

MINUTES

UTAH BOARD OF PHARMACY MEETING

February 22, 2022

Held Electronically, No Anchor Location

Salt Lake City, UT 84114

CONVENED: 8:30 A.M.

ADJOURNED: 3:04 P.M.

DOPL STAFF PRESENT ELECTRONICALLY:

Bureau Manager: Jennifer Falkenrath

Board Secretary: Julie Pulsipher

Lead Investigator: Camille Farley

Investigative Supervisor: Dan Briggs

Investigator: Travis Drebing

Investigator: Alicia Moran

Investigator: Jennifer Healey

CSD Admin: Jeff Henrie

BOARD MEMBERS PRESENT ELECTRONICALLY:

Carrie Dunford, PharmD, Chairperson

**Christopher Sheard, PharmD, Vice
Chairperson**

Karen Gunning, PharmD

Sepidah Daeery, PharmD

Gary Hale, R.Ph.

Autumn Hawks, Pharmacy Technician

BOARD MEMBERS NOT PRESENT:

Public Member—Position Vacant

GUESTS IN ATTENDANCE ELECTRONICALLY:

Trevor Hawkins

Greg Jones, Harmon's Pharmacy

RJ Evans, MedQuest

Dustin Christensen Grant, Roseman

Payson Ashmead

Adam Gee

Meagan Duchein

Amanda Grady, Intermountain Healthcare

Hali O'Malley, APCEC

Ryker Blair

Adam Jones

Stephanie Arceneaux, Chapter Leader

Hailey Hewitson

Donelle Perez

Mark Johnston, CVS Pharmacy

Rich Bishop, Smith's Food & Drug

Kacie Woodward

Christopher Christensen

Cliff Holt

Amy Kiley

Maimuna Bruce

Erin Johanson

Hailey Hewitson

Deeb Eid

Mark Brinton, UMA

Allison Hill

Jared Memmott

Michael Kiley

Sean Wadsworth

Marc Holley

Isabel Pande

Brittney Walsh

Kellie Terrell

Donelle Perez

Kathy Varley

Jennifer Betancourt

801-***-***32

801-***-***58

Note: Other guests may have been in attendance electronically but were not identified.

ADMINISTRATIVE BUSINESS:
CALL MEETING TO ORDER

Dr. Dunford called the meeting to order at 8:31 A.M.

REVIEW AND APPROVE JANUARY 25, 2022 MINUTES

(See Audio 1 for Specifics 00:05:31-00:08:55)

Dr. Sheard motioned to approve Minutes for January 25, 2022 meeting.

Mr. Hale seconded the Motion.

Motion passed unanimously.

INVESTIGATIVE REPORT—CAMILLE FARLEY

(See Audio 1 for Specific 00:08:59-00:18:29)

Lead Investigator Farley presented the Investigative Report, as provided.

Lead Investigator Farley stated things were off to a great start in January, and they are excited to be getting a new Investigator soon for the department.

Lead Investigator Farley asked if there was anything she needed to bring forward to the Board for meetings.

Dr. Dunford stated any issues that would be relevant as an item for the newsletter to please inform the Board about them.

Comments, Questions, and Concerns were discussed.

Dr. Dunford stated a link to the newsletter in an email that directs them to DOPL would be helpful.

Ms. Falkenrath stated she would look into the process of being able to do so.

CSD UPDATE—JEFF HENRIE

(See Audio 1 for Specifics 00:18:36-00:36:32)

Mr. Henrie presented the CSD Update, as provided. Mr. Henrie stated the DSP12 team is ready to move CSD over into a cloud environment. Mr. Henrie stated it is slowly moving forward; they will thoroughly test it before it moves into the production environment.

Mr. Henrie stated project RX Check 3.0 upgrade, that moves EHR connections for better logging of searches and statistics, is due by the end of April. Mr. Henrie stated he hopes to be finished earlier than that.

Mr. Henrie presented a follow-up of E-prescribing impact, as provided. Mr. Henrie stated written scripts have decreased to 12%, and electronic prescribing has increased to 77%.

Mr. Henrie stated E-prescribing is still not 100% required as there are still onboarding exemptions at this point; however, everything is moving forward to E-prescribing.

Mr. Henrie presented CSD TTAC & NASCSA Recommended Best Practices for Veterinary Prescriptions (January 2022), as provided.

Mr. Henrie stated the Board had discussed last June, July and August several ways veterinary prescriptions could be handled. Mr. Henrie stated project effective date is tentatively July 1, 2022, and will lay groundwork for onboarding more Veterinary Practitioners.

Comments, Questions, and Concerns were discussed.

Mr. Henrie stated a meeting was being held today for the subject of Medical Cannabis at the Department of Health. They hope to have more feedback and information for getting Medical Cannabis information into the CSD. Mr. Henrie stated they had run into a funding issue, but that has been resolved.

Mr. Henrie stated he sent out an email for two factor-identification stating the need to be set up with an additional email or code verifying identity. Mr. Henrie stated the timeframe has been set at 12 hours, so the need to re-verify will not be an issue within that 12-hour period.

Mr. Henrie stated the Practitioner Training course has been updated and deployed onto the website just in time for dentists and PA's to renew by the end of May. They can now do prescriber training with current stats from the Department of Health.

Dr. Sheard thanked Mr. Henrie for doing the 12-hour verification factor to help pharmacists. Dr. Sheard expressed appreciation to Mr. Henrie for listening to the Board members' concerns regarding this issue. Dr. Sheard asked if the two-factor authentication was currently in place now.

Mr. Henrie stated yes it is now in place and being implemented. Mr. Henrie stated he will be sending out new emails to practitioners still in the system who need to convert over to the two-factor system.

NOMINATIONS FOR ADVISORY PHARMACY COMPOUNDING EDUCATION COMMITTEE

(See Audio 1 for Specifics 00:36:39-00:40:23)

Ms. Falkenrath stated terms for Dr. Adam Taintor and Dr. Jeremy Olsen were up for re-appointment or resignation.

Dr. Dunford recommended for Dr. Taintor and Dr. Olsen to be re-appointed, pursuant to them accepting that offer.

Ms. Falkenrath stated there would be a need for a Motion to re-appoint Dr. Taintor and Dr. Olsen.

Ms. Hawks motioned for Dr. Taintor and Dr. Olsen to be re-appointed to the ACPEC Committee.

Dr. Sheard seconded the Motion.

Motion passed unanimously.

NABP UPDATE—CHRIS SHEARD

(See Audio 1 for Specifics 00:40:24-00:57:16)

Dr. Sheard presented an update on the Interactive Forum held in January. Dr. Sheard stated it was nice to have conversations from Board members around the country affecting different states.

Dr. Sheard stated DSCSA (Drug Supply Chain Security Act) to track-and-trace is going to be implemented. Dr. Sheard stated there was not much discussion with taking action at this point, as it has not trickled down to pharmacies yet; however, it will be coming. It allows tracking from manufacturer to wholesalers, to pharmacies, to the patient. Dr. Sheard stated this new federal law would impact all facets of pharmacy.

Dr. Sheard stated there was a presentation on how assisted treatment will be used for Opioid use disorders. Dr. Sheard stated the purpose for the presentation was to build efforts to help the Opioid crisis. Dr. Sheard stated pharmacists are in a very interesting position because they are “the gatekeeper/the police” to make sure pharmacists aren’t being prohibitive dispensing appropriate care, and at the same time preventing potential Opioid abuse.

Dr. Sheard stated, in his opinion, there were unfortunately no solid takeaways from the Interactive Forum.

Dr. Sheard stated Utah is experiencing a lot more Pharmacy Technician shortage than other states. Dr. Sheard stated many states had expanded the scope of practice for Pharmacy Technicians.

Dr. Sheard stated Workplace Safety issues are nationwide. Dr. Sheard stated there weren’t any thoughts from other states regarding the Pharmacy Technician subject. Dr. Sheard stated the subject of mandatory breaks was a takeaway from the Interactive Forum. Dr. Sheard stated many states had implemented a thirty-minute break, but most pharmacists don’t usually take that thirty-minute break. They use it as catch-up time, rather than taking the break and regrouping. Dr. Sheard stated there was discussion about specialty medications, PBM practices and requirements.

Dr. Sheard stated the national meeting is coming up later this year.

Comments, Questions, and Concerns were discussed.

Ms. Hawks stated she was also able to attend the Interactive Forum. Ms. Hawks shared some of her thoughts about the presentations and discussion that happened during the Forum. Ms. Hawks stated she did not feel there were definite takeaways that could be easily implemented into Utah's demographics.

Dr. Dunford thanked Dr. Sheard and Ms. Hawks for their attendance at the Interactive Forum.

PHARMACY TRANSITION TO ENDEMIC PHASE

<https://dopl.utah.gov/covid19.html>

(See Audio 1 for Specifics 00:57:58-1:46:13)

- **NATIONAL RETAIL PHARMACY**

Dr. Dunford stated they talked with Dr. Hoffman at the Department of Health concerning what the Endemic Phase would look like, and what things would need to change.

Mr. Mark Johnston stated he was representing CVS Health. Mr. Johnston stated he had been a member of the NABP Executive Committee when he was the Executive Director of the Idaho Board of Pharmacy. Mr. Johnson stated CVS has been engaged in scenario planning for when things shift from Pandemic to Endemic. Mr. Johnston stated pharmacists have played a critical role in the Pandemic phase, and will continue to provide that critical role in the transition to an Endemic phase.

Ms. Lorri Walmsly stated from a temporary waiver standpoint, the declaration of Emergency Pharmacy Technician Trainee Ratio Waiver would go away. Ms. Walmsly stated it would be helpful if there is a way for the Board to extend the waiver of trainees until staffing could get up to speed. From a statutory standpoint, Ms. Walmsly stated she wants to see transitioning of the test-and-treat to an independent authority. Ms. Walmsly stated as the Pandemic goes away, CLIA waivers are an issue she is concerned with. Ms. Walmsly stated in general Utah was ahead of the curve, and language is very good with guidance in place.

Comments, Questions, and Concerns were discussed.

- **PHYSICIANS ORDER FOR COVID TEST**

Dr. Dunford stated under the Physicians Order for COVID-19 Exemption, Class B pharmacies could dispense prescribed COVID-19 medications that have received FDA Emergency Use Authorization.

Dr. Dunford stated Dr. Hoffman would be able to answer many of the questions more fully, and will be joining the meeting at 1:00 P.M. this afternoon.

- **PHARMACY PROTOCOL FOR COVID TEST**

Dr. Dunford stated the Ivermectin Guidance Document is still on the website. Dr. Dunford stated the Pharmacist Preceptors for Vaccinations is also still on the website. The Board will keep the Ivermectin Guidance Document in place.

When the state of emergency goes away, Dr. Dunford stated there is a pathway for Pharmacy Technicians already in place to be able to administer vaccines.

Dr. Dunford stated the Pharmacy-to-Pharmacy-Technician-Trainee-Ratio is a relevant topic to be discussing at this point.

Dr. Daery stated there is a lot of feedback from the field, and it would be good to talk about this subject in the March meeting.

- **PHARMACY PRACTICE EXEMPTIONS**

Dr. Dunford stated Exceptions to Regulations Emergency Oral CII Prescriptions were put together by the DEA, so it will be withdrawn by them. Dr. Dunford stated it was implemented early on in the pandemic; with electronic prescribing, it has not been an issue lately.

Dr. Dunford stated Pharmacy Intern Supervision during the Emergency is an item that should be a topic for next month. There has been some concern of how this impacts their training and interaction with their preceptors during training.

Dr. Gunning stated Pharmacy Interns do not have general supervision, but Pharmacy Technicians do. Dr. Gunning stated it is hard to have one set supervision, so pharmacy preceptors are very important. Dr. Gunning stated pharmacy students learn best when they are watching the actions of a pharmacy preceptor. Dr. Gunning stated she would like to hear input from pharmacy students.

Dr. Gunning stated there is a lot of support for the Pharmacy Technician-in-Training ratio of 2 to 1. Dr. Gunning stated concern technicians are staying technicians-in-training rather than becoming technicians. Dr. Gunning stated she wants to see numbers of how many have a Pharmacy Technician Training License.

Dr. Dunford asked to see numbers of how many Pharmacy Technician Trainees there are, how long it takes them to get a Technician License, and how many fall out.

Dr. Dunford stated Controlled Substance Inventory allowed for some flexibility in terms of timing with inventory. Dr. Dunford stated inventory is required to be four days before or after the date.

Dr. Sheard stated Controlled Substance Inventory is not necessarily a hindrance or an obstacle for pharmacies this year. Dr. Sheard stated the timeframe should move back to the 4-day leeway.

Dr. Daeery and Dr. Gunning agreed it should be done within 4 days.

Dr. Dunford stated the Assignment of Beyond-Use-Dates (BUD) for USP <797> Products is still needed. There is still a shortage, and she recommends it to stay in place. Dr. Dunford asked if there were any comments from the Board.

No discussion was needed for Assignment of Beyond-Use-Dates (BUD) for USP <797>, and will stay in place.

Dr. Dunford stated item Face-to-Face Counseling during the declared emergency was specifically targeted to technology and supplemental items during the state of emergency.

Dr. Dunford stated this is already permitted.

Dr. Dunford stated General Reminders for Pharmacy Personnel to Mitigate Risk of Exposure essentially takes the person to the CDC webpage.

Dr. Sheard stated it was good information to have, and is worth keeping in place.

Dr. Dunford stated emergency refills are already in Code. Dr. Dunford stated it was a timely change to Code, allowing a pharmacist to fill a 30-day supply based on Utah Code 58-17b-60B. Dr. Dunford stated support of leaving it on the website to be able to let people know it is in place.

Dr. Dunford stated Pharmacy Technician Trainee COVID-19 Vaccine Administration and Intern Supervision will both be agenda items for next month's Board meeting.

Dr. Sheard stated item Enforcement Discretion was concerning mail-out prescriptions. Dr. Sheard stated it would be beneficial to discuss this in next month's Board meeting.

Ms. Falkenrath stated Pharmacy COVID-19 Guidance updated as of January 17, 2022, as worked on with Dr. Hoffman, is available on the Division website under Pharmacy--Related Information and Resources—second from the bottom.

Dr. Dunford stated the Guidance Document addresses issues involving the move to Endemic phase from Pandemic phase. Dr. Dunford stated said Guidance Document is a contingency plan of being able to have alternative ways to work if symptoms are mild, or if individuals are asymptomatic and can still work remotely.

Ms. Falkenrath stated a copy of the Department of Health Contingency Plan was not given to DOPL.

Dr. Sheard made a Motion to remove the Annual Controlled Substance Inventory Waiver of 120 days, and go back to existing Statute of 4 days, as of April 1, 2022.

Mr. Hale seconded the Motion.

Motion passed unanimously.

Dr. Sheard made a Motion to go back to counseling that is outlined in current Law and Rule for Face-to-Face Counseling.

Dr. Gunning seconded the Motion.

Motion passed unanimously.

Dr. Gunning motioned to remove Pharmacist Preceptors for Vaccinations as of today's date.

Mr. Hale seconded the Motion.

Motion passed unanimously.

PHARMACY TRANSITION TO ENDEMIC PHASE

Dr. Dunford welcomed Dr. Hoffman to the meeting at 1:07 P.M.

(See Audio 3 for Specifics 00:22:00-00:57:47) (Out of Order)

Dr. Dunford asked what Dr. Hoffman's thoughts were on COVID testing as the transition from Pandemic to Endemic phase takes place.

Dr. Hoffman stated they are seeing a two-tiered process with COVID testing. People are accessing testing through the healthcare system, and consumers are buying tests themselves.

Dr. Hoffman stated this is exploratory for pharmacies to keep access for more people, and to relieve the healthcare systems.

Dr. Sheard stated there are several pharmacies throughout the State through collaborative practice agreements have testing for flu and screenings, and for group A Strep. They are CLIA waived tests. Dr. Sheard stated ten to twenty tests per pharmacy per week is an average for these types of tests. Dr. Sheard stated they stepped back from flu testing for risk of false negatives or possibly missing a treatment, but he knows of other pharmacies who did provide this testing. As paid customers become more familiar with what pharmacies can do, COVID customers will enjoy at-home tests.

Dr. Hoffman stated reduced sensitivity is continuing to be a problem. Rapid antigen testing doesn't always come back reliably; PCR testing is much more reliable. Dr. Hoffman stated every part of the healthcare system is struggling right now because they are at capacity. Dr. Hoffman stated she is most interested in the big retailers since they have been doing it all along.

Ms. Walmsley stated from a Walgreen's standpoint, they are committed to continue testing. Ms. Walmsley stated time will tell as far as capacity constraints.

Mr. Johnston stated CVS Health and Walgreen's are in similar situations.

Ms. Walmsly stated Walgreen's has both CLIA waived antigen and PCR testing.

Dr. Hoffman stated everything is still under emergency use. Dr. Hoffman stated there will have to be rapid approval once the emergency documentation discontinues.

Comments, Questions, and Concerns were discussed regarding items from COVID-19 documents <https://dopl.utah.gov/covid19.html>.

NALAXONE STANDING ORDER

<https://naloxone.utah.gov/pharmacists>

(See Audio 1 for Specifics 01:46:15-1:58:02)

Ms. Tricia Bishop, Opioid overdose coordinator at the Utah Department of Health, stated she does the purchase and oversight of Naloxone in the community. Ms. Bishop stated they receive data as well as the receiving requests.

Dr. Dunford asked if there was still a need for a State Protocol even though HB 178 passed, or if the Guidance Document should be used.

Dr. Sheard stated he didn't know if there was need for two State documents.

Ms. Bishop asked how the Health Department would get data if the Standing Order is not there.

Dr. Dunford said some of the information is private, and may not be good for the State to have all that information.

Ms. Bishop stated she has only been in the position two months, and is ironing out some of these things. Ms. Bishop agreed it makes sense to have just one document. The Standing Order and Guidance Document are both in place at the moment. Ms. Bishop stated one of the purposes for data is for funding, but she would like to come back to this group to discuss some of these issues.

Comments, Questions, and Concerns were discussed.

**Board adjourned for Scheduled Break at 10:20 A.M.
Meeting resumed at 10:45 A.M.**

SB 177 DISCUSSION-PHARMACY TECHNICIAN TRAINING UTAH ADMIN. CODE R156-17b-303e

(See Audio 2 for Specifics 00:00:06-00:11:46)

Ms. Falkenrath presented Draft Rule language as discussed in the last Board meeting.

[R156-17b-303e. Qualifications for Licensure – Education Requirements, Pharmacy Technician](#)

~~[(3)]~~ (1) In accordance with Subsection 58-17b-305(1)~~[(f)]~~ (e), an applicant for licensure as a pharmacy technician shall complete a training program that is:

(a) accredited by:

(i) ASHP;

(ii) Accrediting Bureau of Health Education Schools (ABHES); or

(b) conducted by:

~~[(i) the National Pharmacy Technician Association;~~

~~[(ii)]~~ (i) Pharmacy Technicians University; or

~~[(iii)]~~ (ii) a branch of the Armed Forces of the United States,

(iii) or pharmacy technician training program approved by the Division in collaboration with the Board and

~~[(e) meets the following standards:]~~

(c) while licensed as a pharmacy technician trainee, completion of at least 180 hours of directly supervised practical training in a licensed pharmacy ~~[as determined appropriate]~~ by a licensed pharmacist in good standing; ~~[-and~~

(ii) ~~written protocols and guidelines for the teaching pharmacist outlining the utilization and supervision of pharmacy technician trainees that address;~~

~~(A) the specific manner in which supervision will be completed; and~~

~~(B) an evaluative procedure to verify the accuracy and completeness of any act, task and function performed by the pharmacy technician trainee.]~~

(2) An applicant shall successfully pass the required examination as listed in Subsection R156-17b-303c(4) within two years after obtaining a pharmacy technician trainee license.

R156-17b-303f. Qualifications for Licensure – Education Requirements, Pharmacy Technician Trainee

~~[(4)]~~(1) In accordance with Subsection 58-17b-305.1 (f), ~~[An individual shall complete]~~ a pharmacy technician ~~[training]~~ trainee shall be actively participating in coursework and training while enrolled in a training program established in R156-17b-303e; ~~[and successfully pass the required examination as listed in Subsection R156-17b-303c(4) within two years after obtaining a pharmacy technician trainee license, unless otherwise approved by the Division in collaboration with the Board for good cause showing exceptional circumstances.]~~

(a) ~~Unless otherwise approved under Subsection (4), an individual who fails to apply for and obtain a pharmacy technician license within the two-year time frame shall repeat a pharmacy technician training program in its entirety if the individual pursues licensure as a pharmacy technician.]~~

(2) A pharmacy technician trainee that is suspended, dismissed, or discontinued the approved training program on file with the Division shall notify the Division and surrender the license within 60 days.

(3) An individual's license as a pharmacy technician trainee is limited to two years and may be extended, if approved by the Division, for one year from the date of license expiration if the individual is making reasonable progress on a course expected to lead to licensure.

(a) An individual shall repeat an approved pharmacy technician training program and reapply for pharmacy technician trainee licensure, in exceptional circumstances, with approval by the Division in collaboration with the Board, if they failed to:

(i) apply for pharmacy technician licensure within two years after completing their supervised training and experience; or

(ii) do not meet the pharmacy technician licensure requirements in the time period necessary to complete the program and training.

(4)(a) Pharmacy technician training programs described in R156-17b-303e (1)(b)(i) ~~[(that received Division approval on or before April 30, 2014)]~~ are exempt from satisfying ASHP or ABHES accreditation ~~[standards in Subsection R156-17b-303a(3)]~~ for students enrolled on or before December 31, 20~~18~~24.

(b) A student in a program described in Subsection R156-17b-303e(1)(b)(i) ~~[(5)(a)]~~ shall comply with the program completion deadline and ~~[testing]~~ examination requirements in Subsection R156-17b-303c(4) [(4)], except that the license application shall be submitted to the Division no later than December 31, 202~~1~~5.

(c) A program in ASHP or ABHES candidate status shall notify a student prior to enrollment that if the program is denied accreditation status while the student is enrolled in the program, the student will be required to complete education in another program with no assurance of how many credits will transfer to the new program.

(d) A program in ASHP or ABHES candidate status that is denied accreditation shall immediately notify the Division, enrolled students and student practice sites, of the denial. The notice shall instruct each student and practice site that:

(i) the program no longer satisfies the pharmacy technician license education requirement in Utah; and

(ii) enrollment in a different program meeting requirements established in Subsection R156-17b-303~~a~~(e)(1)~~(3)~~ is necessary for the student to complete training and to satisfy the pharmacy technician license education requirement in Utah.

(6) An applicant from another jurisdiction seeking licensure as a pharmacy technician in Utah meets the qualifications for licensure in Subsection 58-17b-305(1)(e) and 58-17b-305(1)(f) if the applicant:

- (a) has engaged in the practice of a pharmacy technician for a minimum of 1,000 hours in that jurisdiction within the past two years or has equivalent experience as approved by the Division in collaboration with the Board; and
- (b) has passed and maintained current PTCB or ExCPT certification.

Ms. Hawks motioned to approve changed language for Draft Rule R156-17b-303e and R156-17b-303f.

Dr. Sheard seconded the Motion.

Motion passed unanimously.

PHARMACY INTERN LICENSURE

(See Audio 2 for Specifics 00:11:49-00:01:16:20)

Dr. Dunford highlighted changes made to Admin. Code R56-17b-303a.

Possible Draft Rule language, Timelines, and Definition Clarifications were discussed.

Utah Admin. Code R156-17b-303a. Qualifications for Licensure-Education Requirements[, Pharmacist and Pharmacy Interns.

- (1) In accordance with Subsections 58-17b-303(2) and 58-17b-304(6)(b), the credentialing agency recognized to provide certification and evaluate equivalency of a foreign educated pharmacy graduate is the Foreign Pharmacy Graduate Examination Committee (FPGEC) of the National Association of Boards of Pharmacy [~~Foundation~~].
- (2) In accordance with Subsections 58-17b-304(6), an applicant for a pharmacy intern license shall demonstrate that the applicant meets one of the following education criteria:
 - (a) be a current [~~admission~~] pharmacy student and active participation in coursework in a college of pharmacy accredited by ACPE, by written verification from a dean of the college that they meet the following criteria;
 - (i) accepted to the pharmacy program
 - (ii) completed required pre-requisites
 - (iii) signed a commitment to attend
 - (iv) dated no earlier than May 1st of the same year of the start of coursework
 - (b) a resident, or fellow in a program with a graduate degree from a school or college of pharmacy that is accredited by the ACPE; or
 - (c) a graduate degree from a foreign pharmacy school as established by a certificate of equivalency from an approved credentialing agency defined in Subsection (1).

**Ms. Hawks motioned to approve changes to Draft Rule R56-17b-303a.
Dr. Sheard seconded the Motion.
Motion passed unanimously.**

Ms. Falkenrath stated she will get the Proposed Draft Rules to Director Mark Steinagel. A final Rule Hearing will then be held. Ms. Falkenrath stated hopefully there won't be too much controversy.

Dr. Dunford asked that in the interim to please suggest to Director Steinagel to not issue first-year Intern Licenses until May 1, 2022.

TRANSFER OF PRESCRIPTION RULES UTAH ADMIN. CODE R156-17B-612(5)

(See Audio 3 for Specifics 00:07:26-00:20:56) (Out of Order)

(See Audio 4 for Specifics 00:02:00-00:21:50) (Out of Order)

Dr. Dunford stated she had a request from a system mentioning that the PBM was taking information from the Pharmacy Practice Act Rule about transfer prescriptions, deeming the transfer prescriptions to be illegal, and then taking reimbursement for those prescriptions. Dr. Dunford stated the request was to look at transfer rules in place for necessary changes.

Dr. Dunford presented Utah Transfer Rule as well as transfer information from other states. Dr. Dunford stated it was very similar to the NABP Model Rule. Dr. Dunford stated there were some items that could be clarified.

Dr. Dunford asked for input from Board members and the public.

Comments, Questions, and Concerns were discussed.

**TRANSFER OF PRESCRIPTION RULES UTAH ADMIN. CODE R156-17b-612(5)
(Continued)**

(See Audio 4 for Specifics 00:02:00-00:21:50)(Out of Order)

The following Draft Rule language in the Transfer of Prescription Rules Utah Admin. Code R156-17b-612(5) was discussed.

Utah Rules

(5) Prescriptions for legend drugs having a remaining authorization for refill may be transferred by the pharmacist, pharmacy intern, or DMP at the pharmacy holding the prescription to a pharmacist, pharmacy intern or DMP at another pharmacy upon the authorization of the patient to whom the prescription was issued or electronically as authorized under Subsection R156-17b-613(9). The transferring pharmacist, pharmacy intern, or DMP and receiving pharmacist, pharmacy intern, or DMP shall act diligently to ensure that the total number of authorized refills is not exceeded. The following additional terms apply to such a transfer:

- (a) the transfer shall be communicated directly between pharmacists, pharmacy interns, or DMP or as authorized under Subsection R156-17b-613(9);
- (b) both the original and the transferred prescription drug orders shall be maintained for a period of five years from the date of the last refill;
- (c) The pharmacist, pharmacy intern, or DMP transferring the prescription drug order shall void the prescription electronically or write void/transfer on the face of the invalidated prescription manually;
- (d) the pharmacist, pharmacy intern, or DMP receiving the transferred prescription drug order shall:
 - (i) indicate on the prescription record that the prescription was transferred ~~electronically or manually~~; and
 - (ii) record ~~on the transferred prescription drug order~~ the following information:
 - (A) original date of issuance and ~~date of dispensing or receipt, if different from date of issuance~~;
 - (B) original prescription number and ~~the number of refills authorized on the original prescription drug order~~;
 - (C) number of valid refills remaining or quantity remaining and the date of last refill, if applicable;
 - (D) the name and address of the pharmacy and the name of the pharmacist, pharmacy intern, or DMP ~~to whom~~ from where such prescription is transferred; and
 - (E) The name of the pharmacist, pharmacy intern, or DMP ~~transferring~~ receiving the prescription drug order information;

Board adjourned for Lunch at 12:07 P.M.

Meeting resumed at 12:45 P.M.

JENNIFER BETANCOURT—PHARMACY TECHNICIAN TRAINEE APPLICATION REVIEW (Out of Order)

(See Audio 3 for Specifics 00:21:14-00:22:24)

(See Audio 4 for Specifics 00:00:06-00:01:37)

Dr. Dunford stated this was a public meeting, and it would be recorded. Dr. Dunford stated the meeting could be closed if sensitive information was discussed.

Jennifer Betancourt stated she wanted to have a closed meeting.

Ms. Hawks motioned to close the meeting under “Utah Code Annotated § 52-4-205(1)(a), discuss the Character, Professional Competence, or Physical or Mental Health of an individual.”

Dr. Gunning seconded the Motion.

Motion passed unanimously.

Meeting closed at 1:45 P.M.

Meeting re-opened at 2:26 P.M.

Ms. Hawks motioned to grant the application of Pharmacy Tech trainee license to Ms. Betancourt.

Dr. Gunning seconded the Motion.

Motion passed unanimously.

HB 301 <https://le.utah.gov/~2022/bills/static/HB0301.html>

(See Audio 4 for Specifics 00:27:22-00:30:40)

Dr. Dunford introduced changes made in HB 301:

- **It can only be prepackaged medications--by a wholesaler or a licensed pharmacy;**
- **It is limited to an acute condition, limited to the prescriber who has to see the patient on that same day, and cannot be more than a 30-day supply;**
- **The Division will be creating a list of drugs that may not be dispensed. A panel of two Physician Board members and two Pharmacist Board members will be involved in the decision-making process.**

A dispensing practitioner may not dispense:

- **(a)a controlled substance as defined in Section 58-37-2;**
- **(b)a drug or class of drugs that is designated.**

HB 308 <https://le.utah.gov/~2022/bill/static/HB0308.html>

(See Audio 4 for Specifics 00:30:40-00:32:44)

Dr. Dunford stated this was related to 340B because there are manufacturers refusing to participate in the 340B program except by making it on their own terms.

NEWSLETTER

(See Audio 4 for Specifics 00:32:49-00:30:50)

Dr. Dunford stated submissions are due for the newsletter by April 1, 2022 (February, May, August, November).

Dr. Dunford stated for the next Board meeting, ideas are needed for a newsletter article.

Ms. Falkenrath stated it will be the end of the legislative session, and would be good for an intern to make a newsletter article.

Comments, Questions, and Concerns were discussed.

Dr. Dunford thanked the Board for all the things accomplished today.

Meeting adjourned at 3:04 P.M.

Note: These minutes are not intended to be a verbatim transcript but are intended to record the significant features of the business conducted in this meeting. Discussed items are not necessarily shown in the chronological order they occurred.

Carrie Dunford,
PharmD, MBA, BCPS

Digitally signed by Carrie
Dunford, PharmD, MBA, BCPS
Date: 2022.03.23 09:55:06 -06'00'

Carrie Dunford, PharmD, Chairperson

Larry Marx

Larry Marx, Acting Bureau Manager

Date

03/23/2022

Date