OREGON BOARD OF PHARMACY

Newsletter to Promote Pharmacy and Drug Law Compliance.

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No. 753 – World Mental Health Day and Mental Health Resources

As pharmacists, we often put the needs of others ahead of our own, but it is important to note that good patient care starts with good self-care. World Mental Health Day is officially commemorated on October 10 every year, and this year's theme was "It is Time to Prioritize Mental Health in the Workplace."

While mental health can often be a very complex subject, taking care of yourself does not have to be. Here are some easy ways to maintain balance, reduce burnout, and prevent compassion fatigue during stressful times:

- Fuel your body with nourishing foods.
- Limit caffeine and alcohol intake.
- Maintain good sleep hygiene.
- Carve out time for play or creative activities.
- Incorporate regular exercise and movement.

- Avoid overcommitting by learning how to say no.
- Establish clear boundaries between work and personal time.

With over 17,000 active licensees in the state of Oregon, the pharmacy community can also serve as the cornerstone of your support network. Check out the resources below for additional information; if you still feel overwhelmed, or even hopeless, do not hesitate to seek professional help. Assess your well-being with tools and resources at National Association of Boards of Pharmacy[®].

General Resources

 The National Alliance on Mental Illness (NAMI): NAMI offers a Health Care Professionals section with resources, information, and support for those dealing with mental health challenges



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or caring for patients with mental illness.

- Centers for Disease Control and Prevention (CDC): CDC provides resources and information on mental wellbeing for health care workers, including coping strategies, support services, and training programs.
- American Pharmacists
 Association (APhA): APhA
 provides resources on well

being and resiliency, including a burnout screening tool and information on managing stress.

- Oregon-Specific Resources
 - Oregon Suicide Prevention: Provides a comprehensive list of mental health and crisis support resources for health care providers.

No. 754 – 'SOS': I Need Help Finding a Rule!

Have you ever needed a specific rule in a hurry but did not know exactly where to find it? Never fear, the **Rule Text Search** is here! The Rule Text Search is available on the Secretary of State (SOS) website and is the most efficient way to scour any chapter of the Oregon Administrative Rules (OARs), not just those for the Oregon Board of Pharmacy.

Visit the link above, then follow these simple instructions:

Step 1: Click on "Search Current Rules."	Search Current Rules
Step 2: Expand the "Rule Text Search" field.	 Rule Text Search Filter By Chapter
Step 3: Under "Filter By Chapter," enter "855," or select "855 – Board of Pharmacy" from the drop-down menu.	855 - Board of Pharmacy Search By NABP Exact Contains Exclude Exact Contains Exclude
Step 4: Enter your keyword(s) in the "Search By" field, then press "Search."	All must match (AND) Any matches (OR) Search Reset

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Step 5: Results will include all instances of the keyword(s) within the current Board of Pharmacy Rules hyperlinked to "Rule Number" in the first column.	Rule Number 855-135-0001	Rule Title Continuing Pharmacy Education: Definitions	Chapter Name Board of Pharmacy
Step 6: Select desired hyperlink, and the keyword(s) will be displayed with yellow highlight.	(6) "CPE Monitor" means the electronic tracking service of the ACPE and the National Association of Boards of Pharmacy (NABP) for monitoring continuing pharmacy education that Pharmacists, Interns, Certified Oregon Pharmacy Technicians and Pharmacy Technicians receive from participating providers;		

No. 755 – Institutional DEA Numbers and Submission Clarification Codes

The Board has recently received complaints about pharmacies turning away prescriptions that contained institutional Drug Enforcement Administration (DEA) numbers, stating that they could not be billed to insurance or that medical residents do not have prescriptive authority. We will address this topic in three distinct sections.

- 1) Are institutional DEA numbers allowed?
 - Institutional DEA numbers are covered in the DEA *Pharmacist's Manual* (revised 2022).
 According to 21 Code of Federal Regulations (CFR) 1301.22(c):

"An individual practitioner who is an agent or employee of a hospital or other institution may, when acting in the normal course of business or employment, administer, dispense, or prescribe controlled substances under the registration of the hospital or other institution which is registered in lieu of being registered him/herself, provided that:

- Such dispensing, administering, or prescribing is done in the usual course of his/her professional practice;
- Such individual practitioner is authorized or permitted to do so by the jurisdiction in which he/she is practicing;
- The hospital or other institution by whom he/she is employed has verified that the individual practitioner is so permitted to dispense, administer, or prescribe drugs within the jurisdiction;
- Such individual practitioner is acting only within the scope of his/ her employment in the hospital or institution;
- 5) The hospital or other institution authorizes the individual practitioner to administer, dispense, or prescribe under the hospital registration and designates a specific internal code number for each individual practitioner so authorized.

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The code number shall consist of numbers, letters, or a combination thereof and shall be a suffix to the institution's DEA registration number, preceded by a hyphen (eg, AP0123456-10 or AP0123456-A12).

- 2) How do I verify that an institutional DEA number is valid?
 - In addition to using the United States
 Department of Justice's Controlled
 Substances Act Registration Validation Tool,
 if you have a question about the validity of
 an institutional DEA number or the medical
 resident's four-digit suffix/identifier, reach out
 to the facility directly. Per 21 CFR 1301.22(c)
 (6):

"A current list of internal codes and the corresponding individual practitioners is kept by the hospital or other institution and is made available at all times to other registrants and law enforcement agencies upon request for the purpose of verifying the authority of the prescribing individual practitioner."

3) How do I resolve a rejected third-party claim for a prescription with an institutional DEA number? your pharmacist-in-charge, lead technician, or other knowledgeable team members because chances are someone you know has experience processing the same rejection you are looking at.

- You down with SCC? Yeah, you know me! In some cases, rejected claims can be resolved with the proper Submission Clarification Code (SCC). These numeric codes provide additional claim information to your thirdparty vendor, which could result in a paid claim without needing further assistance. In addition to the proper SCC, some vendors may require that the medical resident's fourdigit identifier be added to the suffix field, or Intermediate Authorization field, for example.
- When all else fails, phone it in! If you are still stuck, take advantage of your third-party help desk, or call the software vendor, to get help from the professionals.

Understanding your operating system, and all the resources at your disposal, could mean the difference between providing high-quality care and unnecessarily delaying care for a patient in need.

 When in doubt, you could talk it out! – Before turning a prescription away, talk to



No. 756 – Oregon Medical Board IV Hydration Guidance Document

Intravenous (IV) hydration therapy is rapidly expanding in Oregon and across the country, despite a relative lack of regulatory oversight. Acknowledging these gaps, the Oregon Medical Board crafted an *IV Hydration Therapy* guidance document with input from the

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Oregon Board of Pharmacy and the Oregon State Board of Nursing.

• This document covers standards of care, applicable laws and

rules, potential registration requirements, etc. It is concise, yet comprehensive, and relevant whether speaking to another health care provider or educating a member of the public.



No. 757 – Naloxone News

With opioid overdose deaths on the rise in Oregon, the Board remains committed to increasing access to lifesaving, short-acting opioid antagonists (SAOAs) through community partnership. Here is a look at some of the most recent projects and developments:

 Temporary Rule – During its October 2024 meeting, the Board adopted Temporary Rule OAR 855-035-0005(14),

which states, "A business or other establishment that is only distributing over-thecounter short-acting opioid antagonist drugs at no cost is not required to register with the board as a nonprescription drug outlet." This new rule may help school districts or other entities eliminate additional administrative and regulatory burdens, allowing them to focus time and resources where they matter the most: continuing to expand access to SAOAs for as many Oregonians as possible.

- Naloxone Toolkit As part of the Overdose Data to Action program, Oregon Health Authority and Comagine Health developed an expansive toolkit to help pharmacists and other licensees navigate the complex regulatory framework pertaining to naloxone and other SAOAs. The toolkit will have a few distinct components:
- Laws and Rules Overview

 Highlights current laws and rules pertaining to naloxone prescribing and dispensing by Oregonlicensed pharmacists.
- Frequently Asked Questions for Pharmacists

- Addresses a range of topics including training, continuing education (for those interested), patient assistance, and patient education.

Resources for Pharmacists – Includes information on pricing, billing, counseling, and other relevant point-ofcare issues.

No. 758 – Compliance Corner

Though the Board's inspection cycles are biennial, its compliance officers are out in the field inspecting year-round. Recently, officers found boxes of refrigerated COVID-19 vaccines without a **beyond-use date (BUD)** when one was required.

Per the current storage and handling recommendations, **upon refrigeration** between 2°-8°C (36°-46°F), BUDs for the 2024-2025 COVID-19 vaccines should be calculated as follows:

- Moderna Up to 60 days*
- Pfizer-BioNTech Up to 10 weeks*
- Novavax Equivalent to the expiration date assigned by the manufacturer.

*Note: The BUD replaces the manufacturer's expiration date but never extends it. Always use the earliest date.

Protecting patients also means providing vaccines that are in date, so do not overlook this critical detail when providing immunizations to your patients.

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