Idaho Pharmacy Law: Developments and Practical Applications for 2019

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In support of improving patient care, Idaho State University Kasiska Division of Health Sciences is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.
Disclosures

• The planners and presenter of this presentation have disclosed no conflict of interest, including no relevant financial relationships with any commercial interests
Idaho Board of Pharmacy

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Learning Objectives

• Discuss the 2019 statutory and rule changes impacting the profession of pharmacy in Idaho

• Describe potential law changes for 2020 and beyond

**The proposed rule changes take effect at the end of the legislative session (anticipated late March) while the statute changes take effect July 1**
Re-organization of Rule Book

2. Rules Governing Licensing and Registration
3. Rules Governing Pharmacy Practice
4. Rules Governing Pharmacist Prescriptive Authority
5. Rules Governing Compounding
6. Rules Governing DME, Manufacturing, and Distribution
Chapter 1 – General Provisions

• No substantive changes beyond current law

*As of July 1, 2018
Chapter 2 - Licensing

• Formally removed the MPJE as a precondition to pharmacist licensure

*As of July 1, 2018
Chapter 3 - Pharmacy Practice

• Removed the requirement that each pharmacy designate a Pharmacist-in-Charge (PIC)

• Removed restrictions on who may access the restricted drug storage area

• Removed the 15-month expiration date on non-controlled prescriptions

• Enabled “Digital Image Prescriptions”

*As of July 1, 2018
Chapter 3 - Pharmacy Practice

• Prescriptions may now omit the required drug information and directions if the prescriber makes a clear indication that the pharmacist is to finalize the patient’s drug therapy plan (e.g., “pharmacy to dose”)

• Broadened drug product substitution:
  • Any “institutional” facility can substitute in accordance with a formulary, not just hospitals and skilled nursing facilities
  • Adopted rules for prescriber-authorized substitution

*As of July 1, 2018
Chapter 3 - Pharmacy Practice

Cleaned up the rule on “prescription adaptation.” In its updated form, a pharmacist could adapt as follows:

• Change Quantity:
  • If the prescribed quantity or package size is not commercially available
  • The change in quantity is related to a change in dosage form
  • The change is intended to dispense up to the total amount authorized including refills (e.g., 30 to 90 day switch)
  • To synchronize a patient's refills

• Change Dosage Form

• Complete Missing Information

*As of July 1, 2018
Chapter 3 - Pharmacy Practice

• Broadened prescription delivery – can now be delivered to any location in accordance with federal law

• Simplified recordkeeping to coincide with removal of PIC:
  • Inventory no longer required upon PIC change (though is advisable as an employer/employee policy)
  • Reporting an incoming/outgoing PIC within 10 days is no longer needed

*As of July 1, 2018
Chapter 4 - Prescribing

Broadened pharmacist prescribing for minor ailments as follows:

- Allergic rhinitis – any Rx or OTC intranasal product
- Mild acne – any RX or OTC topical product
- Mild cough – Benzonatate (as an alternative to opioid cough suppressants)

*As of July 1, 2018
Chapter 4 - Prescribing

Broadened pharmacist prescribing as a supplement to an infusion order as follows:

• Agents for catheter occlusion

• Emergency Kit Drugs – methylprednisolone, hydrocortisone, diphenhydramine, epinephrine, and normal saline.

*As of July 1, 2018
Chapter 4 - Prescribing

As a reminder, all prescribing must be in accordance with the following general requirements:

• Education
• Patient-Prescriber Relationship
• Use of evidence-based protocol
  • Specify inclusion, exclusion, medical referral criteria
• Follow-up care plan
• Notification to primary care provider within 5 business days
• Documentation

*As of July 1, 2018
Chapter 5 - Compounding

• Broadened exceptions to dosage forms requiring sterility – specifically exempted sprays and irrigations intended to treat nasal mucosa

• Removed the requirement that the sink must be in “close proximity to the hood”

• Modified the frequency of gloved fingertip sampling – specifically differentiated based on low/medium-risk (every 12 months) vs. high-risk (every 6 months)

*As of July 1, 2018
Agency Legislation for 2019

• Mirrored federal law with respect to the scheduling of Butalbital and Epidiolex
• Created a multistate license that would eventually create a model similar to a driver’s license: you obtain it in the state of residence and it is automatically recognized elsewhere
  • Dependent on other states joining pact, so don’t forget to renew your out-of-state licenses in the meantime!
• Broadens Legend Drug Donation Act to allow for the donation of drugs for animals from an owner or legal caretaker of an animal to certain entities (e.g., veterinarian or veterinary medical facility)
Learning Objectives

• Briefly summarize the 2019 statutory and rule changes impacting the profession

• Discuss potential rule changes for 2020
2020 Law/Rule Concepts

• TBD by Board

• Expungement

• Just Culture

• Red Tape Reduction Act – Requires additional cuts

• Independent Prescribing – Look at additional options
Assessment Question #1

A graduate of an accredited College of Pharmacy program is preparing for licensure in Idaho. Passing which of the following exams are required as a pre-requisite for pharmacist licensure in Idaho?

A. NABPLEX  
B. MPJE  
C. Both A and B
A graduate of an accredited College of Pharmacy program is preparing for licensure in Idaho. Passing which of the following exams are required as a pre-requisite for pharmacist licensure in Idaho?

A. NABPLEX  
B. MPJE  
C. Both A and B  

ANSWER: A
Assessment Question #2

A drug outlet has to provide several conditions as a requirement of the permit. Under the pending rules of the Board, the outlet has a responsibility for which tasks?

A. Providing security to protect its equipment, records, supply of drugs, devices and other restricted sale items from unauthorized access, acquisition or use.

B. Staffing sufficiently to allow for appropriate supervision to otherwise operate safely and, if applicable, to remain open during the hours posted as open to the public for business.

C. Designating a Pharmacist in Charge by the date of opening and must not thereafter allow a vacancy of a designated PIC to continue for more than thirty sequential days.

D. Both A and B
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D. Both A and B

ANSWER: D
Assessment Question #3

Under the pending rules of the Board, a pharmacist may use his or her professional judgment to:

A. Prescribe a cold sore medication based solely on an internet questionnaire

B. Prescribe an antiviral to a patient who first tests positive to a CLIA-waived test and does not have any medical referral criteria

C. Prescribe a prescription topical product to a patient who has a mild acne

D. A, B and C

E. B and C only
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C. Prescribe a prescription topical product to a patient who has a mild acne
D. A, B and C
E. B and C only

ANSWER: E
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