



March 25, 2025

Ms. Sue Mears
Department of Inspections, Appeals, and Licensing
6200 Park Avenue, Suite 100
Des Moines, Iowa 50321
sue.mears@dia.iowa.gov

RE: ARC 8978C “Standards – Practice of Pharmacy”

Dear Ms. Mears:

On behalf of ATA Action, I am writing to provide the following comment on the proposed rules related to the practice of pharmacy.

ATA Action, the American Telemedicine Association’s affiliated trade association focused on advocacy, advances policy to ensure all individuals have permanent access to telehealth services across the care continuum. ATA Action supports the enactment of state and federal telehealth coverage and fair payment policies to secure telehealth access for all Americans, including those in rural and underserved communities. ATA Action recognizes that telehealth and virtual care have the potential to truly transform the health care delivery system – by improving patient outcomes, enhancing safety and effectiveness of care, addressing health disparities, and reducing costs – if only allowed to flourish. Many members of the ATA and ATA Action offer patients the option to receive their medication through mail-order fulfillment. This option can increase patient access to medication and improve patient adherence to treatment, leading to better patient outcomes.

ATA Action urges the Board to reconsider its proposed rule 481-552.23(155A) Patient Counseling with affirmative language that continues to enable the use of telehealth services in Iowa and better aligns with how patient counseling is handled in other states when patients choose to receive prescriptions through non-resident pharmacy services. Specifically, ATA Action recommends the Board amend this proposed rule section to allow “counseling in written form to the patient if a drug or device will be distributed to the patient outside of the confines of the pharmacy by mail or other delivery service.”

Patient counseling on new drugs and drug therapy is an important health care option that pharmacists across the country provide to patients every day. Evaluated and diagnosed patients receive drug prescriptions for treatment from their licensed physicians as well as initial counseling on the drugs and drug therapy at that time. Pharmacist patient counseling should supplement physician counseling at the choice of the patient when a need arises. It should not be structured as an artificial barrier to care as to require a patient to always have to go to physical pharmacy location to fill a new prescription or for a non-resident pharmacy to physically make contact with the patient before a new prescription can be shipped. Notably, the federal Centers for Medicare and Medicaid Services Drug Diversion Toolkit on “Patient Counseling – A Pharmacist’s Responsibility to Ensure Compliance” addresses patient counseling when the patient is not present by offering “[o]ne method to ensure compliance is to provide printed drug

ATA ACTION

901 N. Glebe Road, Ste 850 | Arlington, VA 22203
Info@ataaction.org



information that includes pharmacy business hours as well as a toll-free number for patients to speak to a pharmacist. Mail order pharmacies commonly use this method.”¹

ATA Action is appreciative of the Board’s mission to protect public health and supportive of its efforts to promulgate effective pharmacy rules. Thank you for the opportunity to comment. If you have any questions or would like to engage in additional discussion regarding the telehealth industry’s perspective, please contact me at kzebley@ataaction.org.

Kind regards,

A handwritten signature in black ink, appearing to read "Kyle Zebley", is written over a light gray circular watermark.

Kyle Zebley
Executive Director
ATA Action

¹ Drug Diversion Toolkit, Patient Counseling – A Pharmacist’s Responsibility to Ensure Compliance, Centers for Medicare & Medicaid Services, November 2014.

<https://www.cms.gov/files/document/patientcounselingbooklet111414pdf>