May 12, 2022

UPDATED 5/09/2022

PQAC Meeting Materials





STATE OF WASHINGTON

Pharmacy Quality Assurance Commission PO Box 47852 – Olympia, Washington 98504-7852 Tel: 360-236-4030 – 711 Washington Relay Service

Pharmacy Quality Assurance Commission Meeting March 24, 2022 - Minutes

Convene: Chair, Teri Ferreira called the meeting to order March 24, 2022, 9:00 a.m.

Commission Members:

Teri Ferreira, RPh, Chair
Jerrie Allard, Public Member, Vice Chair
Uyen Thorstensen, CPhT
Hawkins DeFrance, Nuclear Pharmacist
Patrick Gallaher, BS, BPharm, MBA, MPH
Judy Guenther, Public Member
William Hayes, PharmD, CCHP
Helen H. Jung, PharmD, MBA
Ken Kenyon, PharmD, BCPS
Tim Lynch, PharmD, MS, FABC, FASHP
Craig Ritchie, RPh, JD
Matthew Ray, PharmD

Commission Member Absent:

Ann Wolken, PharmD, RPh

Bonnie Bush, Public Member

Staff:

Marlee O'Neill, Interim Executive Director,
Pharmacy Commission
Lindsay Trant, Interim Deputy Director,
Pharmacy Commission
Christopher Gerard, AAG
Hope Kilbourne, Policy Analyst
Joshua Munroe, Legislative and Rules
Consultant
Taifa "Nomi" Peaks, Pharmacist Consultant
Joanne Miller, Program Manager, Pharmacy
Amy L Robertson, Administrative Assistant,
Pharmacy

Guest:

Blake Maresh, OCS Director

1. Call to Order Teri Ferreira, Chair.

1.1 Meeting Agenda Approval – March 24, 2022.

MOTION: Craig Ritchie moved to approve the meeting agenda for March 24, 2022. Hawkins DeFrance, second. Motion carries, 13:0.

1.2 Meeting Minutes Approval – December 17, 2021

MOTION: Craig Ritchie moved to approve the meeting minutes for January 28, 2022 correcting Ken Kenyon as absent. Hawkins DeFrance, second. Motion carries, 13:0.

2. Consent Agenda

2.1 National Precursor Log Exchange Monthly Dashboard-December 2021

2.2 Pharmaceutical Firms Application Report

January 5, 2022, thru March 1, 2022

2.3 Ancillary Utilization Plans Approval

- **2.3.1** Hobson Clinic
- 2.3.2 Matrx LTC
- **2.3.3** Walgreens Pharmacy
- **2.3.4** Lakeside Pharmacy
- 2.3.5 Pharmaca
- **2.3.6** Cle Elum Pharmacy
- **2.3.7** Duvall Family Drug
- 2.3.8 Acasa Pharmacy
- **2.3.9** Whole Health
- 2.3.10 Inchelium Health Center Pharmacy
- **2.3.11** Omak Pharmacy
- 2.3.12 Pharmerica
- **2.3.13** Sound Specialty Pharmacy
- **2.3.14** Sumas Drug
- 2.3.15 Summit Pacific Medical Center Inpatient Pharmacy
- **2.3.16** Whitestone Pharmacy
- 2.3.17 Walmart Pharmacy
- **2.3.18** Ocean Shores Pharmacy

2.4 Pharmacy Technician Training Program Approval

- **2.4.1** Pharmerica
- **2.4.2** Olympic Pharmacy
- **2.4.3** Peace Health
- **2.4.4** Schaffner Pharmacy

William Hayes requested that items 2.3.3, 2.3.16, 2.3.18, 2.4.3, 2.4.4 be pulled from the Consent Agenda for discussion.

Teri Ferreira requested that Items 2.3.6, 2.3.13, 2.3.17, and 2.3.18 be pulled from the Consent Agenda for discussion.

Matthew Ray recuse 2.3.3

Patrick Gallaher recuse 2.4.1 and 2.3.12

MOTION: Craig Ritchie moved to approve Items 2.1, 2.2, 2.3.1, 2.3.2, 2.3.4, 2.3.5, 2.3.7, 2.3.8, 2.3.9, 2.3.10, 2.3.11, 2.3.14, 2.3.15, and 2.4.2. Hawkins DeFrance, second. Motion carries, 13:0.

MOTION: Craig Ritchie moved to approve 2.3.12 and 2.4.1 Hawkins DeFrance, second. Motion carries, 12:0 (Gallaher recused).

2.5 Regular Agenda/Items Pulled from 2.3 and 2.4. The commission will discuss items removed from the consent agenda and placed on the regular agenda for separate discussion.

MOTION: Craig Ritchie moved to approve the following, contingent on staff returning AUPs and the entities updating the language consistent with the <u>G003 Pharmacy Technician Administration</u> <u>Guidance (wa.gov)</u>; secondly, on 2.3.3 missing appendices must be attached. Hawkins DeFrance, second. Motion carries, 13:0. **Note:** 2.3.3 Matthew Ray recused, motion passes 12:0.

- 2.3.3 Walgreens Pharmacy (Kenyon)
- **2.3.6** Cle Elum Pharmacy (Ferreira)

- **2.3.13** Sound Specialty Pharmacy (Ferreira)
- **2.3.16** Whitestone Pharmacy (Kenyon)
- **2.3.17** Walmart Pharmacy (Ferreira)

MOTION: William Hayes moved to approve the AUP for the following pharmacy with the modification of removing "O" on IV admixtures from the proposed AUP. Craig Ritchie, second. Motion carries, 13:0.

• 2.3.18 Ocean Shores Pharmacy (Ferreira; Kenyon)

MOTION: William Hayes moved to approve 2.4.3 and 2.4.4 contingent upon receipt of the required material staff identified as missing in the SBAR. Craig Ritchie, second. Motion carries, 13:0.

- **2.4.3** Peace Health (Kenyon)
- 2.4.4 Schaffner Pharmacy (Kenyon)
- **3. Old Business** The commission will discuss, for clarification or decision, ongoing topics, and issues from previous meetings.

3.1 Office of Customer Service Credentialing Action Plan Overview - Blake Maresh, Director, Office of Customer Service

Blake Maresh reviewed the credentialing action plan and licensing information. The majority of staff will continue to work remotely with the exception of a few needing to be onsite regularly (call center, scan unit, FBI/Home care aid units, etc.). Communal spaces for employees will be available as needed. Technology will improve once HELMS is launched. Also working toward going paperless in the future to reduce paper copies stored onsite.

Concerns brought up by commissioners: timeline of license approval, why licensees are not utilizing online applications.

Jenny Arnold, WSPA – These DOH employees are essential workers. Credit card charge via online application is barrier when the licensee is asked to use the online system and then is charged for it. Kudos to the PQAC staff who have really helped with licensing delays and working through issues.

3.2 Opioid Treatment Program Mobile Unit Follow-up

MOTION: Craig Ritchie moved to authorize staff to file a CR-101 (permanent rulemaking) to amend WAC 246-945-060 to exempt mobile OTP mobile units from having to obtain separate registrations as long as they are covered under the OTP site's controlled substance registration. Jerrie Allard, second. Motion carries, 13:0.

MOTION: Craig Ritchie moved to authorize staff to file a CR-105 (expedited rulemaking) to amend WAC 246-945-040 to update its incorporation of 21 CFR. Jerrie Allard, second. Motion carries, 13:0.

3.3 Revisit Policy Statement: Enforcement of USP 800 and USP 825

MOTION: Hawkins DeFrance moved to extend enforcement discretion of USP 800 for another six months (September 30, 2022). Craig Ritchie, second. Motion carries, 13:0.

3.4 Subcommittee Updates

MOTION: Craig Ritchie moved to approve the list of committees as set forth. Ken Kenyon, second. Motion carries, 13:0.

Committee	Commission Members
Recurring	
Budget Committee:	Chair: Patrick Gallaher
• HELMS	Members: Judy Guenther, William Hayes, Helen Jung, Ken
	Kenyon
	Staff Lead: PQAC Executive Director and Finance Officer
Legislative Committee	Chair: William Hayes
	Members: Hawkins DeFrance, Craig Ritchie, Matthew Ray,
	Chair, Vice Chair
	Staff Lead: Rules and Legislative Consultant
Strategic Planning Committee	Chair: Jerrie Allard
	Members: Ann Wolken, Matthew Ray, Chair
	Staff Lead: Program Manager
Ad Hoc	
Compounding Committee:	Chair: Hawkins DeFrance
 FDA MOU 	Members: Ken Kenyon, Uyen Thorstensen, Judy Guenther
 Self-Inspection Worksheets 	Staff Lead: Pharmacist Consultant
 White bagging 	
Facility Committee	Chair: Ken Kenyon
 HPACs Committee 	Members: Teri Ferreira, William Hayes, Helen Jung, Jerrie
 Suspicious Orders 	Allard
 Facility Enforcement Authority 	Staff Lead: Pharmacist Consultant
Pharmacy Practice Committee	Chair: Craig Ritchie
 Misfill and Pharmacy Work 	Members: Hawkins DeFrance, Patrick Gallaher, Helen
Condition Workgroup	Jung, Ann Wolken, Matthew Ray
 Sunrise Review 	Staff Lead: Pharmacist Consultant
CDTA WMC Committee (Teri)	
Sample AUP review	
	Approved 03/24/22

4. New Business -- The Commission will review items of interest related to pharmacy practice for discussion, clarification, information or action by or on behalf of the commission. Information/Action.

4.1 List and Label Requests

MOTION: Ken Kenyon moved to deny the University of Washington School of Nursing list and label application to DOH as it is not a request to use the list and label information for lists of labels for a commercial purpose. Ann Wolken, second. Motion carries, 13:0.

MOTION: Craig Ritchie moved to approve the Oregon Chapter of American College of Cardiology list and label application. Ann Wolken, second. Motion carries, 13:0.

4.2 Routine Inspections and Insufficient Staffing

Marlee O'Neill informed the commission that inspectors continue to be cognizant of issues within pharmacies due to lack of staffing or technology, etc. Inspectors will postpone routine inspections if patient care and/or day-to-day operations will be impacted.

Discussion focused around concern about notifying the pharmacy prior to arriving (particularly for long-distance inspections) one day prior, or two weeks to alleviate unnecessary travel/cost on the inspector. Marlee pointed out unannounced inspections help our inspectors adjust their schedules due to new business or delays; as well as capturing the "snap-shot" of the day-to-day. Pharmacies are able to contact the inspectors with blackout dates or other difficulties they might have.

MOTION: Craig moved to approve Option 2 to return to standard practice and encourage inspectors to be flexible. Patrick Gallaher, second. Motion carries, 13:0.

Option 2 - Return to standard practice: Inspectors have always had and utilized their discretion to reschedule routine inspections. Inspectors have rescheduled routine inspections due to staffing issues, pharmacy upgrading its software system, DEA inspectors being onsite, burst pipe, etc. The inspectors will continue to utilize their discretion and have an open dialogue with licensees when exceptional circumstances arise.

4.3 Non-resident Pharmacy Directive on Approved Inspection Reports: Tennessee Update

At the December PQAC business meeting, Tennessee was recognized as one of the states that inspect to substantially equivalent standards as Washington, and this is noted in the commission's Nonresident Pharmacy: Approved List of Recognized States directive. In January of 2022, the Tennessee Board of Pharmacy adopted the following policy: The Board interprets "applicable USP standards" under Official Compilation of the Rules and Regulations of the State of Tennessee 1140-07-.02 to mean a pharmacy engaged in prescription drug compounding under either: (1) the active proposed /revised version of a USP chapter or (2) the currently official chapter and version of the USP compendium. The Commission reviewed Tennessee's policy and determined that no action/motion needed by commission Tennessee remains a state that inspects to substantially equivalent standards as Washington.

4.4 Report back on Information on Compounding Non-resident Pharmacies

Lindsay Trant updated the commission that staff connected with other offices at the department and found that the best way to obtain the information is through a public records request, which generally have a 10-14 week turnaround.

Other options would include a reconfiguration of ILRS which is not feasible at this time. Staff did submit this ask to the HELMS team to try and add this feature to the new licensing system.

Stakeholders expressed concern that the state inspection programs listed as approved for nonresident compounding pharmacies include states that do not require adherence to USP 795, 797, or 800.

Commission tasks the staff to take this issue to the compounding subcommittee for further review

4.5 Interpretation of Stocking for Pharmacy Assistants

Nomi Peaks informed the commission the potential benefits of utilizing pharmacy assistants to replenish ADDDs include personnel support for those pharmacies burdened by staffing shortages, the opportunity for assistants to gain professional aptitude and confidence, and improved productivity for high-volume pharmacies. The potential challenges include establishing the appropriate ADDD training for assistants, estimating the impact on pharmacists' duties as they supervise the ADDD replenishment, and determining if that supervision may occur remotely.

Commissioners discussed the definition of "stocking" and ADDDs and how they apply to the scope of practice for pharmacy assistants.

MOTION: Tim Lynch motioned to task the pharmacy practice subcommittee with engaging stakeholders to define what is permissible for a pharmacy assistant to stock inside and outside a pharmacy and review Guidance Document DOH 690-356, Access to Drugs Stored Outside of the Pharmacy, to see if any modification is necessary; Craig Ritchie, second. Motion carries, 13:0.

4.6 Euthanasia Training program approvals

Wenatchee Valley Humane Society submitted a requested reapproval of the euthanasia training program.

MOTION: Craig Ritchie moved to approve the proposed euthanasia training program with the requirement that they keep track of the administration of the medications documented. Hawkins DeFrance, second. Motion carries, 13:0.

- **Summary of Meeting Action Items** Commissioner and staff will revisit action items identified during today's business meeting.
 - 1.2 make corrections to January minutes to reflect Ken's absence.
 - 2.3 follow up with contingent approvals as directed.
 - 2.4 follow up with contingent approvals as directed.

- 3.2 file the CR102 to amend WAC 246-945-060 to allow a controlled substance registration to extend for an OTP mobile unit; Also file CR105 to update the commission's incorporation of 21CFR.
- 3.3 revise policy statement to extend enforcement discretion on USP 800 for another six months; also to communicate commission's through GovDelivery.
- 3.4 make edits to subcommittee table as directed; and notify stakeholders of subcommittee meetings.
- 4.1 staff will deny the University of Washington School of Nursing list and label application to DOH/PDRC as it is not a request to use the list and label information for commercial purposes; approved list/label request for Oregon Chapter of American College and Cardiology.
- 4.2 return to Option 2 for routine inspections.
- 4.4 revisit list of approved inspection programs in the commission's directive through the compounding subcommittee.
- 4.5 task pharmacy practice committee to engage in stakeholdering to define what is permissible for what a pharmacy assistant to stock both in and out of a pharmacy.
- 4.6 Notify Wenatchee Humane Society euthanasia training program approved.

2:21 pm Business Meeting Adjourned.



STATE OF WASHINGTON

Pharmacy Quality Assurance Commission PO Box 47852 – Olympia, Washington 98504-7852 Tel: 360-236-4030 – 711 Washington Relay Service

Pharmacy Quality Assurance Commission Meeting March 25, 2022 - Minutes

Convene: Chair, Teri Ferreira called the meeting to order March 25, 2022, 9:03 a.m.

Commission Members:

Teri Ferreira, RPh, Chair
Bonnie Bush, Public Member
Uyen Thorstensen, CPhT
Hawkins DeFrance, Nuclear Pharmacist
Patrick Gallaher, BS, BPharm, MBA, MPH
Judy Guenther, Public Member
William Hayes, PharmD, CCHP
Ken Kenyon, PharmD, BCPS
Helen H. Jung, PharmD, MBA
Tim Lynch, PharmD, MS, FABC, FASHP
Craig Ritchie, RPh, JD
Matthew Ray, PharmD
Ann Wolken, PharmD, RPh

Staff:

Marlee O'Neill, Interim Executive Director,
Pharmacy Commission
Lindsay Trant, Interim Deputy Director,
Pharmacy Commission
Christopher Gerard, AAG
Hope Kilbourne, Policy Analyst
Joshua Munroe, Legislative and Rules
Consultant
Taifa "Nomi" Peaks, Pharmacist Consultant
Joanne Miller, Program Manager, Pharmacy
Amy L Robertson, Administrative Assistant,
Pharmacy

Commission Member Absent:

Jerrie Allard, Public Member, Vice Chair

- 1. Call to Order Teri Ferreira, Chair.
 - **1.1** Meeting Agenda Approval March 25, 2022

MOTION: Craig Ritchie moved to approve the meeting agenda for March 25, 2022. Ken Kenyon, second. Motion carries, 13:0.

2. PUBLIC RULES HEARING – 9:16 a.m. – Rulemaking to delete Epidiolex from Schedule V (WAC 246-945-056) in Washington State in response to a rulemaking petition.

Joshua Munroe briefed the commission on the specifics of the petition to delete Epidiolex from the list of Schedule V controlled substances beginning May 20, 2020. Following a presentation of the history and the progress on the rule to de-schedule Epidiolex, the commission opened the floor for comments from interested parties.

Kurt Stembridge, Director of State Government Affairs with Greenwich Biosciences - A Jazz Pharmaceuticals Company, testified in support of the proposed rule. His organization appreciates the commission issuing emergency rules so Epidiolex may be

distributed as a noncontrolled substance in the state of Washington while permanent rulemaking was ongoing.

The comment from Kurt Stembridge was delivered both as a written statement two weeks prior to the business meeting and as an oral public comment. This was the only comment received by the commission.

MOTION: Craig Ritchie moved to approve the department's recommended responses to the comments, to adopt the rule language proposed for WAC 246-945-056, and to authorize staff to file CR103 on WAC 246-945-056. William Hayes, second. Motion carries, 13:0.

3. Consent Agenda

- 3.1. Ancillary Utilization Plans Approval.
 - Valley Medical
- **3.2 Regular Agenda/Items Pulled from 3.1**. The commission will discuss items removed from the consent agenda and placed on the regular agenda for separate discussion.
 - 3.2.1 3.1.1 Valley Medical pulled for discussion.

MOTION: William Hayes moved to approve the AUP for Valley Medical Center with the clarification on the training program statement as indicated in the SBAR. Craig Ritchie, second. Motion carries, 12:0 (Ken Kenyon, recused).

4. Requests for Review by Commission Panel (Gallaher, Ferreira, Jung, Guenther, Wolken)

MOTION: Patrick Gallaher moved to approve the candidate PHRM.PH.61171412 to take the MPJE a fourth time. Teri Ferreira, second. Motion carries, 5:0

MOTION: Patrick Gallaher moved to approve the candidate PHRM. PH.61181493 to take the MPJE a fourth time, Teri Ferreira, second. Motion carries, 5:0.

5. Rules and Legislative Updates

5.1. Retired Pharmacist Rules Workshop

MOTION: Craig Ritchie moved to approve the proposed rule language without edits and authorized staff to proceed with filing a CR-102 on the retired pharmacist rulemaking package. Hawkins DeFrance, second. Motion carries, 13:0.

5.2. Authorization to Refile Retired Pharmacist Emergency Rules

MOTION: Craig Ritchie moved to refiling emergency rules related to retired pharmacists. Bonnie Bush, second. Motion carries, 13:0.

5.3. 2022 Legislative Session Recap and Final Bill Report

The Rules and Legislative Consultant, Joshua Munroe, presented an overview of the 2022 legislative session bills under the commission's jurisdiction that passed and were signed into law. The presentation also included an update on SHB 1852, focused on establishing visual accessibility and translation guidelines for prescription information, which did not pass. Commission members and interested parties discussed standard rulemaking that will go forward on similar issues to SHB 1852 brought to the commission through rulemaking petitions.

5.4. 2023 Legislative Agenda

Lindsay Trant informed the commission staff is currently working on the Uniform Facilities Enforcement Framework (UFEF) which includes:

- Fining authority
- Placing conditions on a license

Staff recommends focusing on the UFEF for the commission's 2023 Legislative Agenda. Secondly, hold monthly legislative meetings to discuss any updates/changes with the plan as well as discussing priorities for the 2024 Legislative Session to bring back to the full commission.

Other possible focus areas:

- Licensee fraud (licenses as well as telemedicine)
- Rule-writing authority of the commission

6. Open Forum

Self-Inspection Forms - Erika Anderson, CPhT, CSPT – please consider adding language at the beginning of the USP 825 Self-Inspection Worksheet Addendum to clarify that the administration of radiopharmaceuticals to patients is not within the scope of USP <825>. Staff will review the self-inspection forms and report back to commission.

Walgreen's AUP – Lori Walmsley, Walgreen's – re: Walgreen's AUP under 2.3.3 – clarified the commission already approved immunization AUP last year at the June 4, 2021 meeting and will provide that documentation to staff.

7. Commission Member Reports.

7.1.1 Budget Committee – Patrick Gallaher reported to the commission PQAC has a healthy fund balance with a balance of \$5.5 million. Expenses are 17% less than projected.

7.1.2 NABP Annual Meeting—May 18-21 — Phoenix Arizona.

Teri Ferreira and Jerrie Allard will be attending this year. Teri will be the voting delegate for PQAC

7.2 Commissioners' open discussion.

Technicians working from home – Commissioner Patrick Gallaher asked the commission to better define "immediate supervision" and create an FAQ to address the phrasing for current needs as well as after the emergency proclamation is rescinded.

Scope of Practice – Commissioner Helen Jung requested the pharmacy practice committee meet to consider including pharmacy assistants "pulling" stock as permitted function in WAC 246-945-315. The commission tasked the pharmacy practice subcommittee to investigate/report.

8. Staff Reports

8.1. Interim Executive Director, Marlee O'Neill

- o Hiring updates:
 - Executive director position posted again.
 - Deputy director job also posted.
 - Permanent pharmacy inspector position and the non-permanent health services consultant first round interviews currently scheduling.
 - Pharmacy inspector supervisor and project pharmacy inspector position second round interviews currently scheduling.
- o Elections set for May meeting Joanne Miller will send out more information.
- Commissioner openings interviewing for three positions (two pharmacists; one public member).

8.2. Interim Deputy Director – Lindsay Trant

• The FDA has announced rulemaking to create state licensing standards for wholesale drug distributors. Specifically to replace current 21 CFR part 205 to implement the licensure requirements of the drug supply chain security act. Once finalized, state licensure requirements must meet the standards set by the FDA. Staff monitoring

8.3. Assistant Attorney General – Chris Gerard

• FDA / MOU – has been rescinded by the FDA, staff is monitoring status.

9. Summary of meeting action items.

- 2 Public Hearing staff will file CR-103 on deleting Epidiolex from Schedule V
- 3.3 Consent agenda staff will communicate with AUP program and update credentialling unit with the approval
- 4 Request for Review staff will notify the applicants, credentialling unit, and NABP on the commission's decision on the retake of the MPJE exams.
- 5 Rules and Legislative Updates
 - 5.1 staff will file CR-102 Retired pharmacist issue.
 - o 5.2 staff will work on reauthorizing emergency rule on retired pharmacists
 - o 5.4 staff will set up regular meetings with the legislative subcommittee to work on the UFEF and start discussing priorities for 2024
- Public Forum Staff will revise the USP 825 Self Inspection worksheet.
- 7.2 Open discussion
 - o staff will develop FAQ on technicians working from home as permitted under definition of "immediate supervision."
 - o 7.2 task pharmacy practice committee to add "pulling" into the pharmacy assistant scope of practice; also, the discussion of assistant scope of practice

Teri Ferreira thanked all of commissioners, staff, licensees, and stakeholders for your preparation and participation in PQAC business meetings.

11:41 am

Business Meeting Adjourned.

From: Appriss Health

To:

Subject: Washington NPLEx Dashboard Report - Mar 2022

Date: Friday, April 1, 2022 4:31:29 AM

Attachments: WA PHARMACY TRX REPORT 03012022.csv

External Email

MONTHLY PROGRAM ADMINISTRATOR'S DASHBOARD

2 Logins - 0 Searches - 0 Report Queries - 24 Active Watches - 1 Active Watch Hits

NEW USERS THIS MONTH

New Users = 0

Total Accounts = 141

Active Users = 1

TOP USAGE AGENCIES

TOP USERS BY USAGE

TOP AGENCIES BY ACTIVE WATCHES

1. ICE - King County (18)

TRANSACTION SUMMARY STATISTICS (2022)

	JAN	FEB	MAR	TOTAL
PURCHASES	75,034	57,362	79,004	211,400
BLOCKS	2,918	2,357	3,387	8,662
GRAMS SOLD	158,746	128,022	178,164	464,932
BOXES SOLD	84,585	63,930	88,582	237,097
GRAMS BLOCKED	7,592	6,488	9,141	23,221
BOXES BLOCKED	3,315	2,644	3,844	9,803
AVG GRAMS PER BOX BLOCKED	2.29	2.45	2.38	2.37

PHARMACY PARTICIPATION STATISTICS (Mar 2022)

Enabled Pharmacies	1004
Pharmacies Submitting a Transaction	942
Pharmacies Logging in Without a Transaction	1
Inactive Pharmacies	61
Pharmacy Participation for Mar	93.92%

DISCLAIMER: This is an automated report meant to give you a quick snapshot of the NPLEx system in your state. The statistics listed in this report are only meant to be a general overview and not necessarily the exact final numbers. Prior to releasing any statistics mentioned in this report, we highly recommend that you verify the numbers with your NPLEx customer relationship manager. For questions or issues, please contact kmccormick@appriss.com.

From: Appriss Health

To:

Subject: Washington NPLEx Dashboard Report - Apr 2022

Date: Sunday, May 1, 2022 4:42:32 AM

Attachments: WA PHARMACY TRX REPORT 04012022.csv

External Email

MONTHLY PROGRAM ADMINISTRATOR'S DASHBOARD

4 Logins - 0 Searches - 0 Report Queries - 24 Active Watches - 0 Active Watch Hits

NEW USERS THIS MONTH

New Users = 0

Total Accounts = 141

Active Users = 2

TOP USAGE AGENCIES

TOP USERS BY USAGE

TOP AGENCIES BY ACTIVE WATCHES

1. ICE - King County (19)

TRANSACTION SUMMARY STATISTICS (2022)

	JAN	FEB	MAR	APR	TOTAL
PURCHASES	75,034	57,362	79,004	89,983	301,383
BLOCKS	2,918	2,357	3,387	3,574	12,236
GRAMS SOLD	158,746	128,022	178,164	197,739	662,671
BOXES SOLD	84,585	63,930	88,582	100,384	337,481
GRAMS BLOCKED	7,592	6,488	9,141	9,857	33,078
BOXES BLOCKED	3,315	2,644	3,844	4,074	13,877
AVG GRAMS PER BOX BLOCKED	2.29	2.45	2.38	2.42	2.39

PHARMACY PARTICIPATION STATISTICS (Apr 2022)

Enabled Pharmacies	1004
Pharmacies Submitting a Transaction	942
Pharmacies Logging in Without a Transaction	0
Inactive Pharmacies	62
Pharmacy Participation for Apr	93.82%

DISCLAIMER: This is an automated report meant to give you a quick snapshot of the NPLEx system in your state. The statistics listed in this report are only meant to be a general overview and not necessarily the exact final numbers. Prior to releasing any statistics mentioned in this report, we highly recommend that you verify the numbers with your NPLEx customer relationship manager. For questions or issues, please contact kmccormick@appriss.com.

2.1 Open and closed

Open 3/2-5/1 2022

Credential #	Status	First Issuance Date	Effective Date	Expiration Date
PHAR.CF.61228965	ACTIVE	03/01/2022	03/01/2022	05/31/2023
PHNR.FO.61261235	ACTIVE	03/01/2022	03/01/2022	05/31/2023
PHWH.FX.61275448	ACTIVE	03/01/2022	03/01/2022	09/30/2022
PHNR.FO.61279535	ACTIVE	03/02/2022	03/02/2022	05/31/2023
PHNR.FO.61266690	ACTIVE	03/03/2022	03/03/2022	05/31/2023
PHWH.FX.61243900	ACTIVE	03/03/2022	03/03/2022	09/30/2022
PHNR.FO.61281108	ACTIVE	03/04/2022	03/04/2022	05/31/2023
PHWH.FX.61232157	ACTIVE	03/10/2022	03/10/2022	09/30/2022
PHAR.CF.61223512	ACTIVE	03/11/2022	03/11/2022	05/31/2023
PHNR.FO.61280716	ACTIVE	03/11/2022	03/11/2022	05/31/2023
PHWH.FX.61281521	ACTIVE	03/11/2022	03/11/2022	09/30/2022
PHWH.FX.61204612	ACTIVE	03/11/2022	03/11/2022	09/30/2022
PHWH.FX.61281621	ACTIVE	03/11/2022	03/11/2022	09/30/2022
PHWH.FX.61232174	ACTIVE	03/11/2022	03/11/2022	09/30/2022
PHWH.FX.61232048	ACTIVE	03/11/2022	03/11/2022	09/30/2022
PHWH.FX.61281631	ACTIVE	03/11/2022	03/11/2022	09/30/2022
PHNR.FO.61235613	ACTIVE	03/15/2022	03/15/2022	05/31/2023
PHNR.FO.61281064	ACTIVE	03/16/2022	03/16/2022	05/31/2023
PHNR.FO.61281085	ACTIVE	03/16/2022	03/16/2022	05/31/2023
PHWH.FX.61234526	ACTIVE	03/16/2022	03/16/2022	09/30/2022
PHWH.FX.61232042	ACTIVE	03/16/2022	03/16/2022	09/30/2022
PHWH.FX.61285186	ACTIVE	03/16/2022	03/16/2022	09/30/2022
PHWH.FX.61280643	ACTIVE	03/16/2022	03/16/2022	09/30/2022
PHWH.FX.61264117	ACTIVE	03/17/2022	03/17/2022	09/30/2022
PHNR.FO.61269195	ACTIVE	03/22/2022	03/22/2022	05/31/2023
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PHNR.FO.61254833	ACTIVE	04/06/2022	04/06/2022	05/31/2023
PHWH.FX.61289920	ACTIVE	04/06/2022	04/06/2022	09/30/2022
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PHWH.FX.61277324	ACTIVE	04/27/2022	04/27/2022	09/30/2022
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No closures to report from 3/2-5/1 2022





ESSB 5229: HEALTH EQUITY CONTINUING EDUCATION

Office of Health Professions

ESSB 5229 Overview

- In 2021, Washington State Legislature passed Engrossed Substitute Senate Bill 5229.
- It requires that health care professionals must take health equity continuing education (CE) every four years.
 - **Minimum standards** (model rules) must be developed by 1/1/2023.
 - A free training program (that meets minimum standards) must be identified by 7/1/2023.
 - All professions with a CE requirement must adopt rules that meet or exceed minimum standards by 1/1/2024.
- Currently, we are still **developing minimum standards**.
- Discussion about amending the rule language is reserved for rules workshops.

Current Progress

- Held four (4) **Listening Sessions** during February.
- Held three (3) Rules Workshops throughout March and the first week of April
- Developed **Draft Rules**
 - We will go through the rules and the reasoning behind different parts.
- We plan to hold a **future Rules Workshop** on Monday, May 23rd, 2022, from 1pm to 3pm
 - We will release another Gov Delivery notice
 - We will provide a 5th draft that includes comments received from the 4th draft.

Listening Sessions

- Focused on listening to individuals experience with health inequities
 - Reached out to communities our rule-making often misses.
 - Provided individuals with one-pager on health equity.
 - Had ASL interpreters available.
- Identified problems due to health inequities and potential solutions.
- Conducted a **survey** to identify what communities were missing.
- **Identified themes** we needed to concentrate our rule-making on to address the inequities heard during our Listening Sessions.

Rules Workshop

- First draft was a copy of the suicide prevention continuing education with 5229 Language used.
 - Identified missing definitions, qualification of trainers, and further workshop needs.
- The **second draft** focused on substantiative changes to the training content.
 - Reflected common themes from listening sessions, available CE's, and feedback from interested parties.
- The **third draft** addressed technical changes and topics.
 - Added minimum hours of CE's based on feedback from program managers and the previous workshop.
 - Training topics were reduced to 5 core topics with minimum topics that must be covered.

Existing Questions

- What minimum amount of continuing education credits do we dictate?
 - What is equitable?
 - Are we creating an unreasonable burden for professionals?
 - Is it enough?
- Are the topics relatable to each profession?
 - Each profession with a CE requirement must complete the training.
 - Do the topics translate across each profession and their specialty within the health care spectrum?
- Do the topics honor those who participated in listening sessions and submitted written comment?
 - Does this also honor the intent behind the bill?

Review

DRAFT RULES

Don't Hesitate to Contact Us

healthequityimplementation@doh.wa.gov

We accept written feedback!



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PART 14

MINIMUM STANDARDS FOR HEALTH EQUITY CONTINUING EDUCATION TRAININGS FOR HEALTH CARE PROFESSIONALS

NEW SECTION

WAC 246-12-700 Purpose.

The purpose of WAC 246-12-710 through 246-12-730 is to set minimum standards for health equity continuing education trainings for health care professionals who are recognized as secretary professions or board and commission professions as defined in WAC 246-12-710.

NEW SECTION

WAC 246-12-710 Definitions.

The definitions in this section and RCW 43.70.613 apply throughout WAC 246-12-701 through 246-12-730 unless the context clearly requires otherwise.

- (1) "Board and commission professions" mean those professions regulated by a department board or commission under RCW 18.130.040(2)(b) with a continuing education requirement.
- (2) "Department" means the Washington state department of health.

- (3) "Health equity" means all people have the same opportunities to attain their full health potential regardless of the color of their skin, ancestry, level of education, gender identity, sexual orientation, age, religion, socioeconomic status, the job they have, the neighborhood they live in, or their ability status.
- (4) "Health care professional" means an individual credentialed or holding a retired active credential in one of the health professions listed in RCW 18.130.040 with a continuing education requirement.
- (5) "Secretary professions" mean those professions regulated by the secretary of the department under RCW 18.130.040(2)(a) with a continuing education requirement.

NEW SECTION

WAC 246-12-720 Health Equity Continuing Education Training Requirements.

- (1) Secretary professions and board and commission professions may individually set standards for trainings if they exceed training standards in WAC 246-12-730.
- (2) Secretary professions must complete a minimum of 2 hours in health equity continuing education training every four years, unless secretary professions specify a different number of hours in rule.

NEW SECTION

WAC 246-12-730 Training content. Minimum standards for health equity continuing education training content are designed to give health care professionals a foundation in important topics. Minimum standards for training content are as follows:

- (1) Training must include at least one (3) of the following topics:
 - a. Social Identities, Privileges, and Intersectionality;
 - b. History of Race, Racism in Medicine and Science;
 - c. Social Determinants of Health and Health Disparities;
 - d. Health inequities based on identity;
 - e. Gender and Sexual Diversity; or
 - f. Interrupting Implicit Bias and Micro-aggressions.
- (2) Trainings may include but are not limited to topics found in RCW 43.70.613(3)(c).
- (3) Trainers delivering health equity continuing education must have a demonstrated knowledge and experience related to health equity. Research referenced in the training must be based on current empirical research and known best practices.
- (4) The courses must assess the health care professional's ability to apply health equity concepts into practice in accordance with profession specific rules, which may include, but are not limited to:
 - A test at the end of an online continuing education training to determine knowledge gained during that training; or
 - A document provided at the end of in-person or virtual training that attests that the health care professional attended the training.