



**TEXAS STATE BOARD OF PHARMACY  
REPORT TO THE TEXAS PHARMACY CONGRESS  
May 10, 2018**

**I. CURRENT ISSUES**

**A. Task Force on Operation of Rural Hospital Pharmacies** – The task force is charged with reviewing the current regulations and possibly developing recommendations for changes to the regulations relating to the Texas Occupation Code, Chapter 562, Subchapter C., Section 562.1011, Operation of Class C Pharmacy in Certain Rural Hospitals. The task force met on April 17 and June 20.

**B. Texas Prescription Monitoring Program** Statistics for FY2018

	1 <sup>ST</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quart er	Year-to- Date
Users Registere d	4,381	10,143	13,883		28,406
Searches	1,345,7 37	1,712,5 10	2,336,7 55		5,395,00 2
Prescripti ons Dispense d	9,878,6 36	9,740,3 14	9,788,9 16		29,407,8 66

FY2017 Users: 58,642  
+ FY2018 Users: 28,406  
TOTAL: 87,048

**II. ADOPTED RULES (August 7, 2018 Meeting – Effective date mid-September 2018)**

**A. §291.1 concerning Pharmacy License Applications** - The amendments update the requirements for maintaining a log of pharmacy personnel initials or identification codes.

**B. §291.3 Concerning Change of Location By Sterile Compounding Pharmacies** - The amendments add inspection requirements for sterile compounding pharmacies (Class A-S, C-S, and E-S) and nuclear pharmacies (Class B) when the pharmacy changes location.

**C. §291.19 Concerning Pharmacy Inspection Warning Notices** - The amendments update the response required to a written warning notice.

**D. §291.133 Concerning Fingertip and Media Fill Testing in Pharmacies Under Common Ownership** - The amendments update the media fill and aseptic procedures test requirements for all sterile compounding personnel in Class A-S, Class B, Class C-S and Class E-S pharmacies; clarify the testing requirements for supervisory pharmacists working in multiple pharmacies under common ownership; clarify the environmental testing certification procedures; and correct grammatical errors.

**E. §295.9 Concerning Education Requirements for Pharmacists** - The amendments add a requirement of one hour of continuing education on opioid abuse for pharmacist license reactivation.

**F. §295.11 Concerning Notification to Consumers** - The amendments update the requirements for pharmacies to post a sign notifying consumers of the Board's contact information for filing complaints regarding the practice of pharmacy, and permits a pharmacy to utilize an electronic messaging system in lieu of such a sign.

**G. §305.2 Concerning Pharmacy Technician Training Programs** - The amendments clarify the standard for Board-approved pharmacy technician training programs by recognizing that pharmacy technician training programs are jointly accredited by the American Society of Health-System Pharmacists and the Accreditation Council on Pharmacy Education.

**H. §§291.32 and 291.33 Concerning Automation** – The amendments update the rules regarding automation to allow for prepackaged medications in automated dispensing systems.

**I. §291.29 Concerning Red Flag Checklist** – The amendments update the red flag checklist.

**J. §291.34 Concerning Professional Responsibility** – The amendments clarify the responsibility of an owner of a Class A pharmacy to ensuring its agents and employees engage in appropriate decisions regarding dispensing of valid prescriptions

**II. PROPOSED RULES (August 7, 2018 – The rules will be considered by the Board for final adoption at the November 6, 2018, meeting)**

**A. §281.62 Concerning Aggravating and Mitigating Factors** - The amendments, if adopted, update the factors which may merit an increase or decrease in the severity of disciplinary action imposed by the Board.

**B. §281.65 Concerning Schedule of Administrative Penalties** - The amendments, if adopted, update the administrative penalties the Board may assess in disciplinary matters.

**C. §291.17 Concerning Inventory Requirements** - The amendments, if adopted, update the requirements for taking inventories upon change of ownership and closure of pharmacies, and correct grammatical errors.

**D. §291.28 Concerning Confidential Records** - The amendments, if adopted, update the requirements for responding to a request for a patient's confidential records, to be consistent with §181.102 of the Health and Safety Code.

**E. §291.33 Concerning Patient Counseling** - The amendments, if adopted, clarify the pharmacist's patient counseling duties by expressly prohibiting a pharmacy's computer

system from asking questions of the patient intended to screen and/or limit interaction with the pharmacist.

**F. §291.34 Concerning Records** - The amendments, if adopted, allow the utilization of and specify recordkeeping requirements for prescription drug orders dispensed for patients institutionalized in licensed health care institutions, as authorized in Title 40, Part 1, Chapter 19 of the Texas Administrative Code; allow a pharmacist to dispense less than the quantity prescribed at the request of the patient or patient's agent; clarify that a rubber stamp may not be used as the signature of a practitioner; and correct grammatical errors.

**G. §291.74 Concerning the Operation of Rural Hospital Pharmacies** – The amendments, if adopted, implement recommendation of the Task Force on the Operation of Rural Hospital Pharmacies.

**H. §291.104 Concerning Reporting Requirements for Non-Resident Pharmacies** - The amendments, if adopted, update the time period to report required prescription information from a Class E pharmacy to the Texas Prescription Monitoring Program, to be consistent with section 481.075(q) of the Texas Controlled Substances Act, and correct grammatical errors.

**I. §291.129 Concerning Satellite Pharmacies** - The amendments, if adopted, update the application requirements for Class A and Class C pharmacies and correct grammatical errors.

**J. §315.6 Concerning Electronic Reporting to the Prescription Monitoring Program** - The amendments, if adopted, update the time period to report required prescription information to the Texas Prescription Monitoring Program to be consistent with section 481.075(q) of the Texas Controlled Substances Act, add a requirement to correct inaccurate data that was submitted to PMP, and correct grammatical errors.

**K. §315.16 Concerning Access to the Prescription Monitoring Program** - The new rule, if adopted, creates requirements for practitioners and pharmacists to consult the Texas Prescription Monitoring Program database and clarifies that PMP information may only be accessed as authorized in section 481.076 of the Texas Controlled Substances Act.