

UTAH BOARD OF PHARMACY

Newsletter to Promote Pharmacy
and Drug Law Compliance.

Utah Legislative Update 2025: Advancing Pharmacy Practice Through Legislative Change

*By Haley Cain, PharmD Candidate, Class of 2025,
University of Utah College of Pharmacy*

As the 2025 Utah legislative session concluded in March, several pharmacy-related bills have passed that could reshape how pharmacists practice in Utah.

Senate Bill (SB) 312 introduced several key amendments to Utah's Pharmacy Practice Act, aiming to enhance the pharmacist's role within the health care system and improve patient care.

Recognition as Health Care

Providers: The bill formally acknowledged pharmacists as health care providers in specific contexts. This recognition enables pharmacists to bill insurers for consultation services related to these

prescriptions, provided the items are covered under the patient's health benefits plan.

Authority to Prescribe Essential

Medical Devices: Pharmacists are now authorized to prescribe devices necessary for the appropriate delivery of prescribed medications, such as nebulizers, inhaler spacers, and diabetic supplies. This ensures that patients have timely access to essential tools for effective medication administration.

Streamlined Pharmacy Audits:

The legislation modified the requirements for pharmacy audit notifications. Auditors must now provide a specific range of

*Access the National
Pharmacy Compliance News*

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



Utah Legislative Update 2025:

Advancing Pharmacy Practice Through Legislative Change

(cont)

prescription numbers or date ranges in their advanced written notices. This change aims to streamline audit procedures, allowing pharmacists to allocate more time to direct patient care.

Expansion of Charitable Medication

Donations: SB 312 expanded the definition of “eligible pharmacy” under the Charitable Prescription Drug Recycling Act to include Class B pharmacies, typically associated with inpatient settings. This expansion enables these pharmacies to donate unused, unexpired prescription medications to free clinics, thereby enhancing medication access for underserved populations.

House Bill (HB) 81 – Fluoride Amendments prohibited the addition of fluoride to public water systems in Utah, effectively eliminating community water fluoridation statewide. The bill authorized pharmacists to prescribe fluoride supplements to individuals seeking them.

- The Utah Division of Professional Licensing (DOPL) is directed to establish guidelines for pharmacists prescribing fluoride, ensuring safe and effective patient care.
- Pharmacists are also required to provide patient counseling on the appropriate use, storage,

potential side effects, and risks associated with fluoride supplements, as well as guidance on when to seek emergency medical attention.

SB 146 – Glucagon Amendments authorized pharmacists to dispense and facilitate access to glucagon for use in public and private schools under a standing order. Schools may now stock glucagon for emergency use in students with diabetes, even without a patient-specific prescription. This legislation highlights pharmacists’ expanding role in ensuring timely access to life-saving treatment in the event of severe hypoglycemia.

HB 257 – Pharmacy Benefit Amendments will go into effect on July 1, 2026. HB 257 mandates that health benefits plans must use pharmaceutical manufacturer rebates solely to benefit enrollees by reducing out-of-pocket costs at the point of sale, lowering premiums, or enhancing health benefits. Plans may divide the rebate between the enrollee and the plan in proportion to the enrollee’s cost-sharing responsibility, or they may apply a standard rebate amount at the point of sale.

Additionally, the bill ensures that health benefits plans may not require or condition participation in one

pharmacy network on participation in another. This ensures that pharmacies have the autonomy to select which networks they join without facing mandatory cross-participation requirements.

SB 69 – Medication Amendments will go into effect on May 7, 2025. SB 69 introduces regulations concerning pharmaceutical manufacturers’ interactions with 340B entities and contract pharmacies. Prohibited manufacturer practices are as follows:

- **Restricting 340B Participation:** Preventing pharmacies from contracting with 340B entities or vice versa, including denying drug access based on such contracts.
- **Limiting Drug Distribution:** Imposing restrictions on the acquisition, dispensing, or delivery of 340B drugs to authorized locations unless federally prohibited.
- **Mandating Specific Suppliers:** Requiring 340B entities to purchase drugs exclusively from certain suppliers as a condition for accessing 340B pricing.
- **Compelling Data Submission:** Demanding claim or utilization data from 340B entities as a prerequisite for drug acquisition or delivery, unless mandated by federal law.



Utah Code and Refill Dispensing: A Pharmacist's Guide

By Carrie Dunford, MBA, PharmD, Utah Board of Pharmacy

In Utah, pharmacists are guided by specific regulations when dispensing prescriptions. According to Utah Code Section 58-17b-608.1, a pharmacist or pharmacy intern may dispense one or more refills of a legend drug prescription at the time the drug is dispensed, provided certain conditions are met. These include ensuring that the drug is not a controlled substance, the prescription does not specifically prohibit the pharmacist from dispensing a limited days supply (consider a situation where the provider may be concerned about overdose and specifies a limited quantity – eg, amitriptyline – do not dispense more than 60 tablets), and the total dosage

units dispensed (including refills) do not exceed a 100-day supply. Additionally, the pharmacist must use their professional judgment to determine whether dispensing the refill or refills is appropriate at the time. There are instances when it may be better for patient adherence to receive a greater days supply, if the pharmacist feels it is appropriate. Reference to this law could also be a suitable response to an audit from an insurance company to inform them that pharmacists are granted this decision-making authority for the patients they serve.

Utah Administrative Code R156-17b-612 outlines operating standards for prescriptions,

including handling prescription transfers and maintaining refill information. While this section does not explicitly address dispensing larger quantities from refills, it emphasizes the importance of adhering to authorized refill limits and maintaining accurate records. Pharmacists must ensure that the total number of authorized refills is not exceeded during transfers or dispensing.

In summary, a Utah pharmacist may dispense a larger quantity from refills if the prescription meets the criteria outlined in Section 58-17b-608.1 and the pharmacist exercises professional judgment.

Compounding Pharmacy and GLP-1 Status

By Chris Cox, PharmD, Chair, Advisory Pharmacy Compounding Education Committee

The Advisory Pharmacy Compounding Education Committee (APCEC) is committed to keeping Utah's

pharmacy community informed about issues related to compounding pharmacy. One hot topic at both

the state and national levels is the compounding of glucagon-like peptide-1 (GLP-1) receptor

Compounding Pharmacy and GLP-1 Status

(cont)

agonists, particularly semaglutide and tirzepatide.

At our most recent meeting on March 20, 2025, the APCEC reviewed and discussed the ongoing shortages of these medications and their impact on Utah's compounding pharmacies. The availability of GLP-1s and the landscape are influenced by supply chain challenges, Food and Drug Administration statements,

ongoing litigation, patent restrictions, regulatory updates from DOPL, and decisions by the state boards of pharmacy.

Our recommendation to pharmacists and stakeholders at this time is simple: "Stay tuned." The landscape of GLP-1 compounding is evolving rapidly, and compounding pharmacies must remain informed as new information and guidance emerges.

We encourage compounding pharmacists to closely monitor state and federal updates and ensure compliance with all applicable regulations. The APCEC will continue to stay on top of this information and provide updates as they become available.

If you have questions or need further clarification, please feel free to reach out to the APCEC.

The Utah Board of Pharmacy News is published by the Utah 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.

Utah Board of Pharmacy - State News Editor

doplbureau3@utah.gov

dopl.utah.gov/pharm/index.html

Lemrey "Al" Carter, PharmD, MS, RPh - National News Editor & Executive Editor

Megan Pellegrini - Publications and Editorial Manager

PO Box 146741 | Salt Lake City, UT 84114-6741
