

CAP Determination and Exception Processes for Critical Access Pharmacy (CAP) Designation

Purpose

To establish consistent, transparent, and equitable processes, as outlined in OAR 431-121-2000(4), for (1) Critical Access Pharmacy (CAP) designation determination (which includes adding and removing CAPs), and (2) requesting an exception to CAP designation criteria.

CAP Designation Determination Process

OHA staff conducts a routine quarterly review of all Oregon pharmacies to determine (1) if they qualify as a CAP; or (2) if they were previously determined a CAP, whether they still qualify, in accordance with OAR 431-121-2000 (4), following these steps:

Initial Screening (Weeks 1-2) commences first month of each quarter

- Verify pharmacy's location, ownership, and service offerings. Data is requested from Oregon Board of Pharmacy and OPDP PBM Vendor.
- Review data on high-poverty census tracts for pharmacy locations.
- Cross-check with existing CAP pharmacies and any new pharmacies in the region.
- Prepare proposed changes (i.e. new CAP or revised CAP designations) for review by internal HPA-OHA Critical Access Pharmacy Review Committee (CAPRC) (Clinical Pharmacy Policy and Policy Manager, OPDP Operations Manager, Community Pharmacy Liaison).

Committee Evaluation (Week 3)

CAPRC evaluates the following, which informs the final recommendation to the OPDP Director:

- Geographic access risks.
- Population considerations & service-based justification.
- Potential impact on community pharmacy access.
- Supporting documentation, if requested.
- Prepares final recommendation for OPDP Director for review and decision.

Final Decision & Notification (Weeks 4-5)

- The OPDP Director approves and creates Mini Memo for HPA/OHA Level 2 Decision.
- Health Policy and Analytics Division Director reviews and approves, amends or rejects the OPDP Director decision and communicates the decision to OHA Decision Coordinator.
- CAP designation list is published.
- Any pharmacy that loses CAP status will receive a 12-month transition period in which they maintain their CAP status. OPDP Director and OPDP Operations Manager will ensure notices are issued and documented.

Exceptions Requests

Exceptions Request Eligibility

Per OAR 431-121-2000 (4) (d), a pharmacy may be designated a CAP at the discretion of the OPDP Director. Pharmacies may apply for an exception to meeting routine CAP criteria automatically assessed by OHA. The pharmacy's [application](#) should demonstrate a **significant commitment to pharmacy access** including comprehensive answers to the following factors:

- **Geographic Justification:** Distance to nearest pharmacy & local access challenges.
- **Services Provided:** Compliance with CAP service requirements & additional services offered.
- **Medicaid Population Served:** Percentage of claims that are Medicaid prescriptions.
- **Community Impact:** Evidence of unmet pharmacy access needs.
- **Additional Justification:** Any unique circumstances affecting pharmacy viability such as unique community needs (e.g., underserved populations, university, high poverty census tract (HPCT) areas, other recent pharmacy closures) and hours of operation (e.g., evenings, weekends and holiday coverage).

Completed exception request form for each pharmacy location must be emailed to oha.pharmacy@oha.oregon.gov. Questions can be sent to the same address.

Exceptions Decision Process

Upon a pharmacy's submission of a complete [Exception Request Form](#), this will be placed in into the quarterly review queue.

Initial Screening (Day 1)

- Ensure CAP exception request form is completed with comprehensive answers.
- HPA-OHA OPDP Operations Manager reviews and validates data points and provides documentation to CAPRC.

Committee Evaluation (Day 2)

CAPRC evaluates exceptions based on a review of the application within the decision matrix. The matrix takes the following into account:

- Geographic access risks.
- Population considerations & service-based justification.
- Potential impact on community pharmacy access.
- Any additional justification provided by pharmacy.
- Prepares recommendations for OPDP director to review and decision.

Final Decision & Notification (One Week)

- The Director of OPDP creates a Mini Memo for an HPA/OHA Level 2 Decision conveying a recommendation to approve or deny the exception request.

- The Health Policy and Analytics Division Director reviews and approves or denies the exception request. This is communicated back to HPA-OHA Pharmacy Team and the OHA Decision Coordinator.
- Pharmacy is issued letter outlining CAP exception request decision.
- Pharmacies denied an exception may reapply for an exception due to, but not limited to, subsequent changes in services, and pharmacy closures.

Guidance For Exception Decision Making

The CAPRC assesses the 10 distinct criteria below to make a decision on each exception request.

Geography
1. On boundary of geographic parameter, nine miles or greater for closest pharmacy?
2. Immediately adjacent to HPCT? (meaning directly on boundary of High Poverty Census Tract)
Services Provided
1. Must provide all clinical services outlined in 431-121-2000 (4) offered? <ul style="list-style-type: none"> - provide access to immunizations; and - either <ul style="list-style-type: none"> o medication therapy management; or o pharmacist protocol-based prescribing
2. Interpretation & Translation Services?
3. Additional Clinical Services? <ul style="list-style-type: none"> - Programs to monitor and address gaps in care related to adherence, blood pressure monitoring, and hemoglobin A1C testing.
4. % of Medicaid <ul style="list-style-type: none"> - 10-20% Medicaid. - 21-30% Medicaid. - over 31% Medicaid.
5. Pharmacy hours extended to at least 6pm weekdays and one day on weekend?
6. Pharmacy provides after-hours access. (i.e. lockers, or phone access.)
7. Delivery at no charge?
Additional Justification
Provides compelling and detailed justification for exception request. This can include but is not limited to equity efforts, special populations served, seasonal travel considerations or partnerships that are verifiable.

1 The geographic consideration is used to ensure parameters are not concrete cut offs. As noted by 9 mile and boundary descriptions for HPCT. It is also intended to have pharmacy conduct their own assessment of pharmacy access.

2 Under services provided area, we may collect data points, and this can impact status during quarterly/annual re-validation reviews.