# MINNESOTA BOARD OF PHARMACY

Newsletter to Promote Pharmacy and Drug Law Compliance.

## **Disciplinary Actions Listed Online**

Because of space limitations, information on disciplinary actions is no longer included in the *Minnesota Board of Pharmacy Newsletter*. Before the Board's migration to its new licensing platform, ALIMS, Board disciplinary actions were summarized on the Board's website under the "Resources/FAQs" menu item. The Board now posts disciplinary history using its online license/registration verification service.

#### Guidance on Expedited Partner Therapy for Health Care Providers

Expedited partner therapy (EPT) is the practice of treating sex partners of patients diagnosed with chlamydia or gonorrhea. The patient is provided with a prescription of antibiotics to take to their partner without a provider first examining the partner. While it is considered optimal for the partner to see a provider, there are instances when that is not possible. The use of EPT in these situations allows for exposed sexual partners to receive treatment in a timely manner.

Minnesota Statutes 151.37, Subdivision 2(g) allows practitioners to provide EPT legally. Pharmacists are strongly encouraged to dispense these prescriptions and educate patients and their partners on EPT medications in accordance with public health guidelines. For additional information regarding pharmacist involvement in EPT, Centers for Disease Control and Prevention (CDC) and the Minnesota Department of Health (MDH) offer resources and guidance for health professionals.

#### Access the National Pharmacy Compliance News

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#### Pharmacy Obligations to Limited English Proficiency Individuals: How to Ensure Compliance and Accessible Care

As accessible health care professionals, pharmacists encounter various difficulties in communicating with individuals; this is more complex when a foreign language is involved. The Board has no specific rules or statutes on the matter; however, licensees are obligated to follow all state and federal laws. This subject is grounded in individual civil rights.

A document from the MDH Refugee Health Program provides a primer on laws governing the use of medical interpreters. The United States Department of Health and Human Services provides guidance and frequently asked questions (FAQs) on the matter.

The guidance clarifies the scope of entities that are required to comply, explains who a limited English proficient (LEP) individual is, and outlines the extent of the obligation of providing LEP services.

While federal and state payercontracted pharmacies have clear obligations based on the conditions of participation requirements, pharmacies that are **not** engaged in federal and state aid program contracts may still need to provide these services based on civil laws regarding the prohibition of discrimination.

If you are unclear about your current processes and resources for individuals with LEP, seek guidance from your manager, corporation, or legal department.

#### **Federal DSCSA Compliance Deadline Approaches**

The Drug Supply Chain Security Act (DSCSA) outlines steps to achieve an electronic interoperable process to identify and trace prescription drugs at the package level within the supply chain. The act aims to prevent harmful or counterfeit drugs from entering the supply chain or detect them if they do enter. Pharmacies and pharmacists have certain responsibilities to protect patients from counterfeit or illegitimate drugs; this includes maintaining an electronic interoperable system with trading partners.

Food and Drug Administration's (FDA's) enforcement of these provisions begins in November 2024. See FDA's DSCSA Law and Policies page for updates and guidance on the matter and the pharmacist information page to learn more. The guidance includes a waiver process for certain small dispensers. The waiver process still requires all dispensers to meet the requirements but may allow for a manual rather than an electronic process when a dispenser qualifies. Additional information about drug supply chain topics and DSCSA implementation may be found on the National Association of Boards of Pharmacy<sup>®</sup> website.

#### **Pharmacy Technician Renewal Deadline: December 1**

Pharmacy technician online renewals opened on October 1 and are due no later than 11:59 PM on December 1. In accordance with Minnesota Administrative Rules 6800.3850, renewals submitted after December 1 will incur a late fee (50% of the renewal fee in addition to the renewal fee). If you are not receiving the Board's multiple courtesy renewal email reminders, please update/validate your contact information via the Board's online services, Technician

### **Pharmacy Technician Renewal Deadline: December 1**

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#### Renewal/Minnesota Board of Pharmacy (mn.gov), or by scanning the QR code:



Individuals with overdue technician training or continuing education (CE) will not be able to renew until the outstanding item(s) are submitted to and approved by the Board.

**Notes:** Several types of training programs are accepted by the Board, including but not limited to certification through the Pharmacy Technician Certification Board and the Exam for the Certification of Pharmacy Technicians. Pharmacists and employers are encouraged to utilize the online verification tool to determine if their employees currently owe CE or Board-required technician training.

Avoid renewal registration expiration on December 31, 2024, and continue serving Minnesotans in 2025 as a pharmacy technician. Remember, those with an expired registration are not permitted to work as a pharmacy technician or perform duties reserved for pharmacy technicians.



#### Minnesota Legal Updates: Vaccine Preparation and Administration

Vaccination is an important service that pharmacists provide. Pharmacists are responsible for reviewing patients' history and their need for immunizations, screening for contraindications, educating patients, and preparing and administering the vaccine.

Minnesota laws regarding vaccine administration by pharmacists were affected by legislation that changed in 2024. Those changes occurred in MN Statutes 151.01, Subd 27 and are summarized in the Board's 2024 Legislative Session document and online through the Board's website or the Office of the Revisor of Statutes. Licensees are reminded of the following important considerations for vaccine prescribing, preparation, and administration in pharmacies:

- Vaccine preparation should occur in a clean, designated area away from sinks, and the area should be cleaned and disinfected regularly;
- The designated area and adjacent areas should be free of potential contaminants, including food or beverages;
- Proper hygiene and aseptic technique must be utilized for vaccine preparation and administration;
- A pharmacist must certify the prescription and the prepared dose prior to administration and is required to counsel the patient under MN Rules 6800.0910; and

### Minnesota Legal Updates: Vaccine Preparation and Administration

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The vaccinator must ensure proper identification of the patient and the vaccine(s) to be administered prior to administration. Minnesota laws cite the Advisory Committee on Immunization Practices' (ACIP's) recommendations as the legal requirements. ACIP is a division of CDC that maintains additional vaccine and immunization resources on its website.



#### Mandatory Reporting for Minnesota Prescription Drug Price Transparency Act

The Minnesota Legislature expanded the Minnesota Prescription Drug Price Transparency Act in 2023 to require registration and reporting on drug pricing from drug manufacturers, pharmacy benefit managers, wholesalers, and pharmacies licensed in Minnesota. The Board is not involved in this process or the act. Reporting is based on a quarterly list of drugs released by MDH. Licensed community/outpatient pharmacies should register with MDH at *rxpt.health.mn.us.* Noncommunity/outpatient pharmacies are not required to register and report. Once registered, entities will be able to receive notifications from MDH, access reporting templates, and submit reporting. MDH has posted additional resources online, including reporting guidance, the reporting process for public interest lists, and instructions on navigating the reporting portal.

**Stay connected** with MDH and updates on this reporting initiative by subscribing to MDH's Rx Price Transparency Listserv and monitoring the MDH Rx Price Transparency website. For questions, please email health.rx@state.mn.us.

The Minnesota Board of Pharmacy Newsletter is published by the Minnesota Board of Pharmacy and the National Association of Boards of Pharmacy Foundation<sup>®</sup> (NABPF<sup>®</sup>) 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.

Jill Phillips, MPH, RPh - State News Editor Lemrey "AI" Carter, PharmD, MS, RPh - National News Editor & Executive Editor Megan Pellegrini - Publications and Editorial Manager

335 Randolph Avenue, Suite 230 | St Paul, MN 55102 | https://mn.gov/boards/pharmacy