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MASSACHUSETTS BOARD OF REGISTRATION IN PHARMACY

Newsletter to Promote Pharmacy and Drug Law Compliance.

Labeling Update

The updated Shield Law 2.0 that was signed into law on August 7, 2025, brings a new prescription labeling requirement.

Upon prescriber request, pharmacies are required to label Schedule VI medications prescribed for reproductive or gender-affirming care with the **name of the health care practice** instead of the individual prescriber. This provides an extra layer of privacy and protection for these prescribers.

This exception does not apply to federally scheduled controlled substances (CS), such as testosterone. Prescription labels for federally scheduled CS will continue to require a prescriber name, in accordance with federal law.

There are several content and print size labeling requirements for filled CS prescriptions. They can be found in Massachusetts General Laws 94C §21, the United States Pharmacopeia (USP), and federal regulations. The Massachusetts Board of Registration in Pharmacy's regulations in 247 Code of Massachusetts Regulations 9.00 also contain additional labeling requirements.

In general, prescription labels affixed to a patient container must include the following:

- Pharmacy name and address
- Pharmacy phone number, if a sterile or complex nonsterile compounding pharmacy
- Serial number of the prescription

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(cont)

- Name of the patient, unless it is a veterinary prescription
- Name of prescriber or health care practice, as permitted above
- Filling pharmacist's initials
- Date of fill
- Name of CS and strength or concentration
- When a less expensive product is substituted, the phrase "Interchange (or IC): Generic name and manufacturer of less expensive drug"
- Directions for use
- Quantity
- Cautionary statements, if any
- The earliest of:
  - beyond-use date of a compounded preparation or any drug requiring manipulation or reconstitution (eg, amoxicillin suspension); or
  - one year from the date the drug is dispensed (USP <7>); or
  - expiration date from the manufacturer's container.
- If the prescription was compounded by the pharmacy, a statement that the drug is either a sterile or nonsterile compounded drug preparation
- For a Schedule II, III, or IV drug, the words: "Caution: Federal law prohibits the transfer of this drug to any person other than the patient for whom it was prescribed."

Substance Use Disorder Harm Reduction Reminders

Section 5 and 8 of the Act Relative to Treatments and Coverage for Substance Use Disorder and Recovery Coach Licensure went into effect on July 1, 2025, and mandates most insurance providers to cover **naloxone** without prior authorization or any cost sharing (copay).

Upon hospital discharge, the act also requires the hospital to prescribe or dispense at least two doses of an opioid antagonist to patients with a history of opioid use or exposure. This may drive people to obtain naloxone at retail pharmacies so they can purchase it using their insurance. Retail pharmacies may see a subsequent increase in naloxone requests.

The sale of **hypodermic syringes and needles** is permitted by law, without quantity, size, or syringe type (eg, intramuscular syringes) restrictions. They may be sold by pharmacies to any person of any age, without a prescription, and without identification (ID).

Although state law requires a pharmacy to check **ID** when dispensing a prescription for a federally scheduled CS or gabapentin, there are situations when a pharmacy may legally dispense these medications without it. This allows those patients who do not have a government-issued photo ID to access their prescribed medications.

Prescriptions may be dispensed without ID if:

- the reason is documented;
- the patient or agent of the patient prints their name and address on the reverse side of the prescription and signs their name (or in the case of an electronic prescription, provides an electronic signature); and
- the pharmacist enters "cust signed rx" in the prescription monitoring program (PMP) customer ID field (AIR05), rather than leaving the field blank.

Review the PMP data submission dispenser guide for complete details.

Pharmacist CE Audits

As a reminder, the Board may audit pharmacists to ensure compliance with the annual continuing education (CE) requirement, so be sure to get an early start on your 2026 CE credits!

To help you stay on track, the Board has a detailed overview of all CE requirements, including live, law, collaborative drug therapy management, immunization, and compounding. It also outlines the different duties that require compounding CE, as well as which programs "count" for each type of compounding.

The Accreditation Council for Pharmacy Education Universal Activity Number (UAN) "compounding" code is not specific for sterile or complex nonsterile compounding, so do not depend on it to meet the requirement. Compounding program titles must include terms such as sterile, nonsterile, intravenous, USP <797>, or USP <795> to be accepted for the specific type of compounding CE you are seeking.

Please note that USP <800> courses that are not specific for either sterile or nonsterile compounding would not be acceptable for compounding credit.

If you feel that a program without one of the keywords listed in the Board policy should be acceptable for either sterile or complex nonsterile compounding, please email the Board with the title, UAN number, and objectives.

Licensing Portal Tips

The licensing system allows **individual** licensees to renew, print license copies, request license and intern hour verifications, change email and address, and apply for a name change.

Pharmacies can renew, apply for waivers, change name, relocate, and renovate, as well as request license verifications and print license copies.

This user manual provides guidance on password requirements and other helpful information.

Did You Know?

- Have a pharmacy law practice question? Ask us at pharmacy.admin@mass.gov.
- You can be notified of changes to Massachusetts regulations and other updates by emailing us at pharmacy.admin@mass.gov and asking to be added to the Board's email distribution list.
- Confused about which IDs are acceptable for dispensing federally scheduled CS and gabapentin? Review the PMP's pharmacy reporting and data submission web page, especially Appendix B of the PMP data submission dispenser guide.
- If you are leaving the manager of record (MOR) position at a Massachusetts-located pharmacy, do not forget that you must **personally email** the Board. Otherwise, if the pharmacy does not submit a timely change of MOR application, you may be responsible for pharmacy issues after leaving. Review this reporting overview for other requirements.

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