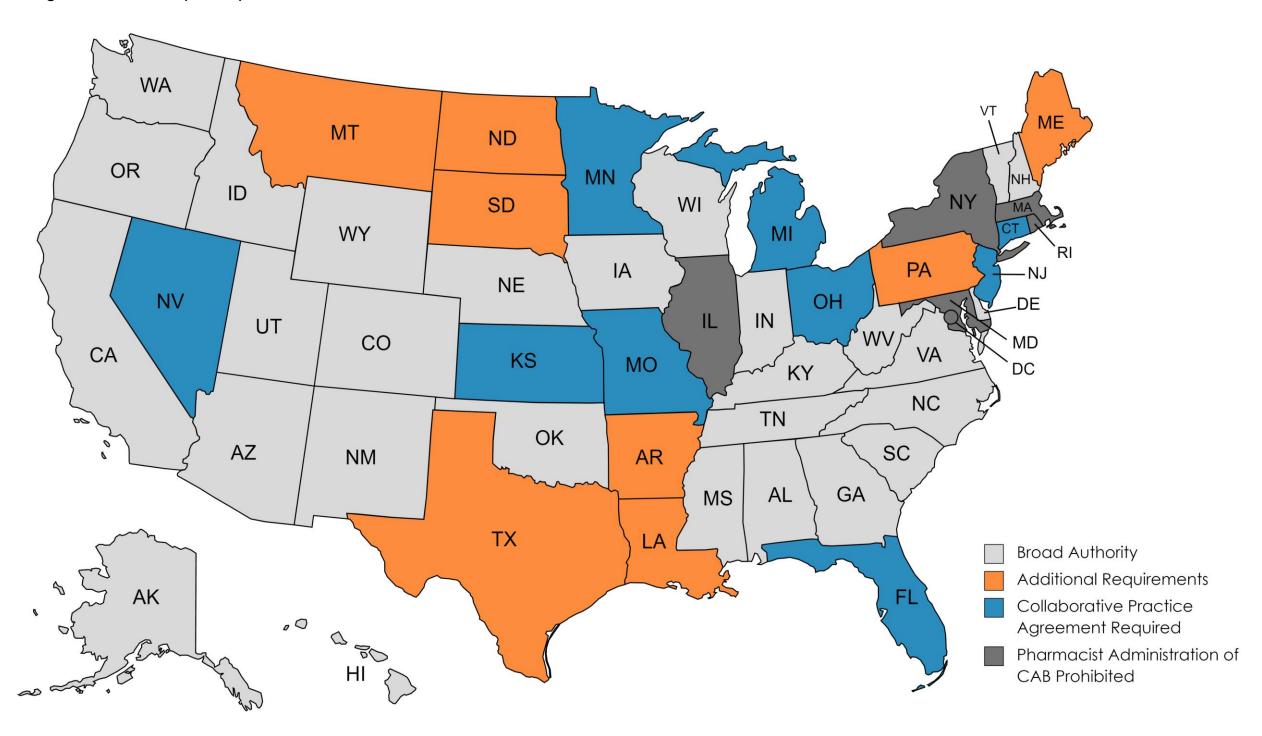


Table 1. Summary of state laws and regulations pertaining to the ability of pharmacists to administer CAB

Considerations	Total States	Individual States
Broad authority to provide medication administration services  a. Scope of pharmacy practice includes administration in the definition  b. Within the definition of "dispense," administration is interpreted as a function of dispensing	28	AL, AK, AZ, CA, CO, DE, GA, HI, ID, IN, IA, KY, MA, MS, NE, NH, NM, OK, OR, SC, TN, UT, VT, VA, WA, WV, WI, WY
Authority to administer CAB is restricted to specific circumstances:  a. Explicit instructions for pharmacist administration on the prescription  b. Standing protocol inclusion  c. Pharmacists holding additional certificates mandated by the state's board of pharmacy	8	AR, LA, ME, MT, ND, PA, SD, TX
Collaborative practice agreement required for medication administration	9	CT, FL, KS, MI, MN, MO, NV, NJ, OH
Pharmacist administration of CAB is prohibited	6	IL, MD, MA, NY, RI, DC

# **RESULTS (CONTINUED)**

Table 2. Summary of additional requirements for pharmacist administration of CAB

Considerations	Total States	Individual States
States requiring relevant continuing education (HIV or medication administration)	11	AR, DE, FL, GA, ME, NJ, NC, PA, UT, DC, WY
States requiring initial training beyond that required for vaccine administration or as part of degree curriculum	14	AR, PE, FL, HI, LA, ME, MD, MO, OH, OK, OR, SD, UT, WI
States explicitly requiring private spaces within pharmacies that is sufficient for administration of gluteal injections	16	AL, CA, FL, MN, NM, ND, OH, OR, PA, RI, SD, TX, UT, VT, WV, WY
Administration restricted to certain age groups	3	AR (≥7), NC (≥18), SD (≥18)

#### **CONCLUSIONS**

- Current state legislature allows administration of CAB by pharmacists in 44 States (80.3%).
- Among 9 States that require a collaborative practice agreement for CAB administration, 3 currently allow pharmacists to administer other long-acting injectable medications without restrictions.
- Of states prohibiting pharmacist administration of CAB, 2 allow administration of similar long-acting injectables
- Most states do not require treatment-specific training, despite permitting administration of CAB
- Considerable variation among state laws governing the practice of pharmacy
  exists
- Differences in continuing education and training requirements, scope of practice definition, restrictions imposed on pharmacists, and explicit and implicit verbiage and interpretations limit the ability of pharmacists to facilitate PrEP uptake through administration of CAB

# **DISCLOSURES**

Nothing to disclose

# **CONTACT INFORMATION**

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