Welcome!

Texas Pharmacy Law Update

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Director of Professional Services
April 6, 2017

Goals

- Review recent changes to pharmacy rules;
- Review the most common Warning Notices Issued to Pharmacies; and
- Review Legislation being considered by the 2017 Texas Legislature that affects the practice of pharmacy or the Board of Pharmacy.
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Recently Adopted Rules
Prescription Transfers

- Effective June 12, 2016.
- The transfer of prescriptions must be completed within 4 business hours of the request.

Pharmacists and Pharmacy Technicians

H. B. 1550 by Zerwas/Kolkhorst

- Effective Date: 9/1/2015.
  - Rules adopted by the Board in February 2016.
    - New §295.16 Administration of Epinephrine by a Pharmacist.
  - Allows a pharmacist to administer epinephrine, using an auto-injector, to a patient in an emergency situation.
H. B. 1550 by Zerwas/Kolkhorst
(cont.)

- A pharmacist:
  - May not receive remuneration for the administration of epinephrine but may seek reimbursement for the cost of the epinephrine auto-injector.
  - Who administers epinephrine through an auto-injector device is not liable for civil damages if the pharmacist acts in good faith and complies with Board rules.

S. B. 1462 by West

 innef Date: 9/1/2015
  - New §295.14 Dispensing of Opioid Antagonist by Pharmacist.
  - Allows a pharmacist to dispense an opioid antagonist under a valid prescription, including:
S. B. 1462 by West

prescription issued by a standing order, to:

- a person at risk of experiencing an opioid-related drug overdose; or
- a family member, friend, or other person in a position to assist a person at risk of experiencing an opioid-related drug overdose.

S. B. 1462 by West

A prescription dispensed under this section is considered as dispensed for a legitimate medical purpose in the usual course of professional practice.

A pharmacist who, acting in good faith and with reasonable care, dispenses or does not dispense an opioid antagonist under a valid prescription is not subject to any criminal or civil liability or any professional disciplinary action for:

- dispensing or failing to dispense the opioid antagonist; or
- if the pharmacist chooses to dispense an opioid antagonist, any outcome resulting from the eventual administration of the opioid antagonist.
Pharmacy Technician Registration Requirements

Effective Date: March 19, 2017.

Amends the exam requirements for initial registration to specify that the applicant must have taken and passed a pharmacy technician certification examination approved by the board and have a current certification certificate.

(Note: Reference to PTCB has been removed).

Board Action

At the February 2, 2017, meeting, the Board approved use of the ExCPT examination for pharmacy technician registration beginning:
– September 1, 2017; or
– when staff has established procedures for electronic transfer of information between ExCPT and the Board.

Pharmacy Technician's Continuing Education

Effective Date: September 14, 2015.
Amendments to §297.8 (Continuing Education) rules to:
– Decrease the number of in-service hours from 10 to 5 hours;
– Clarify the requirements for CE; and
– Clarify the types of programs that count for continuing education.
### Conditions Receiving "Warning Notices" FY2016

#### Number of Inspections

<table>
<thead>
<tr>
<th>Class</th>
<th>FY2016</th>
<th>% of FY2016 Inspections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A Pharmacies</td>
<td>2460</td>
<td>68%</td>
</tr>
<tr>
<td>Class A-S</td>
<td>208</td>
<td>6%</td>
</tr>
<tr>
<td>Class B Pharmacies</td>
<td>20</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Class C Pharmacies</td>
<td>386</td>
<td>11%</td>
</tr>
<tr>
<td>Class C-S</td>
<td>212</td>
<td>6%</td>
</tr>
<tr>
<td>Class D Pharmacies</td>
<td>198</td>
<td>5%</td>
</tr>
<tr>
<td>Class F Pharmacies</td>
<td>138</td>
<td>4%</td>
</tr>
<tr>
<td>Class G Pharmacies</td>
<td>18</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Totals</td>
<td>3640</td>
<td>100%</td>
</tr>
</tbody>
</table>

#### Warning Notices

<table>
<thead>
<tr>
<th>Class</th>
<th># Pharmacies Receiving WN</th>
<th>% Receiving WN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class A</td>
<td>917</td>
<td>69%</td>
</tr>
<tr>
<td>Class A-S</td>
<td>124</td>
<td>10%</td>
</tr>
<tr>
<td>Class B</td>
<td>13</td>
<td>1%</td>
</tr>
<tr>
<td>Class C</td>
<td>83</td>
<td>6%</td>
</tr>
<tr>
<td>Class C-S</td>
<td>146</td>
<td>11%</td>
</tr>
<tr>
<td>Class D</td>
<td>30</td>
<td>2%</td>
</tr>
<tr>
<td>Class F</td>
<td>14</td>
<td>1%</td>
</tr>
<tr>
<td>Class G</td>
<td>1</td>
<td>&lt;1%</td>
</tr>
<tr>
<td>Totals</td>
<td>1328</td>
<td>100%</td>
</tr>
</tbody>
</table>
### Most Common Warning Notices (All Classes of Pharmacy)

<table>
<thead>
<tr>
<th>Violation</th>
<th>Number of WN Issued*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sterile Preparations</td>
<td>1280</td>
</tr>
<tr>
<td>Records</td>
<td>569</td>
</tr>
<tr>
<td>Pharmacy Technicians</td>
<td>465</td>
</tr>
<tr>
<td>Prescriptions</td>
<td>377</td>
</tr>
<tr>
<td>Drug Stock/Environment</td>
<td>355</td>
</tr>
<tr>
<td>Inventory</td>
<td>218</td>
</tr>
</tbody>
</table>

* One pharmacy may receive multiple Warning Notice violations.

### Most Common Warning Notices (All Classes of Pharmacy) cont.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of WN Issued</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sterile Preparations</td>
<td></td>
<td>1280</td>
</tr>
<tr>
<td>No/Incomplete P&amp;P Manual</td>
<td>152</td>
<td></td>
</tr>
<tr>
<td>Improper Testing Prior to Compounding</td>
<td>110</td>
<td></td>
</tr>
<tr>
<td>Surfaces Not Smooth/Impervious/Crevic-free</td>
<td>92</td>
<td></td>
</tr>
<tr>
<td>No/Incomplete QA/QC</td>
<td>73</td>
<td></td>
</tr>
<tr>
<td>Improper Documentation of Pressure Monitoring</td>
<td>45</td>
<td></td>
</tr>
<tr>
<td>Insufficient Training for RPh</td>
<td>41</td>
<td></td>
</tr>
<tr>
<td>Cleanroom Not Clean/Well-lit/Particle-free</td>
<td>34</td>
<td></td>
</tr>
<tr>
<td>Insufficient Training for Tech</td>
<td>33</td>
<td></td>
</tr>
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### Most Common Warning Notices (All Classes of Pharmacy) cont.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of WN Issued</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Records</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Records Not Available</td>
<td>219</td>
<td></td>
</tr>
<tr>
<td>Records for Non-Sterile Compounds</td>
<td>132</td>
<td></td>
</tr>
<tr>
<td>Invoices Not Separated/Retrievable/Dated &amp; Initiated</td>
<td>92</td>
<td></td>
</tr>
<tr>
<td>Absence of RPh Record</td>
<td>53</td>
<td></td>
</tr>
<tr>
<td>Rx Records Not Numerical Order</td>
<td>27</td>
<td></td>
</tr>
<tr>
<td>No complaint Notification</td>
<td>23</td>
<td></td>
</tr>
</tbody>
</table>
### Most Common Warning Notices (All Classes of Pharmacy) cont.

#### Pharmacy Technicians

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of WN Issued</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>No/Incomplete Training</td>
<td>394</td>
<td></td>
</tr>
<tr>
<td>Improper Registration</td>
<td>41</td>
<td></td>
</tr>
<tr>
<td>No/Improper Supervision</td>
<td>23</td>
<td></td>
</tr>
<tr>
<td>Supportive Personnel Name Tags</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>465</strong></td>
<td></td>
</tr>
</tbody>
</table>

#### Prescriptions

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of WN Issued</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prescription Label Incorrect</td>
<td>174</td>
<td></td>
</tr>
<tr>
<td>Lack Proper Information</td>
<td>170</td>
<td></td>
</tr>
<tr>
<td>Official Rx Non-Compliance</td>
<td>33</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>377</strong></td>
<td></td>
</tr>
</tbody>
</table>

#### Drug Stock/Environment

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of WN Issued</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improper Environment</td>
<td>110</td>
<td></td>
</tr>
<tr>
<td>Out-of-Date Drug Stock</td>
<td>105</td>
<td></td>
</tr>
<tr>
<td>Security</td>
<td>84</td>
<td></td>
</tr>
<tr>
<td>Unsanitary/Orderly/Clean</td>
<td>23</td>
<td></td>
</tr>
<tr>
<td>Improper Drug Storage/Refrigerator Temp Log</td>
<td>23</td>
<td></td>
</tr>
<tr>
<td>Area for Non-Sterile Compounding</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Violation of Limited Formulary</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>355</strong></td>
<td></td>
</tr>
</tbody>
</table>
### Most Common Warning Notices (All Classes of Pharmacy) cont.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Number of WN Issued</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inventory</td>
<td></td>
<td>218</td>
</tr>
<tr>
<td>No Annual Inventory</td>
<td>83</td>
<td></td>
</tr>
<tr>
<td>Incomplete Inventory</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>No Change of PIC Inventory</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>No Change of Ownership Inventory</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>No Perpetual Inventory (Class C)</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

### Violations NOT Resulting in Warning Notices
- Individuals performing technician duties without an active registration.
- Technicians performing technician duties with no pharmacist on site.
- Pharmacists who do not verbally counsel a patient on a new prescription.

### Violations NOT Resulting in Warning Notices
- Pharmacy is not able to produce 2 consecutive annual inventories.
- PIC falsifies response to a Warning Notice.
- Pharmacies dispensing/shipping prescription drugs into other states without holding a pharmacy license in that state.
Violations NOT Resulting in Warning Notices

- Egregious Conditions
  - Dispensing CIIs pursuant to prescriptions not issued on an Official Form;
  - Excessive quantity of out-of-date stock (i.e., more than 25% of the inventory);
  - Pharmacy closed and did not notify TSBP of closing;
  - Operating without a PIC for an extended period of time (i.e., 3 months or more).

Violations NOT Resulting in Warning Notices

These scenarios would result in an Emergency Temporary Suspension Hearing.

- Impaired pharmacist on duty;
- Sterile compounding pharmacies who have extensive non-compliance with Board Rule 291.133 and will not voluntarily agree to “cease and desist” sterile compounding until conditions have been corrected; or
- Technicians performing pharmacist-only duties with no pharmacist on site.

Pharmacy Related Legislation Being Considered by the 2017 Texas Legislature
Sunset Review

Texas Pharmacy Act, Sec. 551.005. Application of Sunset Act.
- The Texas State Board of Pharmacy is subject to Chapter 325, Government Code (Texas Sunset Act). Unless continued in existence as provided by that chapter, the board is abolished and this subtitle expires September 1, 2017.

Sunset Review Time Line

August 2015.
- Sunset staff reviewed the agency.
Late March 2016.
- Sunset’s confidential report issued followed by a joint meeting with TSBP to discuss recommendations, followed by Sunset's formal request for agency written response.

Sunset Review Time Line (cont.)

April 2016.
- Sunset staff report published.
August 22, 2016.
- Sunset Commission public hearing make decisions on the review of the agency.
- 2017 Legislative Session – Sunset Bill introduced.
The “Sunset” Bill


If passed the bill will amend the Controlled Substances Act (TCSA) to require pharmacies to send all required information for Schedule II – V prescriptions to the PMP not later than the next business day after the date the prescription is completely filled.

Language also contained in HB 3208 by Gonzales.

If passed, the bill will add a new Sec. 481.0763 to the TCSA titled Duty of Pharmacists to require pharmacists to access the PMP before dispensing to a patient:
- Opioids;
- Benzodiazepines;
- Barbiturates; or
- Carisoprodol.

- If passed, the bill will add a new Sec. 481.0764 to the TCSA titled Reports of Wholesale Pharmaceutical Distributors to require wholesalers to report to TSBP the sale of a controlled substance made by the distributor to a person in this state.


- If passed, the bill will amend the TCSA to require TSBP to consult with the Medical Board, Podiatric Board, Dental Board, Veterinary Board, Board of Nursing, Board of Optometry, and DPS to:
  - Identify prescribing and dispensing practices that may be potentially harmful and patient prescription patterns that may suggest drug diversion or drug abuse.


- If passed, the bill will amend the TCSA to specify that TSBP shall determine:
  - The conduct that constitutes a potentially harmful prescribing pattern or practice; and
  - Develop indicators for levels of prescriber or patient activity that suggest a potentially harmful prescribing pattern or practice or drug diversion or drug abuse may be occurring.

If passed, the bill will amend the TCSA to require TSBP, based on the indicators developed, to:

- Send an electronic notification to a dispenser or prescriber, if the information submitted to the PMP indicates a potentially harmful prescribing pattern or practice may be occurring or drug diversion or drug abuse may be occurring.


If passed, the bill will amend the TCSA to specify that:

- TSBP may, by rule, develop guidelines identifying behavior that may suggest a patient may be obtaining controlled substances for drug diversion or drug abuse.
- A pharmacist who observes the patient behavior must access PMP prior to dispensing a controlled substance to these patients.


If passed, the bill will amend the Pharmacy Act to:

- Continue TSBP until 2029;
- Amend the duties of the executive director to specify that the executive director, under the direction of the board, may perform the duties required by the Act or designated by the board;
- Remove the requirement that a person be of good moral character to obtain a license or registration.

If passed, the bill will amend the Pharmacy Act to:
- Allow the Board to refuse to renew a license to practice pharmacy for a license holder who is in violation of a Board Order;
- Specify TSBP shall adopt rules relating to the CE required for pharmacy technicians.

If passed, the bill will amend the Pharmacy Act to specify that pharmacy technician CE requirements must include the:
- Number of hours of CE;
- Methods for meeting the CE requirements;
- Approval of CE programs;
- Reporting completion of CE;
- Records of completion of CE; and
- Board audits to ensure compliance.

If passed, the bill will amend the Pharmacy Act to specify that to renew a pharmacy technician registration, the registrant must, before the expiration date of the registration:
- Pay the renewal fee; and
- Comply with the continuing education requirements.
If passed, the bill will amend the Pharmacy Act to specify that to renew a pharmacy technician registration after a registration has been expired for:

- 90 days or less, the tech. must pay a renewal fee that is equal to 1½ times the renewal fee;
- > than 90 days, but < 1 year, the tech. must pay a renewal fee that is 2X the renewal fee;
- 1 year or more, the tech. may not renew.

If passed, the bill will amend the Pharmacy Act to require the executive director to:

- Create a Board member training manual;
- Distribute a copy of the manual yearly to each Board member. On receipt of the manual, each Board member must sign and submit to the executive director a statement acknowledging receipt of the manual.
- Publish a copy of each signed statement on the Board's website.

If passed, the bill will amend the training requirements for Board members in the Pharmacy Act to include:

- The law governing the TSBP's operations;
- The scope of and limitations on the rulemaking authority of the Board;
- The laws relating to Board members disclosing conflicts of interest; and
- Other laws applicable to Board members in performing their duties.

If passed, the bill will amend the Pharmacy Act to require TSBP to develop a policy to encourage the use of:
- Negotiated rulemaking procedures (NRP) for the adoption of board rules; and
- Appropriate alternative dispute resolution (ADR) procedures to assist in the resolution of internal and external disputes under the board’s jurisdiction.


If passed, the bill will amend the Pharmacy Act to specify that TSBP shall:
- Coordinate the implementation of the NRP or ADR;
- Provide training as needed to implement or NRP or ADR; and
- Collect data concerning the effectiveness of those procedures.

Other Bills being Considered by the Texas Legislature
HB 75 by Rep. Flynn

If passed, the bill will amend the Pharmacy Act to specify that a pharmacy technician must have passed either:
- Board-approved pharmacy technician certification examination; or
- Certification examination offered by a nationally recognized pharmacy technician certification program accredited by the National Commission for Certifying Agencies.

HB 593/SB 1240

If passed, the bill will amend the Psychology Act to:
- Allow psychologists to prescribe dangerous drugs and controlled substances.
- Specify:
  - Additional training for psychologists that prescribe.
  - That the Psychology Board must adopt rules to require the psychologist to consult with a patient's treating doctor before they can prescribe.

HB 1178/SB 536

If passed, the bill will increase the penalty for stealing a controlled substance to a felony if the:
- Building in which a controlled substance is stored is a pharmacy, clinic, hospital, or nursing facility; and
- Person entered or remained concealed in that building with intent to commit a theft of a controlled substance; and
HB 1178/SB 536
by Rep Kuempel/Sen. Chuy Hinojosa (cont.)

If passed, the bill will amend the penal code to specify that an offense is a state jail felony if a controlled substance is taken, regardless of the value of the controlled substance stolen.

HB 1415/SB 681
by Rep. Klick/Sen. Hancock

If passed, the bill will amend the Nursing Practice Act to greatly expand the authority for advanced practice nurses.

HB 1482 by Shaheen

If passed, the bill will amend the Medical Practices Act to allow a physician to dispense dangerous drugs to the physician's patients and charge the patients for the drugs.

Before dispensing a dangerous drug to a patient, a physician must disclose the:
- Cost of the drug to the physician; and
- Price the patient will be charged for the drug.
HB 1804/SB 831

If passed, the bill will allow the Board of Nursing to authorize an APRN to prescribe and order drugs and devices, including controlled substances listed in Schedules III, IV, and V, dangerous drugs, and nonprescription drugs, if the APRN:

- Is a military veteran;
- Practiced as an APRN while on active duty; and
- Has been issued a prescription authorization number by BON.

HB 1846/SB 433

If passed, the bill will amend the Pharmacy Act to add a new Section 562.017 titled Certain Prescriptions For Controlled Substances that specifies that a pharmacist in a Class A pharmacy SHALL dispense a CII RX prescribed by an APRN or PA.

HB 1939/SB 916

If passed, the bill will:

- Prohibit the sale of dextromethorphan (DM) to minors;
- Require a business to require a customer to show an ID showing the customer is 18 or older;
- Specify a district or county attorney shall:
  - Issue a warning to a business for a 1st violation;
  - After the Warning a business is liable for a civil penalty of $150 for 2nd violation; and
  - $250 for each subsequent violation.
HB 1939/SB 916

If passed, the bill will specify that the requirements do not:
- Apply to DM dispensed by prescription.
- Require businesses:
  - to keep records of sale of DM; or
  - store DM is a specific location; or
  - restrict the availability of DM to customers.

HB 2389 by Burkett

If passed, the bill will amend the Pharmacy act to add the following new definition:
- "Direct supervision" means supervision by a pharmacist who directs the activities of a pharmacist-intern, pharmacy technician, or pharmacy technician trainee to a sufficient degree to ensure the activities are performed accurately, safely, and without risk of harm to patients, as specified by board rule.

HB 2389 by Burkett (cont.)

If passed, the bill will add a new Sec. 554.058 to the Pharmacy Act titled Rules Prohibiting Remote Access that specifies:
- TSBP may not adopt rules prohibiting a pharmacist, intern, or a pharmacy technician employed by a pharmacy from accessing the pharmacy's database from a remote location to perform Rx processing functions, provided the pharmacy establishes controls to protect the privacy and security of confidential information.
HB 2697/SB 1107  

If passed, the bill will amend the Medical Practices Act to outline provision of Telemedicine and Telehealth Services.

A Section of the bill adds a new Sec. 111.006 the Medical Practices Act titled Coordination to Adopt Rules that Determine Valid Prescription.

HB 2697/SB 1107  

If passed, this new Section will require the Texas Medical Board, Board of Nursing, Physician Assistant Board, and the Board of Pharmacy to jointly adopt rules that establish the determination of a valid prescription in accordance with new Sec. 111.005 added by the bill.

HB 2697/SB 1107  

If passed the bill specifies that rules adopted the agencies must allow for the establishment of a practitioner-patient relationship by a telemedicine medical service provided by a practitioner to a patient.
HB 2697/SB 1107

If passed the bill also specifies that TMB, BON, TPAB, and TSBP must jointly develop and publish on each respective Internet website responses to frequently asked questions relating to the determination of a valid prescription issued in the course of the provision of telemedicine medical services.

HB 2743 by Zedler

Amends the Texas Controlled Substances Act to specify that a person prescribing a Schedule II controlled substance submit an electronic prescription and may not use a written prescription.

HB 2743 by Zedler (cont.)

An official prescription form may only be used by a prescriber:
- who is a veterinarian;
- when there is a temporary technological or electrical failure, as provided by board rule;
- issuing a prescription to be filled outside this state;
- who received a waiver from the Board; or
- if the prescriber determines that it would be impractical for the patient to obtain the substance in a timely manner and a delay would adversely impact the patient's medical condition.
HB 2743 by Zedler (cont.)

The board may grant to a prescriber or dispensing pharmacist a waiver from the requirement to use the electronic prescription record due to:
- economic hardship;
- technological limitations that are not in control of the prescriber or dispensing pharmacist; or
- another exceptional circumstance demonstrated by the prescriber or dispensing pharmacist.

A waiver may not be for a period of more than one year.
A person may reapply for a waiver on expiration of the previous waiver.

HB 3208 by Larry Gonzales

Amends the Texas Controlled Substances Act (TCSA) to:
- Require dispensing veterinarians to report dispensing to the Prescription Monitoring Program (PMP);
- Require pharmacies and dispensing veterinarians to report dispensing to the PMP no later than the next business day;
HB 3208 by Larry Gonzales (cont.)

- Authorizes licensing boards to access the PMP for the purpose of:
  - Investigating a specific licensee; or
  - Monitoring for potentially harmful prescribing or dispensing patterns or practices.

HB 3208 by Larry Gonzales (cont.)

- Requires TSBP:
  - In consultation with DPS and the healthcare licensing boards to identify potentially harmful prescribing or dispensing patterns or practices that may suggest drug diversion or drug abuse.
  - To develop indicators for levels of prescriber or patient activity that suggest potentially harmful practice may be occurring.

HB 3208 by Larry Gonzales (cont.)

- Specifies that TSBP may send a prescriber or dispenser an electronic notification (push notification) if information submitted to the PMP indicates potentially harmful prescribing or dispensing patterns or practice may be occurring.
HB 3208 by Larry Gonzales (cont.)

Specifies that regulatory agencies for persons that dispense controlled substances must periodically access the information in the PMP to determine whether a prescriber is engaging in potentially harmful prescribing patterns or practices.

HB 3208 by Larry Gonzales (cont.)

Adds a new section to the TCSA that requires prescribers and pharmacists to access the PMP before prescribing or dispensing:

- Opioids;
- Benzodiazepines;
- Barbiturates; or
- Carisoprodol.

HB 3208 by Larry Gonzales (cont.)

Adds a new section to the TCSA that allows “exceptions” to the requirement to checking on Rxs for Opioids, Benzodiazepines, Barbiturates, and Carisoprodol if:

- the patient has been diagnosed with cancer or the patient is receiving hospice care; and
- the prescriber clearly notes in the prescription record that the patient was diagnosed with cancer or is receiving hospice care, as applicable.
Numerous other Bills Contain Language Similar to HB 3208

- SB 3313 by Van Taylor, SB 316 by Hinjosa and SB 1412 by Schwertner. Contain the following:
  - next business day requirement for sending information;
  - the language regarding potentially harmful prescribing or dispensing patterns; and
  - The requirement for accessing the information when Opioids, Benzodiazepines, Barbiturates; or Carisoprodol.

- SB 3313 by Van Taylor, SB 316 by Hinjosa and SB 1412 by Schwertner. Contain the following:
  - The exception for Hospice and cancer patients.

HB 2859 by Coleman

- This bill also amends the TCSA to require:
  - Prescribers to electronically submit prescription information to the PMP by the next business day; and
  - Pharmacies to submit prescription information to the PMP no later than the next business day

(Note: no exceptions in the bill);

- Specifies “to avoid duplicate entries,” the PMP system must be capable of associating a report by a prescriber issuing a Rx with a report by a pharmacy subsequently dispensing the substance under that same Rx.
HB 3273 by Roberts

If passed the bill will amend the Pharmacy Act to:

– Amend the definition of "Compounding" to read Compounding means the preparation, mixing, assembling, packaging, and labeling of a drug or device . . .

HB 3273 by Roberts (cont.)

If passed the bill will amend the Pharmacy Act to specify that TSBP:

– Must revoke a pharmacy license if the pharmacy has not begun operations within six months after the pharmacy license is issued; and
– May not issue a license renewal certificate for a pharmacy that the board determines, on inspection, that the pharmacy is not operating at that location.

HB 3273 by Roberts (cont.)

If passed the bill will amend the Pharmacy Act to specify that a pharmacy technician must have completed a training program that meets criteria established by rule.
HB 3273 by Roberts (cont.)

If passed the bill will amend the Controlled Substances Act to specify that:
- A pharmacy that does not dispense any controlled substances during a 7-day period, must notify the TSBP that they did not dispense any controlled substance prescriptions (Zero Dispensing Report); and
- The notice must be sent no later than the 7th day after the last day of the period Rxs were dispensed.

SB 124 by Rep. Huffines

If passed, the bill will require TSBP to:
- Broadcast over the Internet, live video and audio of each open meeting of the Board;
- Provide access to the broadcast on the TSBP Website;
- Maintain archived video for 2-years on the TSBP Website.

Texas Prescription Monitoring Program

AWARxE
PMP AWARxE

Go to the PMP Website:
texas.pmpaware.net

OR

Go to the TSBP Website:
www.pharmacy.texas.gov

User with existing accounts were transferred to the new system. Login using email and reset password. New users can create an account.
www.facebook.com/TexasPMP/

The Texas PMP Facebook page will offer news and updates specific to the program.

Still valid prescription forms!
Thank You!

Thank you for your attendance!

Receiving Credit:
- You will receive an email notification and instructions on how to complete the program evaluation. Please allow up to one business week to receive this email notification.
- Complete the evaluation to generate your certificate.
- You can save and/or print your certificate.