

Panel of Peers – Reflections From Select Panel Members April 29, 2022



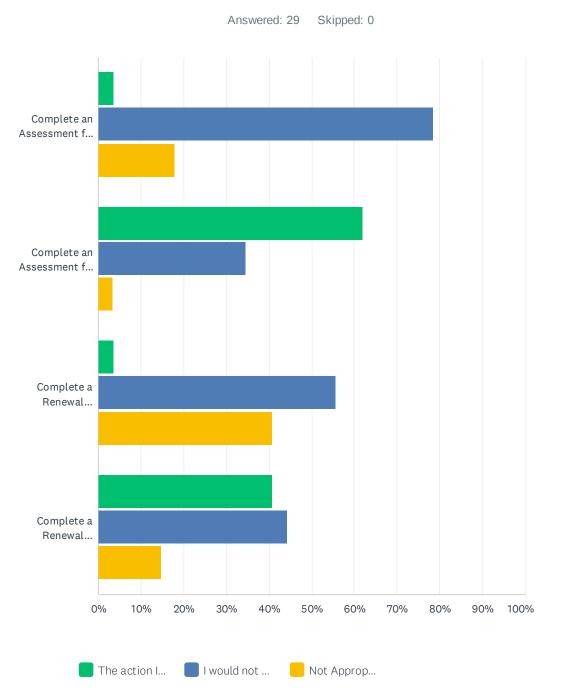
## Question 1

- Fairly equal split on how people would handle this situation:
  - Complete a minor ailment assessment 1 tx + 1 Rpt 62% Action I would take, 3% Not Appropriate
  - Complete a Renewal Assessment 1 tx + 1 Rpt 41% Action I would take, 15% Not Appropriate

## Comments

- It really comes down to who pays. MSI or the patient. In this case for a non-critical minor ailment, it would not be appropriate to bill MSI for the renewal.
- It's a bit grey as to wich category it would fall, both really. If patient can pay for a minor ailment then a minor ailment. Otherwise a renewal.
- I feel it's more appropriate as a minor ailment but would lean toward a renewal so it's covered for the patient.
- Broken reimbursement system. Assessment with a prescription but called two things with two different fees. Would the fees impact how some bill the service? (one pays more) Does the reimbursement impact how some bill the service? (one is covered) It could be a renewal if you consider it a chronic condition (recurrent herpes labialis) that only occurs intermittently even with a long gap. It clearly could be billed as a minor ailment.

Q1 YD is a 42 yo female who presents with a cold sore that started to appear this morning. The last time she had a cold sore was 2 years ago and she was prescribed valacyclovir by the pharmacist as a Minor Ailment. It was filled twice that year. She had 2 other prescriptions for the antiviral 3 years ago and 6 years ago. Her medical background is unremarkable. How should a pharmacist respond?



	THE ACTION I WOULD TAKE	I WOULD NOT DO THIS, BUT IT IS OKAY IF ANOTHER PHARMACIST DID	NOT APPROPRIATE	TOTAL
Complete an Assessment for a Minor Ailment 1 treatment NR	3.57% 1	78.57% 22	17.86% 5	28
Complete an Assessment for a Minor Ailment 1 treatment plus one refill	62.07% 18	34.48% 10	3.45% 1	29
Complete a Renewal Assessment for 1 treatment NR	3.70% 1	55.56% 15	40.74% 11	27
Complete a Renewal Assessment for 1 treatment plus one refill	40.74% 11	44.44% 12	14.81% 4	27



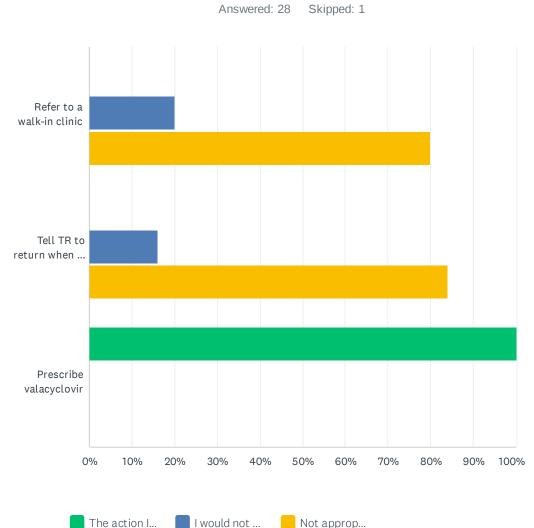


Terrible question. 100% agreed. Nothing to learn here.:
Prescribe valacyclovir – 100% - Action I would take.

## Comments

- Early treatment is best.
- Prodromal symptoms are when you want to treat.
- Minor ailment with a history. Patient recognizes best course is early treatment. Low risk prescribing.

Q2 TR is a 36 yo male who presents requesting an assessment for a cold sore. TR has had 3 or 4 cold sores in the past 10 years and has used valacyclovir. The last one was 2 years ago. Upon inspection there is no lesion on his lip, but he states that he is experiencing a familiar prodromal tingling. His medical background is unremarkable. How should a pharmacist respond?



	THE ACTION I WOULD TAKE	I WOULD NOT DO THIS, BUT IT IS OKAY IF ANOTHER PHARMACIST DID	NOT APPROPRIATE	TOTAL
Refer to a walk-in clinic	0.00%	20.00% 5	80.00% 20	25
Tell TR to return when the lesion appears	0.00% 0	16.00% 4	84.00% 21	25
Prescribe valacyclovir	100.00% 27	0.00% 0	0.00% 0	27