

ALABAMA STATE BOARD OF PHARMACY

*Newsletter to Promote Pharmacy
and Drug Law Compliance.*

Board Update and Regulatory News

As we enter the new year, Alabama State Board of Pharmacy staff remains actively engaged across enforcement, regulatory, and interagency efforts, while also managing one of the busiest

renewal seasons on record. The following highlights reflect recent activity, upcoming changes, and important reminders for our licensees.

Interagency Collaboration and Enforcement Activity

Board staff met with the Office of the Attorney General in January regarding a recent case involving injectable products and research-grade peptides. During this meeting, Board staff provided expert insight on appropriate aseptic technique; storage, handling, dispensing, and beyond-use dating of injectable drugs; the use of peptides labeled “for research use only” in humans; and the economic realities of gray-market peptides compared to Food and Drug Administration-approved

products. These discussions underscore the Board’s ongoing role as a subject matter expert in issues involving pharmacy practice and public safety. Staff also attended a scheduled hearing in Cullman County, AL, involving the use and dispensing of research-grade peptides in a weight-loss clinic operated by a nurse under a collaborative practice agreement with a physician. That case has since been resolved, and the clinic remains closed.

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Interagency Collaboration and Enforcement Activity (cont)

Throughout this process, the Board has worked closely with representatives from the Alabama Medical Board and the Alabama Board of Nursing, the organizations regulating the actual and potential defendants in this, and any future cases related to this clinic. While

the clinic had previously sourced products from a compounding pharmacy, it ultimately made the decision to purchase peptides labeled “not for human use” directly from a company not regulated by any licensing board. This represents a gray-market loophole

that will require legislative action to fully address. The Board’s role in this and similar matters remains focused on the appropriateness of products used and the proper storage, handling, and dispensing of sterile products, including from multidose containers.



Board Membership Updates

We have received notice of the pending appointment of three of the five new Board members:

- **Jeb Mitchell (Birmingham)** – Specialty seat
- **Alecia Booker (Tuscaloosa)** – Technician seat
- **Darrelle Knight (Birmingham)** – Institutional seat

We have enjoyed welcoming and working with these new members. At the time this newsletter was written, confirmation regarding appointments to the academic pharmacist seat or the consumer member seat had not yet been received.

Opioid Overdose, Addiction Council, and CE

Staff encourages all practitioners to visit alahope.org, where a series of continuing education (CE)

modules related to substance use disorder is available. These resources are valuable tools

in supporting patient care and addressing the ongoing opioid crisis in Alabama.

Renewal Season Comes to a Close

I would like to sincerely thank Board staff members for their diligence and professionalism

during an exceptionally busy renewal season. More than 22,000 licenses, permits, and

registrations were due for renewal by December 31, 2025.

AI in Government and Health Care

The Office of Information Technology in Montgomery, AL, recently hosted Alabama AI Day. Representatives from Microsoft, Google, and OpenAI presented on the current state of artificial intelligence (AI), including real-world examples of AI projects being implemented within government agencies.

Importantly, all three companies discussed “for-government” AI models designed to ensure that agency data are not exposed to public models. Practitioners considering the use of AI tools should keep in mind the adage, “If you aren’t paying, you are the product.” Free AI tools typically use evaluated data to train public models, creating significant risk for

violations of the Health Insurance Portability and Accountability Act (of 1996) and the Health Information Technology for Economic and Clinical Health Act. While the adoption of AI workflows is inevitable, those workflows must include strong security controls and assurances that sensitive data remain protected and nonpublic.

Board Counsel Transition

We extend our gratitude to Jennifer Neumann for her service as board counsel over the past three years.

We also look forward to working with Aaron Dettling, whose contract is expected to begin in January,

pending the completion of required state procurement approvals.



Rulemaking Activity and Public Comment Opportunities

The Board currently has several rules in the formal rulemaking process. Licensees and stakeholders are encouraged to review proposed changes and submit comments. Additional information is available on the “Statutes & Rules” page of the Board’s website.

The following rules are scheduled for public hearing on February 11, 2026, with written comments due by end of business on February 6, 2026, to anolen@albop.com:

- 680-X-2-.40 – Non-Disciplinary Penalties
- 680-X-2-.35 – Licensing Fees for Initial Pharmacy Permits, Biennial Permit Renewal, and Transfer of Ownership
- 680-X-2-.34 – Fees for Applicants for Pharmacist License and Biennial License Renewal
- 680-X-2-.23 – Drug Manufacturers; Wholesale Distributors; Private Label Distributors, Repackagers, Third-Party Logistics Providers, Outsourcing Facilities; Reverse Distributors; Retail Medical Oxygen Suppliers
- 680-X-2-.16 – Practical Training Program Standards
- 680-X-2-.14 – The Role of Pharmacy Technicians
- 680-X-2-.05 – Community Pharmacies

PDMP Collaboration and Data Quality Improvements

Staff recently met with representatives from the Alabama Department of Public Health to focus on the significant progress that the PDMP department has made in reducing submission errors, as well as in identifying the most common remaining issues. The most frequent submission error continues to be invalid prescriber Drug Enforcement Administration numbers, often resulting from placeholder

transactions for emergency kits or similar situations where medications are tracked in dispensing systems but not actually dispensed. The second most common issue is missing a patient address or demographic information. Board staff discussed opportunities for improved and more frequent data exchange with the PDMP team. Staff will be working to enhance data-sharing capabilities. We strongly encourage

pharmacists to establish PDMP accounts, ensure pharmacy hours of operation are current, and consult with dispensing software vendors to enable real-time PDMP interfaces. Many systems already support PDMP integration and simply require activation. A list of existing interfaces will be posted on the Board's website in the near future.

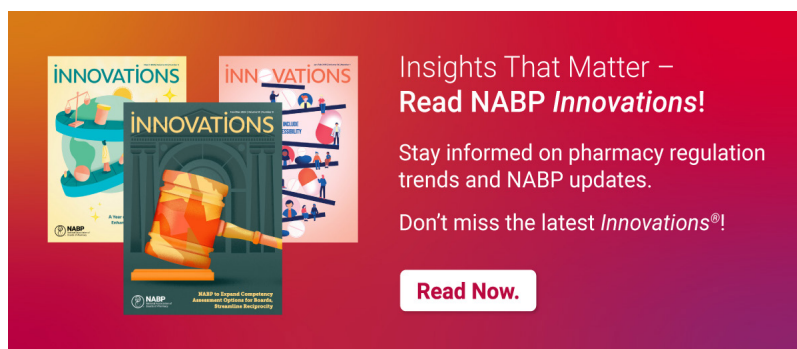
Gateway Updates and Required Notifications

Please remember that updates such as changes of employment, ownership, supervising pharmacist, and similar items must be submitted through the Licensee

Gateway system. Once logged in, all applicable change options should be available for selection.

As always, we appreciate your continued professionalism and

commitment to protecting the health and safety of the citizens of Alabama.



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Anne Marie Nolen, PharmD, MPH, BCACP, Administrative Supervisor - State News Editor

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

Megan Pellegrini - Publications and Editorial Manager

111 Village St | Birmingham, AL 35242 | Tel: 205/981-2280 | Fax: 205/981-2330