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PHARMACY RULES COMMITTEE
of the
PHARMACY EXAMINING BOARD

Room 121A, 1400 East Washington Avenue, Madison, WI 53703
Contact: Dan Williams (608) 266-2112
June 3, 2015

Notice: The following agenda describes the issues that the Committee plans to consider at the meeting. At the time of the meeting, items may be removed from the agenda. ***A quorum of the Board may be present during any committee meetings.***

AGENDA

8:00 A.M.

OPEN SESSION – CALL TO ORDER

A. Approval of Agenda (1)

B. Legislation and Rule Matters – Discussion and Consideration

1) **Proposals for Phar 14 Relating to Medical Oxygen (2-3)**
2) **Proposals for Phar 7 Relating to Practice of Pharmacy (Technicians) (4-6)**
3) **Update on Legislation and Pending or Possible Rulemaking Projects**

C. Public Comments

ADJOURNMENT

State of Wisconsin

Date of enactment: **March 23, 2015**
2015 Senate Bill 13 Date of publication*: **March 24, 2015**

2015 WISCONSIN ACT 3

AN ACT ***to amend*** 450.03 (1) (e), 450.08 (2) (b) and 450.11 (3); and ***to create*** 440.08 (2) (a) 38h. and 450.076 of the statutes; **relating to:** licensure of home medical oxygen providers, providing an exemption from emergency rule procedures, and granting rule−making authority.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 440.08 (2) (a) 38h. of the statutes is created to read:

440.08 **(2)** (a) 38h. Home medical oxygen provider: June 1 of each even−numbered year.

SECTION 2. 450.03 (1) (e) of the statutes is amended to read:

450.03 **(1)** (e) Any person lawfully practicing within the scope of a license, permit, registration, certificate, or certification granted to provide home medical oxygen under s. 450.076, to practice professional or practical nursing or nurse−midwifery under ch. 441, to practice dentistry or dental hygiene under ch. 447, to practice medicine and surgery under ch. 448, to practice optometry under ch. 449 or to practice veterinary medicine under ch. 453, or as otherwise provided by statute.

SECTION 3. 450.076 of the statutes is created to read:

450.076 Home medical oxygen providers; licensure. (1) DEFINITIONS. In this section:

(a) "Home medical oxygen provider" means a person that provides medical oxygen directly to a consumer or patient in this state for that consumer's or patient's own use.

(b) "Licensed provider" means a home medical oxygen provider licensed under this section.

(c) "Medical oxygen" means oxygen that is a prescription drug.

(2) LICENSE REQUIRED. (a) Except as provided in par. (b), no person may operate as a home medical oxygen provider, use the title "home medical oxygen provider" or any similar title, or hold itself out as a home medical oxygen provider unless the person is a licensed provider.

(b) No license under this section is required for any of the following:

1. A person that holds a current credential, as defined in s. 440.01 (2) (a), and is acting within the scope of that credential.

2. A hospital, excluding any home medical oxygen provider that is owned or operated by a hospital.

3. An employee or agent of a licensed provider acting within the scope of his or her employment or agency.

(3) LICENSURE. The board may grant a license to act as a home medical oxygen provider to a person that does all of the following:

(a) Submits an application for licensure on a form provided by the board.

(b) Pays the fee specified in s. 440.05 (1).

(c) Satisfies any other requirements established by the board by rule.

(4) RULES. The board shall promulgate rules implementing this section. The rules shall include rules gov-

* Section 991.11, WISCONSIN STATUTES: Effective date of acts. "Every act and every portion of an act enacted by the legislature over the governor's partial veto which does not expressly prescribe the time when it takes effect shall take effect on the day after its date of publication."

erning the professional conduct of licensed providers and their employees and agents.

SECTION 4. 450.08 (2) (b) of the statutes is amended to read:

450.08 **(2)** (b) A pharmacy, manufacturer's ~~or~~, distributor's, or home medical oxygen provider's license may be renewed by paying the applicable fee determined by the department under s. 440.03 (9) (a) on or before the applicable renewal date specified under s. 440.08 (2) (a).

SECTION 5. 450.11 (3) of the statutes is amended to read:

450.11 **(3)** PREPARATION OF PRESCRIPTION DRUGS. Except as provided in sub. (1i) (b) and s. 450.076, no person other than a pharmacist or practitioner or their agents and employees as directed, supervised, and inspected by the pharmacist or practitioner may prepare, compound, dispense, or prepare for delivery for a patient any prescription drug.

SECTION 6. Nonstatutory provisions.

(1) EMERGENCY RULES. The pharmacy examining board may promulgate emergency rules under section 227.24 of the statutes implementing section 450.076 of the statutes, as created by this act. Notwithstanding section 227.24 (1) (c) and (2) of the statutes, emergency rules promulgated under this subsection remain in effect until June 30, 2017, or the date on which permanent rules take effect, whichever is sooner. Notwithstanding section 227.24 (1) (a) and (3) of the statutes, the board is not required to provide evidence that promulgating a rule under this subsection as an emergency rule is necessary for the preservation of the public peace, health, safety, or welfare and is not required to provide a finding of emergency for a rule promulgated under this subsection.

(2) REGULATION OF HOME MEDICAL OXYGEN PROVIDERS. The pharmacy examining board shall administer section 450.076 of the statutes, as created by this act, on a case−by−case basis prior to the effective date of the rules promulgated under section 450.076 (4) of the statutes.

SECTION 7. Effective date.

(1) The treatment of section 450.076 (2) (a) of the statutes takes effect on May 1, 2015, or on the day after publication, whichever is later.

Chapter Phar 7 – Pharmacy Practice Revisions:
Technician Roles

Prepared by:
PSW

Disclosure:
Recommendations and/or points for consideration that are outlined below are meant for the purposes of generating discussion only. They are not final positions of the Pharmacy Society of Wisconsin or its members.

Background & Methods:
In 2012, PSW formed a Taskforce for Advancing Pharmacy Technician Practice to discuss matters relating to pharmacy technicians and their roles in the pharmacy. Taskforce members were surveyed on topics related to technicians and a summary of those survey results from 10 people is provided below.

Survey Question	Survey Responses (n=10)
On a scale of 1 - 10 (10 being very satisfied), how satisfied are you with the roles pharmacy technicians are able to assume at your practice site.	Average rating: 7
As the taskforce considers possible expansion of pharmacy technician roles, some Wisconsin pharmacy statutes/rules may need to be updated. Are there specific statutes/rules related to the practice of pharmacy technicians that you would like to see addressed by the taskforce?	Yes: 7 No: 1 Blank: 2
Which statutes/rules? (if any)	▪ Technician/pharmacist ratios, work that needs to be verified by a pharmacist, simple compounding ▪ RPh/tech ratio ▪ Allowing techs to dispense refills (not new prescriptions) to patients similar to other states. ▪ Ability for a technician to give a transfers ▪ Not sure the statutes but the proximity of the tech/RPh and also the ratio ▪ Tech ratio, tech-check-tech ▪ 7.015 identifying the role of the pharmacy technician, Credentialing requirements ▪ Like to see added responsibilities to allow technicians to be the "final check; for certain dispensing functions if an organization utilizes barcode dispensing.
Some members of PSW have suggested that certain pharmacy technician practice regulations impede their practice. On a scale of 1 - 5 (5 being very important), how important are these issues to your practice site?	1. Consider a change to the pharmacist/technician ratio a. Average: 3.7 2. Consider creating rules for expansion of “Tech-Check-Tech” a. Average: 3.8

	3. Expand pharmacy technician roles to be more independently involved in the medication reconciliation process a. Average: 4.3
Are there roles within your pharmacy practice that you would like to delegate to a pharmacy technician (if legally allowed)?	Yes: 8 No: 1 Blank: 1
Do you believe that additional credentialing (training, certification, licensure, etc.) of pharmacy technicians should be required in Wisconsin?	Yes: 9 No: 1
Please explain response to previous question	▪ I support formalized education and training, as well as licensure, which will allow techs to perform at a higher level. This will also ensure that pharmacy technicians view their positions as more professional and more of a career. Additionally, pharmacists will be able to spend more time with patients if all technicians have a higher level of education and training. ▪ There would be a great deal of cost associated with this, incurred by techs or pharmacies. ▪ May need different level of credentialing based on roles, would like to see state registration ▪ I think it would be a good idea to create a registration/licensing system to safeguard against tech with problematic histories. ▪ It would improve the hiring process since you could tell level of education easier. ▪ This would depend on the specific duties delegated or able to be delegated. ▪ Requires more than just the certification exam. I would like to see a course of education that results in a certification or licensure. ▪ At a minimum I believe we need to start by registering technicians. In addition, some type of training/education or competency requirement seems necessary with an expansion of roles. ▪ The amount of responsibility placed on many technicians warrants implementation of credentialing ▪ Need some minimum standards in place to assure ALL technicians have a baseline knowledge/concept of the role and responsibilities that technicians can provide
What concerns do you have about additional credentialing requirements for pharmacy technicians?	▪ Slow progress, I would like us to have a 5- year plan for progression ▪ The cost of doing this. Current "certified" techs I've had experience with do not seem to necessarily be better prepared to perform duties. Pharmacy sites should dictate

	the expectations, training, and expertise needed to perform role within that site. ▪ Additional salary costs, whether there will sufficient staff that meet the requirements to fill open positions. ▪ Extra barrier to employment. Cost to employee. ▪ Lack of available technicians, Would pay of technicians change?, Would the entire staff of a pharmacy need to be credentialed or just a single person? ▪ Time to fill open positions when necessary ▪ Increased cost to employers, decreased availability of qualified employees
As the taskforce works to consider pharmacy technician roles and credentialing needed to take on those roles, what discussion questions would you like to see the group consider?	▪ Progression plan, plans for current pharmacy technicians ▪ Perhaps a new role should be created - e.g. Pharmacist assistant. Since there is such a wide variety of roles that "techs" currently perform, it seems that we need to differentiate more. If one's role is to count pills all day long we probably don't need to credential that person. We probably do want to credential someone who is going to be involved as more of a Pharmacist Assistant, who would allowed to perform higher level duties. ▪ Are there 2 levels of technicians? What responsibilities truly require pharmacists judgement and shouldn't be delegated? ▪ What level of requirement is best (registration, certification, etc)? How to keep the cost to employee reasonable? ▪ Who would oversee the training process for the tech schools (or others) involved., Would the state be involved or just use the national categories., How would the present technicians status changes (grandfathered in or other transition based on years of service) and if a test is involved what happens if the person fails? ▪ What are the comfort levels and limits that the RPh is willing to give up ▪ Is it possible for techs to take on additional roles without education and training? How will pharmacies pay for the increased wages of more highly skilled employees? ▪ What credentials should be required (registration/certification/licensure/combination)?, What type of increased roles might technicians take on and as a result are there additional education/training/credentialing requirements necessary. ▪ Criteria for registration vs. licensing? Example requirement of PTCB exam and/or completion of an accredited training program.