STATE OF NEVADA

BOARD OF PHARMACY

985 Damonte Ranch Pkwy, Ste 206
Reno, NV 89521

Posted: October 20, 2022

NOTICE OF INTENT TO ACT UPON A REGULATION

Notice of Hearing for the Adoption and Amendment of
Regulations of the Nevada State Board of Pharmacy

The Nevada State Board of Pharmacy will hold a Public Hearing at 9:00 a.m. on Thursday, December 1, 2022.

Pursuant to NRS 241.023(1)(c) the meeting is being conducted by means of remote technology. The public may attend the meeting via live stream remotely or in person at the following location:

Hilton Garden Inn
7830 S Las Vegas Boulevard
Las Vegas, NV

Via Videoconference at Zoom: https://zoom.us/j/5886256671
or
Via Teleconference at 1 (669) 900-6833
Meeting ID: 588 625 6671

The purpose of the hearing is to receive comments from all interested persons regarding the adoption and amendment of regulations that pertain to Chapters 453 and/or 639 of the Nevada Administrative Code.

The following information is provided pursuant to the requirements of NRS 233B.060:

A. Amendment to Nevada Administrative Code (NAC) 453B. The proposed amendments to NRS 453B broaden the previously established Cancer Drug Donation Program to include prescription drugs generally. The proposed amendments also define "donated prescription drug" and establish requirements for a person or a pharmacy to participate in the Prescription Drug Donation Program. (LCB File R007-22)

1. The need for and the purpose of the proposed regulation or amendment.

The proposed amendments conform the outdated language of NAC 453B to the changes made to NRS 453B in 2017 by Senate Bill 91 combining the HIV/AIDS Drug Donation Program and the Cancer Drug Donation Program to create the Prescription Drug Program and providing for the donation of any prescription drug with certain exceptions. The proposed amendments establish the eligibility requirements governing participation in or receiving prescription drugs through the Prescription Drug Donation Program and defines "donated prescription drug". Expanding the program reduces medication waste by reallocating safe and unused medications and improves medication access for eligible Nevada patients.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no adverse economic impact from these regulation amendments on the regulated entities or on the public. The beneficial effects will be reduction of medication waste and expanded patient access to treatment to improve the delivery of safe and reliable pharmaceutical care which will benefit public health, safety, and welfare.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be the be reduction of medication waste and expanded patient access to treatment to improve the delivery of safe and reliable pharmaceutical care which will benefit public health, safety, and welfare.

4. The estimated cost to the agency for enforcement of the proposed regulation.

There will be no additional or special costs incurred by the Board of Pharmacy for enforcement of this regulation amendment.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any other state

or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

This regulation does not provide a new or increase of fees.

B. Amendment to Nevada Administrative Code (NAC) 639. The proposed amendments establish the process and qualifications for a person to obtain a certificate of registration as a dispensing technician in training and a dispensing technician. (LCB File R178-22)

1. The need for and the purpose of the proposed regulation or amendment.

The proposed amendment revises the conditions for the issuance of registration as a dispensing technician in training and dispensing technician. The amendment authorizes the issuance of registration to an applicant that has successfully completed at least 1,500 hours of training and experience as a dispensing technician in training or holds an active registration in good standing as a pharmaceutical technician in Nevada; allows dispensing technicians in training and dispensing technicians at all practice sites to be supervised by more than one dispensing practitioner under one registration thus allowing the registration to be transferable; eliminating certain fees, and provides other matters properly relating thereto. The proposed amendment clarifies the requirements and removes unnecessary barriers improving and expediting the licensing process. The benefits of the proposed amendments will result from protecting the health, safety, and welfare of the public.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no adverse economic impact from this regulation amendment on the regulated entities or on the public. Dispensing technicians, dispensing technicians in training applicants and dispensing practitioners will benefit by allowing dispensing technicians in training and dispensing technicians at all practice sites to be supervised by more than one dispensing practitioner under one registration. The public will benefit from increased access to medication delivery and patient care services which will benefit public health, safety, and welfare.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be beneficial by expediting the licensing process and increasing the delivery of patient care services. The amendment will have both an immediate and long-term beneficial economic effect on regulated entities and the public by ensuring the delivery of safe and reliable pharmaceutical care.

4. The estimated cost to the agency for enforcement of the proposed regulation.

There will be no additional or special costs incurred by the Board of Pharmacy for enforcement of this regulation amendment.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any other state or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

The regulation amendment increases the fee for the issuance or renewal of a registration for dispensing technician in training/dispensing technician consistent with the application/renewal fee for a pharmaceutical technician in training and pharmaceutical technician. The amendment allows dispensing technicians in training and dispensing technicians at all practice sites to be supervised by more than one dispensing practitioner under a single registration thus eliminating registration fees to practice for more than one dispensing practitioner. The amendment also provides for the transferability of a certificate of registration as a dispensing technician or dispensing technician in training to a new practice location.

C. Amendment to Nevada Administrative Code (NAC) 639. The proposed amendment authorizes the operation of an automated drug dispensing system at sites of certain governmental agencies. (LCB File R179-22)

1. The need for and the purpose of the proposed regulation or amendment.

The proposed amendment will license the use of an automated drug dispensing system located at a site operated by the Division of Public and Behavioral Health of the Department of Health and Human Services or a local health department if the system is operated by a pharmacy owned by the Division or local health department. The regulation is necessary to expand patient access to treatment and ensure the delivery of safe and reliable pharmaceutical care which will benefit public health, safety, and welfare.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no adverse economic impact from these regulation amendments on the regulated entities or on the public. The beneficial effects will be expanded patient access to treatment to improve the delivery of safe and reliable pharmaceutical care which will benefit public health, safety, and welfare.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be the removal of unnecessary barriers and expanded patient access to treatment to improve the delivery of safe and reliable pharmaceutical care.

4. The estimated cost to the agency for enforcement of the proposed regulation.

There will be no additional or special costs incurred by the Board of Pharmacy for enforcement of this regulation amendment.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any other state or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

This regulation does not provide a new or increase of fees.

D. Amendment to Nevada Administrative Code (NAC) 639. The proposed amendments authorize practitioners working in reproductive healthcare center to utilize an automated dispensing device located at the practice site to dispense reproductive health medications to their patients; establishes requirements that a reproductive healthcare center must follow when using such an automated drug dispensing system. (LCB File R180-22)

1. The need for and the purpose of the proposed regulation or amendment.

The proposed amendment will license the use of an automated drug dispensing system located in a reproductive healthcare center. The regulation is necessary to expand patient access to treatment and ensure the delivery of safe and reliable pharmaceutical care which will benefit public health, safety, and welfare.

2. Either the terms or the substance of the regulations to be adopted and amended.

A copy of the proposed regulation is attached to this notice.

3. The estimated economic effect of the regulation on the business which it is to

regulate and on the public:

(a) Both adverse and beneficial effects.

There should be no adverse economic impact from these regulation amendments on the regulated entities or on the public. The beneficial effects will be expanded patient access to treatment to improve the delivery of safe and reliable pharmaceutical care which will benefit public health, safety, and welfare.

(b) Both immediate and long-term effects.

Both the immediate and long-term economic effects on regulated entities and on the public will be the removal of unnecessary barriers and expanded patient access to treatment to improve the delivery of safe and reliable pharmaceutical care.

4. The estimated cost to the agency for enforcement of the proposed regulation.

There will be no additional or special costs incurred by the Board of Pharmacy for enforcement of this regulation amendment.

5. A description of and citation to any regulations of other state or local governmental agencies which the proposed regulation overlaps or duplicates and a statement explaining why the duplication or overlapping is necessary. If the proposed regulation overlaps or duplicates a federal regulation, the notice must include the name of the regulating federal agency.

The Board of Pharmacy is not aware of any similar regulations of any other state or local governmental agency that the proposed regulation amendment overlaps or duplicates.

6. If the regulation is required pursuant to federal law, a citation and description of the federal law.

The regulation is not required by federal law.

7. If the regulation includes provisions which are more stringent than a federal regulation that regulates the same activity, a summary of such provisions.

The Board of Pharmacy is not aware of any similar federal regulation of the same activity in which the state regulation is more stringent.

8. Whether the proposed regulation establishes a new fee or increases an existing fee.

This regulation does not provide a new or increase of fees.

Persons wishing to comment upon the proposed action of the Board may appear at the scheduled public hearing or may address their comments, data, views, or arguments, in

written form, to the Board at pharmacy@pharmacy.nv.gov or to the Nevada State Board of Pharmacy, 985 Damonte Ranch Parkway, Suite 206 – Reno, NV 89521. Written submissions must be received by the Board on or before November 30, 2022. If no person who is directly affected by the proposed action appears to request time to make an oral presentation, the Board may proceed immediately to act upon any written submissions.

Members of the public who are disabled and require special accommodations or assistance at the meeting are requested to notify the Nevada State Board of Pharmacy in writing at 985 Damonte Ranch Pkwy., #206, Reno, Nevada 89521, or by calling (775) 850-1440. Please notify us at least one (1) week prior to the scheduled meeting date to allow time to secure any necessary equipment or provisions prior to the meeting.

This notice and the text of the proposed regulation are also available in the State of Nevada Register of Administrative Regulations which is prepared and published monthly by the Legislative Counsel Bureau pursuant to NRS 233B.0653, and on the Internet at http://www.leg.state.nv.us. Copies of this notice and the proposed regulation will also be mailed to members of the public upon request.

Pursuant to NRS 233B.064(1), upon adoption of any regulation, the Board, if requested to do so by an interested person, either before adoption or within 30 days thereafter, will issue a concise statement of the principal reasons for and against its adoption, and incorporate therein its reason for overruling the consideration urged against its adoption.

This notice of hearing has been posted at the following locations:

Nevada State Board of Pharmacy
Reno, Nevada

Nevada State Board of Pharmacy
Las Vegas, Nevada

Mineral County Courthouse
Hawthorne, Nevada

Elko County Courthouse
Elko, Nevada

Washoe County Courthouse
Reno, Nevada

PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R007-22

February 17, 2022

EXPLANATION – Matter in *italics* is new; matter in brackets [~~omitted material~~] is material to be omitted

AUTHORITY: §§ 1-7 and 10-12; NRS 453B.080 and 453B.120; § 8, NRS 453B.080, 453B.110 and 453B.120; § 9, NRS 453B.080, 453B.100 and 453B.120

A REGULATION relating to prescription drugs; establishing requirements governing participating in or receiving prescription drugs through the Prescription Drug Donation Program; providing that a participating pharmacy, medical facility, health clinic or provider of health care is not required to accept a donated prescription drug; removing certain definitions; and providing other matters properly relating thereto.

Legislative Counsel's Digest

Senate Bill No. 91 of the 2017 Legislative Session: (1) combined the HIV/AIDS Drug Donation Program and the Cancer Drug Donation Program; and (2) expanded the combined program to create the Prescription Drug Donation Program. (Chapter 153, Statutes of Nevada 2017, at page 684) Under existing law, the Prescription Drug Donation Program provides for: (1) the donation of any prescription drug, with certain exceptions, through a participating pharmacy, medical facility, health clinic or provider of health care; and (2) the dispensing of donated prescription drugs by pharmacists. (NRS 453B.080, 453B.100) **Sections 2-6 and 8-11** of this regulation revise existing regulations governing the Cancer Drug Donation Program to apply instead to the Prescription Drug Donation Program. **Sections 5, 9 and 12** of this regulation remove the requirement that a person must be approved by the State Board of Pharmacy to receive a drug through the Program, thereby authorizing any resident of this State with a valid prescription to receive such a drug.

Existing regulations prescribe criteria for a pharmacy, medical facility, health clinic or provider of health care to participate in the Program. (NAC 453B.080) **Section 6** of this regulation adds to these eligibility criteria requirements that: (1) a pharmacy must be in good standing with the Board; and (2) a pharmacy, medical facility, health clinic or provider of health care must establish procedures for receiving, inspecting, storing and disposing of donated prescription drugs, keeping records and verifying the eligibility of patients to receive donated prescription drugs through the Program.

Existing regulations require a pharmacy, medical facility, health clinic or provider of health care that wishes to participate in the Program to apply to the Board. (NAC 453B.085) **Section 7** of this regulation requires the Executive Secretary of the Board, rather than the Board, to review such applications. **Section 7** also authorizes a pharmacy, medical facility, health clinic

or provider of health care that is aggrieved by the denial of an application by the Executive Secretary to appeal that denial to the Board. **Section 9** of this regulation provides that a participating pharmacy, medical facility, health clinic or provider of health care is not required to accept a prescription drug for donation. **Section 12** of this regulation repeals certain unnecessary definitions and a provision concerning record keeping that is duplicative of existing law. **Section 1** of this regulation makes a conforming change to remove references to repealed sections.

Section 1. NAC 453B.010 is hereby amended to read as follows:

453B.010 As used in this chapter, unless the context otherwise requires, the words and terms defined in NAC ~~[453B.015 to 453B.055, inclusive,]~~ ***453B.020, 453B.030 and 453B.035*** have the meanings ascribed to them in those sections.

Sec. 2. NAC 453B.020 is hereby amended to read as follows:

453B.020 ~~["Cancer]~~ ***"Donated prescription*** drug" ~~[has the meaning ascribed to it in NRS 453B.160.]~~ ***means a drug that has been donated to the Program.***

Sec. 3. NAC 453B.030 is hereby amended to read as follows:

453B.030 "Distribute" means to deliver, other than by administering or dispensing, a ~~[cancer]~~ ***donated prescription*** drug.

Sec. 4. NAC 453B.035 is hereby amended to read as follows:

453B.035 "Health clinic" means a facility which provides, as a regular course of practice, medical services and goods ~~[to persons with cancer]~~ and is operated by a physician who is licensed pursuant to chapter 630 or 633 of NRS.

Sec. 5. NAC 453B.070 is hereby amended to read as follows:

453B.070 A person who wishes to receive a ~~[cancer]~~ ***donated prescription*** drug dispensed pursuant to the Program must be ~~[:~~

~~1. A]~~ ***a*** resident of this State . ~~[;~~

~~2. Diagnosed as having cancer; and~~

~~3. Approved to participate in the Program pursuant to NAC 453B.075.]~~

Sec. 6. NAC 453B.080 is hereby amended to read as follows:

453B.080 *1.* To be eligible to participate in the Program:

~~[1.]~~ *(a)* A pharmacy must ~~[be:~~

~~(a) Licensed]~~ *:*

(1) Be licensed in this State; ~~[and~~

~~(b) Approved]~~ *(2) Have established the procedures required by subsection 2;*

(3) Be approved to participate in the Program pursuant to NAC 453B.085 ~~[.]~~ *; and*

(4) Be in good standing with the Board.

~~[2.]~~ *(b)* A medical facility must:

~~[(a)]~~ *(1)* Be licensed in this State;

~~[(b) Provide, as a regular course of practice, medical services and goods to persons with cancer; and~~

~~(c)]~~ *(2) Have established the procedures required by subsection 2; and*

(3) Be approved to participate in the Program pursuant to NAC 453B.085.

~~[3.]~~ *(c)* A health clinic must ~~[be]~~ *:*

(1) Have established the procedures required by subsection 2; and

(2) Be approved to participate in the Program pursuant to NAC 453B.085.

~~[4.]~~ *(d)* A provider of health care must:

~~[(a)]~~ *(1)* Be licensed in this State;

~~[(b)]~~ *(2)* Provide, as a regular course of practice, medical services and goods *;* ~~[to persons with cancer; and~~

~~(c)]~~ *(3) Have established the procedures required by subsection 2; and*

(4) Be approved to participate in the Program pursuant to NAC 453B.085.

2. To be eligible to participate in the Program, a pharmacy, medical facility, health clinic or provider of health care must have established procedures for:

(a) Receiving, inspecting and storing donated prescription drugs in accordance with NAC 453B.105.

(b) Keeping the records required by NRS 453B.090.

(c) Verifying and recording verification that each person who receives a donated prescription drug:

(1) Meets the requirements of NAC 453B.070;

(2) Has been issued a prescription as required by NRS 453B.100; and

(3) Has signed the waiver of liability required by NRS 453B.130.

(d) Disposing of donated prescription drugs.

Sec. 7. NAC 453B.085 is hereby amended to read as follows:

453B.085 1. A pharmacy, medical facility, health clinic or provider of health care that wishes to participate in the Program must submit an application to the Board on a form prescribed by the Board.

2. The *Executive Secretary of the* Board ~~[will]~~ *shall* review the application and determine if the pharmacy, medical facility, health clinic or provider of health care is qualified to participate in the Program.

3. If the ~~[Board]~~ *Executive Secretary* approves a pharmacy, medical facility, health clinic or provider of health care for participation in the Program, the ~~[Board will]~~ *Executive Secretary shall* provide written notice of its approval of the application to the pharmacy, medical facility, health clinic or provider of health care not later than 30 days after ~~[its]~~ *his or her* decision.

4. If the ~~[Board]~~ *Executive Secretary* denies a pharmacy, medical facility, health clinic or provider of health care from participating in the Program, the ~~[Board will]~~ *Executive Secretary shall* provide written notice of its denial of the application to the pharmacy, medical facility, health clinic or provider of health care not later than 30 days after ~~[its]~~ *his or her* decision.

5. A pharmacy, medical facility, health clinic or provider of health care that is aggrieved by a decision of the Executive Secretary to deny participation in the Program may appeal that decision by submitting a written notice of appeal to the Board not later than 30 days after receiving notice of the decision pursuant to subsection 4.

Sec. 8. NAC 453B.090 is hereby amended to read as follows:

453B.090 A pharmacy, medical facility, health clinic or provider of health care that participates in the Program ~~[must]~~ *shall* comply with all applicable federal and state laws and regulations when accepting, distributing and dispensing a ~~[cancer]~~ *donated prescription* drug pursuant to the Program.

Sec. 9. NAC 453B.105 is hereby amended to read as follows:

453B.105 1. ~~[Except as otherwise required for the storage of cancer drugs pursuant to subsection 3, a]~~ *A* pharmacy, medical facility, health clinic or provider of health care ~~[shall not limit the amount of cancer drugs that a person may donate to]~~ *that participates in* the Program ~~[.]~~ *is not required to accept a prescription drug for donation.*

2. In addition to the requirements of NRS ~~[453B.210,]~~ *453B.100 and 453B.130,* a pharmacist may dispense a ~~[cancer]~~ *donated prescription* drug to a person ~~[who is participating in the Program]~~ if:

(a) The pharmacist has inspected the packaging of the ~~[cancer]~~ ***donated prescription*** drug to determine if the ~~[cancer]~~ ***donated prescription*** drug meets the requirements of subsection ~~[4]~~ ***6*** of NRS ~~[453B.200;]~~ ***453B.080; and***

(b) ~~[The person requesting the cancer drug presents to the pharmacist the written notice of approval from the Board which states that the person is approved to participate in the Program; and~~

~~(c)]~~ The person requesting the ~~[cancer]~~ ***donated prescription*** drug presents to the pharmacist ***:***

~~[a]~~

(1) Proof that the person meets the requirements of NAC 453B.070; and

(2) A prescription written by a person who is authorized to write prescriptions.

3. A pharmacy, medical facility, health clinic or provider of health care shall store a ~~[cancer]~~ ***donated prescription*** drug ***:*** ~~[that is donated to the Program:]~~

(a) Pursuant to the recommendations of the manufacturer of the ~~[cancer]~~ ***donated prescription*** drug concerning the storage conditions;

(b) Separately from all other drugs; and

(c) In a locked storage area.

4. If a ~~[cancer]~~ ***donated prescription*** drug ~~[that is donated to the Program]~~ expires before it is dispensed, the pharmacy, medical facility, health clinic or provider of health care shall destroy the ~~[cancer]~~ ***donated prescription*** drug.

Sec. 10. NAC 453B.110 is hereby amended to read as follows:

453B.110 1. In addition to the requirements of NRS ~~[453B.200,]~~ ***453B.080,*** a ~~[cancer]~~ ***donated prescription*** drug ***:*** ~~[that is donated to the Program:]~~

(a) Must not be a controlled substance.

(b) Must not be a compounded drug product.

(c) Must not be dispensed by a pharmacist if the pharmacist suspects that the ~~[cancer]~~ ***donated prescription*** drug is adulterated or misbranded.

(d) Must not be dispensed by a pharmacist if, in the professional judgment of the pharmacist, there is a reasonable concern relating to the safety or efficacy of the ~~[cancer]~~ ***donated prescription*** drug.

(e) Must not require refrigeration or freezing or other temperature requirements that are not a controlled room temperature.

(f) Must not be a ~~[cancer]~~ ***donated prescription*** drug for which a program of restrictive distribution has been established by the manufacturer of the ~~[cancer]~~ ***donated prescription*** drug.

(g) Must not be a ~~[cancer]~~ ***donated prescription*** drug for which an ongoing clinical trial or study is being conducted.

(h) Must be a ~~[cancer]~~ ***donated prescription*** drug that was dispensed ~~[pursuant to an original prescription]~~ by a pharmacy licensed pursuant to chapter 639 of NRS.

2. As used in this section, "program of restrictive distribution" means a program that is developed in collaboration with the United States Food and Drug Administration by a manufacturer of a drug to reduce the risks associated with that drug by limiting the persons who can prescribe the drug and who can receive the drug.

Sec. 11. NAC 453B.120 is hereby amended to read as follows:

453B.120 A pharmacy, medical facility, health clinic or provider of health care may charge a handling fee of not more than $10 for distributing or dispensing a ~~[cancer]~~ ***donated prescription*** drug . ~~[that is donated to the Program.]~~

Sec. 12. NAC 453B.015, 453B.025, 453B.040, 453B.045, 453B.050, 453B.055, 453B.075 and 453B.115 are hereby repealed.

TEXT OF REPEALED SECTIONS

453B.015 "Board" defined.

"Board" means the State Board of Pharmacy.

453B.025 "Dispense" defined.

"Dispense" has the meaning ascribed to it in NRS 639.0065.

453B.040 "Medical facility" defined.

"Medical facility" has the meaning ascribed to it in NRS 449.0151.

453B.045 "Pharmacy" defined.

"Pharmacy" has the meaning ascribed to it in NRS 639.012.

453B.050 "Program" defined.

"Program" has the meaning ascribed to it in NRS 453B.180.

453B.055 "Provider of health care" defined.

"Provider of health care" has the meaning ascribed to it in NRS 629.031.

453B.075 Submission of application to participate; written notice of approval or denial by Board.

1. A person who wishes to participate in the Program must submit an application to the Board on a form prescribed by the Board.

2. The Board will review the application and determine if the person is qualified to participate in the Program.

3. If the Board approves a person to participate in the Program, the Board will provide written notice of its approval of the application to the person not later than 30 days after its decision.

4. If the Board denies a person from participating in the Program, the Board will provide written notice of its denial of the application to the person not later than 30 days after its decision.

NAC 453B.115 Maintenance of records by pharmacy, medical facility, health clinic or provider of health care that participates in Program.

1. In addition to the requirements of NRS 639.2801 and NAC 639.708, a pharmacy, medical facility, health clinic or provider of health care that participates in the Program shall maintain records for a cancer drug that is donated to the Program. The records must include, without limitation:

(a) The date the pharmacy, medical facility, health clinic or provider of health care received the cancer drug;

(b) The date the cancer drug was dispensed pursuant to the original prescription;

(c) The original prescription number of the cancer drug;

(d) The name of the cancer drug;

(e) The dosage of the cancer drug;

(f) The quantity of the cancer drug that is donated;

(g) The date of expiration of the cancer drug;

(h) The name, address and telephone number of the person who originally dispensed the cancer drug;

(i) The name, address and telephone number of the person who is donating the cancer drug; and

(j) The lot number of the cancer drug.

2. A pharmacy, medical facility, health clinic or provider of health care shall maintain records of a cancer drug that is distributed to another pharmacy, medical facility, health clinic or provider of health care that is participating in the Program. The records must include, without limitation:

(a) The information required pursuant to subsection 1;

(b) The name, address and telephone number of the pharmacy, medical facility, health clinic or provider of health care that is distributing the cancer drug;

(c) The quantity of the cancer drug that is being distributed; and

(d) The name and address of the pharmacy, medical facility, health clinic or provider of health care to which the cancer drug is distributed.

PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R178-22

September 29, 2022

EXPLANATION – Matter in *italics* is new; matter in brackets [~~omitted material~~] is material to be omitted

AUTHORITY: §§ 1-4 and 6-10, NRS 639.070 and 639.0727; § 5, NRS 639.070.

A REGULATION relating to pharmacy; establishing the qualifications and procedure for a person to obtain a certificate of registration as a dispensing technician in training; prescribing certain duties of a dispensing technician in training and a dispensing practitioner; prescribing fees for the initial and biennial renewal of registration of a dispensing technician and dispensing technician in training; providing for the transferability of a certificate of registration as a dispensing technician or dispensing technician in training; eliminating certain fees; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes the State Board of Pharmacy to adopt regulations relating to the practice of pharmacy in this State, including regulations to provide for the registration of dispensing technicians and dispensing practitioners. (NRS 639.070, 639.0727) Existing regulations prohibit a person from acting as a dispensing technician unless the person is: (1) a registered pharmaceutical technician; or (2) employed at a facility that is registered to dispense controlled substances or dangerous drugs and the dispensing practitioner at the facility has registered the person as a dispensing technician. Existing regulations provide that the Board will issue a provisional registration as a dispensing technician to a person 18 years of age or older who has received a high school diploma or its equivalent and has no history of certain crimes or drug abuse. Existing regulations require a provisional dispensing technician to complete at least 500 hours of training and experience provided by a dispensing practitioner in order to obtain a certificate of registration as a dispensing technician. (NAC 639.7425) **Sections 1 and 6** of this regulation revise the process and qualifications to obtain a certificate of registration as a dispensing technician. Specifically, **section 6** abolishes the provisional registration of dispensing technicians and instead requires an applicant for registration as a dispensing technician to: (1) have successfully completed at least 1,500 hours of training and experience as a dispensing technician in training under the direct supervision of at least one dispensing practitioner; or (2) hold an active registration and be in good standing as a pharmaceutical technician in this State. **Section 1**: (1) requires an applicant for registration as a dispensing technician in training to be at least 18 years of age and a high school graduate or its equivalent; and (2) authorizes the Board to deny such registration to a person who has been convicted of certain crimes or has a history of

substance use disorder. **Sections 1 and 6** require the biennial renewal of registration as a dispensing technician or a dispensing technician in training. **Section 2** of this regulation defines the terms "dispensing technician" and "dispensing technician in training." **Sections 4 and 5** of this regulation clarify that a dispensing technician may, as part of his or her training, perform certain tasks relating to the filling and dispensing of a prescription at a facility. **Sections 7 and 8** of this regulation make conforming changes to remove or revise, as appropriate, references to the requirements governing the registration of dispensing technicians that have been revised by this regulation. **Section 10** of this regulation provides that a dispensing practitioner is subject to discipline for violating requirements concerning dispensing technicians in training.

Existing regulations provide that the registration of a dispensing technician is nontransferable. (NAC 639.7435) **Section 8** instead makes the registration of a dispensing technician or a dispensing technician in training transferable. **Section 8** requires a dispensing technician or dispensing technician in training to notify the Board after changing or adding his or her place of practice or dispensing practitioner.

Existing regulations require each dispensing practitioner to pay a fee for each dispensing technician under the supervision of the dispensing practitioner. (NAC 639.744) **Section 9** of this regulation eliminates that fee, and **section 3** of this regulation instead prescribes fees for the initial and biennial renewal of registration of a dispensing technician or dispensing technician in training.

Section 1. Chapter 639 of NAC is hereby amended by adding thereto a new section to read as follows:

1. An applicant for registration as a dispensing technician in training must:

(a) Be 18 years of age or older; and

(b) Be a high school graduate or the equivalent.

2. An applicant for registration as a dispensing technician in training must submit to the Board:

(a) A completed application on a form prescribed by the Board; and

(b) The fees prescribed by the Board in NAC 639.220.

3. The Board may deny an application for registration as a dispensing technician in training if the applicant has:

(a) Been convicted of any felony or misdemeanor involving moral turpitude, dishonesty or the unlawful possession, sale or use of drugs; or

(b) A history of substance use disorder.

4. After confirming the applicant meets the requirements of this chapter and chapter 639 of NRS for registration, the Board will, unless the Board denies the registration pursuant to subsection 3, issue to the applicant a certificate of registration as a dispensing technician in training.

5. A registration issued by the Board pursuant to this section expires on October 31 of each even-numbered year unless renewed before that date.

6. A dispensing technician in training may participate in training provided by a dispensing practitioner while on the job and acquire experience that is commensurate with the duties of his or her employment.

Sec. 2. NAC 639.010 is hereby amended to read as follows:

639.010 As used in this chapter, unless the context otherwise requires:

1. "Board" means the State Board of Pharmacy.

2. "Controlled substances" has the meaning ascribed to it in NRS 0.031.

3. "Dangerous drug" has the meaning ascribed to it in NRS 454.201.

4. "Direct supervision" means the direction given by a supervising pharmacist *or dispensing practitioner* who is:

(a) On the premises of the pharmacy or telepharmacy at all times when the person he or she is supervising is working at the pharmacy or telepharmacy or at a remote site or satellite consultation site; and

(b) Aware of the activities of that person related to the preparation and dispensing of medications, including the maintenance of appropriate records.

5. "Dispensing practitioner" means:

(a) A practitioner to whom the Board has issued a certificate of registration pursuant to NAC 639.742 to dispense controlled substances or dangerous drugs, or both, for human consumption; or

(b) A licensed veterinarian to whom the Board has issued a certificate of registration pursuant to NAC 639.7423 to dispense controlled substances or dangerous drugs, or both, not for human consumption.

6. ***"Dispensing technician" means a person who performs technical services in a pharmacy under the direct supervision of a dispensing practitioner and is registered with the Board pursuant to NAC 639.7425.***

7. "Dispensing technician in training" means a person who is registered with the Board pursuant to section 1 of this regulation in order to obtain the training and experience required to be a dispensing technician pursuant to subparagraph (1) of paragraph (c) of subsection 2 of NAC 639.7425.

8. "Executive Secretary" means the Executive Secretary employed by the Board pursuant to NRS 639.040.

~~[7.]~~ *9.* "Federally-qualified health center" has the meaning ascribed to it in 42 U.S.C. § 1396d(l)(2)(B).

~~[8.]~~ *10.* "Federally-qualified health center vehicle" means a vehicle that meets the requirements of paragraph (c) of subsection 1 of section 3 of LCB File No. R004-19.

~~[9.]~~ *11.* "Licensed veterinarian" has the meaning ascribed to it in NRS 638.007.

~~[10.]~~ *12.* "Oncology group practice" means two or more dispensing practitioners who practice oncology in a group practice.

~~[11.]~~ *13.* "Pharmaceutical technician" means a person who performs technical services in a pharmacy under the direct supervision of a pharmacist and is registered with the Board pursuant to NAC 639.240.

~~[12.]~~ *14.* "Pharmaceutical technician in training" means a person who is registered with the Board pursuant to NAC 639.242 in order to obtain the training and experience required to be a pharmaceutical technician pursuant to subparagraph (3) of paragraph (d) of subsection 2 of NAC 639.240, or who is enrolled in a program of training for pharmaceutical technicians that is approved by the Board.

~~[13.]~~ *15.* "Practitioner" has the meaning ascribed to it in NRS 639.0125.

~~[14.]~~ *16.* "Prescription drug" means a drug or medicine as defined in NRS 639.007 which:

(a) May be dispensed only upon a prescription order that is issued by a practitioner; and

(b) Is labeled with the symbol "Rx only" pursuant to federal law or regulation.

~~[15.]~~ *17.* "Public or nonprofit agency" means a health center as defined in 42 U.S.C. § 254b(a) which:

(a) Provides health care primarily to medically underserved persons in a community;

(b) Is receiving a grant issued pursuant to 42 U.S.C. § 254b or, although qualified to receive such a grant directly from the Federal Government, is receiving money from such a grant under a contract with the recipient of that grant; and

(c) Is not a medical facility as defined in NRS 449.0151.

~~[16.]~~ *18.* "Surgical center for ambulatory patients" has the meaning ascribed to it in NRS 449.019.

Sec. 3. NAC 639.220 is hereby amended to read as follows:

639.220 1. The Board hereby adopts the following schedule of fees:

For the examination of an applicant for registration as a pharmacist ..... Actual cost of the examination

For the investigation or registration of an applicant as a registered pharmacist.....$200

For the investigation, examination or registration of an applicant as a registered pharmacist by reciprocity.....200

For the investigation or issuance of an original license to conduct a retail pharmacy 500

For the biennial renewal of a license to conduct a retail pharmacy 500

For the investigation or issuance of an original license to conduct an institutional pharmacy 500

For the biennial renewal of a license to conduct an institutional pharmacy 500

For the investigation or issuance of an original license to conduct a pharmacy in a correctional institution 500

For the biennial renewal of a license to conduct a pharmacy in a correctional institution.....500

For the investigation or issuance of an original license to conduct a pharmacy in a recovery center or ambulatory surgical center licensed by the State Board of Health pursuant to NRS 449.0303.....500

For the biennial renewal of a license to conduct a pharmacy in a recovery center or ambulatory surgical center licensed by the State Board of Health pursuant to NRS 449.0303 500

For the issuance of an original or duplicate certificate of registration as a registered pharmacist 50

For the biennial renewal of registration as a registered pharmacist 200

For the reinstatement of a lapsed registration (in addition to the fees for renewal for the period of lapse) 100

For the initial registration of a pharmaceutical technician , ~~[or]~~ pharmaceutical technician in training , ***dispensing technician or dispensing technician in training*** 50

For the biennial renewal of registration of a pharmaceutical technician , ~~[or]~~ pharmaceutical technician in training , ***dispensing technician or dispensing technician in training*** 50

For the investigation or registration of an intern pharmacist 40

For the biennial renewal of registration as an intern pharmacist 40

For the investigation or registration of an advanced practice registered nurse or a physician assistant to prescribe drugs that are not controlled substances 80

For the biennial renewal of registration of an advanced practice registered nurse or a physician assistant to prescribe drugs that are not controlled substances 80

For authorization of a physician, advanced practice registered nurse, physician assistant, euthanasia technician, facility for treatment with narcotics, researcher, instructional user or any other authorized person, except a practitioner who is a medical intern or resident physician, to prescribe or possess controlled substances 200

For the biennial renewal of authorization of a physician, advanced practice registered nurse, physician assistant, euthanasia technician, facility for treatment with narcotics, researcher, instructional user or any other authorized person, except a practitioner who is a medical intern or resident physician, to prescribe or possess controlled substances 200

For authorization of a practitioner who is a medical intern or resident physician to prescribe or possess controlled substances 80

For the biennial renewal of authorization of a practitioner who is a medical intern or resident physician to prescribe or possess controlled substances 80

For the investigation or issuance of an original license to engage in business as an authorized warehouse, medical products provider or medical products wholesaler 500

For the biennial renewal of a license to engage in business as an authorized warehouse, medical products provider or medical products wholesaler 500

For the investigation or issuance of an original license to a manufacturer or wholesaler.....1,000

For the biennial renewal of a license for a manufacturer or wholesaler 1,000

For the reissuance of a license issued to a pharmacy, when no change of ownership is involved, but the license must be reissued because of a change in the information required thereon.....50

For authorization of a practitioner, other than a licensed veterinarian, to dispense controlled substances or dangerous drugs, or both, for human consumption for each location where the practitioner will dispense controlled substances or dangerous drugs, or both, for human consumption.....300

For the biennial renewal of authorization of a practitioner, other than a licensed veterinarian, to dispense controlled substances or dangerous drugs, or both, for human consumption for each location where the practitioner will dispense controlled substances or dangerous drugs, or both, for human consumption.....300

For authorization of a licensed veterinarian to dispense controlled substances or dangerous drugs, or both, not for human consumption.....150

For the biennial renewal of authorization of a licensed veterinarian to dispense controlled substances or dangerous drugs, or both, not for human consumption.....150

For the investigation or issuance of an original license for an automated drug dispensing system.....500

For the biennial renewal of a license for an automated drug dispensing system 500

For the investigation or issuance of an original license to a pharmacy authorizing the use of a mechanical device to furnish drugs and medications for administration to patients at a medical facility 250

For the biennial renewal of a license to a pharmacy authorizing the use of a mechanical device to furnish drugs and medications for administration to patients at a medical facility 250

2. The penalty for failure to pay the renewal fee for any license, permit or certificate within the statutory period, as provided in subsection 6 of NRS 639.170, is 50 percent of the renewal fee for each period of delinquency in addition to the renewal fee for each period of delinquency.

3. Any person who has been registered as a pharmacist in this State for at least 50 years is not required to pay the fee for the biennial renewal of a certificate of registration as a registered pharmacist.

4. The provisions of this section concerning the fee for the biennial renewal of the authorization to dispense controlled substances or dangerous drugs do not apply to an advanced practice registered nurse who is required to pay a fee pursuant to NAC 639.870.

5. A practitioner employed by or serving as an independent contractor of a health center:

(a) Which is a federally-qualified health center that provides health care primarily to medically underserved persons in a community; and

(b) Which is not a medical facility as defined in NRS 449.0151,

➥ is not required to pay a fee to the Board for a change of address or for an additional address at which the practitioner dispenses drugs.

6. A practitioner who is exempt from the payment of a fee pursuant to subsection 5 shall notify the Board in writing of each change of address or additional address, or both.

7. In addition to any other fees paid by an applicant for a certificate, license or permit issued pursuant to chapter 639 of NRS, the Board may require that the applicant pay actual costs of inspection incurred by the Board.

Sec. 4. NAC 639.742 is hereby amended to read as follows:

639.742 1. Except as otherwise provided in NAC 639.7423, a practitioner who wishes to dispense controlled substances or dangerous drugs, or both, for human consumption must apply to the Board on an application provided by the Board for a certificate of registration to dispense controlled substances or dangerous drugs. A practitioner must submit a separate application for each site of practice, including, without limitation, a telepharmacy, remote site or satellite consultation site, from which the practitioner wishes to dispense controlled substances or dangerous drugs, or both, for human consumption. A certificate of registration to dispense controlled substances or dangerous drugs, or both, for human consumption is a revocable privilege, and no holder of such a certificate of registration acquires any vested right therein or thereunder.

2. Except as otherwise provided in NAC 639.7423, and section 3 of LCB File No. R004-19, if a facility from which the practitioner intends to dispense dangerous drugs or controlled substances, or both, for human consumption is not wholly owned and operated by the practitioner, the owner or owners of the facility must also submit an application to the Board on a form provided by the Board.

3. Except as otherwise provided in this section and NRS 639.23277 and NAC 639.395, 639.648 and 639.7423, the dispensing practitioner and, if applicable, the owner or owners of the facility and any federally-qualified health center vehicle, shall ensure that:

(a) All drugs are ordered by the dispensing practitioner;

(b) All drugs are received and accounted for by the dispensing practitioner;

(c) All drugs are stored in a secure, locked room or cabinet to which the dispensing practitioner has the only key or lock combination;

(d) All drugs are dispensed in accordance with NAC 639.745;

(e) No prescription is dispensed to a patient unless the dispensing practitioner is on-site at the facility or federally-qualified health center vehicle, as applicable;

(f) All drugs are dispensed only to the patient personally at the facility or federally-qualified health center vehicle, as applicable;

(g) The price of each drug dispensed to a patient is separately itemized on any bill or statement provided to the patient;

(h) All drugs are dispensed only for medically necessary purposes and according to prevailing standards of care for practitioners practicing in the specialty claimed or practiced by the dispensing practitioner; and

(i) The certificate for each dispensing technician employed at the facility is displayed in the room or cabinet in which drugs are stored.

4. Except as otherwise provided in NAC 639.648 and 639.7423, ***and section 1 of this regulation,*** with regard to the filling and dispensing of a prescription at a facility, only the dispensing practitioner or a dispensing technician may:

(a) Enter the room or cabinet in which drugs are stored;

(b) Remove drugs from stock;

(c) Count, pour or reconstitute drugs;

(d) Place drugs into containers;

(e) Produce and affix appropriate labels to containers that contain or will contain drugs;

(f) Fill containers for later use in dispensing drugs; or

(g) Package or repackage drugs.

5. Except as otherwise provided in NAC 639.7423, a dispensing practitioner may compound drug products if he or she complies with the provisions of NAC 639.661 to 639.690, inclusive, as if:

(a) He or she were a pharmacist;

(b) His or her practice site was a pharmacy; and

(c) Any dispensing technician involved in the compounding was a pharmaceutical technician.

6. Except as otherwise provided in subsection 6 of section 1 of LCB File No. R007-21, the dispensing practitioners of an oncology group practice registered pursuant to section 1 of LCB File No. R007-21 are jointly responsible for ensuring that the requirements prescribed by subsection 3 are met.

Sec. 5. NAC 639.7423 is hereby amended to read as follows:

639.7423 1. A licensed veterinarian who wishes to dispense controlled substances or dangerous drugs, or both, not for human consumption must apply to the Board on an application provided by the Board for a certificate of registration to dispense controlled substances or dangerous drugs, or both, not for human consumption. A certificate of registration issued pursuant to this section:

(a) Entitles the licensed veterinarian to dispense controlled substances or dangerous drugs, or both, not for human consumption from any veterinary facility at which he or she engages in the practice of veterinary medicine.

(b) Must be renewed at the same time and in the same manner as certificates of registration by other practitioners.

(c) Is a revocable privilege, and no holder of such a certificate of registration acquires any vested right therein or thereunder.

2. A veterinary facility at which controlled substances or dangerous drugs are possessed, administered, prescribed or dispensed:

(a) Shall ensure that at least one veterinarian who practices at that veterinary facility registers and maintains a registration with the Drug Enforcement Administration of the United States Department of Justice and the Board.

(b) Except as otherwise provided in paragraph (c), may allow only veterinarians, veterinary technicians or veterinary technicians in training at that veterinary facility to prepare a prescription drug for dispensing.

(c) May allow veterinary assistants at that facility to prepare a prescription drug, other than a controlled substance or dangerous drug, for dispensing.

(d) Shall ensure that a prescription drug which is new for an animal is not dispensed unless a veterinarian or veterinary technician is at the veterinary facility or is otherwise available at the time the prescription drug is dispensed.

(e) Shall ensure that a notation is made in the medical record of the animal that contains:

(1) The name, strength and quantity of the prescription drug.

(2) The date the prescription drug was prescribed and dispensed.

(3) The directions for use.

(4) The name, signature or initials of the veterinarian who prescribed the prescription drug.

(5) The name, signature or initials of the veterinarian, veterinary technician or veterinary technician in training who prepared the prescription drug for dispensing.

(6) The name, signature or initials of the veterinarian or veterinary technician who verified the prescription drug before the prescription drug was dispensed.

(f) Shall ensure that each vial or container which contains a prescription drug has affixed to the vial or container a label that contains:

(1) Except as otherwise provided in subsection 3, the name or unique identifier of the animal and the name of the owner of the animal for which the prescription drug is prescribed.

(2) The name, strength and quantity of the prescription drug.

(3) The date the prescription drug was dispensed.

(4) The name of the veterinarian who prescribed the prescription drug.

(5) The expiration date of the prescription drug.

(6) A unique number identifying the prescription.

(7) The directions for use.

(g) Shall maintain a stock of prescription drugs necessary to serve the foreseeable needs of the veterinary practice.

(h) Shall ensure that drugs which are inappropriate or unlawful to the practice of veterinary medicine are not ordered or maintained in the stock of prescription drugs of the veterinary facility.

3. A label affixed to a vial or container that contains a prescription drug may contain a generic identifier for a group of animals of the same species in place of the name or unique identifier of one animal if:

(a) The group of animals identified on the label is owned by the same person;

(b) The prescription drug is dispensed for more than one of the animals in the group; and

(c) The directions for use of the prescription drug are the same for each animal in the group for which the prescription drug is dispensed.

4. The authorization to possess a prescription drug is not transferrable upon the sale or other transfer of the animal or animals for which the prescription drug was dispensed.

5. A veterinary facility which maintains a stock of controlled substances or dangerous drugs for administration or dispensing shall:

(a) Secure the stock of controlled substances or dangerous drugs in a locked container that is:

(1) Affixed to the structure and located within a locked room; or

(2) Located within a second locked container which is affixed to the structure.

(b) Ensure that only a veterinarian or a veterinary technician designated by the veterinarian has the keys or combination to unlock the two separate locks at the start of a business day or beginning of a shift, if the veterinary facility has veterinarians on successive shifts.

(c) Restrict access to the controlled substances or dangerous drugs to veterinarians or veterinary technicians only.

(d) Ensure that each veterinarian or veterinary technician who accesses the secure container which stores the controlled substances or dangerous drugs records in a log:

(1) The name of the veterinarian or veterinary technician who accessed the secure container and the date that he or she accessed the secure container.

(2) The name, strength and quantity of the controlled substance or dangerous drug removed from or placed into the secure container and the total amount of all quantities of that particular controlled substance or dangerous drug remaining inside the secure container.

(e) Ensure that a veterinarian who intends to destroy an unused portion of a controlled substance or dangerous drug records in a log the name and quantity of the controlled substance or dangerous drug that will be destroyed and the date and time that the controlled substance or dangerous drug will be destroyed. An entry made pursuant to this paragraph must be verified by an employee of the veterinary facility.

(f) Ensure that the purchasing, storage and recordkeeping of controlled substances or dangerous drugs comply with all applicable state and federal laws.

(g) Ensure that any controlled substance or dangerous drug is purchased by a veterinarian or with the knowledge of a veterinarian and that all controlled substances and dangerous drugs received by the veterinary facility are verified by a veterinarian or with the knowledge of the veterinarian.

(h) Maintain separate files for the records of the purchase of each controlled substance listed in schedule II of controlled substances in NAC 453.520 and records of the dispensing of each controlled substance listed in schedule II of controlled substances in NAC 453.520.

6. Any record made pursuant to subsections 2 to 5, inclusive, must be maintained for at least 4 years and must be available for inspection by the Board or its representative or any authorized federal, state or local regulatory agency or law enforcement agency.

7. A licensed veterinarian with a certificate of registration issued by the Board pursuant to subsection 1 and a veterinary facility at which controlled substances or dangerous drugs may be

dispensed pursuant to this section are exempt from the provisions of NAC 639.7425 to 639.745, inclusive ~~[.]~~ ***, and section 1 of this regulation.***

8. As used in this section:

(a) "Prescription drug" has the meaning ascribed to it in NAC 638.0135.

(b) "Veterinary facility" has the meaning ascribed to it in NAC 638.018.

Sec. 6. NAC 639.7425 is hereby amended to read as follows:

1. Except as otherwise provided in NAC 639.7423 ~~[.]~~ ***and section 1 of this regulation,*** no person may ~~[act as]~~ ***perform the duties of*** a dispensing technician unless the person ~~[is:~~

~~(a) A registered pharmaceutical technician; or~~

~~(b) Employed at a facility to which a certificate of registration has been issued pursuant to NAC 639.742 and the dispensing practitioner at that facility has registered the person as a dispensing technician.]~~ ***has been issued a certificate of registration as a dispensing technician by the Board.***

2. ~~[A dispensing practitioner may apply to the Board to register a person]~~ ***An applicant for registration*** as a dispensing technician ~~[by submitting to the Board the fee required by NAC 639.744 and proof satisfactory to the Board that the person:]~~ ***must:***

(a) ~~[Is]~~ ***Be*** 18 years of age or older; ~~[and]~~

(b) ~~[Has received]~~ ***Be*** a high school ~~[diploma]~~ ***graduate*** or its equivalent ~~[.]~~ ***; and***

(c) Have complied with one of the following requirements:

(1) The successful completion of at least 1,500 hours of training and experience as a registered dispensing technician in training under the direct supervision of at least one dispensing practitioner providing the services set forth in subsection 4 of NAC 639.742; or

(2) Active registration and good standing as a pharmaceutical technician in this State.

3. *An applicant for registration as a dispensing technician must submit to the Board:*

(a) A completed application on a form prescribed by the Board;

(b) The fees prescribed by the Board in NAC 639.220; and

(c) Proof that the applicant has met the requirements of paragraph (c) of subsection 2.

4. The Board may deny an application to register a person as a dispensing technician if the person has:

(a) Been convicted of any felony or a misdemeanor involving moral turpitude, dishonesty or the unlawful possession, sale or use of drugs; or

(b) A history of ~~[drug abuse.~~

~~4. Upon determining that a person for whom application for registration as a dispensing technician has been made by a dispensing practitioner satisfies the requirements of subsection 2, the Board will issue to the person a provisional registration as a dispensing technician for that practitioner.~~

~~5. A person acting as a dispensing technician pursuant to a provisional registration must complete at least 500 hours of training and experience provided by the dispensing practitioner relating to the skills that the person will be performing as a dispensing technician for that dispensing practitioner. Only that training and experience received by the person after the provisional registration is issued may be applied to satisfy the 500-hour requirement. In providing the training and experience, the dispensing practitioner shall supervise the training and experience of the person by observing the work of the person on a random basis at least three times each day during which the person is receiving training and experience.~~

~~6. A provisional registration issued to a person acting as a dispensing technician expires 12 months after it is issued or upon the expiration of the certificate of registration of the dispensing~~

~~practitioner to whom the dispensing technician is registered, whichever is earlier. If a person acting as a dispensing technician pursuant to a provisional registration:~~

~~(a) Fails to complete the required 500 hours of training and experience before the expiration of the provisional registration, the person shall not act as a dispensing technician unless he or she is issued a new provisional registration pursuant to this section. Any hours of training and experience completed by the person while acting as a dispensing technician pursuant to a provisional registration that has expired may not be used to satisfy the 500 hour requirement for a new provisional registration.~~

~~(b) Completes the required 500 hours of training and experience before the expiration of the provisional registration, the dispensing practitioner shall file with the Board a signed affidavit]~~ ***substance use disorder.***

5. Proof provided pursuant to subsection 3 that an applicant has satisfied the requirements of subparagraph (1) of paragraph (c) of subsection 2 must consist of a form prescribed by the Board and completed by a dispensing practitioner, under whose supervision the applicant received the training and experience required by that subparagraph, certifying:

~~[(1)]~~ ***(a)*** The number of hours of training and experience successfully completed by the ~~[person.]~~ ***applicant.***

~~[(2)]~~ ***(b)*** The specific training and experience received by the ~~[person.]~~ ***applicant.***

~~[(3)]~~ ***(c)*** That the ~~[person]~~ ***applicant*** is, in the opinion of the dispensing practitioner, competent to perform the duties of a dispensing technician.

~~[7. The Board, upon receiving the affidavit of the dispensing practitioner pursuant to subsection 6, will issue to the person a certificate of registration as a dispensing technician for that practitioner.~~

~~8.~~ *6. After confirming that an applicant meets the requirements of this chapter and chapter 639 of NRS for registration, the Board will, unless the Board denies the registration pursuant to subsection 4, issue the applicant a certificate of registration as a dispensing technician.*

7. A registration issued pursuant to this section expires on October 31 of each even-numbered year unless renewed before that date.

8. A dispensing technician shall complete at least 1 hour of in-service training during the 2-year period immediately preceding the renewal of the registration of the dispensing technician. The training must be a jurisprudence program approved or presented by the Board that relates to the practice of pharmacy or the law concerning pharmacy in this State. The dispensing technician shall retain a copy of the certificate from the Board or approved program certifying the completion of such in-service training. The copy must be:

(a) Retained for at least 2 years; and

(b) Readily accessible to a member of the Board or a person conducting an inspection or investigation on behalf of the Board.

~~[8.]~~ *9.* As used in this section, "dispensing practitioner" does not include a licensed veterinarian to whom the Board has issued a certificate of registration pursuant to NAC 639.7423 to dispense controlled substances or dangerous drugs, or both, not for human consumption.

Sec. 7. NAC 639.743 is hereby amended to read as follows:

1. Except as otherwise provided in NRS 639.23277 and NAC 639.395, a person to whom a dispensing practitioner is providing training and experience pursuant to subsection ~~[5.]~~ *2* of NAC 639.7425 *and section 1 of this regulation* must not be allowed access to the room or cabinet in which drugs are stored unless accompanied by the dispensing practitioner. After the person has

completed his or her training and experience and the Board has ~~[received an affidavit from the dispensing practitioner pursuant to subsection 6 of NAC 639.7425:]~~ ***issued a certificate of registration as a dispensing technician to the person:***

(a) The person may access the room or cabinet in which drugs are stored without being accompanied by the dispensing practitioner, so long as the dispensing practitioner is on-site at the facility; and

(b) The dispensing practitioner is not required to observe the work of the person.

2. A dispensing practitioner who allows a dispensing technician to perform any function described in subsection 4 or 5 of NAC 639.742 is responsible for the performance of that function by the dispensing technician. All such functions performed by a dispensing technician must be performed at the express direction and delegation of the dispensing practitioner. Each prescription with respect to which a dispensing technician performed such a function:

(a) Must be checked by the dispensing practitioner, and the dispensing practitioner shall indicate on the label of the prescription and in his or her record regarding the prescription that the dispensing practitioner has checked the work performed by the dispensing technician; and

(b) Must not be dispensed to the patient without the initials of the dispensing practitioner thereon. A prescription which has been so initialed must be handed to the patient only by the dispensing practitioner or an employee authorized by the dispensing practitioner.

3. As used in this section, "dispensing practitioner" does not include a licensed veterinarian to whom the Board has issued a certificate of registration pursuant to NAC 639.7423 to dispense controlled substances or dangerous drugs, or both, not for human consumption.

Sec. 8. NAC 639.7435 is hereby amended to read as follows:

639.7435 1. The registration of a dispensing technician ***or a dispensing technician in training*** is ~~[nontransferable and limited to the dispensing practitioner to whom the dispensing technician is registered. The registration of a dispensing technician expires at the same time that the certificate of registration of the dispensing practitioner expires. If a dispensing practitioner and the dispensing technician registered to that practitioner leave the facility at which they are registered, and the dispensing technician continues his or her employment with that practitioner at a different site, the dispensing practitioner shall, as soon as practicable, notify the Board of the change of address of employment of the dispensing technician.]~~ ***transferable.***

2. ~~[If a dispensing technician no longer works as a dispensing technician for the dispensing practitioner to whom the dispensing technician is registered, the registration of the dispensing technician terminates. Except as otherwise provided in NAC 639.7423, if that person is subsequently employed by another dispensing practitioner to work as a dispensing technician, the employing dispensing practitioner must, before the person may act as a dispensing technician for that practitioner:~~

~~(a) Register the person with the Board, showing the site of employment and the name of the dispensing practitioner; and~~

~~(b) Ensure that the person receives an additional 200 hours of training and experience provided by the dispensing practitioner. The additional training and experience must be provided in accordance with subsection 5 of NAC 639.7425. Except as otherwise provided in NRS 639.23277 and NAC 639.395, the dispensing practitioner shall not allow the person to be registered as a dispensing technician to enter the room or cabinet in which drugs are stored or perform any function described in subsection 4 or 5 of NAC 639.742 without the dispensing~~

~~practitioner observing the act by the person to be registered as a dispensing technician until that person has completed the 200 additional hours of training and experience.~~

~~3. As used in this section, "dispensing practitioner" does not include a licensed veterinarian to whom the Board has issued a certificate of registration pursuant to NAC 639.7423 to dispense controlled substances or dangerous drugs, or both, not for human consumption.]~~ ***A dispensing technician or a dispensing technician in training shall notify the Board on a form prescribed by the Board within 10 days after changing or adding:***

(a) A location of practice; or

(b) A dispensing practitioner by whom the dispensing technician or dispensing technician in training is being supervised.

Sec. 9. NAC 639.744 is hereby amended to read as follows:

639.744 ~~[1. A dispensing practitioner shall pay to the Board a fee of $40 for each dispensing technician whom that practitioner registers:~~

~~(a) At the time of application by the dispensing practitioner for initial registration of the person as a dispensing technician; and~~

~~(b) With the practitioner's renewal thereafter as a part of and in addition to the practitioner's renewal of his or her registration as a dispensing practitioner.~~

~~2.]~~ A dispensing practitioner may ~~[register]~~ ***employ*** more than one dispensing technician at a time, except that only one of those dispensing technicians, including, without limitation, a dispensing technician staffing a remote site or satellite consultation site, may be designated and allowed to perform the functions described in subsection 4 or 5 of NAC 639.742 at one time. A dispensing practitioner shall make and maintain a document on which must be recorded for each

day the name of the dispensing technician so designated and allowed to perform the functions described in subsection 4 or 5 of NAC 639.742, and maintain the record for not less than 2 years.

Sec. 10. NAC 639.7445 is hereby amended to read as follows:

639.7445 If a dispensing practitioner allows any person to perform any act in violation of NAC 639.742 to 639.7445, inclusive, and section 3 of LCB File No. R004-19 ~~[,]~~ ***and section 1 of this regulation,*** the dispensing practitioner is subject to discipline relating to his or her registration as a dispensing practitioner, including, without limitation, the temporary and immediate suspension of his or her registration as a dispensing practitioner until:

1. The violation is remedied; or
2. If an accusation has been made pursuant to NRS 639.241, the Board holds a hearing.

PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R179-22

August 24, 2022

EXPLANATION – Matter in *italics* is new; matter in brackets [~~omitted material~~] is material to be omitted.

AUTHORITY: § 1, NRS 639.070 and 639.2655.

A REGULATION relating to pharmacy; authorizing the operation of an automated drug dispensing system at sites of certain governmental agencies; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes the State Board of Pharmacy to adopt regulations: (1) relating to the practice of pharmacy as necessary for the protection of the public; and (2) governing the dispensing, recordkeeping, storage and handling of drugs. (NRS 639.070) Existing law further authorizes the use of computerized mechanical equipment to perform work that a pharmacist is required to perform by law in accordance with the regulations adopted by the Board. (NRS 639.2655)

Existing regulations establish the requirements for a pharmacy to obtain a license to operate an automated drug dispensing system. Such requirements include limitations on the location at which an automated drug dispensing system may operate. (NAC 639.718) This regulation authorizes an automated drug dispensing system to be located at a site operated by the Division of Public and Behavioral Health of the Department of Health and Human Services or a local health department if the system is operated by a pharmacy owned by the Division or local health department, as applicable.

Section 1. NAC 639.718 is hereby amended to read as follows:

639.718 1. Except as otherwise provided in this section, a pharmacy may use an automated drug dispensing system to dispense a prescription drug to a patient if the pharmacy obtains a license from the Board for the automated drug dispensing system pursuant to subsection 2.

2. The Board will provide to a pharmacy an application for a license for an automated drug dispensing system upon request. The Board will issue a license for an automated drug dispensing system if the Board determines that the system dispenses prescription drugs accurately and otherwise meets the requirements of this section and the fee prescribed by NAC 639.220 is paid. A license must be:

(a) Issued for each automated drug dispensing system at a designated location; and

(b) Posted on the system so that the license is visible to the public.

3. The automated drug dispensing system must conform to all of the following provisions:

(a) The system must contain only prescription drugs:

(1) Approved for use in the system by a registered pharmacist employed by the pharmacy; and

(2) For which the prescriptions have been processed, verified and completed in the same manner as prescriptions for drugs that are delivered manually by the pharmacy, including the provision of printed medication guides and any other information required pursuant to NAC 639.707.

(b) The system must not contain:

(1) Controlled substances included in schedule II; or

(2) Controlled substances included in schedules III, IV and V, unless authorized by the Drug Enforcement Administration of the United States Department of Justice to dispense such substances.

(c) The system must:

(1) Control and track access to the system for stocking, cleaning, maintenance or any other purpose to ensure that access to the system can be obtained only by a registered pharmacist,

pharmaceutical technician, or intern pharmacist employed by the pharmacy using user-based access technology.

(2) Be secure from unauthorized access to and removal of prescription drugs.

(3) Be owned or leased by the pharmacy that holds the license for the system and operated under the supervision and control of that pharmacy.

(4) Monitor the temperature of the system or be able to have a device installed to monitor the temperature of the system. Such monitoring must include, without limitation, an alarm that records when the temperature of the system reaches a level outside the range compatible with the proper storage of a prescription drug and a method to notify the pharmacy of the temperature change.

(5) Create and maintain a complete, accurate and readily retrievable record of all transactions. The record must include, without limitation:

(I) The name, strength, quantity and form of dosage of each prescription drug stocked, inventoried, removed or dispensed from the system;

(II) Each day and time the system is accessed;

(III) An inventory of the prescription drugs stored in the system; and

(IV) The identity of each person who accesses the system.

(6) Authorize access only to patients who previously have indicated to the pharmacy their desire to have their prescription drugs dispensed by the system.

(7) Provide a method to identify the patient and dispense a prescription drug only to the patient or to an authorized agent of the patient.

(8) Dispense one, any combination or all of the prescription drugs available to a patient at the option of the patient at the time that the patient removes the prescription drugs from the system.

(9) Record the date and time that the patient removes the prescription drugs from the system.

(10) Inform a patient:

(I) If the patient is using the system at the time that the pharmacy is open, that the patient may discuss questions and concerns regarding the prescription drug with a pharmacist at the pharmacy or through the user-based access technology described in subparagraph (14).

(II) If the patient is using the system at the time that the pharmacy is closed, that the patient may discuss questions and concerns regarding the prescription drug through the user-based access technology described in subparagraph (14).

(III) That the patient may choose not to purchase the prescription drug from the system at any time before the system dispenses the prescription drug.

(11) Dispense all prescription drugs in containers labeled in conformance with NRS 639.2801.

(12) Be installed in such a place and manner that a person is unable to remove the system from its location and any attempts to obtain access to the system without authorization are visible to the pharmacist of the pharmacy, either through the system being in view of the pharmacist or by real-time audio-visual communication technology or audio-visual recording technology.

(13) Be located in a:

(I) Pharmacy;

(II) Medical facility, as defined in NRS 449.0151, other than a mobile unit; ~~[or]~~

(III) Practice site of one or more practitioners of medicine ~~]~~ *; or*

(IV) Site operated by the Division of Public and Behavioral Health of the Department of Health and Human Services or a district, county or city health department. The system may only be located at such a site if the pharmacy that operates the system is owned by the same governmental agency that operates the site.

(14) Be equipped with user-based access technology that includes, without limitation, an audio-visual function that allows the patient to communicate, in real time, with a registered pharmacist who has access to any patient record necessary for counseling the patient in compliance with NAC 639.707 and 639.708.

4. A pharmacy that dispenses prescription drugs by an automated drug dispensing system pursuant to this section shall maintain a written policy that sets forth:

(a) The duties of all persons who are authorized to access the system; and

(b) The procedures for:

(1) Maintaining the security of the prescription drugs stored in the system during the maintenance and repair of the system;

(2) The preparation of an inventory of the prescription drugs stored in the system; and

(3) Stocking the system with prescription drugs.

5. A pharmacy that dispenses prescription drugs through an automated drug dispensing system pursuant to this section shall comply with all applicable federal and state recordkeeping requirements and shall maintain those records in a readily retrievable manner separate from other pharmacy records.

6. Prescription drugs stored in an automated drug dispensing system pursuant to this section shall be deemed part of the inventory and the responsibility of the pharmacy that holds the

license for the system. Prescription drugs dispensed from the system shall be deemed to have been dispensed by that pharmacy.

7. The Board may prohibit a pharmacy from using an automated drug dispensing system to furnish a prescription drug to a patient if the Board determines that the system or the pharmacy's use of the system does not comply with this section.

8. The provisions of this section do not prohibit the use of an automated drug dispensing system to furnish a drug or device that is approved by the Food and Drug Administration for sale over the counter without a prescription if the pharmacy using the system is otherwise authorized to use the system pursuant to this section.

9. As used in this section:

(a) "Automated drug dispensing system" means a system that performs operations, other than compounding or administration, related to the storage and dispensing of drugs.

(b) "User-based access technology" means software or hardware that restricts access to an automated drug dispensing system to authorized users by requiring two-factor authentication. Authentication factors may include, without limitation, knowledge, hardware tokens or biometric information.

REVISED PROPOSED REGULATION OF THE

STATE BOARD OF PHARMACY

LCB File No. R180-22

October 12, 2022

EXPLANATION – Matter in *italics* is new; matter in brackets [~~omitted material~~] is material to be omitted.

AUTHORITY: §§ 1-5 and 7-11, NRS 639.070 and 639.0727; § 6, NRS 639.070.

A REGULATION relating to pharmacy; authorizing a reproductive healthcare center to obtain a license to distribute certain drugs using an automated drug dispensing system; prescribing requirements governing the use of such a system; requiring a dispensing practitioner to provide certain information to a patient to whom a drug is dispensed and maintain certain records; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law authorizes the State Board of Pharmacy to adopt regulations: (1) relating to the practice of pharmacy as necessary for the protection of the public; and (2) governing the dispensing, recordkeeping, storage and handling of drugs. (NRS 639.070) Existing law further requires the Board to adopt regulations setting forth the powers and duties of a dispensing practitioner. (NRS 639.0727) Existing regulations define the term "dispensing practitioner" to mean a practitioner to whom the Board has issued a certificate of registration to dispense controlled substances or dangerous drugs. (NAC 639.010) Lastly, existing regulations: (1) authorize a pharmacy to operate an automated drug dispensing system if the pharmacy has obtained a license for the system from the Board; and (2) establish the requirements governing the operation of an automated drug dispensing system. (NAC 639.718)

Section 1 of this regulation: (1) authorizes a reproductive healthcare center to obtain a license to use an automated drug dispensing system to dispense prescription drugs related to reproductive health care; and (2) establishes requirements that a reproductive healthcare center must follow when using such an automated drug dispensing system, which are similar to those that currently apply to a pharmacy. **Section 1** requires an automated drug dispensing system to track: (1) who uses the system; (2) what drugs are in the system; (3) the temperature of the system; and (4) other information to ensure that the drugs in the system are safely stored and only dispensed to a person authorized to receive the dispensed drug. **Sections 2 and 6** of this regulation make conforming changes to ensure that certain terms used in **section 1** are defined in the same manner throughout chapter 639 of NAC. **Sections 5, 7 and 8** of this regulation make

conforming changes to ensure that certain provisions of existing regulations are not read to conflict with the provisions of **section 1**.

Existing regulations: (1) require a pharmacist to provide certain information to a patient concerning a drug being dispensed to the patient by the pharmacist; (2) require a pharmacist to consider the therapeutic appropriateness of dispensing the drug to the patient; (3) prescribe requirements concerning the documentation of counseling of a patient by a pharmacist; and (4) prescribe procedures for the maintenance of such records by a pharmacy. (NAC 639.707, 639.708) **Sections 3 and 4** of this regulation expand applicability of these requirements to also apply to a dispensing practitioner. **Sections 9 and 10** of this regulation make conforming changes to reflect the expanded applicability of a requirement concerning a determination of the therapeutic appropriateness of a prescription.

Section 11 of this regulation provides that an automated drug dispensing system licensed to a reproductive healthcare center is not a computerized system to fill prescriptions, and is thus not subject to requirements governing such a computerized system. (NAC 639.940)

Section 1. Chapter 639 of NAC is hereby amended by adding thereto a new section to read as follows:

1. Except as otherwise provided in this section, one or more dispensing practitioners practicing at a reproductive healthcare center may use an automated drug dispensing system and maintain a shared inventory in the automated drug dispensing system to dispense a prescription drug to a patient if the reproductive healthcare center obtains a license from the Board for the automated drug dispensing system pursuant to subsection 2.

2. The Board will provide an application for a license for an automated drug dispensing system to a reproductive healthcare center upon request. The Board will issue a license for an automated drug dispensing system if the Board determines that the system dispenses prescription drugs accurately, otherwise meets the requirements of this section and the fee prescribed by NAC 639.220 is paid. A license must be:

(a) Issued for each automated drug dispensing system at a reproductive healthcare center; and

(b) Posted on the system so that the license is visible to the public.

3. The automated drug dispensing system must conform to all the following provisions:

(a) Except as otherwise provided in subsection 8, the system must contain only dangerous drugs, excluding compound drug products, for treatment in reproductive health care:

(1) Approved for use in the system by a dispensing practitioner; and

(2) For which the prescription has been processed, verified and completed in the same manner as a prescription for drugs that are delivered manually by a dispensing practitioner pursuant to NAC 639.742 and 639.745, except that the requirements of paragraph (e) of subsection 3 of NAC 639.742 do not apply.

(b) The system must:

(1) Control and track access to the system for stocking, cleaning, maintenance or any other purpose to ensure that access to the system can be obtained only by a dispensing practitioner practicing at the reproductive healthcare center.

(2) Be secure from unauthorized access to and removal of prescription drugs.

(3) Be owned or leased by the reproductive healthcare center that obtained the license for the system and operated under the supervision and control of that reproductive healthcare center.

(4) Monitor the temperature of the system or be able to have a device installed to monitor the temperature of the system. Such monitoring must include, without limitation, an alarm that records when the temperature of the system reaches a level outside the range compatible with the proper storage of a prescription drug and a method to notify the reproductive healthcare center of the temperature change.

(5) Create and maintain a complete, accurate and readily retrievable record of all transactions. The record must include, without limitation:

(I) The name, strength, quantity and form of dosage of each prescription drug stocked, inventoried, removed or dispensed from the system;

(II) Each day and time the system is accessed;

(III) An inventory of the prescription drugs stored in the system; and

(IV) The identity of each person who accesses the system.

(6) Authorize access only to patients who have previously indicated to the dispensing practitioner who prescribed the drug their desire to have their prescription drugs dispensed by the system.

(7) Provide a method to identify the patient and dispense a prescription drug only to the patient or to an authorized agent of the patient.

(8) Dispense one, any combination or all of the prescription drugs available to a patient at the option of the patient at the time that the patient removes the prescription drugs from the system.

(9) Record the date and time that the patient removes the prescription drugs from the system.

(10) Inform a patient:

(I) If the patient is using the system at the time that the reproductive healthcare center is open, that the patient may discuss questions and concerns regarding the prescription drug with the dispensing practitioner in person, if available, or through user-based access technology described in subparagraph (13).

(II) If the patient is using the system at the time that the reproductive healthcare center is closed, that the patient may discuss questions and concerns regarding the prescription drug through the user-based access technology described in subparagraph (13).

(III) That the patient may choose not to purchase the prescription drug from the system at any time before the system dispenses the prescription drug.

(11) Dispense all prescription drugs in containers labeled in conformance with NRS 639.2801.

(12) Be installed in such a place and manner that a person is unable to remove the system from its location or obtain access to the system without authorization. The system must be monitored by real-time audio-visual technology or audio-visual recording technology.

(13) Be equipped with user-based access technology that includes, without limitation, an audio-visual function that allows the patient to communicate, in real time, with a dispensing practitioner who has access to any patient record necessary for counseling the patient in compliance with NAC 639.707 and 639.708.

4. A reproductive healthcare center that dispenses prescription drugs by an automated drug dispensing system pursuant to this section shall maintain a written policy that sets forth:

(a) The duties of all persons who are authorized to access the system; and

(b) The procedures for:

(1) Maintaining the security of the prescription drugs stored in the system during the maintenance and repair of the system;

(2) The preparation of an inventory of the prescription drugs stored in the system; and

(3) Stocking the system with prescription drugs.

5. A dispensing practitioner practicing at a reproductive healthcare center that dispenses prescription drugs through an automated drug dispensing system pursuant to this section shall comply with all applicable federal and state recordkeeping requirements and shall maintain those records in a readily retrievable manner separate from other medical records.

6. Prescription drugs stored in an automated drug dispensing system pursuant to this section shall be deemed part of the inventory and the responsibility of each dispensing practitioner that uses the automated drug dispensing system at the reproductive healthcare center that holds the license for the system. Prescription drugs dispensed from the system shall be deemed to have been dispensed by that dispensing practitioner or those dispensing practitioners, as applicable.

7. The Board may prohibit a reproductive healthcare center from using an automated drug dispensing system to furnish a prescription drug to a patient if the Board determines that the system, or one or more dispensing practitioners' use of the system, does not comply with this section.

8. The provisions of this section do not prohibit the use of an automated drug dispensing system to furnish a drug or device that is approved by the Food and Drug Administration for sale over the counter without a prescription if the reproductive healthcare center using the system is otherwise authorized to use the system pursuant to this section.

9. As used in this section, "reproductive healthcare center" means a healthcare facility that is:

(a) Owned and operated by a nonprofit corporation or a public health center, as defined in subsection 8 of NRS 449.260; and

(b) Principally engaged in providing family planning services and reproductive health care, including, without limitation, the testing, diagnosis and treatment of, or providing of medication to prevent sexually transmitted infections or other infections of the urogenital system.

Sec. 2. NAC 639.010 is hereby amended to read as follows:

639.010 As used in this chapter, unless the context otherwise requires:

1. *"Automated drug dispensing system" means a system that performs operations, other than compounding or administration, related to the storage and dispensing of drugs.*

2. "Board" means the State Board of Pharmacy.

~~[2.]~~ *3.* "Controlled substances" has the meaning ascribed to it in NRS 0.031.

~~[3.]~~ *4.* "Dangerous drug" has the meaning ascribed to it in NRS 454.201.

~~[4.]~~ *5.* "Direct supervision" means the direction given by a supervising pharmacist who is:

(a) On the premises of the pharmacy or telepharmacy at all times when the person he or she is supervising is working at the pharmacy or telepharmacy or at a remote site or satellite consultation site; and

(b) Aware of the activities of that person related to the preparation and dispensing of medications, including the maintenance of appropriate records.

~~[5.]~~ *6.* "Dispensing practitioner" means:

(a) A practitioner to whom the Board has issued a certificate of registration pursuant to NAC 639.742 to dispense controlled substances or dangerous drugs, or both, for human consumption; or

(b) A licensed veterinarian to whom the Board has issued a certificate of registration pursuant to NAC 639.7423 to dispense controlled substances or dangerous drugs, or both, not for human consumption.

~~[6.]~~ *7.* "Executive Secretary" means the Executive Secretary employed by the Board pursuant to NRS 639.040.

~~[7.]~~ *8.* "Federally-qualified health center" has the meaning ascribed to it in 42 U.S.C. § 1396d(l)(2)(B).

~~[8.]~~ *9.* "Federally-qualified health center vehicle" means a vehicle that meets the requirements of paragraph (c) of subsection 1 of section 3 of LCB File No. R004-19.

~~[9.]~~ *10.* "Licensed veterinarian" has the meaning ascribed to it in NRS 638.007.

~~[10.]~~ *11.* "Oncology group practice" means two or more dispensing practitioners who practice oncology in a group practice.

~~[11.]~~ *12.* "Pharmaceutical technician" means a person who performs technical services in a pharmacy under the direct supervision of a pharmacist and is registered with the Board pursuant to NAC 639.240.

~~[12.]~~ *13.* "Pharmaceutical technician in training" means a person who is registered with the Board pursuant to NAC 639.242 in order to obtain the training and experience required to be a pharmaceutical technician pursuant to subparagraph (3) of paragraph (d) of subsection 2 of NAC 639.240, or who is enrolled in a program of training for pharmaceutical technicians that is approved by the Board.

~~[13.]~~ *14.* "Practitioner" has the meaning ascribed to it in NRS 639.0125.

~~[14.]~~ *15.* "Prescription drug" means a drug or medicine as defined in NRS 639.007 which:

(a) May be dispensed only upon a prescription order that is issued by a practitioner; and

(b) Is labeled with the symbol "Rx only" pursuant to federal law or regulation.

~~[15.]~~ *16.* "Public or nonprofit agency" means a health center as defined in 42 U.S.C. § 254b(a) which:

(a) Provides health care primarily to medically underserved persons in a community;

(b) Is receiving a grant issued pursuant to 42 U.S.C. § 254b or, although qualified to receive such a grant directly from the Federal Government, is receiving money from such a grant under a contract with the recipient of that grant; and

(c) Is not a medical facility as defined in NRS 449.0151.

~~[16.]~~ *17.* "Surgical center for ambulatory patients" has the meaning ascribed to it in NRS 449.019.

18. "User-based access technology" means software or hardware that restricts access to an automated drug dispensing system to authorized users by requiring two-factor authentication. Authentication factors may include, without limitation, knowledge, hardware tokens or biometric information.

Sec. 3. NAC 639.707 is hereby amended to read as follows:

639.707 1. Except as otherwise provided in this section, a pharmacist , ~~[or]~~ an intern pharmacist under the supervision of a pharmacist ***or a dispensing practitioner*** shall verbally provide a patient or a person caring for the patient with information about each prescription drug or device dispensed to the patient that:

(a) Has not been previously dispensed to the patient from that pharmacy ~~[.]~~ ***or dispensing practitioner, as applicable;*** or

(b) Has been previously dispensed to the patient from that pharmacy ~~[.]~~ *or dispensing practitioner, as applicable,* including, without limitation, a prescription drug or a device that is being refilled, if, in the professional judgment of the pharmacist, ~~[or]~~ intern pharmacist ~~[:]~~ *or dispensing practitioner:*

(1) The information would further or improve the drug therapy of the patient; or

(2) A reasonable concern relating to the safety or efficacy of the drug therapy of the patient was raised by the review of the patient's record that the pharmacist, ~~[or]~~ intern pharmacist *or dispensing practitioner* conducted pursuant to subsection 4.

2. The information provided by the pharmacist, ~~[or]~~ intern pharmacist *or dispensing practitioner* pursuant to subsection 1 may include, without limitation:

(a) The name and a description of the drug;

(b) The form of dosage, dose, route of administration and duration of drug therapy;

(c) The intended use of the drug or device and expected responses from that use;

(d) Any special directions and precautions for the preparation, administration and use of the drug or device by the patient;

(e) Any common severe side effects, interactions and contraindications that may occur, recommendations to avoid these side effects, interactions or contraindications, and the action required if they occur;

(f) Techniques for the patient or the person caring for the patient to monitor the drug therapy;

(g) Proper storage of the drug or device;

(h) Information about refilling the prescription;

(i) Actions to be taken in the event of a missed dose;

(j) Any relevant information contained in the record of medication of the patient; and

(k) Any other information which, in the professional judgment of the pharmacist , ~~[or]~~ intern pharmacist ~~[.]~~ ***or dispensing practitioner,*** is necessary to ensure the safe and effective use of the drug or device by the patient.

3. The pharmacist or intern pharmacist shall provide the information required pursuant to subsections 1 and 2 in written form to the patient if a drug or device will be distributed to the patient outside the confines of the pharmacy by mail or any other delivery service. A pharmacist or intern pharmacist is not required to provide written information pursuant to this subsection if the drug or device is being delivered to a patient who is in a licensed medical facility where other licensed health care professionals are authorized to administer drugs.

4. The pharmacist , ~~[or]~~ intern pharmacist ***or dispensing practitioner*** shall review a patient's record before dispensing a prescription to determine its therapeutic appropriateness and, in making that determination, may consider, without limitation:

(a) Overutilization of the drug and drug abuse;

(b) Underutilization of the drug;

(c) Therapeutic duplications, contraindications and any warning labels or other information included with the drug;

(d) Interactions between the drug and any:

(1) Other drugs which the patient is taking or has recently taken;

(2) Diseases which the patient has, including any stages of that disease; and

(3) Allergies that the patient may have; and

(e) Incorrect dosage or duration of treatment.

5. A pharmacist , ~~[or]~~ intern pharmacist *or dispensing practitioner* is not required to counsel a patient pursuant to this section if the patient or a person caring for the patient refuses to accept the counseling.

6. Except as otherwise provided in subsection 7, the pharmacist , ~~[or]~~ intern pharmacist *or dispensing practitioner* shall, at the time that counseling is provided or refused:

(a) Initial a written document that is maintained at the pharmacy *or at the primary place of business of the dispensing practitioner* to record whether counseling was provided to or refused by a patient or the person caring for the patient; or

(b) Enter, pursuant to NAC 639.751, initials onto a record in a computerized system used by the pharmacy *or dispensing practitioner, as applicable,* for recording information concerning prescriptions to indicate whether counseling was provided to or refused by a patient or the person caring for the patient.

7. The pharmacist , ~~[or]~~ intern pharmacist *or dispensing practitioner* is not required to comply with the provisions of subsection 6 if the prescription drug or device dispensed to the patient is being refilled.

Sec. 4. NAC 639.708 is hereby amended to read as follows:

639.708 To facilitate counseling regarding a prescription, a pharmacy *or dispensing practitioner* shall:

1. Maintain a record of medication for each patient to whom a prescription has been dispensed by that pharmacy ~~[.]~~ *or dispensing practitioner, as applicable.* The record must:

(a) Be retrievable for use by the pharmacist ~~[.]~~ *or dispensing practitioner;*

(b) Be maintained for at least 2 years after the most recent entry;

(c) List all prescriptions dispensed to the patient at that pharmacy ~~[,]~~ ***or by the dispensing practitioner;*** and

(d) Include all data required to be placed on the prescription.

2. Make a reasonable effort to obtain and retain in the record of medication the:

(a) Telephone number or numbers, if any, of the patient;

(b) Gender of the patient;

(c) Age or date of birth of the patient;

(d) History of the patient, including allergies, reactions to particular drugs and any medications or medical devices used by the patient; and

(e) Any comments relevant to the drug therapy of the patient, including any other information which is specific to the patient or drug.

3. Ensure that a pharmacist ***or dispensing practitioner who has access to the medical records of the patient*** is available by telephone during business hours and, ~~[if the]~~ ***for a*** pharmacy ***that*** routinely delivers prescriptions outside of the trade area covered by local telephone service, provide a toll-free telephone number.

4. Include with each prescription container ***of a pharmacy that is*** delivered or distributed by a public carrier:

(a) The local, and if applicable toll-free, telephone numbers of the pharmacy;

(b) The hours during which the patient may contact the pharmacy by telephone; and

(c) A written notice in substantially the following form:

Written information about this prescription has been provided for you. Please read this information before you take this medication. If you have questions concerning this prescription, a pharmacist is available between the hours of ..... and ..... to answer your questions.

5. Maintain the confidentiality of each patient's records, including prescriptions, pursuant to NRS *449A.112 or* 639.238 ~~[.]~~ *, as applicable.* A pharmacist *or dispensing practitioner* shall not divulge the contents of a patient's records, except as authorized by NRS 639.238 ~~[.]~~ *or any other applicable provision of law.*

6. Make available to a practitioner, upon request, all information relating to a prescription that is provided to a patient of that practitioner by the pharmacist , ~~[or]~~ an intern pharmacist ~~[.]~~ *or dispensing practitioner.*

7. Ensure that counseling is conducted in a confidential manner to prevent disclosure of information to any person other than the patient or the person caring for the patient.

Sec. 5. NAC 639.715 is hereby amended to read as follows:

639.715 No drug, controlled substance, medicine, chemical or poison, as those terms are defined in chapters 453, 454 and 639 of NRS, may be sold or offered for sale or dispensed by means of any mechanical device except as otherwise provided in NAC 639.718 and 639.720 ~~[.]~~ *and section 1 of this regulation.*

Sec. 6. NAC 639.718 is hereby amended to read as follows:

639.718 1. Except as otherwise provided in this section, a pharmacy may use an automated drug dispensing system to dispense a prescription drug to a patient if the pharmacy

obtains a license from the Board for the automated drug dispensing system pursuant to subsection 2.

2. The Board will provide to a pharmacy an application for a license for an automated drug dispensing system upon request. The Board will issue a license for an automated drug dispensing system if the Board determines that the system dispenses prescription drugs accurately and ~~[other]~~ otherwise meets the requirements of this section and the fee prescribed by NAC 639.220 is paid. A license must be:

(a) Issued for each automated drug dispensing system at a designated location; and

(b) Posted on the system so that the license is visible to the public.

3. The automated drug dispensing system must conform to all of the following provisions:

(a) The system must contain only prescription drugs:

(1) Approved for use in the system by a registered pharmacist employed by the pharmacy; and

(2) For which the prescriptions have been processed, verified and completed in the same manner as prescriptions for drugs that are delivered manually by the pharmacy, including the provision of printed medication guides and any other information required pursuant to NAC 639.707.

(b) The system must not contain:

(1) Controlled substances included in schedule II; or

(2) Controlled substances included in schedules III, IV and V, unless authorized by the Drug Enforcement Administration of the United States Department of Justice to dispense such substances.

(c) The system must:

(1) Control and track access to the system for stocking, cleaning, maintenance or any other purpose to ensure that access to the system can be obtained only by a registered pharmacist, pharmaceutical technician, or intern pharmacist employed by the pharmacy using user-based access technology.

(2) Be secure from unauthorized access to and removal of prescription drugs.

(3) Be owned or leased by the pharmacy that holds the license for the system and operated under the supervision and control of that pharmacy.

(4) Monitor the temperature of the system or be able to have a device installed to monitor the temperature of the system. Such monitoring must include, without limitation, an alarm that records when the temperature of the system reaches a level outside the range compatible with the proper storage of a prescription drug and a method to notify the pharmacy of the temperature change.

(5) Create and maintain a complete, accurate and readily retrievable record of all transactions. The record must include, without limitation:

(I) The name, strength, quantity and form of dosage of each prescription drug stocked, inventoried, removed or dispensed from the system;

(II) Each day and time the system is accessed;

(III) An inventory of the prescription drugs stored in the system; and

(IV) The identity of each person who accesses the system.

(6) Authorize access only to patients who previously have indicated to the pharmacy their desire to have their prescription drugs dispensed by the system.

(7) Provide a method to identify the patient and dispense a prescription drug only to the patient or to an authorized agent of the patient.

(8) Dispense one, any combination or all of the prescription drugs available to a patient at the option of the patient at the time that the patient removes the prescription drugs from the system.

(9) Record the date and time that the patient removes the prescription drugs from the system.

(10) Inform a patient:

(I) If the patient is using the system at the time that the pharmacy is open, that the patient may discuss questions and concerns regarding the prescription drug with a pharmacist at the pharmacy or through the user-based access technology described in subparagraph (14).

(II) If the patient is using the system at the time that the pharmacy is closed, that the patient may discuss questions and concerns regarding the prescription drug through the user-based access technology described in subparagraph (14).

(III) That the patient may choose not to purchase the prescription drug from the system at any time before the system dispenses the prescription drug.

(11) Dispense all prescription drugs in containers labeled in conformance with NRS 639.2801.

(12) Be installed in such a place and manner that a person is unable to remove the system from its location and any attempts to obtain access to the system without authorization are visible to the pharmacist of the pharmacy, either through the system being in view of the pharmacist or by real-time audio-visual communication technology or audio-visual recording technology.

(13) Be located in a:

(I) Pharmacy;

(II) Medical facility, as defined in NRS 449.0151, other than a mobile unit; or

(III) Practice site of one or more practitioners of medicine.

(14) Be equipped with user-based access technology that includes, without limitation, an audio-visual function that allows the patient to communicate, in real time, with a registered pharmacist who has access to any patient record necessary for counseling the patient in compliance with NAC 639.707 and 639.708.

4. A pharmacy that dispenses prescription drugs by an automated drug dispensing system pursuant to this section shall maintain a written policy that sets forth:

(a) The duties of all persons who are authorized to access the system; and

(b) The procedures for:

(1) Maintaining the security of the prescription drugs stored in the system during the maintenance and repair of the system;

(2) The preparation of an inventory of the prescription drugs stored in the system; and

(3) Stocking the system with prescription drugs.

5. A pharmacy that dispenses prescription drugs through an automated drug dispensing system pursuant to this section shall comply with all applicable federal and state recordkeeping requirements and shall maintain those records in a readily retrievable manner separate from other pharmacy records.

6. Prescription drugs stored in an automated drug dispensing system pursuant to this section shall be deemed part of the inventory and the responsibility of the pharmacy that holds the

license for the system. Prescription drugs dispensed from the system shall be deemed to have been dispensed by that pharmacy.

7. The Board may prohibit a pharmacy from using an automated drug dispensing system to furnish a prescription drug to a patient if the Board determines that the system or the pharmacy's use of the system does not comply with this section.

8. The provisions of this section do not prohibit the use of an automated drug dispensing system to furnish a drug or device that is approved by the Food and Drug Administration for sale over the counter without a prescription if the pharmacy using the system is otherwise authorized to use the system pursuant to this section.

~~[9. As used in this section:~~

~~(a) "Automated drug dispensing system" means a system that performs operations, other than compounding or administration, related to the storage and dispensing of drugs.~~

~~(b) "User-based access technology" means software or hardware that restricts access to an automated drug dispensing system to authorized users by requiring two-factor authentication. Authentication factors may include, without limitation, knowledge, hardware tokens or biometric information.]~~

Sec. 7. NAC 639.720 is hereby amended to read as follows:

639.720 1. Except as otherwise provided in this section, a mechanical device, other than an automated drug dispensing system licensed pursuant to NAC 639.718 ~~[.]~~ ***or section 1 of this regulation,*** may be used to furnish drugs and medicines for administration to registered patients in a medical facility if the pharmacy which supplies drugs and medicines to the medical facility has obtained a license from the Board for a mechanical device pursuant to subsection 4. A

license is not required for a mechanical device that meets the requirements of this section and is located inside a hospital licensed pursuant to chapter 449 of NRS.

2. The mechanical device must conform to all the following provisions:

(a) All drugs and medicines stocked in the device must be approved for use in the device by a registered pharmacist employed by the:

(1) Medical facility in which the drug or medicine is administered; or

(2) Pharmacy that supplies the medical facility in which the drug or medicine is administered.

(b) Access to the device must be:

(1) Limited to pharmaceutical technicians, pharmaceutical technicians in training, intern pharmacists, registered pharmacists, licensed practical nurses, registered nurses or other practitioners who are:

(I) Authorized by law to prescribe or administer controlled substances, poisons, or dangerous drugs and devices; and

(II) Employed by the medical facility or pharmacy that supplies the medical facility.

(2) Monitored and controlled by the pharmacy which supplies the medical facility or the registered pharmacist who is employed by the medical facility.

(c) Each container of a drug or medicine stored in the device must be labeled in a manner which includes the information required pursuant to subsection 2 of NAC 639.476.

(d) The device must be designed in such a manner that:

(1) Each time a person obtains access to the device, the device automatically prepares a record which is readily retrievable and which includes:

(I) The name, strength, quantity and form of dosage of the drug or medicine which is stocked, inventoried or removed for administration to a patient;

(II) The day and time access to the device is obtained;

(III) If a drug or medicine is removed for administration to a patient, the name of the patient;

(IV) An inventory of the drugs and medicines stored in the device; and

(V) The name of the person who obtained access to the device.

(2) Access to the device may be obtained only by a person with the use of a code which identifies that person.

3. A pharmacy which supplies drugs and medicines to a medical facility which are furnished by a mechanical device pursuant to subsection 1 shall maintain a written policy which sets forth:

(a) The duties of all persons who are authorized to obtain access to the device; and

(b) The procedure for:

(1) Maintaining the security of the drugs and medicines stored in the device during the maintenance and repair of the device;

(2) The preparation of an inventory of the drugs and medicines stored in the device; and

(3) Stocking the device with drugs and medicines.

4. The Board will issue a license for a mechanical device if the Board determines that the mechanical device meets the requirements of this section and the fee required by NAC 639.220 is paid. A license authorizes the use of the mechanical device at the medical facility at which the mechanical device is located.

5. Each medical facility that uses a mechanical device pursuant to subsection 1 must make and maintain a record of any waste of a controlled substance in the manner provided in NAC 639.486. The record of any waste of a controlled substance may be prepared:

(a) By the mechanical device if the mechanical device is capable of making and maintaining such a record and documenting the record of the waste being witnessed by another person as provided in paragraph (g) of subsection 1 of NAC 639.486; or

(b) As a written record.

6. A mechanical device may be used to furnish drugs and medicines for administration to a patient receiving treatment in the emergency room of a hospital. The device must conform to all the following provisions:

(a) All drugs and medicines stocked in the device must be approved for use in the device by a registered pharmacist employed by or contracted with the:

(1) Hospital in which the drug or medicine is furnished; or

(2) Pharmacy that supplies the hospital in which the drug or medicine is furnished.

(b) Access to the device for the purposes of stocking, inventory and monitoring must be limited to pharmaceutical technicians, pharmaceutical technicians in training, intern pharmacists or registered pharmacists employed by the hospital or the pharmacy that supplies the hospital.

(c) The device must be designed in such a manner that:

(1) Each time a person obtains access to the device, the device automatically prepares a record which is readily retrievable and which includes:

(I) The name, strength, quantity and form of dosage of the drug or medicine which is stocked, inventoried or removed for administration to a patient;

(II) The day and time access to the device is obtained;

(III) If a drug or medicine is removed for administration to a patient, the name of the patient;

(IV) An inventory of the drugs and medicines stored in the device; and

(V) The name of the person who obtained access to the device.

(2) Access to the device may be obtained only by a person with the use of a unique code which identifies that person.

(d) The device must be located in such a place and manner that a person is unable to remove it from the hospital, and that attempts to obtain access to the device without authorization are visible to employees of the hospital.

7. As used in this section, "medical facility" has the meaning ascribed to it in NRS 449.0151.

Sec. 8. NAC 639.742 is hereby amended to read as follows:

639.742 1. Except as otherwise provided in NAC 639.7423, a practitioner who wishes to dispense controlled substances or dangerous drugs, or both, for human consumption must apply to the Board on an application provided by the Board for a certificate of registration to dispense controlled substances or dangerous drugs. A practitioner must submit a separate application for each site of practice, including, without limitation, a telepharmacy, remote site or satellite consultation site, from which the practitioner wishes to dispense controlled substances or dangerous drugs, or both, for human consumption. A certificate of registration to dispense controlled substances or dangerous drugs, or both, for human consumption is a revocable

privilege, and no holder of such a certificate of registration acquires any vested right therein or thereunder.

2. Except as otherwise provided in NAC 639.7423 and section 3 of LCB File No. R004-19, if a facility from which the practitioner intends to dispense dangerous drugs or controlled substances, or both, for human consumption is not wholly owned and operated by the practitioner, the owner or owners of the facility must also submit an application to the Board on a form provided by the Board.

3. Except as otherwise provided in this section and NRS 639.23277 and NAC 639.395, 639.648 and 639.7423 ~~[,]~~ ***and section 1 of this regulation,*** the dispensing practitioner and, if applicable, the owner or owners of the facility and any federally-qualified health care center vehicle, shall ensure that:

(a) All drugs are ordered by the dispensing practitioner;

(b) All drugs are received and accounted for by the dispensing practitioner;

(c) All drugs are stored in a secure, locked room or cabinet to which the dispensing practitioner has the only key or lock combination;

(d) All drugs are dispensed in accordance with NAC 639.745;

(e) No prescription is dispensed to a patient unless the dispensing practitioner is on-site at the facility or federally-qualified health center vehicle, as applicable;

(f) All drugs are dispensed only to the patient personally at the facility or federally-qualified health center vehicle, as applicable;

(g) The price of each drug dispensed to a patient is separately itemized on any bill or statement provided to the patient;

(h) All drugs are dispensed only for medically necessary purposes and according to prevailing standards of care for practitioners practicing in the specialty claimed or practiced by the dispensing practitioner; and

(i) The certificate for each dispensing technician employed at the facility is displayed in the room or cabinet in which drugs are stored.

4. Except as otherwise provided in NAC 639.648 and 639.7423 ~~,~~ ***and section 1 of this regulation,*** with regard to the filling and dispensing of a prescription at a facility, only the dispensing practitioner or a dispensing technician may:

(a) Enter the room or cabinet in which drugs are stored;

(b) Remove drugs from stock;

(c) Count, pour or reconstitute drugs;

(d) Place drugs into containers;

(e) Produce and affix appropriate labels to containers that contain or will contain drugs;

(f) Fill containers for later use in dispensing drugs; or

(g) Package or repackage drugs.

5. Except as otherwise provided in NAC 639.7423, a dispensing practitioner may compound drug products if he or she complies with the provisions of NAC 639.661 to 639.690, inclusive, as if:

(a) He or she were a pharmacist;

(b) His or her practice site was a pharmacy; and

(c) Any dispensing technician involved in the compounding was a pharmaceutical technician.

6. Except as otherwise provided in subsection 6 of section 1 of LCB File No. R007-21, the dispensing practitioners of an oncology group practice registered pursuant to section 1 of LCB File No. R007-21 are jointly responsible for ensuring that the requirements prescribed by subsection 3 are met.

Sec. 9. NAC 639.910 is hereby amended to read as follows:

639.910 1. Any computerized system used by a pharmacy for recording information concerning prescriptions must be designed in such a manner that it provides:

(a) A readily retrievable printed record of the information relating to a prescription or a patient which the pharmacy is required to maintain pursuant to state or federal law, including, without limitation, information relating to the original prescription or the refill or modification of that prescription;

(b) The original prescription number;

(c) The prescribing practitioner's name, address and the registration number issued to him or her by the Drug Enforcement Administration if the prescribing practitioner is registered with that agency;

(d) The full name and address of the patient;

(e) The date on which the original prescription was filled, if it is different from the date prescribed;

(f) The name, strength, form, dosage, quantity and directions for use of the drug prescribed;

(g) The name or common abbreviation of the manufacturer, packer or distributor or the National Drug Code number of the drug dispensed to the patient;

(h) The total number of refills authorized by the prescriber;

(i) The date and quantity of each refill of a drug dispensed to a patient;

(j) The total number of refills of a drug dispensed to a patient;

(k) The quantity dispensed, if that is different from the quantity prescribed;

(l) At the time a prescription is filled or refilled, an automatic notice of the information the pharmacist ~~[or]~~ , intern pharmacist ***or dispensing practitioner*** considered pursuant to subsection 4 of NAC 639.707; and

(m) A procedure that may be conducted at least once each day to ensure that the information which is recorded in the system is not lost or destroyed.

2. The managing pharmacist of a pharmacy that uses a computerized system for recording information concerning prescriptions shall ensure that a procedure is conducted upon the computerized system that ensures that the information which is recorded in the system is not lost or destroyed.

3. As used in this section, "National Drug Code number" means the number assigned to a drug by the Food and Drug Administration.

Sec. 10. NAC 639.938 is hereby amended to read as follows:

639.938 If the computerized system is not functioning, the pharmacy must have an auxiliary procedure to document the dispensing of an original or refilled prescription. The auxiliary procedure must ensure that:

1. The information concerning a prescription which is filled or refilled during the period the system is not functioning is retained and entered into the system as soon as it is functioning again.

2. The information that is required for:

(a) The pharmacist ~~[or]~~, intern pharmacist ***or dispensing practitioner*** who dispenses the drug to the patient to comply with the provisions of NAC 639.707; and

(b) The pharmacy to comply with the provisions of NAC 639.708,

↪ is readily available.

Sec. 11. NAC 639.940 is hereby amended to read as follows:

639.940 As used in NAC 639.940 to 639.943, inclusive, "computerized system to fill prescriptions" means an automated device operated by a computer which is used to prepare and package specified dosage units of drugs for dispensing to patients or ultimate users. The term does not include an automated drug dispensing system, a mechanical device or mechanical counting device governed by NAC 639.718, 639.720 or 639.725 ~~[.]~~ ***or section 1 of this regulation.***