

INNOVATIONS



Training and Resources
Support Member Boards'

Next Steps

to *Inspection Blueprint*
Uniformity and State
Collaboration

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*NABP Executive
Committee elections
are held each year at the
Association's Annual
Meeting.*

Innovations

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NABP is the independent, international, and impartial association that assists its member boards and jurisdictions for the purpose of protecting the public health.

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Ex-Sponge Bob, Square Records



Attorney Dale J. Atkinson, JD, outside counsel for NABP, is a partner in the law firm of Atkinson & Atkinson.

“pharmacists subjected to disciplinary actions will likely have an interest in attempting to ‘clean up’ an administrative record.”

A professional license represents the government’s recognition of one’s right to lawfully practice a profession. Government grant of a license is premised upon satisfaction of the eligibility criteria statutorily set forth in the practice act and enforced by the regulatory board. Once issued, the professional license is deemed a property right subject to due process protections. Before a regulatory board can render an adverse action against such license, the licensee will be provided with due process rights calling for notice of the allegations, citations to the relevant statute(s) and/or rule/regulation(s) alleged to have been violated, and an opportunity to be heard. If the allegations are substantiated, the board may assess sanctions against the license and publicize the board action.

In many professions, the status of licensure implicates more than just the right to practice, but also dictates rights to reimbursement for services, future employment decisions, and mobility and portability of licensure. Thus, pharmacists subjected to disciplinary actions will likely have an interest in attempting to “clean up” an administrative record. The concept of expungement of criminal adjudications is not new and is addressed within federal and/or state statutes. However, the concept of expunging an administrative record is not so clearly established, and many jurisdictions likely have no statutes or previous case law to provide a basis for action or inaction. It may be reasonably argued that many state boards of pharmacy have no authority to expunge an administrative record and any petition to do so should be

dismissed for lack of “subject matter” jurisdiction. That is, the board does not possess the authority to rule on any such petition.

As the interest in a license is paramount to practice rights, financial reimbursement, reputation, and employment opportunities, and final adverse actions are able to be published and readily accessible through social media and other means of mass publication, boards of pharmacy must be prepared for petitions seeking to expunge previous administrative actions. Consider the following.

The Financial Industry Regulatory Authority, Inc (Defendant or FINRA), the successor to the National Association of Securities Dealers (NASD), is the primary regulatory body for the broker-dealer industry. Under the federal Securities Exchange Act of 1934, FINRA is required to promulgate and enforce rules to protect investors and the public interest. Like boards of pharmacy, FINRA follows administrative processes in disciplining and sanctioning licensees found to have violated applicable laws. (Federal law refers to both registration and licensure in the industry. For purposes of this article, reference will be made to licensure and is meant to apply to both registrants and licensees.) Disciplined licensees have the right to judicial review of FINRA actions.

In addition to its enforcement responsibilities, FINRA is also required to establish and maintain a system for “collecting and retaining” registration information about licensed brokers. This registration information includes data regarding the registration and licensure of brokers and dealers as well as disciplinary actions and

regulatory, judicial, and arbitration proceedings. FINRA is required to release information related to a broker/dealer who was ever the subject of a final regulatory action.

A licensed broker (Broker) was subject to an adverse action through a settlement of an administrative complaint with, at that time, NASD. The settlement was included in the Central Registration Depository and available to the public through FINRA's BrokerCheck system. In March 2016, the Broker filed an action in state court in California against FINRA, seeking to expunge his administrative record. FINRA had the case removed from state court to federal court based on federal court jurisdiction. The Broker sought to have the matter remanded back to the California state court. Thus, the case addressed what court has the authority to adjudicate the matter.

While technical in nature, this case presents numerous interesting issues related to the authority of courts to determine issues. After outlining FINRA and its duties and responsibilities as a regulatory body, the court noted multiple cases wherein disciplined licensed brokers/dealers sought to expunge administrative records. The legal debate in the previous cases involved disputes over what constitutes a "court of competent jurisdiction." In other words, what court is able to adjudicate the dispute? In the current case, and consistent with previous cases, the court found in favor of the Broker and remanded the matter back to state court for decision making. The judicial analyses present several important factors relevant to boards of pharmacy and attempts to clean up past records.

First, in the current case, the United States District Court for the Central District of California noted that previous case law involved both expungements of "customer-dispute"

information and expungements of final administrative adjudications against a license. Boards of pharmacy should anticipate that pharmacists may not only seek to expunge an administrative record containing a final adverse action, but also petition to expunge "complaints" from the licensure file. While many states treat complaints as confidential, some states recognize complaints as public under applicable open records laws. Boards of pharmacy should be prepared for expungement petitions related to both final adverse actions and complaints that may or may not have resulted in investigations.

Second, the court in the current case also noted that the applicable federal law requiring FINRA to collect and retain registration information (including disciplinary actions) did not contain any right or duty to expunge such records. In the current case, the Broker sought to expunge his record citing California law. While the application of state versus federal law is relevant to determining whether a federal or state court should hear the matter, boards of pharmacy must understand whether the applicable pharmacy law(s) address(es) the authority to expunge an administrative record or file. Many boards of pharmacy may find that state law is silent as to expunging authority. If silent, a legal determination must be made as to whether the board has the authority to act on any such petition.

Third, the current case addresses the interplay between state and federal law and, consistent with previous jurisprudence, determined that the federal courts do not have exclusive jurisdiction over expungement petitions related to actions of FINRA. Thus, state courts do have an interest in enforcing the relevant state laws in conjunction with applicable federal laws in the broker/dealer arena. Similarly in the pharmacy community, pharmacists are subject

to significant federal and state laws. Boards of pharmacy are encouraged to anticipate the effect of federal agency expungement action on state board expungement action (or inaction).

Finally, boards of pharmacy should assess whether final orders and settlement agreements can or should encompass the permanency of publication and remaining in the record. It is likely that board orders and settlement agreements remain of record in perpetuity, unless otherwise addressed in law. Adding definitiveness to the order may explicitly address the issue, deter unanticipated petitions to expunge or alter publication, as well as provide a basis for a future board decision in response to such a petition.

In the current case, the court held that the federal court lacked the authority (or lacked subject matter jurisdiction) to adjudicate litigation related to expungement of FINRA records under state law. The court found that whether the expungement dealt with cleansing of complaint information or final adverse actions did not alter its analysis. The court also noted that federal law did not intend to completely preempt state law in deciding this matter.

Boards of pharmacy must anticipate expungement petitions and assess whether they have the authority to make such determinations. The breadth of the documents and decisions sought to be expunged will be relevant. The actions (or inactions) of other ancillary entities (such as Drug Enforcement Administration) will also play a role in stimulating or deterring such petitions. Boards are encouraged to seek legal advice and be prepared to address both process and content of expungement activities.

Godfrey v. Financial Industry Regulatory Authority, Inc., 2016 US Dist LEXIS 105115 (US Dist Ct CA 2016) ■

NABP Seeks Board of Pharmacy Volunteers to Serve on 2017-2018 Committees and Task Forces

NABP is seeking volunteers from its active member boards of pharmacy to serve on the 2017-2018 committees and task forces. Executive officers and current board members interested in serving on a committee or task force are encouraged to submit an application and a recent résumé or curriculum vitae. Board of pharmacy staff interested in

volunteering for NABP task forces are also encouraged to apply.

All submissions must be sent to NABP Executive Director/Secretary Carmen A. Catizone at NABP Headquarters or ExecOffice@nabp.pharmacy by **Friday, June 16, 2017**. All materials will be forwarded to NABP President-elect Jeanne D. Waggener, RPh, DPh,

who will make the appointments when she becomes NABP president following the Association's 113th Annual Meeting in Orlando, FL.

A link to the online interest form is available for download on the Task Force Reports page in the Publications and Reports section on the NABP website at www.nabp.pharmacy. ■



Task Force on Expanding International Membership Convenes

The Task Force on Expanding International Membership met on November 8-9, 2016, in Rosemont, IL, to examine the feasibility of allowing international boards to become active members of NABP. Front row pictured from left to right: Tejal Patel, PharmD, RPh, Delaware State Board of Pharmacy; Cynthia "Cindy" Warriner, RPh, Virginia Board of Pharmacy; Phyllis Stine, BS, Texas State Board of Pharmacy; Gayle D. Ziegler, RPh, North Dakota State Board of Pharmacy; Cathy Lew, RPh, Oregon State Board of Pharmacy; and Buford Abeldt, Sr, RPh, Texas State Board of Pharmacy. Back row pictured from left to right: Deeb Eid, PharmD, RPh, Pharmacy Technician Certification Board (guest); Gene Minton, RPh, North Carolina Board of Pharmacy; Richard Cieslinski, RPh, Washington State Pharmacy Quality Assurance Commission; Howard C. Anderson, Jr, RPh, North Dakota State Board of Pharmacy; Richard B. Mazzoni, RPh, NABP Executive Committee liaison; Bradley Hamilton, RPh, Maine Board of Pharmacy; and Malcolm J. Broussard, RPh, Louisiana Board of Pharmacy.



Newly Accredited DMEPOS Facility

The following facility was accredited through the durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) program:

The Medicine Shoppe #2033
Santa Ana, CA

A full listing of nearly 450 accredited DMEPOS companies representing almost 28,500 facilities is available on the NABP website at www.nabp.pharmacy.

2017-2018 NABP Executive Committee Open Positions Announced; Elections to Take Place at 113th Annual Meeting

Officers and members of the 2017-2018 NABP Executive Committee will be elected in May 2017 during the 113th Annual Meeting in Orlando, FL. Open officer positions include president-elect and treasurer. The open member positions are for Districts 3, 4, 6, and 8.

The treasurer serves a one-year term, while the individual selected as president-elect makes a three-year commitment to the Association. Following one year as president-elect, he or she serves one year as the NABP president before assuming the responsibilities of chairperson of the Executive Committee for the final year.

Officer Nominations

Individuals interested in running for an open officer position must submit written notification including a letter of intent, the expiration date for their term on the active member board, and a résumé or curriculum vitae to the NABP executive director/secretary at least 45 days prior (**by April 6, 2017**) to the Annual Meeting's First Business Session.

As of press time, NABP has received the following nominations for the open officer positions.

President-elect (one-year term)

- Susan Ksiazek, RPh, New York

Treasurer (one-year term)

- Jack W. "Jay" Campbell, IV, JD, RPh, North Carolina

Member Nominations

Each district has the opportunity to nominate up to two candidates at the respective district meetings.

As of press time, the following candidates have been nominated for the Executive Committee member positions by their districts.

District 3 (three-year term)

- Lee Ann F. Bundrick, RPh, South Carolina
- Reginald "Reggie" Dilliard, DPh, Tennessee

District 4 (three-year term)

- Philip P. Burgess, MBA, DPh, RPh, Illinois

District 6 (one-year term)

- Gay Dodson, RPh, Texas
- Douglas R. Lang, RPh, Missouri

District 8 (three-year term)

- Richard B. Mazzoni, RPh, New Mexico

In addition to the nominations made by the **districts** for the open **member** positions, individuals may seek to become a candidate by providing written notice to the NABP executive director/secretary. The written notice must include a letter of intent, the expiration date for their term on the active member board, and a résumé or curriculum vitae. Written notice must be submitted after the relevant district meeting, but received no later than 45 days prior (**by April 6, 2017**) to the Annual Meeting's First Business Session, as stated in Article IV, Section 3(c)(ii) of the NABP Constitution and Bylaws. Only those individuals who have been determined by NABP to meet all qualifications for the open member positions will be placed on the ballot.

Qualifications and Voting Procedures

Candidates for open Executive Committee officer and member positions must meet the following criteria:

- The individual must be an affiliated member (administrative officer or board member) of the Association currently serving on a board of

pharmacy of an active member state at the time of nomination and election.

- The individual must not, in addition to his or her board of pharmacy activities, currently serve as an officer, official, or board or staff member for any national or state pharmacy organization.
- The individual must not have a conflict of interest with the purpose, mission statement, and operation of NABP.

During the First Business Session of the Annual Meeting on Sunday, May 21, NABP President Hal Wand, MBA, RPh, will announce the open Executive Committee officer and member positions. The president will also announce any additional nominations of those candidates who have submitted the required materials to run for office by the specified deadlines and have been qualified by NABP. The final ballot for the Executive Committee will include those individuals nominated at the district meetings, as well as those candidates announced during the First Business Session.

During the Annual Meeting, time will be designated for candidate speeches and/or speeches given on the candidates' behalf for open Executive Committee officer and member positions. Individuals giving candidate speeches must be affiliated members of NABP, and a maximum of two speeches may be given for each candidate, including the candidate's own speech. Individuals giving speeches must limit their remarks to two minutes.

Voting will take place during the Final Business Session on Tuesday, May 23. Candidates, whether running opposed or unopposed, must receive a majority of the delegate votes present in order to be elected to office. If more than two candidates are slated for office, the

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Training and Resources Support Member Boards'

Next Steps to Inspection Blueprint Uniformity and State Collaboration



With the launch of its Inspection Blueprint Program in November 2015, NABP made another important addition to the tools and resources available to the state boards of pharmacy as they make licensure decisions regarding nonresident pharmacies, particularly those pharmacies shipping sterile compounded medications.

In the last four years, since the deadly 2012 multistate fungal meningitis outbreak traced to contaminated methylprednisolone acetate injections distributed by the New England Compounding Center, NABP's member boards have worked diligently to close informational and other gaps that could hinder effective regulation of such facilities and allow another such tragedy to occur. NABP's members identified needs – access to current inspection data, in particular, and inspection capabilities – and worked with the Association to develop resources that enable the boards of pharmacy to access inspection data and other information

relevant to making licensure decisions for nonresident pharmacies, as well as resources to improve states' capabilities to inspect compounding pharmacies.

In parts one and two of this three-part article series, NABP explored the different tools and resources that the Association and its

member boards have made available, both the path to their development (“Retracing the Road: The Development of Inspection and Data Sharing Tools to Support Pharmacy Licensure Decisions” in the October issue) and how different states are using these tools (“Inspection and Data Sharing Tools Help Boards Bridge the Pharmacy Licensure Information Gap” in the November/December issue). In this third and final article in the series, NABP explores the next steps in the information sharing initiative, and in particular the launch of the Inspection Blueprint Program, which focuses on the inspection of sterile compounding pharmacies that ship across state lines.

Inspection Blueprint Program Development

The Inspection Blueprint Program is a natural extension of the information sharing resources previously developed by member boards and NABP. Together, these resources support and strengthen a state's ability to carry out robust inspections of compounding pharmacies and make that information easily accessible to other states that

have to make licensure decisions regarding those facilities. The Blueprint Program advances the goal of using uniform inspection methods while providing information applicable to the requirements of each state. By using the Blueprint Program, state boards can continue to demonstrate that pharmacy regulation is best done by the states, that pharmacies shipping across state lines are being inspected routinely and thoroughly, and that this information meets the requirements of and is easily available to the relevant regulators in other states.

The Inspection Blueprint Program continues the work of member boards and NABP toward creating an accessible database of consistent, current inspection information to help the state boards of pharmacy make informed licensure decisions for nonresident compounding pharmacies, thereby protecting the public health. Following the 2013-2014 development of an online network for the boards to share licensure-related data – and the establishment of the Verified Pharmacy Program® (VPP®) to further provide the boards with vital information on nonresident pharmacies, particularly compounding pharmacies – NABP and its member boards began work on the Multistate Pharmacy Inspection Blueprint. Representatives from 42 boards gathered in early 2015 to create this blueprint, developed to provide the minimum set of inspection criteria that the state boards of pharmacy agreed are necessary for making licensure decisions.

Crosswalking Inspection Forms

“Crosswalking,” or comparing, the blueprint to state inspection forms is one way the states may achieve greater uniformity data by ensuring that state inspections cover all relevant portions of the blueprint. Recognizing that

crosswalking the blueprint against a state's own inspection form takes time and resources that may be in short supply, NABP, in conjunction with member boards, set out to create another tool that would make it easier for states to achieve inspection uniformity: the Universal Inspection Form. States may use the Universal Inspection Form as a template, adding items as necessary to include state-specific inspection requirements. A number of states worked with NABP to fine-tune a form initially based on the blueprint and the VPP form that included inspecting for compliance with United States Pharmacopeia (USP) Chapter <797> compounding standards. Additionally, several states conducted pilot programs in 2016, field-testing the form and making suggestions to improve its functionality. NABP made the revised Universal Inspection Form available to the boards in November 2016.

Blueprint State Requirements

Around the same time that pilot program states were finishing their

field tests of the Universal Inspection Form, attendees at NABP's 2016 Interactive Executive Officer Forum were expressing their strong interest in the soon-to-be-launched Inspection Blueprint Program and discussing the requirements of a "Blueprint state" designation. By becoming a Blueprint state, a state signals that sterile compounding pharmacies that ship product out-of-state are being routinely and consistently inspected by trained inspectors, and that the inspection reports it shares on these facilities reflect this robust, uniform approach. With the boards' positive input and support, program requirements highlighted below have now been finalized.

Barriers to Entry

The Blueprint Program is meant to assist the state boards of pharmacy in continuing to develop their own robust inspection capabilities. NABP stands ready to assist boards in addressing barriers they may face in

becoming a Blueprint state, such as identifying those pharmacies shipping sterile compounded product out-of-state and addressing state laws that do not require USP Chapter <797> for pharmacies involved in sterile compounding. The program is carefully crafted to provide vital licensure-related information to states into which these compounding pharmacies ship – and thereby protect the public health – while being limited in scope to avoid placing an undue burden on the inspecting state. Nonetheless, if a state does not have the resources to inspect these pharmacies to the blueprint, or if a state's barriers to participation remain intractable, NABP remains available to help conduct inspections and facilitate the sharing of information.

NABP began accepting Blueprint Program participation forms at the end of 2016 and will list on its website those states that achieve blueprint status. ■

Five Main Requirements for Blueprint States

In order to be deemed a Blueprint state and to remain an active participant in the program, states must agree to five main requirements for conducting inspections of sterile compounding pharmacies that ship product over state lines.

1. Universal form. Blueprint states must use consistent inspection criteria. To do so, many states will use the new Universal Inspection Form. Once a consensus is reached about the form's format and flow, NABP looks forward to being able to invest in hardware and software technologies that will further simplify the boards' use of the form and their subsequent ability to conduct sterile compounding inspections.

If a state cannot use the Universal Inspection Form, it may instead utilize its own form that has been crosswalked to the blueprint (and therefore to USP Chapter <797>). States planning to utilize their own sterile compounding inspection form will submit the form for NABP staff to conduct the crosswalk process, and NABP staff will work individually with state boards to address reconciliation issues.

2. Initial training. Compliance officers or inspectors carrying out inspections of a Blueprint state's sterile compounding pharmacies that ship across state lines must receive initial training, and many state inspectors have already received this training. NABP is working to help provide continuing training opportunities to the states for new personnel, as well

as retraining. Blueprint state inspectors may obtain their initial training through the Sterile Compounding Inspector Training conducted by CriticalPoint, LLC, for example, or through in-state training such as that NABP has conducted for Massachusetts, Vermont, and Idaho. A new grant program, expected to be rolled out in 2017, will allow NABP to offer free, in-state sterile compounding training for up to 15 states; details on the grant program are available on page 10 of this newsletter. Because consistency is crucial to the program, NABP will work with any states wishing to submit an alternative training approach for initial training on a case-by-case basis.

3. Ongoing training. Inspectors for Blueprint states must also participate in annual training, which NABP will provide via webinar at no cost to the states. It is anticipated that the same course will be offered more than once per year to accommodate different schedules.

4. Inspection frequency. Blueprint states must attest that they will inspect their sterile compounding pharmacies that ship products out-of-state no less than once every 18 months, an interval based on the state boards' assessment of a reasonable inspection timeline.

5. Inspection report sharing. Blueprint states must share their inspection reports through NABP e-Profile Connect, unless this sharing is prohibited by law or board policy.

NABP Partners With Pew Charitable Trusts to Improve State Oversight of Sterile Compounding

Pew Charitable Trusts, an independent nonprofit organization that aims to achieve effective policies and practices, is partnering with NABP to assist state boards of pharmacy with resources necessary for strong oversight of sterile compounding. States have identified sufficient training of state pharmacy inspectors or compliance officers in conducting inspections to determine compliance with standards for sterile compounding as one need in being able to provide adequate oversight. Over the course of two years, through a grant administered by NABP, Pew will provide funding for a number of state board of pharmacy inspectors to participate in training with NABP surveyors that will include educational webinars and on-site observation of sterile compounding inspections with follow-up analysis. Seven states will be selected to receive this training in 2017 and eight states in 2018. The training will include practice in sterile gowning and garbing for an inspection of a clean room, inspecting for all elements in the universal inspection sterile compounding module, and completing the inspection report. More information about the Universal Inspection Form is

available on page 8 of this newsletter. Prior to the on-site training with NABP surveyors, state inspectors will be required to complete a webinar that provides prerequisite instruction in the requirements of United States Pharmacopeia (USP) General Chapter <797> “Pharmaceutical Compounding—Sterile Preparations.”

CriticalPoint Sterile Compounding Training

Further, Pew is providing funding for tuition and travel expenses for a number of inspectors to receive special training and certification in inspecting sterile compounding facilities. NABP has partnered with CriticalPoint to provide inspectors hands-on experience with inspecting to USP Chapters <797> and <800> in a state-of-the-art classroom located in Totowa, NJ. This training will be held July 18-21, 2017, and October 24-27, 2017.

During the training, inspectors will learn about all aspects of sterile compounding, such as hand hygiene and garbing, environmental sampling, aseptic technique, first air, and bubble point and sterility testing, and earn

CriticalPoint Sterile Compounding Inspector Training Dates

- July 18-21, 2017
- October 24-27, 2017

To register, visit <https://www.criticalpoint.info/sterile-compounding-inspector-training>

continuing pharmacy education credit for the training. Participants who complete the Sterile Compounding eLearning Series (within a year prior to the live training), attend the on-site training, and successfully pass the post-test may earn the NABP/CriticalPoint Certification in Sterile Compounding for Inspectors. NABP will provide additional details about participating in this certification in a future issue of *Innovations*.

To learn more about the partnership between Pew and NABP, contact the Member Relations and Government Affairs department at GovernmentAffairs@nabp.pharmacy. Additional information about the CriticalPoint training may be obtained by contacting the NABP Professional Affairs department at Prof-Affairs@nabp.pharmacy. ■

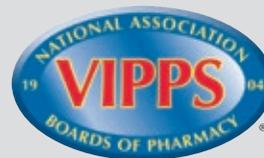
Open Positions

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candidate(s) receiving the fewest votes will be eliminated from subsequent ballots. The results of the election will be announced immediately, and an installation ceremony will be conducted for the new officers and members of the 2017-2018 Executive Committee. Terms commence immediately following the Annual Meeting.

More information about the procedures for nominating and electing Executive Committee officers and members is available in Article IV, Sections 3(b) and 3(c) of the NABP Constitution and Bylaws. Updates to the list of nominations will be posted in the Meetings section of the NABP website at www.nabp.pharmacy.

More information on the 113th Annual Meeting is available on pages 20-24. ■



Newly Accredited VIPPS Facility

The following internet pharmacy was accredited through the NABP Verified Internet Pharmacy Practice Sites® (VIPPS®) program:

Dunn Meadow, LLC, dba Dunn Meadow Pharmacy
www.dunnmeadow.com

A full listing of the accredited VIPPS pharmacy sites representing more than 12,000 pharmacies is available on the NABP website at www.nabp.pharmacy.

NABP Interactive Forum Provides Opportunity for Open Discussion and Collaboration Among Executive Officers

Forty-one board of pharmacy executive officers gathered on October 4-5, 2016, in Rosemont, IL, for the NABP Interactive Executive Officer Forum, the annual networking event that offers attendees an opportunity to collaborate and discuss common challenges faced by the state boards. Themed “Stand Up and Be Counted to Advance Our Shared Mission,” the forum reinforced the partnership between the boards of pharmacy and NABP and the shared mission to protect the public health.

The meeting format featured two days of sessions with topics chosen for their high relevance to the board of pharmacy executive officers. To further ensure that the forum focused on issues of special interest, a survey was sent to invitees prior to the meeting asking them what current topics they would like to discuss. These topics were incorporated into the shared discussion portions of the meeting. Panelists for each topic included board of pharmacy executive officers and NABP staff. Each panelist provided a brief overview of the topic, followed by time for discussion among all attendees. Throughout the forum, attendees posed challenging questions and offered a variety of relevant experiences, perspectives, and information.

Also taking place the first day of the forum was the New Executive Officer Orientation Program, which was held the morning of October 4 before the forum’s events began. Three new executive officers attended this orientation program, which allowed attendees to get acquainted with NABP programs and services.

Forum Overview: Day One

Day one of the Interactive Forum kicked off with NABP Chairperson Edward G. McGinley, MBA, RPh, DPh, welcoming all executive officers to the event. McGinley emphasized

the importance that interaction and discussion have in the success of the meeting. He encouraged all board of pharmacy executive officers to ask questions, share comments, and have open and honest discussions with their colleagues to better understand and create solutions to the challenges faced by the boards.

The first collaboration topic of the forum, “Conventional Disciplinary Issues,” focused on citations and sister state disciplinary actions. During this

session, panelists led a discussion on issuing citations and fines as a possible alternative to disciplinary actions and how to respond to sister state disciplinary actions.

The second collaboration topic, “Competency Assessment – Testing the System,” focused on the use of North American Pharmacist Licensure Examination® score report data and the development of an examination to test candidates’ competency in

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Panelists presenting during the “Conventional Disciplinary Issues” session included (from left to right) Anthony Rubinaccio, executive director, New Jersey State Board of Pharmacy; Virginia “Giny” Herold, MS, executive officer, California State Board of Pharmacy; David W. Dryden, JD, RPh, former executive secretary, Delaware State Board of Pharmacy; Gay Dodson, RPh, executive director/secretary, Texas State Board of Pharmacy, and member, NABP Executive Committee; and session moderator Caroline D. Juran, RPh, DPh, member, NABP Executive Committee.



Panelists presenting on “Competency Assessment – Testing the System” included (from left to right) Sam Lanctin, BScPharm, MBA, registrar, New Brunswick College of Pharmacists; Shauna White, PharmD, RPh, executive director, District of Columbia Board of Pharmacy; Maria Incrocci, PhD, RPh, competency assessment senior manager, NABP; Bob Nakagawa, RPh, registrar, College of Pharmacists of British Columbia; and session moderator Gary W. Dewhirst, RPh, DPh, member, NABP Executive Committee.

Officer Forum

continued from page 11

communication skills. One of the panelists, an NABP staff member, showed examples of the types of score reports that boards of pharmacy may access and shared insight on how to utilize the information in relation to the state-level outcomes as well as school

and college of pharmacy performance measures. The presentation was followed by two panelists from Canada who discussed their experience with the Canadian Objective Structured Clinical Examination and its effectiveness. A fourth panelist spoke

about the potential development of a communications skills exam.

Following the competency assessment session, the first of two shared discussion topics sessions was held. Topics addressed included the Verified Pharmacy Program®, the Multistate



Panelists presenting on “Counting the Ballots on Prescription Drug Abuse – Are We Winning?” included (from left to right) session moderator Jack W. “Jay” Campbell IV, JD, RPh, member, NABP Executive Committee; Marcie Bough, PharmD, RPh, executive director, Montana Board of Pharmacy; Mark Hardy, PharmD, RPh, executive director, North Dakota State Board of Pharmacy; Cindy Fain, DPh, chief pharmacist compliance officer, Oklahoma State Board of Pharmacy; David Sencabaugh, RPh, executive director, Massachusetts Board of Registration in Pharmacy; Kari Shanard-Koenders, RPh, executive director, South Dakota State Board of Pharmacy; and Steven Schierholt, Esq, executive director, State of Ohio Board of Pharmacy.



Panelists presenting on “Crossing Party Lines – Trending Practices” included (from left to right) Ray Joubert, registrar, Saskatchewan College of Pharmacy Professionals; session moderator Mark D. Johnston, RPh, DPh, member, NABP Executive Committee; Reggie Dillard, DPh, executive director, Tennessee Board of Pharmacy; Ben Kesner, RPh, executive director, New Mexico Board of Pharmacy; Kimberly Grinston, JD, executive director, Missouri Board of Pharmacy; and Malcolm J. Broussard, RPh, executive director, Louisiana Board of Pharmacy.



Panelists on the final session, “Red, White, and Blue – DQSA and You,” included (from left to right) Andrew Funk, PharmD, RPh, executive director, Iowa Board of Pharmacy; Allison Dudley, JD, former executive director, Florida Board of Pharmacy; session moderator Timothy D. Fensky, RPh, DPh, FACA, member, NABP Executive Committee; David W. Dryden, JD, RPh, former executive secretary, Delaware State Board of Pharmacy; Mary Walker, RPh, executive director, Wyoming State Board of Pharmacy; and Gregg Jones, RPh, compliance senior manager, NABP.

“During the session, panelists discussed current trends in opioid abuse, updates on the state prescription monitoring programs, and increasing patient access to naloxone.”

Pharmacy Inspection Blueprint, and pharmacy regulatory considerations regarding marijuana for therapeutic purposes.

The first day of the forum ended with a group dinner, which provided attendees with an opportunity for additional networking. In addition, NABP President Hal Wand, MBA, RPh, greeted and thanked attendees for their participation in the day’s discussions.

Forum Overview: Day Two

Day two of the Interactive Forum began with the session “Crossing Party Lines – Trending Practices.” During this session, three panelists provided state updates on the expanding roles of pharmacists and pharmacy technicians. The updates were followed by a discussion on whether pharmacists should fill prescriptions written by nonresident prescribers who do not align with state requirements.

After a break, the forum continued with “Counting the Ballots on Prescription Drug Abuse – Are We Winning?” During the session, panelists discussed current trends in opioid abuse, updates on the state prescription monitoring programs, and increasing patient access to naloxone.

The final session of the Interactive Forum, “Red, White, and Blue – DQSA

and You,” examined various aspects of the Drug Quality and Security Act (DQSA), including the provisions related to compounding and distribution. The session began with a look at outsourcing facilities under 503B of the DQSA, Title I – Compounding Quality Act. The next topic focused on board experiences with regulating compounding pharmacies under the DQSA. The session concluded with a look at the drug distribution system under the Drug Supply Chain Security Act.

Concluding the forum, the second shared discussion topics session was held. Topics addressed included finding the balance between keeping regulations flexible to allow for emerging technology and practices while still protecting patient safety, mandatory e-prescribing, and patient safety.

Member Forum

Continuing the theme “Stand Up and Be Counted to Advance Our Shared Mission,” the NABP Interactive Member Forum was held on November 30-December 1, 2016. The interactive, two-day event provided an opportunity for dialogue, presentations, and networking among board of pharmacy members. More information about this forum will be provided in a future issue of *Innovations*. ■



New Executive Officers Attend Orientation

The New Executive Officer Orientation Program was held the morning of Tuesday, October 4, 2016, prior to the Interactive Executive Officer Forum. The orientation provided three newly appointed executive officers the opportunity to get acquainted with NABP membership and governance. From left to right are Ben Kesner, RPh, executive director, New Mexico Board of Pharmacy; Deena Speights-Napata, MA, executive director, Maryland Board of Pharmacy; Dane Ishihara, bureau manager, Utah Board of Pharmacy; and Jeanne D. Waggener, RPh, DPh, NABP president-elect, who facilitated the orientation. See pages 11-13 for more information about the Interactive Executive Officer Forum.



Remote Proctoring Available for PARE

Boards of pharmacy now have the option to administer the Pharmacist Assessment for Remediation Evaluation® (PARE®) remotely. NABP has contracted with a remote proctoring organization, facilitating a secure, proctored test session for the PARE. Member boards of pharmacy are encouraged to take advantage of this web-based assessment that was created to assist the boards as part of their decision-making process when considering cases of remediation or brief departures from practice.

The next available PARE testing window is scheduled during the two-week time period of February 13-24, 2017. To pre-register an individual for any of the PARE testing windows, boards of pharmacy may use the

NABP Clearinghouse via NABP e-Profile Connect, or they may contact the NABP Competency Assessment department via email at CompAssess@nabp.pharmacy.

More information about PARE may be found in the Programs section of the NABP website at www.nabp.pharmacy. ■



2017 PARE Testing Windows

- February 13, 2017 – February 24, 2017
- June 5, 2017 – June 16, 2017
- September 12, 2017 – September 22, 2017
- December 5, 2017 – December 16, 2017

Historic Trends Provide Context to Preliminary 2016 NAPLEX and MPJE Performance Data

On a national level, pass rates for the North American Pharmacist Licensure Examination® (NAPLEX®) and Multistate Pharmacy Jurisprudence Examination® (MPJE®) decreased in 2016, resulting in discussion among stakeholders. The following article presents data on pass rates from previous years to illustrate historic trends and to provide insight into the changing pass rates.

Throughout the years, the dedicated committee members who volunteer their expertise to develop and review examination content, the boards of pharmacy, and NABP have remained committed to ensuring that the NAPLEX and MPJE accurately measure the competence of candidates seeking licensure. Volunteer item writers representing varied areas of pharmacy practice undergo detailed training as they develop items for the exams, and seasoned volunteers serve on NABP review and advisory committees to further evaluate items and advise on policy matters. NABP psychometricians ensure that industry-standard best practices are adhered to in relation to exam development, scoring, and score reporting to further support the defensibility of the examinations.

Every four to five years, NABP conducts surveys of pharmacy practice for its examinations. These surveys are designed to collect and validate

information regarding the appropriate content on which to test. Pharmacists in all areas of practice from across the United States are invited to participate. The analysis of the survey results supports the relevancy of the examinations' competency statements. Following the review of the competency statements, a standard setting study is conducted to evaluate passing standards and to determine if any adjustments should be recommended. This study helps ensure that the performance standard is valid and appropriate for the expectations of knowledge, skills, and abilities in contemporary pharmacy practice.

Under the assumption that the abilities of a population of examinees with similar characteristics (such as new graduates from US pharmacy programs) do not vary dramatically from year to year, one would expect to see minor changes in pass rates over time. When a passing standard is changed as a result of a standard setting study, however, it can be expected that there will be a decrease in the average pass rate. NABP observed this trend in 2010 when there was an adjustment to the NAPLEX passing standard. At that time, the pass rate for first attempts for graduates of US programs decreased from 96.4% in 2009 to 94.3% in 2010, and then



increased in 2011 and 2012 to 97.1% and 97.4%, respectively. In November 2015, a new NAPLEX passing standard was implemented in concert with the new competency statements and test specifications. Table 1 shows NAPLEX pass rates of first-time test takers from 2009 to 2016.

Although short-term declines in pass rates are typical when there is a change in the passing standard, it should be noted that the decline in NAPLEX pass rates began in 2013 despite no adjustment to the passing standard. This trend may be observed because of a changing discipline. Over the last several years, the pharmacy curriculum has expanded, centering on training for clinician-based services as national and state organizations advocate for practitioner status; therefore, the knowledge expectations for entry-level pharmacists have expanded.

While the MPJE pass rates among US graduates have remained relatively stable over recent years, slight

continued on page 16



Table 1: NAPLEX pass rates for first attempts of graduates from US pharmacy programs who tested in the reporting year.

Next FPGEE to Be Held April 25, 2017



The Foreign Pharmacy Graduate Equivalency

Examination® (FPGEE®) is one component required as part of the Foreign Pharmacy Graduate Examination Committee (FPGEC) Certification Program. NABP developed the FPGEC as a means of documenting the educational equivalency of a candidate's foreign pharmacy education and foreign license and/or registration, which assists state boards of pharmacy in qualifying candidates for licensure in the United States.

- Registration with NABP is open December 28, 2016, through April 10, 2017.
- Candidates must register on the NABP website before they can choose a testing location.
- Qualified candidates will receive an Authorization to Test via email within one week after registering.
- The deadline to schedule a test location with Pearson VUE is April 18, 2017.
- Score reports for the FPGEE are typically available eight weeks after test administration. They are available on the NABP website at www.nabp.pharmacy. ■

Pass Rates

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fluctuations can still be seen from year to year prior to 2016, when, in mid-April 2016, the new competency statements, new test specifications, and new passing standard were implemented.

With regard to the MPJE, the scope of responsibilities for pharmacists involving the application of law into practice on a day-to-day basis has increased in recent years. This is evidenced by the pharmacists' accountability for

prescription monitoring programs, sterile and nonsterile compounding requirements, and guidelines for handling hazardous materials.

It should be noted that while the national average pass rate for the examinations has shown a decrease of 6% from 2015 to 2016, many US pharmacy programs did not experience a decrease in pass rates for their 2016 graduates. In addition, many of those individuals who did

not pass the NAPLEX or the MPJE on the first attempt scored well beyond passing score on the second attempt. Reviewing correspondence from some of these candidates, NABP has found that their approach to the examination the second time was much more serious and focused, which led to their success.

Complete data on the pass rates for the NAPLEX and MPJE will be available by the end of January 2017. ■

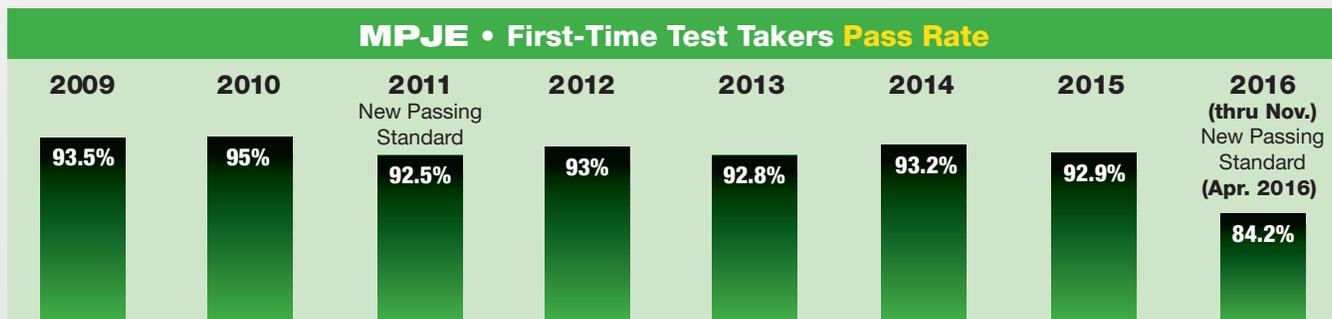


Table 2: MPJE pass rates for first attempts of graduates from US pharmacy programs, including license transfer applicants who tested in the reporting year.

Boards of Pharmacy Report 1,444 Disciplinary Actions to NABP Clearinghouse in Third Quarter 2016

During the third quarter of 2016, the state boards of pharmacy reported a total of 1,444 disciplinary actions to the NABP Clearinghouse, including actions taken against pharmacists, pharmacies, pharmacy technicians, pharmacy interns, wholesalers, and other licensees. Of the 1,444 actions taken:

- **684 actions (47.4%) were on pharmacists;**
- **502 actions (34.7%) were on pharmacies;**
- **245 actions (17%) were on pharmacy technicians;**
- **22 actions (1.5%) were on pharmacy interns;**
- **14 actions (1%) were on wholesalers;**
- **7 actions (0.5%) were on mail-order pharmacies;**
- **6 actions (0.4%) were on controlled substance licensees; and**
- **5 actions (0.3%) were on manufacturers.**

For a full breakdown of the actions taken and the bases for actions taken during the third quarter of 2016, see Figure A below and Figure B on page 18.

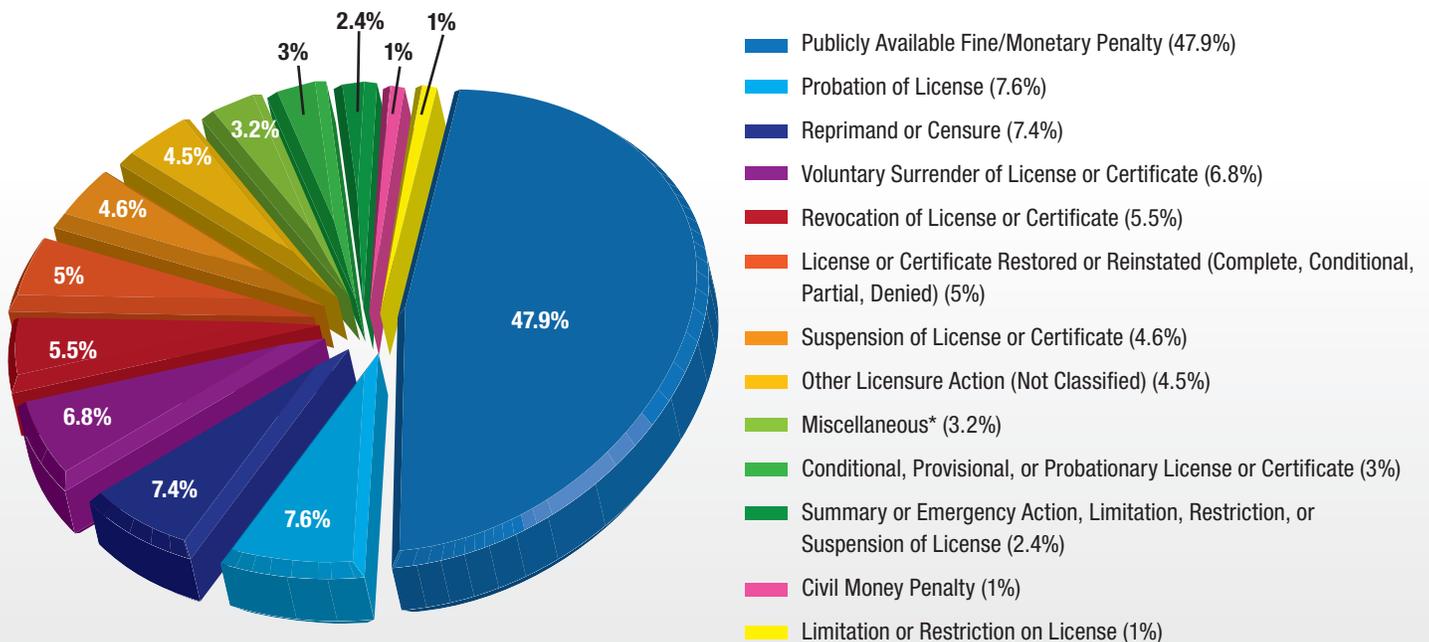
Ensuring Compliance for the Boards

As stated in the NABP Constitution and Bylaws, participation in the NABP Clearinghouse is required as part of a board of pharmacy's membership to the Association. Timely reporting to the NABP Clearinghouse is essential to maintaining the integrity of the licensure transfer program.

In addition, NABP encourages all boards to designate NABP as their reporting agent to the National Practitioner Data Bank (NPDB). By doing so, boards are able to free up valuable resources and staff time to focus on other board matters. To date, 33 boards of pharmacy have designated NABP as a reporting agent, allowing the Association to transmit all required records to NPDB and provide feedback on NPDB rejected or accepted data. In addition, monthly Clearinghouse reports are available for the boards in NABP e-Profile Connect.

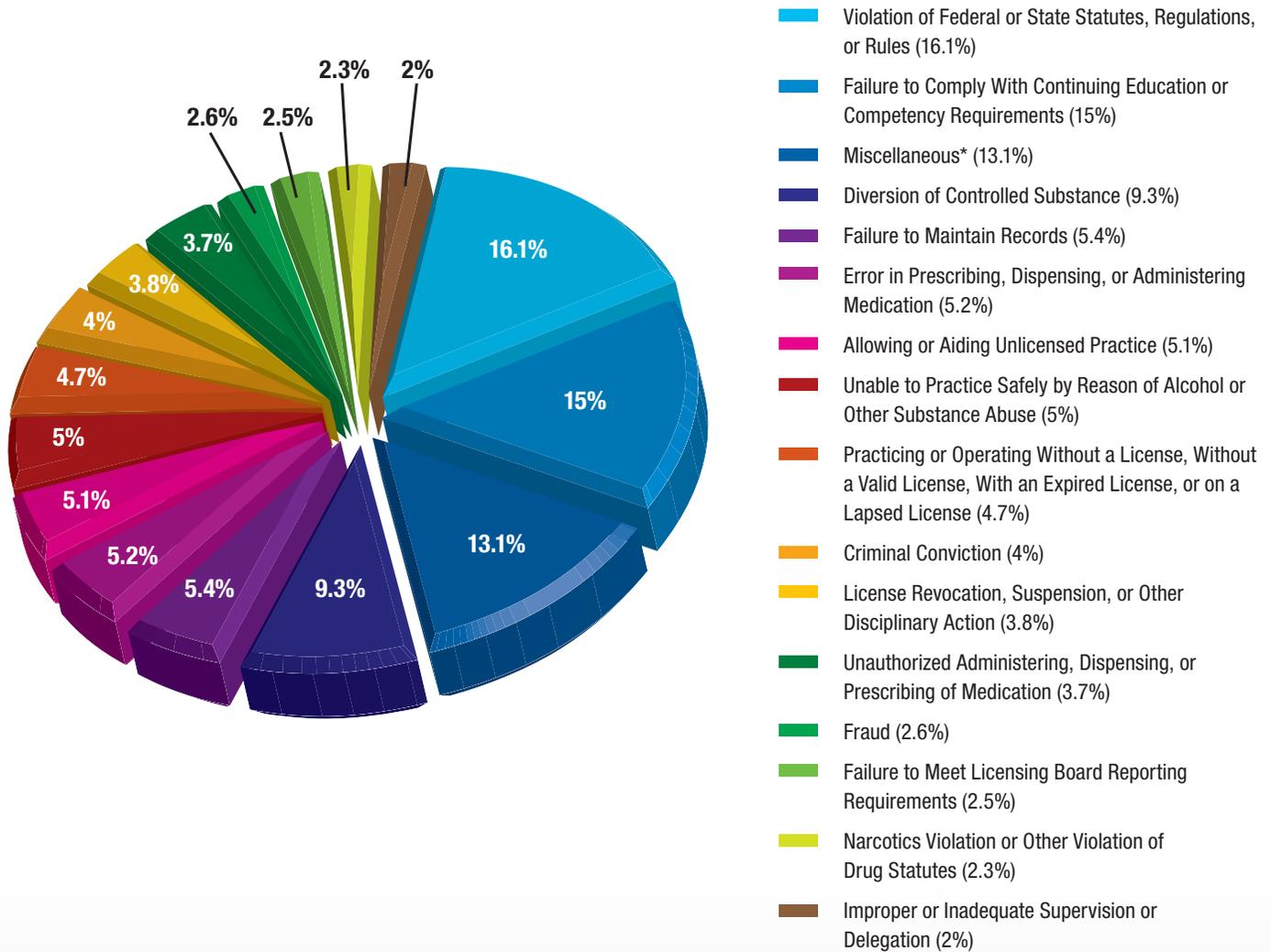
Additional information about the NABP Clearinghouse, including how to designate NABP as a reporting agent for NPDB, is available under the Member Services section on the NABP website at www.nabp.pharmacy. ■

Figure A: Disciplinary Actions Reported During Third Quarter 2016



*The miscellaneous category includes cease and desist; denial of initial license or certificate; denial of license renewal; directed in-service training; directed plan of correction; extension of previous licensure action; interim action – agreement to refrain from practice during investigation; modification of previous licensure action; other licensure action (not classified); publicly available negative action or finding; reduction of previous licensure action; and voluntary limitation or restriction on license.

Figure B: Bases for Disciplinary Actions Reported During Third Quarter 2016



*The miscellaneous category includes breach of confidentiality; conduct evidencing ethical unfitnes; conduct evidencing moral unfitnes; drug screening violation; expired drugs in inventory; failure to comply with patient consultation requirements; failure to cooperate with board investigation; failure to maintain equipment/missing or inadequate equipment; failure to maintain supplies/missing or inadequate supplies; failure to meet the initial requirements of a license; failure to pay child support/delinquent child support; failure to provide medically reasonable and/or necessary items or services; immediate threat to health or safety; improper or abusive billing practices; inadequate or improper infection control practices; inadequate security for controlled substances; inappropriate refusal to treat; incompetence; lack of appropriately qualified professionals; misappropriation of patient property or other property; misbranding drug labels/lack of required labeling on drugs; misrepresentation of credentials; negligence; nolo contendere plea; operating beyond scope of license; other disciplinary action – not classified; other unprofessional conduct; practicing beyond the scope of practice; sexual misconduct; substandard or inadequate skill level; unable to practice safely; unable to practice safely by reason of physical illness or impairment; and violation of or failure to comply with licensing board order.

FPGEE/PCOA Items Reviewed During October Item Development Workshop



In October, subject matter experts and pharmacy educators participated in an FPGEE/PCOA Item Development Workshop, reviewing and editing items for the Foreign Pharmacy Graduate Equivalency Examination® (FPGEE®) and the Pharmacy Curriculum Outcomes Assessment® (PCOA®). Pictured are (clockwise from lower left) Sidhartha D. Ray, PhD, Manchester University College of Pharmacy; David Koh, PhD, RPh, Ohio Northern University; Jennifer Mathews, MA, MS, PhD, St John Fisher College Wegmans School of Pharmacy; Carroll-Ann W. Goldsmith, DSc, Massachusetts College of Pharmacy and Health Sciences, Worcester; Bruce Waldrop, PhD, Samford University McWhorter School of Pharmacy; and Sreejayan Nair, PhD, University of Wyoming School of Pharmacy.

Stay Current on Pharmacy News and Trends With NABP's Free e-Newsletters

Looking for breaking news and time-sensitive information relating to pharmacy, legislation, regulations, competency, and prescription drug abuse trends? Sign up to receive *NABP e-News* and *AWAR_xE Prescription Drug Safety News*.

- ***NABP e-News*** is a free, weekly electronic newsletter that delivers timely news relating to pharmacy legislation, regulations, and competency, as well as updates on Association programs and activities, directly to your email each Wednesday.
- ***AWAR_xE Prescription Drug Safety News***, a free, biweekly electronic newsletter, provides the latest

news about prescription drug abuse trends, online pharmacy safety, medication safety, and more.

To subscribe to the newsletters, visit the Publications and Reports section on the NABP website at www.nabp.pharmacy. Click on NABP News in the Publications section to access an online sign-up form for each newsletter.

Questions? Contact help@nabp.pharmacy.



Explore ‘The City Beautiful’ While Attending the NABP 113th Annual Meeting



Photo courtesy of visitorlando.com

NABP invites its members and other pharmacy stakeholders to “The City Beautiful” for the Association’s 113th Annual Meeting in Orlando, FL. Attendees will have the opportunity to explore unique sights and experience the cultural attractions of Orlando after participating in important business and continuing pharmacy education sessions. Themed “Explore, Discover, Act – Imagineering the Future of Pharmacy Regulation,” the Annual Meeting will be held May 20-23, 2017, at the Hyatt Regency Orlando on International Drive.

The history of Orlando dates back to 1838 when the United States Army built Fort Gatlin to protect settlers. Influential in the city’s early development, Aaron David Jernigan and his family established the first permanent settlement in 1840. The city, then named Jernigan, established the first post office on May 30, 1850. As the settlement expanded northward,

from Judge James Gamble Speer, who named the city after a friend who worked for him, while other sources indicate Speer named it after the character in William Shakespeare’s *As You Like It*. Another account indicates that the city was named after Orlando Reeves, an American soldier who was on sentinel duty when he was killed in a skirmish during the Second Seminole War. Reeves was buried on the south side of Lake Eola, which is present-day downtown Orlando. While the debate continues regarding the origin of the city’s name, Orlando was incorporated as a town in 1875.

Prior to the American Civil War, central Florida was known for its cotton plantations and cattle ranches. After the war, citrus became a leading industry and continues to be an integral part of Florida’s state identity. The South Florida Railroad arrived in Orlando in 1880, and the railroad system expanded to Tampa in 1883. Rail lines provided orange growers better access to northern markets and continuous passenger service across the “Sunshine State.” After 1950, the development of the Cape Canaveral aerospace complex spurred economic growth. With global shipping opportunities via air, land, sea, and

the community renamed the area Orlando.

Though there is much speculation about the origin of the city’s name, the US Post Office adopted the name change in 1857. One account indicates that the name Orlando originated

space, Orlando is one of the world’s few quadramodal transportation centers.

Orlando’s population and economic prosperity continued to grow when Walt Disney World opened in 1971. Today, tourism, conventions, and trade shows are the basis of the city’s economy. The vibrant city also boasts numerous gardens, parks, and museums. Annual Meeting attendees will have the opportunity to take in the sights of their choice during a free afternoon on Monday, May 22, 2017. In addition to the sights mentioned here, attendees may contact the hotel concierge for suggestions of attractions to visit and things to do while in Orlando.

Local Sights and Attractions

Annual Meeting attendees can explore the Sunshine State through its gardens. For instance, Harry P. Leu Gardens has the largest collection of camellias in North America and features more than 1,000 rose bushes, a citrus grove, a butterfly garden, and a collection of palm trees. Attendees can take a guided tour or wander through the 50-acre botanical garden. Minutes from downtown Orlando, the renowned Leu Gardens is accessible via the public transit center near the hotel.

A spectacular view of Orlando’s skyline can be seen from Lake Eola Park, which is located in downtown Orlando and is also accessible via public transit near the hotel. Attendees can walk or run on the almost one-mile-long sidewalk that circles the lake. Visitors to the park can also rent a swan-shaped paddle boat and feed the live swans and other birds inhabiting the park.

Breathtaking views of central Florida can also be seen by taking a ride on the Orlando Eye, a 400-foot Ferris wheel located in the heart of International Drive (also known as I-Drive by locals). The Orlando Eye

offers views of Orlando's skyline, theme parks, and lakes. A variety of bars, restaurants, and shopping are located just steps from the Orlando Eye.

Other points of interest in Orlando include Loch Haven Park, which is home to the Orlando Museum of Art (OMA). Voted "Best Museum" in Orlando by *Orlando Magazine*, OMA is a leading cultural institution in the region and offers a range of unique exhibits. While in Loch Haven Park, Annual Meeting attendees can visit other local attractions in the area, including the Orlando Science Center, Mennello Museum of American Art, Orlando Shakespeare Theater, and Orlando Ballet, just to name a few.

In addition, attendees can learn about the rich history of the city by visiting the Orange County Regional History Center located in downtown Orlando. A Smithsonian affiliate, the History Center showcases 12,000 years of central Florida's history with

interactive exhibits, artifacts, archives, and special shows.

Getting Around

The Hyatt Regency Orlando is located on International Drive and is approximately 12 miles from the Orlando International Airport. Individuals arriving from the airport may take a shuttle van for a cost of \$21 per person one way or \$33 round-trip. Shuttle reservations can be made in advance by calling 407/423-5566 or by visiting <https://shuttles.mearstransportation.com>. Arrangements can also be made at the ticket booths located on the ground transportation level on the A-Side and B-Side of the terminal. Taxis can also be arranged from the A-Side and B-Side of the terminal on the ground level and are estimated to cost \$38-\$45 one way from the airport to the hotel.

Limousine services range from \$50-\$90. Guests choosing to rent a vehicle can select one of 10 rental

agencies located on site at the airport. The Hyatt Regency Orlando on International Drive offers valet and self-park options. Valet parking at the hotel starts at \$31 per night and public self-parking in the garage starts at \$20 per night.

Once in Orlando, transportation to local attractions is available by I-Ride Trolley from the hotel or by SunRail via the 08 or 38 Lynx Central Stations located at International Drive and Convention Way. The I-Ride Trolley offers an all-day adult pass for \$5 per person. Visit www.iridetrolley.com for purchasing passes. SunRail passes start at \$3.75 for a round-trip. Tickets are available for purchase on all SunRail station platforms.

Additional information about the 113th Annual Meeting will soon be available on the Annual Meeting website, which may be accessed via the Meetings section of the NABP website at www.nabp.pharmacy. ■

Orlando Links

City of Orlando

www.cityoforlando.net

Harry P. Leu Gardens

www.leugardens.org

Lake Eola Park

www.cityoforlando.net/parks/lake-eola-park

Orlando Eye

www.officialorlandoeye.com

Orlando Museum of Art

www.omart.org

Loch Haven Park

www.cityoforlando.net/parks/loch-haven-park

Orange County Regional History Center

www.thehistorycenter.org



The Harry P. Leu Gardens in Orlando, FL, showcases a wide variety of temperate and tropical plants. Photo courtesy of visitorlando.com.

Travel Grant Available to Active Member Boards

The NABP Foundation® is once again offering active member state boards of pharmacy travel grant opportunities to attend the NABP 113th Annual Meeting. The NABP Annual Meeting Travel Grant program lessens the costs for qualified individuals by providing funds for travel expenses, including travel, hotel rooms, meals, taxis, parking, and tips. One grant will be awarded to a current board member or administrative officer of each active NABP member board of pharmacy, as designated by the board's administrative officer.

The grant was established to assist boards in sending voting delegates to the Annual Meeting so they may participate in important business, including discussing and voting upon resolutions and amendments to the NABP Constitution and Bylaws, electing NABP Executive Committee officers and members, and attending educational sessions regarding current issues facing pharmacy regulators.

How to Apply for the Travel Grant

- Grant applications may be obtained from NABP upon the direct requests of executive officers of the state boards of pharmacy.
- In order to receive reimbursement, active member boards of pharmacy must have a voting delegate in attendance at the Annual Meeting to vote during all applicable business sessions.
- Applications can be submitted by email to ExecOffice@nabp.pharmacy or via mail to NABP Headquarters.
- NABP requests that applications be submitted prior to the Annual Meeting.
- For more information on the Annual Meeting Travel Grant, contact the NABP Executive Office at ExecOffice@nabp.pharmacy.

Eligible individuals can receive up to \$1,500 in grant monies to attend the NABP 113th Annual Meeting. The grant does not include Annual Meeting registration fees.

All applicants will be informed of whether they have qualified for the grant. Last year, 43 state boards of pharmacy applied and were approved for the NABP 112th Annual Meeting Travel Grant. ■



Important Deadlines

- Early Registration Rate – April 7
- Early Hotel Reservation Rate – April 20
- Voting Delegate Submissions – April 21

More information about the 113th Annual Meeting will soon be available on the Annual Meeting website, which may be accessed via the Meetings section of the NABP website at www.nabp.pharmacy.

Online Registration Coming Soon

Online registration for the NABP 113th Annual Meeting will be available in February 2017.

Registration will be available on the Annual Meeting website, which may be accessed via the Meetings section of the NABP website at www.nabp.pharmacy. Attendees are encouraged to register early to receive reduced meeting registration and hotel reservation rates. ■

Sponsorship Opportunities

- Opportunities to support NABP's Annual Meeting activities through a sponsorship or educational grant are available for the NABP 113th Annual Meeting.
- Such support helps NABP provide quality educational programs for board of pharmacy members, executive officers, and compliance staff.
- For more details, organizations may contact NABP via email at Prof-Affairs@nabp.pharmacy or via phone at 847/391-4406. ■

Proposed Resolutions Will Be Distributed in February 2017

Proposed resolutions received at NABP Headquarters by Friday, February 10, 2017, will be distributed electronically to state boards of pharmacy on the following Thursday, February 16, 2017, for review prior to the NABP 113th Annual Meeting, where the resolutions will be presented and voted upon. This mailing will constitute the only preconference distribution of proposed resolutions. All resolutions – those distributed for early review as well as those received after February 10 – will be presented to the voting delegates during the Annual Meeting on Monday, May 22, 2017, by the chair of the

Committee on Resolutions. Please note, resolutions received after the February 16 distribution will be forwarded separately to the state boards of pharmacy for review.

To be considered during the Annual Meeting, resolutions must be received by May 1, 2017. In addition, resolutions must adhere to the requirement of Article IV, Section 6, Part (d) of the NABP Constitution and Bylaws, which states the following:

“(d) Any active member board, District, or committee of the Association may submit resolutions to the Association. Except as otherwise provided in subparagraph (c) of this section, all resolutions

submitted in writing to the Association at least twenty (20) days prior to the date of the Annual Meeting shall be presented at the Annual Meeting for consideration. Resolutions not submitted within such time limitations, but which are submitted within a time frame set by the Executive Committee, may be presented during the Annual Meeting (pursuant to Section 6(c)) and will be considered for adoption by the Association upon the affirmative vote of three-fourths (3/4) of those active member boards present and constituting a quorum.”

Questions regarding resolution procedures should be directed to the NABP Executive Office via email at ExecOffice@nabp.pharmacy. ■

Now Accepting Proposals for Educational Poster Session

NABP is seeking Poster Session participants for its Annual Educational Poster Session. The Poster Session will be held Sunday, May 21, from 8:30 to 11:30 AM, at the NABP 113th Annual Meeting.

Poster Session participants can earn one contact hour (0.1 CEU) of Accreditation Council for Pharmacy Education-accredited continuing pharmacy education (CPE) credit for their attendance and participation. Presenters are not automatically qualified for CPE. To earn CPE, both presenters and participants must spend at least one hour interacting with other Poster Session presenters and complete a post-session test.

Participating boards and schools and colleges of pharmacy will be provided

with one four-foot by six-foot bulletin board, which should be staffed by a qualified representative, such as a registered pharmacist, during the display time. Student presenters are welcome and must be accompanied by a licensed pharmacist.

All participating pharmacy school students will receive a free voucher valued at \$65 to take the Pre-NAPLEX[®], a practice examination for students preparing for the North American Pharmacist Licensure Examination[®] (NAPLEX[®]).

Those interested in participating should contact the NABP Professional Affairs manager via email at Prof-Affairs@nabp.pharmacy by **Friday, March 3, 2017**. ■

Poster Guidelines

- Poster must reflect the overall theme of “Imagineering for the Protection of Public Health.”
- Keep the poster title short, highlighting the topic.
- Make the font size at least 14 point, and double-space paragraph lines to ensure readability from a distance of two to four feet.
- Prepare handouts to provide an overview of the poster and/or additional information, including contact names, should attendees have questions.

Schedule of Events

May 20-23, 2017

Hyatt Regency Orlando on International Drive

Saturday, May 20, 2017

10 AM - 6 PM

Registration/Information Desk Open

1:30 - 3:30 PM

Pre-Meeting CPE

4 - 5 PM

From District Meeting to Annual Meeting – Learning About NABP

6 - 9 PM

President's Welcome Reception

Honoring NABP President

Hal Wand, MBA, RPh

Dinner will be served.

Dress: business casual

Sunday, May 21, 2017

7:30 AM - 4:30 PM

Registration/Information Desk Open

7:30 - 8:30 AM

NABP AWARxE Fun Run/Walk

8:30 - 11:30 AM

Hospitality Brunch and Educational Table Top Displays

8:30 - 11:30 AM

Joint CPE

Educational Poster Session

Noon - 3:15 PM

First Business Session

3:30 - 4:30 PM

Joint CPE

Monday, May 22, 2017

7:30 AM - 12:30 PM

Registration/Information Desk Open

7:30 - 9 AM

USP Update and Breakfast

Breakfast served plated from 7:30 - 8 AM

9:15 - 10:15 AM

Joint CPE

10:30 AM - Noon

Second Business Session

Noon - 12:30 PM

Informal Member/Candidate Discussion

Free Afternoon

(No programming)

Tuesday, May 23, 2017

7:30 AM - 4 PM

Registration/Information Desk Open

7:45 - 8:45 AM

NABP Breakfast

8:45 - 10:15 AM

Executive Officer CPE Session

8:45 - 10:15 AM

Compliance Officer CPE Session

10:30 AM - Noon

Joint CPE

Noon - 1:30 PM

Lunch Break

(On your own)

1:30 - 4 PM

Final Business Session

5:45 - 6:45 PM

Awards Dinner Reception

7 - 10 PM

Annual Awards Dinner

Dress: semiformal

Note: The 113th Annual Meeting schedule is subject to change.



NABP and the NABP Foundation[®] are accredited by the Accreditation Council for Pharmacy Education (ACPE) as providers of continuing pharmacy education (CPE). ACPE Provider Number: 0205. Participants may earn ACPE-accredited CPE credit by completing a Statement of Continuing Pharmacy Education Participation online and submitting it electronically to NABP. Full attendance and completion of the program evaluation and learning assessment for each session are required to receive CPE credit and for the credit to be recorded in the CPE Monitor[®] system. If you do not submit your CPE claim within 60 days of the date you completed the CPE activity, you will be unable to receive credit, as this is the maximum amount of time allowed for providers to transmit CPE claims to ACPE for credit. Please submit your claim as soon as possible to ensure that you receive credit.

Continuing Legal Education (CLE) Policy: NABP staff will be available to assist attendees on an individual basis to apply for CLE credit for attending CPE sessions. To apply for CLE credit, attendees must initiate the program approval process in their own states by completing and submitting the appropriate application materials and forms. NABP will provide documentation as necessary.

Around the Association

Board Member Appointments

- **Racquel Sperrazzo, PharmD**, has been appointed a member of the Guam Board of Examiners for Pharmacy. Sperrazzo's appointment will expire March 18, 2019.
- **Julie Takishima-Lacasa** has been appointed a public member of the Hawaii State Board of Pharmacy. Takishima-Lacasa's appointment will expire June 30, 2020.
- **Ronald Weinberg** has been appointed a public member of the Hawaii State Board of Pharmacy. Weinberg's appointment will expire June 30, 2020.
- **Robert G. Zimmerman** has been appointed a public member of the Illinois Department of Financial and Professional Regulation, Division of Professional Regulation – State Board of Pharmacy. Zimmerman's appointment will expire April 1, 2020.
- **Allen Cassidy, Jr, RPh**, has been appointed a member of the Louisiana Board of Pharmacy. Cassidy's appointment will expire June 30, 2022.
- **Richard Mannino, RPh, BCNSP, FASCP**, has been appointed a member of the Louisiana Board of Pharmacy. Mannino's appointment will expire June 30, 2022.
- **Douglas Robichaux, RPh**, has been appointed a member of the Louisiana Board of Pharmacy. Robichaux's appointment will expire June 30, 2022.
- **Raymond Strong, PharmD, RPh**, has been appointed a member of the Louisiana Board of Pharmacy. Strong's appointment will expire June 30, 2022.
- **Teri Rolan, PharmD, RPh**, has been appointed a member of the New Mexico Board of Pharmacy. Rolan's appointment will expire July 1, 2021.
- **Timothy Bechtold, JD**, has been appointed a public member of the State of Ohio Board of Pharmacy. Bechtold's appointment will expire September 23, 2020.
- **Grace D. Degner** has been appointed a public member of the Wisconsin Pharmacy Examining Board. Degner's appointment will expire July 1, 2018.
- **Kimberly Zammit, PharmD, BS, RPh**, has been reappointed a member of the New York State Board of Pharmacy. Zammit's appointment will expire September 30, 2021.
- **Fred Weaver, BS, RPh**, has been reappointed a member of the State of Ohio Board of Pharmacy. Weaver's appointment will expire June 29, 2020.
- **Kilee Yarosh, BS, RPh**, has been reappointed a member of the State of Ohio Board of Pharmacy. Yarosh's appointment will expire June 29, 2020.
- **Greg Adams, DPH**, has been reappointed a member of the Oklahoma State Board of Pharmacy. Adams' appointment will expire June 30, 2021.
- **Roberto Linares, RPh**, has been reappointed a member of the Oregon State Board of Pharmacy. Linares' appointment will expire June 30, 2020.
- **Carl Hoffman III, PharmD, RPh**, has been reappointed a member of the Utah Board of Pharmacy. Hoffman's appointment will expire June 30, 2020.
- **Kristi Sullivan** has been reappointed a public member of the Wisconsin Pharmacy Examining Board. Sullivan's appointment will expire July 1, 2020. ■

Board Member Reappointments

- **Helen Pervanas, PharmD, RPh**, has been reappointed a member of the New Hampshire Board of Pharmacy. Pervanas' appointment will expire September 6, 2021.
- **John Westerman, Jr, BS Pharm, RPh**, has been reappointed a member of the New York State Board of Pharmacy. Westerman's appointment will expire June 30, 2021.



Newly Accredited VAWD Facilities

The following facilities were accredited through the NABP Verified-Accredited Wholesale Distributors® (VAWD®) program:

AcariaHealth Solutions, Inc
Houston, TX

INO Therapeutics, LLC
Suwanee, GA

Johnson & Johnson Health Care Systems, Inc
Bridgewater, MA

A full listing of more than 560 accredited VAWD facilities is available on the NABP website at www.nabp.pharmacy.

Vermont Passes Legislation Related to the Opioid Crisis

The Vermont General Assembly passed Act 173 (Senate 243), “An act relating to combating opioid abuse in Vermont,” which adds to or modifies several existing Vermont statutes. Act 173 has several important implications for Vermont pharmacists:

- Identifies circumstances under which a pharmacist must query the Vermont Prescription Monitoring System and acknowledges the expanding role of pharmacists and defines “practice of pharmacy,” “practice of clinical pharmacy,” and “collaborative practice agreement.”
- Adds a specific continuing education (CE) requirement related to controlled substances (CS) that requires two hours every licensing period for those pharmacists who have a Drug Enforcement Administration (DEA) number or dispense CS.
- Creates a Controlled Substances and Pain Management Advisory Council that includes pharmacist members and creates an Unused Prescription Drug Disposal Program.

More details are available in the September *Vermont Board of Pharmacy Newsletter*.

Kansas Board Implements New CE Regulations for Pharmacists and Technicians

The Kansas State Board of Pharmacy implemented the following regulations pertaining to CE for pharmacists and pharmacy technicians.

- K.A.R. 68-1-1b Continuing Education for Pharmacists creates additional requirements for pharmacists to obtain CE hours during the previous two-year licensure period and to provide proof of such to the Board. In addition, all continuing pharmacy education (CPE)

appearing on CPE Monitor® will be automatically uploaded and available to the Board without any additional requirements for pharmacists. K.A.R. 68-1-1b also adds new requirements for non-Accreditation Council for Pharmacy Education (ACPE)-accredited CE to be submitted to and approved by the Board and for those CE providers to distribute certificates of completion to pharmacists.

- K.A.R. 68-5-18 Continuing Education for Pharmacy Technicians adds a new 20-hour CPE requirement for all technicians for each biannual renewal period. All CPE appearing on CPE Monitor will be automatically uploaded and available to the Board without any additional requirements for technicians. K.A.R. 68-5-18 also adds new requirements for non-ACPE-accredited CE to be submitted to and approved by the Board and for those CE providers to distribute certificates of completion to technicians.

Additional information about these regulations and others can be found on the Board’s website at <http://pharmacy.ks.gov/statutes-regs/proposed-changes>.

West Virginia Finalizes Protocol for Dispensing Naloxone

With input from the West Virginia Department of Health and Human Resources Bureau for Public Health, the West Virginia Board of Pharmacy finalized the naloxone protocol for pharmacists to furnish naloxone without a prescription from a doctor. In essence, per the protocol, pharmacists are the prescriber and the dispenser.

The Board noted that pharmacists may seek and obtain a standing order from a physician and issue prescriptions in the physician’s name for billing. The Board also noted that the dispensing of all opioid antagonists must be reported to the Controlled Substances Monitoring Program database. Pharmacies must

work with their software providers to include naloxone as a reportable item when reporting all CS dispensed.

The protocol and required trifold brochures are available from the Board’s website in the Naloxone Protocol section at <http://wvbop.com>.

Iowa Expands DEA-Compliant Drug Disposal Programs

The state of Iowa has executed a contract with Assured Waste Solutions, LLC (AWS) to provide the state with DEA-compliant pharmaceutical collection receptacles. General pharmacies (community pharmacies) interested in becoming a CS collector are encouraged to contact the Iowa Board of Pharmacy for more information or to express interest in receiving a receptacle. Program funding will be supported by the Board through its license and registration fees.

Participating pharmacies will not incur additional costs. The pharmacy will be responsible for the proper installation of the receptacle, but may consult with Board compliance staff as necessary. Funding is limited. Not all pharmacies expressing interest are guaranteed to receive a receptacle during fiscal year 2017.

The state of Iowa has executed an additional drug disposal contract with the Iowa Pharmacy Association to continue to provide boxes for the collection of non-CS. As with the CS receptacles, the TakeAway boxes are funded by and through the Board’s license and registration fees.

Pharmacies utilizing a Board-issued CS receptacle through AWS are permitted and encouraged to utilize the receptacle for non-CS as well as for CS. Because of limited funding, pharmacies that receive a CS receptacle from Board funds are not eligible to receive TakeAway boxes for non-CS.

For more information, visit the Board’s website at <https://pharmacy.iowa.gov>. ■

FDA Issues Final Rule on Drug Products That May Not Be Compounded

Food and Drug Administration (FDA) issued a final rule amending FDA's list of drug products that may not be compounded under certain sections of the Federal Food, Drug, and Cosmetic Act (FD&C Act) that allow the marketing of unapproved compounded drugs. Drug products on the list may not be compounded because the drug products have been withdrawn or removed from the market for safety or effectiveness reasons, indicates FDA. The list may be found in the Code of Federal Regulations at Title 21, Section 216.24, at www.ecfr.gov.

The final rule adds 24 types of drugs to the withdrawn or removed list; modifies the withdrawn or removed list to allow one type of drug product to be compounded under certain circumstances; and clarifies that the withdrawn or removed list applies to sections 503A and 503B of the FD&C Act. The final rule is available at www.gpo.gov/fdsys/pkg/FR-2016-10-07/pdf/2016-24333.pdf. FDA provides more information online at www.fda.gov/Drugs/DrugSafety/ucm524320.htm.

DEA to Decrease Manufacturing Quotas for Opioid Controlled Substances in 2017

Drug Enforcement Administration (DEA) is reducing the amount of almost every Schedule II opiate and opioid medication that may be manufactured in 2017 by 25% or more. Other medicines were reduced by more, such as hydrocodone, which will be 66% of last year's level, as indicated in a DEA news release. DEA notes that demand for these opioid medicines has declined based on sales data from IMS Health, a company that provides insurance companies with data on prescriptions written and prescription medications sold in the United States.

The Aggregate Production Quota (APQ) established by the Final Order is the total amount of a controlled substance necessary to meet the estimated medical, scientific, research, industrial, and export needs for the year and for the maintenance of reserve stocks. The 2017 APQ has been reduced for oxycodone, hydrocodone, fentanyl, hydromorphone, morphine, and other such medications. Much of this reduction is attributed to the elimination of a 25% buffer that was added to the APQ annually in 2013 through 2016 to guard against shortages. The purpose of quotas

is to provide an adequate and uninterrupted supply for legitimate medical need of the types of Schedule I and II controlled substances that have a potential for abuse, while limiting the amounts available to prevent diversion.

Additional details may be found in the DEA news release available at www.dea.gov/divisions/hq/2016/hq100416.shtml and in the Final Order available at <https://www.gpo.gov/fdsys/pkg/FR-2016-10-05/pdf/2016-23988.pdf>.

PTCB Releases Two New Exam Practice Tools for Pharmacy Technicians

The Pharmacy Technician Certification Board (PTCB) launched two new Pharmacy Technician Certification Examination (PTCE) practice tools, including the updated Official PTCB Practice Exam and the Official PTCB Calculations Practice Questions App. The updated Official PTCB Practice Exam is designed to familiarize candidates with the PTCE and provides an experience much like taking the actual exam, notes the press release. The Official PTCB Calculations Practice Questions App, a math practice tool, features 90 calculation questions that have appeared on the actual PTCE and includes calculations commonly performed by pharmacy technicians. The press release can be found in the News Room section at www.ptcb.org.

More details about the PTCB practice tools can be found online at www.ptcb.org/get-certified/prepare/practice-exam-and-tools#.V_KdM_krKUI.

FDA's Division of Drug Information Offers CE Webinars for Students and Clinicians

FDA's Division of Drug Information in the Center for Drug Evaluation and Research presents a series of continuing education (CE) webinars targeted toward students and health care providers who wish to learn more about FDA and drug regulation. The webinars are presented by FDA staff and allow participants to interact with staff. Previous webinar topics have included an overview of drug shortages and prescription drug promotion. The webinars and presentation slides can be accessed on FDA's website at www.fda.gov/DDIWebinars. ■

Health care providers and patients are encouraged to report adverse events or quality problems to FDA's MedWatch Safety Information and Adverse Event Reporting Program at www.fda.gov/MedWatch.



INNOVATIONS

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UPCOMING EVENTS

Committee on Law Enforcement/ Legislation

January 24-25, 2017
Rosemont, IL

PARE Administration

February 13-24, 2017

Committee on Constitution and Bylaws

April 12, 2017
Teleconference

FPGEE Administration

April 25, 2017

NABP 113th Annual Meeting

May 20-23, 2017
Orlando, FL

PARE Administration

June 5-16, 2017