

Department of Commerce, Community  
and Economic Development

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Division of Corporations, Business  
and Professional Licensing

## **Alaska Board of Pharmacy**

### **Annual Report**

Fiscal Year 2024



Department of Commerce, Community and Economic Development  
Division of Corporations, Business and Professional Licensing

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*This report is required under Alaska Statute 08.01.070(10).*

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**Board Membership (as of the Date This Report was Approved)**

**Date of Final Board Approval:** 5/31/2024

Board Members:

Ashley Schaber, Pharmacist (Chairperson)

James Henderson, Pharmacist

Carla Hebert, Pharmacist

Ramsey Bell, Pharmacist

Sylvain Nouvion, Pharmacist

Cynthia Maxwell, Pharmacy Technician

Sara Rasmussen, Public Member

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**Accomplishments**

The Board of Pharmacy "the board" submits this report highlighting its endeavors to promote the welfare and safety of the public through the effective regulation of the pharmacy profession and pharmaceutical supply chain in Alaska for FY24. This year, the Board of Pharmacy: sent email notification to licensees of meetings, notified licensees via listserve of licensing process changes and updated statutes/regulations, continued work on statute and regulation changes with a barrier-reduction regulatory framework to support pharmacy services and the growth of the Alaskan economy, with many regulatory changes effective in January and May 2024. Below is a summary of the Board's legislative, regulatory, and licensing accomplishments.

Legislative Accomplishments:

- Relevant legislation in FY24 includes House Bill 112 (Profession of Pharmacy), an effort led by the Board of Pharmacy with support from and collaboration with the Alaska Pharmacists Association. HB 112 sponsored by Representative Justin Ruffridge, and signed into law by the Governor in July 2023, streamlines the licensure process while improving public safety including the statutory authority to require background checks; aligns pharmacy statutes with other Alaska boards and other states' statutes by replacing one of the two public member seats with a pharmacy technician seat, recognizing retired pharmacists, and allowing flexibility for a pharmacist to serve in the Board's executive administrator role; increases access to epinephrine auto-injectors, medication delivery devices for anaphylaxis emergencies; and ensures the Board's powers and duties support the federal Drug Supply Chain and Security Act (DSCSA) to ensure Alaskans receive safe medications.
- The board's other major legislative priority is addressing Pharmacy Benefits Manager practices impacting access to care for Alaskans. House Bill 226 (Pharmacies/Pharmacists/Pharmacy Benefits Managers), sponsored by Representative Jesse Sumner, a collaborative effort supported by the Alaska Pharmacy Association, the Board of Pharmacy, and multiple other patient care and healthcare organizations, passed the Legislature in May 2024 and is awaiting the Governor's signature. The changes in this bill will begin to address Pharmacy Benefits Managers' practices including white-bagging and brown-bagging and spread-pricing, which have been identified as having a negative impact on patient care, public health infrastructure, and pharmacy access in Alaska. The board has received feedback about these practices in the form of public comment and industry updates over the past few years and appreciated the opportunity to support and advocate for HB 226.
- Recognizing the need for efficient license pathways and processes, the Board of Pharmacy supported SB 83 (Professional Licensing; Temp Permits) and its companion bill HB 85 in the 33<sup>rd</sup> Legislative Session. The board acknowledged that these bills expand the temporary license period the Board currently has in place from 90 days to 180 days and provides an efficient pathway for pharmacists and pharmacy technicians to not only work under a temporary license but also to obtain permanent licensure in Alaska.
- The Board supported and advocated for pharmacist representation on the Mental Health/Psychadelic Medication task force proposed in HB228/SB166. This advocacy resulted in an amendment to the bill adding a pharmacist selected by the Alaska Pharmacy Association Board of Directors to the task force.

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**Accomplishments**

**Regulation Accomplishments:**

- Effective January 2024: The Board of Pharmacy implemented multiple changes in title 12, Chapter 52 of the Alaska Administrative Code to update and remove various regulations to align with changes in HB 112 and HB 56 while at the same time meeting Governor Dunleavy's expectation of "right touch" regulation throughout the state. These include several areas of licensing and operational efficiency as well as practice advancement, including: removing the pharmacy regulatory barrier for pharmacists to prescribe Medication Assisted Therapy for opioid use disorder under collaborative practice agreement with a physician, amending the requirements of pharmacy technicians to lower the age to become licensed from 18 to 16 years of age if the applicant is in a supervised high school, college, or apprenticeship training program, and the adding of the standard of care model for pharmacy.
- Effective May 19, 2024: The Board of Pharmacy through regulation change removed the requirement for pharmacist applicants to take the multi-state jurisprudence exam administered by the National Association of Boards of Pharmacy (NABP); removed the requirement for pharmacists working at tribal health programs to submit an exemption to practice in Alaska with a pharmacist license from another jurisdiction; and added language to regulation which aligns with the standard of practice model addressing unexpected closures of pharmacies and continuity of patient care.
- Pending notice and review of public comment, the Board of Pharmacy has proposed a new regulation project to allow for non-punitive addiction treatment for licensees who self-disclose opioid use or alcohol use disorder and seek assistance in this area; define pharmacy and facility ownership and changes in ownership; allow pharmacy technicians to practice at the top of their training and ability; clarify pharmacist registration requirements for the PDMP; update sterile compounding regulatory guidelines to a standard of practice model; and remove board approval for collaborative practice agreements between pharmacists and practitioners.

**Licensing Accomplishments:**

- The Board of Pharmacy advocated for and supported online initial license applications. To date, the initial license applications for technicians and pharmacists are available online. Pharmacy intern and initial facility license applications will follow. These changes have significantly improved license processing turnaround times for technicians and pharmacists.

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**Activities**

FY24 Board of Pharmacy Meetings:

- August 3 (Statute and Regulation Committee Meeting)
- August 10 (Quarterly Meeting, including Investigative, Division Licensing, Budget, and PDMP updates)
- November 16 (Quarterly Meeting, including Investigative, Division Licensing, Budget, and PDMP updates)
- December 7 (Special Meeting covering regulations and guest speakers on the Just Culture concept)
- February 15 (Quarterly Meeting, including Investigative, Division Licensing, Budget, and PDMP updates)
- April 11 (Quarterly Meeting, including Investigative, Division Licensing, Budget, and PDMP updates)

FY24 Professional Meetings Attended:

- October NABP District 6,7,8 Meeting: Collaboration with the American Association of Colleges of Pharmacy (AACP) and State Pharmacy Assn Leaders; 1 Board Member, Executive Administrator
- November Online FDA 2023 Intergovernmental Working Meeting on Drug Compounding: 1 Board Member, Executive Administrator
- February AKPhA Annual Conference: 2 Board Members, Executive Administrator
- April Rx and Illicit Drug Summit: 1 Board Member, PDMP Manager, Executive Administrator
- May NABP Annual Meeting: 1 Board Member, Executive Administrator

New/Continued Initiatives:

- Partnership with AKPhA and UAA/Idaho State University College of Pharmacy for regular updates on initiatives during Board quarterly meetings
- Exploring offering continuing education (CE) for portions of Board meetings
- Publication and distribution of a regular newsletter for all licensees through a partnership with NABP.
- Just Culture- the Board of Pharmacy is exploring how this concept can be applied as a regulatory board.
- Updates to the State Medical Board (February 2024; planned regularly)
- “Implementing Solutions: Building a Sustainable, Healthy Pharmacy Workforce and Workplace”: the Board performed an assessment and gap analysis of the actionable NABP/Boards of Pharmacy solutions recommended from the American Pharmacists Association/American Society of Healthsystem Pharmacy/NABP June 2023 Summit. The Board is utilizing this assessment to pursue statutory, regulatory, and operational changes to support a sustainable, healthy pharmacy workforce and workplace.

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**Needs**

- Legislative Priorities
  - Addressing Pharmacy Benefits Managers practices impacting safety, access, and transparency for Alaskan patients and pharmacies. The Board plans continued collaboration on state and federal efforts to address these practices during FY25.
  - Streamlining Licensure Process for Pharmacists
    - The Board implemented regulation changes repealing the law exam requirement for pharmacists applying for licensure by examination and replace it with a legally binding attestation. These regulation changes went into effect May 19, 2024.
    - Statute change is required to remove the law exam requirement for pharmacists desiring to become licensed via reciprocity from other states. The Board plans to pursue this statute change in FY25.
    - The Board will also pursue removal of AS 08.80.145(4) which has been identified as a barrier to licensure by reciprocity.
  - Allowing pharmacists to practice at the top of their clinical ability, education, training, and experience, including independent prescriptive authority.
    - The Board has identified that additional clarifications in AS 08.80.337 are needed to allow pharmacists to practice at the top of their clinical ability, education, training, and experience. The Board plans to pursue this statutes change again in FY25.
    - The healthcare system in general in Alaska has limited hospital beds, Emergency Department space, and other services in general. There needs to be a collaborative effort for all disciplines to practice at the top of scope to help address access for Alaskans.
  - Statutory Priorities Continued from FY24 into FY25 include:
    - Optimizing use and efficacy of the PDMP (AS 17.30.200)
    - Statutory changes to expand and optimize pharmacists' independent prescriptive authority (AS 08.80.337)
    - Review and update of Title 17 (Food and Drugs), specifically pharmacy-related changes needed in AS 17.20. AS 17.20.105 Part B has a line for therapeutic substitution allowing a pharmacist to substitute a product that is approximately equal in therapeutic value if the provider is not available and if the pharmacist notifies the provider.
    - AS 08.80.030(b)(18)-(Powers/Duties of the Board): establish standards for white/brown bagging: specific language “for a prescription drug that the United States Food and Drug Administration or the prescription drug's manufacturer has been not approved for self-administration, prohibit, limit, or provide conditions relating to the dispensing of the prescription drug, including establishing specifications to ensure the effectiveness and security of a prescription drug to be administered by infusion or otherwise administered in a clinical setting.”
- Regulatory Changes Needed:
  - \*Additional regulatory changes may be needed to align with the standard of care regulatory model concept implemented in January 2024.

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**Needs**

- **Additional Needs in FY25:**

\*Administrative support to reconvene the Controlled Substance Advisory Committee (CSAC). No meetings were held in FY23 or FY24. The Board of Pharmacy public member serving on the committee resigned and was replaced in FY23, and this role continues to serve as the chair of the CSAC. However, due to administrative challenges and competing demands within the Department of Law, this group has not yet been reconvened.

\*Prescription Drug Monitoring Program- collaboration facilitated by CBPL is needed among the professional boards regulated by the PDMP and others with a shared interest. Background: HB 306 (32<sup>nd</sup> Legislature) extended the Board of Pharmacy through June 30, 2028. While not the full eight (8)-year period that would have extend the board through 2030, the six (6)-year extension is necessitated by the need to reassess the administration and oversight of the Prescription Drug Monitoring Program (PDMP), the state's controlled substance prescription database and interactive technological tool to assist providers in combating the opioid epidemic. As the PDMP affects a total of five (5) professions regulated by the State Medical Board, Board of Nursing, Board of Examiners in Optometry, Board of Dental Examiners, and the Board of Pharmacy, the legislature expects to see continued collaboration among these boards and their constituents. The sunset audit also illuminated inherent statutory limitations that impose challenges on the Board of Pharmacy's ability to satisfy reporting requirements to the legislature and its ability to comply with federal grant deliverables. At the request of the legislature, DCCED - CBPL is procured a consultant in FY23 to analyze the structure of the PDMP, assess effectiveness of program administration and regulation, and to provide recommendations on how the system can better align with its legislative intent to support judicious prescribing and reduce diversion and abuse of federally-scheduled controlled substances. The consultant report completed by the McKinley Research Group (MGR) and released in February 2023 recommended CBPL convene a PDMP working group to review the findings of the analysis and prioritize changes for improved effectiveness through a multi-perspective lens. MGR noted that nature of this effort is beyond the scope or capacity of just the Board of Pharmacy itself and/or other healthcare licensure boards. Based on the Centers for Disease Control and Prevention (CDC) framework for PDMP Use/Effectiveness, it is recommended the working group be comprised of representatives from the PDMP program, state health department (i.e., Chief Medical Officer), state insurance programs (i.e., Medicaid Medical Director), healthcare licensure boards, and law enforcement. This workgroup has not yet been convened, and the Board of Pharmacy looks forward to participating in preparation for the next sunset audit.

\*Continued delegation of administrative tasks to Board of Pharmacy Executive Administrator position.

\*Board member training, engagement, and development including the concept of Just Culture.