

## **NOTICE OF INTENT**

### **Department of Health**

#### **Board of Pharmacy**

##### **Pharmacists (LAC 46:LIII)**

In accordance with the provisions of the Administrative Procedure Act (R.S. 49:950 et seq.) and the Pharmacy Practice Act (R.S. 37:1161 et seq.), the Board of Pharmacy hereby gives notice of its intent to amend §§109, 113, 301, 505, 507, 907, 909, 1103, 1119, 1123, 1203, 1503, 1525, 1803, 2533, and 3005 of its rules and to repeal §§1124, 1811, 1813, and 1815 of its rules. Pursuant to R.S. 49:964(B), the Board conducted a public hearing on June 26, 2025 to solicit comments and testimony as to whether any of its rules are believed to be contrary to law, outdated, unnecessary, overly complex, or burdensome. Subsequent to its evaluation of those comments, the Board solicited additional stakeholder input in formulating these proposed rules changes.

The proposed Rule change in §109 removes the Reciprocity Committee from the list of standing board committees, replaces it with the Application Review Committee, and describes the makeup and function of the Application Review Committee. The proposed Rule change in §113 makes the requirements for rulemaking petitions submitted to the Board clear, concise, and more user friendly, and includes electronic mail as a method for delivery of such petitions. The proposed Rule change in §301 eliminates the specific reference to a number and cites the law generally for the definition of “person” to avoid future amendments from renumbering that may occur due to changes in the law. The proposed Rule changes in §§505, 1203, and 1525 remove the reference to R.S. 37:1184, replacing it with a reference to §115 of this Part, which establishes fees. The proposed Rule changes in §507 and §909 incorporate into rules the existing Board policy to accept Interprofessional Continuing Education (ICPE) credit awarded by a provider with Joint Accreditation (JA) for continuing education (CE) requirements and add comprehensive lists of CE requirements for specific topics (nuclear pharmacy, sterile compounding, medication administration) which are found in the rules for each of those topics.

The proposed Rule change in §907 updates language regarding compounding to reflect verbiage used in current United States Pharmacopeia (USP) chapters. The proposed Rule change in §1103 removes specific titles of required reference materials. The proposed Rule changes in §1119 and §1503 remove definitions of “Personal Identifier,” “Password,” and “Electronic Drug Record Keeping System,” and change the definition of “Positive Identification” to be a method of linking a practice of pharmacy activity or other function in a pharmacy information system to the individual who performed the activity while removing the previous specific requirements for the method. The proposed Rule changes in §1123 streamline requirements for record keeping using more concise language, add an allowance to store hard copy prescriptions and chart orders in numerical or date sequence, and clarify electronic imaging retention requirements. The additional proposed Rule change in §1203 and the proposed Rule change in §3005 remove the steps to obtain duplicate or replacement registration, as credentials are now virtual which means no paper form exists. The proposed Rule change in §1803 updates the reinstatement process for an expired permit for a correctional center pharmacy. The proposed Rule change in §2533 repeals terms and definitions not currently used in the Subchapter.

The proposed repeal of §§1124, 1811, 1813, and 1815 removes redundant and unnecessary regulations concerning records of pharmacy services for patients in licensed healthcare facilities other than hospitals and emergency drug kits in correctional center pharmacies.

### **Title 46**

## **PROFESSIONAL AND OCCUPATIONAL STANDARDS**

### **Part LIII. Pharmacists**

#### **Chapter 1. Introduction**

#### **§109. Standing Board Committees**

A. – B. ...

C. Application Review Committee. The Application Review Committee shall consist of at least three board members appointed by the president. The committee reviews applications referred by the administrative officers and submits its recommendations to the full board.

D. – F. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2076 (October 2003), effective January 1, 2004, amended LR

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### §113. Rulemaking Procedures

A. Petitions from Interested Persons

1. All petitions for the adoption, amendment, or repeal of a rule shall be submitted in writing. Petitions must be legibly printed or typed and delivered to the Board office by United States Postal Service, another delivery service (including electronic mail), or by personal delivery.

A.2. – C.1. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 49:953.

HISTORICAL NOTE: Promulgated by the Department of Health, Board of Pharmacy, LR 46:586 (April 2020), amended LR

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## Chapter 3. Board Hearings

### §301. Board Hearing Procedures and Jurisdiction

A. Person. The board has jurisdictional authority over the person practicing pharmacy, assisting in the practice of pharmacy, operating a pharmacy, or otherwise licensed, registered, certified, or permitted by the board. A person is defined in R.S. 37:1164 of the Pharmacy Practice Act.

B. - D. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2077 (October 2003), effective January 1, 2004, amended LR

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## Chapter 5. Pharmacists

### §505. Licensure

A. - A.1.b. ...

2. Expired License. A pharmacist license that has not been renewed by December 31 of each year shall expire and be null and void. The holder of an expired license may submit a written request, complete with any supporting documentation, for reinstatement to the board. The request may be referred preliminarily to the board's reinstatement committee for an informal hearing and recommendation that may be considered by the board at its next regularly scheduled meeting. The board may reinstate an expired license upon payment of applicable annual, delinquent, and lapsed license fees pursuant to Section 115 of this Part and other conditions as the board deems appropriate.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2083 (October 2003), effective January 1, 2004, LR 33:1124 (June 2007), LR 38:1234 (May 2012), amended by the Department of Health, Board of Pharmacy, LR 46:1227 (September 2020), amended LR

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### §507. Continuing Education Program

A. - B.4. ...

C. Requirements

1. A minimum of 1 1/2 ACPE or board-approved CPE units, or 15 hours, shall be required each year as a prerequisite for pharmacist licensure renewal. Of this number, no less than 3/10 ACPE or board-approved CPE units, or three hours, shall be acquired through live presentations, as designated by ACPE or the board. Alternatively, should a pharmacist choose to not acquire at least 3/10 ACPE or board-approved CPE units, or three hours, through live presentations, then he shall acquire an additional 5/10 ACPE or board-approved CPE units, or five hours, through any other acceptable method, over and above the minimum requirement, for a total of two ACPE or board-approved CPE units, or 20 hours.

a. The board accepts Interprofessional Continuing Education (IPCE) credit awarded by a provider with Joint Accreditation (JA), for the purpose of meeting the continuing education requirements for renewal.

b. Nuclear pharmacists shall complete at least five hours of their required continuing education related to applications and procedures specific to nuclear pharmacy.

c. Pharmacists who perform sterile compounding shall complete at least one hour of their required continuing education related to sterile drug preparation, dispensing, and utilization.

d. Pharmacists who administer medications shall complete at least one hour of their required continuing education related to medication administration.

C.2. – D.3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 23:1306 (October 1997), LR 29:2083 (October 2003), effective January 1, 2004, LR 33:1125 (June 2007), amended by the Department of Health, Board of Pharmacy, LR 46:569 (April 2020), amended LR

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## **Chapter 9. Pharmacy Technicians**

### **§907. Scope of Practice**

A. - A.1. ...

B. Pharmacy technician candidates shall not:

1. - 3. ...

4. compound Category 3 sterile preparations, as defined by the United States Pharmacopeia (USP), or compound sterile preparations from nonsterile starting ingredients.

B.5. - C.3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1212.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 30:2486 (November 2004), effective January 1, 2005, amended LR 32:1049 (June 2006), amended by the Department of Health, Board of Pharmacy, LR 43:2498 (December 2017), effective January 1, 2018, amended LR 48:496 (March 2022), amended LR 49:1558 (September 2023), amended LR

### **§909. Continuing Education**

A. A minimum of one technician-specific ACPE or board-approved CPE unit, or 10 credit hours, shall be required each year as a prerequisite for annual renewal of a pharmacy technician certificate. Such CPE units shall be credited in the 12-month period prior to the expiration date of the certificate.

1. The board accepts Interprofessional Continuing Education (IPCE) credit awarded by a provider with Joint Accreditation (JA), for the purpose of meeting the continuing education requirements for renewal.

2. Certified pharmacy technicians who perform sterile compounding shall complete at least one hour of their required continuing education related to sterile drug preparation, dispensing, and utilization.

3. Certified pharmacy technicians who administer medications shall complete at least one hour of their required continuing education related to medication administration.

B. – D.3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1212.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 30:2487 (November 2004), effective January 1, 2005, amended LR 39:1778 (July 2013), amended by the Department of Health, Board of Pharmacy, LR 43:2498 (December 2017), effective January 1, 2018, amended LR

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## Chapter 11. Pharmacies

### Subchapter A. General Requirements

#### §1103. Prescription Department Requirements

A. - G. ...

H. References. Each pharmacy permit shall maintain access to current versions of the following:

1. applicable state and federal pharmacy laws and regulations; and
2. relevant reference materials applicable to the pharmacy's scope of practice.

I. - J. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 23:1310 (October 1997), amended LR 29:2087 (October 2003), effective January 1, 2004, LR 39:315 (February 2013), amended by Department of Health, Board of Pharmacy, LR 46:579 (April 2020), LR 47:1642 (November 2021), LR 48:497 (March 2022), LR 49:1556 (September 2023), amended LR 50:1156 (August 2024), amended LR

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### Subchapter B. Pharmacy Records

#### §1119. Definitions

A. As used in this Chapter, the following terms shall have the meaning ascribed to them in this Section:

\* \* \*

*Password*—Repealed.

*Personal Identifier*—Repealed.

*Positive Identification*— means a secure, unique, and verifiable method that indisputably links a practice of pharmacy activity or other function recorded in a pharmacy information system to the specific pharmacist, pharmacy intern, pharmacy technician, pharmacy technician candidate, or other personnel who performed the activity.

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AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 23:1312 (October 1997), LR 29:2090 (October 2003), effective January 1, 2004, LR 40:2252 (November 2014), effective January 1, 2015, amended by the Department of Health, Board of Pharmacy, LR 46:580 (April 2020), amended LR

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#### §1123. Records of Prescription Drug Orders and Chart Orders

A. Positive Identification. All pharmacy activities related to the practice of pharmacy, including but not limited to prescription entry, prospective drug utilization review, dispensing, and administration, shall be documented in the pharmacy information system with positive identification, as defined in Section 1119 of this Chapter, of the responsible pharmacist, pharmacy intern, pharmacy technician, or pharmacy technician candidate.

B. Pharmacy Information System. The pharmacy information system shall maintain complete and accurate records of all prescription and chart orders dispensed within the past two years. Such records shall be searchable by patient, prescriber, drug, and dispensing date, and shall be immediately retrievable in both printed and downloadable electronic formats. At a minimum, each record shall include:

1. prescription number;
2. date of issuance and date(s) of dispensing, including refills and partial fills;

3. patient name and address;
4. prescriber name and address;
5. directions for use;
6. drug name, strength, dosage form, and quantity prescribed;
7. quantity dispensed for each fill;
8. positive identification(s) of responsible pharmacy staff;
9. total number of refills authorized; and
10. a complete refill history, including the total number of refills or partial fills dispensed to date.

C. Backup System

1. Pharmacies shall perform a backup of the pharmacy information system at least once daily and ensure that all dispensing conducted during system downtime is documented and entered into the system upon its restoration.

D. Change Log. A log shall be maintained of all changes made to a prescription record after the prescription has been dispensed. Such log may be accessible to the pharmacist for review, but shall be protected from being altered in any way. At a minimum, the log shall contain the following information:

1. date and time of change;
2. change(s) made;
3. pharmacist making the change.

E. Filing and Retention

1. Hard copy prescriptions and chart orders shall be stored in numerical or date sequence; Schedule II drugs filed separately.

a. Electronic imaging retention of oral, faxed, or written prescriptions is permitted and may replace paper retention if the system captures and preserves exact images of both the front and back, and retains records for at least two years after the most recent transaction; controlled substances are excluded unless in conformance with 21 CFR Parts 1300-1399.

2. Electronic prescriptions must be retained for at least two years after the most recent transaction; hard copies optional.

F. Patient Profiles. Pharmacies shall maintain retrievable patient profiles, including but not limited to patient demographics, allergies, conditions, medications, and prescription history. Pharmacists shall ensure the accuracy of these records.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 23:1312 (October 1997), amended LR 29:2090 (October 2003), effective January 1, 2004, LR 36:755 (April 2010), LR 40:2253 (November 2014), effective January 1, 2015, amended by the Department of Health, Board of Pharmacy, LR 46:580 (April 2020), LR 47:1643 (November 2021), amended LR

**§1124. Records of Pharmacy Services for Patients in Licensed Healthcare Facilities Other than Hospitals**

- Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 40:2255 (November 2014), effective January 1, 2015, amended by Department of Health, Board of Pharmacy, LR 46:582 (April 2020), repromulgated LR 46:694 (May 2020), Repealed LR

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**Chapter 12. Automated Medication Systems**

**§1203. Automated Medication System Registration**

A. – B.3. ...

C. Application for Initial Issuance of Registration

1. ...
2. The application shall be accompanied by payment of the registration fee authorized by Section 115 of this Part.

3. – 5. ...

D. Maintenance of Registration

1. ...
2. Repealed.
3. ...

E. Application for Renewal of Registration

1. The pharmacy shall complete an application for the renewal of the registration and submit it to the board prior to the expiration date of the registration. The application shall be accompanied by the fee authorized by Section 115 of this Part.

E.2. – F.2. ...

G. Application for Reinstatement of Suspended or Revoked Registration

1. ...

2. The applicant shall complete an application form for this specific purpose supplied by the board and shall attach any documentation requested by the board and fees identified in Section 115 of this Part.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.A.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 26:1271 (June 2000), effective July 1, 2000, amended LR 38:1235 (May 2012), amended by the Department of Health, Board of Pharmacy, LR 47:241 (February 2021), amended LR

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**Chapter 15. Hospital Pharmacy**

**§1503. Definitions**

A. As used in this Chapter, the following terms shall have the meaning ascribed to them in this Section:

\* \* \*

*Electronic Drug Record Keeping System* - Repealed.

\* \* \*

*Password*—Repealed.

*Personal Identifier*—Repealed.

*Positive Identification*— means a secure, unique, and verifiable method that indisputably links a practice of pharmacy activity or other function recorded in a pharmacy information system to the specific pharmacist, pharmacy intern, pharmacy technician, pharmacy technician candidate, or other personnel who performed the activity.

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AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2093 (October 2003), effective January 1, 2004, LR 33:1132 (June 2007), LR 39:1282 (May 2013), LR 40:2256 (November 2014), effective January 1, 2015, LR 41:2147 (October 2015), amended by Department of Health, Board of Pharmacy, LR 46:582 (April 2020), amended LR 46:793 (June 2020), amended LR

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**§1525. Hospital Off-Site Satellite Pharmacy**

A. Issuance and Maintenance of Permit

1. – 2. ...

3. The applicant shall pay the fee for the initial issuance and renewal as specified in Section 115 of this Part.

A.4. – B.8. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 39:1283 (May 2013), amended by Department of Health, Board of Pharmacy, LR 46:583 (April 2020), amended LR

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**Chapter 18. Correctional Center Pharmacy**

**§1803. Permit Application Procedures**

A. Application for Initial Issuance of Permit

1. The applicant for a correctional center pharmacy permit shall complete the application form supplied by the board and submit it with the required attachments and appropriate fees, as set forth in Section 115 of this Part, to the board.

A.2. – C.2. ...

C.3. An application for the reinstatement of an expired permit shall be referred to the board’s reinstatement committee for consideration.

4. Applications requiring a reinstatement hearing shall be accompanied by payment of the administrative hearing fee authorized by Section 115 of this Part.

D. – D.3. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1226.3.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 38:1236 (May 2012), amended by the Department of Health, Board of Pharmacy, LR 46:572 (April 2020), amended LR

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**§1811. Definitions - Repealed**

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1226.3.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 38:1237 May 2012), repromulgated by the Department of Health, Board of Pharmacy, LR 46:572 (April 2020), repealed LR

**§1813. Emergency Drug Kit Permit – Repealed**

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1226.3.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 38:1237 (May 2012), amended by the Department of Health, Board of Pharmacy, LR 46:573 (April 2020), repealed LR

**§1815. Emergency Drug Kit Requirements - Repealed**

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1226.3.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 38:1238 (May 2012), amended by the Department of Health, Board of Pharmacy, LR 46:573 (April 2020), repealed LR

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**Chapter 25. Prescriptions, Drugs, and Devices**

**Subchapter C. Compounding of Drugs**

**§2533. Definitions**

A. As used in this Subchapter, the following terms shall have the meaning ascribed to them in this Section.

*Biological Safety Cabinet*—Repealed.

*Class 100 Environment*—Repealed.

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*Cytotoxic*—Repealed.

\* \* \*

*Sterile Product*—Repealed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1182.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Pharmacy, LR 14:708 (October 1988), effective January 1, 1989, amended LR 29:2105 (October 2003), effective January 1, 2004, LR 41:97 (January 2015), amended LR

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## Chapter 30. Pharmacy Benefit Managers

### §3005. Permitting Procedures

A. – C.2. ...

D. Maintenance of Permit

1. ...

2. Repealed.

E. – E.2. ...

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:1253.

HISTORICAL NOTE: Promulgated by the Department of Health, Board of Pharmacy, LR 47:591 (May 2021), amended LR 48:2105 (August 2022), amended LR 49:1557 (September 2023), amended LR

#### Family Impact Statement

In accordance with Section 953 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a family impact statement on the Rule proposed for adoption, repeal, or amendment. The following statements will be published in the *Louisiana Register* with the proposed agency Rule.

1. The Effect on the Stability of the Family. The proposed Rule changes will have no effect on the stability of the family.
2. The Effect on the Authority and Rights of Parents Regarding the Education and Supervision of their Children. The proposed Rule changes will have no effect on the authority and rights of parents regarding the education and supervision of their children.
3. The Effect on the Functioning of the Family. The proposed Rule changes will have no effect on the functioning of the family.
4. The Effect on Family Earnings and Family Budget. The proposed Rule changes will have no effect on family earnings and family budget.
5. The Effect on the Behavior and Personal Responsibility of Children. The proposed Rule changes will have no effect on the behavior and personal responsibility of children.
6. The Ability of the Family or a Local Government to Perform the Function as Contained in the Proposed Rule. The proposed Rule changes will have no effect on the ability of the family or a local government to perform the activity as contained in the proposed Rule.

#### Poverty Impact Statement

In accordance with Section 973 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a poverty impact statement on the Rule proposed for adoption, repeal, or amendment.

1. The Effect on Household Income, Assets, and Financial Security. The proposed Rule changes will have no effect on household income, assets, or financial security.
2. The Effect on Early Childhood Development and Preschool through Postsecondary Education Development. The proposed Rule changes will have no effect on early childhood development or preschool through postsecondary education development.
3. The Effect on Employment and Workforce Development. The proposed Rule changes will have no effect on employment and workforce development.
4. The Effect on Taxes and Tax Credits. The proposed Rule changes will have no effect on taxes or tax credits.
5. The Effect on Child and Dependent Care, Housing, Health Care, Nutrition, Transportation, and Utilities Assistance. The proposed Rule changes will have no effect on child and dependent care, housing, health care, nutrition, transportation, or utilities assistance.

#### Small Business Analysis

In accordance with Section 965 of Title 49 of the Louisiana Revised Statutes, there is hereby submitted a regulatory flexibility analysis on the Rule proposed for adoption, repeal, or amendment. This will certify the agency has considered, without limitation, each of the following methods of reducing the impact of the proposed Rule on small businesses:

1. The Establishment of Less Stringent Compliance or Reporting Requirements for Small Businesses. The proposed Rule changes will have no effect on reporting requirements for small business.

2. The Establishment of Less Stringent Schedules or Deadlines for Compliance or Reporting Requirements for Small Businesses. The proposed Rule changes will have no effect on schedules or deadlines for compliance or reporting requirements for small business.

3. The Consolidation or Simplification of Compliance or Reporting Requirements for Small Businesses. The proposed Rule changes will have no effect on consolidation or simplification of compliance or reporting requirements for small business.

4. The Establishment of Performance Standards for Small Businesses to Replace Design or Operational Standards Required in the Proposed Rule. The proposed Rule changes will have no effect on establishment of performance standards for small businesses to replace design or operational standards for small businesses.

5. The Exemption of Small Businesses from All or Any Part of the Requirements Contained in the Proposed Rule. There are no exemptions for small businesses in the proposed Rule changes.

#### **Provider Impact Statement**

In accordance with House Concurrent Resolution No. 170 of the Regular Session of the 2014 Legislature, there is hereby submitted a provider impact statement on the Rule proposed for adoption, repeal, or amendment. This will certify the agency has considered, without limitation, the following effects on the providers of services to individuals with developmental disabilities:

1. The effect on the staffing level requirements or qualifications required to provide the same level of service. The proposed Rule changes will have no effect on the staffing level requirements required to provide the same level of service.

2. The Total Direct and Indirect Effect on the Cost to the Provider to Provide the Same Level of Service. The proposed Rule changes will have no impact on the cost to the provider to provide the same level of service.

3. The Overall Effect on the Ability of the Provider to Provide the Same Level of service. The proposed Rule changes will have no impact on the ability of the provider to provide the same level of service.

#### **Public Comments**

Interested persons may submit written comments, via United States Postal Service or other carrier, or in the alternative by personal delivery to M. Joseph Fontenot Jr., Executive Director, at the office of the Louisiana Board of Pharmacy, 3388 Brentwood Drive, Baton Rouge, LA 70809-1700. He is responsible for responding to inquiries regarding the proposed Rule changes. The deadline for the receipt of all written comments is 12 p.m. on Friday, June 26, 2026.

#### **Public Hearing**

A public hearing to solicit comments and testimony on the proposed Rule changes is scheduled for Friday, June 26, 2026 at 9 a.m. at the Board office. During the hearing, all interested persons will be afforded an opportunity to submit comments and testimony, either verbally or in writing. The deadline for the receipt of all comments and testimony is 12 p.m. that same day. To request reasonable accommodations for persons with disabilities, please call the board office at 225.925.6496.

M. Joseph Fontenot Jr.

Executive Director

### **FISCAL AND ECONOMIC IMPACT STATEMENT FOR ADMINISTRATIVE RULES**

#### **RULE TITLE: Pharmacists**

##### **I. ESTIMATED IMPLEMENTATION COSTS (SAVINGS) TO STATE OR LOCAL GOVERNMENTAL UNITS (Summary)**

Other than the cost of rulemaking, there are no estimated implementation costs or savings for state or local government units resulting from the promulgation of the proposed Rule changes. The cost to the Louisiana Board of Pharmacy is approximately \$1,500 in FY 26 and \$500 in FY 27 in SGR expenditures for the notice and Rule publication in the *Louisiana Register*.

The proposed Rule updates or removes regulations and references that are outdated, unnecessary, redundant, overly complex, or burdensome.

##### **II. ESTIMATED EFFECT ON REVENUE COLLECTIONS OF STATE OR LOCAL GOVERNMENTAL UNITS (Summary)**

The proposed Rule changes are not anticipated to impact the revenue collections of state or local governmental units.

III. ESTIMATED COSTS AND/OR ECONOMIC BENEFITS TO DIRECTLY AFFECTED PERSONS, SMALL BUSINESSES, OR NON-GOVERNMENTAL GROUPS (Summary)

The proposed Rule changes are anticipated to benefit licensees and the public by updating or removing regulations and references that are outdated, unnecessary, redundant, overly complex, or burdensome. The proposed Rule changes will benefit licensees by including a comprehensive list of specific topics under continuing education (CE) requirements, streamlining record keeping requirements including positive identification, expanding the way prescription forms may be stored, and clarifying electronic imaging requirements.

IV. ESTIMATED EFFECT ON COMPETITION AND EMPLOYMENT (Summary)

The proposed Rule changes are not anticipated to impact competition and employment.