



**AIDS Drug Assistance Program  
Statewide Conference Call  
Emergency ADAP Update**

**Minutes  
January 26, 2011  
3:00 p.m. – 4:00 p.m.**

*Roll was not called for this meeting due to the number of participants on the call.*

Dr. Turner opened the call by welcoming everyone and indicating the purpose of the call is to provide the latest updates on the services being provided by Welvista and the shortage/shortfall and how ADAP plans to bridge over during this critical period.

Lorraine addressed participants and stated that this call is not to work out details or logistics but to talk about where we are. She stated the following:

**WHERE WE ARE:**

- There is currently a \$14M deficit. We will run out of funds by February 10, 2011. We are working on a bridge to cover clients until April 1. Our goal is to transition in a coordinated systematic way; however, this is not a final deal. It has almost become a full-time job for NASTAD. Tom Liberti and headquarters staff have worked with the Legislature, and the Governor's office to solicit assistance. Dr. Watkins and Welvista have been on calls trying to make this work. DOH staff and others are trying to move the Rock of Gibraltar.
- There are currently 9,981 clients in the program; this number changes daily. 60% of these clients are able to get all of their medications through Welvista. The remaining 40% of the 9,981 clients will remain in the ADAP program.
- The projected date for the transition is tentatively set for February 1, 2011. Clients will be transitioned back to ADAP on April 1.

**BRIDGING THE GAP – PARTNERING WITH WELVISTA:**

- Welvista's CEO and COO are working to transfer scripts using the QS1 system. Some pharmacies do not use QS1. ADAP sent an encrypted list to Category I pharmacies for them to coordinate transferring prescription information. We are still waiting for some information from Welvista to get this system worked out. There are client lists by county of those who are to be transitioned to Welvista available.
- The lists of clients being transitioned to Welvista have been sent to the 14 counties with pharmacies. For counties without pharmacies, the list of clients to be transitioned from those counties has been sent electronically to Central Pharmacy. Pharmacies using QS1 will transfer prescriptions to Welvista electronically. For those pharmacies that do not use QS1, we are seeking a simple and secure way to make the transfer. Welvista has established a new store to handle script transfers. The mechanics will come at a

later date. The format with data elements will be provided by Welvista. Whether the information/prescriptions will be mailed or electronically transferred is yet to be determined.

- The list is arranged so that those clients who will need to have medications dispensed first will be identified. Meanwhile, Welvista is working behind the scenes with Pharmacies to stock the shelves.

#### **DISTRIBUTION OF MEDICATIONS:**

- We have researched all the legalities of distributing the medications coming from Welvista to the clients. Medications MUST be distributed by the ADAP and not from the local CHD pharmacy.
- All medications dispensed by Welvista will be mailed to the designated facility and must be distributed to the client by the Primary Contact in the county. The mailing information provided by the CHDs will be given to Welvista for shipping.
- Welvista will package medications for individual clients with the client's name on the bottle. Welvista will pack a 60-day supply in one bottle to ensure clients have their medications through March 31<sup>st</sup>. However, if a client only has 30 days left on the script Welvista will request a new script in order to dispense the 60 days of meds.

#### **TRANSITIONED CLIENT RECORDS:**

- During the Transition/Welvista period, client's records will be temporarily suspended in the ADAP database to avoid auto closure. Details are still being worked out for transitioning clients back into the ADAP program and any remaining refills.
- ADAP clients transitioning to Welvista with ADAP reenrollment due will not need to complete their ADAP recertification as their records will be suspended during this period. Clients will be responsible to keep their patient care core eligibility current if they intend to receive other non-ADAP, Ryan White Part B services.
- NOTE: If a client presents to pick up his/her medications, STOP, please assess and ask:
  1. Are they a client transitioning to Welvista?
  2. Do they have any medications on hand?
  3. Can you do a partial fill (two weeks)?

#### **SECURITY:**

Chief Jasper Watkins from Central Pharmacy stressed the following about CHDs receiving, storing and distributing medications from Welvista:

- When medications arrive, they must be processed in by an ADAP contact person so that there is a record of their arrival.
- They must be stored in a secured room; and locked in a secured cabinet at all times that no one outside of ADAP can have access to.
- They must be processed out by an ADAP contact person. Clients must sign for their medications and form must be kept in their file.
- Medications MUST NEVER BE STORED IN A PHARMACY OR HANDLED BY A PHARMACY STAFF PERSON. This would be illegal. For copies of the procedures manual contact Brenda Sowell-Smith in Central Pharmacy.

**With no further questions the meeting adjourned at 3:50 p.m.**