



# OLD DOMINION EMERGENCY MEDICAL SERVICES ALLIANCE

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## MEMORANDUM

**TO** EMS Agency Administration and Leadership  
**FROM** Heidi M. Hooker, Executive Director  
**DATE** May 9, 2024  
**SUBJECT** Urgent Update #3 Re: Regional Medication Kit Exchange Program

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Dear EMS Community,

In late March, members of the Virginia Regional EMS Medication Kit Transition Workgroup lent their expertise to assist the Executive Director of the Board of Pharmacy (BOP), Caroline Juran, in crafting draft EMS-informed regulations. These drafts, along with additional input, were presented at the March 28, 2024, BOP Meeting. Backed by approximately 30 EMS and healthcare stakeholders, Juran advocated for revising existing BOP regulations to better support EMS agencies. Recognizing the urgency due to federal regulations, the BOP decided to address these concerns promptly by enacting them as emergency regulations.

Prior to the meeting, we actively sought additional comments on the draft regulations presented at the March 28<sup>th</sup> BOP Meeting and the amended version on April 20. Comments received by April 29<sup>th</sup> further informed the draft presented for the BOP's action.

At the May 2 BOP Meeting, over 75 EMS stakeholders witnessed as the Board meticulously discussed EMS comments and reviewed the draft EMS Amendments for EMS Related Regulations line-by-line for over 4 hours before unanimously passing them as Emergency Regulations. The BOP initiated a Notice of Intent for Regulatory Action, emphasizing that the regulations must undergo an administrative review process involving the Office of the Attorney General, Department of Planning and Budget, and Governor, which may take approximately 10 weeks to complete. Emergency regulations are temporary and must be replaced with permanent regulations. Additional public comment opportunities on the adoption of permanent regulations will be available in the future should additional amendments be deemed necessary.

The BOP also repealed their previous Guidance Document 110-4, Virginia Board of Pharmacy Emergency Medical Services Drug Kits, as some guidance is now inconsistent with the language adopted by the board at their May 2<sup>nd</sup> meeting. Board staff indicated they will develop a policy document in the near future to assist with educating EMS stakeholders on the pending emergency regulations.

Some of the approved changes include:

- Allowing EMS agencies within a jurisdiction to be served by a single EMS Agency with a CSR/DEA license.
- Allowing EMS agencies within a region to be served by the Regional EMS Council with a single CSR license.

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Serving the Citizens, EMS Agencies, Acute Care Hospitals, and Local Governments in Virginia Planning Districts 13, 14, 15, and 19.

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- Allowing for the continuation of Hospital 1:1 Exchange of Schedule 6 medications, assuming compliance with federal law and regulation.
- Allowing anyone with Virginia EMS certification at any level authorized to administer medications to have access to medications under a supervising authority for the purposes of medication supply/resupply management.
- Allowing medications and controlled substances to be transported in vehicles owned by EMS agencies, regional EMS councils, or jurisdictions and used by EMS agencies and regional EMS councils for the purpose of medical supply/resupply management.
- Removing the requirement for alarm systems for the temporary storage of medication kits in an EMS Agency registered or designated location when the vehicle they are stored on must be removed from service for repair or maintenance and when only Schedule 6 drugs are stored in the building.
- Requiring only medication kits containing Schedule 2-5 medications to be sealed.
- Conforming BOP regulations to the expected minimum regulations required by FDA and DEA for EMS.

We could not be more pleased with the outcome. The BOP and its staff demonstrated remarkable responsiveness to the EMS community's needs in this crisis and deserve our gratitude and respect.

Furthermore, these new regulations provide regional EMS councils with additional options to support their EMS agencies beyond just assisting them with obtaining their CSR certifications and DEA Licenses. Regional EMS councils, being 501(c)(3) organizations, can accept funds to support the medication kit systems that are not available to local governments for the same purpose. Also, regional EMS councils may assist by providing their agencies with medications to restock their kits, or even restock their kits for them.

In the coming weeks, ODEMSA will collaborate with other regional EMS councils to evaluate these new options and present them to our EMS agencies for consideration. Additionally, the teams developing tools to assist EMS agencies with their EMS Medication Kit Transition will report out at the May 13, 2024, meeting of the Virginia Regional EMS Medication Kit Workgroup. These tools will be made available on each EMS Council's website under four categories: CSR/DEA Tools, Policies and Procedures Tools, Purchasing Tools, and Financial Assistance Tools.

We eagerly anticipate continuing our work with EMS agencies to develop the best options to ensure their access to emergency medications and maintain a regional EMS delivery system and standard of care. Now that the BOP emergency regulations are in place, we anticipate having a regional plan developed in the coming weeks.

We remain dedicated to supporting you and ensuring the highest standards of patient care across our region. A copy of this and the other two memorandums can be found on the ODEMSA website, along with other resources for this transition, at <https://odemsa.net/regional-drug-box-program-2024/>.

Sincerely,



Heidi M. Hooker