



Louisiana Board of Pharmacy

3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700
Telephone 225.925.6496 ~ Facsimile 225.925.6499
www.pharmacy.la.gov ~ E-mail: info@pharmacy.la.gov



Annual Report

Fiscal Year 2015-2016

July 1, 2016

Mission

Created by the Louisiana Legislature in 1888, the mission of the Louisiana Board of Pharmacy remains unchanged over a century later: to regulate the practice of pharmacy in such a manner as to protect the public health, safety, and welfare of the citizens of Louisiana. Toward that goal, the Louisiana Pharmacy Practice Act specifically authorizes the Board to restrict the practice of pharmacy to qualified persons, as well as to control and regulate all persons and sites that sell drugs or devices or provide pharmacy care services to consumers in this state.

Membership

The Board is composed of seventeen members: two pharmacists from each of eight districts and one public member at large. The district representatives are nominated by pharmacists, appointed by the governor, confirmed by the state senate, and serve six year terms. The public member is selected by, and serves at the pleasure of, the governor. The current members of the Board are:

District 1	Diane G. Milano, Richard M. Indovina, Jr.
District 2	Jacqueline L. Hall, Deborah H. Simonson
District 3	Blake P. Pitre, Richard A. Soileau
District 4	Clovis S. Burch, Rhonny K. Valentine
District 5	Carl W. Aron, T. Morris Rabb
District 6	Ronald E. Moore, Pamela G. Reed
District 7	Ryan M. Dartez, Chris B. Melancon
District 8	Brian A. Bond, Marty R. McKay
Public	Don L. Resweber

Licensure

In order to facilitate the restriction of practice to qualified persons, the Board has established educational, experiential, and examination requirements for licensure. As authorized by the legislature, the Board has contracted its high-stakes examination procedures with professional testing services.

A. Examinations for Pharmacists

The North American Pharmacist Licensure Examination (NAPLEX) and the Multistate Pharmacy Jurisprudence Examination (MPJE) are administered by the National Association of Boards of Pharmacy (NABP). These computer adaptive tests are administered in continuous window opportunities at multiple sites throughout the state. A minimum scaled score of 75 is required on each test to qualify for pharmacist licensure. The results for all Louisiana-based NAPLEX and MPJE candidates from ULM School of Pharmacy and Xavier University – College of Pharmacy in Calendar Year 2015 are summarized below:

NAPLEX

	Jan – Apr		May – Aug		Sept – Dec	
	<u>ULM</u>	<u>XU</u>	<u>ULM</u>	<u>XU</u>	<u>ULM</u>	<u>XU</u>
Total No. of Candidates	4	15	79	141	12	31
Mean Scaled Score – School	82	72	95	96	90	87
Mean Scaled Score – State	82	82	96	96	86	86
Mean Scaled Score – National	84	84	100	100	88	88
School Pass Rate [%]	50	53	90	85	100	86
State Pass Rate	69	69	88	88	76	76
National Pass Rate	67	67	92	92	78	78

MPJE

	Jan – Apr		May – Aug		Sept – Dec	
	<u>ULM</u>	<u>XU</u>	<u>ULM</u>	<u>XU</u>	<u>ULM</u>	<u>XU</u>
Total No. of Candidates	42	81	122	215	56	103
Mean Scaled Score – School	84	80	84	81	83	81
Mean Scaled Score – State	81	80	81	81	80	80
Mean Scaled Score – National	82	81	82	82	81	81
School Pass Rate [%]	93	73	98	89	95	86
State Pass Rate	81	81	88	88	87	87
National Pass Rate	88	88	93	93	88	88

B. Examinations for Technicians

The Pharmacy Technician Certification Board (PTCB) administers a national certification examination; this computer adaptive test is administered in continuous window opportunities at multiple sites throughout the state. A minimum scaled score of 75 is required to successfully complete the examination. The Louisiana Board of Pharmacy accepts the PTCB examination score result as part of the licensure requirements for pharmacy technicians. The results for all Louisiana-based PTCB candidates for Calendar Year 2014 are summarized here:

No. of State Candidates	1,112
State Pass Rate [%]	50
No. of National Candidates	58,364
National Pass Rate [%]	60

C. Census Data

At the close of the fiscal year on June 30, 2016, a review of our records yielded the following census information:

	<u>2016</u>	<u>2015</u>	<u>2014</u>
• Pharmacy Program			
1. Pharmacists			
> Number of active licenses	8,389	8,108	7,841
> Number of licensees within the state	5,509	5,596	5,329
2. Pharmacy Interns			
> Number of active registrations	1,088	1,097	1,081

3.	Pharmacy technicians			
>	Number of active certificates	6,969	6,726	6,603
4.	Pharmacy technician candidates			
>	Number of active registrations	1,861	1,981	1,907
5	Pharmacies			
>	Number of active permits	2,000	1,954	1,872
	- Community – Independent	583	598	593
	- Community – Chain	671	649	619
	- Hospital	173	174	176
	- Institutional	21	21	23
	- Nuclear	15	14	15
	- Charitable	12	12	12
	- Penal	2	2	2
	- Nonresident	523	484	432
6.	Equipment Permits			
>	Emergency drug kit (EDK)	464	484	474
>	Automated medication systems (AMS)	480	812	451
>	Durable medical equipment (DME)	622	603	490
7.	Special Activity Credentials			
>	CDTM Registration	59	52	41
>	Med. Administration Registration	2,603	2,383	2,037
>	Special Work Permits	48	54	38

<u>Subtotal of Credentials in Pharmacy Program</u>	24,635	24,254	22,865
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<u>2016</u>	<u>2015</u>	<u>2014</u>
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• CDS Program

1.	Animal Control Shelter	0	1	1
2.	Automated Medication System (AMS)	22	30	28
3.	Advanced Practice RN (APRN)	2,296	1,954	1,479
4.	Ambulatory Surgical Center (ASC)	21	87	89
5.	Correctional Center	1	4	6
6.	Dentist	2,134	2,133	2,123
7.	Drug Detection / Canine	9	12	12
8.	Distributor	301	327	324
9.	Podiatrist	152	142	133
10.	Veterinarian	1,085	1,045	1,002
11.	Dialysis Center	0	0	4
12.	Emergency Medical Center	5	26	22
13.	Emergency Medical Service	16	49	50
14.	Animal Euthanasia Technician	27	28	29
15.	Hospital	294	277	278
16.	Laboratory	12	13	13
17.	Physician	12,360	12,125	11,915
18.	Medical Clinic	3	81	89
19.	Manufacturer	37	42	42
20.	Miscellaneous	0	11	13
21.	Medical Psychologist	86	82	78

22.	Optometrist	326	316	309
23.	Pharmacies	1,388	1,403	1,387
24.	Physician Assistant	610	487	449
25.	Sales Representative	0	0	0
26.	Registered Outsourcing Facility	14	8	0
27.	Researcher	108	113	113
28.	Rural Health Clinic	2	11	12
29.	Substance Abuse Clinic	7	10	9
<u>Subtotal of Credentials in CDS Program</u>		<i>21,316</i>	<i>20,809</i>	<i>20,009</i>
<u>Total Credentials under Management</u>		45,951	45,063	42,874

D. New Credentials

During the past fiscal year, the Board issued 6,308 new credentials in the Pharmacy Program and 3,023 new credentials in the CDS Program. Of note within the Pharmacy Program, we issued 931 new pharmacist licenses, 1,204 new pharmacy technician certificates, and 2,178 new pharmacy technician candidate registrations during the past fiscal year. Of note within the CDS Program, we issued new CDS licenses to 1,366 physicians, 758 advanced practice registered nurses, and 254 physician assistants.

E. License Transfer (Reciprocity)

Persons already licensed as a pharmacist by any other state (except California) who wish to obtain a license in Louisiana must successfully complete the MPJE as well as the application and criminal background check. Of the 931 new pharmacist licenses issued this past fiscal year, 261 were issued subsequent to successful completion of the reciprocity process.

Compliance

A. Enforcement

In order to control and regulate the practice of pharmacy in Louisiana, the Board employs five pharmacist compliance officers to perform routine inspections and special investigations throughout the year in all places under the Board's jurisdiction. Besides the routine inspections, site visits for permit changes, and other calls for assistance, the compliance and administrative officers completed 401 investigations during the fiscal year: 18 of the original complaints were withdrawn, 23 resulted from termination of previously imposed probationary periods, 48 were determined to be without violation, 7 cases were referred to other agencies, 80 resulted in field/administrative corrections, 13 resulted in administrative sanctions, and 212 cases were referred to the Board's committees. The committees took no action in 37 of their cases, issued approvals for 49 non-disciplinary petitions, and recommended voluntary consent agreements for 114 cases. Of that number, all but 12 accepted the proposed discipline; those 12 respondents were referred for formal administrative hearings.

Compliance officers coordinate other investigative activities with a wide range of agencies, including local police departments, parish sheriff departments, other state regulatory and law enforcement agencies, and federal agencies such as the Drug Enforcement Administration, the Food and Drug Administration, and the Consumer Product Safety Commission. Though the compliance officers utilize the educational approach as the

fundamental mechanism to achieve compliance, certain circumstances warrant formal board action.

B. Adjudications

During the past fiscal year, the Board conducted four administrative hearings and levied formal disciplinary action against several credentials. A summary of that activity is presented here:

<i>Sanction</i>	<u>Pharmacist</u>	<u>Intern</u>	<u>Technician</u>	<u>Candidate</u>	<u>Permit</u>	<u>CDS</u>
Denial / Refusal	3	0	0	2	1	0
Reinstatement	2	0	4	0	1	1
Change Previous Orders	4	0	0	0	0	0
Assessment	2	0	2	0	17	0
Letter of Warning	0	0	0	0	2	0
Letter of Reprimand	17	0	13	0	3	0
Voluntary Surrender	6	0	4	0	0	0
Probation	11	1	3	6	2	0
Suspension	0	0	1	0	0	16
Revocation	0	0	7	5	3	0

C. Practitioner Recovery Program

The Board established its program in 1988 to assist practitioners obtain treatment for their impairment, maintain their recovery, and assist their re-entry into professional practice. As of July 1, 2016 there were 47 pharmacists, one pharmacy intern, and one pharmacy technician actively engaged in the recovery program. They surrendered their credentials while in treatment; following treatment and upon favorable recommendation by board-certified addiction medicine specialists, they applied for the reinstatement of their credentials. The Board reinstated their credentials on probation, and the licensees practice under various restrictions designed to monitor their re-entry to professional practice. In addition, the credentials for 42 pharmacists, two interns, 16 technicians, and four technician candidates were still on active suspension for impairment reasons.

Board Activity

A. Regulatory

The Board's Regulation Revision Committee is tasked with the continuous review of the Board's rules and their revision as appropriate. The committee initiated and the Board completed several regulatory projects during the fiscal year.

- Electronic Product Verification, amending LAC 46:LIII.Chapters 12 and 15;
- Compounding for Office Use for Veterinarians, amending LAC 46:LIII.Chapter 25;
- Electronic Signature on Fax Prescriptions, amending LAC 46:LIII.Chapter 25;
- Telepharmacy Services Permit, amending LAC 46:LIII.Chapter 24; and
- Remote Processor Pharmacy Permit, amending LAC 46:LIII.Chapters 11 and 24.

The Board has four additional regulatory projects not yet completed; the progress of these projects may be monitored at the Board's website:

- Accreditation of Pharmacy Technician Training Programs, amending LAC 46:

LIII.Chapter 9;

- Controlled Substance Prescriptions, amending LAC 46:LIII.Chapters 25 and 27;
- Pharmacist-in-Charge of Nonresident Pharmacy; amending LAC 46:LIII.Chapter 23; and
- Medication Synchronization, amending LAC 46:LIII.2519.

Finally, the Committee continues its work on drafting rules to implement the statewide medical marijuana program authorized by the 2015 Legislature.

B. Legislative

During the 2016 regular session, the Board sponsored three bills, two of which were successful. Act 62 amended the state list of controlled substances to harmonize the state list with the federal list. Act 189 amended the prescription monitoring program law to authorize the Board to adopt a rule setting standards for the retention, archiving and destruction of the prescription transaction data housed by the program.

C. Operations

We have also completed five years of service with our website's content management system and its mass communication capabilities. We have increased the frequency of communications to our licensees through the use of targeted email, alerts, and bulletins. Through avoided postage and labor costs of mass snail mail notices, we have already recouped the cost of our investment and will continue our savings going forward. In response to requests from users of mobile communication devices, we have updated our website to be responsive to access requests from such mobile devices.

Our licensing information system was acquired and placed into service in 2010. We have scheduled a major upgrade for the system in the next fiscal year; that upgrade is essential to allow the expansion of online services. In addition, we are planning a major project to scan our licensure files which will allow further automation of our credentialing processes.

Finally, the Board continued its operation of Louisiana's Prescription Monitoring Program (PMP). The initial contract for the program vendor reached the end of its five year life, and the contract was released for public bid. The new vendor, Optimum Technology, Inc. based in Columbus, OH, was awarded the second contract in December 2013. During this fiscal year, that firm was acquired by Appriss, Inc. based in Louisville, KY. Appriss agreed to honor the terms of the 2013 contract, and further, transitioned the Louisiana program to its operating platform (Aware) in June 2016. The number of prescribers and dispensers authorized to access the program's database continues to increase, as has the average number of queries per day. Since the program is required to file an annual report to the legislature, we have appended that report to this one to facilitate its separation.

D. Physical Plant

The Board purchased its office building in December 2010 and moved to its current location in May 2011. We continue to make minor improvements to the building and grounds. The loan for the purchase of the building was retired in December 2015.

Board Office

The Board currently employs 17 people on a full-time basis in a variety of professional, technical, and clerical roles; the Board also supports the local Cooperative Office Education

(COE) program in Baton Rouge area high schools by hiring high school senior students on a temporary basis. The physical and mailing address of the board office is:

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3388 Brentwood Drive
Baton Rouge, LA 70809-1700
Telephone (225) 925-6496
Telecopier (225) 925-6499

The board's website address is www.pharmacy.la.gov and general email is received at info@pharmacy.la.gov.

Conclusion

The board has had an active year on several fronts, and all of these activities have contributed to the overall mission of the board. The officers and members of the board, as well as the entire office staff, are committed to achieving our goal of protecting the public's health, safety and welfare through appropriate regulation of the practice of pharmacy in this state. We understand that public service is a privilege, and we endeavor to render that service honorably.

Prepared by:
Malcolm J Broussard
Executive Director



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Prescription Monitoring Program Annual Report

Fiscal Year 2015-2016

July 1, 2016

Introduction

Act 676 of the 2006 Louisiana Legislature authorized the development, implementation, operation, and evaluation of an electronic system for the monitoring of controlled substances and other drugs of concern that are dispensed within the state or dispensed by a licensed pharmacy outside the state to an address within the state. The goal of the program is to improve the state's ability to identify and inhibit the diversion of controlled substances and drugs of concern in an efficient and cost-effective manner and in a manner that shall not impede the appropriate utilization of these drugs for legitimate medical purposes.

The Prescription Monitoring Program (PMP) was implemented in August 2008. We notified pharmacies of their requirement to report all eligible prescription transactions to the program, and further, required them to report all historical data retroactive to June 1, 2008 no later than December 31, 2008. In December 2008, the Board notified all prescribers and dispensers wishing to acquire direct access privileges of the requirement to complete the web-based orientation program prior to receiving their access privileges. The web portal to the program database was opened to queries on January 1, 2009, and the program remains fully functional.

The initial vendor selected pursuant to the original public bid in 2008 was Health Information Designs, Inc. from Auburn, AL. When that contract was re-bid in 2013, the successful bidder was Optimum Technology, Inc. from Columbus, OH. In 2015, that firm was acquired by Appriss, Inc. based in Louisville, KY. During Fiscal Year 2015-2016, Appriss transitioned the Louisiana program from the Optimum Technology platform to its own Aware platform. Among other benefits will be an enhanced reporting capability.

Advisory Council

The enabling legislation created the PMP Advisory Council to assist the Board in the development and operation of the program. The Board shall seek, and the advisory council shall provide, information and advice regarding: (1) which controlled substances should be monitored, (2) which drugs of concern demonstrate a potential for abuse and should be monitored, (3) design and implementation of educational courses required by the PMP law, (4) methodology to be used for analysis and interpretation of prescription monitoring information, (5) design and implementation of a program evaluation component, and (6) identification of potential additional members to the advisory council. The original legislation specifically identified the 25 organizations named to the council and further, named the leader of the organization but permitted the leader to name a designee to function in the absence of the appointee. The organizations represented on the council include the licensing agencies for the prescribers and dispensers, the professional membership organizations for the prescribers and dispensers, organizations representing federal, state, and local law enforcement agencies, as well as representatives from the legislature. The advisory council has elected its own leadership, adopted policies and procedures for its operations, and meets on a quarterly basis.

The council actively reviews the program's operations and makes recommendations for the improvement of the program. Those recommendations are forwarded to the Board of Pharmacy, resulting in regulatory or legislative initiatives designed to implement the council's recommendations.

Legislative Mandates

The 2014 Legislature adopted a number of measures which will serve to improve the program. Beginning August 1, 2014, pharmacies and other dispensers will be required to report their eligible prescription transactions to the program database no later than the next business day following the date of dispensing, instead of the previous seven day allowance. In addition, the Board has recently completed the rulemaking process authorized by the 2013 Legislature that will allow authorized prescribers and dispensers to appoint delegates for the purpose of retrieving data from the program's database.

The 2015 Legislature also adopted a measure that will require prescribers of certain controlled substances for the treatment of certain conditions to access the patient's history in the program database prior to initiating such treatment. The same measure will require pharmacists dispensing certain controlled substances to certain patients to access the patient's history in the program database prior to dispensing such medications.

Program Highlights

- August 2015 – began sharing information with Arkansas and Mississippi.
- October 2015 – enabled Kroger Pharmacies through the Gateway program.
- March 2016 – began sharing information with South Carolina.
- April 2016 – began sharing information with Connecticut.
- June 2016 – migrated program to the Aware platform operated by Appriss.

Program Metrics

The data on the following page provides summary data for the operational aspects of the program – number of prescription transactions reported to the program database, number of prescribers and dispensers and their delegates registered to access the program data, the number of queries performed by those authorized prescribers and dispensers and their delegates as well as law enforcement agencies and regulatory agencies, and finally, the average number of queries per day.

Louisiana Board of Pharmacy
Prescription Monitoring Program

Calendar Year:	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>6/30/2016</u>
Prescription Database:									
Transactions Reported (in Millions)	6.015	11.144	12.117	12.775	12.99	13.032	13.02	12.403	6.074
Access to Program Data:									
New prescribers registered:		1,526	721	548	574	640	1,093	958	350
<i>Total prescribers registered:</i>		<i>1,526</i>	<i>2,247</i>	<i>2,795</i>	<i>3,369</i>	<i>4,009</i>	<i>5,102</i>	<i>6,060</i>	<i>6,410</i>
New prescriber delegates registered:							473	709	153
<i>Total prescriber delegates registered:</i>							<i>473</i>	<i>1,182</i>	<i>1335</i>
New pharmacists registered:		728	483	361	494	509	466	418	180
<i>Total pharmacists registered:</i>		<i>728</i>	<i>1,211</i>	<i>1,572</i>	<i>2,066</i>	<i>2,575</i>	<i>3,041</i>	<i>3,459</i>	<i>3,639</i>
New pharmacist delegates registered:							143	236	70
<i>Total pharmacist delegates registered:</i>							<i>143</i>	<i>379</i>	<i>449</i>
Searches Performed by Users:									
Solicited by prescribers:		235,985	368,376	496,270	650,514	842,139	942,733	1,178,446	608,149
Solicited by prescriber delegates:							26,993	269,147	212,933
Solicited by pharmacists:		74,277	111,075	153,783	212,754	382,204	456,568	1,015,496	552,229
Solicited by pharmacist delegates:							3,954	51,285	35,915
Solicited by law enforcement:		680	889	1,230	845	1,150	1,224	1,011	391
Solicited by regulatory agencies:		833	1,401	1,612	1,584	1,364	1,675	1,477	701
Average queries per day:									
		854	1,319	1,788	2,372	3,361	3,926	6,896	7,727

Outlook for Next Fiscal Year

The program continues to enroll new authorized users, and the daily average number of queries continues to increase. With assistance from the licensing agencies encouraging use of the program by their licensees, along with legislative mandates for certain prescribers and patients, we hope to improve on the current registration rate. With the recent legislative change facilitating the sharing of data with other states, we continue to identify new states with whom we can share prescription data.

Conclusion

The program has completed approximately eight years of operation. Based on feedback from authorized users, it appears to represent an efficient and cost-effective use of resources. Data from the program suggests we have made some early contributions to the reduction of diversion of controlled substances. Our interstate collaborations have yielded high marks for our program design and operation. We look forward to fully developing the potential of our program to identify and inhibit the diversion of controlled substances in Louisiana.

We acknowledge the contributions from Ms. Lindsey Schultz, our Administrative Coordinator, and Mr. Joseph Fontenot, Program Manager, for their operation of the program and the development of this report.

Prepared by:
Malcolm J. Broussard
Executive Director