

1 GENERAL GOVERNMENT CABINET

2 Kentucky Board of Pharmacy

3 (Amendment)

4 201 KAR 2:250. Pharmacist Recovery Network Committee.

5 RELATES TO: KRS 315.121(1)(d)

6 STATUTORY AUTHORITY: KRS 315.126(3),(6),(7), 315.191(1)(a), KRS 61.810(k)

7 CERTIFICATION STATEMENT: This is to certify that this administrative regulation complies with
8 the requirements of 2025 RS HB 6, Section 8.

9 NECESSITY, FUNCTION, AND CONFORMITY: KRS 315.126(1) requires the Board of
10 Pharmacy to establish a pharmacy recovery network committee (PRNC). This administrative
11 regulation establishes minimum requirements for the establishment and operation of the PRNC.
12 This administrative regulation specifies the manner by which the board's PRNC consultant works
13 with the board in intervention, evaluating and treating a pharmacist or intern, and providing for
14 continuing care and monitoring by the consultant through a treatment provider.

15 Section 1. The Board of Pharmacy's Pharmacist Recovery Network Committee (PRNC)
16 consultant shall be a pharmacist licensee of the board. The consultant shall assist the Case
17 Review Panel (CRP) [~~Committee (CRC)~~] and the PRNC in carrying out their respective
18 responsibilities. This shall include working with the board's inspectors and investigators to
19 determine whether a pharmacist or pharmacist intern is in fact impaired.

1 Section 2. If a pharmacist or pharmacist intern self-reports impairment as a result of the
2 misuse or abuse of alcohol or drugs, or both; or if the board receives a legally sufficient
3 complaint alleging that a pharmacist or pharmacist intern is impaired as a result of the misuse
4 or abuse of alcohol or drugs, or both, and where there is no other alleged violation of state
5 pharmacy law[complaint] against the pharmacist or intern other than impairment exists, the
6 reporting of any impairment information to the board shall be forwarded to the consultant and
7 shall not constitute grounds for discipline, if the PRNC finds the pharmacist or pharmacist
8 intern has: (1) Acknowledged the impairment problem;
9 (2) Voluntarily enrolled in an appropriate, approved treatment program;
10 (3) Voluntarily withdrawn from practice or limited the scope of practice as required by the
11 consultant, in each case, until the PRNC is satisfied the licensee has successfully completed
12 an approved treatment program; and
13 (4) Executed releases for medical records, authorizing the release of all records of evaluations,
14 diagnoses, and treatment of the licensee, including records of treatment for emotional or mental
15 conditions, to the consultant. The consultant shall not make copies or reports of records that do
16 not regard the issue of the licensee's impairment and his or her participation in a treatment
17 program.

18 Section 3.

19 (1) A treatment provider shall disclose to the consultant or board if applicable all information in
20 its possession regarding the issue of a pharmacist's or pharmacist intern's impairment and
21 participation in the treatment program. Failure of the treatment provider to provide information
22 to the consultant shall be a basis for the withdrawal of the use of the program or provider.

(2) If in the opinion of the consultant or PRNC, an impaired pharmacist or pharmacist intern has not progressed satisfactorily in a treatment or recovery program, all information regarding the issue of a pharmacist's or intern's impairment and participation in a treatment or recovery program in the consultant's possession shall be disclosed to the board. That disclosure shall constitute a complaint.

Section 4. All information concerning a pharmacist or intern held by the consultant, PRNC, CRP [CRG], or board shall remain confidential.

Section 5.

(1) The PRNC shall be comprised of eleven (11) members. The members shall include:

(a) The President of the Board of Pharmacy;

(b) The Chair, who shall be the consultant of the PRNC;

(c) The Executive Director of the Board of Pharmacy; and

(d) Eight (8) other members, of which seven (7) shall be pharmacists and one (1) shall be a citizen member.

(2)

(a) All members shall have the same rights, which include voting privileges.

(b) A member of the PRNC shall not be on the board, except the President of the Board.

(c) Any criminal conviction or disciplinary action by a licensure board against a proposed member shall be reported to the board prior to consideration for appointment.

(d) There may be no more than four (4) members in successful recovery on the PRNC.

(e) A pharmacist under a Pharmacist Recovery Network Agreement shall not serve on the PRNC.

(3)

(a) A board approved PRNC member may be appointed ~~by the board~~ a maximum of three (3), four (4) year terms or a total of 12 years.

(b) A PRNC member shall not serve more than (2) terms consecutively.

(c) After serving two (2) consecutive terms a PRNC member shall rotate off the PRNC for at least two (2) years.

~~[(d) A committee member shall serve no more than twelve (12) years on the PRNC.]~~

(d) ~~[(e)]~~ The President of the Board, the PRNC Consultant, and the Executive Director of the Board shall be permanent members of the PRNC.

(e) ~~[(f)]~~ Membership of the PRNC shall be selected by the board from a list of qualified candidates submitted by an interested individual or entity.

(4) A member of the PRNC who becomes impaired, relapses, has any criminal conviction, or has any disciplinary action by a licensure board shall immediately resign from the PRNC.

(5) The board by majority vote, with the recusal of the President of the Board, may remove a member of the PRNC for any of the following reasons:

(a) Refusal or inability of a committee member to perform duties as a member of the committee in an efficient, responsible, and professional manner;

(b) Misuse of the committee by a member to obtain personal, pecuniary, or material gain or advantage for the member or others; and

(c) Violation of any provision of KRS Chapter 315.

Section 6

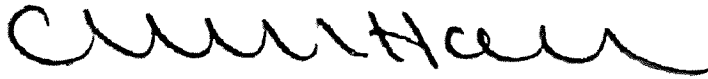
(1) PRNC Meetings are Confidential

(a) All PRNC information, interviews, reports, statements, memoranda or other documents furnished to or produced by the PRNC, all communications to or from the committee, and all proceedings, findings and conclusions of the committee, including those relating to

1 intervention, treatment or rehabilitation, that in any way pertain or refer to a pharmacist or
2 pharmacist intern who is or may be impaired shall be privileged and confidential pursuant to
3 KRS 315.126. In accordance with KRS 61.810(k), any meeting which is required by state (or
4 federal) law to be conducted in private is an exception to the open meetings requirements.
5 Thus, PRNC will publish its meeting schedule and a redacted meeting agenda, but the
6 meetings remain confidential and are not open to the public.

7 (2) Meeting Records are Confidential

8 (a) Pursuant to KRS 315.126(7), all PRNC records and proceedings that pertain or refer to a
9 pharmacist or pharmacist intern who is or may be impaired shall be privileged and
10 confidential, used by the committee and its members only in the exercise of the proper
11 function of PRNC, are not considered public records and not subject to court subpoena,
12 discovery or introduction as evidence in any civil, criminal or administrative hearing, except
13 as required by the statute.



Christopher Harlow, PharmD

Executive Director, Kentucky Board of Pharmacy

12/4/2025

Date

PUBLIC HEARING AND PUBLIC COMMENT PERIOD

A public hearing on this administrative regulation shall be held on February 27, 2026, at 9:00 a.m. EST via a Zoom teleconference. Individuals interested in being heard at this hearing shall notify this agency in writing by five workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing was received by that date, the hearing may be cancelled. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on the proposed administrative regulation. Written comments shall be accepted through February 28, 2026. Send written notification of intent to be heard at the public hearing or written comments on the proposed administrative regulation to the contact person.

CONTACT PERSON: Christopher Harlow, Executive Director, Kentucky Board of Pharmacy, 125 Holmes Street, Suite 300, State Office Building Annex, Frankfort, Kentucky 40601, phone (502) 564-7910, fax (502) 696-3806, email Christopher.harlow@ky.gov.

REGULATORY IMPACT ANALYSIS AND TIERING STATEMENT

201 KAR 2:250 Pharmacist Recovery Network Committee

CONTACT PERSON: Christopher Harlow, Executive Director, Kentucky Board of Pharmacy, 125 Holmes Street, Suite 300, State Office Building Annex, Frankfort, Kentucky 40601, phone (502) 564-7910, fax (502) 696-3806, email Christopher.harlow@ky.gov.

Subject Headings: Pharmacy; Licensing; Health and Medical Services

(1) Provide a brief summary of:

(a) What this administrative regulation does: This administrative regulation establishes the Kentucky Pharmacist Recovery Network Committee and sets the minimum requirements for its structure and operation, including the role of the consultant in identifying, intervening with, referring and monitoring impaired pharmacists and pharmacist interns. The regulation implements KRS 315.126 by outlining evaluation, treatment and ongoing care for those within the profession that are suffering from substance abuse disorder or addiction issues.

(b) The necessity of this administrative regulation: The regulation is necessary to implement KRS 315.126 to create a structure, duties and operational requirements for the committee to ensure consistent and accountable process that protects public safety, supports treatment and rehabilitation and allows the Board to fulfil its statutory mandate to address impairment in a manner that promotes both patient protection and pharmacist recovery.

(c) How this administrative regulation conforms to the content of the authorizing statutes: This regulation conforms with KRS 315.191 and KRS 315.126 by establishing the procedures and oversight framework necessary for the Board to operate an impaired pharmacist recovery program. The regulation implements a statutory directive.

(d) How this administrative regulation currently assists or will assist in the effective administration of the statutes: 201 KAR 2:250 assists in the effective administration of KRS 315.126 by

providing a detailed operational framework for how the Pharmacist Recovery Network identifies, refers, and monitors impaired pharmacists and pharmacist interns. By establishing defined procedures, roles, and reporting mechanisms, the regulation enables the Board to consistently enforce statutory requirements, ensure accountability within the PRN program, and protect public safety while facilitating rehabilitation, thereby allowing the Board to carry out the statute's intent in a clear, uniform, and enforceable manner.

(2) If this is an amendment to an existing administrative regulation, provide a brief summary of:

(a) How the amendment will change this existing administrative regulation: The amendment does not change the content of the original regulation but rather provides clarification on the confidentiality of the committee meetings pursuant to KRS 315.126 and KRS 61.810(k). This inclusion helps to clarify that the meetings of this committee are protected by law and are confidential in nature.

(b) The necessity of the amendment to this administrative regulation: This amendment is necessary because it clarifies the protected status of the committee meetings as guaranteed by KRS 315.126 (7-8) and KRS 61.810(k).

(c) How the amendment conforms to the content of the authorizing statutes: The amendment is consistent with the original statutory exemption provided to these confidential meetings in KRS 315.126 (7-8). This ensures the privacy of participants to foster early intervention, treatment and prevention efforts across the profession of pharmacy.

(d) How the amendment will assist in the effective administration of the statutes: The amendment clarifies the confidential nature of the meetings as provided in statute and clarifies expectations for participants and members of the public.

(3) Does this administrative regulation or amendment implement legislation from the previous five years? Yes, KRS 315.126 (7-8).

(4) List the type and number of individuals, businesses, organizations, or state and local governments affected by this administrative regulation: The board anticipates no one will be affected by the administrative regulation amendment as the same protections are already enacted by other provisions of Kentucky law.

(5) Provide an analysis of how the entities identified in question (4) will be impacted by either the implementation of this administrative regulation, if new, or by the change, if it is an amendment, including:

(a) List the actions that each of the regulated entities identified in question (4) will have to take to comply with this administrative regulation or amendment: Pharmacies and pharmacists will have to familiarize themselves with new amended language in the regulation.

(b) In complying with this administrative regulation or amendment, how much will it cost each of the entities identified in question (4): There are no expected costs for the identities to comply with the amendment.

(c) As a result of compliance, what benefits will accrue to the entities identified in question (4): Pharmacists and pharmacist interns that are experiencing impairment can be identified and assisted earlier, reducing the risk of patient harm and support safe reintegration into practice. The Board benefits from a structured, accountable process for monitoring impaired pharmacists, which enhances public protections, promotes rehabilitation, reduces disciplinary burdens and ensures consistent application of KRS 315.126 across all cases.

(6) Provide an estimate of how much it will cost to implement this administrative Regulation:

(a) Initially: No costs will be incurred.

(b) On a continuing basis: No costs will be incurred.

(7) What is the source of the funding to be used for the implementation and enforcement of this administrative regulation: Board revenues from pre-existing fees provide the funding to enforce the regulation.

(8) Provide an assessment of whether an increase in fees or funding will be necessary to implement this administrative regulation, if new, or by the change if it is an amendment: No increase in fees or funding will be required because of this new regulation.

(9) State whether or not this administrative regulation establishes any fees or directly or indirectly increases any fees: This administrative regulation does not establish fees or directly or indirectly increase any fees.

(10) TIERING: Is tiering applied? (Explain why tiering was or was not used) Tiering is not applied because the regulation is applicable to all pharmacists and pharmacies.

FISCAL IMPACT STATEMENT

Regulation No. 201 KAR 2:250 Pharmacist Recovery Network Committee

CONTACT PERSON: Christopher Harlow, Executive Director, Kentucky Board of Pharmacy, 125 Holmes Street, Suite 300, State Office Building Annex, Frankfort, Kentucky 40601, phone (502) 564-7910, fax (502) 696-3806, email Christopher.harlow@ky.gov.

(1) Identify each state statute, federal statute, or federal regulation that requires or authorizes the action taken by the administrative regulation: KRS 315.126

(2) State whether this administrative regulation is by an act of the General Assembly, and if so, identify the act: Yes, KRS 315.126.

(3)(a) Identify the promulgating agency and any other affected state units, parts, or divisions:
The Kentucky Board of Pharmacy will be impacted by this administrative regulation.

(b) Estimate the following for each affected state unit, part, or division identified in (3)(a):

1. Expenditures:

For the first year: \$0

For subsequent years: \$0

2. Revenues:

For the first year: \$0

For subsequent years: \$0

3. Cost Savings:

For the first year: \$0

For subsequent years: \$0

(4)(a) Identify affected local entities (for example: cities, counties, fire departments, school districts): Only the Kentucky Board of Pharmacy will be impacted by this administrative regulation.

(b) Estimate the following for each affected local entity identified in (4)(a):

1. Expenditures:

For the first year: \$0

For subsequent years: \$0

2. Revenues:

For the first year: \$0

For subsequent years: \$0

3. Cost Savings:

For the first year: \$0

For subsequent years: \$0

(5)(a) Identify any affected regulated entities not listed in (3)(a) or (4)(a): None.

(b) Estimate the following for each regulated entity identified in (5)(a):

1. Expenditures:

For the first year: \$0

For subsequent years: \$0

2. Revenues:

For the first year: \$0

For subsequent years: \$0

3. Cost Savings:

For the first year: \$0

For subsequent years: \$0

(6) Provide a narrative to explain the following for each entity identified in (3)(a), (4)(a), and

(5)(a):

(a) Fiscal impact of this administrative regulation: The regulation does not cost anything for regulated parties to implement nor does it have a cost to the Board to oversee.

(b) Methodology and resources used to reach this conclusion: None.

(7) Explain, as it relates to the entities identified in (3)(a), (4)(a), and (5)(a):

(a) Whether this administrative regulation will have a "major economic impact", as defined by KRS 13A.010(14): No, this administrative regulation does not have an overall negative or adverse major economic impact to regulated entities, or those entities identified in questions (2)-(4).

(b) The methodology and resources used to reach this conclusion: Analysis of the Board's expenditures as well as an assessment regarding cost of compliance for regulated entities.