

CHAPTER 1142

ADMINISTRATION AND DISPENSING OF PRESCRIPTION DRUGS AND VACCINES

S.F. 2322

AN ACT relating to the practice of pharmacy, including the administration of certain drugs and vaccines and the establishment of technician product verification programs.

Be It Enacted by the General Assembly of the State of Iowa:

Section 1. [Section 147.107, subsection 2](#), Code 2018, is amended to read as follows:

2. a. ~~A pharmacist, physician, dentist, podiatric physician, or prescribing psychologist prescriber who dispenses prescription drugs, including but not limited to controlled substances, for human use, may delegate nonjudgmental dispensing functions to staff assistants only when verification of the accuracy and completeness of the dispensing is determined by the pharmacist or practitioner in the pharmacist's or practitioner's physical presence. However, the physical presence requirement does not apply when a pharmacist or practitioner is utilizing an automated dispensing system; when a pharmacist is utilizing a tech-check-tech program, as defined in [section 155A.3](#); or when a pharmacist is remotely supervising a certified pharmacy technician practicing at a telepharmacy site approved by the board of pharmacy. When using an automated dispensing system, the pharmacist or practitioner shall utilize an internal quality control assurance plan that ensures accuracy for dispensing. When using a tech-check-tech program or when remotely supervising a certified pharmacy technician practicing at an approved telepharmacy site, the pharmacist shall utilize an internal quality control assurance plan, in accordance with rules adopted by the board of pharmacy, that ensures accuracy for dispensing. Verification of automated dispensing, tech-check-tech, and telepharmacy practice accuracy and completeness remains the responsibility of the pharmacist or practitioner and shall be determined in accordance with rules adopted by the board of pharmacy, the board of medicine, the dental board, the board of podiatry, and the board of psychology for their respective licensees.~~

b. ~~A dentist, physician, podiatric physician, or prescribing psychologist prescriber who dispenses prescription drugs, other than drug samples, pursuant to [this subsection](#), shall report the fact that they dispense prescription drugs with the practitioner's respective board at least biennially.~~

c. ~~A physician, dentist, podiatric physician, or prescribing psychologist prescriber who dispenses prescription drugs, other than drug samples, pursuant to [this subsection](#), shall offer to provide the patient with a written prescription, if requested, that may be dispensed from a pharmacy of the patient's choice or offer to transmit the prescription orally, electronically, or by facsimile in accordance with [section 155A.27](#) to a pharmacy of the patient's choice.~~

d. A pharmacist who dispenses prescription drugs, including but not limited to controlled substances, for human use, may delegate nonjudgmental dispensing functions only when verification of the accuracy and completeness of the dispensing is determined by the pharmacist in the pharmacist's physical presence. The pharmacist's verification of the accuracy of the prescription drug dispensed shall not be required when verified by a certified pharmacy technician in a technician product verification program or a tech-check-tech program as defined in [section 155A.3](#). The pharmacist's physical presence shall not be required when the pharmacist is remotely supervising pharmacy personnel operating in an approved telepharmacy site or when utilizing an automated dispensing system that utilizes an internal quality control assurance plan. When utilizing a technician product verification program or tech-check-tech program, or when remotely supervising pharmacy personnel operating at an approved telepharmacy site, the pharmacist shall utilize an internal quality control assurance plan, in accordance with rules adopted by the board of pharmacy, that ensures accuracy for dispensing. Automated dispensing verification, technician product verification, and telepharmacy practice accuracy and completeness remains the responsibility of the pharmacist and shall be determined in accordance with rules adopted by the board of pharmacy.

Sec. 2. [Section 155A.3](#), Code 2018, is amended by adding the following new subsections:
NEW SUBSECTION. 42A. “*Statewide protocol*” means a framework developed and issued by the board that specifies the conditions under which pharmacists are authorized to order and administer a medication or category of medications when providing a clinical service.

NEW SUBSECTION. 43A. “*Technician product verification*” means the process by which a certified pharmacy technician provides the final product verification for prescription drugs or devices filled or prepared by a registered pharmacy technician, pharmacist-intern, or with an automated dispensing system.

Sec. 3. [Section 155A.6A, subsection 4](#), Code 2018, is amended to read as follows:

4. The board shall adopt rules in accordance with [chapter 17A](#) on matters pertaining to pharmacy technician registration, application, forms, renewals, fees, termination of registration, tech-check-tech programs, technician product verification programs, national certification, training, and any other relevant matters.

Sec. 4. [Section 155A.33](#), Code 2018, is amended to read as follows:

155A.33 Delegation of technical functions.

A pharmacist may delegate technical dispensing functions to pharmacy technicians, but only if the pharmacist is physically present to verify the accuracy and completeness of the patient’s prescription prior to the delivery of the prescription to the patient or the patient’s representative. However, the physical presence requirement does not apply when a pharmacist is utilizing an automated dispensing system or a ~~tech-check-tech~~ technician product verification program or when a pharmacist is remotely supervising a certified pharmacy technician practicing at a telepharmacy site approved by the board. When using an automated dispensing system or a ~~tech-check-tech~~ technician product verification program, or when remotely supervising a certified pharmacy technician practicing at an approved telepharmacy site, the pharmacist shall utilize an internal quality control assurance plan that ensures accuracy for dispensing. Verification of automated dispensing, ~~tech-check-tech~~ technician product verification, and telepharmacy practice accuracy and completeness remains the responsibility of the pharmacist and shall be determined in accordance with rules adopted by the board.

Sec. 5. **NEW SECTION. 155A.33A Technician product verification programs.**

1. A pharmacist in charge of a pharmacy located in this state may formally establish a technician product verification program to optimize the provision of pharmacist patient care services. The board may require a pharmacist in charge intending to implement a technician product verification program to submit a program plan for board consideration and approval. The plan shall demonstrate that onsite practice hours for a pharmacist will not be reduced but will be redistributed directly to patient care activities.

2. The board shall adopt rules for the development, implementation, and oversight of technician product verification programs. The rules shall address program policy and procedures, pharmacist and pharmacy technician training, program quality assurance and evaluation, recordkeeping, redistribution of pharmacist activities, and other matters necessary for the development, implementation, and oversight of the program.

Sec. 6. [Section 155A.34](#), Code 2018, is amended by striking the section and inserting in lieu thereof the following:

155A.34 Transfer of prescriptions.

Any prescription transfer shall be from a licensed pharmacy to another licensed pharmacy and be performed in accordance with rules adopted by the board.

Sec. 7. **NEW SECTION. 155A.46 Statewide protocols.**

1. *a.* A pharmacist may, pursuant to statewide protocols developed by the board in consultation with the department of public health and consistent with [subsection 2](#), order and administer the following to patients ages eighteen years and older:

- (1) Naloxone.
- (2) Nicotine replacement tobacco cessation products.

(3) An immunization or vaccination recommended by the United States centers for disease control and prevention advisory committee on immunization practices in its approved vaccination schedule for adults.

(4) An immunization or vaccination recommended by the United States centers for disease control and prevention for international travel.

(5) A Tdap (tetanus, diphtheria, acellular pertussis) vaccination in a booster application.

(6) Other emergency immunizations or vaccinations in response to a public health emergency.

b. A pharmacist may, pursuant to statewide protocols developed by the board in consultation with the department of public health and consistent with [subsection 2](#), order and administer the following to patients ages six months and older:

(1) A vaccine or immunization for influenza.

(2) Other emergency immunizations or vaccines in response to a public health emergency.

c. A pharmacist may, pursuant to statewide protocols developed by the board in consultation with the department of public health and consistent with [subsection 2](#), order and administer the final two doses in a course of vaccinations for HPV to patients ages eleven years and older.

d. Prior to the ordering and administration of a vaccination or immunization authorized by [this subsection](#), pursuant to statewide protocols, a licensed pharmacist shall consult and review the statewide immunization registry or health information network. The board shall adopt rules requiring the reporting of the administration of vaccines and immunizations authorized by [this subsection](#) to a patient's primary health care provider, primary physician, and a statewide immunization registry or health information network.

2. A pharmacist ordering or administering a prescription drug, product, test, or treatment pursuant to [subsection 1](#) shall do all of the following:

a. Maintain a record of all prescription drugs, products, tests, and treatments administered pursuant to [this section](#).

b. Notify the patient's primary health care provider of any prescription drugs, products, tests, or treatments administered to the patient, or enter such information in a patient record system also used by the primary health care provider, as permitted by the primary health care provider. If the patient does not have a primary health care provider, the pharmacist shall provide the patient with a written record of the prescription drugs, products, tests, or treatment provided to the patient and shall advise the patient to consult a physician.

c. Complete continuing pharmacy education related to statewide protocols recognized and approved by the board.

Sec. 8. FUTURE REPEAL. [Section 155A.44](#), Code 2018, is repealed effective July 1, 2019.

Approved May 16, 2018