

**KENTUCKY BOARD OF PHARMACY  
DOWNTOWN MARRIOTT LOUISVILLE  
280 WEST JEFFERSON STREET  
LOUISVILLE KY 40202  
November 2-3, 2012 (following Board Meeting on Nov. 2)**

**BOARD RETREAT**

**AGENDA**

**The Kentucky Board of Pharmacy serves the Commonwealth to promote, preserve, and protect the public health, safety, and welfare through effective regulation of the practice of pharmacy. The Kentucky Board of Pharmacy accomplishes this mission through the examination, testing, and credentialing of prospective pharmacists; regulation, discipline of all licensed pharmacists; and through appropriate communication of information and laws pertaining to the practice of pharmacy in Kentucky.**

- I. CALL TO ORDER
- II. INTRODUCTIONS
- III. ITEMS for discussion
  - Prescription Consolidation Review
  - Kentucky Orthotic and Prosthetic Board: KRS 319
  - CAPP: Center for Advanced Pharmacy Practice
  - Prescriptive Authority for Pharmacists
  - Naloxone Overdose Prevention Program
  - PBMs:
    - Community Pharmacy Accreditation
    - HB 1
    - Compounding for Office Administration or Institutional
    - Hazardous Waste-EPA
    - Discussion on Early Refill

**\* Casual dress attire**

**SCHEDULE:**

Friday, November 2, 2012

Time permitting Retreat Agenda items will commence on Friday afternoon

Saturday, November 3, 2012

- 8:30a.m.-12:00p.m. Discussion of Agenda items
- 12:00p.m.-1:30p.m. Lunch on your own (Board Members lunch will be provided at the Marriott Resort)
- 1:30p.m.-5:00 p.m. Discussion of Agenda items

**MINUTES**  
**KENTUCKY BOARD OF PHARMACY**

Louisville Downtown Marriott

Louisville, Kentucky

**November 2 and 3, 2012**

**CALL TO ORDER:** A regular meeting of the Kentucky Board of Pharmacy was held at the Downtown Marriott, Louisville, Kentucky. President Thornbury called the meeting to order at 9:24 a.m. President Thornbury observed a moment of silence for the Hurricane Sandy victims and all those dealing with personal issues.

Members present: Joel Thornbury, Brian DeWire, Deborah Brewer, Scott Greenwell, Larry Hadley and Cathy Hanna. Staff: Mike Bursleson, Executive Director; Steve Hart, Pharmacy Investigations and Inspections Coordinator; Shannon Allen, Katie Busroe, Chris Frasure and Phil Losch, Pharmacy and Drug Inspectors; Cheryl Lalonde, Assistant Attorney General and Board Counsel; and Lisa Atha, Executive Secretary. Guests: Chris Killmeier, Walgreens; Ralph Bouvette, APSC; Jan Gould, Kentucky Retail Federation; Robert McFalls, Kentucky Pharmacists Association; Trish Freeman, University of Kentucky; Anne Policastri, KSHP; Bill Shinton and Amber Kayse, Kroger; Lyndell Shepherd, Identification & Segregation Systems, Inc.; Amey Hugg and Jill Rhodes, University of Louisville HealthCare; Clay Rhodes, CAPP; Leon Claywell; and Doug Deitemeyer, Jennifer Price, Brody White, Rachel Nealis, Candace Embree, and Stacy Taylor, College of Pharmacy students. Melody Curtis, Court Reporter, recorded the meeting. Brian Fingerson, Pharmacist Recovery Network Committee, was absent.

**MINUTES:** On motion by Mr. Hadley, seconded by Dr. Hanna and passed unanimously, the Minutes of September 12, 2012 Board Meeting and September 27, 2012 Public Hearing were approved.

**APPEARANCES: Bill Shinton, Kroger.** Bill Shinton, Pharmacy Senior Subject Matter Expert from Kroger, appeared before the Board requesting approval on three options that would result in a new work flow for Kroger pharmacies. Option One, Pharmacy Call Center: A pharmacy call center would be located in Ohio and staffed with call center agents. All patient calls to Kroger pharmacies would be routed to the call center. The call center agents would enter refill numbers and answer non-clinical questions such as hours and location of the pharmacy, refill and product availability, pricing, billing, if the prescription is ready for pick up by the patient. The call center agents would not counsel, enter new prescription data or answer any questions that require a pharmacist. Dr. Greenwell moved to allow Kroger Pharmacy to utilize a call center in Ohio for the pharmacies located in Kentucky, provided the call center agents are not engaged in the practice of pharmacy and conversations regarding clinical issues or the practice of pharmacy issues are not allowed. Dr. DeWire seconded, and the motion passed unanimously.

Option 2, Centers of Excellence, Remote Pre-Verification and Drug Utilization Review: Currently, Kroger has a non-dispensing pharmacy located in Ohio and permitted by the Ohio Board of Pharmacy called the Center of Excellence. A technician at the local Kroger pharmacy enters the prescription in the computer system, then an Ohio licensed pharmacist at the Center of Excellence verifies the prescription information entered such as patient, prescriber, drug name and strength, directions, quantity, refills, and date written and performs the drug utilization review. The prescription is then sent back to the local pharmacy where that pharmacist verifies the product in the prescription vial. Dr. Shinton is requesting Kentucky Kroger pharmacies be allowed to have prescriptions pre-verified and drug utilization reviews performed at the Center of Excellence in Ohio by Kentucky licensed pharmacists. Mr. Thornbury tabled this request until the December Board Meeting to allow Board Members time to review the proposal. Mr. Thornbury requested Dr. Shinton appear before the Board at the December Board Meeting to answer any questions.

Option 3, Central Fill and New Out of State Prescriptions: Currently the Kroger Central Fill Pharmacy located in Louisville, Kentucky, only fills refills for Kentucky, Ohio, Indiana, Illinois and Tennessee Kroger pharmacies. Dr. Shinton is requesting this facility be allowed to fill new prescriptions as well as refills for Kroger pharmacies located outside of Kentucky. This is an issue for the state from which the prescription originates to decide.

**Trish Freeman, University of Kentucky College of Pharmacy.** Trish Freeman appeared before the Board requesting approval for University of Kentucky College of Pharmacy students to perform tasks not considered the practice of pharmacy without a Kentucky licensed pharmacist present at volunteer sites other than the previously approved Salvation Army Clinic. At the May 14, 2008, Kentucky Board of Pharmacy Meeting, the Board approved University of Kentucky College of Pharmacy students be allowed to volunteer at the Salvation Army Clinic without a Kentucky licensed pharmacist present as long as the students do not engage in the practice of pharmacy and the supervising physician at the Clinic understands these students are not to engage in the practice of pharmacy. Dr. Greenwell moved to approve the request to remove the geographical location of the Salvation Army Clinic and allow University of Kentucky College of Pharmacy students to volunteer without a Kentucky licensed pharmacist present as long as the students did not engage in the practice of pharmacy, as was approved in 2008. Dr. DeWire seconded, and the motion passed unanimously.

**INTERAGENCY** Bob McFalls, Executive Director of KPhA, reminded everyone of the Midyear Conference at the Embassy Suites in Lexington, on November 30-December 1, 2012.

### **BOARD REPORTS:**

**Board Executive Director.** 1) EMars monthly report for August and September FY 2013 and a Financial Report Summary were presented to the Board. 2) Dr. Greenwell moved purchase iPads for the Board Members with Federal Funds. Dr. Hanna seconded, and the motion passed unanimously.

## **CURRENT/PENDING CASES:**

**Case Updates:** Mr. Hadley moved to accept Case Updates for Case Numbers: 12-0043A; 12-0046A; 12-0070C; 12-0087A; 12-0087B; 12-0088; 12-0109C; 12-0115B; 12-0118C; 12-0122A; 12-0122B; 12-0123A; 12-0123B; 12-0124A; 12-0124B; 12-0125A; 12-0125B; 12-0126A; 12-0126B; 12-0127A; 12-0127B; 12-0128A; 12-0129A; 12-0129B; 12-0130A; 12-0131A; 12-0131B; 12-0133A; 12-0133B; 12-0134B; 12-0135A; 12-0135B; 12-0136A; 12-0138A; 12-0138B; 12-0139A; 12-0139B; 12-0140A; 12-0140B; 12-0141A; 12-0141B; 12-0142A; 12-0143A; 12-0144A; 12-0144B; 12-0145A; 12-0145B; 12-0146A; 12-0146B; 12-0147A; 12-0149A; 12-0151A; 12-0152A; 12-0153A; 12-0153B; 12-0154A; 12-0155A; 12-0155B; 12-0157A; 12-0158A; 12-0159A; 12-0159B; 12-0160A; 12-0160B; 12-0161A; 12-0161B; 12-0163A; 12-0165; 12-0171B; 12-0172C; 12-0176C; 12-0178B; 12-0181A; 12-0183A; 12-0184A; 12-0185A; 12-0185B; 12-0190A; 12-0191A; 12-0191B; 12-0193A; 12-0194A; 12-0194B; 12-0195B; 12-0198A; 12-0199A; 12-0200B; 12-0201A; 12-0202B; 12-203A; 12-0203B; and 12-0208B as written. Ms. Brewer seconded, and the motion passed unanimously.

**Case Review:** Dr. Hanna moved to accept Case Review as presented. Dr. Greenwell seconded, and the motion passed unanimously.

**Case No. 11-0032A. REVISIT.** Pharmacy permit holder allegedly engaged in unethical or unprofessional conduct by failing to provide adequate security of controlled substances. **NEW INFORMATION:** Videos were received of pharmacist diverting control substances from the two pharmacies he owned. Alleged violations of law: 201 KAR 2:100 Section1 and KRS 315.121(2)(c)(d)(f) and (j) . CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 11-0032B. REVISIT.** Pharmacy permit holder allegedly engaged in unethical or unprofessional conduct by failing to provide adequate security of controlled substances. **NEW INFORMATION:** Videos were received of pharmacist diverting control substances from the two pharmacies he owned. Alleged violation of law: 201 KAR 2:100 Section1. CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 11-0032C. REVISIT.** Pharmacist-in-charge allegedly failed to provide adequate security of controlled substances. **NEW INFORMATION:** Videos were received of pharmacist diverting control substances from the two pharmacies he owned. Alleged violations of law: 201 KAR 2:205 Section 3(b) and KRS 315.121(2)(c)(d)(f) and (j). CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 11-0032D. REVISIT.** Pharmacist-in-charge allegedly failed to provide adequate security of controlled substances. **NEW INFORMATION:** Videos were received of pharmacist diverting control substances from the two pharmacies he owned. Alleged violations of law: 201 KAR 2:205 Section 3(b) and KRS 315.121(2)(c)(d)(f) and (j). CRC

Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 12-0036A.** Pharmacy permit holder allegedly sold a misbranded prescription. Alleged violation of law: KAR 217.065(1). CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.

**Case No. 12-0036B.** Pharmacist allegedly sold a misbranded prescription by allegedly refilling a prescription with a different medication than the initial fill, and the description on the bottle did not match the contents of the bottle. Alleged violation of law: KAR 217.065(1). CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.

**Case No. 12-0121A. REVISIT.** Pharmacy permit holder allegedly engaged in unprofessional or unethical conduct by allowing a medication error. Alleged violation of law: KRS 315.121(1)(a). CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 12-0121B. REVISIT.** Pharmacist allegedly engaged in unprofessional or unethical conduct by engaging in conduct likely to harm the public, by dispensing the wrong medication to a patient. Alleged violation of law: KRS 315.121(2)(d). CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 12-0167.** Pharmacy technician allegedly acted as a pharmacist without being licensed as a pharmacist, by making over the counter medication recommendations. Alleged violation of law: KRS 315.121(1)(g). CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.

**Case No. 12-0204A.** Pharmacy permit holder allegedly did not provide adequate security and control of a controlled medication. Pharmacy permit holder allegedly allowed pharmacy technician to divert a controlled substance from the pharmacy of employment. Alleged violation of law: 201 KAR 2:100. CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 12-0204B.** Pharmacist-in-charge allegedly did not provide adequate security and control of a controlled medication. Pharmacist-in-charge allegedly allowed pharmacy technician to divert a controlled substance from the pharmacy of employment. Alleged violation of law: 201 KAR 2:100. CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 12-0204C.** Pharmacy technician allegedly engaged in unprofessional or unethical conduct. Pharmacy technician allegedly diverted a controlled substance from the pharmacy of employment. Alleged violation of law: KRS 315.121(1). CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed

Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**Case No. 12-0206.** Wholesale distributor permit holder allegedly changed locations without proper notification to the Board Office. Alleged violations of law: KRS 315.402(1) and 201 KAR 2:105 Sections 2 and 4. CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**Case No. 12-0207A.** Pharmacy permit holder allegedly did not provide adequate security and control of a controlled medication. Pharmacy permit holder allegedly allowed pharmacy technician to divert a controlled substance from the pharmacy of employment. Alleged violation of law: 201 KAR 2:100. CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 12-0207B.** Pharmacist-in-charge allegedly did not provide adequate security and control of a controlled medication. Pharmacist-in-charge allegedly allowed pharmacy technician to divert a controlled substance from the pharmacy of employment. Alleged violation of law: 201 KAR 2:100. CRC Recommendation: There is sufficient evidence developed and the investigator is directed to conduct further investigation.

**Case No. 12-0207C.** Pharmacy technician allegedly engaged in unprofessional or unethical conduct. Pharmacy technician allegedly diverted a controlled substance from the pharmacy of employment. Alleged violation of law: KRS 315.121(1). CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**Case No. 12-0212.** Pharmacist allegedly completed only 14 hours of 15 required hours of continuing education in 2011. Alleged violations of law: KRS 315.065 and 201 KAR 2:015. CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**Case No. 12-0214.** Pharmacist allegedly completed only 14 hours of 15 required hours of continuing education in 2011. Alleged violations of law: KRS 315.065 and 201 KAR 2:015. CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**Case No.12-0221A.** Pharmacy permit holder allegedly sold a misbranded product as the result of a medication error. Alleged violations of law: KRS 217.065(1) and KRS 315.121(1)(a). CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.

**Case No. 12-0221B.** Pharmacist allegedly engaged in unethical or unprofessional conduct by committing a medication error. Physician prescribed chlorpheniramine/phenylephrine /dextromethorphan syrup and the pharmacist allegedly dispensed chlorpheniramine/hydrocodone syrup. Pharmacist allegedly engaged in unethical or unprofessional conduct by failing to perform a prospective drug utilization review for clinical misuse or abuse by dispensing early refills for a zolpidem CR 12.5mg prescription. Alleged violations of law: KRS 315.121(1)(a) and (2)(d) and 201 KAR 2:210 Section 4. CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**Case No. 12-0221C.** Pharmacist allegedly engaged in unethical or unprofessional conduct by failing to perform a prospective drug utilization review for clinical misuse or abuse by dispensing early refills for a zolpidem CR 12.5mg prescription. Alleged violations of law: KRS 315.121(1)(a) and (2)(d) and 201 KAR 2:210 Section 4. CRC Recommendation: There is insufficient evidence of a violation to warrant disciplinary action and the case is closed without prejudice.

**Case No. 12-0222A.** Pharmacy permit holder allegedly allowed a medication error to be committed by dispensing Morphine ER 100mg tablets instead of the prescribed Morphine ER 15mg tablets that resulted in the death of a patient. Alleged violation of law: KRS 315.121(1)(a). CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**Case No. 12-0222B.** Pharmacist allegedly committed a medication error by dispensing Morphine ER 100mg tablets instead of the prescribed Morphine ER 15mg tablets that resulted in the death of a patient. Alleged violation of law: KRS 315.121(2)(d). CRC Recommendation: There is sufficient evidence of a violation to warrant disciplinary action and the Executive Director is directed to attempt resolution through an Agreed Order and/or, if unsuccessful, to proceed with either an Administrative Conference, if requested, or the issuance of a Formal Complaint and Notice of Hearing.

**RECIPROCITY/RELICENSE/INTERNSHIP/PHARMACY TECHNICANS:**

**Janet Dwigans.** Janet Dwigans submitted a pharmacist's application for reciprocity. Ms. Dwigans had disciplinary action from the Indiana Board of Pharmacy. Dr. Greenwell moved to

approve Janet Dwigan's request to reciprocate her pharmacist's license to Kentucky. Dr. Hanna seconded, and the motion passed unanimously.

**Prabhakara Nagareddy.** Prabhakara Nagareddy requested up to 400 hours of internship credit be granted for research. Dr. Greenwell moved to allow Prabhakara Nagareddy to earn up to 400 hours internship credit for research starting November 2, 2012. Dr. Hanna seconded, and the motion passed unanimously.

**Tamer Ahmed.** Tamer Ahmed requested up to 400 hours of internship credit be granted for research. Dr. Greenwell moved to allow Tamer Ahmed to earn up to 400 hours internship credit for research starting November 2, 2012. Dr. Hanna seconded, and the motion passed unanimously.

**CORRESPONDENCE/COMMUNICATION:**

**Laura Spencer.** Laura Spencer requested to be pharmacist-in-charge of both Spencer's Compounding Pharmacy and Cavern's Memorial Hospital. Dr. Greenwell moved to allow Laura Spencer to be pharmacist-in-charge of Spencer's Compounding Pharmacy and Cavern's Memorial Hospital. Dr. DeWire seconded, and the motion passed unanimously.

**LEGISLATION: STATUTE/REGULATION:**

Mr. Thornbury, Mr. Burlson and Jan Gould gave brief updates on 2012 HB 1.

**CONTINUING EDUCATION:** Mr. Hadley moved to approve continuing education programs 12-22 through 12-30 as recommended. Dr. Hanna seconded, and the motion passed unanimously.

**OLD BUSINESS: Collaborative Practice Agreement Statute.** Jill Rhodes, Chair of the MTM Committee, appeared before the Board to request support for changes to KRS 315.010 Section 4. Currently this section requires a collaborative practice agreement to be between a specific practitioner and a specific pharmacist and limits the agreement to specification of drug related regimen and any tests which may be necessary; stipulated conditions for initiating, continuing or discontinuing drug therapy; directions concerning the monitoring of drug therapy and the stipulated conditions which warrant modifications to dose, dosage regimen, dosage form or route of administration. The Committee would like support to make the statute more general, allowing one or more pharmacists to work in conjunction with one or more practitioners allowing the pharmacist(s) to perform certain patient care functions for the patients of the practitioner(s) as authorized by the practitioner(s). Dr. Greenwell moved the support the proposed legislative change to KRS 315.010 Section 4, the collaborative practice agreement statute, as recommended by the MTM Committee. Dr. Hanna seconded, and the motion passed unanimously.

**NEW BUSINESS: PRNC Resignation.** Amanda Ward resigned from the PRN Committee. The Board voted for one pharmacist from the list of previously submitted applications. Mandy Jones was appointed to the PRN Committee.

**Advisory Council Appointments.** Advisory Council Appointments were voted on from applications received from interested parties. President Thornbury appointed Chris Killmeier as Chair. Dr. Greenwell moved to appoint Kim Arvin, Joe Bickett and Don Kupper to 2 year terms and Gay Dwyer, Joe Fink and Lewis Wilkerson to 4 year terms. Dr. Hanna seconded, and the motion passed unanimously.

**Executive Director Evaluation.** President Thornbury appointed Dr. DeWire, Ms. Brewer and Dr. Hanna to be the Executive Director Evaluation Committee.

### **BOARD RETREAT – November 2, 2012, began at 1:00 p.m.**

**Early Refills.** There was discussion regarding refilling prescriptions early, what was considered early and if the Board needed to regulate how many days early a prescription may be refilled. It was suggested the Board could start with issuing a professional guidance statement regarding the issue of early refills.

**Prescription consolidation.** There was discussion regarding allowing pharmacists, without contacting the prescriber, to dispense a greater day supply than initially indicated on the prescription as long as there were refills authorized that would result in the same amount of total day supply. For example, a prescription is written for a 30 day supply with 2 refills, the pharmacist would automatically be allowed to dispense a 90 day supply. It was decided this was changing a medical order and is considered prescribing. There needs to be legislative changes in order for automatic prescription consolidation by pharmacists to be legal. It was suggested the Advisory Council work on this issue.

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**Kentucky Prosthetics, Orthotics and Pedorthics Board.** KRS 319B.090(8) and (9) conflict with the Pharmacy Practice Act in regard to the activities a pharmacy technician is allowed to perform. KRS 319B.090 allows a pharmacy technician to measure and fit for prosthetic, orthotic and/or pedorthic devices as long as the pharmacy technician meets specific criteria. The Pharmacy Practice Act allows the pharmacy technician to assist in the practice of pharmacy under the supervision of a licensed pharmacist. Dr. Greenwell moved for the Executive Director to send a letter to the Prosthetics, Orthotics and Pedorthics Board stating the Kentucky Board of Pharmacy disagrees with the Prosthetics, Orthotics, and Pedorthics Board legislating criteria a pharmacy technician must meet in order to assist a pharmacist and that the Pharmacy Practice Act is in conflict with KRS 319B.090(8) and (9). Dr. Hanna seconded, and the motion passed unanimously.

**CAPP: Center for Advancing Pharmacy Practice.** Dr. Freeman gave a brief update on the activities of CAPP. CAPPNet, a practice based research network, was recently formed. Pharmacists practicing in any setting are invited to participate in CAPPNet, documenting the value of pharmacists.

**Prescriptive Authority for Pharmacists.** In the past, a broad approach has been taken when trying to obtain prescriptive authority for pharmacists. It may be that a more specific, targeted

approach needs to be tried. The Board was open to trying this approach with the Legislature and will help where it can, for example in the education requirement component.

**Hazardous Waste Generators.** Jennifer Price, Intern at the Kentucky Board of Pharmacy, gave a brief update on the EPA's laws regarding hazardous waste in pharmacies. Bob McFalls, KPhA, Anne Policastri, KSHP, and Board staff will work on compiling a guidance toolkit on this issue to send out to Kentucky pharmacists.

The Retreat recessed at 3:32 p.m. on November 2, 2012.

### **BOARD RETREAT – November 3, 2012**

Resumed at 8:46 a.m.

Members present: Joel Thornbury, Deborah Brewer, Scott Greenwell, Larry Hadley and Cathy Hanna. Staff: Mike Bureson, Executive Director; Steve Hart, Pharmacy Investigations and Inspections Coordinator; Shannon Allen, Katie Busroe, Chris Frasure and Phil Losch, Pharmacy and Drug Inspectors; Cheryl Lalonde, Assistant Attorney General and Board Counsel; and Lisa Atha, Executive Secretary. Guests: Chris Killmeier, Walgreens; Ralph Bouvette, APSC; Jan Gould, Kentucky Retail Federation; Robert McFalls, Kentucky Pharmacists Association; Anne Policastri, KSHP; Dan Wermeling; and Doug Deitemeyer and Jennifer Price, College of Pharmacy students.

**Naloxone Overdose Prevention Program.** Dan Wermeling, University of Kentucky College of Pharmacy, has developed an intranasal formulation of naloxone to be used in an attempt to reduce opioid overdose mortality. Dr. Wermeling was seeking support from the Kentucky Board of Pharmacy for legislation which would allow prescribing of intranasal naloxone to patients identified as an overdose risk. A statement would be included in the directions allowing another person to administer the intranasal naloxone without it being considered the practice of medicine. The patient would still need to be taken to a hospital after the administration of the naloxone. Dr. Greenwell moved to direct the Executive Director to draft a letter of support for intranasal naloxone to be prescribed and administered to at risk patients in an attempt to reduce opioid overdoses. Dr. Hanna seconded, and the motion passed unanimously.

**PBMs – Pharmacy Benefit Managers.** There was discussion regarding the legality of the Kentucky Board of Pharmacy to regulate pharmacy benefit managers based on patient care access.

**Community Pharmacy Accreditation.** APSC is opposed to NABP's Community Pharmacy Accreditation for many reasons. Although the program is considered voluntary, it may be used by insurance providers to exclude pharmacies choosing not to participate, which in turn would limit the choice of pharmacies for patients. The standards are not clear. The process of accreditation is expensive with no return on the investment. This accreditation appears to undermine the Board of Pharmacy. After discussion, Dr. Greenwell moved to draft a letter to NABP stating Boards of Pharmacy decide the minimum practice standards for their states and the Kentucky Board of Pharmacy does not support NABP's current position on community

pharmacy accreditation standards that would supersede state regulations and create a de facto standard for the practice of pharmacy in Kentucky. Dr. Hanna seconded, and the motion passed unanimously.

**HB1.** Information regarding misconceptions about HB1 is available on the Office of Inspector General website as well as the Kentucky Board of Medical Licensure website.

**Compounding for Office Administration or Institutional Use.** There was discussion regarding pharmacists compounding for specific patients versus institutional use.

**ADJOURNMENT:** On motion by Ms. Brewer, seconded by Dr. Hanna and passed unanimously, President Thornbury adjourned the Board Meeting/Retreat at 11:38 a.m. The next regularly scheduled Board Meeting is scheduled to begin at 9:00 a.m. on December 12, 2012 at the Board Office, Frankfort, Kentucky.

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Michael Burleson, R.Ph.  
Executive Director