

ARIZONA STATE BOARD OF PHARMACY

newsletter to promote pharmacy and drug law compliance

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The Board Is on Facebook

Follow the Arizona State Board of Pharmacy for the latest news and updates at https://www.facebook.com/Arizona-State-Board-of-Pharmacy-396869467321193.

Update Your Profile

In an effort to communicate more effectively with its licensees and permittees, the Board has noticed that contact information in its system is not always current and up to date. You are required to update your personal contact information and pharmacy employer within 10 days after a change, pursuant to Arizona Revised Statutes §32-1926. Please use your online profile to update your contact information.

National Pharmacy Compliance News

A Service of the National Association of Boards of Pharmacy Foundation (NABPF)

Visit NABP's website for the latest regulatory updates and news from FDA, USP, NABP, and more.

Read National News

Be on Alert - Scam

There have been reports of individuals impersonating Board staff members requesting personal information from license and permit holders. Please know that the Board already has your information, which you are able to update using the Board website at any time. The Board does not collect payment over the phone. If you experience a similar situation in which you are contacted for personal or financial information, please contact the Board office at 602/771-2727.

Responsibility of a Pharmacist When Detecting a Fraudulent Prescription

By identifying fraudulent prescriptions, pharmacists help to ensure patient safety, uphold the integrity of the profession, and prevent the misuse or diversion of controlled substances (CS). Filling of CS for illegitimate medical purposes can result in serious harm, including overdose, poisoning, deaths, and unlawful distribution onto the street.

When a pharmacist suspects a fraudulent prescription, their responsibilities can include a variety of checks:

- Verification: Pharmacists must carefully check the authenticity and validity of the
 prescription. This may involve checking the prescriber's credentials. You can visit Drug
 Enforcement Administration's (DEA's) website and search for provider identification,
 name, registration number, and address, or you can contact DEA directly at 1-800/8829539. Ensure that the prescription meets all necessary information and legal
 requirements. Checking the person's identity can also be a helpful tool.
- Professional Judgment: Pharmacists should use their judgment to evaluate factors such as fill history, indications, and appropriateness of prescribed medications. The person knowingly filling such a purported prescription, as well as the person issuing it, shall be subject to the penalties provided for violations of the provisions of law relating to CS. 21 United States Code (USC) 841(a)(1), 21 USC 842(a)(1), and 21 Code of Federal Regulations 1306.04(a).
 - Reference the US Department of Justice DEA Pharmacist's Manual.
- Warning Indicators: Patients offering to pay cash, driving long distances to obtain a
 prescription, using multiple prescribers, or doctor's writing for certain combinations
 of drugs (example: promethazine with codeine, antibiotics, an inhaler, and a
 corticosteroid) can all be warning indicators of fraudulent activity. Handwriting might
 be too perfect; there may be misuse of medical abbreviations or small discrepancies
 in prescriber identifiers such as address, phone, or zip code; or quantities might differ
 from usual dosages.
- Communication With the Provider: Sometimes the best way to identify fraud is going to the source. Pharmacists may need to contact the prescriber to clarify any

concerns or discrepancies. Open lines of communication help to mitigate and prevent harm. Practitioners may also work directly with Arizona Controlled Substances Prescription Monitoring Program (CSPMP) teams to submit specific provider written announcements within the prescription monitoring program (PMP) reporting tool. Prescribers may notice unusual PMP submissions under their DEA number/address and can also contact DEA to report if their registration number is being used without their knowledge or permission.

• Reporting: If a pharmacist does determine that a prescription is fraudulent, they have a legal and ethical obligation to report it. This may vary depending on state or federal agency jurisdiction, but it often involves notifying law enforcement, regulatory bodies, and other relevant authorities. Reporting incidents assists investigators to trend, track, and trace fraudulent sources. Reporting incidents to your local company leadership may also assist with internal investigations and communication with others.

Online Reporting Resources:

- **DEA:** https://www.deadiversion.usdoj.gov/tips_online.htm
- State of Arizona Attorney General Prescription Drug Diversion Suspicious Activity Report: https://www.azag.gov/complaints/drug-diversion
- Documentation: Maintain thorough and accurate details of any suspicious actions, communications, and paperwork of submitted reports of fraudulent activity. These detailed documents are essential for legal purposes and can assist vitally with investigations if required.
- Preventative Measures: Pharmacists can positively contribute to preventing fraud and reducing overdose/deaths and street distribution by implementing security measures within the pharmacy. Utilize the CSPMP, conduct periodic audits, and stay informed about emerging trends regarding the latest techniques used in fraudulent schemes.

Fraudulent prescriptions can come in a variety of formats in an ever-changing landscape, including elaborate faxes with clinical information history, phoned in prescriptions, and handwritten orders. Other diversion sources include online pharmacies that operate outside of legal frameworks that may sell CS without requiring legitimate prescriptions. For more information and background on online pharmacy regulations, please search the Ryan Haight Online Pharmacy Consumer Protection Act of 2008.

Recently, in December 2022, DEA served an order to show cause on a retail pharmacy's involvement in the unlawful dispensing of prescription stimulants through telehealth visits that exceeded Schedule II 90-day supply limits and/or were written by prescribers who did not possess the proper state prescriptive authority. Because of the increasing popularity of telemedicine and remote consultations to others, misuse and diversion of CS prescribed without legitimate medical need may be on the rise. For more information, refer to DEA's proposed rules

for permanent telemedicine flexibilities regarding CS and the relationship between a medical practitioner and a patient via telemedicine.

Another trend comes in the form of fraudulent electronic prescriptions by an unauthorized user of a health care provider's credentials to create and transmit. If a person is able to gain unauthorized access, they can create and transmit fraudulent electronic prescriptions without the provider's consent or knowledge. They may target medications with high abuse potentials, such as opioids and benzodiazepines.

Working with prescriber licensing boards or DEA may assist the pharmacist in identifying compromised accounts or DEA registrations. Reporting electronic prescriptions for CS fraud can assist investigators with pinging internet addresses or accounts used in the suspicious activity.

Please note: The specific responsibilities and procedures may vary on your company policies and procedures, local laws, and other regulations. Always follow applicable legal and professional guidelines in your respective jurisdictions.

Local Arizona Resource Contacts:

Tucson DEA diversion field office: 520/573-5500

Phoenix DEA diversion field office: 602/664-5600

Arizona State CS program contacts: 602/771-2730

Arizona State Board of Pharmacy main office: 602/771-2727

Food and Drug Administration Approves Vaccines for RSV

The Arizona Department of Health Services (ADHS) has decided that the respiratory syncytial virus (RSV) vaccines do not need to be included in the Arizona Administrative Code list in R9-6-1301 (vaccines requiring prescription for pharmacists to administer).

The approved vaccines are:

- Arexvy (GSK)
- Abrysvo[™] (Pfizer)

New Cases of mpox in Arizona - Expect an Increase

With summer here, the ADHS is preparing for an expected increase in mpox (formerly monkeypox) cases in the coming weeks as people gather for festivals and other events. There have been recent clusters reported in parts of the US, even among vaccinated individuals, and recently a new infection of mpox was reported in Maricopa County.

Screen your patients at higher risk for acquiring mpox, including gay, bisexual, and other men who have sex with men, transgender or non-binary people, and persons with HIV, regardless of

vaccination or travel history. **Continue immunizing** your patients at risk **or anyone who asks to be vaccinated** against mpox.

Providers can refer patients to their county health department for vaccination or to obtain free vaccines for their patients.

The mpox vaccine, JYNNEOS®, is a two-dose vaccine approved for the prevention of smallpox and mpox. The second dose should be given four weeks after the first dose. If more than 35 days have elapsed since the first dose was given, administer the second dose as soon as possible. People who are vaccinated should continue to avoid close, skin-to-skin contact with someone who has mpox because infection may still occur in fully vaccinated persons.

A vaccine booster and post-exposure prophylaxis are not recommended for fully vaccinated persons.

Treatment should be considered for use in people who have severe disease or involvement of anatomic areas that might result in serious sequelae that include scarring or strictures or who are at high risk for severe disease, such as individuals with immunocompromising conditions or people with advanced HIV.

In Arizona, providers can call 1-888/352-0540 to reach the 24/7 Arizona TPOXX Healthcare Provider Clearinghouse to obtain Tecovirimat (TPOXX®) for their eligible patients as determined by the federal Expanded Access Investigational New Drug requirements. Assistance in determining eligibility is also provided to clinicians as needed. Report all suspected mpox cases to your local health department.

Here is a link to a TPOXX access flowsheet for Arizona:

https://www.azdhs.gov/documents/preparedness/epidemiology-disease-control/mpox/tpoxx-flow-chart.pdf

Resources Available

Centers for Disease Control and Prevention (CDC) Health Alert: Potential Risk for New Mpox Cases

ADHS Mpox Page

Arizona Mpox Dashboard (Epidemiological Data)

Maricopa County Mpox Information for Healthcare Providers

Pima County Mpox Resources for Providers

ADHS Mpox Information for Arizona Healthcare Providers

CDC Information For Healthcare Professionals

Questions?

Please reach out to Ricardo Fernández by email at ricardo.fernandez@azdhs.gov.

Disciplinary Actions and Updates – Health Boards

Disciplinary actions for the Arizona State Board of Pharmacy, Arizona Medical Board, Arizona Naturopathic Board, Arizona Board of Examiners, and Arizona Regulatory Board of Physician Assistants can be found at https://pharmacy.az.gov/quarterly-updates.

The Arizona State Board of Pharmacy News is published by the Arizona State Board of Pharmacy and the National Association of Boards of Pharmacy Foundation® (NABPF®) to promote compliance of pharmacy and drug law. The opinions and views expressed in this publication do not necessarily reflect the official views, opinions, or policies of NABPF or the Board unless expressly so stated.

Kamlesh "Kam" Gandhi, PharmD - State News Editor
Lemrey "Al" Carter, PharmD, MS, RPh - National News Editor & Executive Editor
Megan Pellegrini - Publications and Editorial Manager

1110 W Washington St, Ste 260 | Phoenix, AZ 85007 | https://pharmacy.az.gov | kgandhi@azpharmacy.gov