

UTAH BOARD OF PHARMACY

*Newsletter to Promote Pharmacy
and Drug Law Compliance.*

New Online Toolkit Supports Utah Pharmacists in Managing CS

*By Amber McBeth, Public Health Consultant, Utah Division
of Professional Licensing (DOPL)*

Pharmacists across Utah can access a powerful new resource designed to support their critical role in managing controlled substances (CS). Earlier this year, the Utah Controlled Substance Database Program (CSD) launched the Utah Controlled Substances Toolkit – a free, online platform that equips health care providers with tools and information to promote the safe prescribing and dispensing of opioids and other controlled medications.

Available at cstoolkit.utah.gov, the platform brings together key resources to help Utah health care providers find trusted, up-to-date information. It includes prescribing guidelines, best practices, patient education materials, and Utah-specific CS laws. Designed for quick and straightforward navigation, the platform aims to streamline access to this information to support informed decision making, enhance patient care, and contribute to efforts to reduce the risk of misuse and diversion across the state.

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Key Features for Pharmacists

Patient Resources

Patient counseling is a key part of pharmacy practice. The Patient Resources section provides downloadable handouts on safe medication use, storage, and disposal, as well as other harm reduction strategies. Additionally, information on local substance use treatments and referral options is included.

Prescriber Resources

While the Prescriber Resources section is primarily geared toward prescribers, it also contains tools that pharmacists may find equally valuable, such as medication conversion calculators, naloxone prescribing guidelines, and information on polysubstance prescriptions.

Controlled Substance Laws

This section offers an easy-to-read synopsis of key Utah CS laws that pertain to respective prescribers. These include dispensing limits, refill policies, documentation, and the required use of the CSD.

Prescribing Guidelines

The toolkit highlights Centers for Disease Control and Prevention (CDC) opioid prescribing guidelines, many of which are reflected in Utah regulations to assess whether an opioid prescription is appropriate in terms of dose, duration, and formulation. In addition to CDC guidelines, there are Utah-specific supplemental guidelines, developed to align with state laws and clinical practice. Staying familiar with these recommendations helps ensure compliance with both national standards and state laws. The guidelines also help pharmacists recognize high-risk prescribing patterns, such as high daily doses or unsafe drug combinations, and provide a clear, evidence-based reference when discussing concerns with prescribers. These conversations are important for maintaining patient safety and professional collaboration.


What's Going On In Utah

This section includes hot topics and some of the latest updates

regarding Utah CS. The page also provides research articles and data specific to Utah. Currently, it houses information on topics such as interstate prescribing, e-prescribing, and gabapentin.

Summary

Pharmacists serve as a vital checkpoint in the safe use of CS, bridging the gap between prescribers and patients. As medication experts, they are often the last line of defense against inappropriate prescribing, dangerous drug interactions, and potential misuse. With the Controlled Substances Toolkit, pharmacists are better equipped to fulfill this gatekeeping role of making informed, evidence-based decisions that protect patient health, uphold legal and ethical standards, and contribute meaningfully to Utah's broader efforts to combat substance misuse.



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2025 Utah Pharmacy Law Update: Therapeutic Interchange and Expanded Pharmacist Authority

By Chris Sheard, MBA, PharmD, Chair of Utah Board of Pharmacy

The 2025 legislative session brought several impactful changes to the Utah Pharmacy Practice Act, reinforcing the state's commitment to expanding pharmacists' roles and improving patient access to care.

Therapeutic Interchanges

The Utah Code §58-17b-605(2) (Pharmacy Practice Act) now authorizes pharmacists to substitute therapeutically equivalent medications without prescriber approval if the following conditions are met:

- The prescriber must notate "similar substitution authorized" on the prescription.
- The substituted medication must be listed on the Therapeutically Similar Drug List, jointly approved by the Utah Medical Board and the Utah Board of Pharmacy.
 - The current **Therapeutically Similar Drug List** is available on the DOPL pharmacy website under Related Information > Resources Related to Pharmacy > Therapeutically Similar Drug List.
- The patient requests or consents to the substitution.
- The substitution must meet at least one of the following criteria:
 - result in a decreased cost to the patient;
 - be covered on the patient's health benefits plan formulary as a "preferred" drug, or at the same or lower payment tier;

- be necessary because the pharmacist does not have the originally prescribed medication available to dispense; or
- be deemed beneficial to the patient by both the patient and pharmacist.

Drug categories included in the Therapeutically Similar Drug List:

- a) Insulin (Regular, Neutral Protamine Hagedorn, Mix, Long Acting, and Rapid Acting)
- b) Diabetic Testing Supplies
- c) Asthma/Chronic Obstructive Pulmonary Disease
 - a. Albuterol and Levalbuterol Inhalers
 - b. Long-Acting Beta Agonists (inhaled and nebulized)
 - c. Inhaled Steroids
 - d. Combination Steroids/Long-Acting Beta Agonists
 - e. Combination Muscarinic Antagonists/Long-Acting Beta Agonists
 - f. Long-Acting Muscarinic Antagonists (inhaled and nebulized)

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(cont)

d) Allergy

- a. Nasal Antihistamines
- b. Nasal Steroids

e) Epinephrine Autoinjectors

If a substitute for a therapeutically similar medication is made, pharmacy staff must:

- a) indicate on the prescription file both the name of the prescribed medication and the therapeutically similar medication dispensed;
- b) notify the provider of the substitution; and
- c) counsel the patient on the use and expected response to the therapeutically similar drug.

Prescription Devices

Under Utah Code §58-17b-610.8, pharmacists may now prescribe:

- nebulizers;
- spacers (for use with nebulizers and inhalers); and
- diabetic supplies.

Pharmacists are permitted to issue a prescription when the device is determined to be necessary to ensure the appropriate delivery of the prescribed drug and if the device was not prescribed by the provider.

Pharmacists Recognized as Health Care Providers

Pharmacists are now recognized as health care providers in specific situations, enabling pharmacists to issue prescriptions and submit their services for reimbursement.

Situations where a pharmacist can issue a prescription and be recognized as a health care provider by health benefits plans include the following:

- Prescribing devices as outlined above (spacers, nebulizers, and diabetic supplies)
- Providing consultative services and issuing prescriptions under public health guidance documents, per Utah Code §58-17b-627(3)(a)

Current pharmacy guidance documents:

- HIV pre-exposure prophylaxis and post-exposure prophylaxis
- Self-administered hormonal contraceptives
- Smoking cessation therapies
- Naloxone
- Fluoride

Current pharmacy guidance documents can be found on the DOPL Pharmacy Resources page at <https://dopl.utah.gov/pharmacy/resources/>.

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