



newsletter

National Association of Boards of Pharmacy®



May 2015 / Volume 44 Number 5

aid to government
the profession
the public
1904 to 2015

Upcoming Events

May 16-19, 2015
NABP 111th Annual Meeting
New Orleans, LA

July 15-16, 2015
PMP InterConnect Steering Committee Meeting
Northbrook, IL

July 21-22, 2015
NABP Program Review and Training
NABP Headquarters

August 6-8, 2015
NABP/AACP District 5 Meeting
Fargo, ND

August 15-18, 2015
NABP/AACP District 3 Meeting
St Augustine, FL

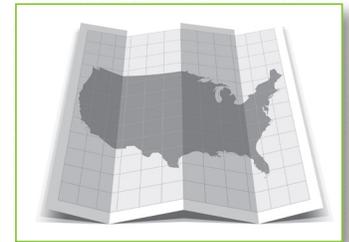
September 14-17, 2015
NABP/AACP Districts 6, 7, & 8 Meeting
Incline Village, NV

Member Boards of Pharmacy and NABP Work to Develop Inspection Resource for States

Further supporting member board of pharmacy efforts to ensure a consistency among resident and nonresident pharmacy's compliance with pharmacy practice regulations, at the request of the states, NABP recently provided a new resource for pharmacy inspections. Developed by member boards, the Multistate Pharmacy Inspection Blueprint will assist states with their own inspection forms and processes to reach agreement among the states as to the critical areas of an inspection. As more states implement the shared requirements that will comprise the blueprint, a consistency in inspections should be able to assist boards in making nonresident licensure decisions. The inspection blueprint and sample inspection forms are currently available to the state boards of pharmacy. NABP anticipates providing training and educational resources to help

states use the documents by the end of 2015.

Using the development of NABP's examination blueprints as a model, NABP facilitated the development of the Multistate Pharmacy Inspection Blueprint, culminating with the Inspection Blueprint Development Workshop held on January 14-15, 2015. The workshop, which was called for by the executive officers of the state boards of pharmacy at the NABP Interactive Executive Officer Forum, gathered state board of pharmacy representatives from 42 different jurisdictions to discuss and develop the inspection blueprint. Workshop participants finalized development of the document, which focuses heavily on the general areas of pharmacy and includes references to existing national compounding standards from United States Pharmacopeia (USP) Chapters



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<795> and <797>, as well as other USP standards.

Crosswalk Survey Results

To begin implementation of the Multistate Pharmacy Inspection Blueprint, states first volunteered to perform a "crosswalk" of their inspection form with the blueprint to ensure that the state inspections cover all of the relevant aspects of the blueprint. In February 2015, NABP sent a draft blueprint and a blueprint crosswalk worksheet to the state boards of pharmacy to assist in this process. Responses were due back to NABP by April 1. The

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The *NABP Newsletter* (ISSN 8756-4483) is published 10 times a year by the National Association of Boards of Pharmacy® (NABP®) to educate, to inform, and to communicate the objectives and programs of the Association and its 64 member boards of pharmacy to the profession and the public. The opinions and views expressed in this publication do not necessarily reflect the official views, opinions, or policies of NABP or any board unless expressly so stated. The subscription rate is \$35 per year.

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New Inspection Resource
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results of the crosswalk will serve as a national survey.

In addition, NABP is currently working with the Executive Committee to create a governance structure for the inspection blueprint, which will include a governance body. The governance body will be composed of NABP members and will help to ensure continual and systematic evaluation of the blueprint, including the results of the crosswalk, as well as any other comments and feedback provided by the boards of pharmacy. This body will also identify additional inspection blueprints that should be established and will serve as the entity that will continually review the blueprint content for cur-

rency and relevancy. NABP anticipates forming the governance body for the inspection blueprint immediately following the 111th Annual Meeting. All development efforts of this process will also inform the Verified Pharmacy Program™ (VPP™), helping to ensure the program meets the nonresident pharmacy inspection needs of all of the Association’s member boards.

Sample Inspection Forms

The Association also worked to update existing inspection tools based on feedback from the VPP Working Group and the Blueprint Development Workshop. Intended for the boards’ reference and use, these tools include a general inspection form, as well as nonsterile and sterile compounding

inspection forms that record compliance with USP Chapters <795> and <797>. These forms were distributed to the boards in the first quarter of 2015. To assist the states, NABP also plans to develop and provide a list of standard definitions for the items referenced within the blueprint.

Additional information on the Multistate Pharmacy Inspection Blueprint will be made available at the NABP 111th Annual Meeting in New Orleans, LA. Further details on VPP are available in the Programs section of the NABP website at www.nabp.net. Individuals with questions or concerns regarding the inspection blueprint may contact NABP Member Relations and Government Affairs at 847/391-4406 or by email at GovernmentAffairs@nabp.net. ©

Registration Deadline Approaching for Final 2015 PCOA Testing Window!

The deadline for schools and colleges of pharmacy to register their students for the final 2015 Pharmacy Curriculum Outcomes Assessment® (PCOA®) testing window (August 24 to September 18, 2015) is **May 26, 2015**.



Schools and colleges that would like to participate in the August 24 to September 18 testing window are encouraged to contact Lori Schumacher, FPGEC/PCOA program manager, at 847/391-4406 or via email at PCOA@nabp.net.

Appropriate for administration to students in all professional years, the PCOA is an excellent resource for pharmacy educators as they review pharmacy curricula, design courses, and assess student performance. Please note, as of January 2015, the paper-based format of the PCOA is no longer available. The PCOA is only delivered in a computer-based format.

More information, including registration materials, is available in the Programs section of the NABP website at www.nabp.net.

General Availability for .Pharmacy Domain Names to Begin in June; Limited Registration Periods Conclude

NABP will begin accepting applications for .pharmacy domain names from all eligible entities on June 3, 2015. At this time the limited registration periods will have concluded and entities eligible to apply for .pharmacy domain names will include pharmacies, pharmacy benefit management companies, prescription drug information and pharmacy referral sites, prescription drug-related patient advocacy and consumer education sites, medical professionals' offices, schools and colleges of pharmacy, continuing pharmacy education providers, wholesale drug distributors, pharmaceutical manufacturers, consultant pharmacists, and pharmacy automation manufacturers/distributors. Organizations that are authorized to obtain requested domain names will be able to register through approved registrars.

NABP began accepting the first .pharmacy applications in December 2014 from trademark holders who had entered their trademarks into the Internet Corporation for Assigned Names and Numbers

(ICANN) Trademark Clearinghouse (TMCH). Known as the Sunrise Registration Period, this phase was mandated by ICANN to protect intellectual property rights by allowing eligible trademark holders to apply for domain names that exactly match their trademark names in the TMCH prior to the general public. NABP received 60 domain name requests as part of the Sunrise Registration period, which included those from pharmacies, manufacturers, referral sites, and at least one consumer education organization.

An additional limited registration phase was also offered to entities that are accredited through the NABP Verified Internet Pharmacy Practice Sites® (VIPPS®) or Veterinary-Verified Internet Pharmacy Practice Sites® (Vet-VIPPS®) programs, or approved through the NABP e-Advertiser Approval^{CM} Program. During this phase, nearly 300 .pharmacy domain name requests were received. To receive accreditation or approval under these programs, VIPPS, Vet-VIPPS, and



NABP e-Advertiser websites have undergone a thorough review process establishing their compliance with NABP standards for legitimate online practice. As such, all previously accredited or approved content was prequalified and considered eligible for a .pharmacy domain name without the usual .pharmacy application and fee.

An additional limited application and registration period for all dispensing pharmacies began on April 1. The registration period for dispensing pharmacies is the last of the limited registration phases and ends June 2.

Boards of pharmacy that have not yet requested a .pharmacy domain name may still send a request by email to info@safe.pharmacy. It is anticipated that these domain names will continue to be available at no cost to the boards.

More information about the .Pharmacy Top-Level Domain Program is available at www.safe.pharmacy. ©

Executive Committee

Karen M. Ryle
Chairperson
One-year term

Joseph L. Adams
President
One-year term

Edward G. McGinley
President-elect
One-year term

Hal Wand
Treasurer
One-year term

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Member, District 1
Serving second year of a second three-year term

Susan Ksiazek
Member, District 2
Serving second year of a three-year term

Jack W. "Jay" Campbell
Member, District 3
Serving first year of a three-year term

Philip P. Burgess
Member, District 4
Serving first year of a three-year term

Gary Dewhirst
Member, District 5
Serving second year of a three-year term

Jeanne D. Waggener
Member, District 6
Serving third year of a three-year term

Mark D. Johnston
Member, District 7
Serving third year of a three-year term

Richard B. Mazzone
Member, District 8
Serving first year of a three-year term

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

Newly Approved e-Advertisers

The following entities were granted approved e-Advertiser status through the NABP e-Advertiser Approval^{CM} Program:



Alliance Pharmacy Group, Inc
www.apgrx.ca

Lehigh Valley Health Network
<http://lvhn.org>
<https://402care.lvh.com/prescriptions>

Mingocare Pharmacy, Inc
<http://mingocare.com>

PlushCare, Inc, dba PlushCare
www.plushcare.com

University of Wisconsin and Clinics Authority
www.uwhealth.org

A full listing of NABP-approved e-Advertisers is available on the NABP website at www.nabp.net. ©

Serve You ‘Served Up’ Discipline

Boards of pharmacy are statutorily created and empowered to protect the public through enforcement of the laws. One might question how far such authority extends, including whether violations of federal or other state laws subject licensees and permit holders to discipline by additional states. The statutory and regulatory language will be critical in interpreting the extent of the boards’ authority. Consider the following.

A mail-order pharmacy (Respondent) based in Wisconsin had a permit to ship prescription medications into at least two states, including Alabama. In February 2011, the Respondent entered into a Stipulation and Final Agency Order with the state of Colorado as a result of violations of the Colorado Electronic Prescription Drug Monitoring Program (PDMP). In the Colorado stipulation, the Respondent admitted that it failed to submit the required data to the PDMP regarding dispensing transactions of controlled substances (CS) within Colorado for a 10-day period of time. The Respondent agreed to pay fines and charges of \$11,000.

As a result of the Colorado stipulation, the Alabama State Board of Pharmacy (Board) served a Statement of Charges and Notice of Hearing on the Respondent alleging violations of Alabama law. In particular, the statute

authorizing the Board to discipline the Respondent provides for administrative jurisdiction over “any licensed pharmacist or a holder of a pharmacy intern or external certificate . . . or similar action against the permit to operate any pharmacy in this state . . .” The Board alleged that the wrongdoings of the Respondent under Code of Alabama 1975, §34-23 included “[v]iolation of the laws regulating the sale or dispensing of narcotics, exempt narcotics, or drugs bearing the label ‘caution, federal law prohibits dispensing without prescription,’ or similar wording which causes the drugs to be classified as prescription legend drugs.” Further, the Board alleged that Respondent’s registration to “manufacture, distribute or dispense a controlled substance may be suspended or revoked by the certifying boards upon a finding that the registrant

. . . “[h]as violated any of the provisions of Chapter 23 of Title 34.”

The Respondent filed motions to dismiss the administrative proceedings and such requests were denied. The Board held a hearing in February 2013 and held that the Board did, indeed, have jurisdiction to adjudicate the matter and found the Respondent had violated the above-referenced statute under §34-23. As a result, the Board imposed a \$2,000 fine and placed the pharmacy and its CS permits on probation for one year. The Respondent appealed the decision to the circuit court that, after various motions, granted the Board’s motion for summary judgment upholding the administrative sanctions rendered by the Board. The Respondent appealed the ruling to the Alabama Court of Civil Appeals.

On appeal, the Respondent argued that the Board does not have statutory authority to discipline a nonresident, mail-order pharmacy. The Respondent further argued that it is not subject to the Board authority because it is not a “pharmacist” and does not operate in Alabama. Finally, the Respondent argued that it is not subject to discipline by the Board because it violated Colorado law, not Alabama law.

Regarding the argument of Board authorization to

discipline a nonresident, mail-order pharmacy, the court cited the relevant jurisdictional statute that provides for Board authority over all entities engaged in the “sale, offering for sale, compounding, or dispensing of drugs in this state, or any person performing pharmacy services in this state” and also provides that “[n]o mail order pharmacy shall transact business in [Alabama] without a permit from the Board.” As noted by the court, the statutes do not differentiate between the permits obtained by mail-order pharmacies and any other pharmacies.

While the Respondent acknowledges the Board has general authority to discipline mail-order pharmacies, it argues that the Board promulgated regulations that reference that nonresident mail-order pharmacies are subject to specific laws of the practice act and regulations, but are not subject to generally applicable laws unless expressly stated by a statute or regulation. Thus, the Respondent argues that the Board lacks the authority to discipline it because the cited statute limits authority to licensed pharmacists and similar action against the permit to operate any pharmacy in Alabama. Because the Board did promulgate regulations with requirements for nonresident mail-order

pharmacies, the Respondent, citing a legal maxim *expressio unius est exclusio alterius* (translated to mean, “the express mention of one thing excludes all others”), argued that such regulations fully encompass “the universe of ‘compliance.’”

In response, the court noted that such a limited interpretation only applies to a listing or specified group of things. In this case, the Board regulations do not encompass an associated group or series. The regulations promulgated by the Board contain specific provisions regarding mail-order pharmacies that, according to the court, “express no intent to exempt mail order pharmacies from compliance with the provisions in Alabama Code and regulations . . . applicable to all pharmacy-permit holders.” Specifically, the Alabama regulations require that each nonresident pharmacy comply with all statutory and regulatory requirements of the state of Alabama for CS.

Using the fundamental rule of statutory construction, the court interpreted the plain language of the statutes and regulations that requires compliance with all statutory and regulatory mandates. As such, there is no rational basis for the court to find that the Respondent, or any other similarly situated permit holder, is exempt from the legal requirements of the

Alabama law. Further, the court held that there are no provisions of Alabama law “indicating that nonresident, mail-order pharmacies operate under a different type of pharmacy permit or that such permits are subject to fewer than all the regulations applicable to all pharmacy-permit holders.”

The Respondent also argued that if a nonresident pharmacy violated Alabama law, the remedy would be for the Board to file a complaint with the “home state” board of pharmacy. The court disagreed, stating that such an interpretation of Alabama law would “invite an illogical result by which the Board would have stripped itself of authority to discipline a nonresident pharmacy-permit holder . . . without first filing a complaint in another state.” The court rejected this argument and held it to be without merit.

Next, the Respondent argued that it is not subject to discipline because it is not a “pharmacist” and “does not operate a pharmacy in Alabama,” as set forth in the statute. The court found such an interpretation to be inconsistent with the plain language of the statute. Citing multiple other sections of the Alabama law, the court held that Board may take action against a permit holder as it does against a pharmacist. Indeed, the court noted that nonresi-

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



Committee on Law Enforcement/Legislation Discusses NABP Model Rules and Legislation

In January 2015, the 2014-2015 Committee on Law Enforcement/Legislation convened at NABP Headquarters to review and comment on existing legislation and rules for the practice of pharmacy, develop model regulations for pharmacy, and recommend areas where model regulations are needed in pharmacy for improving the protection of public health. Front row pictured from left to right: Joli Martini, PharmD, RPh, member, Delaware State Board of Pharmacy; Jeannine Dickerhofe, MS, RPh, member, Colorado State Board of Pharmacy; Lenora Newsome, PD, RPh, member, Arkansas State Board of Pharmacy; Dorothy Gourley, DPh, member, Oklahoma State Board of Pharmacy; and Caroline Juran, RPh, executive director, Virginia Board of Pharmacy. Back row pictured from left to right: Bradley Miller, PhTR, member, Texas State Board of Pharmacy; Joel Thornbury, RPh, member, Kentucky Board of Pharmacy; Patricia Donato, RPh, member, New York State Board of Pharmacy (chairperson); Alice Mendoza, RPh, member, Texas State Board of Pharmacy; Susan Ksiazek, RPh, NABP Executive Committee liaison; Chris Jones, PharmD, RPh, member, Georgia State Board of Pharmacy; and Dennis Wiesner, RPh, member, Texas State Board of Pharmacy.

Legal Briefs

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dent, mail-order pharmacies must be “qualified and authorized to transact such business in the State of Alabama.” While the Respondent is not physically located in Alabama, this does not negate the fact that it conducts pharmacy transactions in the state. In short, the statute does not intend to “leave the citizens of Alabama unprotected from violations committed by nonresident pharmacies.”

Finally, the Respondent argued that it is not sub-

ject to discipline because the statute only applies to violations of Alabama law. Noting the broad language of the statute, the court held that violations of laws regulating the sale or dispensing of narcotics, exempt narcotics, or drugs bearing the label “caution, federal law prohibits dispensing without prescription” may subject a permit holder to adverse action. Refusing to find that the statutes intend to limit discipline only to violations of Alabama law, the court rejected the argument propounded by the Respondent. The court also

noted that aside from interpreting the statute, the Respondent cited no authority in support of this argument. As such, the court held that the Board has the discretion to determine whether violations of Colorado law constitute violations of Alabama law.

Based upon the forgoing, the court found the decision of the Board to be supported by the evidence and there exists no basis for a finding that the decision was arbitrary, capricious, or violated the law. The court affirmed the Board’s findings and sanctions.

This case is an excellent example of statutory interpretation and the importance of language. It is imperative that boards of pharmacy have the legal authority to protect the public with regard to violations of laws of the state where the administrative actions are taken, and other laws as well. This would include both other state and federal laws.

Serve You Custom Prescription Management v. Alabama State Board of Pharmacy, 2015 Ala. Civ. App. LEXIS 41(App. Ct. AL 2015) ☺

Task Force Recommends Adding *Model Act* Language to Encourage Access to and Interoperability of State PMP Programs

Stressing the importance of using prescription monitoring program (PMP) data in making prescribing and dispensing decisions and curbing abuse, the Task Force on Standards for the Use of PMP Data made recommendations to support interoperability among PMPs and between PMPs and electronic health systems. The task force met September 9-10, 2014, and also discussed how to ensure that pharmacists have access to appropriate PMP data. The task force issued recommendations related to mandatory access to PMPs for pharmacists, education for practitioners on how to use PMPs, requirements to ensure the accuracy of PMP data, means of increasing the use and scope of PMPs, and continued development of relevant NABP programs.

The task force reviewed in detail Appendix G of the *Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy (Model Act)*, the Model Prescription Monitoring Program Act, and determined that a number of revisions were necessary to address interoperability of state PMPs. First, the task force added definitions for both interoperability and electronic health information systems.

Language was also added to reaffirm that the boards of pharmacy should be the entities responsible for overseeing state PMPs, and task

force members agreed that in order to increase uniformity, the boards should also be the state entities responsible for promulgating PMP rules or establishing PMP policy. The task force determined that board oversight could assist with increasing interoperability between state PMPs and ensuring the most effective and appropriate use of PMP information.

The task force also recommended that NABP encourage and work with state boards of pharmacy to promote increased access to PMPs for pharmacists. Specifically, the task force recommended that NABP encourage state boards of pharmacy to mandate that practice sites provide access to PMP data and to encourage use of that data. Members agreed that practitioners should not be mandated to access PMP information for every controlled prescription that is presented, but that employers must provide access as part of allowing pharmacists to fulfill their corresponding responsibility, drug utilization review, and counseling duties.

Task force members also discussed the issue of practitioners having access to PMP information but being unsure as to how to interpret it while incorporating professional judgment when dispensing controlled substance (CS) prescriptions. The task force recommended that NABP

Task Force Charge

The Task Force on Standards for the Use of PMP Data met at NABP Headquarters and accepted the following charges:

1. Review existing current state laws and regulations addressing the use of PMP data.
2. Review and, if necessary, recommend amending the *Model State Pharmacy Act and Model Rules of the National Association of Boards of Pharmacy* to ensure regular, consistent, and appropriate use of PMP data.

collaborate with the state boards of pharmacy and other stakeholders to educate health care practitioners and provide guidelines on how to utilize PMP data including how to review and analyze the data to assist in prescribing and/or dispensing decisions. They decided that the best approach would be to provide guidelines that will assist practitioners on how to incorporate PMP information with professional judgment, corresponding responsibility, and standards of care to assist in making prescribing and dispensing decisions.

In addition, the task force recommended that NABP work with state PMPs and reporters of PMP data to ensure the accuracy and timeliness of reported data, and that incorrectly reported data are corrected and information for undispensed prescriptions is reversed. The task force expressed concern regarding inaccurate information being reported to PMPs, including undispensed prescription information

not being reversed, incorrect reporting of Drug Enforcement Administration registration numbers, and errant “red flag” notices sent to prescribers. Members agreed that in order to address the issue of incorrect PMP information, specific language should be added to the reporting section of the *Model Act* and boards of pharmacy should be encouraged to incorporate it into their regulations. Members agreed that boards should be able to assess fines for providing incorrect and/or incomplete information thereby increasing compliance with reporting requirements.

Task force members also discussed the need for further research to be conducted on PMP information to assist in identifying prescribing and dispensing trends. They recommended that NABP assist the states in developing partnerships and, if necessary, laws and regulations, for the state boards of pharmacy to allow for research to be conducted

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VPP Continues to Serve as Valuable Tool Supporting Boards in Their Nonresident Licensure Processes

The Verified Pharmacy Program™ (VPP™) continues to provide the state boards of pharmacy with an information and inspection sharing network through which they may access important pharmacy data, including licensure, inspection, and disciplinary action information.

Developed by NABP in conjunction with the state boards of pharmacy, VPP allows the boards to communicate and share critical information, in addition to providing access to verified data collected directly through the program. As an extension of NABP's existing pharmacist licensure transfer system, VPP is meant to serve as an enhancement to licensure

processes by facilitating this data sharing capability.

Through VPP, NABP is also working to fill in the gaps by providing inspection services to the states that request additional assistance; however, the focus remains on continuing to provide training, education, and tools to the states to assist in maintaining robust state inspection processes and resources while providing VPP as an information sharing mechanism. The Association recently updated the VPP inspection forms based on feedback from the membership during the January 2015 VPP Working Group and Inspection Blueprint Development Workshop meetings. These revised forms

were provided as resources to the state boards of pharmacy for reference along with the Multistate Pharmacy Inspection Blueprint developed by the boards (see cover story for more information).

At press time, at least 259 pharmacies have applied to VPP and currently, or soon will, have verified data available for the boards to view. This verified data is provided to the member boards in an effort to further support them in making informed licensure decisions for their nonresident pharmacies.

Of the 259 VPP facilities:

- 109 pharmacies engage in nonsterile compounding;



- 35 pharmacies engage in sterile compounding;
- 82 pharmacies engage in both sterile and nonsterile compounding;
- 32 pharmacies are general retail or mail-order pharmacies; and
- 1 pharmacy is a nuclear pharmacy.

For more information about VPP or the inspection sharing network, contact the Member Relations and Government Affairs Department at GovernmentAffairs@nabp.net. Additional information is also available in the Programs section of the NABP website at www.nabp.net. 

Task Force

(continued from page 103)

on PMP data to identify prescribing and/or dispensing trends in order to decrease misuse, abuse, and diversion of CS and protect the public health as well as legitimate prescribing and/or dispensing practices. Members particularly noted that it would be good public policy to conduct interstate research in order to incorporate geographical information to compare prescribing and dispensing practices, overdose statistics, and distances that patients are traveling to obtain CS medications.

Finally, the task force recommended that NABP continue to develop PMP InterConnect and PMP Gateway in order to facilitate secure interoperability between state PMPs and electronic health information systems. The task force was provided with an overview of PMP Gateway and how it can facilitate data integration into health care practitioners' workflow, specifically by facilitating the secure transfer of PMP information into electronic health information systems, including pharmacy software.

The Task Force on Standards for the Use of PMP Data was established in response to Resolution 110-4-14, which was passed at the Association's 110th Annual Meeting in May 2014, calling for the development of standards to ensure regular, consistent, and appropriate use of PMP data to increase utilization beyond that encouraged through voluntary usage. Task force members included M. Joseph Fontenot, RPh, chair; Debra Billingsley, JD; Lee Ann Bundrick, RPh; Susan DelMonico, JD, RPh; Carl Flansbaum, RPh; Mark Hardy, PharmD,

RPh; Virginia Herold, MS; David Schoech, RPh; Laura Schwartzwald, RPh; and Joanne Trifone, RPh.

The task force's recommended revisions to the *Model Act* were reviewed and amended by the Committee on Law Enforcement/Legislation in January 2015, and will be reviewed by the NABP Executive Committee during its May 2015 meeting. The task force report was approved by the Executive Committee during its December 2014 meeting and is available in the Members section of the NABP website at www.nabp.net. 

Board of Pharmacy Staff Invited to Learn About NABP Programs and Services During Upcoming Annual Program Review and Training

Board of pharmacy staff members interested in learning about NABP programs and services are invited to come to NABP Headquarters on July 21-22, 2015, for an informational session.

Tailored for board of pharmacy staff, the NABP Annual Program Review and Training will provide information about NABP's examinations, licensure transfer, accreditation programs, and more. New board of pharmacy staff, as well as those seeking a refresher course, are invited to attend.

To assist the boards of pharmacy with travel expenses, NABP offers to cover travel, one night's hotel accommodation, and meal expenses for one participant per board.

The event will begin with a group dinner on July 21, giving board of pharmacy staff the opportunity to network with one another

and NABP representatives. On July 22, attendees will convene for breakfast, and then begin the educational portion of the session. This portion of the event will provide attendees with an overview of the following programs and services:

- Electronic Licensure Transfer Program® (e-LTP™) and license verification
- NABP Clearinghouse/ National Practitioner Data Bank
- Verified Pharmacy Program™ (VPP™) and inspection sharing network
- North American Pharmacist Licensure Examination® (NAPLEX®) and Multistate Pharmacy Jurisprudence Examination® (MPJE®)
- Pharmacist Assessment for Remediation Evaluation® (PARE®)
- NABP e-Profile Connect: NAPLEX/MPJE

- eligibility; score reporting and Foreign Pharmacy Graduate Examination Committee™ (FPGEC®) Certification; and online reporting to candidates
- FPGEC Certification Program, including the application, examination, and certification process
- Pharmacy Curriculum Outcomes Assessment® (PCOA®) program
- Verified Internet Pharmacy Practice Sites® (VIPPS®); Veterinary-Verified Internet Pharmacy Practice Sites® (Vet-VIPPS®); Verified-Accredited Wholesale Distributors® (VAWD®); durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) accreditation; and the NABP e-Advertiser Approval™ Program
- Community Pharmacy Practice Accreditation
- Internet Drug Outlet Identification program

- and the .Pharmacy Top-Level Domain Program
- AWARxE® Prescription Drug Safety Program
- CPE Monitor® service and the continuing pharmacy education (CPE) reporting tool for the boards
- NABP PMP InterConnect®
- Member Relations and Government Affairs
- Professional Affairs
- Communications

Invitations with details about the 2015 event were sent to board of pharmacy executive officers via email in early April 2015. Interested state boards of pharmacy are encouraged to RSVP for the event early to ensure a seat for staff members, as space is limited to 20 participants.

To participate in the session or for more information about future training sessions, please contact the Customer Service Department at 847/391-4406 or custserv@nabp.net. ③

Next PARE Testing Window to Be Held June 15-26, 2015

The next available Pharmacist Assessment for Remediation Evaluation® (PARE®) testing window is scheduled during the two-week time period of June 15-26, 2015.

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. To pre-register an individual for the PARE, 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 NABP_Comp_Assess@nabp.net.

Future PARE testing windows for 2015 will also be available on the following dates:

- August 10-21, 2015
- November 2-13, 2015



More information about the PARE may be found in the Programs section of the NABP website at www.nabp.net. ③

Volunteers Selected to Serve on the 2015-2016 FPGEE Review Committee; 21 Returning and One New Member Announced

NABP is pleased to announce 21 returning members and one new member of the Foreign Pharmacy Graduate Equivalency Examination® (FPGEE®) Review Committee for 2015 and 2016. This group of dedicated volunteers contributes their time and expertise to review and verify the examination questions and assist with the development of new test questions for the FPGEE and Pharmacy Curriculum Outcomes Assessment® programs. The FPGEE Review Committee was developed in order to ensure the integrity and validity of the examination programs, and acts under the policy and planning guidance of the NABP Advisory Committee on Examinations and the NABP Executive Committee. The FPGEE Review Committee is composed of pharmacists and academicians who are representative of the diversity of pharmacy education, including the areas of clinical, pharmaceutical, and basic biomedical sciences, and social, behavioral, and administrative pharmacy sciences. NABP appreciates the

assistance of these committee members as they evaluate examination content and ensure that it meets the specified competency assessment statements, which, in essence, determine the pool of items. The following FPGEE Review Committee members serve a three-year term, which began on February 1, 2015.

Members

- Sally A. Arif, PharmD, RPh, BCPS, Midwestern University Chicago College of Pharmacy
- Kimberly Burns, JD, RPh, Lake Erie College of Osteopathic Medicine School of Pharmacy
- **Jean Carter, PharmD, RPh, PhD, University of Montana Skaggs School of Pharmacy**
- Carolyn Friel, PhD, RPh, Massachusetts College of Pharmacy and Health Sciences
- Brian Hemstreet, PharmD, RPh, FCCP, BCPS, Regis University School of Pharmacy
- Brian M. Hodges, PharmD, RPh, BCPS, BCNSP, West Virginia University School of Pharmacy
- Sheldon G. Holstad, PharmD, American College of Clinical Pharmacy
- William Kolling, PhD, RPh, Southern Illinois University Edwardsville School of Pharmacy
- Karen Kopacek, RPh, University of Wisconsin – Madison School of Pharmacy
- Kem P. Krueger, PharmD, PhD, University of Wyoming College of Health Sciences
- Matthias Lu, PhD, Professor Emeritus, University of Illinois at Chicago College of Pharmacy
- Holly L. Mason, PhD, Purdue University College of Pharmacy
- David McCaffrey, PhD, RPh, St John Fisher College Wegmans School of Pharmacy
- Karen Nagel-Edwards, PhD, RPh, Midwestern University Chicago College of Pharmacy
- Philip Proteau, PhD, Oregon State University College of Pharmacy
- Ralph Raasch, PharmD, RPh, FCCP, BCPS, Professor Emeritus, University of North Carolina at Chapel Hill Eshelman School of Pharmacy
- Kevin Rynn, PharmD, RPh, FCCP, DABAT, Rosalind Franklin University College of Pharmacy
- Kelly M. Shields, PharmD, Ohio Northern University Raabe College of Pharmacy
- Bruce Waldrop, PhD, Samford University McWhorter School of Pharmacy
- Ronald Worthington, PhD, Southern Illinois University Edwardsville School of Pharmacy
- Sister Margaret Wright, PhD, RPh, Arlington Heights, IL
- Dale Eric Wurster, Jr, PhD, University of Iowa College of Pharmacy



*New members indicated in color



Newly Accredited VIPPS Facilities

The following Internet pharmacies were accredited through the NABP Verified Internet Pharmacy Practice Sites® (VIPPS®) program:

Diplomat Pharmacy, Inc, dba Diplomat Specialty Pharmacies
www.diplomat.is

Wellpartner, Inc
www.wellpartnerpharmacy.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.net.

NABP to Honor Leaders at the Forefront of Public Health Protection During 111th Annual Meeting in New Orleans

Leaders in the practice of pharmacy whose support and initiatives have furthered the Association's mission of protecting the public health will be honored during the NABP 111th Annual Meeting, which will be held May 16-19, 2015, at the Roosevelt New Orleans hotel in New Orleans, LA. The 2015 awards that will be presented on Tuesday, May 19, during the Annual Awards Dinner will include the NABP Lester E. Hosto Distinguished Service Award, the Honorary President Award, the Fred T. Mahaffey Award, the Henry Cade Memorial Award, and the John F. Atkinson Service Award.

Lester E. Hosto Distinguished Service Award

The Lester E. Hosto Distinguished Service Award, which was named in honor of the late 1990-1991 NABP President Lester E. Hosto, is the highest honor bestowed by NABP. Receiving the 2015 award is Joseph T. Rannazzisi, JD, RPh, for his strong commitment to protecting the public health and his involvement with NABP. Rannazzisi was appointed to his current position as deputy assistant administrator, Office of Diversion Control, United States Drug Enforcement Administra-

tion (DEA), in January 2006. As deputy assistant administrator, Rannazzisi is responsible for overseeing and coordinating major pharmaceutical and chemical diversion investigations; drafting and promulgating regulations; establishing drug production quotas; and conducting liaisons with the pharmaceutical industry, international governments, state governments, other federal agencies, and local law enforcement agencies. He began his career with DEA in 1986, and he has served as a diversion investigator (Indianapolis, IN), special agent/criminal investigator (Indianapolis/Detroit, MI), clandestine laboratory coordinator (Detroit), homicide task force supervisor (Detroit), staff coordinator (Domestic Operations-Headquarters), section chief (Dangerous Drugs and Chemicals Section-Headquarters), assistant special agent in charge (Detroit), and deputy chief (Office of Enforcement Operations-Headquarters). Rannazzisi has been a valuable resource to NABP over the years, including his participation in the Stakeholders Coalition.

Rannazzisi received his bachelor of science degree in pharmacy from Butler University and his juris doctor degree from the

Detroit College of Law at Michigan State University.

Honorary President

Michael A. Podgurski, RPh, has been named 2015 Honorary President for his commitment to protecting public health and his involvement with NABP. Podgurski has shown ongoing commitment to NABP by participating as a member on numerous NABP committees and task forces including the 2013 Task Force on Pharmacy Licensure Standards, the 2012 Task Force on Virtual Manufacturer/Wholesale Distributors, the 2010-2011 Community Pharmacy Accreditation Program Steering Committee, and the 1999 Committee on Law Enforcement/Legislation.

Podgurski is the vice president of pharmacy services for Rite Aid, a position he has held since 2007. He first joined Rite Aid in 1987 through the acquisition of SuperRx, and has held several director and managerial roles for the company including vice president of pharmacy operations, vice president of pharmacy services administration, and vice president of third party administration. He is also a past member and officer of the Pennsylvania State Board of Pharmacy where he served for 15 years, and has been

Award Winners to Be Honored at Annual Meeting

Lester E. Hosto Distinguished Service Award

Joseph T. Rannazzisi, JD, RPh

Honorary President

Michael A. Podgurski, RPh

Fred T. Mahaffey Award

Virginia Board of Pharmacy

Henry Cade Memorial Award

Robert P. Giacalone, JD, RPh

John F. Atkinson Service Award

Michael A. Moné, JD, BSPHarm, FAPhA

a mentor to many state board members on the importance of collaboration and professional networking at NABP District Meetings and Annual Meetings.

Podgurski earned his bachelor of science degree in pharmacy from West Virginia University in 1972.

Fred T. Mahaffey Award

For their contributions to the regulation of the practice of pharmacy and

(continued on page 108)

Award Winners

(continued from page 107)

their efforts to ensure that compounding is performed in a safe and compliant manner, the members of the Virginia Board of Pharmacy will receive the 2015 Fred T. Mahaffey Award.

The Virginia Board of Pharmacy provided technical assistance to Virginia legislators to ensure that the Code of Virginia was amended in a manner so that the Board could identify all resident and nonresident compounding pharmacies. In July 2013, the Virginia Board was one of the first states to increase inspection standards for nonresident pharmacies, evidenced in Code of Virginia §54.1-3434.1 and in Virginia Board Guidance Document 110-38. The Virginia Board worked closely with NABP during the initial phase and process development of the Verified Pharmacy Program™ (VPP™); 120 VPP inspections of pharmacies seeking or renewing licensure in Virginia were performed within an 89-day time frame through VPP and with the Virginia Board's assistance. In addition, the Virginia Board convened two compounding task forces that resulted in the Board-adopted Guidance Document 110-36, which contains 38 frequently asked questions for complying with United States Pharmacopeia (USP) compounding standards.

Accepting the award on the Board's behalf is Vir-

ginia Board of Pharmacy Executive Director Caroline D. Juran, RPh.

Henry Cade Memorial Award

Receiving the 2015 Henry Cade Memorial Award is Robert P. Giacalone, JD, RPh, for his strong commitment to supporting NABP's mission to protect the public health. Most notably, working with members from the Anti-Diversion Industry Working Group and NABP, Giacalone played an instrumental role in helping to initiate the "Red Flags" video that premiered at the NABP 110th Annual Meeting. In addition, he made possible the opportunity for the boards of pharmacy to film a personalized introduction for their state, which they were then provided for distribution. His involvement in the video supported state efforts to help pharmacists identify the warning signs of prescription drug abuse and diversion when dispensing controlled substance prescriptions.

Currently, Giacalone is the senior vice president of regulatory affairs and chief regulatory counsel at Cardinal Health. In this position, he has worked with federal agencies such as Food and Drug Administration and DEA, various state drug agencies, and other health care regulatory bodies. He works directly with corporate and subsidiary-level legal regulatory compliance functions to help ensure

compliance with state and federal rules and regulations. He served two terms on the Ohio State Board of Pharmacy and in 2013, he was appointed to the State Medical Board of Ohio.

Giacalone has served on several NABP committees and task forces, including the 2005-2006 Committee on Resolutions, 2002-2003 Task Force on Privacy and Confidentiality, and the 2000-2001 Committee on Constitution and Bylaws. Giacalone received his bachelor of science degree in pharmacy from the University of Illinois, College of Pharmacy in 1983, and his juris doctor degree with honors from DePaul University, College of Law in 1989.

John F. Atkinson Service Award

Michael A. Moné, JD, BSPHarm, FAPhA, will be receiving the 2015 John F. Atkinson Service Award for his dedication to protecting the public health and his extensive involvement with NABP. Moné is currently vice president – associate regulatory counsel for Cardinal Health, and is also a member of the Ohio State Board of Pharmacy. In addition, Moné is currently serving his fourth year of a second six-year term on the Accreditation Council for Pharmacy Education Board of Directors.

Prior to his current position, Moné was the director of regulatory compliance at the Medicine Shoppe International, served as assistant attorney general

at the Florida Office of the Attorney General and a staff attorney with USP. Furthermore, Moné was the executive director of the Kentucky Board of Pharmacy from 1996 to 2004, and was a member of the NABP Executive Committee from 2002 to 2004.

In addition to serving on the Multistate Pharmacy Jurisprudence Examination® Review Committee since 1998, Moné has served as chair of both the Committee on Constitution and Bylaws and the Committee on Law Enforcement/Legislation, and was also a member of multiple NABP committees and task forces. His other affiliations include the American Society for Pharmacy Law, the American Pharmacists Association, and the Florida Pharmacy Association.

Moné received his bachelor of science in pharmacy from the University of Florida College of Pharmacy in 1981, and his juris doctor degree from the University of Florida College of Law in 1985.

These leaders have shown their dedication to protecting public health by exemplifying the Association's mission, and will be honored at the NABP Annual Awards Dinner to be held Tuesday, May 19, 2015, from 7 to 10 PM.

For more information on the NABP 111th Annual Meeting, "Boards of Pharmacy and NABP – Marching In Together and Stronger," visit the Meetings section of the NABP website at www.nabp.net. 

Still Time for Members to Apply for Travel Grant to Attend the NABP 111th Annual Meeting

The NABP Foundation™ is once again offering active member state boards of pharmacy travel grant opportunities to attend the NABP 111th Annual Meeting to be held May 16-19, 2015, at the Roosevelt New Orleans hotel in New Orleans, LA. 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. 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.

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. Eligible individuals can receive up to \$1,500 in grant monies to attend the NABP 111th Annual Meeting. The grant does not include Annual Meeting registration fees.

Grant applications may be obtained from NABP upon the direct requests of executive officers of the state boards of pharmacy. Appli-

cations can be submitted by mail to NABP Headquarters or via email to exec-office@nabp.net. NABP requests that applications be submitted prior to the Annual Meeting. All applicants will be informed of whether they have qualified for the grant. Last year, 42 state boards of pharmacy applied and were approved for the NABP 110th Annual Meeting Travel Grant.

For more information on the Annual Meeting Travel Grant, contact the NABP Executive Office at exec-office@nabp.net. ☎

Online Registration Still Available for 111th Annual Meeting

There is still time to register online for the NABP 111th Annual Meeting "Boards of Pharmacy and NABP – Marching In Together and Stronger," to be held May 16-19, 2015, at the Roosevelt

New Orleans hotel in New Orleans, LA.

Registration is available in the Meetings section of the NABP website at www.nabp.net.

NABP offers attendees three payment options:

- Using a credit card (American Express, MasterCard, or Visa)
 - Mailing in the payment
 - Paying in New Orleans
- More information about the 111th Annual Meeting is available in the Meet-

ings section of the NABP website.

Information about the Roosevelt New Orleans is also available, including a link to the NABP special group page for attendees to reserve a room online. ☎



Newly Accredited DMEPOS Facilities

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

A&W Pharmacy
Duchesne, UT

Biocure, LLC
Houston, TX

Ehrhardt Pharmacy
Ehrhardt, SC

Hamtramck Pharmacy, LLC
Hamtramck, MI

Ira's Discount Pharmacy
Delray Beach, FL

Pharmscript, LLC
Edison, NJ

Pharmscript, LLC
Vestal, NY

The Apothecary Pharmacy
Saint Joseph, MO

The Medicine Shoppe
San Diego, CA

A full listing of over 500 accredited DMEPOS companies representing nearly 28,000 facilities is available on the NABP website at www.nabp.net. ☎

May 16-19, 2015

Saturday, May 16, 2015

10 AM - 6 PM

Registration/Information Desk Open

1:30 - 3:30 PM

Pre-Meeting CPE

Combating Prescription Drug Abuse – Together We Are Making a Difference

Sponsored by CVS Caremark
ACPE #0205-0000-15-001-L03-P
(0.2 CEUs – 2 contact hours)

4 - 5 PM

From District Meeting to Annual Meeting – Learning About NABP

6 - 9 PM

President's Welcome Reception

Sponsored by Express Scripts
Honoring NABP President
Joseph L. Adams, RPh
Dinner will be served
Dress: business casual

Sunday, May 17, 2015

7 AM - 4:30 PM

Registration/Information Desk Open

7:30 - 8:30 AM

NABP AWARDS Fun Run/Walk

Sponsored by Rite Aid

8:30 - 11:30 AM

Hospitality Brunch

Sponsored by Omnicare, Inc
Educational Table Top Displays

8:30 - 11:30 AM

Joint CPE

Educational Poster Session – Protecting the Public Together

Sponsored by Pearson VUE
ACPE #0205-0000-15-002-L04-P
(0.1 CEU – 1 contact hour)

Noon - 3:15 PM

First Business Session

Presiding: Joseph L. Adams, RPh,
NABP President

Meeting Program

Roosevelt New Orleans

- Welcome Remarks
Carmen A. Catizone, MS, RPh,
DPh, NABP Executive Director/
Secretary
- Presentation of Colors
- National Anthem
- Keynote Address
Lt General Russel L. Honoré
(Ret)
Sponsored by Humana
Pharmacy Solutions
- Call to Order
- Greetings From the Host State
Louisiana Board of Pharmacy
- Recognition of Sponsors
- Report of the Executive
Committee
Karen M. Ryle, MS, RPh,
Chairperson, NABP Executive
Committee
- President's Address
Joseph L. Adams, RPh,
NABP President
- Report of the Treasurer
Hal Wand, MBA, RPh, NABP
Treasurer
- Announcement of Candidates
for Open Executive Committee
Officer and Member Positions
- Open Microphone Session
(Time permitting.)

3:30 - 4:30 PM

Joint CPE

Continuing Pharmacy Education – So Close Yet So Far

Sponsored by Walgreens Boots Alliance
ACPE #0205-0000-15-003-L03-P
(0.1 CEU – 1 contact hour)

Monday, May 18, 2015

7:30 AM - 1 PM

Registration/Information Desk Open

7:30 - 9 AM

NABP/USP Breakfast

Sponsored by United States
Pharmacoepial Convention

New Orleans, LA

9:15 - 10:15 AM

Joint CPE

DQSA – Are We There Yet?

ACPE #0205-0000-15-004-L03-P
(0.1 CEU – 1 contact hour)

10:30 AM - NOON

Second Business Session

Presiding: Joseph L. Adams, RPh,
NABP President

- Report of the Executive Director/
Secretary
Carmen A. Catizone, MS, RPh,
DPh, NABP Executive Director/
Secretary
- Report of the Committee on
Resolutions
Edward G. McGinley, MBA,
RPh, NABP President-elect and
Chairperson, Committee on
Resolutions
- First Reading of
Resolutions
- Report of the Committee on
Constitution and Bylaws
LuGina Mendez-Harper,
PharmD, RPh, Chairperson,
Committee on Constitution and
Bylaws
- Presentation of Proposed
Amendments to the Bylaws
- Candidate Speeches for Open
Executive Committee Officer and
Member Positions

Noon - 12:30 PM

Informal Member/Candidate Discussion

Free Afternoon

(No programming)

Tuesday, May 19, 2015

7:30 AM - 4 PM

Registration/Information Desk Open

7:45 - 8:45 AM

NABP Breakfast

8:45 - 10:15 AM

Executive Officer and Board
Member CPE

**Drug Supply Chain Integrity –
What Will the Future Hold?**

ACPE #0205-0000-15-005-L03-P
(0.15 CEUs – 1.5 contact hours)

8:45 - 10:15 AM

Compliance Officer CPE

**Inspection Tools – Update on the
Multistate Pharmacy Inspection
Blueprint**

Sponsored by Coram CVS
ACPE #0205-0000-15-006-L03-P
(0.15 CEUs – 1.5 contact hours)

10:30 AM - NOON

Joint CPE

**Team-Based Care – Where Do
We Start?**

Sponsored by Walgreens Boots Alliance
ACPE #0205-0000-15-007-L03-P
(0.15 CEUs – 1.5 contact hours)

Noon - 1:30 PM

Lunch Break
(On your own)

1:30 - 4 PM

Final Business Session

Presiding: Joseph L. Adams, RPh,
NABP President

- Election of 2015-2016 Executive
Committee Officers and Members

- Remarks of the Incoming
President
Edward G. McGinley, MBA,
RPh, NABP President-elect
- Installation of 2015-2016
Executive Committee Officers and
Members
- Final Report of the Committee on
Constitution and Bylaws
LuGina Mendez-Harper,
PharmD, RPh, Chairperson,
Committee on Constitution and
Bylaws
 - Discuss and Vote on
Proposed Amendments to
the Bylaws
- Final Report of the Committee on
Resolutions
Edward G. McGinley, MBA,
RPh, 2015-2016 NABP
President and Chairperson,
Committee on Resolutions
 - Discuss and Vote on
Resolutions
- Invitation to the 2016 Annual
Meeting in San Diego, CA
Virginia Herold, MS, Executive
Officer, California State Board
of Pharmacy

5:45 - 6:45 PM

Awards Dinner Reception

7 - 10 PM

Annual Awards Dinner

Presiding: Edward G. McGinley,
MBA, RPh, 2015-2016 NABP
President

- Presentation to 2015 Honorary
President
- Presentation to Joseph L. Adams,
RPh, 2015-2016 Chairperson,
NABP Executive Committee
- Presentation of the 2015 Fred T.
Mahaffey Award
- Presentation of the 2015 Henry
Cade Memorial Award
- Presentation of the 2015 John F.
Atkinson Service Award
- Presentation of the 2015 Lester
E. Hosto Distinguished Service
Award

Dress: semiformal

Note: The 111th 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 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.



New AWAR_xE Promotional Campaigns Target Seasonal Topics to Engage Consumers

The AWAR_xE® Prescription Drug Safety Program is expanding its nationwide advertising efforts to increase visibility and spread the word about the prevention of prescription drug misuse and abuse. In previous years, national AWAR_xE campaigns ran in the spring and the fall. This year, AWAR_xE will run promotions from March through December highlighting special themes for nine out of the 10 months.

Monthly Campaign Themes in 2015

March's outreach efforts focused on a mainstay of prescription drug misuse and abuse prevention: proper medication disposal. Online banner advertisements linked to the Drug Disposal Locator Tool on the AWAR_xE website to show people an easy way to find disposal sites and educate consumers about proper ways to dispose of unwanted, unneeded, or expired prescription over-the-counter medications.

More people are ready to list their home for sale when the temperatures become milder in April. In an effort to prevent homeowners from unwittingly becoming prescription drug suppliers, AWAR_xE developed public service announcements (PSAs) that played on radio stations throughout the country. These PSAs

reminded homeowners to securely store their medications during showings and open houses.

May is a busy month for parents and their teenage children due to finals, prom, and graduation. AWAR_xE will run prescription safety Facebook advertisements at this time to capture the attention of Facebook users hoping to see photos of these memorable occasions. This active, stressful time can lead to teenagers accidentally or intentionally misusing prescription medications. Some students reach for prescription drugs not prescribed to them to boost their ability to study or to party.

June brings lazy summer days and kids sitting around the house looking for something to occupy their time. AWAR_xE will use banner advertisements and audio PSAs on Pandora Internet Radio to remind parents to keep their medications securely stored to prevent abuse and accidental poisoning.

As vacation season goes into full swing during July,

AWAR_xE will distribute an infographic detailing the correct way to travel with prescription medications. The infographic will be helpful for people who are traveling throughout the globe; laws for traveling internationally with certain medications could surprise some travelers.

As the summer winds down in August and September, AWAR_xE will shift its focus to "back to school" time. Guest blog articles written by NABP's executive director/secretary will inform parents and caretakers that talking to children about prescription drug abuse may reduce their chances of misuse and abuse by nearly 50%.

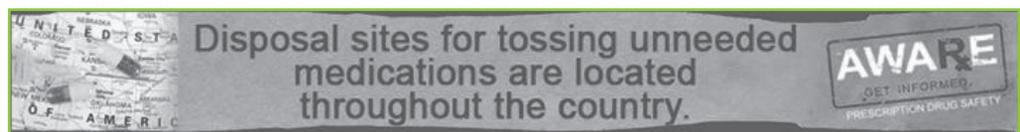
To support American Pharmacists Month in October, AWAR_xE will utilize online banner advertisements promoting general prescription medication safety and touting the value of pharmacists as a resource.

In November, a radio media tour will educate consumers about the dan-

gers of counterfeit drugs from raising awareness about their presence in rogue online pharmacies to explaining the difficulty of spotting fake pills. NABP spokespeople will lend their voices to answer questions from interested parties for use online and on the radio.

Finally, in December AWAR_xE will stress the importance of keeping medications secure during the whirlwind holiday season. With many guests in and out of homes, it is important to ensure that medicine cabinets do not become an easy access point for prescription drugs. Banner advertisements and audio PSAs about this topic will run on Pandora, and a Twitter party (real-time interactions between consumers and AWAR_xE on Twitter) will get consumers involved in the promotion of this important idea.

Look out for AWAR_xE campaigns online and on the radio throughout the year! 📻



AWAR_xE Promotes Medication Safety Information via Banner Ads and Audio PSAs

Throughout December 2015, the AWAR_xE® Prescription Drug Safety Program will run banner advertisements (as shown above) and audio public service announcements (PSAs) on Pandora and Twitter to inform consumers on how to keep their medications safe and secure in order to protect family and friends during the holidays.

Additional States Working to Connect to NABP PMP InterConnect

NABP anticipates that two additional state prescription monitoring programs (PMPs) will be connected to NABP PMP InterConnect® by third quarter 2015, making interstate PMP data accessible to authorized users in at least 30 states.

Currently, the following 28 participating state PMPs are live with PMP InterConnect: Arizona, Arkansas, Colorado, Connecticut, Delaware, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Michigan, Minnesota, Mississippi, Nevada, New Jersey, New Mexico, North Dakota, Ohio, Oklahoma, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Virginia, West Virginia, and Wisconsin.

As of press time, three additional states have executed a memorandum of understanding (MOU) to participate, and two states and one jurisdiction are currently reviewing their MOUs. It is anticipated that approximately 35 states will be either connected to or working toward a connection to PMP InterConnect in 2015.

The NABP PMP InterConnect Steering Committee met on March 11, 2015, to discuss these updates and other information as they relate to the administration and function of PMP InterConnect. More information about the meeting will be available in future NABP communications.

State efforts to fight the prescription drug abuse epidemic through participation in PMP InterConnect were

also highlighted during the National Rx Drug Abuse Summit that took place April 6-9, 2015, in Atlanta, GA. NABP staff presented an overview on PMP InterConnect and other software pilots that integrate prescription drug data sharing into provider workflow. NABP provided sponsorship for the event, and also supplied notebooks and pens that displayed the AWAR_XE® Prescription Drug Safety Program and PMP InterConnect logos. This national, collaborative event brings together professionals from local, state, and federal agencies, businesses and academia, as well as clinicians, treatment providers, counselors, educators, state and national leaders, and advocates impacted by prescription drug



abuse. The summit featured presentations, workshops, educational sessions, and breakout sessions on prescription drug abuse topics such as prescription drug abuse overdoses, federal responses to prescription drug abuse, and improving communication between health care providers. More information about the summit, including speaker presentations, is available at <http://nationalrxdrugabusesummit.org>.

Additional information about PMP InterConnect, including the most up-to-date information on state participation, is available in the Programs section of the NABP website at www.nabp.net. ©

Around the Association

Board Member Appointments

- **Vicki Arnold, RPh**, has been appointed a member of the Georgia State Board of Pharmacy. Arnold's appointment will expire November 1, 2019.
- **Catherine Basile, PharmD, RPh**, has been appointed a member of the Massachusetts Board of Registration in Pharmacy. Basile's appointment will expire November 30, 2017.
- **Garrett Cavanaugh, RPh**, has been appointed a member of the Massachusetts Board

of Registration in Pharmacy. Cavanaugh's appointment will expire November 30, 2017.

- **Karen Conley, DNP, RN**, has been appointed a nurse member of the Massachusetts Board of Registration in Pharmacy. Conley's appointment will expire October 31, 2017.
- **Susan Cornacchio, JD, RN**, has been appointed a public member of the Massachusetts Board of Registration in Pharmacy. Cornacchio's appointment will expire January 31, 2018.
- **Timothy Fensky, RPh**, has been appointed a member of the

Massachusetts Board of Registration in Pharmacy. Fensky's appointment will expire December 31, 2018.

- **Michael Godek, RPh**, has been appointed a member of the Massachusetts Board of Registration in Pharmacy. Godek's appointment will expire November 30, 2017.

Board Member Reappointments

- **Cathy Hanna, PharmD**, has been reappointed a member of the Kentucky Board of Pharmacy. Hanna's appointment will expire January 1, 2019. ©

nabp newsletter

ACPE Releases Updated CPE Definition and CPD Guidance

The Accreditation Council for Pharmacy Education (ACPE) has released two documents that provide guidance and support for continuing pharmacy education (CPE) and continuing professional development (CPD). The two documents, approved by the ACPE board of directors, are:

- The revised *Definition of Continuing Education for the Profession of Pharmacy*, which defines the quality of CPE required by ACPE and the competencies required for CPE activity content. The *Definition* document will assist providers of CPE in planning activities that will be applicable to the professional development of pharmacists and certified pharmacy technicians.
- The *Guidance on Continuing Professional Development (CPD) for the Profession of Pharmacy* incorporates feedback from a broad survey of the pharmacy profession that was conducted in July 2014. The *Guidance* document provides details on the learning activities that may contribute to the professional development of both pharmacists and pharmacy technicians beyond CPE, and also “provides a process for pharmacists and

pharmacy technicians to meet and maintain defined competencies in areas relevant to their respective professional responsibilities.”

Additional information, including links to the documents, is available in a press release on the ACPE website at www.acpe-accredit.org/pdf/ACPE_AdvancesCPE-CPDforPharmacists.pdf.

Heritage Recalls 13 Lots of Injectable Medications

On February 24, 2015, Heritage Pharmaceuticals of Eatontown, NJ, issued a voluntary recall of 13 lots of injectable medications due to a lack of sterility assurance. The recalled medications include:

- Ten lots of colistimethate for injection, USP, 150 mg single-dose vial (National Drug Code (NDC) 23155-193-31)
- Three lots of rifampin for injection, USP, 600 mg single-dose vial (NDC 23155-340-31)

The recall was initiated following Food and Drug Administration (FDA) observations pertaining to aseptic and good manufacturing practices at the manufacturing facility, potentially impacting product sterility.

The recalled medications were manufactured by Emcure Pharmaceuticals Ltd, and distributed by Heritage in single-vial mono-cartons in case packs of 10. Intravenous administration of nonsterile injection medications to

a normally sterile site may result in infection, leading to hospitalization, organ damage, or death. To date, there have been no reports of adverse events related to the use of these products. The company is contacting customers to arrange for return of the affected product. Adverse reactions and quality problems can be reported to FDA’s MedWatch Safety Information and Adverse Event Reporting Program. Additional details are available in a press release on the FDA website at www.fda.gov/Safety/Recalls/ucm435560.htm.

New FDA Drug Info Rounds Training Video Available

FDA Drug Info Rounds, a series of online videos, provides important and timely drug information to practicing clinical and community pharmacists so they can help patients make better decisions. In one of the latest Drug Info Rounds videos, “REMS,” pharmacists discuss the many components of Risk Evaluation and Mitigation Strategies (REMS) and how they can help manage a drug product with known or potential serious risks.

Drug Info Rounds is developed with contributions from pharmacists in FDA’s Center for Drug Evaluation and Research, Office of Communications, Division of Drug Information. “REMS” and other Drug Info Rounds resources are available on the FDA website at www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/ucm211957.htm.

www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/ucm211957.htm.

May DEA Conference on Preventing Drug Diversion Scheduled in Virginia

Drug Enforcement Administration (DEA) is offering two regional one-day Pharmacy Diversion Awareness Conferences (PDACs) in Norfolk, VA, with one on Saturday, May 30, 2015, and another on Sunday May 31, 2015. Each one-day conference is open to pharmacy personnel (pharmacists, pharmacy technicians, or loss prevention personnel) who are employed by pharmacies or hospitals/clinics that are registered with DEA in the state of Virginia. The conference is designed to assist pharmacy personnel in identifying and responding to potential diversion activity. Location details, a conference agenda, and a link to the online registration form are available on the DEA website. There is no registration fee for these conferences. Upon completion of the one-day conference, pharmacists and pharmacy technicians may receive up to seven ACPE-accredited continuing pharmacy education hours (0.7 CEUs). Additional information on this and other upcoming PDAC conferences is available on the Office of Diversion Control website at www.deadiversion.usdoj.gov/mtgs/pharm_awareness. ©

Daily Reporting to Alabama PMP Now Required

On October 20, 2014, Rule 420-7-2-.12 passed, which requires entities and practitioners (except veterinarians) that dispense Schedule II-V controlled substances (CS) to report data to the Alabama Prescription Drug Monitoring Program (PDMP) database on a daily basis. The change will assist with the identification, intervention, and prevention of abused, misused, and diverted CS within the state of Alabama as well as with related education, notes the Alabama State Board of Pharmacy.

Daily reporting implementation should begin immediately. The PDMP allowed a grace period to implement this change until January 1, 2015, at which time the PDMP began collecting noncompliance/non-reporting data for the regulatory boards per state law.

A complete copy of Rule 420-7-2-.12 is available on the Alabama PDMP website at www.adph.org/PDMP/Default.asp?id=1234.

Ohio General Assembly Passes New Laws Impacting the Practice of Pharmacy

The conclusion of the 130th Ohio General Assembly in December saw the passage of several

new laws impacting the practice of pharmacy.

House Bill (HB) 394, effective March 19, 2015, authorizes a pharmacist to administer certain immunizations to individuals under certain conditions.

HB 326, effective March 23, 2015, exempts certain individuals from the requirement to be licensed by the Ohio State Board of Orthotics, Prosthetics, & Pedorthics, including licensed pharmacists and licensed pharmacist interns.

HB 367, effective March 23, 2015, establishes requirements regarding CS containing buprenorphine used for the purpose of treating drug dependence or addiction.

HB 341, effective April 1, 2015, prohibits an opioid or benzodiazepine from being prescribed without review of patient information in the Ohio Automated Rx Reporting System (OARRS). A frequently asked questions document is available at www.pharmacy.ohio.gov/341FAQ.

Senate Bill 258, effective March 19, 2015, establishes standards for the performance of pharmacy audits in Ohio and to authorize the continued use of certain analgesic CS in the practice of optometry.

Additional information on these laws is available on the Ohio State Board of Pharmacy website at www.pharmacy.ohio.gov/Pubs/Special.aspx.

Virginia CQI Requirements Now Effective

Final regulations promulgated pursuant to §54.1-3434.03 of the Code of Virginia for continuous quality improvement (CQI) became effective on December 31, 2014. This law requires each pharmacy to implement a program for CQI in compliance with Virginia Board of Pharmacy regulations or to actively report to a patient safety organization (PSO) that has CQI as its primary mission under the Patient Safety and Quality Improvement Act of 2005 (Public Law 109-41). To provide sufficient time for pharmacies to come into compliance, the Board will not cite a deficiency during a routine inspection for the first six months from the date the regulations became effective. Thus, through June 30, 2015, if the pharmacy is not in compliance with CQI requirements, the inspector will simply note this as a comment on the inspection report rather than citing a deficiency. As of July 1, 2015, the inspector will cite a minor deficiency for noncompliance.

In a pharmacy that chooses to comply with CQI requirements by actively reporting to a PSO, the inspector will look for a record indicating the date a report was submitted to the PSO. If no dispensing errors occurred within the past

30 days, the record must indicate a “zero report” with the date. The record is to be maintained for 12 months from the date of reporting. In a pharmacy that chooses to implement its own CQI program in compliance with Board regulations, the inspector will look for a record that includes the following general information: (1) dates the analysis was initiated and completed; (2) names of the participants in the analysis; and (3) general description of remedial action taken to prevent or reduce future errors. A zero report with date shall be recorded on the record if no dispensing errors have occurred within the past 30 days. The record is to be maintained and available for inspection to ensure compliance with this section for 12 months from the date of the analysis of dispensing errors. The report is not intended to be punitive by revealing patient-specific information associated with dispensing errors, but is intended to demonstrate to the inspector the pharmacy’s compliance with CQI requirements. For more information, review §54.1-3434.03 found in *The Pharmacy Act and The Drug Control Act with related statutes* as well as Regulations 18VAC110-20-10 and 18VAC110-20-418 found in the *Regulations Governing the Practice of Pharmacy*, which are both available at www.dhp.virginia.gov/Pharmacy/pharmacy_laws_regs.htm#reg. 



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