

# INNOVATIONS

## SPECIAL ISSUE



112<sup>th</sup> Annual Meeting  
Gathers ALL HANDS ON DECK to  
Shape Future Direction of NABP



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- The background of the lower half of the page shows a scenic coastal landscape with sandy beaches, rocky cliffs, and ocean waves under a clear sky.
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# INNOVATIONS SPECIAL ISSUE

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Edward G. McGinley Chairperson	Philip P. Burgess Member, District 4
Hal Wand President	Gary W. Dewhirst Member, District 5
Jeanne D. Waggener President-elect	John A. Foust Member, District 6
Susan Ksiazek Treasurer	Mark D. Johnston Member, District 7
Timothy D. Fensky Member, District 1	Richard B. Mazzoni Member, District 8
Caroline D. Juran Member, District 2	<i>NABP Executive Committee elections are held each year at the Association's Annual Meeting.</i>
Jack W. "Jay" Campbell Member, District 3	

#### ***Innovations***

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#### **NABP Mission Statement**

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

#### **7 Business Sessions**

Board of Pharmacy Delegates Approve Six Resolutions

#### **9 2016-2017 Executive Committee Inaugurated**

#### **12 Educational Sessions**

Regulators, Stakeholders Discuss Telepractice in Pharmacy and Medicine During Pre-Meeting Session

#### **14 CPE Sessions Promote Discussion on Current Topics Affecting the Regulation of Pharmacy Practice**

#### **19 Poster Session Provides Opportunity for Networking, CPE, and Collaboration Among Students, Boards, and Other Attendees**



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#### **112th Annual Meeting**

112th Annual Meeting Gathers All Hands on Deck to Shape Future Direction of NABP



#### **2016 Award Winners**

NABP Honors Leaders at the Forefront of Public Health Protection

# Optional Events

## First-Time Attendees Network and Learn About Annual Meeting Proceedings During Orientation Session

Board of pharmacy members who were recently appointed, first-time NABP Annual Meeting attendees, and others interested in learning about NABP attended the orientation session “From District Meeting to Annual Meeting – Learning About NABP” on Saturday, May 14, 2016. The orientation provided information on the role of district meetings in NABP business proceedings, an overview of Annual Meeting processes for discussing and voting on resolutions, amendments to the NABP Constitution and Bylaws, and Executive Committee open member and officer positions. ■

### First-Time Attendees Interact With Colleagues

(Right) Executive Committee members welcomed first-time attendees and provided information about the Annual Meeting. Pictured from left to right: Andy Behm, PharmD, RPh, Express Scripts; Martin Hoogendijk, LegitScript; and Gary W. Dewhirst, RPh, DPh, member, NABP Executive Committee.



### Networking Opportunities

(Left) District 4 representatives networked and shared insights with fellow colleagues during the session. Pictured from left to right: Fred M. Weaver, RPh, member, State of Ohio Board of Pharmacy, and Steve Schierholt, Esq, executive director, State of Ohio Board of Pharmacy.



### Getting to Know the Districts

(Right) The orientation provided the chance for attendees to meet others in their district and to introduce themselves to colleagues in all eight districts. Pictured is Susan Lessard-Friesen, registrar, College of Pharmacists of Manitoba, introducing herself to session attendees.

# 112<sup>th</sup> Annual Meeting

## Gathers ALL HANDS ON DECK to Shape Future Direction of NABP



Gathering over 400 attendees and guests representing the member state boards of pharmacy, associate member boards, government agencies, and other key stakeholders, the NABP 112<sup>th</sup> Annual Meeting gave life to its theme "All Hands on Deck – Forging Ahead to a New Regulatory World." Held May 14-17, 2016, in San Diego, CA, the Annual Meeting provided an opportunity for attendees to shape the future direction of NABP by participating in important business proceedings, as well as to attend continuing pharmacy education (CPE) sessions and network with peers.

**“The Annual Meeting provided an opportunity for attendees to shape the future direction of NABP by participating in important business proceedings, as well as to attend CPE sessions and network with peers.”**

### Elections Held and Resolutions Approved

During the Annual Meeting business sessions, board of pharmacy voting delegates elected officers and members to the NABP Executive Committee (see page 9 for details). In addition, six resolutions were adopted. The resolutions address timely issues, including the practices of "white bagging" and "brown bagging," increasing patient access to naloxone rescue kits through independent prescriptive authority, encouraging prescription monitoring programs to provide reports/analytical information to address prescription drug abuse, examining pharmacy technician practice outside the traditional pharmacy practice setting, and the development of telepharmacy licensing processes. The full text of the adopted resolutions is available beginning on page 7 of this newsletter.

### Officer Speeches

During his address to the membership, incoming president Hal Wand, MBA, RPh, explained his focus for the upcoming year, highlighting his plans to strengthen relationships with current international member jurisdictions and to establish relationships with potential new international member jurisdictions. As part of this initiative, Wand noted the need for a task force to explore the feasibility of allowing international member boards to become active

members. Also, Wand reiterated the importance of surveying the member boards to better understand their needs and how the Association can provide services to address those needs. Wand stressed the importance of all member boards participating in the survey, which will soon be sent to all board members. Lastly, Wand addressed his plan to continue the Association's efforts to combat prescription drug abuse.

2015-2016 NABP President Edward G. McGinley, MBA, RPh, DPh, provided attendees with an overview of the developments and accomplishments of the past year, including NABP's efforts in combating prescription drug abuse through the Pharmacists' Pledge and other resources available on the AWARxE® Prescription Drug Safety website. In addition, McGinley highlighted the efforts made by several NABP task forces in researching significant issues of importance for the Association to consider, including pharmacist prescriptive authority and the regulation of pharmacist care services. Lastly, McGinley highlighted the importance of participation in the NABP Interactive Forums, which offer boards a unique setting for interaction on key issues affecting the boards.

During his speech to the membership, 2015-2016 NABP Executive Committee Chairperson Joseph L. Adams, RPh, DPh, shared updates on the Association's programs and services, including the development of a Universal Inspection Form that is based on the Multistate Pharmacy Inspection Blueprint and is intended to provide boards with another tool to assist in the process of implementing the blueprint. In addition, Adams highlighted

recent enhancements made to NABP examinations and assessments.

Lastly, 2015-2016 NABP Treasurer Jeanne D. Waggener, RPh, DPh, shared an overview of the Association's strong fiscal standing in 2015 and what it means for the state boards of pharmacy, including the growth and development of the numerous programs and services that assist boards in their mission of protecting the public health.

## Educational Sessions and Special Programs

Between business sessions, meeting attendees had the opportunity to attend CPE sessions and earn up to eight contact hours (0.8 CEUs) of Accreditation Council for Pharmacy Education (ACPE)-accredited CPE credit. The CPE sessions focused on several timely and relevant topics, including state updates related to the Drug Supply Chain Security Act, the role of pharmacy technicians, the prescription drug abuse epidemic, and pharmacist prescriptive authority.

In addition, the Educational Poster Session, "Surfing the Web, Personal Safety Devices Required," provided an opportunity for CPE credit. Boards of pharmacy and college of pharmacy students and faculty presented 14 posters that addressed issues on pharmacy education, pharmacy practice, and patient safety. Participants were also encouraged to submit topics that focused on educating consumers about the .Pharmacy Top-Level Domain Program.

NABP also offered a pre-meeting CPE session, "Telepractice – Smooth Sailing or Tsunami?" This timely CPE

topic featured guest speakers from the state boards of pharmacy, state boards of medicine, and Federation of State Medical Boards who discussed the origins of telepractice's current technologies and what the future may bring for pharmacists and regulators. More detailed information about this session is available on pages 12-13 of this newsletter.

## Optional Events

Several optional programs and events provided attendees with further opportunities to network and share information. The Hospitality Brunch and Educational Table Top Displays offered attendees the chance to mingle and gain knowledge while enjoying a buffet brunch. Table top presenters included ACPE, Center for Pharmacy Practice Accreditation, Drug Enforcement Administration, Food and Drug Administration, NABP, The Pew Charitable Trusts, Pharmacy Technician Certification Board, and United States Pharmacopeial Convention (USP). Each display highlighted important issues and programs from these organizations. The NABP Executive Committee and several NABP past presidents also presented a table top display to share with attendees all the different ways they can become involved with the Association. In addition, the NABP/American Association of Colleges of Pharmacy Districts presented a table top display in an effort to encourage member involvement at district meetings. Members of the California State Board of Pharmacy also had a table top to share insight on current issues their Board is working on, as well as the must-see sights of San Diego.

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# 112<sup>th</sup> Annual Meeting



## Keynote Speaker Boris Brott Delights Attendees With Interactive Musical Presentation

(Above) In his keynote address during the First Business Session, internationally recognized Canadian conductor Boris Brott engaged attendees with an interactive musical presentation to show the similarities between the business world and a symphony orchestra. Pictured from left to right: Hal Wand, MBA, RPh, 2016-2017 NABP president; Joseph L. Adams, RPh, DPh, 2015-2016 NABP chairperson; Boris Brott; Jeanne D. Waggener, RPh, DPh, 2016-2017 NABP president-elect; and Edward G. McGinley, MBA, RPh, DPh, 2016-2017 NABP chairperson.



## EPIC Convenes at Annual Meeting

(Left) Recent past presidents of NABP and the 2015-2016 NABP Executive Committee chairperson convened at the 112<sup>th</sup> Annual Meeting for the Ex Presidents in Collaboration (EPIC) Subcommittee meeting. Pictured from left to right: Gary Schnabel, RPh, RN; Karen M. Ryle, MS, RPh; Malcolm J. Broussard, RPh; Joseph L. Adams, RPh, DPh; Michael A. Burleson, RPh; and William T. "Bill" Winsley, MS, RPh.

## Meeting Overview

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Recently appointed state board of pharmacy members and those who attended the Annual Meeting for the first time were encouraged to attend the session "From District Meeting to Annual Meeting – Learning About NABP." For information about this interactive orientation session, see page 3.

In addition, the "Networking and State Board of Pharmacy Regulatory Issues

"Open Discussion" was held for meeting participants to discuss issues of mutual interest in regard to the protection of public health with their regulatory colleagues.

Other special events at the 112<sup>th</sup> Annual Meeting included the President's Welcome Reception honoring 2015-2016 NABP President Edward G. McGinley, MBA, RPh, DPh, and the USP Update and Breakfast.

The NABP Annual Awards Dinner recognized 2016 Honorary President

Ronald F. Guse, BScPharm; 2015-2016 NABP President Edward G. McGinley, MBA, RPh, DPh; Fred T. Mahaffey Award recipient the Arkansas State Board of Pharmacy; Henry Cade Memorial Award recipient the Alliance for Safe Online Pharmacies – Global; John F. Atkinson Service Award recipient Frederick M. Collings; and Lester E. Hosto Distinguished Service Award recipient Stanley Weisser, RPh. ■

## Board of Pharmacy Delegates Approve Six Resolutions During NABP 112<sup>th</sup> Annual Meeting

Delegates from the member boards of pharmacy adopted six resolutions during the NABP 112<sup>th</sup> Annual Meeting.

### Resolution No. 112-1-16

#### Study to Review the Practices of “White Bagging” and “Brown Bagging”

**Whereas**, “white bagging” generally refers to a patient-specific medication that is distributed by a pharmacy to a hospital, clinic, physician’s office, or pharmacy for later preparation and administration to a patient where allowed by law and “brown bagging” generally refers to a patient-specific medication that is dispensed by a pharmacy to the patient and then brought by the patient to the hospital, clinic, or physician’s office for administration;

**Whereas**, the practices of “white bagging” and “brown bagging” are becoming more prevalent and often defined and mandated by third-party payers outside of the authority of the state boards of pharmacy; and

**Whereas**, the need exists for the boards of pharmacy to define such practices and ensure appropriate regulatory oversight in order to protect patients;

**Therefore Be It Resolved** that NABP conduct a study, which may include, if appropriate, other key health care stakeholders to review and define the practices of “white bagging” and “brown bagging” and recommend regulatory language, if necessary, to the *Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act)* to assist boards of pharmacy in overseeing and addressing the accountability and safety of medications dispensed and administered via these methods.

### Resolution No. 112-2-16

#### Increasing Patient Access to Naloxone Rescue Kits

**Whereas**, prescription drug abuse and diversion of controlled substances continue to grow at epidemic proportions in the United States; and

**Whereas**, the prescription drug abuse epidemic has led to increasing unintentional drug overdose death rates in recent years; and

**Whereas**, the pharmacist is a readily accessible member of the health care team and plays a major role in preventing prescription drug abuse; and

**Whereas**, timely administration of naloxone can prevent death in a significant number of overdose incidents;

**Therefore Be It Resolved** that NABP encourage states to increase patient access to naloxone rescue kits through the independent prescriptive authority of a pharmacist; and

**Be It Further Resolved** that pharmacists dispensing naloxone rescue kits properly train and counsel individuals on how to correctly administer naloxone to an overdose victim; and

**Be It Further Resolved** that NABP consider amending the *Model Act* to enable pharmacists to independently prescribe and dispense naloxone rescue kits.

### Resolution No. 112-3-16

#### Utilization of Prescription Monitoring Programs (PMPs) and Other Data to More Accurately Measure and Report the Scope of Prescription Drug Abuse

**Whereas**, prescription drug abuse and illicit drug use remain a public health crisis in the US; and

**Whereas**, the drug use and abuse crisis has led to an increase in unintentional drug overdose death rates in recent years; and

**Whereas**, a pharmacist, as a member of the health care team, is readily available and plays a major role in preventing drug abuse; and

**Whereas**, PMPs are available as a tool for health care providers to use in treating their patients; and

**Whereas**, reports provided by state PMPs to appropriate prescribers and pharmacists assist in the effort to increase best practices and identify opportunities for prevention, intervention, treatment, and recovery options; and

**Whereas**, toxicology reports, overdose records, and other similar information are available at the state level but may significantly underreport the number of deaths and injuries;

**Therefore Be It Resolved** that NABP encourage PMPs to provide reports and other analytical information to appropriate prescribers, pharmacists, and entities that serve as sources of data impacting the identification and reporting of prescription drug injuries and deaths, such as, but not limited to, coroners’ offices, to help address the prescription drug epidemic and improve patient care.

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# Business Sessions

## Resolutions

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### Resolution No. 112-4-16

#### Study on Regulations for Pharmacy Technicians to Perform Remote Data Entry

**Whereas**, the *Model Act* supports the provision of pharmacist care outside of a licensed pharmacy in remote locations, such as a home setting, provided that appropriate security and accountability measures are in place; and

**Whereas**, some states have promulgated regulations that allow pharmacy technicians to work remotely, such as home settings, to perform data entry functions, provided that appropriate controls are in place;

**Therefore Be It Resolved** that NABP conduct a study to examine the emerging practice of allowing pharmacy technicians to perform certain functions remotely, outside of the pharmacy and in home settings, and to recommend, if necessary, amending the *Model Act* to include appropriate registration, training, security, and provisions that ensure public safety.

### Resolution No. 112-5-16

#### Task Force on Telepharmacy Practice

**Whereas**, telehealth is expanding and impacting the definition and regulation of telepharmacy; and

**Whereas**, advanced technologies are improving and also challenging the regulation of the practices of telehealth and telepharmacy; and

**Whereas**, there are telepharmacy practices that are presently operating that may not be known and appropriately regulated by state boards of pharmacy;

**Therefore Be It Resolved** that NABP examine the need for a task force to pursue the development and adoption of licensing processes that protect the public, retain board of pharmacy jurisdiction for such practices, and allow for the development of practice models that are not unnecessarily restricted.

### Resolution No. 112-6-16

#### Recognition Resolution

**Whereas**, the individuals listed here have made significant contributions to NABP, the protection of the public health, and the practice of pharmacy:

William Appel (MN)  
Rosemary Combs (TX)  
Tom Garrison (MO)  
Kathleen "Kitty" Gurnsey (ID)  
Brenda Padilla (NM)  
Joyce Palla (AR)  
Ann Peden (TX)  
Cathy Polley (MI)  
Ramon Rede (NM)  
Jack Watts (NC)  
Tom Wood (AR)

**Whereas**, NABP and its member boards of pharmacy are saddened by the death of these individuals;

**Therefore Be It Resolved** that NABP and its members formally acknowledge the leadership and contributions made by these individuals; and

**Be It Further Resolved** that NABP and the boards of pharmacy extend their sincere sympathies to the family and friends of these members. ■

## Sponsorships and Grants Provide Support for the Annual Meeting

### Gold

CVS Health  
Express Scripts  
Humana  
Pfizer, Inc  
Walgreens Boots Alliance

### Silver

Genentech  
Pearson VUE  
Rite Aid  
Teva Pharmaceuticals  
Wal-Mart Stores, Inc

### Bronze

AlixaRx  
Cardinal Health  
Exel Inc/DHL Supply Chain  
Johnson & Johnson  
Healthcare Distribution Management Association  
Much Shelist, PC

## 2016-2017 Executive Committee Inaugurated

NABP delegates have elected individuals to fill the president-elect, treasurer, and open member positions on the Association's 2016-2017 Executive Committee.

The newly elected officers of the NABP Executive Committee are:

- President-elect Jeanne D. Waggener, RPh, DPh, president, Texas State Board of Pharmacy
- Treasurer Susan Ksiazek, RPh, member, New York State Board of Pharmacy

Members elected to serve a three-year term on the NABP Executive Committee are:

- Timothy D. Fensky, RPh, DPh, FACA, member, Massachusetts Board of Registration in Pharmacy
- Caroline D. Juran, RPh, DPh, executive director, Virginia Board of Pharmacy

Re-elected to serve a three-year term on the NABP Executive Committee is:

- Gary W. Dewhirst, RPh, DPh, member, North Dakota State Board of Pharmacy

At the conclusion of the Annual Meeting, Hal Wand, MBA, RPh, former executive director of the Arizona State Board of Pharmacy, assumed the office of NABP president, and Edward G. McGinley, MBA, RPh, DPh, member of the New Jersey State Board of Pharmacy, assumed the position of chairperson of the Executive Committee. In addition, the following members are continuing to fulfill their terms on the 2016-2017 NABP Executive Committee:

- Jack W. "Jay" Campbell IV, JD, RPh, executive director, North Carolina Board of Pharmacy
- Philip P. Burgess, MBA, DPh, RPh, member, Illinois Department of Financial and Professional Regulation, Division of Professional Regulation – State Board of Pharmacy
- John A. Foust, PharmD, DPh, executive director, Oklahoma State Board of Pharmacy
- Mark D. Johnston, RPh, DPh, former executive director, Idaho State Board of Pharmacy
- Richard B. Mazzoni, RPh, member, New Mexico Board of Pharmacy

Abbreviated biographies for the officers and members of the Association's 2016-2017 Executive Committee follow.

### Chairperson: Edward G. McGinley, MBA, RPh, DPh



Edward McGinley, a member of the New Jersey State Board of Pharmacy, automatically assumed the office of chairperson. Prior to the election, he served a one-year term as president, a one-year term as president-elect, a one-year term as treasurer, and a three-year term as an Executive Committee member representing District 2. An active member of NABP, McGinley has served on several committees and task forces. He served as chairperson of the NABP Committee on Constitution and Bylaws and as a member of the Task Force on Prescription Monitoring Program Standards. McGinley has been on the New Jersey Board for 16 years, serving as either president or vice president for 12 of those years. McGinley is a partner in Pharmacy Management Consultants, LLC, which provides pharmacy-related management, technology, and regulatory consultancy services. He is New Jersey's 2015 recipient of the Bowl of Hygeia Award. He earned his bachelor of science degree in pharmacy from Temple University College of Pharmacy, earned a master of business administration from Temple University Fox School of Business, and received an honorary doctor of pharmacy license from the Oklahoma State Board of Pharmacy.

### President: Hal Wand, MBA, RPh



Hal Wand, former executive director of the Arizona State Board of Pharmacy, automatically assumed the office of president. Prior to the election, he served a one-year term as president-elect, a one-year term as treasurer, and two three-year terms, representing District 8, on the Executive Committee. An active member of NABP, Wand served as Executive Committee liaison for the Task Force on the Regulation of Pharmacist Care Services. He also participated in both meetings of the Task Force on Telepharmacy and the Implementation of the Medicare Drug Benefit Medication Therapy Management Provisions. Wand began his career with the Arizona Board as a compliance officer in 1989 and then served as a deputy director in 1994 before being named executive director in 2003. Prior to joining the Board, he worked as a hospital pharmacist, long-term care pharmacist, and community pharmacist. In 2012, he received the Bowl of Hygeia Award for outstanding community service. He earned his bachelor of science degree in pharmacy from the University of Arizona and a master of business administration degree from the University of Phoenix.

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# Business Sessions

## Executive Committee

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### President-elect: Jeanne D. Waggener, RPh, DPh



Jeanne Waggener, president of the Texas State Board of Pharmacy, was elected to serve as president-elect. Prior to the election, she served a one-year term as treasurer and a three-year term as an Executive Committee member representing District 6. An active member of NABP, Waggener served as the Executive Committee liaison for both the Task Force on Sponsorship of NABP District and Annual Meetings and the Task Force on Prescription Drug Abuse. Since 2006, Waggener has served as a member of the Texas

Board. Currently, Waggener is a Pharmacy Clinical Services Manager for Wal-Mart Health and Wellness. Waggener has worked in the community pharmacy environment for over 40 years. She earned a bachelor of science degree in pharmacy from the University of Texas at Austin and received an honorary doctor of pharmacy license from the Oklahoma State Board of Pharmacy.

### Treasurer: Susan Ksiazek, RPh



Susan Ksiazek, a member of the New York State Board of Pharmacy, was elected to serve as treasurer. Prior to the election, she served a three-year term as an Executive Committee member representing District 2. An active member of NABP, Ksiazek has served as the chair of the hospital subgroup of the Task Force to Review and Recommend Revisions to the Controlled Substances Act and as chair of the Task Force on Pharmacy Technician Education and Training Programs. Ksiazek has served two terms as chair of the New York State Board. She is the director of medical staff quality and education at Erie County Medical Center in Buffalo, NY. Ksiazek earned her bachelor of science degree in pharmacy from the State University of New York at Buffalo, School of Pharmacy and Pharmaceutical Sciences.

### Member: Timothy D. Fensky, RPh, DPh, FACA



Timothy Fensky, a member of the Massachusetts Board of Registration in Pharmacy, was elected to serve a three-year member term, representing District 1, on the Executive Committee. An active member of NABP, Fensky served on the Association's Task Force on Pharmacist Prescriptive Authority. A member of the Massachusetts Board of Registration in Pharmacy since 2015, Fensky is currently president-elect of the Board. Fensky is also the director of pharmacy operations at Sullivan's Health Care in

Roslindale, MA. He also serves on the MassHealth Drug Utilization Review Advisory Board. He is also an adjunct faculty member at Massachusetts College of Pharmacy and Health Sciences in Boston, MA. Fensky earned his bachelor of science degree in pharmacy from Northeastern University, Bouvé College of Pharmacy and Health Sciences and received an honorary doctor of pharmacy license from the Oklahoma State Board of Pharmacy.

### Member: Caroline D. Juran, RPh, DPh



Caroline Juran, executive director of the Virginia Board of Pharmacy, was elected to serve a three-year member term, representing District 2, on the Executive Committee. An active member of NABP, Juran has served as a member of the Committee on Law Enforcement/Legislation, and she served on the Task Force to Review and Recommend Revisions to the Controlled Substances Act. In 2015, under Juran's leadership, the Virginia Board of Pharmacy received NABP's Fred T. Mahaffey

Award for contributions to the regulation of the practice of pharmacy and its efforts to ensure that compounding is performed in a safe and compliant manner. Juran served as an advisory committee member of The Pew Charitable Trusts Development of Best Practices for State Oversight of Drug Compounding. Juran completed her studies at the College of William and Mary and the School of Pharmacy at the Medical College of Virginia, Virginia Commonwealth University and received an honorary doctor of pharmacy license from the Oklahoma State Board of Pharmacy.

### Member: Jack W. "Jay" Campbell IV, JD, RPh



Jay Campbell, executive director of the North Carolina Board of Pharmacy, is serving his third year of a three-year member term, representing District 3, on the Executive Committee. An active member of NABP, Campbell has served on many of the Association's task forces and committees, including the Committee on Law Enforcement/Legislation, the Task Force on Prescription Drug Diversion from Common Carriers, and the Task Force to Review and Recommend Revisions to the Controlled Substances Act, for which he served as chairperson. In 2013, Campbell received the Lester E. Hosto Distinguished Service Award from NABP. Campbell also teaches pharmacy law and ethics classes at three North Carolina universities. Campbell earned his bachelor of science degree in pharmacy from the University of North Carolina at Chapel Hill and his juris doctor degree from Vanderbilt University School of Law.

## Executive Committee Officer Reports Available Online at [NABP.net](http://NABP.net)

The NABP 112<sup>th</sup> Annual Meeting officer reports are available in the Members section of the NABP website at [www.nabp.net](http://www.nabp.net). Posted reports include the Report of the Executive Committee, President's Address, Remarks of the Incoming President, Report of the Treasurer, and Report of Counsel.

# Business Sessions

## Member: Philip P. Burgess, MBA, DPh, RPh



Philip Burgess, a member of the Illinois State Board of Pharmacy, is serving his third year of a three-year member term, representing District 4, on the Executive Committee. An active member of NABP, Burgess served on the Committee on Constitution and Bylaws, the Committee on Law Enforcement/Legislation, and on the Task Force on Drug Return and Reuse Programs. Burgess served for five

terms as the chair of the Illinois State Board of Pharmacy. He also works as a regulatory consultant in Chicago, IL. Burgess spent more than 40 years in a variety of roles at Walgreen Co, including a decade as the chain's national director of pharmacy affairs. Burgess earned his bachelor of science degree in pharmacy from the University of Tennessee and earned a master of business administration from the University of Chicago.

## Member: Gary W. Dewhirst, RPh, DPh



Gary Dewhirst was re-elected to serve a second three-year member term, representing District 5, on the Executive Committee. As a member of NABP, Dewhirst has made many contributions to the NABP District 5 meetings, including serving on the Resolutions Committee. Dewhirst is currently serving as the Executive Committee liaison to the Advisory Committee on Examinations.

Dewhirst has been a member of the North Dakota State Board of Pharmacy since 1999 and has served as the Board's president. He was owner and general manager of Hettinger Drug, LLC, in Hettinger, ND, for more than 20 years and a pharmacy manager at Thrifty White Drug for over 13 years. Dewhirst earned his bachelor of science degree in pharmacy from North Dakota State University and received an honorary doctor of pharmacy license from the Oklahoma State Board of Pharmacy.

## Member: John A. Foust, PharmD, DPh



John Foust, executive director of the Oklahoma State Board of Pharmacy, is serving the second year of a three-year member term, representing District 6, on the Executive Committee. He served as the chair of the NABP Task Force on Prescription Drug Abuse in 2014, and under his leadership in 2012, the Oklahoma State Board of Pharmacy received NABP's Fred T. Mahaffey Award

for contributions to the protection of the public health and

welfare. Prior to becoming executive director of the Board in 2009, Foust practiced pharmacy for over 30 years and was the director of pharmacy at multiple hospitals and medical facilities. Foust received the Bowl of Hygeia Award for the state of Oklahoma in 2012 and was also selected "Pharmacist of the Year" by the Oklahoma Society of Health-System Pharmacists in 2014. Foust earned his doctor of pharmacy degree from the University of Oklahoma and his bachelor of science degree from Southwestern Oklahoma State University.

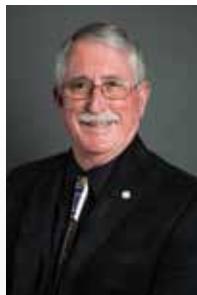
## Member: Mark D. Johnston, RPh, DPh



Mark Johnston, former executive director of the Idaho State Board of Pharmacy, is serving the second year of a second three-year member term, representing District 7, on the Executive Committee. He has served as the Executive Committee liaison to the 2014-2015 NABP Committee on Constitution and Bylaws and the 2013-2014 NABP Advisory Committee on Examinations.

Johnston is the director of regulatory affairs for CVS Health. In addition, he is an instructor of pharmacy law at Idaho State University. Johnston has been an active leader in pharmacy associations and has served as president and board member of the Idaho State Pharmacy Association. He is Idaho's 2013 recipient of the Bowl of Hygeia Award. Johnston earned his bachelor of science degree in pharmacy from Virginia Commonwealth University's School of Medicine and received an honorary doctor of pharmacy license from the Oklahoma State Board of Pharmacy.

## Member: Richard B. Mazzoni, RPh



Richard Mazzoni, member of the New Mexico Board of Pharmacy, is serving his third year of a three-year member term, representing District 8, on the Executive Committee. In 2014, he served as the Executive Committee liaison to the Task Force to Examine Strategies for Preventing and Reacting to Pharmacy Robberies and Thefts. Mazzoni has also served as a member of the New Mexico

Attorney General's Prescription Drug Abuse Prevention Steering Committee. He is currently a consultant, and his firm, R. Mazzoni & Associates, assists clients with regulatory strategy. From 2006 to 2012, he was the director of regulatory compliance at CVS Caremark, where he was responsible for regulatory activities in 22 states, and served as the company's representative to boards of pharmacy. Mazzoni earned his bachelor of science degree in pharmacy from University of the Pacific. ■

# Regulators, Stakeholders Discuss Telepractice in Pharmacy and Medicine During Pre-Meeting Session



With telemedicine and telepharmacy becoming more prevalent in today's technologically advanced world, questions on how the broad scope of this practice may be implemented to advance patient care, yet ensure public protection, have arisen. During the pre-meeting CPE session "Telepractice – Smooth Sailing or Tsunami?" on Saturday, May 14, 2016, attendees learned from experts in this field about the origins and the current technologies of telepractice, as well as what the future may bring for pharmacists and regulators. Presentation topics included an overview of telepractice systems and standards in Texas and Illinois and how medical boards are working with the benefits, challenges, and barriers of telepractice.

### Telepharmacy Practice in Texas

**“As telepractice expands in both pharmacy and medicine, regulators must stay informed and be able to adapt or act to ensure an optimal standard of care is provided and that patient health is protected.”**

Gay Dodson, RPh, executive director/secretary of the Texas State Board of Pharmacy, began the session with an overview of telepharmacy in Texas. In Texas, telepharmacy is defined as "the provision of pharmacy services by a Class A (community) or Class C (hospital) pharmacy to a health care facility that is not at the same location as a Class A or Class C pharmacy through a telepharmacy system." Dodson noted that in Texas, telepharmacy systems operate by monitoring the dispensing of prescription drugs using technology such as audio and video, still image capture, and store and forward (ie, a video or still image record that is saved electronically for future review). Telepharmacy also provides for related drug use review and patient counseling services. In Texas, a provider pharmacy may not provide remote pharmacy services if a pharmacy that dispenses prescriptions to outpatients is located in the same community. Drugs can only be dispensed through a telepharmacy system upon receipt of an original prescription; typically, a patient will see a physician in a clinic, receive a prescription, and provide it to the telepharmacy, where a technician scans or faxes the prescription to the provider pharmacy where the prescription is reviewed. All medications must be repackaged, and only the provider pharmacy may authorize the technician to print the label for the prescription.

Dodson also discussed the requirements for pharmacists to provide telepharmacy. The provider pharmacy must have sufficient registered pharmacists on duty, and each pharmacist may supervise no more than three remote sites that are simultaneously open to provide services. A remote site must be under the continuous supervision of a pharmacist at all times the site is open to provide pharmacy services. She also discussed the requirement for provider pharmacies to have quality assurance programs in place, as well as an inventory of all prescription drugs, a policy and procedure manual, and a written plan for recovery from any event that may interrupt the pharmacist's ability to electronically supervise the telepharmacy system and the dispensing of prescription drugs at the remote site.

## Telepharmacy and Telemedicine in Illinois

Daniel Kelber, JD, associate general counsel of the Illinois Department of Financial and Professional Regulation (IDFPR), Division of Professional Regulation – State Board of Pharmacy and State Board of Medicine, shared his regulatory experience related to telepractice in Illinois. Kelber provides counsel for both pharmacy and medicine regulators in the state.

Telepharmacy was first permitted by statute in Illinois in 2007 and implemented with rules in 2010. In Illinois, telepharmacy is defined as the use of telecommunications to complete all or part of the practice of pharmacy at a location remote from the originating pharmacy (or “home pharmacy”). Kelber explained how IDFPR staff determined to amend legislation to create a new facility type, “remote order entry pharmacy.” The change resulted from an applicant wishing to set up a pharmacy to review drug orders and perform drug utilization reviews, and then send approval to the original pharmacy. As a result, Illinois rewrote its practice act, incorporating language addressing new technology to allow for new possibilities in the practice of pharmacy.

In Illinois, there are now three types of telepharmacies, each requiring a separate license from its home pharmacy: remote dispensing site, remote consultation site, and automated pharmacy systems such as kiosks. A pharmacist employed by or contracted with the home pharmacy must always be available when telepharmacy services are being provided.

Kelber explained the staffing, counseling, and technical requirements for remote dispensing sites and remote consultation sites, including automated pharmacy systems, secure boxes, and kiosks.

Kelber also shared his experience with telemedicine. In Illinois, telemedicine is defined as the interstate practice of medicine from outside Illinois to patients located within Illinois. It also includes

remote interpretation of diagnostic tests; however, it does not include situations where in-state physicians seek guidance from out-of-state consultants, experts, or colleagues. Telemedicine also does not include out-of-state practitioners, such as psychiatrists continuing to treat a patient over the phone after the patient has moved to Illinois.

There is currently no regulation of the methods and modalities of telemedicine; practice of telemedicine must meet the same standard of care as in-person medicine regardless of the type of technology or interaction. Kelber stressed that licensure is a requirement for any physician providing telemedicine in Illinois, and consequences of violation include civil penalty and a Class 4 felony. Illinois will report any infractions of out-of-state practitioners to that practitioner’s state regulatory board. He also noted that Illinois has disciplined several doctors for authorizing medications via rogue pharmacies without interacting with the patient at all.

## Protecting Patients and Expanding Access

Finally, Lisa Robin, MLA, chief advocacy officer of the Federation of State Medical Boards (FSMB), offered perspectives on protecting patients and expanding access in telemedicine. Partially in response to rogue internet pharmacies and the dangers they pose to patients, FSMB released the *Model Guidelines for the Appropriate Use of the Internet in Medical Practice*, which were recently replaced by the *Model Policy for the Appropriate Use of Telemedicine Technologies in the Practice of Medicine*. FSMB receives federal grants to address license portability, and its current grant supports the Interstate Medical Licensure Compact, which is a feasible mechanism to facilitate multistate practice, including telemedicine across state lines.

Robin stressed that telepractice improves patient health in the United States. She commented on the general opinion that telemedicine is no different from practicing medicine

traditionally – it simply uses different technologies. Robin noted that benefits of telemedicine include increased access to care, expanded utilization of specialty expertise, and potential to improve quality and reduce cost. Failure to take advantage of new technologies, she said, may result in failure to meet the established standards of care. However, she affirmed that innovation must be well-informed by data, not just “innovation for innovation’s sake.”

Robin noted there are also challenges and barriers involved in telemedicine. Such challenges may include privacy, maintaining the same level of patient protection afforded by the current state-based regulatory system, and ensuring patient safety, accountability, and consensus as to standard of care. In addition, some barriers may include conflicting state regulatory statutes, reimbursement, licensure, credentialing, privileging, and infrastructure costs.

Despite these challenges, Robin noted the demand for telemedicine is growing – there were 350,000 telemedicine patients in 2013, and she expects there will be 7 million by 2018, driven by various factors such as patient demand for immediate care. In response to this growing demand, state medical boards develop model guidelines in evaluating the appropriateness of care as related to the use of telemedicine between a physician in one location and a patient in another, with or without an intervening health care provider. Model policy guidelines include licensure of the physician, informed consent, continuity of care, and referral for emergency services. FSMB also convened a workgroup on telemedicine consultations to inform state medical boards about the types of consultations and regulatory frameworks for the oversight of physicians who offer consulting services via telemedicine technologies. Robin noted that 29 boards require the same standard of care be applied to telemedicine encounters as face-to-face encounters, four states require an in-person exam

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## CPE Sessions Promote Discussion on Current Topics Affecting the Regulation of Pharmacy Practice

Attendees were able to earn up to eight contact hours (0.8 CEUs) of Accreditation Council for Pharmacy Education-accredited continuing pharmacy education (CPE) credit during the NABP 112<sup>th</sup> Annual Meeting. The CPE sessions addressed timely and important issues affecting the regulation of pharmacy practice and were presented by leading subject matter experts. ■



### Learning About Telepharmacy and Telemedicine

(Above) During the pre-meeting continuing pharmacy education (CPE) session, “Telepractice – Smooth Sailing or Tsunami?”, experts in this field shared with attendees the origins of telepractice, current technologies, and what the future may bring for pharmacists and regulators. Pictured from left to right are James T. DeVita, RPh, DPh, session moderator and member of the 2015-2016 NABP Executive Committee; Daniel Kelber, JD, associate general counsel, Illinois Department of Financial and Professional Regulation, Division of Professional Regulation – State Board of Pharmacy and State Board of Medicine; Lisa A. Robin, MLA, chief advocacy officer, Federation of State Medical Boards; and Gay Dodson, RPh, executive director/secretary, Texas State Board of Pharmacy.



### Combating Prescription Drug Abuse

(Left) The joint CPE session “Prescription Drug Abuse – Batten Down the Hatches!” provided attendees with information about resources that are available, critical information on current consequences, and the prevention and response to pharmacy robberies and thefts. Pictured from left to right are Tara O’Connor Shelley, PhD, associate professor of sociology, and member, Center for the Study of Crime and Justice, Colorado State University; Richard B. Mazzoni, RPh, session moderator and member of the 2016-2017 NABP Executive Committee; and Ralph Orr, director, Virginia Prescription Monitoring Program.

# Educational Sessions



## Charting the Course of the DSCSA

(Left) During the joint CPE session “Charting the Course of the DSCSA – State Updates,” executive directors from fellow state boards shared with attendees regulatory changes and future considerations with regard to the enactment of the Drug Supply Chain Security Act (DSCSA). Pictured from left to right are Mark Hardy, PharmD, RPh, executive director, North Dakota State Board of Pharmacy; Reginald “Reggie” Dilliard, DPH, executive director, Tennessee Board of Pharmacy; Virginia “Giny” Herold, MS, executive officer, California State Board of Pharmacy; and Jack W. “Jay” Campbell IV, JD, RPh, session moderator and 2016-2017 NABP Executive Committee member.

## Exploring Pharmacist Prescriptive Authority

(Right) During the joint CPE session “Sailing to New Horizons – Pharmacist Prescriptive Authority: Point-Counterpoint,” a panel of experts discussed the pros and cons of pharmacists being granted prescriptive authority in order to increase patient access and achieve improved patient outcomes. Pictured from left to right are Anar Dossa, PharmD, BScPharm, CDE, member, College of Pharmacists of British Columbia; Krystalyn Weaver, PharmD, RPh, vice president of policy and operations, National Alliance of State Pharmacy Associations; Alex J. Adams, MPH, PharmD, RPh, executive director, Idaho State Board of Pharmacy; and Mark D. Johnston, RPh, DPh, session moderator and member of the 2016-2017 NABP Executive Committee.



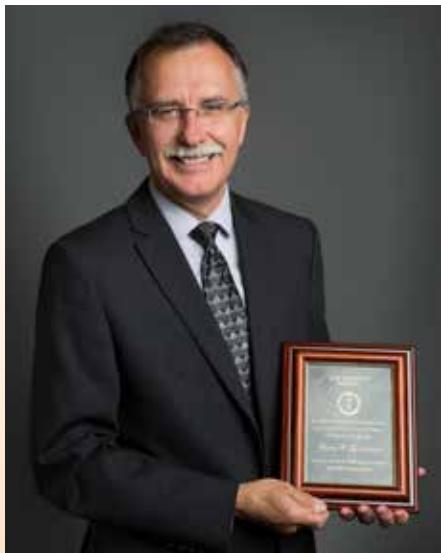
## Examining the Status of Pharmacy Technicians

(Above) During the joint CPE session “Status of Pharmacy Technicians – First Mates or Stowaways?”, attendees learned about educational and regulatory requirements for technicians, technician accountability as it relates to drug diversion, and the need for and effect of regulatory differences on scope of practice. Pictured from left to right are Everett B. McAllister, MPA, RPh, executive director and chief executive officer, Pharmacy Technician Certification Board; Peter H. Vlasses, PharmD, RPh, DSc (Hon), BCPS, executive director, Accreditation Council for Pharmacy Education; Susan Ksiazek, RPh, session moderator and 2016-2017 NABP treasurer; and Lawrence H. “Larry” Mokhiber, MS, RPh, former executive secretary, New York State Board of Pharmacy.

# NABP Honors Leaders at the Forefront of Public Health Protection During 112<sup>th</sup> Annual Meeting



During the 112<sup>th</sup> Annual Meeting Awards Dinner, four individuals, one state board of pharmacy, and one global organization were recognized for their determination and dedication in supporting NABP's continued efforts to assist the state boards of pharmacy in protecting the public health. A biography of each award recipient is available in the May 18, 2016 NABP news release "NABP Honors Leaders at the Forefront of Public Health Protection at Association's 112<sup>th</sup> Annual Meeting." News releases may be accessed in the News section of the NABP website at [www.nabp.net](http://www.nabp.net). ■

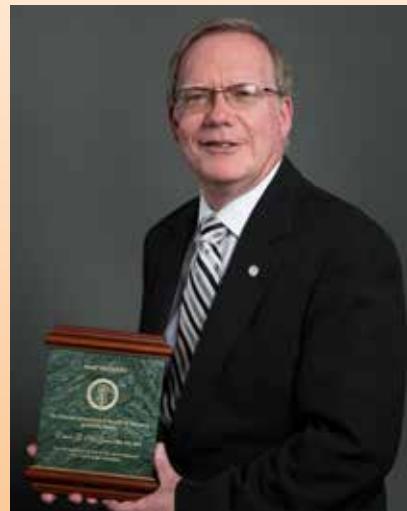


### 2016 NABP Honorary President Award: Ronald F. Guse, BScPharm

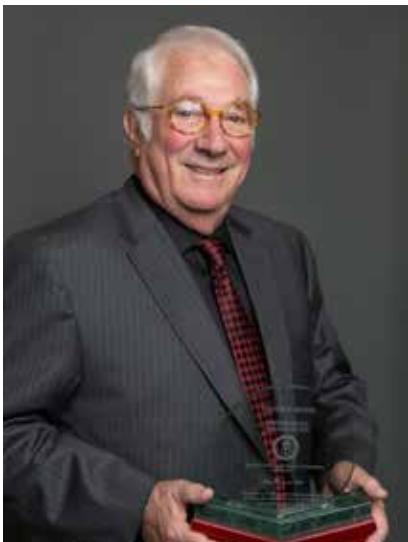
(Left) Ronald F. Guse, BScPharm, retired registrar, College of Pharmacists of Manitoba, received the 2016 NABP Honorary President Award in recognition of his ongoing commitment to protecting the public health and his involvement with NABP.

### 2015-2016 NABP President's Award: Edward G. McGinley, MBA, RPh, DPh

(Right) Edward G. McGinley, MBA, RPh, DPh, 2015-2016 president of NABP, and member, New Jersey State Board of Pharmacy, was presented with the NABP President's Award. Under McGinley's leadership, NABP furthered its efforts to fight prescription drug abuse. He encouraged pharmacists to take the pledge to educate their patients and communities about how to prevent misuse and abuse of prescription drugs and raised awareness about such efforts among pharmacy stakeholders at numerous professional meetings in 2016. In addition, McGinley continued support of the Association's efforts to raise public awareness about rogue drug outlet dangers and how the .Pharmacy Top-Level Domain (TLD) Program helps consumers locate safe online pharmacies.



# 2016 Award Winners



## 2016 Lester E. Hosto Distinguished Service Award: Stanley Weisser, RPh

(Left) Stanley Weisser, RPh, member, California State Board of Pharmacy, received the 2016 Lester E. Hosto Distinguished Service Award for his strong commitment to protecting the public health and his successful advancement of higher standards and stronger oversight for sterile compounding pharmacies. This award is the highest honor bestowed by NABP.



## 2016 Fred T. Mahaffey Award: Arkansas State Board of Pharmacy

The members of the Arkansas State Board of Pharmacy were honored with the 2016 Fred T. Mahaffey Award in recognition of their contributions to the regulation of the practice of pharmacy and their efforts to combat prescription drug abuse. Accepting the award on the Board's behalf was Arkansas State Board of Pharmacy Executive Director John Clay Kirtley, PharmD, RPh (right).



## 2016 John F. Atkinson Service Award: Frederick M. Collings

(Left) Frederick M. Collings, chief investigator, Idaho State Board of Pharmacy, received the 2016 John F. Atkinson Service Award for his dedication to protecting the public health and his extensive involvement in antidiversion efforts such as prescription monitoring programs.



## 2016 Henry Cade Memorial Award: Alliance for Safe Online Pharmacies – Global

Alliance for Safe Online Pharmacies – Global (ASOP) was presented the 2016 Henry Cade Memorial Award for its strong commitment to supporting NABP's mission to protect the public health by regulating online pharmacy and educating consumers about the dangers of buying medicine online. Most notably, ASOP has been a key contributor to NABP's .Pharmacy TLD Program by participating in the 2015 satellite/internet media tour that educated consumers on the dangers of illegal online drug sellers and explained how the program could help them find safe sites. Accepting the award on behalf of ASOP was ASOP Board Member John Hertig, MS, PharmD, CPPS (right).

## Educational Table Top Displays Feature Programs, Updates From Federal Regulatory Agencies and Other Organizations



### DEA Highlights Agency's Recent Efforts to Protect Public Health

(Above) Jan Hamilton, supervisory diversion investigator, United States Department of Justice, Drug Enforcement Administration (DEA), discusses the agency's recent efforts to prevent, detect, and investigate drug diversion with attendees.



### Telepractice

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prior to a telemedicine encounter, and three require an in-person follow-up. Other telemedicine-specific provisions prohibit the prescribing of controlled substances and specifically exclude "audio only."

To demonstrate the potential for complication involving telemedicine and regulatory agencies, Robin discussed the *Teladoc, Inc v. Texas Medical Board* case, in

which Teladoc filed a federal antitrust action in 2015 challenging a Texas Medical Board rule requiring a face-to-face visit before a prescription can be issued. Teladoc, which provides medical services over the phone and internet, alleged restraint of trade by restricting practitioners' ability to compete, as well as restriction of patient access to affordable care. The court ruled against the Board, citing the *North Carolina State Board of Dental Examiners v. Federal Trade Commission* case, upholding Teladoc's claim, and allowing Teladoc to continue

practicing. FSMB is currently working with the Texas Medical Board to appeal the decision. Other states have also requested assistance from FSMB in this legislative area.

As telepractice expands in both pharmacy and medicine, regulators must stay informed and be able to adapt or act to ensure an optimal standard of care is provided and that patient health is protected. ■

### Table Top Display Participants

Accreditation Council for Pharmacy Education  
California State Board of Pharmacy  
Center for Pharmacy Practice Accreditation  
Drug Enforcement Administration – Office of Diversion Control  
Food and Drug Administration  
NABP  
NABP/American Association of Colleges of Pharmacy Districts  
NABP Executive Committee and NABP Past Presidents  
The Pew Charitable Trusts  
Pharmacy Technician Certification Board  
United States Pharmacopeial Convention

### Executive Committee and Past Presidents Encourage Attendees to Get Involved With NABP

(Left) Members of the NABP Executive Committee and NABP past presidents encouraged attendees to get involved with the Association. Susan Ksiazek, RPh, 2016-2017 NABP treasurer (right), shares her experiences and insight with attendees.

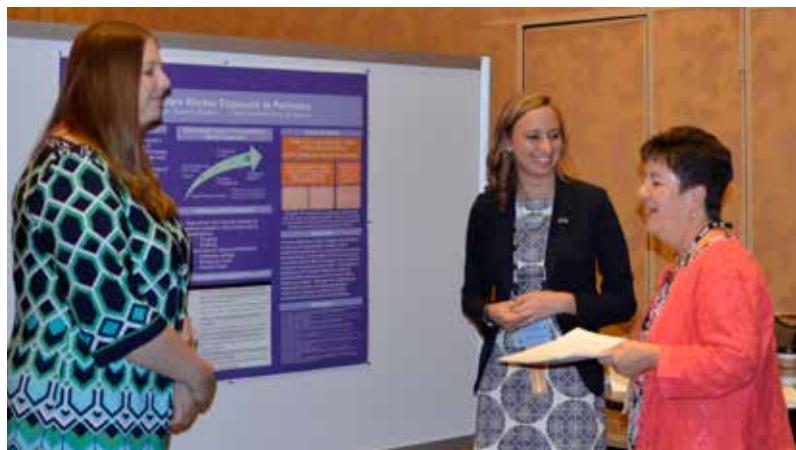
## Poster Session Provides Opportunity for Networking, CPE, and Collaboration Among Students, Boards, and Other Attendees

### ***Students Commended by NABP and Attendees for Active, Engaging Participation***

The NABP Educational Poster Session continues to be an annual favorite among attendees as it offers an opportunity to earn continuing pharmacy education (CPE) credit while interacting with representatives of the boards of pharmacy and schools and colleges of pharmacy. This year the poster session, themed “Surfing the Web, Personal Safety Devices Required,” had a large number of participants, including students from seven schools and colleges of pharmacy throughout the United States. NABP commends and thanks all of the students for their active and engaging participation in the event, which was well-received by attendees. ■

### **Explaining the Impact of Health Care Worker Exposure to Pertussis**

(Right) North Dakota State University School of Pharmacy PharmD Candidates Paige Leclerc (left) and Sarah Schmidt (right) explain to poster session participants the reasons health care workers are at increased risk of transmitting pertussis.



### **Understanding the Effect Pharmacists Have on Proper Medication Disposal**

(Left) North Dakota State University School of Pharmacy PharmD Candidates Jessica Schneider (left) and Hannah Kallio (right) explain to poster session participants the effect pharmacists have on proper medication disposal.



**Additional Poster Session Photos on Back Cover!**



# INNOVATIONS

National Association of Boards of Pharmacy  
1600 Feehanville Drive  
Mount Prospect, IL 60056

## Poster Session

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### Explaining the Roles of Niacin Use in Alzheimer's Disease

(Left) West Coast University School of Pharmacy PharmD Candidates Narine Arakelyan (left) and Xuan Duong (right) describe to poster session participants the protective effects of niacin against the risk of Alzheimer's disease.

### Assessing Patient Knowledge and Awareness of Oral Anti-Cancer Chemotherapy

(Right) PharmD Candidates Ani Haroutunyan (left) and Thien "Tim" Huynh (middle) of Chapman University School of Pharmacy prepare for their poster presentation that discusses patient knowledge and awareness of safe handling and disposal of oral anti-cancer chemotherapy with advisor Siu Fun Wong, PharmD, FASHP, FCSHP, professor, oncology, and associate dean of assessment and scholarship (right).



## *Save the Date!*

**NABP 113<sup>th</sup> Annual Meeting**  
**May 20-23, 2017**  
**Hyatt Regency Orlando**  
**Orlando, FL**