Nevada State Board of Pharmacy

BIENNIAL REPORT
July 1, 2016 – June 30, 2018

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THE BOARD

Leo Basch, PharmD, RPh, President, Pharmacist Member
Las Vegas

Kirk Wentworth, RPh, Treasurer, Pharmacist Member
Las Vegas

Robert Sullivan
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Pharmacist Member
Incline Village

2016-2018 BIENNIAL

The 2016-2018 biennium saw continued growth in the Board’s various categories of registration and licensure. The number of licensees and registrants increased 4.55% in the last biennium.

- Controlled substances registrants are largely physicians, but also include dentists, veterinarians, physician assistants, and advanced practice registered nurses.
- Dispensing practitioners are licensed to dispense medications to their own patients. The practitioner is required to meet all record keeping, counseling and labeling requirements that a pharmacy must follow.
- Ambulatory Surgery Centers are licensed under the institutional classification along with hospitals. The data on the number of Hospitals and Ambulatory Surgery centers is included as part of the pharmacy count total.

This Biennial Report, mandated by NRS 639.060, will be a brief overview of the significant developments and activities of the Board from July 1, 2016 through June 30, 2018.

BOARD STAFF (Reno office)

Larry L. Pinson, PharmD, RPh, Executive Secretary

J. David Wuest, RPh, Deputy Secretary

S. Paul Edwards, J.D.
General Counsel

Brent Kandt, J.D.
General Counsel

Jenine Davis
Investigator/Inspector
Pre-criminal Intervention

Joseph Depczynski
Investigator/ Inspectors

Lisa Hedaria
Director of Finance/Technology

Shirley Hunting
Board Coordinator

Yenh Long, PharmD, RPh,
PMP Program Administrator
INTRODUCTION

NRS 639.060 BIENNIAL REPORT TO GOVERNOR.

Before September 1 of each even-numbered year, for the biennium ending June 30 of that year, the Board shall report to the Governor upon the condition of pharmacy in the State of Nevada. The report must contain:

1. A summary of the proceedings of the Board for the year.
2. The names of all pharmacists registered under this chapter.
3. A complete statement of all fees received.


The Board’s focus is provided by NRS 639.070, which sets forth the general powers of the Board. The Board concentrates on four areas of the practice of pharmacy to protect the public: proper credentialing and inspection of licensees; adoption of regulations as necessary to further legislative intent; providing timely access to accurate information in Nevada’s Prescription Monitoring Database; and investigation of complaints filed by the public on activities within the Board’s jurisdiction.

The Board will continue to scrutinize the minimum standards required to provide safe pharmaceutical care to the residents of Nevada. The Board will conduct annual compliance inspections of all pharmacies and dispensers located in Nevada to ensure their operations are safe and lawful. The Board will collaborate with law enforcement and other occupational licensing boards to take action against unlawful, unsafe and/or unlicensed activity.

The Board will adopt regulations as necessary to enhance the pharmaceutical care provided to the residents of Nevada. The Board will adopt regulations as required by the Nevada Legislature and continue to promulgate regulations as the practice of pharmacy advances.
The Prescription Monitoring Database is one of the most useful tools in combating the inappropriate and unsafe use of controlled substances. Timely access and accurate information is paramount to a robust database. The Board will continue to explore new technologies to enhance the functionality of the database and take reasonable measures to identify and correct erroneous data entered into the database.

Investigating complaints from the public has been and will continue to be at the foundation of the Board’s purpose. Through the investigation and adjudication of complaints, the Board is able to better protect the health and safety not only of the resident that filed the complaint, but of the public as a whole. The Board will use the disciplinary enforcement process to identify additional actions necessary to improve the health, safety and welfare of all Nevadans.

ACCOMPLISHMENTS FOR 2016-2018 BIENNUM

While the 2016-2018 biennium contained two busy years for the Board, accomplishments in several important areas are worth mentioning.

FINANCIAL REPORT

The Board administered an annual budget of approximately 2.983 million dollars for the biennium 2016-2018. All of the Board’s revenues come from licensing, certification, grants, and registration fees. The Board receives no state general fund money. The Board is audited annually by the Kohn & Company CPA firm.

The Board received 4.775 million dollars in renewal fees, application fees, recovered costs for disciplinary enforcement actions and miscellaneous other funds during the biennium. Of the 4.775 million dollars of revenue, 3,803 million dollars were from renewal fees.

The Board operates on a biennial licensing cycle pursuant to NRS 639.170 and requires sufficient operating capital for this 2-year licensing cycle; the Board maintains a reserve fund for this purpose.

Renewal Fees received:

2016
- Controlled substance registrations $830,120
- Dispensing practitioner registrations $72,300
- Intern registrations $14,720
- Manufacturer registrations $1,500
- MDEG registrations $304,000
- Pharmacy Technician registrations $188,080
- Pharmacy registrations $736,000
- Prescriber (PA, APRN without Controlled Substance License) registration $9,440
- Veterinary Supplier registrations $8,400
- Warehouse registrations $3,500
- Wholesaler registrations $431,500

2017
- Pharmacists $1,373,040
ADMINISTRATIVE ACCOMPLISHMENTS

BOARD STAFF CHANGES
The Board welcomes Brett Kandt, Darla Zarley and David F. Jones to the Board’s Reno and Las Vegas staff.

BRETT KANDT, B.S. FINANCE AND J.D., GENERAL COUNSEL
- Brett previously served nearly 20 years in the Office of the Nevada Attorney General, most recently as Chief Deputy Attorney General with management oversight of the Boards and Open Government Division, Transactional Unit, and Legislative Affairs.
- Brett also previously served as Director of both the Nevada Prosecution Advisory Council and the Nevada Technological Crime Advisory Board.
- Brett has international legal experience as a former Assistant Attorney General for the Federated States of Micronesia, and prior experience as a civil litigator and transactional attorney in private practice.
- Brett has served on numerous statewide boards and task forces, including the Nevada Advisory Committee to Study Laws Concerning Sex Offender Registration, the Nevada Domestic Violence Fatality Review Team, and the Nevada Supreme Court Access to Justice Commission.
- Brett is past chair of the Public Lawyers Section of the State Bar of Nevada and a member of the State Bar’s Standing Committee on Professional Responsibility and Ethics. He is a graduate of the University of Colorado (B.S.-Finance and J.D.).

DARLA ZARLEY, PHARMD, RPH, GRANT AND PROJECT ANALYST (I)
- Please see section: Prescription Controlled substance Abuse Prevention Task Force

DAVID F. JONES – GRANT AND PROJECT ANALYST (II) COMPLIANCE COORDINATOR
- Please see section: Prescription Controlled substance Abuse Prevention Task Force

The Board also wants to thank and acknowledge the Board staff for sharing their knowledge and time in the training of the new staff members. The dedication of each staff member has made the transition efficient and transparent.

GOVERNOR BRIAN SANDOVAL’S PRESCRIPTION DRUG ABUSE MEETINGS

http://gov.nv.gov/News-and-Media/RX/RXDrugAbuse/
Previous Opioid Taskforce Meeting Documents

2018

- July 17, 2018 Opioid Taskforce Agenda (pdf)
  - All Presentations (pdf)
  - Track 1: Prescriber Education and Guidelines - Second Quarter Status Report (pdf)
  - Track 2: Treatment Options & Third-Party Payers - Second Quarter Status Report (pdf)
  - Track 3: Data Collection and Intelligence Sharing - Second Quarter Status Report (pdf)
  - Track 4: Criminal Justice Interventions - Second Quarter Status Report (pdf)
  - All Tracks: Cross-Cutting Initiatives and Issues - Second Quarter Status Report (pdf)
  - Nevada's Statewide Prevention Coalition Cross-Cutting Work Update (pdf)
  - The Federal Response to Opioids: A Regional Perspective on a National Epidemic (pdf)
  - Opioid Taskforce Meeting Video
- April 18, 2018 Meeting Agenda (pdf)
- February 16, 2018 Meeting Agenda (pdf) - CANCELLED

2017

- September 25, 2017 Meeting Agenda (pdf)
- September 25, 2017 Meeting Minutes (YouTube Video - opens in new window)

2016 RX Summit

- 2016 Summit Recommendations Recap (pptx)

- Opioid Funding (pptx)
- Update on Data (pptx)
- Naloxone Presentation (pptx)
- Treatment Presentation (pptx)
- Disposal Presentation (pptx)
- Pictures of Incinerators (pptx)
- Occupational Licensing Boards Presentation (pptx)
- DEA Presentation (pptx)
- FBI Presentation (pptx)
- Department of Justice Presentation (pptx)
- Summary Recommendations (pdf)
- AB 474 White Paper (pdf)
- SB 459 Overview (pdf)
- DHHS Power Point (pptx)
Highlights of the May 2005 Two-day meeting

INTRODUCTION AND BACKGROUND

In 2014, Governor Sandoval was selected by the National Governors Association as co-chair of the second round of its Prescription Drug Abuse Prevention Policy Academy for States, as part of the Association’s ongoing effort to reduce prescription drug abuse. Nevada was selected as one of seven states to participate in the policy academy on the topic. As part of this academy, the Governor established a Drug Abuse Prevention Task Force which organized a statewide meeting that took place over two days in May 2015, and engaged approximately 200 stakeholders and interested individuals. The Task Force recommended policy changes, and with the leadership of Governor Sandoval, was able to introduce and pass Senate Bill 459, which made substantial policy changes regarding prescription drug abuse prevention in Nevada. The Task Force also developed a statewide action plan that relied on the use of data and evidence-based strategies for combating this public health and safety crisis. The State’s Substance Abuse Prevention Treatment Agency’s (SAPTA) Multidisciplinary Prevention Advisory Committee (MPAC) has been charged with leading implementation of the recommendations in the plan developed by the Governor’s Task Force.

On June 21, 2016, Governor Brian Sandoval hosted a comprehensive planning meeting to provide an opportunity for members of the MPAC and other state policy leaders, to hear presentations from state agencies, licensing boards, and other community stakeholders to provide public comment on prescription drug prescribing practices, options for treatment, criminal justice interventions, and challenges and opportunities in the state.

Following that meeting, a two-day summit was held to hear recommendations from stakeholders on how Nevada can best address prescription opioid abuse and its related challenges. Presentation topics included:

- Prescription drug abuse prevention best practices presented by the National Governors Association and the U.S. Department of Veteran Affairs,
- Federal priorities presented by U.S. Department of Agriculture,
- Lessons learned from state implementation presented by Vermont Governor Peter Shumlin,
- Criminal Justice Diversion Strategies presented by Community Oriented Correctional Health Services, and the rise of heroin presented by the Centers of Disease Control and Prevention (CDC).

Summit attendees participated in various subject matter tracks to develop recommendations for addressing prescription drug abuse prevention in Nevada.


DRUG ABUSE/GOVERNOR’S COMMITTEE

- The Board of Pharmacy, in cooperation with the Medical and Osteopathic Boards, through the Legislative Committee on Healthcare, is addressing the growing issue of prescription drug abuse in Nevada.
Executive Secretary Larry Pinson serves as a member of National Governors Association Policy Academy on Drug Abuse co-chaired by Governor Sandoval and Governor Peter Shumlin of Vermont.

Executive Secretary Larry Pinson also serves as a member of Attorney General Adam Paul Laxalt’s Substance Abuse Work Group.

Executive Secretary Larry Pinson, Deputy Secretary J. David Wuest and General Counsel Paul Edwards are active participants in the Legislative Committee group, “Industry Coalition on Prescription Drug Abuse”, and are all actively participating with Mr. Wuest usually attending meetings in person.

- The Committee is studying the abuse of prescription narcotic drugs, the monitoring of usage by patients, and developing methods to address and prevent prescription drug abuse.

LEGISLATIVE ACCOMPLISHMENTS

It has always been the Board’s intent to maintain excellent working relations with the Legislature. The Board is often asked to testify on and assist the Legislature with technical advice, regulations, and implementation of other important programs/statutes that the legislature is considering or that become law.

THE FOLLOWING NEVADA REVISED STATUTES WERE ADOPTED OR AMENDED IN THE 2017 LEGISLATIVE SESSION:

- Assembly Bill 158
  - Auto-injectable epinephrine – Revises and expands provisions relating to obtaining, providing and administering auto-injectable epinephrine in certain circumstances.

- Assembly Bill 474
  - An act relating to drugs; requiring certain persons to make a report of a drug overdose or suspected drug overdose; revising provisions concerning the computerized program to track each prescription for a controlled substance; revising provisions governing the accessibility of health care records in certain investigations; requiring an occupational licensing board that licenses certain practitioners who are authorized to prescribe controlled substances to review and evaluate information and impose disciplinary action in certain circumstances; authorizing such an occupational licensing board to suspend the authority of a practitioner to prescribe, administer or dispense a controlled substance in certain circumstances; imposing certain requirements concerning the prescription of a controlled substance; revising the required contents of certain written prescriptions; providing a penalty; and providing other matters properly relating thereto.

- NRS 453B.120
  - Board to adopt regulations (effective 10-1-14) Establishes a HIV/AIDS Donation program.
❖ NRS Chapter 453B
  o Cancer Drug Donation Program – Enabling statutes creating a Cancer Drug Donation Program and establishing the criteria of the program.

❖ Senate Bill 131
  o Requires each retail community pharmacy in the state to provide a prescription reader upon the request of a person to whom a drug is dispensed or advice on obtaining a prescription reader.

❖ Senate Bill 171
  o An act relating to pharmacists; requiring certain pharmacies in this State to post or provide written instructions for the safe disposal of unused drugs; providing a penalty; and providing other matters properly relating thereto.

❖ Senate Bill 260
  o An act relating to pharmacists; authorizing a pharmacist who has entered into a valid collaborative practice agreement to engage in the collaborative practice of pharmacy and collaborative drug therapy management under certain conditions; requiring a pharmacist who engages in the collaborative practice of pharmacy to maintain certain records; and providing other matters properly relating thereto.

❖ Senate Bill 337
  o Authorizes a registered pharmacist to manipulate a person for the collection of specimens. It also authorizes a registered pharmacist to perform certain laboratory tests without obtaining certification as an assistant in a medical laboratory.

❖ Senate Bill 459 (effective 5-5-15)
  o Section 16 amended NRS 639.23507(1) - Requires mandatory access and use by practitioners of the prescription monitoring system.
  o Requires periodic training for practitioners concerning the misuse and abuse of controlled substances. Sections 15.1 through 15.9 authorizes each licensing Board of the practitioners who are eligible to obtain a controlled substance registration “complete at least 1 hour of training related specifically to the misuse and abuse of controlled substances during each period of licensing.”
  o Allows for a significant departure from traditional pharmacy law. Section 7 applies to physicians, physician assistants and advanced practice registered nurses who are properly licensed and authorized to prescribe dangerous drugs and controlled substances. This section allows such prescribers to prescribe and dispense an opioid antagonist to a person other than the patient. The statute describes other person as “a family member, friend, or other person in a position to assist a person at risk of experiencing an opioid-related drug overdose.”
Section 7(3) extends the authority to possess and administer opioid antagonists. Allows any person to possess and administer an opioid antagonist to another person whom he or she reasonably believes is experiencing an opioid-related overdose.

Section 8 allows non-registered persons to store and dispense opioid antagonists pursuant to a standing order from a properly licensed prescriber.

Section 9 expands the authority of pharmacists by allowing them to dispense an opioid antagonist without a prescription.

Section 12 provides protections for person who seek medical assistance for another who is experiencing a drug or alcohol overdose.

Senate Bill 59

Ensures that law enforcement agencies can effectively enter data on controlled substance violations and reports of stolen prescription drugs into the PMP and also ensures that coroners and medical examiners can effectively enter data on prescription drug-related overdoses or deaths to the prescription monitoring program database.

**REGULATORY DEVELOPMENTS**

The Board timely responds to developments in the practice of pharmacy with any necessary changes to the Nevada Administrative Code. The Board’s most noteworthy regulations adopted for this biennium are set forth below.

- **R013-18AP**: Establishing requirements relating to the database of the computerized program that tracks each prescription for a controlled substance. (Approved by Legislative Commission 06/26/18)
- **R014-18AP**: Amends provisions relating to the issuance of an order to show cause for failure to comply (Approved by Legislative Commission 05/16/18)
- **R015-18AP**: Revises provisions related to the dispensing of veterinary medicine by veterinarians (Approved by Legislative Commission 05/16/18)
- **R047-18AP**: Establishes provisions related to the prescribing of controlled substances for the treatment of pain (Approved by Legislative Commission 06/26/18)
- **R007-17AP**: Revises provisions governing the partial filling of certain prescriptions (Approved by Legislative Commission 02/27/18)
- **R011-17AP**: Revises the list of controlled substances contained in schedule I (Approved by Legislative Commission 10/31/17)
- **R013-17AP**: Revises the list of controlled substances in Schedule III (Approved by Legislative Commission 10/31/17)
- **R046-17AP**: Revises provisions relating to the registration of prescribing practitioners (Approved by Legislative Commission 02/27/18)
- **R045-17AP**: Revising provisions relating to the prescription monitoring program (Approved by Legislative Commission 02/27/18)
R131-17AP Establishes procedures for certain pharmacies that are required to notify a person to whom a drug is dispensed that a prescription reader is available to the person. (Approved by Legislative Commission 06/26/18)

R132-17AP Revises the authority of certain advanced practice registered nurses to dispense controlled substances, poisons, dangerous drugs and devices. (Approved by Legislative Commission 05/16/18)

R146-17AP Amends provisions relating to dispensing of dangerous drugs by veterinarians (Approved by Legislative Commission 05/16/18)

COMPREHENSIVE REVIEW OF REGULATIONS

- Pursuant to Governor Sandoval’s Executive Order (2011-01) to complete a comprehensive review of the regulations of the State Board of Pharmacy with respect to the protection of the public’s health, safety and welfare without discouraging economic growth, we offer the following report:

  o In January 2016, Executive Secretary Larry Pinson submitted a comprehensive list of all administrative codes in which Executive Secretary Pinson identified each code as to the following:

    ▪ What value is the regulation to the public?
    ▪ Is the regulation necessary?
    ▪ Could/Do other regulations address the same problem?
    ▪ Is the regulation clearly written?
    ▪ What is the cost of the regulation to the agency/state?
      - Time and money
    ▪ What is the adverse impact of regulation and cost to business?
      - Time and money

  o The Board of Pharmacy takes its regulatory responsibility seriously, and continuously reviews all of its regulations, oftentimes at the request of industry who needs regulatory change to progress their businesses. Many times, a balance must be sought between the good and the evil of drug therapy, as is evidenced by our country’s alarming epidemic of prescription drug abuse. Regardless of our ever-changing environment, the Board of Pharmacy takes pride in being one of the most efficient licensing boards in the nation with respect to swiftly, accurately and safely processing new applications for any of our 17 different licensing categories, including the licensing of new business entities in Nevada (i.e., pharmacies, wholesalers, manufacturers, medical device & gas companies). We are often complemented on our efficiency and willingness to work with new businesses to get them licensed.

  o As technology has moved forward, the Board of Pharmacy has been responsive, but always with public safety in mind. Accuracy in our field is paramount given the nature of many of our new and potent medications. We will continue to make regulatory changes in the future to meet the demands of both the Legislature and the public we serve, but feel that the regulatory challenge of updating institutional regulations should be our focus.
NRS CHAPTERS ENFORCED BY THE BOARD

- NRS Chapter 453 — CONTROLLED SUBSTANCES
  - This chapter (controlled substances) is probably the most active with respect to revision, primarily due to its subject matter. Consequently, it has been continually reviewed and revised as is evidenced by our regulatory preparation for electronic prescribing; the strengthening of Nevada’s Prescription Monitoring Program (PMP); methamphetamine abuse and the role that over-the-counter products have played as precursors (pseudoephedrine); and finally, the scheduling of synthetic cannabinoids ("Spice") and "bath salts" or "synthetic cocaine". We will continue to monitor the world of drug abuse and regulate accordingly for the protection of the public and in particular, our youth.

- NRS Chapter 453B – DRUG DONATION PROGRAMS

- NRS Chapter 453C – GOOD SAMARITAN OVERDOSE ACT (ADOPTED 2017 LEGISLATIVE SESSION)

- NRS Chapter 454 — POISONS, DANGEROUS DRUGS, HYPODERMICS AND DEVICES
  - This chapter regulates the authority to possess and administer or use dangerous drugs and devices which obviously affects other licensing boards and has been statutorily updated as the need has arisen (i.e., "medical assistants").

- NRS CHAPTER 585 – FOOD, DRUGS AND COSMETICS: ADULTERATION; LABELS; BRANDS

- NRS Chapter 639 — PHARMACISTS AND PHARMACY
  - Chapter 639 is the heart of the Board’s regulatory responsibility, and again, is continually updated as health care moves forward. An example of our progressive regulatory activities is the relatively new immunization by pharmacist’s initiative which has proven quite effective. The impact of the availability of immunizations of all kinds through pharmacies by pharmacists appears to be significant. Nevada being one of the "worst immunized" states in the nation illustrates the importance of our efforts and its impact on public health.
VERSA LICENSING AND ENFORCEMENT PROGRAM

- VERSA –coming enhancements
  - Ability to email certificates.
  - The system will ask licensees a series of questions on business licenses and military information so the online system will be able to accommodate questions allowing the licensee to renew online based on the answers to the questions. Previously, the ability to renew online was dependent on the response to the questions asked.
  - All around enhancements to VERSA will be implemented in the near future with a system upgrade.

- VERSA has enhanced capabilities for online registration and license renewal.

- Percent of renewals online-
  - 2009 Pharmacists 50%.
  - 2010 All other categories of licensees and registrants totals only/not broken down by category 40% 6,052 on-line (15,131 total).
  - 2011 Pharmacists – 80% 6,440 on-line (8,063 total).
  - 2012 All other categories of licensees and registrants 78.2% 12,515 on-line (16,004 total)
  - 2013 81.9% 6,430 on-line (7,855 total).
  - 2014 All other categories of licensees and registrants 80.6% 13,691 on-line (16,986 total) (as of December 2, 2014)
    - Controlled Substance 9,209 (87%)
    - Veterinary Dispenser 11 (84.5%)
    - Intern 389 (58%)
    - Manufacturer 2 (65%)
    - MDEG 549 (75%)
    - Pharmacy Technician 4,149 (69%)
    - Pharmacy 1,269 (94%)
    - Dispensing Practitioner 238 (76%)
    - Prescriber (PA, APRN without Controlled Substance License) 162 (75%)
    - Technician Dispensing 295 (49%)
    - Warehouse 0
    - Wholesaler 713 (92%)
  - 2015 Pharmacists – 79.9% 6,263 on-line (7,840 total).
  - 2016
    - Controlled Substance 79.85% (8,285/10,375)
    - Veterinary Supplier 65% (18/28) 64.3%
    - Intern 93.16% (368/395)
    - Manufacturer 33.33% (1/3)
    - MDEG 79.77% (485/608)
    - Pharmacy Technician 95.56 (4,493/4,702)
    - Pharmacy 64.54% (950/1,472)
• Dispensing Practitioner 77.6% (187/241)
• Prescriber (PA, APRN without Controlled Substance License) 72.03% (85/118)
• Technician Dispensing 76.08% (159/209)
• Warehouse 57.14% (4/7)
• Wholesaler 79.23% (683/862)
  o 2017
  • Pharmacists 87.00% (6,636/7,628)

❄ VERSA provides enhanced versatility allowing Board staff to control various functions, reports, etc.
  • VERSA includes an investigation module to streamline investigations and allow real time monitoring of investigations.
  • VERSA also has enhanced management of cash (licensing fees) features.
The table below shows the change in the number of licensees and registrants for all regulated categories, by category, since the last biennium, 2016-2018.

<table>
<thead>
<tr>
<th>License or Registration Category</th>
<th>Prior Biennium</th>
<th>Current Biennium</th>
<th>Change (number)</th>
<th>Percent Change</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CONTROLLED SUBSTANCES REGISTRATIONS</strong></td>
<td>11,386</td>
<td>12,720</td>
<td>1,334</td>
<td>11.72%</td>
</tr>
<tr>
<td><strong>DISPENSING PRACTITIONERS</strong></td>
<td>291</td>
<td>327</td>
<td>36</td>
<td>12.37%</td>
</tr>
<tr>
<td><strong>DISPENSING TECHNICIANS AND TRAINEES</strong></td>
<td>321</td>
<td>372</td>
<td>51</td>
<td>15.89%</td>
</tr>
<tr>
<td><strong>INTERNS</strong></td>
<td>731</td>
<td>727</td>
<td>-4</td>
<td>-0.55%</td>
</tr>
<tr>
<td><strong>MANUFACTURERS</strong></td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>MDEG (MEDICAL DEVICES/EQUIPMENT AND GASES)</strong></td>
<td>693</td>
<td>713</td>
<td>20</td>
<td>2.89%</td>
</tr>
<tr>
<td><strong>OUTSOURCING FACILITY</strong></td>
<td>NA</td>
<td>6</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td><strong>PHARMACEUTICAL TECHNICIANS &amp; PHARMACEUTICAL TECHNICIANS-IN TRAINING</strong></td>
<td>6,498</td>
<td>6,622</td>
<td>124</td>
<td>1.91%</td>
</tr>
<tr>
<td><strong>PHARMACIES (INCLUDES INSTITUTIONAL HOSPITALS AND AMBULATORY SURGERY CENTERS)</strong></td>
<td>1,572</td>
<td>1,644</td>
<td>72</td>
<td>4.58%</td>
</tr>
<tr>
<td><strong>PHARMACISTS</strong></td>
<td>8,114</td>
<td>7,756</td>
<td>-358</td>
<td>-4.41%</td>
</tr>
<tr>
<td><strong>PRESCRIBING PRACTITIONERS (APRN’S AND PA’S)</strong></td>
<td>199</td>
<td>187</td>
<td>-12</td>
<td>-6.03%</td>
</tr>
<tr>
<td><strong>VETERINARIANS</strong></td>
<td>NA</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>VETERINARY DRUG SUPPLIER</strong></td>
<td>28</td>
<td>33</td>
<td>5</td>
<td>17.86%</td>
</tr>
<tr>
<td><strong>WAREHOUSES</strong></td>
<td>7</td>
<td>7</td>
<td>0</td>
<td>0.00%</td>
</tr>
<tr>
<td><strong>WHOLESALERS</strong></td>
<td>890</td>
<td>1,015</td>
<td>125</td>
<td>14.04%</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td>30,733</td>
<td>32,132</td>
<td>1,399</td>
<td>4.55%</td>
</tr>
</tbody>
</table>
The Board issues and regulates the following license or registration categories. The Board's total licensure counts at the end of the 2016-2018 biennium (as of July 1, 2018) are shown in the following table.

<table>
<thead>
<tr>
<th>License or Registration Category</th>
<th>In State</th>
<th>Out of State</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTROLLED SUBSTANCES REGISTRATIONS</td>
<td>12,644</td>
<td>76</td>
<td>12,720</td>
</tr>
<tr>
<td>DISPENSING PRACTITIONERS</td>
<td>327</td>
<td>0</td>
<td>327</td>
</tr>
<tr>
<td>DISPENSING TECHNICIANS AND TRAINEES</td>
<td>372</td>
<td>0</td>
<td>372</td>
</tr>
<tr>
<td>INTERNS</td>
<td>426</td>
<td>301</td>
<td>727</td>
</tr>
<tr>
<td>MANUFACTURERS</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>MEDICAL DEVICES, EQUIPMENT, &amp; GASES</td>
<td>167</td>
<td>546</td>
<td>713</td>
</tr>
<tr>
<td>OUTSOURCING FACILITIES</td>
<td>0</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>PHARMACEUTICAL TECHNICIANS &amp; TECHNICIANS IN TRAINING</td>
<td>6,159</td>
<td>463</td>
<td>6,622</td>
</tr>
<tr>
<td>PHARMACIES (INCLUDES INSTITUTIONAL HOSPITALS AND AMBULATORY</td>
<td>637</td>
<td>1,007</td>
<td>1,644</td>
</tr>
<tr>
<td>SURGERY CENTERS)</td>
<td></td>
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<tr>
<td>PHARMACISTS</td>
<td>2,474</td>
<td>5,282</td>
<td>7,756</td>
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<tr>
<td>PRESCRIBING PRACTITIONERS</td>
<td>176</td>
<td>11</td>
<td>187</td>
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<tr>
<td>VETERINARIANS</td>
<td>N/A</td>
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<tr>
<td>VETERINARY DRUG SUPPLIER</td>
<td>33</td>
<td>0</td>
<td>33</td>
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<tr>
<td>WAREHOUSES</td>
<td>7</td>
<td>0</td>
<td>7</td>
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<tr>
<td>WHOLESALERS</td>
<td>34</td>
<td>981</td>
<td>1,015</td>
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<tr>
<td>TOTALS</td>
<td>23,458</td>
<td>8,673</td>
<td>32,132</td>
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### LICENSES GRANTED

<table>
<thead>
<tr>
<th>License Type</th>
<th>In State</th>
<th>Out of State</th>
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<tbody>
<tr>
<td>CONTROLLED SUBSTANCE*</td>
<td>4</td>
<td>NA</td>
</tr>
<tr>
<td>INTERN *</td>
<td></td>
<td>NA</td>
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<tr>
<td>MANUFACTURER **</td>
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<tr>
<td>MDEG (MEDICAL DEVICES/EQUIPMENT AND GASES) **</td>
<td>26</td>
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<tr>
<td>OUTSOURCING FACILITIES</td>
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</tr>
<tr>
<td>PHARMACY TECHNICIAN AND TRAINEES *</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>PHARMACIST *</td>
<td>12</td>
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<tr>
<td>PHARMACY *</td>
<td>89</td>
<td>342</td>
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<tr>
<td>PHARMACY * (CANADIAN)</td>
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<tr>
<td>PRACTITIONER DISPENSING *</td>
<td></td>
<td>NA</td>
</tr>
<tr>
<td>PRESCRIBING PRACTITIONERS (APRN’S AND PA’S) *</td>
<td>1</td>
<td>NA</td>
</tr>
<tr>
<td>TECHNICIAN DISPENSING &amp; TRAINEES *</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VETERINARY DRUG SUPPLIER **</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WAREHOUSE **</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WHOLESALER **</td>
<td>4</td>
<td>251</td>
</tr>
</tbody>
</table>

The number of licenses granted for each license type may be different than the number of changes in total licensed facilities due to closures, change of address, and other related issues or out of state facilities during the biennium.

Certain licenses may require a hearing or may be granted without requiring a formal hearing. These are noted above with a single asterisk *. The appearance of any of these licensees at a hearing is required only if there are issues with the applicant’s application.

All in-state Nevada licenses noted above with a double asterisk ** were approved pending a positive site inspection by the Board staff.
Prescribing Practitioners: Advanced Practice Registered Nurses (APRN) and Physician’s Assistants (PA) are required to pass a Nevada Pharmacy Law test prior to licensure to prescribe controlled substances. The APRN test is administered by the Nursing Board and the PA test is administered by the Pharmacy Board.

Ambulatory Surgery Centers are licensed as pharmacies and are included in the pharmacy licensing information.

Out of state pharmacies compounding sterile products must provide a favorable inspection report by the state the pharmacy is licensed in, fill out the Nevada Sterile Compounding Addendum found in the institutional inspection report, and provide the current certifications identifying that all ISO areas passed certification to the ISO level required for that sterile area. These certifications must contain testing and passing of viable particle testing in addition to non-viable particle testing.

<table>
<thead>
<tr>
<th>DISCIPLINE</th>
<th>PHARMACY</th>
<th>PHARMACIST</th>
<th>INTERN</th>
<th>TECHNICIAN-TECHNICIAN TRAINEE-DISPENSING TECHNICIAN</th>
<th>WHOLESALER MANUFACTURER</th>
<th>MDEG</th>
<th>PRACTITIONERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>LICENSE REVOKED</td>
<td>3</td>
<td>14</td>
<td></td>
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<tr>
<td>LICENSURE APPLICATION DENIED</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
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<tr>
<td>LICENSE SUSPENDED</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>LICENSE SURRENDERED</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LICENSE SUSPENDED AND STAYED</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>LICENSE PROBATION OR CONDITIONS</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REINSTATEMENT OF/RECIPROCITY APPROVED LICENSE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DENIAL OF RECIPROCAL LICENSE</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SURRENDER OF LICENSE</td>
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</table>

2016-2018 Nevada State Board of Pharmacy Biennial Report
<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>LICENSE REINSTATED (MAY HAVE CONDITIONS)</td>
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<tr>
<td>INTERNSHIP REQUIRED</td>
<td>1</td>
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<tr>
<td>PROBATION REMOVED</td>
<td>1</td>
</tr>
<tr>
<td>PARE EXAM</td>
<td>2</td>
</tr>
<tr>
<td>AFFILIATED MONITORS</td>
<td>2</td>
</tr>
<tr>
<td>PRN-PRN CONTRACT EVALUATION AND/OR REQUIRED CONTRACT</td>
<td>2</td>
</tr>
<tr>
<td>PUBLIC LETTER OF REPRIMAND/WARNING</td>
<td>10</td>
</tr>
<tr>
<td>REQUIRED TO ATTEND BOARD HEARINGS</td>
<td>2</td>
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<tr>
<td>ADDITIONAL CONTINUING EDUCATION</td>
<td>21</td>
</tr>
<tr>
<td>CANNOT BE A MANAGING PHARMACIST</td>
<td>1</td>
</tr>
<tr>
<td>POLICY AND PROCEDURES/PROTOCOLS/RETRAINING REVIEW/CHANGES/ADDITION...</td>
<td>8</td>
</tr>
<tr>
<td>CONTROLLED SUBSTANCE LICENSE REINSTATED</td>
<td></td>
</tr>
<tr>
<td>DISPENSING APPLICATION DENIED</td>
<td></td>
</tr>
<tr>
<td>CONTROLLED SUBSTANCE LICENSE RESTRICTED</td>
<td>1</td>
</tr>
<tr>
<td>CONTROLLED SUBSTANCE LICENSE PROBATION</td>
<td>1</td>
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</tbody>
</table>
Other Discipline numbers are noted only once per entity or person. Administrative orders may have other discipline components as part of the order. If discipline is noted in a specific classification in this chart, the discipline is not noted in the category “other discipline”. If a pharmacist was ordered by the Board to complete a PARE exam or other testing or monitoring, discipline is noted both in this chart and separately under PARE exam.

If found guilty of one or more causes of action by the Board the Board may assess fines, cost of investigation and administrative fees. (SEE EXAMINATIONS AND MONITORING PROGRAMS).

The Board only receives the cost of investigations and administrative fees. Any other fines are returned to the State General Fund.

- The Board staff, working closely with DoIT staff, continues to make the website more informative and user friendly.
- Important patient links can be found at the following web address http://bop.nv.gov/patientlinks/
The following can be found on the website under resources at [http://bop.nv.gov/resources/Resources/](http://bop.nv.gov/resources/Resources/)

- Approved E-Prescribing Systems
- Approved PTT Schools
- Board Meetings & Agendas
- Canadian Pharmacy
- Cancer Drug Donation Program
- FAQs
- Fax Notices
- FDA Drug Information
- Nevada Senior & Disability Rx Program (SPAP)
- Newsletters
- Prescription Drug Abuse Prevention Video
- Report Prescription Fraud
- Wholesalers & EPP Information

Agendas provided by Board staff to Board members for future meetings and the latest version of regulations being considered are now available in portable document format (PDF) for viewing, download and printing. The minutes of previous meetings are also posted on the site. [http://bop.nv.gov/board/Board_Home/](http://bop.nv.gov/board/Board_Home/)

New applications and services are found at the web address. [http://bop.nv.gov/Services/](http://bop.nv.gov/Services/)

Inspection forms for all registrants are now available on the Board website. [http://bop.nv.gov/Forms/Forms/](http://bop.nv.gov/Forms/Forms/)

A Red Flag video about Prescription Drug Abuse prevention has been added to the home page and resources page. The “Red Flag Video” was taped in conjunction with NABP as an educational resource for pharmacists and techs on doctor shopping.

License Verification [https://pharmacy.bop.nv.gov/datamart/mainMenu.do](https://pharmacy.bop.nv.gov/datamart/mainMenu.do)

Links to the PMP, other state and federal agencies, safe injection practices and links important to patients [http://bop.nv.gov/links/Links/](http://bop.nv.gov/links/Links/)

**INSPECTIONS**

- A cover letter is sent to registrants informing the registrant that the registrant needs to print and fill out the appropriate registrant self-assessment form. The form is available on the Board website.

- The Board of Pharmacy continues to focus on medical safety education in the Board’s Inspecting for Safety presentations and when inspectors conduct their annual inspections of registrants.
In addition to annual inspections, Board inspectors conduct pre-opening inspections for all registrants that are approved by the Board for licensure. The pre-opening inspections including Dispensing Doctors, Dispensing APRNs, Dispensing PAs, Hospitals, Ambulatory Surgery Centers, Pharmacies, MDEG providers, Manufacturers and Wholesalers.

COMMITTEES

PHARMACEUTICAL TECHNICIAN ADVISORY COMMITTEE
- The Board approved creation of this committee in July, 2008. The committee meets when needed to discuss technician related issues.

MDEG (MEDICAL DEVICES, EQUIPMENT AND GASES) ADVISORY COMMITTEE
- The Board created this committee in 2002. The committee meets when needed to discuss medical device, equipment and gas related issues.
- The committee’s purpose is to provide recommendations on regulations needed to protect and improve patient safety.
- The committee met on December 14, 2017 at 9:00 am. The agenda is available at: http://bop.nv.gov/uploadedFiles/bopnygov/content/board/ALL/2017_Meetings/11.29.2017.MDEG.Agenda.pdf

PATIENT SAFETY – CONTINUED FOCUS

A continuing important part of the inspection and compliance process is the focus of the board on educating and inspecting for Quality and Safety.
- The Board website has a link to a free online option for registrants to complete the required 1 hour of Nevada law through Pharmacist’s Letter or PowerPak.
- The Board encourages pharmacy managers to focus technician and technician in training continuing education on prevention of medication errors and other continuing education that is relevant to and applicable within the technician and technician in trainings’ scope of practice.
- The Board inspection forms include ISMP (Institute for Safe Medicine Practices) recommendations on how to improve an individual’s practice to improve patient safety.
  - The 2017 ISMP Medication Safety Assessment for Community/Ambulatory Pharmacy is now live on the ISMP website. The community pharmacy tools can be found at: https://www.ismp.org/Survey/NewMssacap/Index.asp.
- The Board of Pharmacy continues to reach out to practitioners in a number of ways such as through articles in professional publications; soft education through its inspection efforts (i.e., educating practitioners about what is expected of them and reviewing the regulations that control their practices); the disciplinary process to try and curb professionals whose conduct violates Board statutes and
regulations; and in some cases, intervention by law enforcement when appropriate. The Board will continue its efforts to work with practitioners to bring their medical practices into compliance in its effort to protect the public.

EDUCATIONAL PRESENTATIONS

- Pharmacists/technicians
- Nurses and nurse practitioners
- Doctor of Osteopathic Medicine
- Dentists/Hygienists/Dental Managers
- Physicians
- Police Department
- Behavioral Health
- National Association of State Controlled Substance Authorities (NASCSA)
- National Associations of Board of Pharmacy (NABP)
- Prescription Drug Monitoring Program Training and Technical Assistance Center
- The Western Regional Advanced Practice Nurses Network
- Nevada Academy of Family Physicians
- Nevada Dental Association
- Roseman University of Health Science
- Veterans Affair Roundtable
- Nevada Mutual Insurance
- Nevada Hospital Association
- Saint Mary’s Hospice and Palliative care
- Naloxone Training was provided to a total of 850 law enforcement/corrections officers

SUPPORT OF LAW ENFORCEMENT

- The Board staff actively supported the various law enforcement agencies in their efforts to lower drug amounts available for trafficking.
  - Task Force on Unlicensed Health Care and Scope of Practice issues.
    - The Task Force on Unlicensed Health Care has completed its mission, which was culminated during the last legislative session in a law that grants health care boards "cite and fine" authority against unlicensed health care activity. The Board has used this authority in cases involving pharmacists and intern pharmacists who have failed to renew their licenses or simply did not get licensed as well as against some of the medi-spa activity that the Board has investigated.
    - A major focus of the task force is the unlicensed health care individuals who are preying on low income and the immigrant population in Nevada.
PRESCRIPTION CONTROLLED SUBSTANCE ABUSE PREVENTION TASK FORCE

CONTROLLED SUBSTANCE ABUSE PREVENTION TASK FORCE
Created in 1997, the Nevada Prescription Controlled Substance Abuse Prevention Task Force, now known as the Nevada Prescription Monitoring Program Advisory Board (PMP Advisory Board) is administered by the Nevada State Board of Pharmacy. The PMP Advisory Board consists of participants from SAPTA, NDI, healthcare licensing boards, Medicaid, professional organizations, pain management practitioners, impaired professional help groups and industry. The panel meets biennially to set policy and to discuss the operation of the PMP.

WHAT IS THE PRESCRIPTION MONITORING PROGRAM (PMP)?
- The Prescription Monitoring Program (PMP) is a database that contains information regarding controlled substance II, III, and IV that are dispensed in Nevada. Senate Bill 59, effective July 2017, require pharmacies to report scheduled V controlled substances to the PMP.
- The database is designed to identify potential “doctor shoppers” (a felony).
- The PMP database software vendor is Appriss®. The product name is PMP AWARxE.

HOW DOES IT WORK, AND WHO IS REQUIRED TO USE IT?
- Pharmacies and dispensing practitioners must report their controlled substance dispensations by the end of next business day to the PMP database.
- A practitioner shall, before issuing an initial prescription for a controlled substance, and at least once every 90 days thereafter for the duration of the course of treatment using the controlled substance, obtain a patient PMP report regarding the patient. The practitioner must review the report prior to prescribing the controlled substance to the patient.
- Access to the PMP database is also given to dispensers, Department of Public Safety Investigation Division, occupational licensing boards investigators, and other selected law enforcement officials.
- PMP staff reviews PMP data to identify any suspected fraudulent, illegal, unauthorized or otherwise inappropriate activity related to the prescribing, dispensing or use of controlled substances. The PMP will notify such activities to appropriate law enforcement agency or occupation licensing board.
- The PMP is not for law enforcement “fishing”.
- 85% of controlled substance registration practitioners are registered to use the PMP. All controlled substance registrants will be registered to use the PMP by the completion of 2018.

WHAT IS NABP PMP INTERCONNECT?
- NABP PMP InterConnect facilitates the secure exchange of PMP prescription data across state lines, allowing participating state PMPs across the United States to be linked. This provides a more effective way of combating drug diversion and drug abuse nationwide. As of July 1, 2018, Nevada is interconnected with 24 states: AZ, AK, CO, CT, ID, IL, IN, KS, LA, MA, ME, MI, MN, MT, NM, ND, OH, OK, OR, SC, SD, UT, WV, and WI.
Other states are working towards data sharing of PMP information through PMP Interconnect.

**PMP GRANTS:**

In 2015 the Board was awarded the Harold Rogers Prescription Drug Monitoring Program: PDMP Implementation and Enhancement Grant. The grant is scheduled to conclude March 2019. There are two grant employees hired to carry out the objectives of the grant, which is to increase PMP registration and use by practitioners, assess the impact of bills affecting the prescribing and dispensing of controlled substances, and improve the quality and accuracy of PMP data. The two grant employees are:

**Darla Zarley - Grant and Project Analyst (I)**

Darla Zarley obtained her Doctor of Pharmacy (Pharm.D.) degree from North Dakota State University in 1997. Upon graduation she worked for a local chain pharmacy as a staff pharmacist, pharmacy manager and market trainer. In 2001, Dr. Zarley joined Roseman University of Health Sciences College of Pharmacy. Dr. Zarley’s responsibilities included coordinating Advanced Pharmacy Practice Experience rotations for P3 students in addition to teaching pharmacy law and pharmacy calculations.

On June 1, 2018, Darla Zarley began working as a Grant & Project Analyst for the Nevada State Board of Pharmacy’s Prescription Monitoring Program. Her role is to oversee the daily management of grant activities, working directly with the PMP, assisting users with registration, trouble-shooting PMP related concerns, and assisting the PMP administrators with grant related activities.

**David F. Jones – Grant and Project Analyst (II) Compliance Coordinator**

Mr. David F. Jones graduated from Arizona State University in 1984 and began his professional career in Nevada in August 1985, as an Auditor for the Nevada Gaming Control Board. In 1990, Mr. Jones became a Certified Public Accountant and started his 23 years of law enforcement service with the Department of Public Safety’s Investigation Division. Mr. Jones retired from state service in March 2014, as the Deputy Chief of the Investigation Division. While enjoying retirement, Mr. Jones spent the last two years working part-time as a Douglas County Deputy assigned to the Marine 7 boat patrol at Lake Tahoe.

In May 2016, Mr. Jones began working part-time as a Compliance Coordinator for the Nevada Board of Pharmacy’s Prescription Monitoring Program (PMP). His role is to identify suspected fraudulent, illegal, unauthorized or otherwise inappropriate activity related to the prescribing, dispensing or use of controlled substances and report such activities by unsolicited reports to appropriate law enforcement agency or occupation licensing board.

Mr. Jones has been married for 21 years and is proud to have his son enrolled as an engineering student at UNR.
PMP UNSOLICITED REPORTS:

Nevada Revised Statute 453.391 states that a person shall not “while undergoing treatment and being supplied with any controlled substance or a prescription for any controlled substance from one practitioner, knowingly obtain any controlled substance or a prescription for a controlled substance from another practitioner without disclosing this fact to the second practitioner.”

The PMP has the ability to proactively search for patients who may be at risk of overdose and/or in violation of Nevada laws based on the use of multiple practitioners to obtain controlled substances. The common term for a patient receiving multiple overlapping prescriptions is a “doctor shopper.”

PMP data is reviewed under varying criteria to identify patients who may be at-risk of overdose and/or doctor shopping. For each patient identified, the PMP sends letters to the prescribing practitioners, dispensing pharmacies, and licensing boards. The letters serve as the PMP’s formal notification that the patient may be; at higher risk of overdose, the involved practitioners may be unaware of each other, and the potential for violations of Nevada law.

As mentioned above, the PMP allows for analysis of prescription data to identify doctor shoppers and patients at-risk. Review of PMP data showed that from the period of January 1, 2013 through June 30, 2018, the following number of patients have met a set threshold, in a quarter, indicating that the patient is doctor shopping.

<table>
<thead>
<tr>
<th>Year</th>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
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<td>273</td>
<td>302</td>
<td>134</td>
<td>225</td>
</tr>
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<tr>
<td>2015</td>
<td>210</td>
<td>114</td>
<td>82</td>
<td>287</td>
</tr>
<tr>
<td>2016</td>
<td>208</td>
<td>112</td>
<td>79</td>
<td>71</td>
</tr>
<tr>
<td>2017</td>
<td>198</td>
<td>71</td>
<td>63</td>
<td>68</td>
</tr>
<tr>
<td>2018</td>
<td>38</td>
<td>51</td>
<td>14</td>
<td>13</td>
</tr>
</tbody>
</table>

a. The total number of patients identified in the 22 quarters was 3,296.
b. The highest quarter was April 1, 2013, through June 30, 2013, with 302 patients identified.
c. The lowest quarter was April 1, 2018, through June 30, 2018, with only 13 patients identified.
d. From the high of 302 patients on Q2 of 2013 to the low of 13 patients in Q2 of 2018, the volume of potential doctor shoppers that have been identified dropped by 96%.

The reduction in doctor shopping and/or at-risk patients is attributed to a combination of factors including, but not limited to the following:
   a. Proactive efforts by the PMP to notify licensing boards, practitioners and pharmacies about at-risk patients.
   b. Referral of patients who are potentially involved in doctor shopping and/or other criminal acts concerning controlled substances to law enforcement.
   c. Required use of the PMP effective October 2015 by practitioners for new patients and selected other criteria.
   d. Legislative changes effective January 1, 2018 expanding criteria for the mandatory use of the PMP by practitioners.
   e. Presentations provided by the Board of Pharmacy/PMP to practitioners, licensing boards and law enforcement.

**PMP DATABASE UTILIZATION:**

![Chart showing number of PMP queries per quarter]

Created in 1997, the Nevada Prescription Controlled Substance Abuse Prevention Task Force (the Task Force) or Prescription Monitoring Program (PMP) is administered by the Board. The Task Force consists of participants from SAPTA, NDI, and healthcare licensing boards, Medicaid, professional organizations, pain management practitioners, impaired professional help groups and industry. The panel meets once or twice a year to set policy and to discuss the operation of the program.

This biennium, the Task Force began full implementation of online practitioner access to the data. The Task Force has online 24/7 access to registered users of the system. This has worked effectively for the
practitioners because they are getting their data online, often within minutes of their request and while the patient is still in their office, rather than receiving the data three or four days later.

In 1997, the first year of the CSTF, there were a total of 480 requests for the report.

**PHARMACY STUDENT ROTATIONS**

- The Board of Pharmacy is one of the few Boards of Pharmacy nationwide that offers rotations to senior Pharmacy Students.
- The students are exposed to pharmacy law from the regulatory perspective. The students do research projects, take part in staff meetings, and attend Board of Pharmacy hearings.
- The Board office provides a regulatory rotation for pharmacy schools who have students interested in completing a regulation rotation with the Board:
  - The Board office in Reno hosted rotations for two students from Roseman University of Health Sciences during the biennium.
  - The Board office in Reno hosted rotations for two students from Idaho State University during the biennium.
  - The Board office in Las Vegas was host to a rotation for a student from Roseman University of Health Sciences during the biennium.
  - In the past, the Board has hosted students from North Dakota State University, Idaho State University, Creighton University and Chicago State University.

**LICENSING EXAMINATIONS**

**MULTI-STATE JURISPRUDENCE EXAMINATION (MPJE)**

- Inspector Joe Dodge is the new Nevada representative on the National Association of Boards of Pharmacy (NABP) law review committee. Inspector Dodge will work with Office Manager/Inspector Seidlinger in reviewing current exam questions and answers each year to ensure that the questions and answers are still valid under Nevada NRS and NAC. Inspector Dodge will also work with Inspector Seidlinger writing new Nevada pharmacy law exam questions and answers for the MPJE examination.
- The MPJE combines federal and state specific questions to test the pharmacy jurisprudence knowledge of prospective pharmacists. It serves as the pharmacy law examination in participating jurisdictions.

**NEVADA LAW EXAMS FOR PHYSICIAN ASSISTANTS AND ADVANCED NURSE PRACTITIONERS -**

- The Board offices in Northern and Southern Nevada administer a pharmacy law exam to all Physician Assistants who wish to practice in Nevada. Investigators Ken Scheuber and Dena McClish administer the law test in Southern Nevada by appointment, and in Northern Nevada, the test is also given by appointment only. The Advanced Practice Registered Nurse’s law exam is administered by the Nursing Board.
PHARMACIST ASSESSMENT FOR REMEDIATION EVALUATION (PARE)

- The (PARE) is a multi-dimensional assessment that the boards of pharmacy may use as an auxiliary tool when making decisions regarding pharmacist practice deficiencies that are due to noncompliance with pharmacy practice standards, laws or regulations, and result in compromises to patient safety.

- **Format of the Assessment**

- The PARE is a computer-based assessment that consists of 210 multiple choice questions. Examinees have a maximum of 4.5 hours to complete the exam. The questions will be drawn from three content domains:
  - Medication Safety and the Practice of Pharmacy (Area 1 - 50% of questions)
  - Professional Ethics/Pharmacist Judgment (Area 2 - 25% of questions)
  - Clinical Pharmacy Practice (Area 3 - 25% of questions)

<table>
<thead>
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<th>Clients Assessed</th>
<th>2016-2018 Biennium</th>
<th>Prior Biennium</th>
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<tr>
<td>RETAIL</td>
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<td>3</td>
</tr>
<tr>
<td>HOSPITAL/INFUSION</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- The PARE examination was adopted in the current biennium as an evaluation tool for pharmacists.

The PARE exam has been discontinued by the National Association of Boards of Pharmacy.

AFFILIATED MONITORS

One pharmacy in Northern Nevada and One pharmacy in Southern Nevada were required to be monitored by Affiliated Monitors.

Affiliated Monitors, Inc. was founded in 2004 by professionals from the legal, financial, insurance, healthcare, and criminal justice fields to provide independent monitoring services in diverse industries. Affiliated Monitors has served as the independent monitor in federal, state and private enforcement actions, tracking compliance with government regulations and industry practices in a variety of fields such as public utilities, financial services, insurance, manufacturing, healthcare, construction, transportation, retail and commerce.
Affiliated Monitors has handled over 500 matters as the independent monitor throughout the U.S. and around the globe. Their work includes serving as the independent monitor in cases ranging from ethics and compliance evaluations of multinational businesses and manufacturers, to monitoring of individual licensed professionals for compliance with consent agreements.

What distinguishes their professionals from others is that monitoring is their only business; it is not a sideline to some other professional practice or service.

In different assignments, Affiliated Monitors has had a variety of titles, including Independent Compliance Officer, Independent Monitor, Compliance Auditor, Special Auditor, Special Ombudsmen, Integrity Monitor, and Ethics and Compliance Expert. Regardless of the titles, their role has been consistent: to objectively assess the compliance activities of a regulated business, report the findings and recommendations to a government agency, and bring value to our clients.

**PRN-PRN**

PRN-PRN provides counseling, treatment, and monitoring services for licensees with alcohol, drug, gambling, or other addictions. Licensees may contact PRN-PRN at any time for assistance, and such contacts will not be known to the Board. PRN-PRN has been providing services for the Board and its licensees for over a decade, and the Board has confidence in PRN-PRN because it has helped many licensees gain control over debilitating addictions. You may contact PRN-PRN:

Larry Espadero at: lespadero@strategicbh.com

**INVESTIGATION of COMPLAINTS**

Investigating consumer complaints is one of the Board’s primary missions. The following table shows the number of investigations of complaints conducted by the Board for all the years for which data is available:
Note: the figure for 2018 is the number of complaints made through June 30, 2018.

Each complaint the Board receives is reviewed by Executive Secretary Larry Pinson or Deputy Secretary J. David Wuest.

Investigators Ken Scheuber and Dena McClish in Southern Nevada, and Deputy Secretary Dave Wuest, Joe Depczynski and Jenine Davis in Northern Nevada, investigate complaints received by the Board.
BOARD REPORTS (available on website)

- **Biennial Report (NRS 639.060)** - Legislative, Regulatory and Administrative overview.
- **Biennial AB128 Manufacturer and Wholesaler Compliance Audit Report (NRS 639.570 3.)** Companies Compliant with AB128 Code of Conduct Annual Certification of Compliance.
- **Annual Immunization by Pharmacists Report (NRS 649.065)** - Immunizations administered by Pharmacists and includes Nevada immunization rates compared to US immunization rates.
- **Annual Returned Drugs Report (NRS 639.063)** - Return of drugs by exempt facilities to a provider pharmacy for re-issue to patients in that facility.
- Governor’s Code of Conduct Submission Report (every January of odd years)
- Comprehensive Review of Nevada Administrative Code (every 3 years).

WHAT LIES AHEAD FOR THE 2018-2020 BIENNIUM

Several foreseeable issues lie ahead for the Board in the 2018-2020 biennium and beyond, including:

**PRESCRIPTION DRUG ABUSE PREVENTION MEASURE**

- The Board staff is working with law enforcement both in Northern and Southern Nevada studying the abuse of prescription narcotic drugs, the monitoring of usage by patients, and developing methods to address and prevent prescription drug abuse.

[http://bop.nv.gov/resources/PrescriptionDrugAbusePreventionVideo/](http://bop.nv.gov/resources/PrescriptionDrugAbusePreventionVideo/)

**EDUCATIONAL PRESENTATIONS**

The Board staff has been extremely active on providing live presentations both on site and via telephonic call in, and also in creating and posting video continuing education on the Board website. These presentations cover a variety of subjects.

- Continuous development and presentation of CE to practitioners, pharmacists and pharmacy technicians. [http://bop.nv.gov/services/Continuing_Ed/](http://bop.nv.gov/services/Continuing_Ed/)
  - Telephonic Presentations
  - Live Presentations
  - Video Presentations
- CE for law enforcement and with law enforcement.
- Continuous education for fellow health care boards.
- Continuous education of the public through public meetings and JTNN.
The Board Executives have addressed practically every medical discipline in Nevada on prescription drug abuse, as well as presentations to the National Association of Boards of Pharmacy; the Attorney General’s Work Force; Project Echo through UNR and JTNN; Child Death Review Committee and the Washoe County Social Works Department. Continuing education presentations have been offered by practically all senior staff (Executive Secretary, General Counsel, Deputy Executive Secretary, Inspectors and Investigators) and our Prescription Monitoring Program (PMP) Administrator on the use of Nevada’s PMP.

CONTINUING EDUCATION IN NEVADA PHARMACY LAW

The Board of Pharmacy Executive Secretary, Larry Pinson, Deputy Secretary J. David Wuest, General Counsel Paul Edwards, PMP Program Administrator Yenh Long, Inspector Luis Curras, Inspector Joe Dodge and Inspector/Investigator Joe Depczynski conduct live continuing education programs on pharmacy law for pharmacists, interns, technicians and technicians in training throughout the biennium to provide the one hour of Nevada pharmacy law that the Board of Pharmacy requires pharmacists and technicians to complete per biennium.

Inspector Curras and Inspector Dodge provide live telephone Nevada law continuing education throughout the biennium.

CONTINUING EDUCATION FOR ISMP RISK ASSESSMENT –

In the interest of education on prevention of medication errors, the Board approved 4 hours of continuing education credit for pharmacists and continuing education credit hours for technicians up to 11 hours certified by the pharmacy manager for reviewing the Improving Medication Safety in Community Pharmacy: Assessing Risk and Opportunities for Change.

The Board of Pharmacy continues to reach out to practitioners in a number of ways such as through articles in professional publications; soft education through its inspection efforts (i.e., educating practitioners about what is expected of them and reviewing the regulations that control their practices); the disciplinary process to try and curb professionals whose conduct violates Board statutes and regulations; and in some cases, intervention by law enforcement when appropriate. The Board will continue its efforts to work with practitioners to bring their medical practices into compliance in its effort to protect the public.

THE BOARD AND STAFF HAVE TAKEN A LEADERSHIP ROLE WITH OTHER BOARDS

The Board staff continues to coordinate with other health care boards on public safety relating to medical issues, both licensed and unlicensed entities.

- Review of scope of practice issues in health care.
- Oversight of medical spas.
  - This includes a national resolution with the National Association of Boards of Pharmacy (NABP) regarding the oversight of medical spas.

WORKSHOPS AND PUBLIC HEARINGS TO ADOPT NEW NEVADA ADMINISTRATIVE CODE

The Board will adopt or revise administrative regulations as needed to protect the public and execute legislative intent.
The Board continues to actively participate both statewide and nationally on addressing pharmaceutical drug abuse and abuse prevention.

- The Board is addressing the changes enacted in Federal rules for compounding pharmacies with the passage of the Drug Quality and Security Act (DQSA) by the Congress and signed into law by the President.
  - The Drug Quality portion of the act classifies pharmacy into one of two categories 503A traditional pharmacies and 503B outsourcing pharmacies.
    - 503A pharmacies compound patient specific prescriptions under USP 795 and USP 797 (United States Pharmacopeia)
    - 503B pharmacies/facilities may compound for office use and must comply with more stringent rules under cGMP (current Good Manufacturing Practices).
    - The Board intends to train inspectors on cGMP to inspect to and ensure compliance by Nevada 503B licensed pharmacies with cGMP requirements.

- The Board will additionally be addressing changes necessary to Nevada regulation relating to hazardous sterile and non-sterile pharmaceutical compounding. The FDA removed requirements for hazardous compounding from chapters 797 and 795 and finalized a new chapter, chapter 800, to the United States Pharmacopeia. Chapter 800 deals exclusively with hazardous compounding. Pharmacies compounding hazardous drugs must be compliant with the new USP chapter once adopted.

- USP 797 and USP 800 revisions and final adoption of the revisions has been delayed until December 2019. USP will open up the comment period for these revisions.

- The Nevada State Board of Pharmacy has renewed its efforts to confront unlicensed dispensing of controlled substances and dangerous drugs by medical personnel. The Board has visited a number of medical practices that dispense dangerous drugs and controlled substances without proper regulatory authority or are misusing their authority. In some instances, the practitioners at these medical facilities, some of which are known as “medi-spas” or “medical spas,” have no lawful authority to possess, administer, or dispense controlled substances. In other instances, practitioners at such facilities have the appropriate registrations but are using the registrations in ways that violate the laws of Nevada.

Veterinarian licensing

- The Board will begin licensing veterinarians pursuant to newly-adopted regulations related to veterinarian dispensing and prescribers and will begin inspecting veterinary practices.