

**MINUTES OF THE
IDAHO STATE BOARD OF PHARMACY
August 3-4, 2016**

**Idaho State Capital Building
Boise, Idaho**

This meeting of the Board was held to conduct regular Board business.

Chairman Kristina Jonas, PharmD, called the meeting to order at 9:00 a.m. In attendance were Vice Chairman, Nicki Chopski, PharmD; Board members Rich de Blaquiere, PharmD; and Holly Henggeler, PharmD creating a quorum. Also in attendance were Alex J. Adams, PharmD, MPH, Executive Director; Berk Fraser, RPh, Deputy Executive Director; Fred Collings, Chief Investigator, Lisa Culley, CPhT, Jaime Sommer and Wendy Shiell, Compliance Officers; Misty Lawrence, Management Assistant; Andy Snook, Deputy Attorney General; Carl Withroe, Deputy Attorney General; Ellen Mitchell, Program Information Coordinator; Dylan Atkinson, student pharmacist on rotation with the Board from the University of Pittsburgh, and several members of the public.

Chairman Jonas expressed the Board's appreciation of Dr. de Blaquiere's service as chair over the past year and presented him with an engraved gavel to commemorate his exemplary service to the Board.

Dr. Henggeler motioned to approve the minutes of the June 2, 2016 meeting. Dr. Chopski seconded, the motion carried unanimously.

Dr. Henggeler motioned to approve the minutes of the July, 11, 2016 conference call. Dr. Chopski seconded, the motion carried unanimously.

The Board took up the matter of the Consent Agenda, which contained the following matters:

- Board Performance Dashboard
- Travel Calendar
- Exercises of Delegated Authority
- Director's Expenses

Dr. de Blaquiere motioned to approve the documents in the Consent Agenda. Dr. Henggeler seconded, the motion carried unanimously.

The Board took up the matter of the Consent Agenda: Stipulation and Consent Orders, which contained the following matters:

- Walgreens Store #0492 – Staff dispensed trazadone 50 mg tablets instead of tramadol 50 mg tab due to trazadone being placed in the ADS cell bearing the

bar code for tramadol. The error constitutes a failure to maintain an audit trail of all products deposited in the ADS cells. By signing the Stipulation and Order, Walgreens agrees to pay an administrative fine in the amount of \$1,000.

- Prodigy Health Supplier Corp – Failed to renew their wholesale distributor license on July 1, 2015 and continued to ship product into Idaho without appropriate licensure. By signing the Stipulation and Order, Prodigy agrees to pay an administrative fine in the amount of \$2,000.
- Leo Frank, PharmD - Allowed an unregistered technician to perform technician duties in the pharmacy. By signing the Stipulation and Order, Dr. Frank agrees to pay an administrative fine in the amount of \$250.
- Charles Ashton, PharmD - Allowed an unregistered technician to perform technician duties in the pharmacy and had expired medications on the pharmacy shelves after being instructed to remove them by a Board Compliance Officer. By signing the Stipulation and Order, Dr. Ashton agrees to pay an administrative fine in the amount of \$500.
- Cindy Green, CPhT – Failed to renew her pharmacy technician registration in a timely manner and continued to work while it was expired. By signing the Stipulation and Order, Ms. Green agrees to pay an administrative fine in the amount of \$50.
- Susan Ralph, NP – Dispensed misbranded medication while working at Healthy Habits Wellness Clinic in Meridian, Idaho. By signing the Stipulation and Order, Ms. Ralph agrees to pay an administrative fine in the amount of \$1,000.
- Shah Afshar, RPh – Failed to use required order forms when transferring a controlled substance, failed to maintain records in conformance with federal law and failed to meet record keeping requirements for controlled substances. By signing the Stipulation and Order, Mr. Afshar agrees to pay an administrative fine in the amount of \$2,000.

Dr. Henggeler motioned to exclude Frank, Ashton, Green, and Afshar for discussion, Dr. Chopski seconded, the motion carried unanimously.

Dr. Chopski motioned to accept the Stipulation and Consent Orders of Walgreens, Prodigy, and Ralph. Dr. de Blaquiere seconded, the motion carried unanimously.

Following a brief discussion on the remaining Stipulation and Consent Orders, Dr. Henggeler stated she wanted to see higher fines in the future for similar cases. Dr. Chopski stated the fines should be in line with the amount of money realized while working without a license and high enough to discourage allowing unlicensed personnel to work in the pharmacy. Dr. Henggeler motioned to accept the remainder of the Stipulation and Consent Orders of Frank, Ashton, Green and Afshar. Dr. Chopski seconded, the motion carried unanimously.

Jason Reading, PharmD attended the meeting to request approval of a telepharmacy in Shoshone, Idaho with the central pharmacy being Gooding Pharmacy located in Gooding, Idaho. Dr. Reading requested waivers to the following:

- Requirement to have an ADS – Rule 711, et al
- Requirement for solid core doors – Rule 710.13.b.ii
- Requirement to be located within a medical clinic – Rule 710.01.c

Following Dr. Reading's presentation, Dr. Henggeler stated a pharmacist is always better in view of public safety, and that she is concerned the Board is allowing situations where pharmacists are not directly involved with patient care. Dr. Chopski stated that Shoshone has already been without a pharmacist for 15 years, and that approval of this telepharmacy will bring a pharmacist back to the citizens of Shoshone even if for limited hours, thus increasing access for patients. Dr. de Blaquiere motioned to approve the application and the three requested waivers, Dr. Chopski seconded. Following discussion Dr. de Blaquiere modified his motion to add that the waivers would expire on adjournment of the Idaho state legislature in 2017 and that the additional restrictions placed on other in-state telepharmacies would similarly apply, which include:

- PIC may only oversee 2 telepharmacy sites;
- Must conduct a perpetual inventory of Schedule II medications; and
- Must conduct random audit of three controlled substances at least quarterly.

Dr. Chopski seconded, the motion carried with Dr. Henggeler opposed.

In the interest of efficiency the Board allowed Dr. Reading to share his written comments concerning the telepharmacy docket which he had previously submitted. Dr. Reading questioned the necessity of the rule regarding returns in a telepharmacy as returns are covered in Rule 604. He also commented that the number of remote sites supervised by a PIC should be a 'workload' number based on the number of prescriptions filled at each site as opposed to a strict ratio of 2:1. The Board thanked him for participating in the rulemaking process and hopes more pharmacists follow suit.

Dr. Adams provided an update from the Idaho Medical Association (IMA) meeting he attended. The IMA is pursuing legislation requiring all immunizations be reported to the state registry to ensure multi-dose series are completed. The legislation would apply to all providers. Currently about 65% of pharmacies are reporting immunizations to the state registry.

Chairman Jonas called the hearing for Brad Stoick, RPh to order. Dr. Henggeler recused herself based on a professional relationship with Mr. Stoick. Mr. Stoick was ordered by the Board to contact Southworth Associates within 10 days of the January 2016 meeting and schedule an evaluation. It is alleged that Mr. Stoick failed to follow that order. Prior to testimony, Chairman Jonas swore in Mr. Stoick, his daughter Nani Stoick, and Berk Fraser. Mr. Stoick attended the hearing without legal counsel,

representing himself. Carl Withroe, DAG presented the Board's case. During testimony Mr. Stoick claimed he contacted Southworth Associates, but did not schedule an evaluation due to injuries suffered in a skiing accident, his busy work schedule, and Southworth Associates' requirement that he sign a five year substance abuse monitoring contract prior to obtaining an evaluation. Following the Board's deliberations, Dr. Chopski motioned to indefinitely suspend Mr. Stoick's Idaho pharmacist license and levy an administrative fine in the amount of \$1,000; the previous Board Order must be complied with prior to any application for reinstatement. Dr. de Blaquiere seconded. During discussion Dr. de Blaquiere stated he feels the fine is low. Motion carried with Drs. Chopski and de Blaquiere in favor of the motion. Mr. Sperry arrived after testimony had begun and did not vote or participate in the discussion.

Misty Lawrence presented an update of the Board's financial position. Mrs. Lawrence highlighted the following items:

- The Board has four months of the year when its receipts exceeds expenditures. Mrs. Lawrence explained this is not currently a problem because there is enough in the cash balance to cover a full year's appropriation, regardless of cash flow. If the cash balance was spent down it could become an issue. Dr. Adams spoke to the possibility of making changes to the annual renewal date to help alleviate the cash flow/work flow issue and it is on the list to discuss during the next strategic planning meeting.
- The Board's fiscal year end cash balance was \$2,411,780, which is an increase of \$307,480 or 14.6% over last year. This amount is the difference between receipts and disbursements for the year. Actual receipts were up \$107,300 or 6.2%. A total of \$111,993 or 6.8% of last year's appropriation was reverted in FY16.
- Staff was able to work with DFM to get approval to move \$23,000 from operating to Capital Outlay (CO) and to purchase furnishing for new office space. Items purchased include a Board table, witness table, task chairs for the Board, audience chairs, and furnishings for 2 new staff offices.
- Looking at a comparison of the last 4 years, there continues to be a trend of annual receipts exceeding both the appropriation and expenditures adding to the cash fund balance. We don't anticipate this trend to continue as the FY17 appropriation is \$2,025,700 and if we utilize the full amount of the appropriation and have the same cash flow as FY16 we should see a small reduction in the cash balance at the end of FY17. The anticipated reduction will bring us close to the cash balance covering 1 year or less of appropriation.
- Legislative Services Office (LSO) dispatched two auditors to the Board office for a little over two weeks for the regular audit of the agency. The process was quick and smooth, though we are finishing up some requests, which should be completed by the end of the month.
- Board staff will also start preparation of the FY18 budget request and performance management review this month, with a due date of September 1st.

We will request 2 ongoing line items this year. The first is an additional appropriation for hearing officers in line with the recent legislative direction. There is currently \$13,500 in the base for this expense. Historically hearings have averaged about \$3,000, this doesn't include any other testing fees or transcript fees. This amount would cover roughly four average cases. The next will be to cover credit card fees. Staff wants to put in a line item that would put credit card fees into the appropriation. This will not be an additional expense, it is making the cost more transparent and easier to report.

- Lastly, the Board has two personnel updates. The Board has hired Theresa Arnold as a Customer Service Representative. Ms. Arnold comes to us from the Ada County Board of Elections where she was in charge of early voting. The IT System Integration Analyst position has been reposted and we're working on the RFP preparation for the new licensing system.

The Board thanked Mrs. Lawrence for her comprehensive update.

The Board took up the Compliance Update agenda item. Berk Fraser asked the Board for direction regarding Rule 601 Pharmacy Space and Fixtures. The compliance officers have observed syringes, latex gloves used for immunizations, immunization emergency kits, vials and bottles with caps, glucometers, records and test strips among other items stored in pharmacy bathrooms during inspections. The compliance team noted that in some cases, such storage in the lavatory is impacting the use of facilities by pharmacy staff. Mr. Fraser noted that rule 601.01 requires that a pharmacy must be maintained in a clean and sanitary condition, and that rule 601.03 requires a lavatory restricted to pharmacy staff. Mr. Sperry believes bathrooms and storage is a business decision and should be left to the owner. Mr. Fraser recommended the following standard be adopted, *'items injected, inhaled, ingested, handed to or will be in contact with a patient cannot be stored in the lavatory'*. Following discussion the Board accepted Mr. Fraser's recommendation and directed compliance staff to approach the issue from an educational standpoint. A newsletter article will be prepared, and the rule will be further discussed in 2017.

Following lunch, Rich Mazzoni, RPh, joined the meeting telephonically to share his experiences with remote data entry technicians. Mr. Mazzoni serves on the New Mexico Board of Pharmacy and the NABP Executive Committee. The Board's current draft rule language on remote data entry technicians is based on the New Mexico Board's language. Mr. Mazzoni stated New Mexico eliminated the pharmacist to technician ratio a few years ago, so it no longer applies in New Mexico. These remote data entry positions strictly complete data entry from their home and submit it into the pharmacy queue. The security lies in the technology; the computer terminal is 'dumb' as in it has no hard drive or USB drives or any other way to store patient information. The technicians are required to be certified and have one year of pharmacy technician experience. Only in-state facilities are allowed to use this model; the PIC is located at the central pharmacy. The New Mexico Board reserves the right to enter the remote

locations for purposes of inspection. Mr. Mazzone indicated there have been no disciplinary cases related to remote data entry in their state and it allows many people to secure employment that may not be able to otherwise.

Mark Johnston, RPh representing CVS shared comments on Rule 142.02 that requires parenteral admixtures to be labeled with ...*'beyond use date and time...'*. Mr. Johnston asked the Board to consider striking *'and time'* from the rule. The Board agreed with this update. Dr. Adams indicated the rule will be added to the pharmacy practice rule docket for discussion at the negotiated rulemaking session and, if agreed to by the Board, will be published in the Administrative Bulletin for public comment at the October meeting. Mr. Johnston also discussed the Board's recent rule change regarding ordering and interpreting laboratory tests. He indicated he found an inadvertent omission regarding tuberculosis (TB) skin tests, which have become common in pharmacies in other states. Mr. Johnston indicated this omission occurred because the TB skin test is actually a prescription product, and could be patched with an agency bill.

Dr. Adams indicated that the Board's rotation student researched this omission. Dylan Atkinson presented information regarding pharmacist TB testing in New Mexico. The program has been successful with an approximate 92% return rate for the actual reading following the skin test, compared to approximately 45% in other settings, with patients citing access as the biggest barrier. Pam Eaton, representing the Idaho State Pharmacy Association indicated the association would support Board legislation to correct the omission.

Dr. Adams presented information regarding U-47700. U-47700 is a synthetic opioid that is reported to be nearly 8 times more potent than morphine. It is linked to at least 50 deaths nationwide. According to the Idaho Office of Drug Policy (ODP), it has been linked to two recent deaths in Idaho. This substance is not currently scheduled federally, and states have taken emergency action to place it in Schedule 1. Board staff has been approached by ODP to take such action. Dr. Henggeler motioned to move forward with a temporary rule designating U47700 as a controlled substance in Idaho, to be effective August 3, 2016. Mr. Sperry seconded, the motion carried unanimously. The temporary rule will be published in the September Administrative Bulletin.

The Board took up the matter of Virtual Manufacturers. Board statutes and rules do not directly address the concept of 'virtual manufacturers'. "Manufacturers" and "wholesalers" are clearly accounted for within Board statutes and rules, but the hybrid of "virtual manufactures" is not provided.

NABP uses the term "virtual manufacturer" interchangeably with "virtual wholesale distributor/broker" and defines it as any person engaged in wholesale distribution of prescription drugs or devices in or into the state which:

- may or may not take title but does not take physical possession of the prescription drugs or devices;

- must be licensed by the state board of pharmacy or other appropriate state agency; and
- must be registered as a business entity with the appropriate state or local authority(s) and must operate out of a commercial facility and not out of a residence or personal dwelling. *Such location is exempt from the wholesale distributor licensure requirements specifically related to possession and storage of prescription drugs and devices.*

For example, a pharmaceutical or biotechnology company may contract with a “virtual manufacturer” to provide functions such as distribution, market access, back office support, contracting, and compliance functions, etc.

In discussing this issue with the Board’s legal counsel, it was observed that the registration of virtual manufacturers does not fit squarely within existing statutes and rules, though it is not necessarily outside of the Board’s existing authority/registration framework. Idaho Code 54-1729 requires the registration of any “manufacturer” or “wholesaler.” Given the potential grey area, the licensing team has denied the existing applications and requested that the virtual manufacturer applicants bring this issue to the Board.

Board staff’s reticence to issue registrations under the existing rules stem from the requirement that out-of-state manufacturers engaged in wholesale drug distribution in or into Idaho must comply with the Idaho Wholesale Drug Distribution Act and rules. Both existing statutes and rules seem to provide flexibility with respect to the requirement that all manufacturers must meet requirements related to possession and storage of prescription drugs, however 54-1753 exempts manufacturers distributing their own federal food and drug administration approved drugs and devices from licensure.

Jennifer Schneider, VP Client Services, State Licensing Services attended the meeting to share information in support of licensure for virtual manufacturers. The Drug Quality and Security Act (DQSA), signed into law on November 27, 2013, includes compliance requirements effective starting January 1, 2015. Among other requirements, the DQSA establishes a national system for tracing pharmaceutical products through the supply chain, creates new regulations for drug compounding, and sets national licensing standards for wholesale distributors and third-party logistics providers.

Specifically, DQSA dictates that states may no longer regulate a third party logistics provider (3PL) as a wholesale distributor. This has created a problem with each state as they struggle to comply. The options for the states were:

1. Look within their existing statutes to determine if they had the latitude to create a new 3PL category. If they did not, the state had the option of proposing new legislation, wait for a new lawmaking session with their governing bodies and have the governor sign new law into place, thus creating new regulations and a license category for 3PL’s.

2. If their statutes could be interpreted to include the regulation of 3PL's, the boards could change or waive some of their Existing Rules and create the license.
3. Completely exempt 3PL's from licensing.
4. Look at how they have couched their license category. If their current license was called, for example, a "drug distributor" license and not a "wholesale distributor" license, then no change was actually needed.

Following discussion the Board directed Dr. Adams and Mr. Fraser to create a process to register virtual manufacturers, exempting the physical facility requirements. The Board may accept VAWD accreditation of the virtual manufacturer or their third party logistics company in lieu of home state registration and inspection.

Dr. Adams gave the Board a legislative update. The Board agreed to submit a legislative idea form for consideration to close the TB testing gap, and to increase access to smoking cessation products.

Mark Phillips, PharmD, from St. Alphonsus Regional Medical Center Pharmacy and Brian Dotter, PharmD, from St. Luke's Regional Medical Center Pharmacy attended the meeting to request the Board create a registration for 'branch pharmacies' as a type of limited service pharmacy. Each hospital currently has facilities that are away from their main campuses that distribute medications to patients (one facility is a behavioral health facility and one is a stand-alone emergency department). These facilities currently operate under a prescriber's DEA registration as the facility is unable to obtain their own DEA registration unless they are a pharmacy. When the provider leaves the facility, the facility also loses the DEA registration that allows them to order controlled substances. Drs. Phillips and Dotter presented language currently in place in Utah. Dr. de Blaquiere requested further research on the topic before making a decision. Following further discussion the Board directed Drs. Phillips and Dotter to come back in October with additional information.

Dr. de Blaquiere motioned to adjourn, Dr. Henggeler seconded, meeting adjourned at 5:08 p.m.

August 4, 2016

Chairman Kristina Jonas, PharmD, called the meeting to order at 8:00 a.m. In attendance were Vice Chairman, Nicki Chopski, PharmD; Board members Rich de Blaquiére, PharmD; Holly Henggeler, PharmD and Ed Sperry, Public Member. Also in attendance were Alex J. Adams, PharmD, MPH, Executive Director; Berk Fraser, RPh, Deputy Executive Director; Fred Collings, Chief Investigator, Lisa Culley, CPhT, Jaime Sommer and Wendy Shiell, Compliance Officers; Misty Lawrence, Management Assistant; Andy Snook, Deputy Attorney General; Ellen Mitchell, Program Information Coordinator; Dylan Atkinson, student pharmacist on rotation with the Board from the University of Pittsburgh, and several members of the public.

Dr. Adams welcomed Bernice Myles from the Attorney General's office. Ms. Myles has worked with Board staff on rules for many years and has been an indispensable resource. The Board thanked Ms. Myles for her work and for attending the meeting.

Dr. Adams indicated the Board is considering four rule dockets:

1. Docket No. 27.01.01.1601 – Statutory Conformance
2. Docket No. 27.01.01.1602 – Telepharmacy
3. Docket No. 27.01.01.1603 – Technician Modernization
4. Docket No. 27.01.01.1604 – Pharmacy Practice

The Board took up **Rule Docket 27.01.01.1601**. Dr. Adams indicated this docket updates Board rules to conform to several pharmacy-related bills that passed during the 2016 Idaho legislative session. The Board received no written public comment on the docket. Chairman Jonas called for public comment from those in attendance, hearing none.

Dr. Adams reviewed the current edits.

- Definition of Prescriber Drug Outlet – add 'or investigational drugs as permitted in Title 39, Chapter 93, Idaho Code.'
- Rule 140.05 – Updates language to comply with Senate Bill 1322a.
- Rule 204 – Updates reporting to PMP, adds delegates to access, and requirement for delegate to access PMP within their supervisor's scope of practice only.
- Rule 265 – Adds information regarding patient assistance programs; updates language to 'qualified donor'; updates verification of received drugs.
- Rule 635 – Adds infusion clinic to those that may maintain an emergency kit

The Board took up **Rule Docket 27.01.01.1602**. Dr. Adams indicated this docket updates the telepharmacy rules to align with recently granted Board waivers. Dr. Adams reviewed the written comments received in advance of the meeting:

- Charles Clark, RPh from Salmon submitted written comment in opposition to telepharmacy, stating his belief that they diminish the role of pharmacists and raises the role of pharmacy technicians. He stated he believes telepharmacies contribute to pharmacist unemployment;
- Mark Johnston, RPh, commented it would be a detriment if each telepharmacy renewal application had to be reviewed during an open public meeting and not be renewed if a pharmacy had opened within 15 of miles of the existing telepharmacy. He feels this will discourage initial opening of a remote dispensing site in an underserved area of the state, due to possible denial of registration by the Board at a later date;
- Idaho Telehealth Council members questioned the requirement for recording verbal communications for patient counseling and the retention of those recordings. They specifically questioned if the patient counseling is being recorded and stored for 90 days and if so if the patient was consenting to the recordings. Their other comment related to patients seeking controlled substances at these remote sites because of a perceived lower standard; and
- Jason Reading, PharmD, commented on the PIC oversight ratio, recommending a volume limit in place of the 2:1 ratio.

Dr. Jonas called for verbal comment on the telepharmacy rule docket:

- Adam Chesler, PharmD, representing Telepharm asked the Board to waive the mileage restriction for hospitals and clinics; he also asked to add a requirement to recall the images for 30 days;
- Toni Lawson of the Idaho Hospital Association reiterated the association's support of telepharmacy is based on increased patient access, patient safety and lower readmission rates;
- Michael Moné, RPh, JD, representing Cardinal Health, addressed the PIC limitations. Mr. Moné indicated the Ohio Board of Pharmacy is moving away from limitations on PIC's and addressing issues as they present themselves. Most issues are technical and not patient-related.

Following public comment, Mr. Snook spoke to the approval process of telepharmacy renewals and the need for consistency. He noted that restrictions must further the Board's mission to protect public safety. The Board made the following updates to the telepharmacy rule docket:

- Dr. Chopski motioned to strike the references to renewal of registration from 071.03, Dr. Henggeler seconded. Following discussion Dr. Chopski amended her motion to include language that indicates the items in 071.03 necessitate an appearance in front of the Board. Dr. Henggeler seconded, motion carried unanimously.

- Dr. Henggeler motioned to keep 071.03.a. move the requirement in 071.03.b. to 071.02, and strike 071.03.c. Dr. de Blaquiére seconded, and the motion carried with Mr. Sperry opposed.
- After discussion regarding 710.07 Video and Audio Communication Systems, the Board granted unanimous consent to add language indicating that the communication system used with patients must be HIPAA compliant, and further to specifically exempt patient communications from the recordings that must be stored for 90 days.

Following a break, the Board took up **Rule Docket 27.01.01.1604**. Dr. Adams indicated that this rule docket encompasses several Pharmacy practice concepts. Dr. Adams reviewed the written comments received in advance of the meeting:

- AARP Idaho requested that the Board clarify the definition of medication synchronization program in 011.04 to indicate that the patient must opt-in; and
- Express Scripts requested the Board update 116.01.b to remove compounded drugs from the list of medications pharmacists could autonomously extend for the purposes of synchronization.

Dr. Jonas called for verbal comment on the pharmacy practice rule docket:

- Mark Johnston, noted section 302.04.b states ‘an accrediting body’, which seems to speak to institutional pharmacy as retail pharmacies don’t have an accrediting body. Mr. Johnston asked to extend the reporting time from two business days to a longer time period in concert with other states.
- Elizabeth Criner, Idaho Cancer Action network, spoke in support of the medication synchronization rule. They believe this rule will allow for better patient compliance;
- Toni Lawson, Idaho Hospital Association, raised rule 302 and expressed appreciation that 320.04.b made reporting more consistent with existing requirements that hospitals face. She sought to clarify if public records protection from the original draft rule language is still in place.
- Pam Eaton, Idaho State Pharmacy Association, asked the Board to define ‘discovery’ as used in 302.04 Medication Errors with Fatal Outcomes. Ms. Eaton reiterated the confusion regarding ‘an accrediting body’.

Following public comment, the Board made the following updates to the pharmacy practice rule docket:

- Dr. Chopski motioned to add ‘opt-in’ to 011.04 Medication Synchronization Program, Dr. Henggeler seconded, the motion carried with Dr. de Blaquiére opposed.
- Dr. Chopski motioned to add compounded drugs to the exemptions listed in 116.01.b Prescription Drug Orders, Dr. Henggeler seconded. Following further

discussion the motion carried with Drs. Henggeler and de Blaquiere opposed; Dr. Jonas voted in favor.

- Dr. Chopski motioned to strike 'and time' from Rule 142.02 Parenteral Admixture Labeling, Dr. Henggeler seconded, the motion carried unanimously.
- The Board granted unanimous consent to correct Rule 262.1.c. change to 'if' warranted.
- The Board clarified that the intent of rule 302 is that these records would not be public record and would only be used for investigational purposes. The Board directed Dr. Adams to replace PIC with director of pharmacy to help clarify this rule is intended for institutional pharmacies for the follow-up reporting requirement. It is the Board's intent with this rule to receive information regarding fatal errors so Board staff is aware and able to address possible public safety issues and prevent the same error from happening in the future.
- Dr. Henggeler motioned to move 302.04 a, b to the institutional rules in section 600. Motion died for lack of a second.
- Dr. Chopski motioned to move Rule 302.04 to section 500, Unprofessional Conduct, Dr. Henggeler seconded. Following additional discussion Dr. Chopski amended her motion to move 302.04 a, b to section 500 and add pharmacy director to 4 and replace PIC with pharmacy director in b. Dr. de Blaquiere seconded, motion carried with Dr. Henggeler opposed.
- As part of the discussion on Rule 637 regarding emergency room dispensing, Dr. Adams brought Rule 204 to the Board's attention. Rule 204 states 'all pharmacies holding a DEA retail pharmacy registration' must report to PMP whereas Idaho Code 37-2726 states 'all controlled substances dispensed for humans...' Dr. de Blaquiere motioned to harmonize the rules with Code, Dr. Henggeler seconded, the motion carried unanimously. As Rule 204 is already being updated in rule docket 27.01.01.1601, the edit will be made to that docket.

The Board took up **Rule Docket 27.01.01.1603**. Dr. Adams indicated this docket updates and modernizes the roles that certified technicians with appropriate training may perform. Dr. Adams reiterated that the Board's intent during the discussions to date has been to free up pharmacists for higher order care. The Board has reviewed evidence validating the safety and effectiveness of such modernization.

Dr. Adams reviewed the written comments received in advance of the meeting:

- Charles Clark, RPh from Salmon submitted written comments stating his opinion that this will increase the number of pharmacists without employment;
- Donald G. Klepser, PhD, MBA, and an economist at the University of Nebraska, submitted written comments stating that he has studied the impact of pharmacy technician role expansion on the pharmacist job market, and that the available evidence indicates there is no negative impact on pharmacist jobs. Dr. Klepser cited data available from the Pharmacy Workforce Center. Dr. Klepser notes that technician role expansion instead creates an opportunity for pharmacists to

practice at the top of their education and training, which has been shown to improve patient care and achieve population health outcomes;

- Dennis McAllister, Senior Director of Pharmacy Regulatory Affairs at Express Scripts, wrote in support of the proposed rule package. He noted that by allowing appropriately credentialed technicians to perform these tasks, the pharmacist will have additional time in direct patient care activities, which ultimately leads to improving the health of the citizens of Idaho;
- Samuel Stolpe, Senior Director of Quality Strategies for the Pharmacy Quality Alliance, wrote in support of the proposed rule package, noting it has long been known that pharmacy practice has been restrained by not allowing technicians to handle basic tasks like transferring prescriptions, taking verbal prescriptions, or performing product verification. He indicated that by expanding the role of pharmacy technicians, pharmacists can practice at the top of their license, allowing pharmacists to provide services that can improve performance measures like those in the Medicare Star Ratings program;
- Tael'r Eason, student pharmacist at the University of Pittsburgh, wrote in support of the rule docket, indicating that pharmacy graduates are increasingly seeking clinical roles. She indicates Idaho is lightyears ahead of Pennsylvania on this topic, and hopes other states will follow Idaho's lead; and
- Tim P. Frost, student pharmacist at the University of Toledo, wrote in support of the rule docket, indicating his belief that the Board's evidence-based approach is opening the door to allow young professional pharmacists to enter the state and begin practicing at an advanced level.

Dr. Jonas called for verbal comment on the pharmacy practice rule docket:

- Mark Johnston shared that CVS Health has high praise for the Board's pursuit of modernizing technician roles in Idaho. Mr. Johnston shared his belief that allowing delegation of nondiscretionary tasks to a certified pharmacy technician will enable the pharmacist additional time to focus on pharmacist cognitive services and practice at the highest levels of their education and licensure. He also shared CVS's request that the Board update 115.01, allowing for technician-to-technician transfers;
- Lorri Walmsley, Senior Manager of Pharmacy Affairs for Walgreens commended the Board on their forward-thinking changes to technician roles. She stated her belief that these changes are grounded in evidence and can improve patient care in the state;
- Pam Eaton of the Idaho State Pharmacy Association stated the association is in full support of the technician modernization docket and thanked the Board for their leadership on this matter; and
- Laura Churns from Albertsons expressed her company's support for this rule docket.

Following public comment, the Board made the following updates to the pharmacy technician modernization rule docket:

- Dr. Chopski motioned to strike 115.1.a. Mr. Sperry seconded, the motion carried with Dr. Henggeler opposed.
- Dr. Chopski motioned to strike 'except prescription drug orders for schedule II' from 115.01, Mr. Sperry seconded, motion carried with Dr. Henggeler opposed.
- Dr. Henggeler motioned to add 'under direct supervision' to Rule 330.04 Delegation and Administration. Motion died for lack of a second.

The Board turned to the Compliance Update agenda item. During the October 2015 Board meeting, compliance staff was directed to gather information from companies that are not properly documenting counseling and bring it to the Board for review. Mr. Fraser presented the requested information indicating that only one major chain appears to be documenting counseling appropriately. Dr. Henggeler shared information that she found during research that indicated there weren't many states that had documentation requirements. Oregon was very similar in that they require documentation. Following further discussion the Board tabled the topic until the October meeting.

The Board returned to **Rule Docket 27.01.01.1602**, regarding an update to the telepharmacy rules:

- Dr. Chopski motioned to strike 711.01.d. relating to a technician at a remote dispensing site must not receive oral prescription drugs orders. Motion died for lack of a second.
- Mr. Sperry motioned to strike 711.01.d. relating to a technician at a remote dispensing site must not receive oral prescription drugs orders. Dr. Chopski seconded, motion carried with Drs. de Blaquiére and Henggeler opposed. Dr. Jonas voted in favor.
- Dr. Chopski motioned to add 'unless checked in compliance with the accuracy checking technician procedures,' to 711.01.b. Mr. Sperry seconded, motion carried with Dr. Henggeler opposed and Dr. de Blaquiére abstaining.

Dr. Henggeler motioned to adjourn, Dr. Chopski seconded, the motion carried unanimously. Meeting adjourned 12:08 p.m.