Annual Report Fiscal Year 2021

Board of Pharmacy



Department of Commerce, Community and Economic Development

Division of Corporations, Business and Professional Licensing

This annual performance report is presented in accordance with Alaska statute AS 08.01.070(10).

Its purpose is to report the accomplishments, activities, and the past and present needs of the licensing program.

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Identification of the Board

Board Member	Duty Station	Date Appointed	Term Expires
Richard Holt, PharmD, MBA Chair	Eagle River, AK	Mar 01, 2020	Mar 01, 2024
Leif Holm, PharmD Vice Chair	North Pole, AK	Mar 01, 2015	Mar 01, 2023
Lana Bell, RPh Secretary	Anchorage, AK	Mar 01, 2018	Mar 01, 2022
James Henderson, RPh	Soldotna, AK	Mar 01, 2017	Mar 01, 2025
Justin Ruffridge, PharmD	Anchorage, AK	Mar 01, 2020	Mar 01, 2024
Sharon Long Public Member	Anchorage, AK	Mar 01, 2018	Mar 01, 2022
Tammy Lindemuth Public Member	Anchorage, AK	Mar 01, 2018	Mar 01, 2025

Identification of Staff

Laura Carrillo, MPH - Executive Administrator

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing Post Office Box 110806 Juneau, Alaska 99811-0806 (907) 465-2550

Lisa Sherrell – Prescription Drug Monitoring Program Manager (since January 2020)

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing Post Office Box 110806 Juneau, Alaska 99811-0806 (907) 465-2550

Michael Bowles – Investigator III (since February, 2021)

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing Post Office Box 110806 Juneau, Alaska 99811-0806 (907) 465-2550

Heather Noe – Licensing Examiner (since January 2020)

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing Post Office Box 110806 Juneau, Alaska 99811-0806 (907) 465-2550

Bethany Carlile – Licensing Examiner (since November 2020)

Department of Commerce, Community & Economic Development Division of Corporations, Business and Professional Licensing Post Office Box 110806 Juneau, Alaska 99811-0806 (907) 465-2550

Narrative Statement

The Alaska Board of Pharmacy "the board" endeavors to promote, preserve, and protect the public health, safety, and welfare of the public by and through the effective control and regulation of the practice of pharmacy. During FY2021, the board continued its efforts to support the pharmaceutical supply chain, marking one year of expanding its regulatory oversight of non-resident wholesale drug distributors, outsourcing facilities, and third-party logistics providers. The board of pharmacy continued to regulate in-state pharmacies, out-of-state pharmacies, remote pharmacies, drug rooms, in-state wholesale drug distributors, pharmacists, pharmacist interns, and pharmacy technicians. In all, the board added over 1,250 new licensees to its user base in FY2021, bringing the total number of regulated individuals and entities to approximately 4,700. The board also continued to regulate shared pharmacy services and telepharmacy systems, review and approve collaborative practice agreements with practitioners, and administer the state's controlled substance prescription database, the Prescription Drug Monitoring Program (PDMP).

Through its comprehensive emergency response, the board continued to support the state's strategic health response, balance healthcare delivery sites, and aid in the scaling up of vital pharmacy support services during this unprecedented pandemic. The board swiftly implemented emergency preparedness regulations in FY2020, making these permanent in July FY2021. These regulations reduce barriers to licensure and bridge accessibility gaps to critical patient services by relaxing license application requirements and allowing for the delivery of medications by support staff without the need to obtain licensure. By mid-FY2021, the board expanded its existing emergency pharmacist permit to include pharmacist interns and pharmacy technicians, expediting priority license applications and increasing pharmacy personnel coverage across the state. The board also created a new courtesy license category to allow pharmacy personnel to provide COVID-19 vaccines. These collective efforts, which align with the U.S. Department of Health and Human Services' (HHS) Public Readiness and Emergency Preparedness Act (PREP Act) – helped to elevate the state's vaccine distribution capacity and alleviate immunization strains bottlenecked by previous limitations on certain personnel authorized to provide this service.

Legislatively, the board testified in support of the Alaska Pharmacists Association's (AKPhA) pharmacist mobilization bill, HB145, which highlights the reality that pharmacists are uniquely positioned and qualified to assist with the scaling up of patient care and in filling critical health management gaps. The bill introduced language to recognize pharmacists as providers for the purpose of meeting insurance reimbursement eligibility and to clarify that prescribing for general wellness is already within pharmacists' scope of practice, particularly for those working in institutional and primary care settings. Additionally, the board supported the Nurse Licensure Compact bill and took a neutral position on the Board of Veterinary Examiner's PDMP exemption bill.

The board is statutorily required to meet at least three (3) times per year either in person or telephonically. In FY2021, the board held five (5) regular board meetings via video conference, realizing an estimated \$8,000 - \$15,000 in travel savings than if the meetings were held in person. Through regulatory subcommittees, the board continued its efforts to reduce regulatory barriers, identify outdated regulations, and assess for administrative efficiencies. In its ongoing effort to adhere to its mission, the board also approved its 2021 Strategic Plan, which includes goals and strategies around the areas of communication, administration, licensure, and regulation and enforcement.

FY 2021 Narrative Statement (continued)

The Controlled Substances Advisory Subcommittee (CSAC) continues to be led by the Board of Pharmacy's chair or chair's delegate. In FY2021, the CSAC continued discussing recently emerging substances of abuse, including kratom and gabapentin. This year, the CSAC decided to put forward a recommendation that Governor Dunleavy schedule kratom as a state-controlled substance to enable prosecution authority and to reduce the diversion and misuse of this substance.

The Board of Pharmacy also maintains its membership with the National Association of Boards of Pharmacy (NABP) and the National Association of Controlled Substance Authorities (NASCA), which provides the board with industry support and access to national resources, many of which provides administrative efficiency and supports the board in avoiding redundant services and lowering costs to the State, prospective applicants, and licensees. Through its membership with the NABP and at no additional cost, the board of pharmacy is able to delegate administration of its state jurisprudence exam for pharmacist licensure and reporting of disciplinary actions to the association. The NABP also provides an ePortal service for transfer of national examination scores and state licenses, a continuing education monitoring service, and intrastate and interstate datasharing hubs to facilitate exchange of data through the PDMP. Through its membership with NASCA, the board has access to discussion forums and comprehensive state information to assist in curtailing the abuse, misuse, and diversion of controlled substances.

A valuable longstanding relationship also exists with the Board of Pharmacy and the Alaska Pharmacists Association (AKPhA). In FY2021, the AKPhA collaborated with the Board of Pharmacy to draft legislation for expanding pharmacist practice authority and sought support from other provider types to strengthen the need for this legislation. Through HB 145, the bill proposed to update pharmacists' existing ability to independently prescribe certain medications, such as vaccines and opioid overdose drugs. The bill also proposed adding language to clarify services pharmacists are authorized to perform independent of and within a collaborative practice agreement relationship with a prescribing practitioner, including providing services for general health and wellness, disease prevention, and optimization of medication therapy. Notably, the bill also sought to make pharmacists eligible for reimbursement for these services under title 21. Though the bill ultimately did not pass this year, the board will continue to support the AKPhA in this legislative effort for the second session.

Budget Recommendations for FY 2022

The Budget Recommendations section anticipates the board's fiscal priorities for the upcoming year. Please complete all parts of this section with details about anticipated meetings, conferences, memberships, supplies, equipment, to other board requests. Meeting expenses that are being funded through third-party reimbursement or direct booking must be identified separately from expenses paid through license fees (receipt-supported services or RSS). Be sure to explain any items listed as "other" so they may be tracked appropriately.

Board Meeting Date	Location	# Board	# Staff
September 23 – 24, 2021	Anchorage	3	1
区 Airfare: 区 Hotel: 区 Ground: 区 Other: M&IE			\$2,000.00 \$1,200.00 \$100.00 \$350.00
Total Estimated Cost:			\$3,650.00

Board Meeting Date	Location	# Board	# Staff
November 18-19, 2021	Anchorage	3	1
图 Airfare: 图 Hotel: 图 Ground: 图 Other: M&IE			\$2,000.00 \$1,200.00 \$100.00 \$350.00
Total Estimated Cost:			\$3,650.00

Board Meeting Date	Location	# Board	# Staff
February 17-18, 2021	Juneau	6	0
☑ Airfare: ☑ Hotel: ☑ Ground: ☑ Other: M&IE			\$4,000.00 \$2,400.00 \$0.00 \$600.00
Total Estimated Cost:			\$7,000.00

Budget Recommendations for FY 2022 (continued)

Travel Required to Perfor Not applicable	rm Examinations		
Date	Location	# Board	# Staff
Description of meeting and it	s role in supporting the mission of t	he Board:	
☐ Airfare:			\$0.00
☐ Hotel:			\$0.00
☐ Ground:			\$0.00
☐ Conference:			\$0.00
□ Other:			\$0.00
Describe "Other" (br	eak out all sections):		
Total Estimated Cost:			\$0.00

Out-of-State Meetings and Additional In-State Travel #1 Rank in Importance or Not Applicable		(Rank in orde	r of importance)		
Date	Date Location		# Staff		
August 29 – September 1, 2021 Carefree, AZ 1 1					
Description of meeting and its role in supporting the mission of the Board:					

Description of meeting and its role in supporting the mission of the Board:

This is an NABP District 6 – 8 meeting (Alaska is in district 7). This is a unique opportunity to roundtable with district members on matters affecting today's pharmacy practice and an opportunity to engage in proactive discussions for tomorrow's pharmacists. Attendees will propose and resolve resolutions in an ongoing effort to support the practice of pharmacy.

Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total
🗷 Airfare:	\$500.00	\$0.00	\$0.00	\$500.00
■ Hotel:	\$2,500.00	\$0.00	\$0.00	\$2,500.00
☑ Ground:	\$100.00	\$0.00	\$0.00	\$100.00
□ Conference:	\$0.00	\$0.00	\$0.00	\$0.00
■ Other	\$1,080.00	\$0.00	\$0.00	\$1,080.00
Describe "Other	r" (break out all sections	s): M&IE		
Net Total:	\$4,180.00	\$0.00	\$0.00	\$4,180.00

Out-of-State Meetings and Additional In-State Travel

#2 Rank in Importance

Date	Location	# Board	# Staff
May 19 - 22, 2021	Phoenix, AZ	1	1

Description of meeting and its role in supporting the mission of the Board:

118th Annual Meeting of the National Association of Boards of Pharmacy (NABP) – State boards, regulators, and stakeholders gain a deeper understanding of how NABP and the pharmacy regulatory boards work together to protect public health. Attendees have the opportunity to network and participate in business sessions to keep abreast of the salient issues affecting pharmacy practice and regulation.

Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total
🗷 Airfare:	\$1,500.00	\$0.00	\$0.00	\$1,500.00
■ Hotel:	\$2,500.00	\$0.00	\$0.00	\$2,500.00
☑ Ground:	\$100.00	\$0.00	\$0.00	\$100.00
Conference:	\$400.00	\$0.00	\$0.00	\$400.00
☑ Other	\$1,080.00	\$0.00	\$0.00	\$1,080.00
Describe "Other	" (break out all sections	s): M&IE		
Net Total:	\$5,580.00	\$0.00	\$0.00	\$5,580.00

Out-of-State Meetings and Additional In-State Travel

#3 Rank in Importance

Date	Location	# Board	# Staff
April 18 - 21, 2022	Atlanta, GA	1	2

Description of meeting and its role in supporting the mission of the Board:

National Rx Abuse and Heroin Summit – This conference supports the state's opioid response and the board's efforts to effectively administer the state's PDMP. Federal grant funds will be used to send 2 staff members to this conference to attend the PDMP track. License fees will be used to send 1 board member to attend the regulatory, policy, clinical, and/or law enforcement tracks. The below cost reflects travel for 1 board member.

Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total
🗷 Airfare:	\$1,700.00	\$0.00	\$0.00	\$1,700.00
■ Hotel:	\$750.00	\$0.00	\$0.00	\$750.00
☑ Ground:	\$100.00	\$0.00	\$0.00	\$100.00
Conference:	\$750.00	\$0.00	\$0.00	\$750.00
■ Other	\$170.00	\$0.00	\$0.00	\$170.00
Describe "Other	" (break out all sections	s): M&IE		
Net Total:	\$3,470.00	\$0.00	\$0.00	\$3,470.00

Out-of-State Meetings and Additional In-State Travel

#4 Rank in Importance

Date	Location	# Board	# Staff
August 9 – September 10, 2021	Virtual	1	1

Description of meeting and its role in supporting the mission of the Board:

MPJE State-Specific Review – this is an opportunity for member boards to participate in review of current exam items to ensure the most valid and relevant questions are reflected in the Multi-State Jurisprudence Exam (MPJE), which is administered by the NABP. This exam is integral to assessing competency for licensure as a pharmacist. Participation in this workshop also allows for selection of new items for pre-testing, which is integral to the validity of MPJEs.

Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total
☐ Airfare:	\$0.00	\$0.00	\$0.00	\$0.00
☐ Hotel:	\$0.00	\$0.00	\$0.00	\$0.00
☐ Ground:	\$0.00	\$0.00	\$0.00	\$0.00
□ Conference:	\$0.00	\$0.00	\$0.00	\$0.00
□ Other	\$0.00	\$0.00	\$0.00	\$0.00
Describe "Othe	r" (break out all sect	ions):		
Net Total:	\$0.00	\$0.00	\$0.00	\$0.00

Out-of-State Meetings and Additional In-State Travel

#5 Rank in Importance

Date	Location	# Board	# Staff
June 16 – 17, 2021	Virtual	2	0

Description of meeting and its role in supporting the mission of the Board:

Compounding Pharmacy Compliance - The board, through their compounding subcommittee, has been working on advancing their compounding regulations over the last few years. This conference is an opportunity to netword with expertens in the compounding industry, analyze evolving regulations, strengthen compounding systems and processes, and gain insight into techniques to ensure accuracy and sterility. The overarching goal is patient safety.

Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total
☐ Airfare:	\$0.00	\$0.00	\$0.00	\$0.00
☐ Hotel:	\$0.00	\$0.00	\$0.00	\$0.00
☐ Ground:	\$0.00	\$0.00	\$0.00	\$0.00
Conference:	\$2,400.00	\$0.00	\$0.00	\$2,400.00
□ Other	\$0.00	\$0.00	\$0.00	\$0.00
Describe "Othe	r" (break out all sect	tions):		
Net Total:	\$2,400.00	\$0.00	\$0.00	\$2,400.00

Out-of-State Meetings and Additional In-State Travel

#6 Rank in Importance

Date	Location	# Board	# Staff
TBD	Multiple	1	0

Description of meeting and its role in supporting the mission of the Board:

Investigator-performed pharmacy inspections throughout the state to ensure compliance with applicable regulations and safety standards.

Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total
☑ Airfare:	\$4,000.00	\$0.00	\$0.00	\$4,000.00
■ Hotel:	\$1,000.00	\$0.00	\$0.00	\$1,000.00
☑ Ground:	\$300.00	\$0.00	\$0.00	\$300.00
☐ Conference:	\$0.00	\$0.00	\$0.00	\$0.00
☑ Other	\$500.00	\$0.00	\$0.00	\$500.00
Describe "Other	" (break out all sections	s): M&IE		
Net Total:	\$5,800.00	\$0.00	\$0.00	\$5,800.00

Out-of-State Meetings and Additional In-State Travel

#7 Rank in Importance

Date	Location	# Board	# Staff

Description of meeting and its role in supporting the mission of the Board:

Expenditure	License Fees (RSS)	Third-Party Reimbursement	Third-Party Direct Booked	Total
☐ Airfare:	\$0.00	\$0.00	\$0.00	\$0.00
☐ Hotel:	\$0.00	\$0.00	\$0.00	\$0.00
☐ Ground:	\$0.00	\$0.00	\$0.00	\$0.00
☐ Conference:	\$0.00	\$0.00	\$0.00	\$0.00
□ Other	\$0.00	\$0.00	\$0.00	\$0.00
Describe "Othe	r" (break out all sect	cions):		
Net Total:	\$0.00	\$0.00	\$0.00	\$0.00

Budget Recommendations for FY 2022 (continued)

N Torond Burdont Bonnach		
Non-Travel Budget Requests		
☐ Not Applicable	☐ Resources	☐ Examinations
☐ Membership	☐ Training	⊠ Other
Product or Service	Provider	Cost Per Event
Fingerprint processing fee		\$75.00
Description of item and its role in supp	porting the mission of the Board:	
The Board of Pharmacy is currently absorbing cost fingerprint-required licenses, an estimated cost of	sts to process fingerprint cards. So far, the board h	as issued over 850
Non-Travel Budget Requests		
☐ Not Applicable	☐ Resources	☐ Examinations
☐ Membership	☐ Training	☐ Other
Product or Service	 Provider	Cost Per Event
r roudet or service	Tovidei	\$0.00
		γυ.υυ
Description of item and its role in supp	porting the mission of the Board:	
Non-Travel Budget Requests		
☐ Not Applicable	☐ Resources	☐ Examinations
☐ Membership	☐ Training	□ Other
Product or Service	Provider	Cost Per Event
		\$0.00
Description of item and its role in supp	porting the mission of the Board:	

Budget Recommendations for FY 2022 (continued)

Other Items with a Fiscal Impact	Cost Per Event:	\$0.00
☐ Not Applicable	Number of Ever	nts: 0
Product or Service	Provider	Total Cost
		\$0.00
Description of item and its role in supp	porting the mission of the Board:	

Other Items with a Fiscal Impact	Cost Per Event: Number of Ever	•
Product or Service	Provider	Total Cost
		\$0.00
Description of item and its role in sup	porting the mission of the Board:	

nmary of FY 2022 Fiscal Requests	
Board Meetings and Teleconferences:	\$14,300.00
Travel for Exams:	\$0.00
Out-of-State and Additional In-State Travel:	\$21,430.00
Dues, Memberships, Resources, Training:	\$75.00
Total Potential Third-Party Offsets:	-\$0.00
Other:	\$0.00
Total Requested:	\$35,805.00

Legislation Recommendations Proposed Legislation for FY 2022

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The Board has no recommendations for proposed legislation at this time.

Recommendations

The Board has the following recommendations for proposed legislation:

The Alaska Pharmacists Association (AKPhA) introduced legislative changes through HB 145 in FY2021 that overlap with changes the Board of Pharmacy previously identified in its FY2020 legislative recommendations. Though the bill did not pass, it is anticipated the following amendments will be reflected in rollover legislation in the second session:

- Removing "dosage form" from the definition of "equivalent drug product" in AS 08.80.480.
- Clarifying pharmacists' ability to independently prescribe and administer vaccines and emergency medications under AS 08.80.168, and expand their ability to provide independent treatment to other conditions as appropriate
- Allowing pharmacist interns and pharmacy technicians, as supervised by a pharmacist, to prescribe
 vaccines and emergency medications under AS 08.80.168, and expand their ability to provide supervised
 treatment to other conditions as appropriate
- Allowing other pharmacy personnel, as delegated by the pharmacist, to disclose prescription prices, including less costly alternatives per AS 08.80.297

Additionally, the Board of Pharmacy will support legislation to regulate the practice of white bagging and brown bagging. During it's May 20-21, 2021 meeting, the AKPhA presented its official letter to the board outlining concerns with white bagging and its negative financial affect on facilities, the risks it poses to the FDA's Drug Supply Chain Security Act (DSCSA), and the complex inventory management it imposes on pharmacy staff.

A summary of the Board of Pharmacy's legislative recommendations include:

Statutory area	Summary of Change	Citation
Annual report	Remove annual report requirement; allow	AS 80.80.158(b)
	updates to be provided at the time of renewal	
Moral character	Remove moral character requirement from	AS 08.80.110(2),
	applications for pharmacists via examination,	AS 08.80.145(3)
	reciprocity,	
Registration of	Repeal registration and introduce licensure	AS 08.80.158
pharmacies	category	
Requirements for non-	Include devices, require licensure	AS 08.80.159
resident pharmacies		
Licenses not affected	Drug dispensing machines	AS 08.80.400
Prohibited terms	Add "apothecary"	AS 08.80.420

Legislation Recommendations Proposed Legislation for FY 2022 (Continued)

The Board of Pharmacy's proposed changes are as follows:

Sec. 08.80.110. QUALIFICATIONS FOR LICENSURE BY EXAMINATION. An applicant for licensure as a pharmacist shall (1) be fluent in the reading, writing, and speaking of the English language;

- (2) furnish the board with at least two affidavits from reputable citizens that the applicant has known for at least one year attesting to the applicant's good moral character;
- (3) be a graduate of a college in a degree program approved by the board;
- (4) pass an examination or examinations given by the board or acceptable to the board under the score transfer process administered by the National Association of Boards of Pharmacy;
- (5) have completed internship training or another program that has been approved by the board or demonstrated to the board's satisfaction that the applicant has experience in the practice of pharmacy that meets or exceeds the minimum internship requirements of the board.

Sec. 08.80.145. RECIPROCITY; LICENSE TRANSFER. If another jurisdiction allows licensure in that jurisdiction of a pharmacist licensed in this state under conditions similar to those in this section, the board may license as a pharmacist in this state a person licensed as a pharmacist in the other jurisdiction if the person

- (1) submits a written application to the board on a form required by the board;
- (2) is at least 18 years of age;
- (3) is of good moral character;
- (4) possesses at the time of the request for licensure as a pharmacist in this state the qualifications necessary to be eligible for licensure in this state;
- (5) has engaged in the practice of pharmacy for at least one year or has met the internship requirements of this state within the one-year period immediately before applying for a license under this section;
- (6) presents proof satisfactory to the board that the person is currently licensed as a pharmacist in the other jurisdiction and does not currently have a pharmacist license suspended, revoked, or otherwise restricted except for failure to apply for renewal or failure to obtain the required continuing education credits;
- (7) has passed an examination approved by the board that tests the person's knowledge of Alaska laws relating to pharmacies and pharmacists and the regulations adopted under those laws; and (8) pays all required fees.

Sec. 08.80.160. FEES. The Department of Commerce, Community, and Economic Development shall set fees under AS 08.01.065 for the following:

- (1) examination;
- (2) reexamination;
- (3) investigation for licensing by license transfer; (4) pharmacist license;
- (5) temporary license;
- (6) pharmacy technician license;
- (7) pharmacy intern license;
- (8) emergency permit;
- (9) license amendment or replacement;
- (10) registration or licensure of a facility classified under AS 08.80.157(b).

Sec. 08.80.168. PRESCRIBE AND ADMINISTER ADMINISTRATION OF DRUGS VACCINES AND RELATED EMERGENCY MEDICATIONS.

- (a) A pharmacist may independently prescribe
 - (1) and administer a vaccine and related emergency medication if the pharmacist has completed an immunization training program approved by the board and otherwise complies with the standards established by the board under AS 08.80.030(b).

Legislation Recommendations Proposed Legislation for FY 2022 (Continued)

- (2) and dispense an opioid overdose drug if the pharmacist has completed an opioid overdose drug training program approved by the board and otherwise complies with the standards established by the board under AS 08.80.030(b).
- (3) and dispense dietary fluoride supplements when prescribed according to the American dental association's recommendations for persons whose drinking water is proven to have a fluoride content below the United States department of health and human services' recommended concentration;
- (4) and dispense epinephrine auto-injectors;
- (5) and dispense drugs, drug categories, or devices that are prescribed in accordance with the product's federal food and drug administration-approved labeling and that are limited to conditions that:
 - (A) do not require a new diagnosis;
 - (B) are minor and generally self-limiting;
 - (C) have a test that is used to guide diagnosis or clinical decision-making and are waived under the federal clinical laboratory improvement amendments of 1988; or
 - (D) in the professional judgment of the pharmacist, threaten the health or safety of the patient should the prescription not be immediately dispensed. In such cases, only sufficient quantity may be provided until the patient is able to be seen by another provider.
- (6) In this section,
 - (1) "opioid overdose drug" has the meaning given in AS 17.20.085;
 - (2) "related emergency medication" includes an epinephrine injection or other medication for the treatment of a severe allergic reaction to a vaccine.
- (b) The board shall not adopt any regulations authorizing a pharmacist to prescribe a controlled drug, compounded drug or biological product.
- **Sec. 08.80.400. OTHER LICENSEES NOT AFFECTED.** (a) This chapter does not affect the practice of medicine by a licensed medical doctor and does not limit a licensed medical doctor, osteopath, podiatrist, physician assistant, advanced practice registered nurse, dentist, veterinarian, dispensing optician, or optometrist in supplying a patient with any medicinal preparation or article within the scope of the person's license.
- (b) This section does not apply to the placement of automated prescription drug dispensing machines. Prescription drug dispensing machines, outside of institutional facilities, that are intended to regularly dispense drugs to patients shall be licensed by the board.
- (c) In this section, "regularly" means to dispense more than a 3-day supply to a patient.
- **Sec. 08.80.420. CERTAIN ADVERTISING PROHIBITED.** (a) A person may not use or exhibit the title "pharmacist," "assistant pharmacist," or "druggist," or the descriptive term "pharmacy," "drug store," "drug sundries," "apothecary", or other similar title or term containing the word "drug," in any business premises, or in an advertisement through the media of press, or publication, or by radio or television, unless the business has a licensed pharmacist in regular and continuous employment.
- (b) Repealed 1980.

Regulation Recommendations Proposed Legislation for FY 2022

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The Board has no recommendations for proposed regulations at this time.

Recommendations

The Board has the following recommendations for proposed regulations:

12 AAC 52.020. FACILITY PHARMACY LICENSE. (repeal & readopt)

- (a) An applicant for a facility pharmacy license shall submit
 - (1) the applicable fees required in 12 AAC 02.310;
 - (2) a completed application on a form provided by the department;
 - (3) an attestation that within 14 days after commencement of business, a completed self-inspection of the premises questionnaire on a form provided by the department will be completed. The self-inspection must be retained, and available upon request, for the duration of the licensing period in which it was completed; and
 - (4) the name of the pharmacy or pharmacist that will provide consultant pharmacist services as required in AS 08.80.390, if applicable.
- (b) Repealed 1/17/2007.
- (c) An application for a remote or other pharmacy license must include the name of the pharmacist designated to be the pharmacist-in-charge as required in AS 08.80.330 and 12 AAC 52.200.
- (d) An application for a pharmacy license must include the name and specific location of each remote pharmacy that will be under that pharmacy's control.
- (e) An application for a remote pharmacy license must include the name and, if it has been issued, the license number of the pharmacy that is the central pharmacy.
- (f) a pharmacy that has changed its name, ownership, or physical address shall apply for a new and separate license in accordance with this section.

12 AAC 52.030. CHANGE OF PHARMACY LOCATION OR NAME. (repeal)

- (a) The pharmacist in charge of a pharmacy that has changed its name or physical address shall apply for a new and separate pharmacy license. The applicant shall
 - (1) submit a new, completed application for a pharmacy license on a form provided by the department; and
 - (2) pay the duplicate license fees required in 12 AAC 02.105;
 - (3) repealed 1/17/2007.

(b) Within 14 days after commencement of business under the new license, the pharmacist in charge of a pharmacy that has changed its physical address shall complete a self-inspection questionnaire on a form provided by the department.

12 AAC 52.040. CHANGE OF PHARMACY OWNERSHIP. (repeal)

(a) Repealed 1/17/2007.

(b) A new owner of a pharmacy shall apply for a new and separate facility license in accordance with 12 AAC 52.020.

Regulation Recommendations Proposed Legislation for FY 2022 (Continued)

12 AAC 52.070. APPLICATION FOR PHARMACIST LICENSE BY EXAMINATION. (amend)

- (b) An applicant for licensure under this section must submit to the department
 - (1) a complete, notarized application on a form provided by the department; the application form must include a statement from the applicant attesting to the applicant's fluency in reading, writing, and speaking the English language;
 - (2) the applicable fees established in 12 AAC 02.310;
 - (3) on a form provided by the department, a signed authorization for the release of records relating to the applicant's qualifications for licensure;
 - (4) either

(A) an official transcript, sent directly to the department from the applicant's college of pharmacy, that establishes that the applicant has received a professional degree from a college of pharmacy accredited by the ACPE; or

- (B) a certified copy of
 - (i) the original pharmacy school diploma issued to the applicant from a college of pharmacy accredited by the ACPE; and or
 - (ii) a Foreign Pharmacy Graduate Examination Committee certificate issued to the applicant by the National Association of Boards of Pharmacy, sent directly to the department from the National Association of Boards of Pharmacy;
- (5) two affidavits from reputable citizens that the applicant has known for at least one year attesting to the applicant's good moral character;
- (6) verification that the applicant has completed 1,500 hours of internship or experience in the practice of pharmacy that meet the requirements of 12 AAC 52.080 from the agency where the hours of internship or experience were completed:
- (7) verification that the applicant has passed the examinations required in 12 AAC 52.090, sent directly to the department by the National Association of Boards of Pharmacy.

12 AAC 52.130. REGISTRATION OF PHARMACIES LOCATED OUTSIDE OF THE STATE. (amend)

- (b) The following checklist is established by the board for review by staff of an application for an out-of-state pharmacy registration. An out-of-state pharmacy registration will be issued to an applicant who
 - (2) pays the application fee and the out-of-state pharmacy registration applicable fees established in 12 AAC 02.310;
 - (3) submits a certified true copy of a current, valid facility license or registration from the jurisdiction where the pharmacy is located; and
 - (4) submits an attestation that an inspection report or self-inspection report was completed within the last two years or since the last time the registration was initially issued. A self-inspection must be retained, and made available upon request, for the duration of the licensing period in which it was completed.

12 AAC 52.092. APPROVAL TO SIT FOR EXAMINATION. (amend)

- (a) An applicant for licensure by examination under 12 AAC 52.070 who has submitted documents that meet the requirements on the checklist set out in (b) of this section may be approved to sit for the North American Pharmacy Licensing Examination (NAPLEX) and the Multistate Pharmacy Jurisprudence Examination (MPJE) required under 12 AAC 52.090. An applicant whose application documents do not meet the requirements set out in (b) of this section will not be approved to sit for the NAPLEX or MPJE unless the board further reviews the application and determines that the applicant meets the requirements of AS 08.80.110, 08.80.116, and 12 AAC 52.070.
- (b) The following checklist is established by the board for review by staff to determine if an applicant for a pharmacist license by examination may sit for examination. Except as provided in (a) of this section, an applicant for licensure by examination will be approved to sit for the NAPLEX and the MPJE if the applicant submits to the department.

Regulation Recommendations Proposed Legislation for FY 2022 (Continued)

- (1) a complete, notarized application on a form provided by the department; the application form must include a statement from the applicant attesting to the applicant's fluency in reading, writing, and speaking the English language;
- (2) the applicable fees established in 12 AAC 02.310;
- (3) on a form provided by the department, a signed authorization for the release of records relating to the applicant's qualifications for licensure;
- (4) either
- (A) an official transcript, sent directly to the department from the applicant's college of pharmacy, that establishes that the applicant has received a professional degree from a college of pharmacy accredited by the ACPE; or
- (B) a-certified copy of
 - (i) the original pharmacy school diploma issued to the applicant from a college of pharmacy accredited by the ACPE; and or
 - (ii) a Foreign Pharmacy Graduate Examination Committee certificate issued to the applicant by the National Association of Boards of Pharmacy, sent directly to the department from the National Association of Boards of Pharmacy;
- (5) two affidavits from reputable citizens that the applicant has known for at least one year attesting to the applicant's good moral character.

12 AAC 52.095. APPLICATION FOR PHARMACIST LICENSE BY RECIPROCITY. (amend)

- (a) An applicant who meets the requirements of AS 08.80.145, the requirements set out in (b) of this section, and the requirements set out in (c) of this section has demonstrated the qualifications for a pharmacist license by reciprocity. An applicant who does not meet the requirements of this section or whose responses on the form for application do not clearly show that the applicant is qualified to receive a pharmacist license by reciprocity will not be issued a license unless the board reviews the application and determines that the applicant meets the qualifications in this section for a pharmacist license by reciprocity.
- (b) An applicant for licensure under this section must show that the licensing jurisdiction where the applicant is licensed as a pharmacist allows licensure in that jurisdiction of a pharmacist licensed in this state under conditions similar to those in AS 08.80.145. A licensing jurisdiction that is a member of the National Association of Boards of Pharmacy meets the licensing jurisdiction reciprocity requirements of AS 08.80.145.
- (c) An applicant for licensure under this section must submit to the department
 - (1) a complete, notarized application on a form provided by the department;
 - (2) the applicable fees established in 12 AAC 02.310;
 - (3) on a form provided by the department, a signed authorization for the release of records related to the applicant's qualifications for licensure;
 - (4) either
 - (A) an official transcript, sent directly to the department from the applicant's college of pharmacy, that establishes that the applicant has received a professional degree from a college of pharmacy accredited by the ACPE; or
 - (B) a-certified copy of
 - (i) the original pharmacy school diploma issued to the applicant from a college of pharmacy accredited by the ACPE; and or
 - (ii) a Foreign Pharmacy Graduate Examination Committee certificate issued to the applicant by the National Association of Boards of Pharmacy sent directly to the department from the National Association of Boards of Pharmacy;
 - (5) two affidavits from reputable citizens that the applicant has known for at least one year attesting to the applicant's good moral character;
 - (6) either
 - (A) verification that, within the one-year period immediately preceding application for a license in this state, the applicant completed 1,500 hours of internship or experience in the practice of pharmacy that meet the requirements of 12 AAC 52.080.; the verification must be sent directly to the department from the agency where the hours of internship or

Regulation Recommendations Proposed Legislation for FY 2022 (Continued)

- (B) verification that the applicant has engaged in the practice of pharmacy for at least one year in another licensing jurisdiction;
- (7) verification that the applicant has passed the examinations required in 12 AAC 52.090, sent directly to the department by the National Association of Boards of Pharmacy;
- (8) verification that the applicant is currently licensed as a pharmacist in another licensing jurisdiction and the applicant's license in the other jurisdiction is not suspended, revoked, or otherwise restricted except for failure to apply for renewal or failure to obtain the required continuing education requirements;
- (9) if the licensing jurisdiction in which the applicant is licensed as a pharmacist is a member of the National Association of Boards of Pharmacy, a copy of the applicant's Official Application for Transfer of Pharmaceutic Licensure, sent directly to the department from the National Association of Boards of Pharmacy. The license by which the applicant is seeking reciprocity from must be in good standing;
- (10) verification of the present status of the applicant's **pharmacist** license in each licensing from the jurisdiction where the applicant is reciprocating. holds, or has ever held, a license as a pharmacist.

12 AAC 52.120. REVIEW OF PHARMACIST INTERN LICENSE APPLICATION. (repeal & re-adopt)

- (b) The following checklist is established by the board for review by staff of an application for a pharmacist intern license. A pharmacist intern license will be issued to an applicant who
 - (1) submits a complete, notarized application on a form provided by the department;
 - (2) pays the applicable application fee and the pharmacist intern license fees established in 12 AAC 02.310;
 - (3) has
- (A) enrolled in a college of pharmacy accredited by the ACPE; or
- (B) graduated from a college of pharmacy recognized by and earned certification from the Foreign Pharmacy Graduate Examination Committee of the National Association of Boards of Pharmacy;
- (4) certifies that the applicant has not been convicted of a felony or another crime that affects the applicant's ability to practice as a pharmacy intern competently and safely;
- (5) repealed 10/31/2019;
- (6) submits a completed authorization of release of records on a form provided by the department and signed by the applicant;
- (7) submits a completed Alaska Jurisprudence Intern Practice Questionnaire prepared by the board covering the provisions of AS 08.80 and this chapter and 21 U.S.C. 801-847 (Controlled Substances Act); and
- (8) submits two affidavits from reputable citizens that the applicant has known for at least one year attesting to the applicant's good moral character.
 - B) graduated from a college of pharmacy recognized by and earned certification from the Foreign Pharmacy Graduate Examination Committee of the National Association of Boards of Pharmacy;
- (4) certifies that the applicant has not been convicted of a felony or another crime that affects the applicant's ability to practice as a pharmacy intern competently and safely;
- (5) repealed 10/31/2019;
- (6) submits a completed authorization of release of records on a form provided by the department and signed by the applicant;
- (7) submits a completed Alaska Jurisprudence Intern Practice Questionnaire prepared by the board covering the provisions of AS 08.80 and this chapter and 21 U.S.C. 801-847 (Controlled Substances Act); and
- (8) submits two affidavits from reputable citizens that the applicant has known for at least one year attesting to the applicant's good moral character. (repeal and re-adopt)

12 AAC 52.080. INTERNSHIP REQUIREMENTS FOR A PHARMACIST LICENSE. (repeal and re-adopt)

(a) An applicant for a pharmacist license shall submit an affidavit signed by the applicant, on a form provided by the department, documenting completion of 1,500 hours of internship or experience in the practice of pharmacy.

Regulation Recommendations Proposed Legislation for FY 2022 (Continued)

- (b) The board will accept as internship experience only internship hours completed under the direct supervision of a pharmacist licensed under AS 08.80 or the pharmacy licensing laws of another state.
- (c) Repealed 4/16/2016.
- (d) An internship program in a nontraditional site, such as an industry sponsored program, must be approved by the board before the board will give any internship credit for the program.

12 AAC 52.200. PHARMACIST-IN-CHARGE. (amend)

- (b) The responsibilities of the pharmacist-in-charge include
 - (1) compliance with all laws and regulations governing the activities of the pharmacy;
 - (2) training of all pharmacy personnel;
 - (3) establishing ensuring adequate policies and procedures are in place for pharmacy operations;
 - (4) maintaining required records;
 - (5) storage of all materials, including drugs and chemicals;
 - (6) establishing ensuring and maintaining effective controls against theft or diversion of prescription drugs; and
 - (7) on request, reporting to the board the names of all pharmacists employed by the pharmacy.
- (c) A pharmacist designated to replace the pharmacist-in-charge of a pharmacy shall notify the board within 10 days of that designation, by submitting a completed change of pharmacist-in-charge form provided by the department or and paying the applicable fees established in 12 AAC 02.105(3).
- (d) A pharmacist-in-charge may practice in more than one pharmacy location and may be designated as the pharmacist-in-charge of multiple pharmacies simultaneously.

12 AAC 52.300. LICENSE RENEWAL. (repeal and re-adopt)

- (a) Pharmacy, wholesale drug distributor, **outsourcing facility, third-party logistics provider** and drug room licenses expire on June 30 of even-numbered years.
- (b) An applicant for renewal of a pharmacy, wholesale drug distributor, **outsourcing facility**, **third-party logistics provider** or drug room license shall submit **on or before the license expiration date**
 - (1) a completed renewal application on a form provided by the department;
 - (2) the license renewal fees required in 12 AAC 02.310; and
 - (3) an attestation completed that a self-inspection of the premises using the questionnaire on a form provided by the department was completed within the last two years or since the last time the license or registration was initially issued. The self-inspection must be retained, and available upon request, for the duration of the licensing period in which it was completed.
- (c) An applicant for renewal of a pharmacist or pharmacy technician license shall submit on or before the license expiration date
 - (1) a completed renewal application on a form provided by the department; and
 - (2) the license renewal fees required in 12 AAC 02.310; and
 - (3) an attestation that the applicant has met all continuing education requirements of 12 AAC 52.320 12 AAC 52.350;
 - (4) repealed 4/3/2020.
- (d) A pharmacy that has changed its name, physical address, or ownership since the date it was first issued or last renewed is not eligible for renewal.
- (e) A wholesale drug distributor that has changed its name, physical address, ownership, or facility manager is not eligible for renewal if the change occurred 30-days after the date a renewal application is submitted to the board.
- (f) An outsourcing facility or third-party logistics provider that has changed its name, physical address, ownership, or facility manager is not eligible for renewal.

Regulation Recommendations Proposed Legislation for FY 2022 (Continued)

The Board of Pharmacy intends to make additional changes to the following regulations:

- 12 AAC 52.610 Wholesale drug distributor license
- 12 AAC 52.696 Outsourcing facilities
- 12 AAC 52.697 Third-party logistics provider
- 12 AAC 52.585 Mandatory patient counseling
- 12 AAC 52.460 Prescription drug order information
- 12 AAC 52.415 Automated dispensing kiosk (new)
- 12 AAC 52.420 Security
- 12 AAC 52.230 Pharmacy technicians
- 12 AAC 52.210 Pharmacist duties
- 12 AAC 52.423 Remote pharmacy license
- 12 AAC 52.992 Independent administration of vaccines and related emergency medications
- 12 AAC 52.990 Display of license certificate
- 12 AAC 52.443 Approval for shared pharmacy services by pharmacist
- 12 AAC 52.445 Shared pharmacy services
- 12 AAC 52.446 Shared pharmacy services during emergency

The Board of Pharmacy also intends to update its Facility Standards for Pharmacists appended to its statutes and regulations booklet. This was last revised in November 2016.

Goals and Objectives

Part I

FY 2021's goals and objectives, and how they were met:

The Board of Pharmacy identified fourteen (14) goals for FY2021, most of which have been met or are ongoing efforts to be incorporated into the board' strategic plan. Included in this section are the board's strengths, weaknesses, opportunities, and threats (SWOT), to illustrate its assets, capabilities, and internal and external challenges for both the aspects of licensing and the Prescription Drug Monitoring Program (PDMP).

SWOT 1. Pharmacy Licensing

Strengths Weaknesses Opportunities Complete board Staff turnover Closure of services Expedited online membership licensing through applicants need to myAlaska complete licensure Technologically (exam services, Expanded public adaptive inspectors, comment •Responsive staff fingerprints) during opportunities Use of diverse COVID-19 communication Shifting priorities due channels to COVID-19 Established licensing policies and procedures Special topic subcommittee meetings Emergency preparedness regulations Task list accountability and follow-up Rapport with stakeholders (AKPhA, DHSS)

Goals and Objectives (continued)

Part I (continued)

FY 2021's goals and objectives, and how they were met:

SWOT 2. Prescription Drug Monitoring Program (PDMP)

•BOP established process to use as model by other boards: screening of requirements incorporated into applications; tracking of mandatory use compliance through designations; concurrent processing of PDMP registration and license renewals •Training documents and videos

- Comprehensive website content and FAQs
- Quarterly statistics reports provided to boards
- Database enhancement features to display riskbased patient alerts

Weaknesses

- Lack of receipt authority
- Technological limitations
- Personnel shortage
- Differing priorities and processes amongst licensing boards

Opportunities

- PDMP Board Chairs meetings
- Education and outreach
- Awareness and feedback questionnaire
- Collaboration with stakeholders (IHS, VA, military, HIE, DHSS, professional associations)
- Grant applications
- Development of disciplinary matrices

Threats

- Inconsistent funding opportunities
- •Low compliance due to time constraints and technological integration
- Perceived relevance of PDMP to opioid crisis
- Perceived lack of enforcement for noncompliance

Goal #1: The board will continue to promote, preserve, and protect the public, safety, and welfare by and through the effective control and regulation of the practice of pharmacy.

Status: met by

- 1.) Regulation of pharmacists, pharmacist interns, pharmacy technicians, pharmacies, drug rooms, wholesale drug distributors, outsourcing facilities, and third-party logistics providers
- 2.) Review and approval of collaborative practice agreements
- 3.) Administration of the Prescription Drug Monitoring Program (PDMP)
- 4.) Promulgation of regulations related to emergency preparedness
- 5.) Issuing guidance to pharmacy personnel in response to the COVID-19 pandemic

Goal #2: The board will continue to provide input and comment on any proposed regulations involving medications, pharmaceutical care, or the practice of pharmacy.

Status: The board was not aware of new opportunities to provide comment on proposed regulations.

Goals and Objectives (continued)

Goal #3: The board will continue to promote effective patient counseling by licensees.

Status: The board continues to promulgate regulations for mandatory patient counseling under 12 AAC 52.585. Additionally, the board amended 12 AAC 52.992(d) allowing a pharmacist intern to offer vaccine information statements (VIS) to patients. The board replaced *provide*, with *offer*, which improves patient engagement and encourages dialogue around these preventative services.

Goal #4: The board will continue to assess and evaluate the multi-state pharmacy jurisprudence examination (MPJE) and send two members to the MPJE Item Development workshop.

Status: This was not met due to threats; see SWOT 1.

Goal #5: The board will continue to assess and evaluate the licensing of pharmacy technicians and discuss the introduction, recognition, and duties for a nationally certified pharmacy technician.

Status: on March 27, 2020 the board adopted emergency regulations, including recognition of pharmacy technicians with national certifications. The emergency regulations took effect on April 3, 2020 and were adopted as permanent on May 28, 2020, the Board of Pharmacy adopted the emergency regulation changes to be made permanent. The permanent emergency regulation changes were approved, signed, and filed by the Lieutenant Governor on July 31, 2020.

Goal #6: The board will continue to assess and evaluate the jurisprudence practice exam and its effectiveness as a learning tool for interns.

Status: the jurisprudence exam is still required for initial intern licensure. In the board's emergency preparedness regulations, repealed on April 3, 2020 and made permanent on July 31, 2020, the board removed the jurisprudence exam requirement for renewal of pharmacist and pharmacy technician licensure.

Goal # 7: The board will continue its affiliation with the National Association of Boards of Pharmacy (NABP) and send one member to the District 7 NABP meeting and two members to the annual NABP meeting.

Status: Dr. Ruffridge attended the District 7 NABP meeting held virtually on October 13, 2020. Following participation at this meeting, Dr. Ruffridge shared the district's resolutions with the Board of Pharmacy, which discussed the matter of a "just culture" regulatory approach during their December 3-4, 2020. Laura Carrillo and Justin Ruffridge attended the annual NABP meeting held virtually on May 13-14, 2021.

Goal #8: The board will continue to evaluate the impact of current regulations and the need for new regulations or amendments to current regulations to advance our mission.

Goals and Objectives (continued)

Part I (continued)

FY 2021's goals and objectives, and how they were met:

Status: In drafting emergency preparedness regulations, and with the intent to make these changes permanent, the board also took this as an opportunity to assess changes to regulatory areas for improving patient care and expanding pharmacy services without jeopardizing the board's responsibility of effective oversight. These changes were made:

- Increasing service capacity by expanding the tasks for which a pharmacy technician with a national certification may perform, including performing final checks on non-controlled substances and clarify or obtain missing information on a prescription order
- Maximizing available pharmacy personnel resources by allowing a cashier or bookkeeper to work in a pharmacy without being licensed as a technician
- Expanding pharmacy intern capabilities, including transferring and performing final checks on prescription drug orders, marking the quantity and date of refills, dispensing electronically transmitted prescriptions, and dispensing substitutions if authorized by the practitioner
- Decreasing unnecessary administrative requirements, including reducing documentation review for items replaced by applicant and licensee attestations
- Improving continuation of patient care by removing the 30-day supply limitation and allowing a
 pharmacist or pharmacist intern to dispense any quantity of a prescription order for non-controlled
 substances
- Expanding shared pharmacy services to include pharmacist interns, pharmacy technicians with national certification, and allowing for counseling and monitoring of drug therapy through these services

Goal #9: The board will continue to assess and evaluate the growing public concern regarding the abuse of illicit and prescription drugs, internet pharmacies, counterfeit drugs and support continuing funding and enhancement for the PDMP.

Status: The board continues to administer the PDMP for all six affected healthcare boards and manages deliverables from three separate federal grants. The board initiated a PDMP Board Chairs committee in October 2020, which meets bi-weekly to discuss challenges and solutions to registration and use. Through its PDMP manager, the board provides quarterly statistics reports to prescribing boards on metrics concerning dangerous combinations of therapy, high MME prescribing, and registration and review compliance. The Board of Pharmacy established its own disciplinary guidelines for failure to register and failure to report, which are monitored an on-going and quarterly basis, respectively. See SWOT 2.

Goal #10: The board will monitor, assess, evaluate, and modify the Alaska PDMP based on the best interest of the public and profession.

Status: the board launched an Awareness and Feedback questionnaire from June 10, 2021 to June 30, 2021 to gauge user interaction and compliance, and to assess regulatory and technological gaps to access, visibility, and use. In an effort to standardize registration timeframes and increase timely access to the system, the board proposed a 30-day registration timeframe, which became effective May 6 of FY2021.

Goals and Objectives (continued)

Part I (continued)

FY 2021's goals and objectives, and how they were met:

Goal #11: The board will develop a strategic plan around communication, administration, regulation and legislation, licensure, and enforcement.

Status: The board reviewed and approved its 2021 strategic plan in May 2021 and will review and approve their 2022 strategic plan in September 2021.

Goal #12: The board will continue its affiliation and collaboration with the Alaska Pharmacists Association, including attendance at its annual meetings.

Status: On February 14, 2021, Dr. Ruffridge presented to the AKPhA a summary of the board's regulatory changes in 2020. PDMP Manager, Lisa Sherrell, also provided an overview presentation of the database and aggregate statistics.

Goal #13: The board will support its staff in participating at training opportunities and attendance at professional

conferences, including training to support assigned investigators.

Status: Staff participated in training opportunities and conferences virtually as permissible, including the NABP District 7 Meeting (October 13, 2020), CLEAR Investigator Training (October 19 – November 2, 2020), Pain Clinic Closure Workshop (January 12 and 14, 2021), National Drug Abuse and Heroin Summit (April 5-8, 2021), and Annual NABP Meeting (May 13-14, 2021).

Goal #14: The board will continue to simply its statutes and regulations by assessing outdated, burdensome, or unnecessary regulations.

Status: the board's right-touch regulations subcommittee met on November 18, 2020 to discuss potential redundant and/or obsolete regulations. As a result of this subcommittee meeting, the board requested guidance from the DOL around the definition of "practice of pharmacy" and limitations around the independent administration of drugs. The DOL introduced the concept of Negative Implication Canon, which is used in legal drafting and states that the explicit mention of certain topics excludes other topics not clearly mentioned. This term was brought forward to support the HB 145 and to articulate that because statute calls out independent administration of vaccines and emergency medications, it prohibits pharmacists from the independent administrative of other therapies. The board will continue to pursue right-touch regulations in FY2021, including but not limited to the following areas:

- Simplifying pharmacy licensure, including replacing the inspection report requirement with an attestation
- Simplifying pharmacist licensure, including repealing the transcripts requirement
- Simplifying pharmacist intern licensure, including repealing the jurisprudence questionnaire
- Clarifying procedures for facilities when a change of address, ownership, name, or manager has occurred

Goals and Objectives

Part II

FY 2022's goals and objectives, and proposed methods to achieve them. Describe any strengths, weaknesses, opportunities, threats and required resources:

Below is the Board of Pharmacy's 2021 strategic plan, which includes its priority goals and strategies. The board intends to continue pursuing these goals in FY2022.



ALASKA BOARD OF PHARMACY 2021 STRATEGIC PLAN

The Alaska Board of Pharmacy endeavors to promote, preserve, and protect the public health, safety, and welfare by and through the effective control and regulation of the practice of pharmacy.

GUIDING PRINCIPLES STRATEGIES GOALS COMMUNICATION 1. Engage in effective Improve customer service by providing timely updates to communication and promote applicants and licensees transparency of public Encourage appropriate disclosure of information related to information. licensing and investigative processes. 1.3 Maximize communication channels through the Board of Pharmacy website and List Service. Increase collaboration with health care licensing boards and key stakeholders to address important health issues. **@ ADMINISTRATION** 2. Adhere to and strive for Avoid delays in application processing by maintaining adequate improved organizational staffing and exploring retention strategies. efficiencies without Maintain a proactive approach to licensing by consulting compromising quality of record historical knowledge, researching national trends, and keeping. encouraging innovation in the planning process. 2.3 Automate licensure through online applications. Exercise fiscal discipline through effective budget management. 2.4 LICENSURE 3. Ensure competency and Adhere to established licensing standards by reviewing qualifications prior to licensure education, experience, and examination requirements. and renewal. 3.2 Periodically review applications and forms for alignment with existing requirements. REGULATION & 4. Grow the economy while Routinely review effectiveness of regulations that reduce barriers 4.1 **ENFORCEMENT** promoting community health to licensure without compromising patient health and safety. and safety. Combat the opioid crisis by effective administration of the state's Prescription Drug Monitoring Program (PDMP). 4.3 Reduce adverse health outcomes during emergencies through For more information, please visit the following resources: prompt regulatory responses and board guidance. Establish disciplinary guidelines and conduct random audits to Board of Pharmacy Homepage: pharmacy.alaska.gov ensure safety protocols and competencies are met. Prescription Drug Monitoring Program (PDMP): pdmp.alaska.gov 4.5 Advocate for legislation as the pharmacy profession evolves and Email: pharmacy@alaska.gov new opportunities for improved patient safety arises. Phone: 907-465-1073

Goals and Objectives (continued)

Part II (continued)

FY 2022's goals and objectives, and proposed methods to achieve them. Describe any strengths, weaknesses, opportunities, threats and required resources:

Goal #1: engage in effective communication and promote transparency of public information.

Strategy 1.1: Improve customer service by providing timely updates to applicants and licensees.

Strategy 1.2: Encourage appropriate disclosure of information related to licensing and investigative processes.

Strategy 1.3: Maximize communication channels through the Board of Pharmacy website and List Service.

Strategy 1.4: Increase collaboration with health care licensing boards and key stakeholders to address important health issues.

<u>Goal #2:</u> adhere to and strive for improved organizational efficiencies without compromising quality of record keeping.

Strategy 2.1: Avoid delays in application processing by maintaining adequate staffing and exploring retention strategies.

Strategy 2.2: Maintain a proactive approach to licensing by consulting historical knowledge, researching national trends, and encouraging innovation in the planning process.

Strategy 2.3: Automate licensure through online applications.

Strategy 2.4: Exercise fiscal discipline through effective budget management.

Goal #3: Ensure competency and qualifications prior to licensure and renewal.

Strategy 3.1: Adhere to established licensing standards by reviewing education, experience, and examination requirements.

Strategy 3.2: Periodically review applications and forms for alignment with existing requirements.

Goal #4: Grow the economy while promoting community health and safety.

Strategy 4.1: Routinely review effectiveness of regulations that reduce barriers to licensure without compromising patient health and safety.

Strategy 4.2: 4.2Combat the opioid crisis by effective administration of the state's Prescription Drug Monitoring Program (PDMP).

Strategy 4.3: Reduce adverse health outcomes during emergencies through prompt regulatory responses and board guidance.

Strategy 4.4: Establish disciplinary guidelines and conduct random audits to ensure safety protocols and competencies are met.

Strategy 4.5: 4.5Advocate for legislation as the pharmacy profession evolves and new opportunities for improved patient safety arises.

Sunset Audit Recommendations

Date of Last Legislative Audit: August 7, 2017
Board Sunset Date: June 30, 2022

Audit Recommendation	n: DCBPL's chief investigator should work with the director to improve the timeliness of investigations.
Action Taken:	A Standard Operating Procedure (SOP) was adopted to require investigative staff to enter case notes explaining any gaps between activities greater than sixty days. In addition, each member of staff is held accountable for timeliness of investigative actions.
Next Steps:	Monitor for effectiveness.
Date Completed:	January 5, 2018

Audit Recommendation:	DCBPL's director should improve procedures to ensure required licensure documentation is appropriately obtained and retained.
Action Taken:	The division will continue to provide training to staff to ensure they are aware of their roles and responsbilities in preserving an accurate and complete adminstrative record.
Next Steps:	
Date Completed:	