

**BOARD MEETING MINUTES**  
**Oregon State Board of Pharmacy**  
**Salem Conference Center**  
**200 Commercial Street SE**  
**Salem, OR 97201**  
**September 14-15, 2006**

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| <b>Thursday, September 14, 2006 @ 9:00am, Pringle Creek Room</b><br><b>Friday, September 15, 2006 @ 9:00am, Pringle Creek Room</b> |
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**Thursday, September 14, 2006**

**9:10am OPEN SESSION, Marc Watt, R.Ph. Presiding**

Roll Call

The following Board members were present:

Marc Watt, President  
Ann Zweber, Vice President  
Linda Howrey  
Lee Howard  
Dianna Pimlott

The following staff members were present for this session:

Gary Schnabel, Executive Director  
Karen MacLean, Administrative Director  
Gary Miner, Compliance Director  
Joe Ball, Chief Inspector  
Michele Cale, Pharmacy Inspector  
Tony Burt, Project Manager  
Paige Clark, Pharmacist Consultant  
Jennifer Hess, Management Secretary

Tom Cowan, Board Counsel

**MOTION**

**Motion to accept consent agenda was made and unanimously carried. (Motion by Howard, second by Howrey)**

Executive Director Gary Schnabel asked to add a short comment regarding running for treasurer of NABP.

**MOTION**

**Motion to accept revised agenda was made and unanimously carried. (Motion by Howrey, second by Howard)**

## ISSUES/ACTIVITIES

### Reports

#### Board President/Members

Board President Marc Watt met with Senator Kurt Schrader. Sought Marc out, told him the Board was doing good work and making good progress with the pseudoephedrine rules, right to refuse, and prescription drug monitoring programs. He was also told to thank the Board.

Linda Howrey reported that the Immunization Practices Advisory Team (IPAT) will be expanding the universal registry for adults to age 23 this year and in the future will expand to cover all adults.

Lee Howard asked if the Board would consider seeking a grant to get copies of the book *Dangerous Doses* for all pharmacists and/or members of OSPA. Board determined it would be a good educational opportunity since it would give pharmacists access to important information. The idea was brought up about having the author come and make a presentation. Since Lane County would probably be most interested, Board Members will talk to OSPA and Lane County about sponsoring the author to come and present, possibly during OSPA's spring event and report back at December's Board Meeting.

Compliance Director Gary Miner discussed that a resolution was reached that a pharmacy and pharmacist will follow consent orders and pay civil penalties.

Gary Miner also shared that a wholesaler, who owed \$7500 in civil penalties, will be paying all fees, and will no longer be licensed. With Michelle Cale's persistence he has paid off fees and multiple states have been able to take action against this company for false pedigree etc.

Gary updated the Board on the status of inspections, and shared that 57% of inspections have been done making up 24 of the 34 counties in Oregon. Pharmacy Inspector Mike Beck has been focusing on CE, jails, correctional facilities, and other licensees. Marc Watt asked if it would be appropriate to send a letter, Karen MacLean added that staff has discussed this and how to best coordinate with sheriffs and also to check out correctional facility rule.

Administrative Director Karen MacLean commented on how hard licensing has been working, and that the Pharmacy Technician and Certified Pharmacy Technician renewal transition is taking its toll logistically. With the Technician Renewal Cycle licensing will be sending out 2000 2<sup>nd</sup> notices, which is down statistically from last year.

Karen shared that recruitments went out and the positions were filled for the Management Secretary, and Receptionist. The Pharmacy Inspector position is still vacant.

Karen will be attending the NABP District meeting in Anaheim for training and review for our District meeting next October. Her travel expenses are minimal.

Karen reported that the temporary rule filings, and notices were sent out to all interested parties. And that wholesaler re-licensing is about 70% complete.

Karen also found that the Board has access to a NABP Law online data base, to allow search of laws. Several Board members requested access. Executive Director Gary Schnabel discussed running for the office of Treasurer in the NABP. Gary wanted to know if Board would support his decision to run. Board President Marc Watt said it would be of value, but to be careful not to neglect responsibilities to the Board. Gary stated that he was concerned about the volume of work involved. Marc, Linda Howrey and the rest of the Board supports this decision, but with ongoing discussion. The idea was brought up of Cathy Lew running for the remainder of Gary's Executive Committee position, should he get elected treasurer.

## Committees/Meetings

### Flu Pandemic Workshop, Aug 23, 2006

Pharmacist Consultant Paige Clark reported that Executive Director Gary Schnabel, Board member Bernie Foster and she attended the meeting, but that they went to different break out sessions. Paige attended a session with practitioners, Gary to management, and Bernie Foster attended the media session. Paige has a disk with information from her session on it. Board members Dianna Pimlott and Cathy Lew have been suggested as possible additions to also attend this workshop in the future. This was a good networking opportunity. They were also were able to promote the Prescription Drug Monitoring Program successfully.

### NACDS Pharmacy and Technology Conference, Aug 26-30

Michele Cale reported that it was wonderful and thanked Board for sending her. It was a big push for Medicare part D, and looking at expanded roles for pharmacists.

Michelle also mentioned that ScriptPro has a new Telepharmacy program. And that Pick Point has a new machine, "pharmacy in a box" which includes around 400 drugs for placement in Physicians offices. They are marketing toward correctional facilities in Oregon.

### Meth Taskforce Meeting, Aug 25, 2006

Paige Clark reported that she attended the meeting in Gary Schnabel's place. The task force is excited about PDMP. They have developed a Community Action Guide to keep on top of meth levels. The PDMP is important because meth use starts with abuse of other drugs. The task force is very interested in what the Board is doing; Physicians are also interested and want to work with the Board to stay on top of meth use. Marc asked about the PDMP provision for Veterinarians. Only pharmacies are required to report, not practitioners.

### NABP District VII/VIII Meeting, Oct 4-7, 2006

Executive Director Gary Schnabel will announce his running for Treasurer. Gary will have to withdraw from the National Association of Boards of Pharmacy Executive Committee, and someone will be nominated in his place. The Board discussed that Cathy Lew may be interested. Upon later discussion when Cathy

Lew arrived, she expressed that she was interested in running for Gary's Executive Committee seat.

NABP Fall Education Conf., Nov 3-4, 2006 – Executive Director Gary Schnabel will be attending.

Research Councils:

USP 797

Cathy Lew reported that she and Compliance Director Gary Miner will be having a meeting. USP has extended the comment period since the council had more questions, in order to get them more information.

Electronic Transmission/Signatures

Project manager Tony Burt reported on a recent meeting where Dr. Jody Pettitt presented. She explained the Governors initiative on electronic records, and provided lots of information. The main obstacle is that this is a statutory issue, and that no one else has really done this. The DEA is having challenges with digital signature vs. electronic signature, about which the board had an extensive discussion about issues of authenticity. Vice President Ann Zweber questioned how errors get tracked or reported, Gary Miner replied that Compliance would get lots of calls, and wondered if it might help to report errors to MedWatch, or ISMP or the Board of Medical Examiners (BME).

Board President Marc Watt commented that they are internally tracking errors. Jackson Leong brought up the handwriting on prescriptions issue, and what Washington has done about the issue of illegible prescriptions. A question was brought up of whether we can make a requirement for a physicians name and contact information to be printed on the prescription, in case the prescription isn't legible. The Board has authority to write rules about the form and format of the prescription, but should work with the BME, and the Oregon Medical Association (OMA) to see what can be done. Marc requested a follow up on this issue at the Strategic Planning Meeting in October.

Central Fill

Joe Ball reported that there is a meeting scheduled for next week.

Medication Therapy Management Service – Nothing new to report.

Position Papers

Executive Director Gary Schnabel discussed the possibility of a new position statement, relating to medication errors. The Boards goal is to address their approach to medication errors and attitude regarding errors.

## **GENERAL ADMINISTRATION**

Staff Policy Questions

Compliance Director Gary Miner reported on Providence Health System's request for exemption to implement a medication barcode scanning system, which is filled by a pharmacy technician and administered without pharmacist verification that the medication is correct, in two new Providence Hospitals. Since the rule doesn't exist anymore the Board requests that Providence come

make a presentation on how this relates to the new rule. Dianna Pimlott would like to see how they are doing this. Board had extensive discussion about concerns relating to verification issues.

Gary Miner presented a request from DHS that was made regarding expedited partner therapy. The request would allow a patient who comes into a clinic to be treated for a sexually transmitted disease (STD's) to take home a prescription for themselves as well as their partners. The Center for Disease Control (CDC) would like to know what is necessary to make this happen. Board had questions as to what if there is a drug allergy, and how insurance billing would work.

Gary Miner reported that a number of 24 hour pharmacies are no longer open 24 hours, but still have their signs up displaying that they are. It was determined that the business needs to take the sign down, post accurate listing of hours of the pharmacy.

Gary Miner asked about an office with a clinical pharmacy that will be adding a surgery center and would like to get an institutional license. Board questioned if they qualify for an institutional license, if they would get special pricing, and if they would have a separate inventory from the clinical pharmacy. The Board concluded this was ok, and to have the office report back in two years.

Gary asked about a pharmacist who had lapsed his license and had many hours of continuing education (CE) to make up in order to reinstate his license. The pharmacist questioned whether he could use his time working as a pharmacy technician towards his CE credit. Board said no, but strongly encouraged him to work as a tech anyway, as well as retake the MPJE. Marc commented that we need to have a rule that requires lapsed pharmacists to retake MPJE before being re-licensed. There was consensus and staff will include this in the Division 19 revisions.

#### Emergency Preparedness

Pharmacist Consultant Paige Clark gave a brief report on the status of the Emergency Preparedness committee. Nothing will really happen for another 6 to 8 months, nothing else new was brought up at the meeting.

#### Pharmacist appointment to the Rural Health Committee

It is time to recommend an appointment to the Rural Health Committee. Mike Patrick is interested in being reappointed. The Board supports this reappointment and requested an update from Mike on the committee's activities.

#### Home State Licensure

Administrative Director Karen MacLean reported that in past NABP required that pharmacists maintain home state licensure in order to reciprocate to another state (OAR 689.265) A new rule would take that requirement away. Board staff will put together a list of states who we grant reciprocity to, and who will reciprocate licenses to Oregon pharmacists. Marc suggested that we wait, and Linda agreed that we should check how it would affect our revenue in the future, and to see what other states do. Board will revisit topic after the New Year.

### Walgreen's – Remote Pharmacist Program request

Representatives from Walgreen's were present, and able to respond to Boards questions. Gary Miner suggested a pilot program for six months. After which Walgreen's will make an appearance and report their findings.

### New FDA Plan B proposal

Pharmacist Consultant Paige Clark reported that the FDA has approved over the counter sales of Plan B. For now, a prescription is still required. It is due to be available without a prescription by the first of the year. A non-scientific survey in Oregon showed that only about 2% of pharmacists would choose not to dispense. APHA is looking at a 3<sup>rd</sup> class of drugs; Plan B may be considered for inclusion. Board Member Ann Zweber is concerned about discrimination issues in the transition of having Plan B moving from prescription drug to over the counter. Marc thinks the Boards current position statement is fine for now. Linda Howrey agreed, and also commented that the Board should wait to take any action to see how other states deal with this, and see how it goes. Our position statement on Moral and Ethical Objections is broad enough to cover Plan B.

Marc Marengo – Director, Pacific Institute for Ethics and Social Policy appeared, requesting guidance from the Board for his work at Pacific University. He discussed the history of the course he teaches, and how it was developed. Faculty and students attend sessions around case studies, and learn about ethics within the course. He believes there is a missing link in the continuing education of preceptors and provided examples of other health professions that require an ethics and policy continuing education. While the Board doesn't want a new CE requirement, they will make something available. Marc also asked about ways in which the board can help them develop a Healthcare Ethics for pharmacy program. The Board had an extensive discussion. Marc would like to find a group of people to come up with case studies for the class. Gary Miner stated that he could change the CE request form to read Law/Ethics. Marc was thanked for his presentation and time in appearing before the Board.

### Gene Berger & Rebecca Jasso Shared Client Services

Gene and Rebecca the agencies accountants appeared before the Board to provide an accounting policy and procedure update.

### Budget Report

#### Accounting & Budget Update

Administrative Director Karen MacLean reported on the status of budget preparations. We are still waiting for final reports to be included in the budget binders from Salem. The accounting reports indicate that we are in good shape and in the right place for the biennium.

### Legislation

#### Prescription Drug monitoring program/Grant & Legislation

Pharmacist Consultant Paige Clark reported that Senator Morrisette said that the Senate Public Health Committee will carry the Prescription Drug Monitoring Program (PDMP) legislation. He also mentioned that he would like to see a civil penalty in statute rather than in rule. The Board staff will add this language. Cathy commented that the Lane County Medical Society is in support of the

Board submitting a newsletter article explaining PDMP, the pros and cons, as well as pictures, and bios of Board members. The Pain Commission also is publicly supporting the PDMP.

2006 - 2007 Board Dates:

- December 5-6, 2006                      Portland
- February 6 – 7, 2007                      Corvallis
- April 17 – 18, 2007\*                      Portland
- May 19 – 22, 2007                      Portland                      *NABP Annual Meeting*
- June 5 -6, 2007                      Portland
- August 7 – 8, 2007                      Portland
- October 3 - 6, 2007                      Ashland                      *NABP District VII/VIII Meeting*
- October 16-17, 2007                      Portland
- December 4 – 5, 2007                      Portland
- Strategic Planning                      TBA\*

For the April Board meeting, the Board has decided to change the dates to April 17<sup>th</sup> and 18<sup>th</sup>, with one day being held at the Portland State Office Building, and one day being held at Pacific University's School of Pharmacy. It was also decided to add an extra day to the April meeting for further rules discussion. New dates will now be April 17, 18, and 19, 2007.

NABP Annual Meeting

Board President Marc Watt had questions about the Boards role in the NABP Annual Meeting. He directed staff to report findings at the Strategic Planning Meeting. Board staff will look into ideas for local restaurants, transportation issues, cost, and staffs role at the meeting.

Open Forum

No Public Comment

**Friday, September 15, 2006**

**9:00am OPEN SESSION, Marc Watt, R.Ph. Presiding**

Roll Call

The following Board members were present:

Marc Watt, President  
Ann Zweber, Vice President  
Linda Howrey  
Cathy Lew  
Lee Howard  
Bernie Foster

The following staff were also present:

Gary Schnabel, Executive Director  
Karen S. MacLean, Administrative Director  
Gary Miner, Compliance Director  
Tony Burt, Project Manager

Paige Clark, Pharmacist Consultant  
Joe Ball, Chief Inspector  
Judy VanUden, Pharmacy Inspector  
Jennifer Hess – Management Secretary

Tom Cowan Board Counsel

#### **MOTION**

**Motion to move into Executive Session at 9:15 was made and unanimously carried.  
(Motion by Howrey, Second by Howard)**

#### **MOTION**

**Motion to exit out of Executive Session at 10:00 was made and unanimously carried.  
(Motion by Howrey, second by Howard)**

Compliance Consent Agenda review and approval  
Refer to Compliance Minutes.

Planning and prioritizing for upcoming rule revisions

Board President Marc Watt wants a continued commitment to this process. Two key dates for rulemaking in the future will be December, and June. The Board and staff need to leave plenty of time within the Board meeting framework for policy discussions, staff drafting of new/updated rule text, Assistant Attorney General review, working groups, advisory committee, rule making hearing notice and putting together a hearing report.

Compliance Director Gary Miner provided his concept for Division 41 is to align with the federal guidelines and the DEA regarding ambulatory services, and institutional services.

Project Manager Tony Burt put together a spreadsheet which includes all the different divisions. It identifies rules that staff and the Board think are priorities in managing updates for the next year.

Board member Cathy Lew questioned where compounding and USP 797 fit into the timeline. The Board had further discussion on this issue regarding JCAHO compliance facilities, compounding out of a retail pharmacy, general awareness, and public safety risk. The Board decided to have the research council help identify critical priority issues, and directed Cathy to move forward on this.

A third day was added on to the April Board meeting for further rules discussion.

Ken Schafermeyer, Institute for the Certification of Pharmacy Technicians (ICPT)

Provided an update on what is new with ICPT. He shared that information is now available on the web, and enhancements have been made to online assistance. Sites for testing are being added all over the state. The Board requested additional testing sites in more rural areas like Pendleton, Medford, Baker, and Ontario, as well as on the coast. The goal of ICPT is so that students will not have to drive more than an hour and a half to the testing site. As of now 23 states are accepting the ICPT for Technician certification. The Board requested

statistics on the passing rate of the test, the Board would also like a copy of the manual. ICPT is trying to come up with a process to evaluate requests for waivers. From the time of application to take the test, students will have 24 hours to take the test. If the student fails the test they must wait one month to test again, there is no limit on how many times you can test, but student must pay the full fee each time. Marc requested that once we get more people taking the test, to get a report on geographic location of where people are coming from to test and current testing sites. Ken responded that it is possible to do that on a quarterly basis.

Jeannie Burkett, appeared on behalf of the Pharmacy Technician Certification Board (PTCB) to provide an update on Technician Certification transition. Jeannie works full time for Providence Home Services, and volunteers with the PTCB. She shared that at the last exam on July 22, 243 students sat for the exam and there was an 84% pass rate. Currently there are 250,000 technicians certified through the PTCB with 1679 in Oregon. In comparison with the national statistics Oregon is above the national pass rate with an average of 91% pass rate compared with 78% nationally. In February 2007 the plan is to have the computer based testing go live. The test has historically been paper and pencil. Tutorials will be offered for the exam, and with the new testing format, calculators will not be allowed, but there will be a calculator available on the computer screen for students to use. Testing sites are located along the I-5 corridor, Portland, Salem, Medford. The plan is to eventually have testing sites outside of the I-5 corridor. The September test results are not available just yet, the next test is in November. Texas was the first state to make it mandatory for technician testing. At this time if a technician misses a date in their home state, they are unable to go to another state to test. If the student fails the test, Jeannie was not sure how long they would have to wait to test again, but the technician would have to re-apply and pay the full fee again in order to retest. The Board questioned if there was a practice test available online, Jeannie wasn't sure but figured there probably was. She will check for sure and get back to Karen.

Question and Answer session with the Board

Open Forum – No public comments.

#### **MOTION**

**Motion was made to adjourn the meeting at 2:25 and unanimously carried. (Motion by Foster, Second by Howrey.**

Minutes Accepted By:

Gary A. Schnabel, Executive Director  
/s/ Gary A. Schnabel, R.Ph., R.N.