

UTAH BOARD OF PHARMACY

newsletter to promote pharmacy and drug law compliance

Required Electronic CS Prescriptions

By Chris Sheard, Board Chairperson

Beginning January 1, 2024, most providers will be required to issue prescriptions for controlled substances (CS) electronically. The Utah Controlled Substances Act (58-37-22) requires most prescriptions for CS to be issued electronically, effective January 1, 2022. However, the state delayed enforcement of these requirements to allow adequate opportunity for providers to become compliant. This temporary suspension ended on January 1, 2024.

Per Utah law, each prescription issued for a CS must be transmitted electronically as an electronic prescription unless any of the following situations apply.

The prescription is:

- issued for a patient residing in an assisted living facility (as defined by Section 26B-2-201), a long-term care facility (as defined by Section 58-31b-102), or a correctional facility (as defined by Section 64-13-1);
- issued by a veterinarian;
- dispensed by a Department of Veterans Affairs pharmacy;
- issued in an emergency situation as defined in R156-37-605; or
- issued during a temporary technical or electronic failure at either the prescriber's or the pharmacy's location, as defined in R156-37-102(9).

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Supporting rules are located in R156-37-609, including instructions for documentation in the event of technical difficulty or electronic failure. The rule also includes instructions for any pharmacist who receives written, oral, or faxed CS prescriptions.

Exemptions to the requirement include:

- The prescribing practitioner is licensed in a jurisdiction other than Utah with oral confirmation from the prescribing practitioner.
- The prescriber and dispensing pharmacy are the same entity.
- The federal Food and Drug Administration requires the prescription to contain elements that cannot be included in an electronic prescription.
- The prescription drug is under a research protocol.
- The prescription is for a medication that requires compounding two or more ingredients.

The prescribing practitioner or pharmacy must document the exemption in the prescription's hard copy.

If the originating pharmacy cannot fill the electronic CS prescription, the following protocol is required in accordance with R156-37-609(5).

- If the pharmacy can electronically transmit the prescription, the pharmacy shall:
 - contact the ultimate user to determine the pharmacy that is to receive the forward prescription; and
 - document in the . . . pharmacy system the identity of the pharmacy receiving the forward prescription.
- If the pharmacy cannot electronically transmit the prescription, the pharmacy shall:
 - contact the prescribing practitioner;
 - · document . . . the individual contacted at the prescribing office; and
 - · void the prescription.

R156-37-605. Emergency Verbal Prescription of Schedule II Controlled Substances

- 1) Under Subsection 58-37-6(7), in an emergency situation a prescribing practitioner may give an oral prescription for a Schedule II controlled substance if:
 - (a) the quantity dispensed is only sufficient to cover the patient for the emergency period, not to exceed 72 hours;
 - (b)
- (i) the prescribing practitioner has examined the patient within the past 30 days;
- (ii) the patient is under the continuing care of the prescribing practitioner for a chronic disease or ailment; or
- (iii) the prescribing practitioner is covering for another practitioner and has knowledge of the patient's condition; and

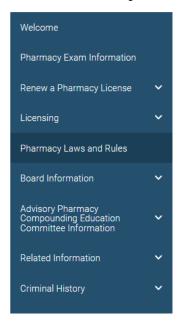
- (c) a written prescription is delivered to the pharmacist within seven business days of the oral order.
- (2) Under Subsection 58-37-6(7), in an emergency situation a pharmacist may fill an oral prescription from a prescribing practitioner for a Schedule II controlled substance if:
 - (a) the amount does not exceed a 72 hour supply; and
 - (b) the pharmacist reasonably believes, or makes a reasonable effort to determine, that the prescribing practitioner is licensed to prescribe the controlled substance.

Additionally, it is considered unprofessional conduct for prescribing practitioners or a pharmacy to fail to seek corrections of technical difficulties or electronic failure that is reasonably within the prescribing practitioner's or pharmacy's control.

Utah pharmacies may still receive and can accept nonelectronic CS prescriptions in accordance with R156-37-609(2). The expectation is not on pharmacists or pharmacies to determine if the provider meets the above-listed exceptions. If the prescription is determined to be valid, and meets the standards to dispense, pharmacists are permitted to fill the prescription (even if not issued electronically) without any additional documentation unless required by rule. Patient care should not be delayed when filling legitimate CS prescriptions simply based on the format the prescription was issued (ie, written, telephone, e-prescribed). The pharmacy needs to submit the correct "origin code" for all CS prescriptions when providing data to the Utah Controlled Substance Database.

All applicable laws and rules are located on the Utah Division of Professional Licensing (DOPL) website at https://dopl.utah.gov/pharmacy/laws-and-rules/.

Pharmacy



Laws and Rules

- DOPL Licensing Act, 58-1 [2]
- General Rule of the Division of Occupational and Professional Licensing, R156-1
- Division Utah Administrative Procedures Act Rule, R156-46b
- Pharmacy Practice Act, 58-17b
- Pharmacy Practice Act Rule, R156-17b
- Utah Controlled Substances Act, 58-37
- Utah Controlled Substance Act Rule, R156-37 [7]
- Controlled Substance Database Act, 58-37f
- Controlled Substance Database Act Rule, R156-37f 🔀
- Health Care Providers Immunity from Liability Act, 58-13 🖸
- Retired Volunteer Health Care Practitioner Act, 58-81
- Utah Health Care Malpractice Act, Title 78B, Chapter 3, Part 4 🗹
- Retired Volunteer Health Care Practitioner Act Rule R156-81
- Dispensing Practice Act, 58-88
- Dispensing Practice Act Rule, R156-88a 🔀

What You Need to Know About the Pharmacy Technician Trainee License

DOPL offers several license types for pharmacy professionals. One of these license types is the pharmacy technician trainee. Trainees can work in a limited capacity while receiving pharmaceutical education and training.

Getting the License

To qualify for the Utah pharmacy technician trainee license, an individual must: 1) document enrollment at an approved training program; and 2) submit a criminal background check.

- 1) Training program documentation must show the program start date before the application submission date. Additionally, the required document is included in the application and must be completed in its entirety, including the applicant's name, the program name, and the correct program representative name and representative's signature.
- 2) The background check must be the original hard copy; any electronic copies are not accepted.

For information on how to obtain the background check, please visit https://bci.utah.gov/.

How to Work Using an Active Technician Trainee License

- 1) Provide a copy of your license to the pharmacist-in-charge (PIC).
- 2) Always wear identification while in the pharmacy.
- 3) Obtain the required practical training hours.
 - a. This might mean that you must advocate for yourself to your PIC and program representative to keep them aware of where you are in meeting the requirement.

Next Step: The Pharmacy Technician License

A trainee is ready to advance to a pharmacy technician license once they:

- complete at least 180 hours of practical training (all hours must be obtained while licensed as a trainee);
- 2) pass either the Pharmacy Technician Certification Exam or the Exam for the Certification of Pharmacy Technicians; **and**
- 3) complete the training program.

Important Things to Note

Any practical training hours obtained before obtaining a license or after a license expires do not qualify; additionally, working within a pharmacy while unlicensed is illegal.

If an individual changes training programs, they are required to notify DOPL.

A pharmacy technician trainee license is valid for 24 months. If all requirements are not fulfilled in the two years granted with the license, then an individual must start the process again (see R156-17b-303a(4)).

R156-17b-303a(4) includes an extension allowance; however, you must show exceptional circumstances to be granted an extension. DOPL has received extension requests that do not show progress within the two-year license period. These situations are generally not considered a qualifying exemption for an extension.

Reminder: Common Violations With Utah Pharmacy Inspections

The top five violations found when DOPL performs an inspection are:

- 1. Not having a current list of licensed employees.
- 2. Not wearing identification.
- 3. Initial/annual CS inventory violations.
- 4. Not signing and dating CS invoices.
- 5. Expired medications on the shelf.
- 1. Pharmacies are required to maintain a list of licensed employees. The list should indicate the name, classification, license number, and expiration date for:
 - pharmacists;
 - interns;
 - · technicians; and
 - · technician trainees.

This requirement is found in the rule under Section R156-17b-614a(5).

- 2. While on the topic of staff, all individuals in the pharmacy must wear personal name tags. This requirement in the Pharmacy Practice Act under Utah Code §58-17b-603 includes all individuals in the pharmacy who have contact with the public or patients. The identification is to be worn in a clearly visible and readable location, indicating the individual's name and position.
- 3. Inventory requirements are in the rule under Section R156-17b-605. Specific errors include that the inventory is missing a signature; see Subsection 2(h). The requirement in the rule is that the consulting pharmacist, PIC, remote dispensing PIC, or dispensing medical practitioner-in-charge shall be responsible for taking required inventories, including indicating the date and time the inventory was completed. It is a requirement for the inventory record to be filed separately from other records. If part of your inventory includes Schedule II CS, you must maintain a perpetual inventory. A copy of the inventories shall be made available to the Division when requested.
- 4. CS invoices must be signed by a pharmacist, dispensing medical practitioner, or other responsible individual as required in the rule under Section R156-17b-614a(11). The receiving individual must record their initials and date of receipt verifying the invoices were accurately received.

5. All out-of-date or expired products must be removed from the shelf and indicated separately on the inventory report, as required in R156-17b-605(1).

The top five issues when DOPL performs a compounding inspection are:

- 1. Not having training for hazardous drugs.
- 2. Not having annual compounding training records.
- 3. Not having compliant compounding records.
- 4. Not having compliant standard operating procedures.
- 5. Having expired stock. See R156-17b-605(1).

Four of the five errors listed above are required by R156-17b-614e. This section of the rule requires compliance with United States Pharmacopeia (USP) Chapters <797> and <795>. Additionally, failing to comply with USP chapters is considered unprofessional conduct in R156-17b-502(2).

All out-of-date or expired products must be removed from the shelf and indicated separately on the inventory report, as required in R156-17b-605(1).

Note: DOPL is seeing an increase of unlicensed individuals practicing in pharmacies – specifically unlicensed pharmacy technician trainees. It is a requirement for trainees to have an active license. Additionally, it is a requirement for the pharmacies to ensure proper licensure for all staff as indicated in R156-17b-603(3)(q).

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