



TEXAS SOCIETY OF  
HEALTH-SYSTEM PHARMACISTS

## 2011 Legislative Session - Pharmacy Issues

Good News...

Bad News...

Not Addressed...

<i>Proposed Issues</i>	<i>Description</i>	<i>TSHP</i>	<i>TFDS</i>	<i>TPA</i>	<i>Comments</i>	
<b><i>Texas State Board of Pharmacy</i></b>						
1.	<i>Self-Directed Semi - Independent Agency Status</i>	<i>Would allow the TSBP to set its own budget and gives them greater authority over the profession.</i>	S	S	S	Failed to Pass
2.	<i>Pharmacy Peer Review</i>	<i>Change from voluntary to mandatory program.</i>	N	N	N	
3.	<i>Substitution of Dosage Forms</i>	<i>Remove the requirement that the pharmacist notify the practitioner when dosage form is substituted.</i>	S	S	S	
4.	<i>Administration of Drugs</i>	<i>Clarify law that allows a pharmacist to administer immunizations and vaccines. Combine 2 sections</i>	N	N	N	
5.	<i>Delegation to Exec. Director</i>	<i>Allow the board to delegate certain duties to Ex.Dir.</i>	S	S	S	
6.	<i>Board jurisdiction after expiration of technician registration.</i>	<i>Make law consistent with jurisdiction over pharmacy registration.</i>	S	S	S	
7.	<i>Reporting of positive drug screens</i>	<i>Require employers to report to the board positive drug or alcohol screens.</i>	O	O	O	
8.	<i>Reporting of incapacity</i>	<i>Allow licensees to report incapacity of other pharmacists or technicians with civil immunity.</i>	N	O	N	
9.	<i>Pharmacist service in small hospitals</i>	<i>Require full time pharmacist service in all class C pharmacies with more than 50 beds</i>	N	N	N	
10.	<i>Authorization for inspection</i>	<i>Expand the Board's inspection authority to include the ability to enter a pharmacy for general regulation purposes.</i>	O	O	O	
11.	<i>Disciplinary grounds and sanctions for interns</i>	<i>Allow the board to use greater range of sanctions for interns</i>	S	S	S	

12.	<i>Disciplinary sanctions for all licensees/registrants</i>	<i>Add to the grounds for discipline; committing a criminal offense that requires registration as a sex offender; and disciplinary action by another health licensing board in Texas or in another state.</i>	N	S	N	
13.	<i>Legal immigration status for licensure</i>	<i>Allow the board to require legal immigration status for licensure</i>	S	S	S	
14.	<i>Make "good moral character" requirement consistent</i>	<i>Make the requirement the same for technicians as for pharmacist</i>	S	S	S	
15.	<i>Costs of Investigations/Litigation</i>	<i>Allow the Board to recover the costs of: (a) Investigations when disciplining a licensee; and (b) litigation from licensees if successfully prosecuted at SOAH.</i>	O	O	O	
16.	<i>Notification of Address Change</i>	<i>Require interns and pharmacy technicians to notify the Board of a change of address.</i>	S	S	S	
17.	<i>Patient access to records</i>	<i>Clarify that patients have a right to access their pharmacy records in a reasonable time and for a reasonable charge (and allow the board to define "reasonable").</i>	S	N	S	
18.	<i>Pharmacist professional discretion</i>	<i>Clarify law on professional discretion.</i>	N	N	N	
19.	<i>Require Written Prescriptions to be Legible</i>	<i>Prevent medication errors by requiring prescriptions to be legible.</i>	S	N	N	
20.	<i>30-day emergency supply</i>	<i>Incorporate authority for pharmacists to provide 30-day supply of drugs during a declared disaster.</i>	S	S	S	
21.	<i>Maintenance of pharmacy records</i>	<i>Provide for a specific record retention period for prescription records maintained by a pharmacy of a minimum of 3 years from the date of dispensing for the original prescription and 5 years for electronic records. Current law is 2 years.</i>	O	O	O	
22.	<i>Cancellation of license</i>	<i>Return the ability to cancel a license.</i>	S	S	S	
23.	<i>Repeal of Chapter 567</i>	<i>Either repeal the chapter or relocate the chapter in another part of the code that deals with manufacturing or repackaging, since these activities are not regulated by the Pharmacy Board.</i>	S	N	S	
24.	<i>Access to financial and pricing Data</i>	<i>Allow the Board access to financial records.</i>	O	O	O	
25.	<i>Second Orders Against Impaired Pharmacists</i>	<i>Allow the Board the discretion of making public a second order against a person who has a chemical, physical, or mental impairment.</i>	O	O	O	
26.	<i>Amount of Civil Penalty</i>	<i>Increase the amount of the civil penalty authorized in</i>	O	O	O	

		<i>the Pharmacy Act.</i>				
27.	<i>Regulatory Authority over Pharmacists/Technician Relief Services</i>	<i>Give the Board regulatory authority over pharmacist-relief services, especially, requiring them to tell us where a pharmacist is working on any given day.</i>	Hold	O	N	
28.	<i>Regulation of Wholesale Drug Distributors</i>	<i>Transfer the authority to license and discipline wholesale drug distributors to the Pharmacy Board.</i>	S	N	S	
29.	<i>Confidentiality of impaired pharmacist records</i>	<i>Clarify law to make impaired pharmacist records confidential and not subject to disclosure.</i>	S	N	S	
30.	<i>Require Board approved training for pharmacy technicians.</i>	<i>Adopt JCPP recommendation that all technicians registered after 2015 must attend a board approved training program. (Grandfather clause for older...)</i>	Hold	O	N	
31.	<i>Transfer prescription monitoring program from TxDPS to TSBP</i>	<i>Implement recommendations from last session to transfer the prescription monitoring program (and funding) from the DPS to the TSBP.</i>	S	S	S	
32.	<i>Allow board to issue citations</i>	<i>Allow board to issue citations without the need for disciplinary actions.</i>	O	Hold	O	
33.	<i>Allow for permissive release of information</i>	<i>Allow for permissive release of investigative information in a disciplinary hearing.</i>	O	Hold	O	
34.	<i>Remove requirement for pharmacies to display each pharmacist license</i>	<i>Either remove law requiring pharmacies to display pharmacists licenses, or require pharmacies to make available copies of licenses or renewals.</i>	S	S	S	

## Texas Federation of Drug Stores

1	<i>Medicaid Reimbursement</i>	<i>Oppose additional dispensing fee cuts</i>	S	S	S	Fees Cut
2	<i>Privacy/Data Sharing/HIT</i>	<i>Ensure pharmacy/pharmacists can provide care without unnecessary or burdensome requirements.</i>	N	Mon	Mon	Privacy Bill Passed
3	<i>Technician Ratios</i>	<i>Increase or eliminate the technician-to-pharmacist ratio.</i>	N	S	N	
4	<i>Drug Take Back</i>	<i>Advocate for program operated by law enforcement and coordinated through existing waste disposal program; do not mandate operational or financial burdens on pharmacies.</i>	Mon	Mon	Mon	
5	<i>Prescription Monitoring Program</i>	<i>Advocate for moving PMP from DPS to TSB. Eliminate DPS number and do not require RPh to check. Liability protection for pharmacy &amp; pharmacist.</i>	S	S	S	DPS# not on Scripts
6	<i>Generic Substitution</i>	<i>Oppose proposals restricting the substitution of generic products on certain classes of drugs such as</i>	Mon	Mon	Mon	Did not pass

		<i>anticonvulsants or immunosuppressants.</i>				
6	<i>Pseudoephedrine (PSE)</i>	<i>Advocate National Precursor Log Exchange (NPLEx) real-time electronic sales tracking of PSE products funded by manufacturers</i>	N	S	S	Passed
7	<i>E-Prescribing – Schedule II’s</i>	<i>Amend Texas laws that prohibit electronically transmitted schedule II prescriptions.</i>	N	S	S	Passed
8	<i>Medication Therapy Management</i>	<i>Support MTM pilot programs. Oppose additional certification requirements for pharmacists.</i>	N	S	S	HHSC Study
9	<i>Doctor Dispensing</i>	<i>Require doctors to abide by same dispensing rules governing pharmacies and pharmacists</i>	S	S	S	Bills did not pass
10.	<i>Definition of MAC</i>	<i>Develop “Model Language” for a standard definition of “Maximum Allowable Cost”</i>	N	Mon	Mon	
11.	<i>Increase dispensing Fee</i>	<i>Support an increase in pharmacist dispensing fee.</i>	Mon	Mon	Mon	Fee decreased
12.	<i>Age limit for immunizations</i>	<i>Change current law to allow pharmacist to provide flu shots and vaccinations to children over 7 years of age</i>	S	S	S	Did not pass
13.	<i>Dispense 90 day supply</i>	<i>Allow a pharmacist to adjust a prescription to a 90 day supply without doctor approval if the prescription was written to allow more than three refills.</i>	N	S	S	

## Texas Society of Health-System Pharmacists

*No issues at this time.....*

## Texas Pharmacy Association

	<b><i>Pharmacy Payment Issues</i></b>					
1.	<i>Medicaid Dispensing fees</i>	<i>Oppose reductions in Medicaid fee structure for pharmacies and pharmacists.</i>	S	S	S	Dispensing fee lowered
2.	<i>State Budget Shortfall</i>	<i>Support efforts to address the anticipated state budget shortfall that assure minimal financial impact to Texas pharmacists and pharmacies.</i>	S	S	S	Significant impact on pharmacy
3.	<i>Medicaid Managed Care for pharmacy services</i>	<i>Monitor and respond accordingly to the concept under consideration regarding the “Carve In” vs. the current “Carve-Out” policy of the Texas Medicaid Drug Vendor Program.</i>	N	N	S	Pharmacy benefit carved-out

4.	<i>State Funding for Medicaid &amp; CHIP.</i>	<i>Support adequate state and local government funding of Medicaid, the Children's Health Insurance Program and other indigent health care programs.</i>	Mon	Mon	Mon	Major cuts in Medicaid funding
5.	<i>Medicaid &amp; CHIP Eligibility</i>	<i>Support expansion of eligibility in the Medicaid program and the Children's Health Insurance Program (CHIP) to the maximum levels allowed by federal law.</i>				No expansion of eligibility
	<b><i>Scope of Practice Issues</i></b>					
6.	<i>MTM &amp; Drug Therapy Management services provided by a pharmacist</i>	<i>Protect existing statutory scope of practice guidelines regarding dispensing of pharmaceuticals and immunization. Support enhanced Medication Therapy Management and Drug Therapy Management through a modified scope of practice concept. Promote MTM for improved patient care and cost savings. Continue to encourage state agencies / legislators / employers on benefits of MTM.</i>	N	N	S	
7.	<i>Medicaid Medical Home</i>	<i>Support efforts to implement a Medicaid medical home that includes pharmacists.</i>	N	S	S	
7.1	<i>Clinical Pharmacist Practitioners</i>	<i>Explore the statutory ability of Clinical Pharmacist Practitioners to practice as physician extenders within parameters and guidelines developed in conjunction with the Texas Medical Association.</i>	S	N	S	
8.	<i>Generic substitution</i>	<i>Support broader generic/therapeutic substitution by pharmacists.</i>	N	S	S	Passed
9.	<i>E-Prescribing</i>	<i>Monitor E-Prescribing activities and initiate efforts to develop pharmacy-based guidelines.</i>	N	N	S	Passed
10.	<i>Health Information Technology (HIT) guidelines</i>	<i>Monitor Electronic Medical Records (EMR) / Electronic Health Records (EHR) activities and initiate efforts to develop pharmacy-based guidelines</i>	N	S	S	
10.1	<i>Reimbursement for pharmacy</i>	<i>Support efforts to establish pharmacist services and payment mechanisms that encourage pharmacist involvement in assessing and recommending drug therapies providing optimal therapeutic outcomes.</i>	S	S	S	
	<b><i>State Board of Pharmacy</i></b>					
11.	<i>Regulation of Manufacturing/Compounding</i>	<i>Support efforts to move the regulatory oversight authority of compounding OTC drugs from the Texas</i>	N	S	S	

		<i>Department of Health Services to the Texas State Board of Pharmacy.</i>				
12.	<i>Move Drug monitoring program from DPS to TSBP</i>	<i>Support efforts to move the state's drug monitoring program (and funding) from the Texas Department of Public Safety to the Texas State Board of Pharmacy.</i>	S	S	S	Failed to pass
13.	<i>Technician representation on the Board of Pharmacy</i>	<i>Initiate and support efforts to add a designated pharmacy technician position on the Texas State Board of Pharmacy</i>	S	S	S	Failed to pass
	<b><i>Consumer &amp; Patient Issues</i></b>					
14.	<i>"Personal Pharmacist"</i>	<i>Enhance the role of the personal pharmacist as integral component to Smart, Healthy Living.</i>	N	N	N	
15.	<i>Drug Take-Back programs</i>	<i>Support efforts to reduce pharmaceuticals in the environment and to facilitate unused drug disposal programs that assure increased adherence, enhanced safety and minimized diversion. Assure that legislative activities, if any, do not negatively impact the effectiveness of private, voluntary drug collection programs.</i>	Mon	Mon	Mon	
16.	<i>Confidentiality of Patient Information</i>	<i>Protect the confidentiality of patient information and medical records.</i>	N	S	S	Privacy bill passed
17.	<i>Pharmacy Patient Bill of Rights</i>	<i>D. Support the development of a pharmacy patient bill of rights.</i>	N	N	S	
	<b><i>Emergency Readiness</i></b>					
18.	<i>Disaster Readiness</i>	<i>Collaborate with state agencies to assist pharmacists and pharmacies regarding disaster readiness and public health support.</i>				
	<b><i>Insurance</i></b>					
19.	<i>PBM Regulation</i>	<i>Ensure that pharmacy benefits managers (PBMs) are monitored/regulated regarding prompt payment, transparency and fair audit processes. Address concerns with preferred drug lists, confidentiality issues, rebate policies and requirements for prior-authorizations. Support additional legislative mandates if needed.</i>				Passed
20.	<i>Mail Order Parity</i>	<i>Ensure that community pharmacies have</i>				Passed

		<i>comprehensive mail order parity.</i>				
21.	<i>TDI Sunset Legislation</i>	<i>Protect current favorable legislative requirements and/or advance beneficial legislative changes during the Texas Department of Insurance sunset review legislative process.</i>				Passed
22.	<i>Fees for Workman's Comp Formulary</i>	<i>Protect the formulary/fees for the Workmen's Compensation program by maintaining current levels or minimizing fee reductions.</i>				Passed
23.	<i>Notification of HMO enrollees on payment responsibility</i>	<i>Require insurers and HMOs to provide current, accurate information to enrollees on the selection of health care providers and the enrollee's personal responsibility for payment of services.</i>				
24.	<i>HMO Data Reporting</i>	<i>Require insurers and HMOs to report on an annual basis certain financial and utilization data and make public such data on the Texas Department of Insurance Web site in a consumer-friendly format.</i>				
	<b><i>Tax Issues</i></b>					
25.	<i>Future Tax Issues</i>	<i>Monitor the legislative debate of the state's tax structure.</i>				
26.	<i>Pharmacy Business Taxes</i>	<i>Oppose statutory changes that would negatively affect the tax liabilities of pharmacists, pharmacy technicians and pharmacies, unless such changes primarily result in an adequate increase in health care coverage and/or in improved payments to pharmacists and pharmacies that are fair, equitable and commensurate with the additional tax liabilities.</i>				
	<b><i>Uninsured or Underinsured</i></b>					
27.	<i>Access to Care</i>	<i>Collaborate with government, business and other health care providers in the development and implementation of a future health care system that expands access to affordable and high-quality health care services to all individuals in Texas.</i>				
28.	<i>Increase Availability of Insurance Coverage</i>	<i>Support public policies that reduce the number of uninsured and underinsured in Texas and that enhance the ability of these individuals to obtain basic and affordable quality health care coverage.</i>				
29.	<i>Funding for Insurance Coverage</i>	<i>Reduce the number of uninsured and under-insured</i>				

		<i>through tax or other incentives for individuals and/or businesses.</i>				
30.	<i>Reimbursement for Pharmacist Services</i>	<i>Support efforts to establish pharmacist services and payment mechanisms that encourage pharmacist involvement in assessing and recommending drug therapies providing optimal therapeutic outcomes.</i>				
	<b><i>Workforce Issues</i></b>					
31.	<i>Funding for Pharmacy Colleges</i>	<i>Protect and/or support efforts to increase funding for the six Texas colleges of pharmacy. Monitor the use of state funds directed to the education of pharmacists and pharmacy technicians.</i>				UNT Pharmacy School funding
32.	<i>Technician Ratios</i>	<i>Oppose efforts to modify current pharmacist to technicians direct supervision ratios.</i>				