### **RESOLUTIONS FORM FOR DISTRICT: 1**

Title of the Proposed Resolution: Point-of-Care Testing and Treatment by Pharmacists

# Provide brief background information on the proposed resolution.

Some states allow CLIA-waived point-of care testing and initiation of protocol-based treatment by pharmacists (i.e., test and treat) but variability exists across states in the allowances and requirements to engage in these practices. Pharmacists have played a vital role in the public health response to the COVID-19 pandemic and the practice of "test and treat" by pharmacists should be expanded and standardized across the United States and its jurisdictions.

#### What issue or need does this resolution attempt to address?

To expand and standardize the practice of pharmacists for providing point-of-care testing and initiate protocol-based treatment for common illnesses.				
Is this actionable for NABP?	<b>X</b> Yes	No		
What is the desired outcome (ie, what specific acti	on do you wan	t NABP to achieve)?	,	
That NABP conduct a survey of the states and jurisdictions to collect data on allowances and requirements for pharmacist point-of-care testing and treatment and, if appropriate, convene a task force to further study the issue and make recommendations to expand and standardize the practice across the United States and its jurisdictions.				
Is this in NABP's scope or sphere of influence?	X Yes	No		
Does this fit within the mission of NARP?	<b>Y</b> Yes	No		

Mission Statement: NABP is the independent, international, and impartial association that assists its member boards and jurisdictions for the purpose of protecting the public health.

#### **Proposed Resolution Language:**

**WHEREAS**, the Coronavirus disease 2019 (COVID-19) pandemic and related emergency declarations allowed for an increase in the scope of practice for pharmacists to order and administer COVID-19 tests and therapeutics; and

**WHEREAS**, pharmacists, as highly accessible health care providers have played a vital role in the public health response to the pandemic; and

**WHEREAS,** pharmacists, as recognized members of the health care team can expand patient access to early testing and initial treatment for common illnesses; and

**WHEREAS**, some states allow CLIA-waived point-of care testing and initiation of protocol-based treatment by pharmacists (i.e., test and treat); and

**WHEREAS**, there is variability across states in allowances and requirements for pharmacists to conduct point-of-care testing and initiate treatment; and

**WHEREAS**, NABP Resolution No: 117-1-21 encouraged the states to continue to allow pharmacists to provide all point-of-care testing;

**THEREFORE BE IT RESOLVED** that NABP conduct a survey of the states and jurisdictions to collect data on allowances, any barriers to access, and requirements for pharmacist point-of-care testing and treatment and, if appropriate, convene a task force to further study the issue and make recommendations to expand and standardize the practice across the United States and its jurisdictions.

Indicate the individual who will serve as the contact for the proposed resolution between the district meeting and the Committee on Resolutions meeting in May.

David Sencabaugh, Executive Director, Massachusetts Board of Registration in Pharmacy

### **RESOLUTIONS FORM FOR DISTRICT: 1**

Title of the Proposed Resolution: Standards of Patient Care Initiative

Provide brief background information on the proposed resolution.

The COVID-19 pandemic and related factors have contributed to severe staffing shortages and operational challenges in pharmacies. Frequent store closures and service issues have brought this to the forefront. State boards of pharmacy staff and field inspectors can proactively work with pharmacy corporations and organizations in a collaborative and non-punitive manner to address patient care and service concerns. Continued open dialogue between state boards of pharmacy and pharmacy corporations and organizations is mutually beneficial for patients and the practice of pharmacy.

# What issue or need does this resolution attempt to address?

A call for increased and	l transparent commu	inications and m	nutual collabora	ition between	state boa	ırds of
pharmacy and pharma	cy corporations and o	organizations to	improve patier	nt service, safe	ty, and qu	uality.

#### Is this actionable for NABP?

X	Yes	No

# What is the desired outcome (ie, what specific action do you want NABP to achieve)?

That NABP convene a task force that includes appropriate stakeholders to examine this issue and develop a "blueprint" for how state boards of pharmacy can develop their own "standards of patient care initiative" working with pharmacy corporations and organizations to address ongoing pharmacy issues.

Is this in NABP's scope or sphere of influence?	<b>X</b> Yes	No
Does this fit within the mission of NABP?	<b>X</b> Yes	No
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Mission Statement: NABP is the independent, international, and impartial association that assists its member boards and jurisdictions for the purpose of protecting the public health.

#### **Proposed Resolution Language:**

**WHEREAS**, the Coronavirus disease 2019 (COVID-19) pandemic and related factors have contributed to severe staffing shortages and operational challenges in pharmacies; and

WHEREAS, state boards of pharmacy regulate the practice of pharmacy to protect the public; and WHEREAS, state boards of pharmacy also provide many other important services to licensees, stakeholders, and the public; and

WHEREAS, state boards of pharmacy can proactively communicate with key representatives of pharmacy corporations and organizations to quickly respond to patient care and service issues; and WHEREAS, continued and transparent communication between state boards of pharmacy and pharmacy corporations and organizations is mutually beneficial; and

**THEREFORE BE IT RESOLVED** that NABP convene a task force that includes appropriate stakeholders to examine this issue and develop a "blueprint" for how state boards of pharmacy can develop their own "standards of patient care initiative" to improve communications and work collaboratively with pharmacy corporations and organizations in the shared goal of quality patient care.

Indicate the individual who will serve as the contact for the proposed resolution between the district meeting and the Committee on Resolutions meeting in May.

David Sencabaugh, Executive Director, Massachusetts Board of Registration in Pharmacy

#### **DISTRICT 2**

RESOLUTION NO: ######

TITLE: Task Force on Examination Limits

ACTION: PASS/FAIL

WHEREAS, it has been noted that some pharmacist applicants have failed the NAPLEX and/or MPJE multiple times, and that they must petition the state board for approval to sit for the exam after multiple failed attempts; and

WHEREAS, state licensing boards have varied approval processes and requirements for additional examination attempts, and that there is concern regarding an applicant's ability to independently practice pharmacy in a safe manner if they cannot show basic competence on the national exam(s); and

WHEREAS, some state boards of pharmacy are concerned that applicants requesting permission to retake the NAPLEX and/or MPJE multiple times may lack the required knowledge to practice pharmacy without becoming a potential negative impact on public health;

THEREFORE, BE IT RESOLVED that NABP convene a task force to examine the topic of pharmacist applicant approval and remediation following multiple failed attempts at the NAPLEX and/or MPJE, which will include members with experience overseeing investigative activities related to these topics, and other stakeholders to develop suggested guidelines and objective tools that may be used by member state boards of pharmacy.

# RESOLUTIONS FORM FOR DISTRICT: 2 (CO-SUPPORTED BY DISTRICT 1)

### Title of the Proposed Resolution: Actions related to DSCSA

# Provide brief background information on the proposed resolution.

Final stage of DSCSA track and trace requirements become effective in November 2023. NABP is currently developing interoperability software to assist supply chain partners with the additional traceability and ensure that boards of pharmacy and other regulators have access to necessary information to investigate suspect products. Education and uniformity for accessing compliance in the supply chain is needed.

## What issue or need does this resolution attempt to address?

Education needed on upcoming DSCSA requirements and the use of new interoperability software to investigate suspect products; need for uniform inspection processes for assessing pharmacy compliance with track and trace requirements, along with assessing compliance of wholesale distributors and third-party logistics providers. It was suggested at the district meeting that the resolution also include tools for educating licensees of the requirements and patients of possible delays in receiving prescriptions since the new requirements for scanning inventory may create delays in processing prescriptions.

s this actionable for NABP?	<b>X</b> Yes	Ν

## What is the desired outcome (ie, what specific action do you want NABP to achieve)?

Educate member boards about upcoming DSCSA requirements, develop tools to assist member boards with assessing compliance with DSCSA requirements, modify the Pharmacy Inspection Blueprint to assess pharmacy compliance with the traceability requirements, develop an Inspection Blueprint for Wholesale Distributors and Third Party Logistics Providers; collaborate with the boards to increase utilization of the interoperability network by state regulators and prescription drug supply chain stakeholders.

Does this fit within the mission of NABP?	<b>X</b> Yes	No:	

**WHEREAS,** suspect products, as defined by Title II Drug Supply Chain Security Act (DSCSA) of the Drug Quality and Security Act (DQSA), pose a significant risk to patient safety;<sup>1</sup> and

**WHEREAS**, since 2013, DSCSA has been implemented by US Food and Drug Administration in several stages and the final stage, which includes additional traceability requirements, must be implemented by November 2023; and

WHEREAS, currently, several NABP programs assess compliance with both Title I and Title II of DQSA; and

**WHEREAS,** NABP is developing an interoperability network to assist supply chain partners with the additional traceability and ensure that boards of pharmacy and other regulators have access to necessary information to investigate suspect products;

**THEREFORE BE IT RESOLVED** that NABP continue educating member boards of pharmacy about upcoming DSCSA requirements and develop tools to assist member boards of pharmacy to further educate licensees and patients, and with assessing compliance with DSCSA requirements, including modifying the Pharmacy Inspection Blueprint to assess pharmacy compliance with the traceability requirements; and

**BE IT FURTHER RESOLVED** that NABP also develop an Inspection Blueprint for Wholesale Distributors and Third Party Logistics Providers; and

**BE IT FURTHER RESOLVED** that NABP collaborate with the boards of pharmacy to increase utilization of the interoperability network by state regulators and prescription drug supply chain stakeholders.

<sup>1</sup> Suspect product.--The term `suspect product' means a product for which there is reason to believe that such product-- ``(A) is potentially counterfeit, diverted, or stolen; ``(B) is potentially intentionally adulterated such that the product would result in serious adverse health consequences or death to humans; ``(C) is potentially the subject of a fraudulent transaction; or ``(D) appears otherwise unfit for distribution such that the product would result in serious adverse health consequences or death to humans.

Available from <a href="https://www.fda.gov/drugs/drug-supply-chain-security-act-dscsa/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-and-security-act-dscsed/title-ii-drug-quality-act-dscse

# RESOLUTIONS FORM FOR DISTRICT: 2 (CO-SUPPORTED BY DISTRICT 1)

Title of the Proposed Resolution: Increasing Access to Buprenorphine

# Provide brief background information on the proposed resolution.

Opioid use disorder (OUD) continues to grow, yet there is a lack of access to buprenorphine to treat OUD. Barriers exists with which NABP may be able to assist to increase patient access.

wnat issue o	r neea aoes	this resolution	i attempt i	o address?

Barriers resulting in lack of patient access to buprenorphine for OUD.					
Is this actionable for NABP?	<b>X</b> Yes	No			
What is the desired outcome (ie, what specific action	on do you wan	t NABP to achieve)?			
NABP to collaborate with DEA and other applicable government agencies and professional associations to address these barriers so as to increase patient access to buprenorphine.					
Is this in NABP's scope or sphere of influence?	X Yes	No	_		
Does this fit within the mission of NABP?	<b>X</b> Yes	No			
Mission Statement: NABP is the independent, internati	ional, and impar	tial association that assists			

### **Proposed Resolution Language:**

**WHEREAS**, opioid use disorder (OUD) continues to grow to epidemic proportions in the United States (US) with an estimated 3 million people suffering from OUD in 2021;<sup>1</sup> and

**WHEREAS**, also in 2021, nearly 108,000 people died from drug overdoses, with approximately 81,000 of those deaths involving a prescription or illicit opioid; and

**WHEREAS**, treatment with medication for OUD is widely acknowledged as being effective for those with OUD; and

**WHEREAS**, buprenorphine has been successfully used to treat OUD by suppressing withdrawal symptoms, reducing cravings, re-establishing normal brain function, and preventing relapse; and **WHEREAS**, access to buprenorphine treatment for those suffering from OUD has been severely limited due to:

- 1) the requirement for providers to obtain a DATA 2000 waiver to provide treatment;
- 2) the restriction on the number of patients that a provider may treat;

its member boards and jurisdictions for the purpose of protecting the public health.

- 3) the exclusion of qualified providers, such as pharmacists, when authorized by the state to prescribe the medication;
- 4) the lack of a uniform prescriber-pharmacist collaborative practice agreement for those states not authorizing pharmacist prescribing;
- 5) a potentially low threshold number when buprenorphine is reported by distributors to US Drug Enforcement Administration (DEA) through the Suspicious Orders Report System (SORS) when it is perceived that a pharmacy has placed a suspicious order, resulting in a pharmacy's requests to purchase the medication being denied; and
- 6) stigma associated with treating OUD;

**THEREFORE BE IT RESOLVED** that NABP collaborate with DEA and other applicable government agencies and professional associations to address these barriers so as to increase access for patients.