



**California State Board of Pharmacy**

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STATE AND CONSUMERS AFFAIRS AGENCY  
DEPARTMENT OF CONSUMER AFFAIRS  
GOVERNOR EDMUND G. BROWN JR

**Date: April 12, 2012**

**To: Licensing Committee**

**Subject: Review and Discussion to Develop Regulation Requirements to Specify Standards for Agencies that Accredite Licensed Sterile Injectable Compounding Pharmacies (Proposed at 16 California Code of Regulations Section 1751.9)**

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Relevant Statutes

California Business and Professions Code section 4127 et seq. establishes a specialized category of pharmacy licensure for pharmacies that are: 1. already licensed pharmacies, and 2. compound injectable sterile drug products. These specialized pharmacies may be either hospital pharmacies or community pharmacies. As a condition of licensure, these pharmacies must be inspected by the board before initial licensure and each year before renewal of the license. This is the only category of board licensure that requires annual inspections as a condition of renewal.

However, there is an exemption in existing law from this specialty category of board licensure for pharmacies if:

- the pharmacy is licensed by the board or the Department of Public Health  
AND
- the pharmacy is currently accredited by the Joint Commission on Accreditation of Healthcare Organizations or other private accreditation agencies approved by the board.

Background

In 2003, the Licensing Committee developed criteria for the evaluation of applications by accrediting entities for board approval. It was decided that the evaluation of accrediting agencies for board approval under Business and Professions Code section 4127.1 should be based on the accrediting agency's ability to evaluate the pharmacy's conformance with California law and good professional practice standards and the following factors. Provided below is the general criteria the board initially established in 2003.

1. **Periodic inspection** -The accrediting entity must subject the pharmacy to site inspection and re-accreditation at least every three years.
2. **Documented accreditation standards** -The standards for granting accreditation and scoring guidelines for those standards must reflect both applicable California law and sound professional practice as established by nationally recognized professional or standard setting organizations.

3. **Evaluation of surveyor's qualifications** -The surveyors employed to perform site inspections must have demonstrated qualifications to evaluate the professional practices subject to accreditation.
4. **Acceptance by major California payers** -Recognition of the accrediting agency by major California payers (e.g., HMOs, PPOs, PBGH, CalPERS).
5. **Unannounced inspection of California accredited sites** -The board must conduct unannounced inspections of two or more accredited sites and find those sites in satisfactory compliance with California law and good professional practice.
6. **Board access to accreditor's report on individual pharmacies.**
7. **Length of time the accrediting agency has been operating.**
8. **Ability to accredit out-of-state pharmacies.** Non-resident pharmacies are eligible for licensure under the sterile compounding statutes and accreditation should be equally available to both resident and non-resident pharmacies.

Over the past few years the board has reviewed and approved several new accreditation agencies. During the course of its discussion and evaluation, the board has expressed some hesitation in the approval of accreditation agencies that do not incorporate the following items:

1. A pharmacist as a member of the survey team
2. Perform annual inspections
3. Willingness to share information with the board on findings
4. Ensuring conformance with California's requirements for LSCs

As previously discussed by the committee, regulation language is necessary to facilitate implementation of this process. During the last committee meeting members discussed the proposal and suggested several changes to the proposed language. Following this memo is revised language as well as the relevant portion of the December 2011 Licensing Committee Meeting.

## **Board of Pharmacy Specific Language to Add Section 1751.9**

Add Section 1751.9 to Division 17 'of Title 16 of the California Code of Regulations to read as follows:

### **§1751.9 - Accreditation Agencies for Pharmacies that Compound Injectable Sterile Drug Products**

(a) Agencies seeking to become approved accrediting agencies for pharmacies that compound sterile injectable drugs pursuant to Business and Professions Code section 4127.1 or section 4127.2 shall submit a formal written request to the board and provide evidence satisfactory to the board that:

(1) The accrediting agency performs site inspections and re-accreditation reviews of each accredited pharmacy at least annually. Site inspections shall be conducted to ensure compliance with Article 4.5 and Article 7 of Division 17, Title 16 California Code of Regulations governing the compounding of sterile injectable products.

(2) The standards for granting accreditation and scoring guidelines for those standards reflect California law and sound professional practice. Included in the standards must be documentation of compliance with the self assessment form referenced in section 1735.2.

(3) The surveyors who perform site inspections possess qualifications necessary to evaluate the professional practices subject to accreditation. At least one member of the survey team must be a licensed pharmacist. All surveyors must maintain appropriate and unrestricted licensure.

(4) The accrediting agency has sufficient personnel and resources to accredit California and non-resident pharmacies.

(5) The board shall consider the length of time the agency has been operating as an accrediting agency.

(6) The board shall be able to obtain access to an approved accrediting agency's report on individual pharmacies for a three year period. Upon request of the board, the agency shall provide the report within 10 business days.

(b) An agency seeking approval from the board must provide the board with company name and contact information along with the following information:

1. A comparison of the agency's sterile compounding standards with each of the components of this article and other California law regarding sterile injectable compounding.
2. List of employees performing survey inspections including the name, title, license number and licensure status for each employee.
3. List of payors agency is recognized by.
4. List of sites currently accredited by the agency including the name, location and license number of each site.
5. Detailed description of the process used to evaluate sites seeking accreditation or reaccreditation.

(c) The Board of Pharmacy shall take action on a completed application at a scheduled board meeting.

1. If granted, the approval will be good for three years. Three months before the end of the approval period, an approved accrediting agency must submit a reapplication to the board for continued recognition as an approved accrediting agency. The Board or its designee may approve a reapplication.
2. If the approval is denied, the agency will be notified of the basis for the denial. The agency may submit additional information to the board for reconsideration of the denial. The additional information must be submitted within 30 days of the notice of denial for consideration by the board.

(d) An approved accreditation agency has a process to address non-compliance that may include any or all of the following:

1. Require correction of any identified deficiencies within a set timeframe. Failure to comply shall result in the accrediting agency issuing a reprimand or suspending or revoking the accreditation.
2. Issue a reprimand.
3. Suspend or revoke the licensed sterile injectable compounding pharmacy's accreditation.

(e) The accreditation agency shall, within 24 hours, report to the board any entity issued a reprimand or any entity whose accreditation has been suspended or revoked.

(f) On an annual basis, no later than July 1 of each year, an approved accrediting agency shall submit a report to the board listing all board-licensed facilities that are currently accredited and have been accredited during the past 12 months with a notation of the outcome of each inspection.

(g) The board may conduct unannounced inspections of accredited sites to determine if the licensed facility is in compliance with California law and good professional practice.

(h) The board may evaluate the performance of an approved accreditation agency and may rescind its approval of the accreditation agency for failure to conform with California pharmacy law and standards relating to drug compounding or any of the provisions of this section.

Prior discussion on draft regulation language.

Review and Discussion to Develop Regulation Requirements to Specify Standards for Agencies that Accredit Licensed Sterile Injectable Compounding Pharmacies (Proposed as 16 California Code of Regulations Section 1751.9)

#### Report

Chair Lippe provided that California Business and Professions Code section 4127 et seq. establishes a specialized category of pharmacy licensure for pharmacies that are: 1. already licensed pharmacies, and 2. compound injectable sterile drug products. He stated that these specialized pharmacies may be either hospital pharmacies or community pharmacies. Chair Lippe advised that as a condition of licensure, these pharmacies must be inspected by the board before initial licensure and each year before renewal of the license. He indicated that this is the only category of board licensure that requires annual inspections as a condition of renewal.

Chair Lippe provided that there is an exemption in existing law from this specialty category of board licensure for pharmacies if:  
the pharmacy is licensed by the board or the Department of Public Health  
AND  
the pharmacy is currently accredited by the Joint Commission on Accreditation of Healthcare Organizations or other private accreditation agencies approved by the board.

#### Discussion

Ms. Herold provided that staff has developed the following draft language of proposed regulations designed to clarify Business and Professions Code section 4127.1 based on previously proposed regulation language considered by the board and comments made during discussions on the approval of accreditation agencies over the last 18 months.

#### **Board of Pharmacy Specific Language to Add Section 1751.9**

Add Section 1751.9 to Division 17 of Title 16 of the California Code of Regulations to read as follows:

#### **§1751.9 -Accreditation Agencies for Pharmacies that Compound Injectable Sterile Drug Products**

(a) Agencies seeking to become approved accrediting agencies for pharmacies that compound sterile injectable drugs pursuant to Business and Professions Code section 4127.1 or section 4127.2 shall provide evidence satisfactory to the board that:

(1) The accrediting agency performs site inspections and re-accreditation reviews of each accredited pharmacy at least annually. Site inspections shall be conducted to

ensure compliance with pharmacy law laws governing the compounding of sterile injectable products.

(2) The standards for granting accreditation and scoring guidelines for those standards reflect California law and sound professional practice as established by nationally recognized professional or standards-setting organizations.

(3) The surveyors who perform site inspections possess qualifications necessary to evaluate the professional practices subject to accreditation. At least one member of the survey team must be a licensed pharmacist. All surveyors must maintain appropriate and unrestricted licensure.

(4) The accrediting agency is recognized by at least one California healthcare payor (e.g., HMOs, PPOs, PBGH, CalPERS).

(5) The accrediting agency is able to accredit California and non-resident pharmacies.

(b) An agency seeking recognition from the board must provide the board with the following information:

1. A comparison of the agency's sterile compounding standards with each of the components of this article and other California law regarding sterile injectable compounding.
2. List of employees performing survey inspections.
3. List of payors agency is recognized by.
4. List of sites currently accredited by the agency.
5. Detailed description of the process used to evaluate sites seeking accreditation or reaccreditation.

(c) If an accreditation agency determines, as a result of its inspection, that a sterile injectable compounding pharmacy is not in compliance with the pharmacy law, the accreditation agency may do any of the following:

1. Require correction of any identified deficiencies within a set timeframe. Failure to comply shall result in the accrediting agency issuing a reprimand or suspending or revoking the accreditation.
2. Issue a reprimand.
3. Suspend or revoke the licensed sterile injectable compounding pharmacy's accreditation.
4. The accreditation agency shall, within 24 hours, report to the board any entity issued a reprimand or any entity whose accreditation has been suspended or revoked.

(d) The board shall consider the length of time the agency has been operating as an accrediting agency.

(e) The board shall be able to obtain access to an approved accrediting agency's report on individual pharmacies for a three year period.

(f) On an annual basis, no later than July 1 of each year, an approved accrediting agency shall submit a report to the board listing all board-licensed facilities that have been accredited during the past 12 months with a notation of the outcome of each inspection.

(g) The board may conduct unannounced inspections of accredited sites to determine if the licensed facility is in compliance with California law and good professional practice.

(h) This approval shall be good for a period of three years. Three months before the end of the approval period, an approved accrediting agency must submit a reapplication to the board for continued recognition as an approved accrediting agency. The Board of Pharmacy shall take action on a completed application at a scheduled board meeting.

(i) The board may evaluate the performance of an approved accreditation agency and may rescind its approval of the accreditation agency if the board's evaluation finds noncompliance with the standards established in this section.

Ms. Shellans shared some concerns she has with the draft language. She stated that more detail is needed to clarify the application process. Ms. Shellans discussed that the details of the application process should be specified including whether a form is needed and what information should be submitted. She also discussed that the language needs to clarify what will happen to agencies that are currently recognized by the board.

Ms. Veale stated that she believes that these agencies should have to reapply and should not be grandfathered in.

Ms. Shellans provided that the board would have to specify when these agencies would have to reapply after the regulation is adopted.

Ms. Herold spoke in opposition to grandfathering. She said that the application process and establishment of standards is important and should apply to all agencies.

Ms. Veale suggested that the agencies apply within 60 days of the adoption of the regulation.

Ms. Shellans recommended that if an agency's approval expires before the regulation is adopted, the board can extend the current approval until the board renders a decision. She discussed that if an agency is denied, the board will need to determine when the approval ceases and what notice will be provided.

Ms. Veale recommended that approval immediately cease. She stated that the board can reassess this process if problems arise.

Ms. Shellans also expressed concern that the draft language does not establish an appeal process in the event an agency is denied by the board. She recommended that applications be approved by board staff and any appeals be brought to the full board. She stated that this will eliminate the need to convene a board meeting every time an application is submitted and in order to consider renewals.

Ms. Shellans provided that for licensing cases, agencies typically have 30 days to appeal the board's decision before it becomes final.

Ms. Sodergren provided that while developing the draft language, she was informed that due process does not necessarily apply in this case as a license is not being granted.

Ms. Shellans stated that subdivision (a) should be revised to specify the application process. She stated that either a form or formal request and required documentation needs to be specified within the regulation.

Ms. Herold and Ms. Sodergren recommended that a formal request be required rather than requiring a form within the regulation.

Ms. Shellans recommended that the language in subdivision (a)(1) cross-reference the sterile compounding regulations in California Code of Regulations sections 1735 and 1751.

Ms. Shellans provided that all relative law sections should be cited throughout the regulation.

Ms. Veale agreed and directed staff to modify the language to include all relevant citations.

Ms. Shellans provided that the regulation needs to specify the nationally recognized professional or standards-setting organizations referred to in the draft language.

Ms. Shellans sought clarification regarding the intent of subdivision (d) regarding the length of time an agency has been operating as an accrediting agency.

Ms. Herold discussed that a new agency has no track record and can be a risk to the board.

Ms. Shellans recommend that this be a required element of the application.

Ms. Sodergren suggested that the board establish a minimum length of time for this requirement if the board delegates initial application approval to staff.

Chair Lippe recommended that the board establish a one year minimum for this requirement.

Ms. Veale and Ms. Hackworth recommended that the minimum be two years with a client history.

The committee discussed the suggestion to have staff approve initial applications. Ms. Veale and Chair Lippe expressed concern regarding delegating this approval to staff.

Ms. Veale provided that staff can approve renewal applications.

Ms. Shellans suggested that the board ratify all initial applications approved by staff.

The committee agreed to continue its discussion and review the draft language by subdivision.

#### Subdivisions (a) and (a)(1)

(a) Agencies seeking to become approved accrediting agencies for pharmacies that compound sterile injectable drugs pursuant to Business and Professions Code section 4127.1 or section 4127.2 shall provide evidence satisfactory to the board that:

(1) The accrediting agency performs site inspections and re-accreditation reviews of each accredited pharmacy at least annually. Site inspections shall be conducted to ensure compliance with pharmacy law laws governing the compounding of sterile injectable products.

Ms. Veale discussed that sterile injectable compounding licenses are inspected and renewed annually. She stated that this requirement for accreditation agencies would be consistent with the requirements for licensure by the board.

Chair Lippe provided that the standards for accreditation agencies should not be less stringent than the standards established for the board's licensees.

Ms. Herold clarified that this requirement is also applicable to non-resident pharmacies.

It was the consensus of the committee to maintain the language as drafted and to include the relevant law citations as previously directed.

#### Subdivision (a)(2)

(2) The standards for granting accreditation and scoring guidelines for those standards reflect California law and sound professional practice as established by nationally recognized professional or standards-setting organizations.

As previously advised by Ms. Shellans, the committee directed that the language be modified to specify the specific organizations.

### Subdivision (a)(3)

(3) The surveyors who perform site inspections possess qualifications necessary to evaluate the professional practices subject to accreditation. At least one member of the survey team must be a licensed pharmacist. All surveyors must maintain appropriate and unrestricted licensure.

The committee discussed that it is appropriate to require that at least one member of the survey team be a licensed pharmacist. It was the consensus of the committee to maintain the language as drafted.

### Subdivision (a)(4)

(4) The accrediting agency is recognized by at least one California healthcare payor (e.g., HMOs, PPOs, PBGH, CalPERS).

The committee discussed the intent of this requirement and questioned its inclusion as a requirement for the application process.

Dr. Dang provided that PCAB is recognized by organizations and not by a healthcare payor.

### Public Comment

Paul Lofholm, representing PCAB, provided that, with exception of JACHO and CHAPS, he believes that there are no payors within the community practice setting that recognize any accreditation agency. He recommended that the board encourage this recognition but not require it. Mr. Lofholm suggested that the board contact payors to see whether they are interested before requiring such a requirement.

Mr. Lofholm provided that PCAB represents eight national organizations. He suggested that the American Society of Health System Pharmacists and the United States Pharmacopeia be added to subdivision (2). Mr. Lofholm referred to subdivision (a)(3) and indicated that he believes it is critical to include a pharmacist as a member of the survey team.

Chair Lippe recommended that subdivision (a)(4) be removed.

Ms. Sodergren indicated that subdivision (b)(3) also requires payor information on the application.

It was the consensus of the committee to strike subdivision (a)(4) from the draft language.

### Subdivision (a)(5)

(5) The accrediting agency is able to accredit California and non-resident pharmacies.

Ms. Shellans sought clarification regarding the term “able” and asked whether this means the agency is physically capable or is authorized to accredit.

Ms. Herold clarified that the requirement ensures that the agency has sufficient personnel and resources to accredit California and non-resident pharmacies.

Ms. Veale expressed concern that the requirement is requiring agencies to accredit pharmacies outside of California.

Ms. Shellans discussed that it is important to ensure that the agency has adequate resources to perform the functions of an accreditation agency. She recommended that “and” be changed to “or.”

Ms. Sodergren provided that this provision was originally developed in 2003 as an equality issue to allow out of state pharmacies to realize the same privileges as California pharmacies.

It was the consensus of the committee to modify the language to read:

(5) The accrediting agency possesses sufficient personnel and resources to accredit California and non-resident pharmacies.

Ms. Herold provided that the term “sufficient” may need to be further clarified during the regulation process.

*The committee skipped ahead to subdivisions (d) and (e) of the draft language.*

### Subdivisions (d) and (e)

(d) The board shall consider the length of time the agency has been operating as an accrediting agency.

(e) The board shall be able to obtain access to an approved accrediting agency's report on individual pharmacies for a three year period.

Ms. Veale recommended that subdivisions (d) and (e) be renumbered to subdivisions (a)(6) and (a)(7) respectively.

Ms. Shellans recommended that language be added to new subdivision (a)(7) to require that the report be provided to the board within 10 days after the board's request.

Dr. Dang provided that 10 days is a sufficient amount of time for this requirement.

It was the consensus of the committee to add language to new subdivision (a)(7) to require that the reports be provided to the board within 10 days after the board's request.

#### Subdivisions (b) and (b)(1)

(b) An agency seeking recognition from the board must provide the board with the following information:

1. A comparison of the agency's sterile compounding standards with each of the components of this article and other California law regarding sterile injectable compounding.

Ms. Sodergren provided that this section specifies components of the application. She stated that staff will revise the language to specify that applicants must include all essential information including company name and contact information, etc.

Ms. Shellans recommended that the term "recognition" be changed to "approval" in subdivision (b).

#### Subdivision (b)(2)

2. List of employees performing survey inspections.

Ms. Sodergren provided that this section will be amended to require name, title, and license status of the employees performing survey inspections.

#### Subdivision (b)(3)

3. List of payors agency is recognized by.

The committee discussed that the agency may or may not be recognized by a payor. It was the consensus of the committee to maintain the language as drafted.

#### Subdivision (b)(4)

4. List of sites currently accredited by the agency.

Ms. Sodergren suggested that this section be amended to include the name, location, and license number.

### Subdivision (b)(5)

5. Detailed description of the process used to evaluate sites seeking accreditation or reaccreditation.

It was the consensus of the board to maintain the language as drafted.

### Subdivision (c)

- (c) If an accreditation agency determines, as a result of its inspection, that a sterile injectable compounding pharmacy is not in compliance with the pharmacy law, the accreditation agency may do any of the following:
1. Require correction of any identified deficiencies within a set timeframe.  
Failure to comply shall result in the accrediting agency issuing a reprimand or suspending or revoking the accreditation.
  2. Issue a reprimand.
  3. Suspend or revoke the licensed sterile injectable compounding pharmacy's accreditation.
  4. The accreditation agency shall, within 24 hours, report to the board any entity issued a reprimand or any entity whose accreditation has been suspended or revoked.

Ms. Shellans expressed concern regarding this provision and stated that the board may not have this authority. She suggested that the language be amended to require that the agency establish standards for requiring correction.

Ms. Sodergren discussed that the language is intended to establish expectations for the accreditation agencies.

Ms. Shellans provided that it may be acceptable to set a performance standard that agencies have a process in place to address non-compliance that may include paragraphs 1-4 as listed in the draft language.

Ms. Herold suggested that subdivision (c)(4) be renumbered to new subdivision (d). She also suggested that subdivision (c) be amended to read:

- (c) An approved accreditation agency has a process to address non-compliance that may include any or all of the following:
1. Require correction of any identified deficiencies within a set timeframe.  
Failure to comply shall result in the accrediting agency issuing a reprimand or suspending or revoking the accreditation.
  2. Issue a reprimand.
  3. Suspend or revoke the licensed sterile injectable compounding pharmacy's accreditation.

4. The accreditation agency shall, within 24 hours, report to the board any entity issued a reprimand or any entity whose accreditation has been suspended or revoked.

It was the consensus of the committee to approve the changes as suggested by Ms. Herold.

#### Subdivision (f)

- (f) On an annual basis, no later than July 1 of each year, an approved accrediting agency shall submit a report to the board listing all board-licensed facilities that have been accredited during the past 12 months with a notation of the outcome of each inspection.

Ms. Veale recommended that the report should list all current board-licensed facilities as well as board-licensed facilities that have been accredited during the past 12 months.

It was the consensus of the committee to amend subdivision (f) to read:

- (f) On an annual basis, no later than July 1 of each year, an approved accrediting agency shall submit a report to the board listing all board-licensed facilities that are currently accredited and have been accredited during the past 12 months with a notation of the outcome of each inspection.

#### Subdivision (g)

- (g) The board may conduct unannounced inspections of accredited sites to determine if the licensed facility is in compliance with California law and good professional practice.

Ms. Sodergren asked Ms. Shellans whether or not this language is needed.

Ms. Shellans indicated that she will evaluate the language and report back to the committee.

No changes were made to the language.

## Subdivision (h)

(h) This approval shall be good for a period of three years. Three months before the end of the approval period, an approved accrediting agency must submit a reapplication to the board for continued recognition as an approved accrediting agency. The Board of Pharmacy shall take action on a completed application at a scheduled board meeting.

Ms. Shellans recommended that language regarding due process and details on reapplication be added to this section.

The committee again discussed the application approval process as well as a possible appeal process.

Ms. Shellans again recommended that applications be approved by board staff and any appeals be brought to the full board. She stated that this will eliminate the need to convene a board meeting every time an application is submitted. Chair Lippe recommended that staff review all new applications and make a recommendation for board approval.

Ms. Sodergren discussed that applications will be denied when the minimum standards established by this regulation are not met. She stated that the board would not override a denied application that does not meet the minimum standards as established in the regulation.

Ms. Herold cautioned the board from establishing a licensing program. She stated that this is not the intent of this regulation.

Ms. Shellans discussed that staff typically review and approve these types of applications as the standards are established by the board in regulation.

Ms. Herold provided that staff can provide an annual report to the board on the approval statistics for accreditation agencies.

Ms. Veale provided that considering the importance of sterile compounding, initial applications that meet the standards should be forwarded to the board for approval. She stated that renewal applications can be approved by staff.

The committee agreed with Ms. Veale's comments.

Ms. Sodergren indicated that she will meet with Ms. Shellans to make the modifications to this subdivision as suggested by the committee.

Ms. Shellans provided that she will also work on development of an appeal process.

Subdivision (i)

(i) The board may evaluate the performance of an approved accreditation agency and may rescind its approval of the accreditation agency if the board's evaluation finds noncompliance with the standards established in this section.

Ms. Shellans discussed that the regulations needs to specify how the board's approval of any agency can be rescinded. She stated that the only grounds for the approval to be rescinded in the current draft language is if the agency violates standards established in this particular section.

Ms. Herold suggested that the language be modified to clarify that the board may rescind its approval of the accreditation agency for failure to conform with California pharmacy law, standards, and specific relevant code sections.

The committee agreed and directed staff to make modifications to the draft language as discussed.

No public comment was provided.

MOTION: Direct staff to revise the draft language as discussed for committee consideration.

M/S: Veale/Hackworth

Support: 3    Oppose: 0    Abstain: 0



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STATE AND CONSUMER SERVICES AGENCY  
DEPARTMENT OF CONSUMER AFFAIRS  
GOVERNOR EDMUND G. BROWN JR.

**Date: April 9, 2012**

**To: Licensing Committee**

**Subject: Agenda Item 2 --  
Recommendations for Regulation Changes**

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During this portion of the committee meeting, the committee will review, discuss and possibly recommend action by the board to adopt as new or amended regulations the following proposals affecting licensing issues.

- 1) Proposal to Specify Continuing Education Credit for Pharmacists in Specific Content Areas; Amendment to 16 California Code of Regulations Section 1732.5

For nearly only one year in meetings of this committee and of the board, there has been discussion about requiring continuing education in certain topics. At the February 2012 Board Meeting, the board determined to proceed with a rulemaking to require six of the 30 units required for pharmacist license renewal every two years to be in:

- Emergency/disaster Response
- Patient Consultation
- Maintaining Control of a Pharmacy's Drug Inventory
- Ethics
- Drug Abuse

The following proposals contains such an amendment:

**1732.5. Renewal Requirements for Pharmacists.**

- a. Except as provided in section 4234 of the Business and Professions Code and section 1732.6 of this Division, each applicant for renewal of a pharmacist license shall submit proof satisfactory to the board, that the applicant has completed 30 hours of continuing education in the prior 24 months.
- b. Effective July 1, 2013, at least six of the 30 units required for pharmacist license renewal shall be completed in one or more of the following subject areas:
  1. Emergency/Disaster Response,
  2. Patient Consultation,
  3. Maintaining Control of a Pharmacy's Drug Inventory,
  4. Ethics,
  5. Drug Abuse.

Pharmacists renewing their licenses which expire on or after July 1, 2015 shall be subject to the requirements of this subdivision.

- c. All pharmacists shall retain their certificates of completion for four years following completion of a continuing education course.

Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4231 and 4232, Business and Professions Code.

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2) Proposal to Award CE for Attending Board and Committee Meetings, Amendment to 16 California Code of Regulations, Section 1732.2

At the February Board Meeting, the board withdrew its proposed amendment to CCR 1732.2 to award CE for specific activities. The rulemaking was at that time undergoing review by the Office of Administrative Law, the final step in the regulation adoption process.

The reason the board withdrew the rulemaking was that it wished to reconsider and modify the CE that were to be awarded for attending board and committee meetings each renewal period.

Below is the excerpt of the proposed text that added the new CE amounts; the specific provisions the board wished to reconsider are in subdivisions (d) and (e).

1732.2. Board Accredited Continuing Education

- (a) Individuals may petition the board to allow continuing education credit hours for specific coursework which is not offered by a provider but meets the standards of Section 1732.3.
- (b) Notwithstanding subdivision (a) of this section, coursework which meets the standard of relevance to pharmacy practice and has been approved for continuing education by the Medical Board of California, the California Board of Podiatric Medicine, the California Board of Registered Nursing or the Dental Board of California shall, upon satisfactory completion, be considered approved continuing education for pharmacists.
- (c) A pharmacist serving on a designated subcommittee of the board for the purpose of developing the California Practice Standards and Jurisprudence Examination for pharmacists pursuant to section 4200.2 of the Business and Professions Code may annually be awarded up to six hours of continuing education hours for conducting a review of exam test questions. A subcommittee member shall not receive continuing education hours pursuant to this subdivision if that subcommittee member requests reimbursement from the board for time spent conducting a review of exam test questions.
- (d) A pharmacist or pharmacy technician who attends a full day board meeting may be awarded up to six hours of continuing education on an annual basis. The board shall designate on its public agenda

which day shall be eligible for continuing education credit. A pharmacist or pharmacy technician requesting continuing education hours pursuant to this subdivision must sign in and out on an attendance sheet at the board meeting that requires the individual to provide his or her first and last name, license number, time of arrival and time of departure from the meeting.

- (e) A pharmacist or pharmacy technician who attends a full committee meeting of the board may be awarded up to two hours of continuing education on an annual basis. A maximum of four continuing education hours may be earned each year by attending the full meetings of two different board committees. A pharmacist or pharmacy technician requesting continuing education hours pursuant to this subdivision must sign in and out on an attendance sheet at the committee meeting that requires the individual to provide his or her first and last name, license number, time of arrival and time of departure from the meeting.
- (f) An individual may be awarded three hours of continuing education for successfully passing the examination administered by the Commission for Certification in Geriatric Pharmacy.

At the February meeting, the board instead voted to award six units of continuing education per renewal period to a pharmacist or pharmacy technician who attends a full day of a board meeting, and two units of continuing education per renewal period to a pharmacist or pharmacy technician who attends a committee meeting.

An excerpt from the draft board meeting minutes from the February 2012 Board Meeting is provided as **Attachment 2(b)**

To comply with the board's motion, the following changes to proposed section 1732.2 are needed:

- (c) A pharmacist serving on a designated subcommittee of the board for the purpose of developing the California Practice Standards and Jurisprudence Examination for pharmacists pursuant to section 4200.2 of the Business and Professions Code may annually be awarded up to six hours of continuing education hours for conducting a review of exam test questions. A subcommittee member shall not receive continuing education hours pursuant to this subdivision if that subcommittee member requests reimbursement from the board for time spent conducting a review of exam test questions.
- (d) A pharmacist or pharmacy technician who attends a full day board meeting may be awarded ~~up to~~ six hours of continuing education per renewal period ~~on an annual basis~~. The board shall designate on its public agenda which day shall be eligible for continuing education credit. A pharmacist or pharmacy technician requesting continuing education hours pursuant to this subdivision must sign in and out on an attendance sheet at the board meeting that requires the

individual to provide his or her first and last name, license number, time of arrival and time of departure from the meeting.

- (e) A pharmacist or pharmacy technician who attends a full committee meeting of the board may be awarded ~~up to~~ two hours of continuing education ~~per renewal period on an annual basis. A maximum of four continuing education hours may be earned each year by attending the full meetings of two different board committees.~~ A pharmacist or pharmacy technician requesting continuing education hours pursuant to this subdivision must sign in and out on an attendance sheet at the committee meeting that requires the individual to provide his or her first and last name, license number, time of arrival and time of departure from the meeting.
- (f) An individual may be awarded three hours of continuing education for successfully passing the examination administered by the Commission for Certification in Geriatric Pharmacy.

If this draft language meets with the committee's approval, a motion to recommend adoption of the regulation is required, with a proposed amendments to add subdivisions (c) through (f) to section 1732.2 is required to restore the other new CE requirements.

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3) Proposal to Update Reference to Accreditation Agencies for Continuing Education, Amendment to 16 California Code of Regulations Section 1732.05.

The board recently received a request from the California Pharmacists Association requesting a modification to CCR section 1732.05 to reflect the restructuring of the Pharmacy Foundation of California and its transference of duties related to the provision of continuing education to the California Pharmacists Association. A letter from CPhA making this request is provided as **Attachment 2(c)**.

**1732.05. Accreditation Agencies for Continuing Education.**

- (a) The following organizations are approved as accreditation agencies:
  - (1) The Accreditation Council for Pharmacy Education.
  - (2) ~~The Pharmacy Foundation of California.~~ The California Pharmacists Association.
- (b) Accreditation agencies shall:
  - (1) Evaluate each continuing education provider seeking accreditation in accordance with the provider's ability to comply with the requirements of section 1732.1 of this Division.
  - (2) Maintain a list of the name and address of person responsible for the provider's continuing education program. The accreditation agency shall require that any change in the responsible person's identity shall be reported to the accreditation agency within 15 days of the effective date of the change.
  - (3) Provide the board with the names, addresses and responsible party of each provider, upon request.

- (4) Respond to complaints from the board, providers or from pharmacists concerning activities of any of its accredited providers or their coursework.
  - (5) Review at least one course per year offered by each provider accredited by the agency for compliance with the agency's requirements and requirements of the board and, on request, report the findings of such reviews to the board.
  - (6) Take such action as is necessary to assure that the continuing education coursework offered by its providers meets the continuing education requirements of the board; and
  - (7) Verify the completion of a specific continuing education course by an individual pharmacist upon request of the board.
- (c) Substantial failure of an approved accreditation agency to evaluate continuing education providers as set forth in subdivision (b) shall constitute cause for revocation of its approval as an accreditation agency by the board.

Authority cited: section 4005, Business and Professions Code. Reference: section 4232, Business and Professions Code.

## **DRAFT MINUTES EXCERPT: January 31 and February 1, 2012 Board Meeting**

### **e. Discussion and Possible Action on a Proposal to Specify Continuing Education Credit for Pharmacists in Specific Content Areas**

#### Report

Mr. Lippe provided that for some months at meetings of the board or its committees, there have been general discussion about developing requirements for pharmacists to earn CE in specific subject matter areas. He stated to establish such a requirement would take either a legislative or regulation change.

Mr. Lippe provided that prior discussions have included possible mandatory CE in emergency/disaster response, patient consultation, drug abuse or in maintaining control of a pharmacy's drug inventory. He stated that any topic the board determines as appropriate for mandatory CE should have generally broad-based applicability for pharmacists.

Mr. Lippe provided that during the October 2011 Board Meeting, the board directed the committee to continue its discussion about such a requirement and specified that if the recommendation is approved, to authorize staff to investigate implementation.

Mr. Lippe provided that during the meeting the committee spoke generally about the board's current policy to award continuing education for attending board and committee meetings. He stated that in addition, the committee discussed the proposal to require continuing education in specific content areas.

Mr. Lippe reviewed the following committee recommendation. Ms. Veale seconded the committee's motion.

MOTION: Modify the current amount of continuing education awarded to a pharmacist or pharmacy technician for attendance at a full day board meeting to six hours per renewal period. No continuing education credit will be offered for attendance at committee meetings.

#### Discussion

Ms. Veale reflected on the committee's discussion. She discussed that the committee is seeking to update the board's CE policy by modifying the amount of credit earned for attendance at board meetings and establishing specific content areas for CE. Ms. Veale provided that the committee felt that earning 20 hours for attendance at board meetings out of the 30 required CE hours per renewal period was not balanced and does not add to a pharmacist's competency.

Dr. Castellblanch discussed that he believes it is valuable for pharmacists to see the board's policy process by attending board meetings. He also expressed concern that the committee is recommending that no credit be offered for attendance at committee meetings.

Ms. Veale discussed that committee meetings are often only a few hours to a half day long. She stated that the committee was unsure of how much credit to award given this variance. Ms. Veale discussed that managing attendance at these meetings may also be an administrative burden for board staff.

DCA Staff Counsel Kristy Shellans discussed that the board's current CE policy would change if the committee's motion is adopted by the board. She stated the board will also have to amend the board's current regulatory proposal that has been filed with the Office of Administrative Law (OAL).

Mr. Brooks spoke in support of awarding prorated credit for committee attendance.

Dr. Kajjoka also provided comment in support of awarding some CE credit for attendance at committee meetings as it is an opportunity for licensees to observe the board's regulatory process.

**MOTION:** Licensing Committee: Modify the current amount of continuing education awarded to a pharmacist or pharmacy technician for attendance at a full day board meeting to six hours per renewal period. No continuing education credit will be offered for attendance at committee meetings.

Support: 0    Oppose: 8    Abstain: 1

Mr. Lippe offered a proposal to accept six hours per renewal period earned for attendance at a full day board meeting and two hours per renewal period for attendance at a committee meeting.

Dr. Castellblanch seconded the proposal.

#### Public Comment

Mary Ann Sullivan asked how many pharmacists are actually satisfying their CE requirement by earning 20 hours from board meeting attendance. She expressed concern regarding whether or not this change is needed.

Dennis McAllister, representing the Arizona Board of Pharmacy, provided that Arizona has also discussed this issue and determined that its licensees can satisfy 10 percent of their CE requirement by attending board and committee meetings.

Ms. Veale provided that the committee did evaluate how much CE was being awarded by other boards of pharmacy and indicated that 20 hours was very high in comparison.

**MOTION:** Modify the current amount of continuing education awarded to a pharmacist or pharmacy technician for attendance at a full day board meeting to six hours per renewal period and two hours per renewal period for attendance at a committee meeting.

M/S: Lippe/Castellblanch

Support: 9    Oppose: 0    Abstain: 0

Ms. Herold recommended that the board withdraw its current rulemaking that is with the OAL and begin a new rulemaking.

**MOTION:** Withdraw the current rulemaking filed with the Office of Administrative Law and re-notice a new rulemaking consistent with the board's approved modifications for a 45-day public comment period.

M/S: Lippe/Hackworth

Support: 9    Oppose: 0    Abstain: 0



April 5, 2012

California Board of Pharmacy  
Ms. Virginia Herold, Executive Officer  
1625 North Market Blvd  
Suite N219  
Sacramento, CA 95834

Dear Ms. Herold:

According to Article 4 of Division 17, Title 16, section 1732.05 of the California Code of Regulations (enclosed), the California Board of Pharmacy recognizes the Pharmacy Foundation of California (PFC) as an approved accreditation agency for continuing education.

Due to financial challenges resulting from the current state of the economy, the Pharmacy Foundation of California (PFC) is currently undergoing a major restructure. As part of that restructure, PFC has transferred all of its capacities and functions for offering continuing education to the California Pharmacists Association (CPhA).

As a result of this conversion, PFC requests the Board of Pharmacy amend Section 1732.05 to reflect this change in accreditation agency from the Pharmacy Foundation of California to the California Pharmacists Association (CPhA). All systems, processes, and accreditation standards that applied to PFC will remain under CPhA.

Thank you for your assistance and please contact me with any questions or concerns at 916-779-1400.

Sincerely,

A handwritten signature in black ink, appearing to read "JR Roth", written in a cursive style.

Jon R. Roth, CAE  
Interim Executive Director, Pharmacy Foundation of California  
Chief Executive Officer, California Pharmacists Association

Enclosure



**California State Board of Pharmacy**  
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STATE AND CONSUMER SERVICES AGENCY  
DEPARTMENT OF CONSUMER AFFAIRS  
GOVERNOR EDMUND G. BROWN JR.

**Date: April 9, 2012**

**To: Licensing Committee**

**Subject: Agenda Item 3 --  
Issuance of Public Reprimands**

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Background:

Before issuing a license, the board does a background review of all applicants for licensure. This review is also done on the owners and officers of applicants for site licenses. There are several components to this review.

The background review includes mandatory submission of fingerprints, which are reviewed at state and federal levels to determine prior arrests and convictions within and outside California. The board reviews the reports of arrests and convictions it obtains from the courts and law enforcement agencies before making any licensing decision. The board also asks questions about prior convictions on every application, and collects information from the applicant about these events.

The board also requires information about prior administrative actions taken by any regulatory agency against an applicant. It collects this information in several ways, one by requiring responses to specific questions on the applications -- signed under penalty of perjury about the truth of the responses -- that there has been no prior discipline. Increasingly the board also relies upon national HIPDP data base searches to ensure the accuracy of the self reported information collected on the application. Pharmacy technician applications must now submit a "self query report" from the HIPDB to ensure the accuracy of their responses. A similar requirement for interns and pharmacists technicians has been approved by the board as a regulation and the regulation requirements are undergoing review by the Administration.

Sometimes the information gained from these background reviews shows serious violations in an applicant's past. In such cases, when the matters are substantially related to the duties of the license, the board denies the license or may issue a probationary license. Currently, these are the only two options open to the board when making a licensing decision about an application.

But some violations while serious, are not sufficient or are so old that the board would have difficulty in denying the license today based on the violation.

This issue is faced by all boards when making a licensing decision about an applicant. The Medical Board has a provision in its statutes that provides another alternative – issuance of the license, but with a public reproof.

Proposal:

Staff suggest the board's review and action to seek addition of such a provision to the board's statutory provisions to address this issue.

Here is the Medical Board's provision:

- 2221.05.** (a) Notwithstanding subdivision (a) of Section **2221**, the board may issue a physician's and surgeon's certificate to an applicant who has committed minor violations that the board deems, in its discretion, do not merit the denial of a certificate or require probationary status under Section **2221**, and may concurrently issue a public letter of reprimand.
- (b) A public letter of reprimand issued concurrently with a physician's and surgeon's certificate shall be purged three years from the date of issuance.
- (c) A public letter of reprimand issued pursuant to this section shall be disclosed to an inquiring member of the public and shall be posted on the board's Internet Web site.
- (d) Nothing in this section shall be construed to affect the board's authority to issue an unrestricted license.

For the Board of Pharmacy, this would look something like:

- 4310.5** (a) Notwithstanding subdivision (c) Section 4300, the board may issue a license to an applicant who has committed minor violations that the board deems, in its discretion, do not merit the denial of a certificate or require probationary status under Section 4300, and may concurrently issue a public letter of reprimand.
- (b) A public letter of reprimand issued concurrently with a board license shall be purged three years from the date of issuance.
- (c) A public letter of reprimand issued pursuant to this section shall be disclosed to an inquiring member of the public and shall be posted on the board's Internet Web site.
- (d) Nothing in this section shall be construed to affect the board's authority to issue an unrestricted license.



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**California State Board of Pharmacy**

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STATE AND CONSUMER SERVICES AGENCY

DEPARTMENT OF CONSUMER AFFAIRS

GOVERNOR EDMUND G. BROWN JR.

**Date: April 9, 2012**

**To: Licensing Committee**

**Subject: Agenda Item 4 --  
Proposal Regarding Wholesalers Purchasing Drugs from Pharmacies**

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This item will be rescheduled for a future meeting.



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STATE AND CONSUMER SERVICES AGENCY

DEPARTMENT OF CONSUMER AFFAIRS

GOVERNOR EDMUND G. BROWN JR.

**DATE:** April 12, 2012  
**TO:** Licensing Committee  
**SUBJECT:** Pharmacy Technician Application

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Historically a significant majority of pharmacy technician applications were received with deficiencies. This resulted in delays in processing applications and issuing licenses. To remedy this, in October 2011, the board began using a revised pharmacy technician application. The revised application more clearly specifies the requirements for licensure as well as the information necessary to confirm compliance. In addition, changes were made to reduce the likelihood of applicants providing false information to the board.

Business and Professions Code section 4202(a) specifies an individual is a high school graduate or possesses a general education development (GED) certificate. The revised application now requires the applicant to submit an official high school transcript or GED test scores as a result of applicants providing fraudulent documents indicating they had graduated high school.

California Codes of Regulations section 1793.5(a)(4) now specifies the applicant must provide a sealed original Self-Query Report from the National Practitioner Data Bank Healthcare Integrity and Protection Data Bank (NPDB-HIPDB). This query validates the information provided by the applicant about their background.

To ensure more complete applications are received, staff has been reaching out to the pharmacy technician programs notifying them of the revised application and what is required to make an application complete.

The number of deficient applications the board receives is reducing each month. In October 2011 79% of applications received were deficient compared to February 2012 where 49% of the applications were deficient. Receiving completed applications allows the board to process applications and issue licenses to qualified applicants more quickly.



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STATE AND CONSUMERS AFFAIRS AGENCY  
DEPARTMENT OF CONSUMER AFFAIRS  
GOVERNOR EDMUND G. BROWN JR

**Date: April 12, 2012**

**To: Licensing Committee**

**SUBJECT: Pharmacist Examination Requirements and Pharmacy Practice Experience**

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Relevant Statute

Business and Professions Code Section 4200 establishes the requirements for an applicant to be deemed eligible for the pharmacist licensure examination. The requirements include the following:

1. At least 18 years of age.
2. Graduation from a school of pharmacy recognized by the board or certification by the Foreign Pharmacy Graduate Examination Committee if the applicant is a graduate from a foreign county.
3. A minimum of 150 semester unit, no less than 90 of those must be completed at a school of pharmacy.
4. At least a baccalaureate degree in a course of study devoted to the practice of pharmacy.
5. Completion of 1500 of pharmacy practice experience.
6. Pass the North American Pharmacist Licensure Examination and the California Practice Standards and Jurisprudence Examination for Pharmacists.

For Information

Over the past several years the committee and board have discussed the requirements for pharmacist licensure, especially in the area of intern hour experience. For this meeting staff prepared a comparison of California requirements with several other states. Provided below is very brief information on three general areas: examination; education; and experience. Following this memo is information collected by the National Association of Boards of Pharmacy that details specific requirements for each state.

**Examination**

All states require pharmacist examination applicants to pass the North American Pharmacist Licensure Examination (NAPLEX) and all but seven states required the Multistate Pharmacy Jurisprudence Examination (MPJE). California is one of the seven that does not require the MPJE as it has its own California Jurisprudence Pharmacist Examination (CPJE).

**Education**

Although states vary in the method by which they confirm education, all states require similar education requirements for domestic graduates including graduation from a school of pharmacy by the Accreditation Council for Pharmacy Education (ACPE).

**Experience**

One area where states vary is in the number of intern hours experience as well as the method by which such experience is verified. The majority of the states require a minimum of 1,500 hours of practice experience. Some state accept hours in conjunction with academic credit and some states accept hours earned and verified by another state board of pharmacy.

### 3. Examination Requirements

State	Examinations				Does State Participate in NAPLEX Score Transfer Program?	Validity Period for a NAPLEX Score Transfer?
	NAPLEX®	MPJE®	Non-MPJE Law Examination	Other		
Alabama	Yes	Yes	No	Interview	Yes	1 year
Alaska	Yes	Yes	No	No	Yes	1 year
Arizona	Yes	Yes	No	No	Yes	1 year
Arkansas	Yes	No	Yes	No	Yes	1 year
California	Yes	No	Yes E	No	Yes J	N/A
Colorado	Yes	Yes	No	No	Yes	1 year
Connecticut	Yes	Yes	No	C, G	Yes	1 year
Delaware	Yes	Yes	No	No	Yes	1 year
District of Columbia	Yes	Yes	No	No	Yes	1 year
Florida	Yes	Yes	No	No	Yes	3 years
Georgia	Yes	Yes	No	Yes H	Yes	None
Guam	Yes	No	Yes	Interview	Yes	Not addressed
Hawaii	Yes	Yes	No	No	Yes	Not addressed
Idaho	Yes	Yes	No	No	Yes	1 year
Illinois	Yes	Yes	No	No	Yes	1 year
Indiana	Yes	Yes	No	No	Yes	1 year
Iowa	Yes	Yes	No	No	Yes	1 year
Kansas	Yes	Yes	No	No	Yes	1 year
Kentucky	Yes	Yes	No	No	Yes	1 year
Louisiana	Yes	Yes	No	No	Yes D	1 year
Maine	Yes	Yes	No	No	Yes	1 year
Maryland	Yes	Yes	—	Yes L	Yes	1 year
Massachusetts	Yes	Yes	No	No	Yes	1 year
Michigan	Yes	Yes	No	No	Yes	Not addressed
Minnesota	Yes	Yes	No	No	Yes	1 year
Mississippi	Yes	No	Yes	No	Yes	1 year I
Missouri	Yes	Yes	No	No	Yes D	Indefinite
Montana	Yes	Yes	No	No	Yes	1 year
Nebraska	Yes	Yes	No	No	Yes	1 year
Nevada	Yes	Yes	No	No	Yes	1 year
New Hampshire	Yes	Yes	No	No	Yes	1 year †
New Jersey	Yes	Yes	No	No	Yes	None
New Mexico	Yes	Yes	No	No	Yes	Not addressed
New York	Yes	Yes	No	Yes H	Yes	5 years
North Carolina	Yes	Yes	No	No	Yes	2 years
North Dakota	Yes	Yes	No	Yes F, K, M	Yes	3 years
Ohio	Yes	Yes	No	No	Yes	1 year
Oklahoma	Yes	No	Yes	Interview	Yes	1 year
Oregon	Yes	Yes	No	No	Yes	1 year
Pennsylvania	Yes	Yes	No	—	Yes	6 months
Puerto Rico	Yes B	No	Yes A	No	Yes	3 years
Rhode Island	Yes	Yes	No	No	Yes	6 months
South Carolina	Yes	Yes	No	No	Yes	1 year
South Dakota	Yes	Yes	No	Interview	Yes	1 year
Tennessee	Yes	Yes	No	No	Yes	1 year
Texas	Yes	Yes	No	No	Yes	2 years
Utah	Yes	Yes	No	No	Yes	1 year
Vermont	Yes	Yes	No	—	Yes	1 year
Virginia	Yes	No	Yes I	—	Yes	1 year
Washington	Yes	Yes	No	No	Yes	1 year
West Virginia	Yes	Yes	No	K	Yes	1 year
Wisconsin	Yes	Yes	No	No	Yes	1 year
Wyoming	Yes	Yes	No	No	Yes	1 year

Colored text denotes change from 2010 edition.

† Other comments noted in 2010 edition no longer apply.

### 3. Examination Requirements (cont.)

2011

NATIONAL ASSOCIATION  
OF BOARDS OF PHARMACY  
Survey of  
Pharmacy Law

Laws in all states, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands require applicants for licensure to (1) graduate from an accredited first professional degree program of a college of pharmacy; and (2) pass an examination given by the board of pharmacy. All states, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands use the North American Pharmacist Licensure Examination® (NAPLEX®).

The Pre-NAPLEX®, a practice examination, will familiarize pharmacy students and graduates with the NAPLEX testing experience. Accessible through [www.nabp.net](http://www.nabp.net) and [www.pre-naplex.com](http://www.pre-naplex.com), students can sit for the practice examination 24 hours a day, seven days a week from any location with Internet access. The fee for the Pre-NAPLEX is \$50 per attempt. There are two forms and the test can be taken twice. See the NABP Web site for more information.

LICENSING  
LAW

#### LEGEND

- |  |   |
|--|---|
| A — State law examination prepared by the Board.   | F — Oral patient consultation examination.  |
| B — Candidate may choose to take the NAPLEX or an examination prepared by the Board.   | G — Plus pharmaceutical calculations examination.   |
| C — General Pharmacy Practice Examination, including Dispensing Laboratory Examination. (CT – Does not include Dispensing Laboratory Examination.)   | H — Practical examination. (GA – Wet laboratory examination/errors and omission examination. NY – Candidates who enter approved residencies may apply for a waiver of the practical examination.) |
| D — State will score transfer on a reciprocal basis with any other state that will accept its scores.  | I — Combined state/federal law examination.   |
| E — In addition, examination must contain items to demonstrate a candidate's proficiency in patient communication as well as aspects of contemporary standards of practice in California, including the provision of pharmacist care and the application of clinical knowledge that are not evaluated by the NAPLEX. | J — If score was earned after January 1, 2004.  |
|  | K — Errors and Omissions Examination.   |
|  | L — Pre-screening examination of oral English competence unless individual has taken TOEFL® or TSE®.  |
|  | M — Practice examination prepared by the Board.   |

#### NABPLAW Online Search Terms

##### Examination Requirements (type as indicated below)

- ◆ jurisprudence & examination
- ◆ licensure & examination & requirements
- ◆ NAPLEX | MPJE | "National Association of Boards of Pharmacy Licensure Examination" | "Multistate Pharmacy Jurisprudence Examination"
- ◆ NAPLEX | MPJE | "North American Pharmacist Licensure Examination" | "Multistate Pharmacy Jurisprudence Examination"
- ◆ score & transfer

## 4. Pharmacy Practice Experience Hour Requirements

Table 4 responds to the following questions:

1. Number of hours of practical experience required by the Board?
2. Number of hours of practical experience required post graduation?
3. In which academic year does Board recognition of pharmacy internship/externship credit begin?
4. Number of hours of college-supervised experience recognized by the Board?

State	1.	2.	3.	4.
Alabama	1,500 B	—	first professional year	1,500 hours internship may be obtained through a college-structured or nonstructured program, all under the supervision of a registered preceptor. 400 hours of the minimum total requirement must be obtained after completing the requirements of the third professional year. The 400 hours must be completed in a traditional setting, so emphasis is on distribution of medicines, prescriptions, and medical supplies.
Alaska	1,500 B	None	after third year of a five- or six-year program	1,500 hours internship required by Board. Maximum of 1,000 hours completed in conjunction with educational requirement of the college of pharmacy.
Arizona	1,500 B	None	first professional year	1,500 hours.
Arkansas	2,000	None	first professional year	Actual hours accepted for internship in conjunction with year of academic credit, 1,500 hours for PharmD program. Additional internship credit accepted while enrolled in school, but not in class.
California	1,500 C	None	first professional year	Minimum of 900 hours internship time in a pharmacy under a pharmacist's supervision; 600 hours granted at Board's discretion, which may include 600 hours clinical clerkship.
Colorado	1,500	None	first professional year	1,500 hours.
Connecticut	1,500	None	after the completion of the second professional year	1,500 internship hours while enrolled in ACPE-accredited college of pharmacy. Maximum of 40 hours per week. While enrolled not more than 400 hours can be obtained from noncollege of pharmacy traditional experience.
Delaware	1,500	None	first professional year	Full credit for college-supervised programs.
Dist. of Columbia	1,500/1,000 B	—	first professional year	1,000 internship hours while enrolled.
Florida	2,080 (varies) D	—	first professional year	Varies.
Georgia	1,500 B	—	first professional year	1,000 hours for PharmD program.
Guam	1,500 C	None	after completion of third academic year	1,500 hours.
Hawaii	1,500 C	None	after successful completion of first professional year	1,500 hours.
Idaho	1,500 B	None	admission to a college of pharmacy	1,500 hours.
Illinois	400 B	None	first professional year	400 hours internship in conjunction with academic credit.
Indiana	1,500	None	first professional year	The number of hours required by an ACPE- or CCAPP-accredited college of pharmacy or other Board-approved experiential program. For those who have not graduated from such a program, 1,500 hours.
Iowa	1,500 B	None	after one semester within a college of pharmacy	1,250 hours internship in conjunction with academic credit; additional 250 hours required in traditional hospital or general pharmacy outside academia.

Colored text denotes change from 2010 edition.

## 4. Pharmacy Practice Experience Hour Requirements (cont.)

Table 4 responds to the following questions:

1. Number of hours of practical experience required by the Board?
2. Number of hours of practical experience required post graduation?
3. In which academic year does Board recognition of pharmacy internship/externship credit begin?
4. Number of hours of college-supervised experience recognized by the Board?

State	1.	2.	3.	4.
Kansas	1,500 B	None	admission to a college of pharmacy	1,500 hours required by Board.
Kentucky	1,500	None	admission to a college of pharmacy	Credit shall be awarded for each hour of successful completion of an academic experience program at a college or school of pharmacy approved by the Board.
Louisiana	1 yr C 1,500 B	None	first professional year	Maximum credit of 1,000 hours for structured program.
Maine	1,500	None	first professional year	1,500 hours. At least 500 hours must be completed in the United States.
Maryland	1,560/1,000	None	first professional year	University of Maryland or Howard University College of Pharmacy students up to 1,000 hours; college of pharmacy students from other United States pharmacy schools up to 1,560 hours.
Massachusetts	1,500	None	after completion of second year	1,500 hours required by Board of which at least 1,000 hours has been acquired in a pharmacy or pharmacy-related setting approved by the Board.
Michigan	1,000	None	first professional year	40 hours a week while enrolled but not in classes; 16 hours a week while attending classes. Board-approved practical experience within college program varies by college. 1,000 hours required.
Minnesota	1,600	None	after first professional year	400 hours while attending classes; 1,600 hours allowed by Board. 800 hours must be actual dispensing hours.
Mississippi	1,600	None	first professional year	Up to 800 hours while enrolled but not in classes; 800 hours in conjunction with academic credit.
Missouri	480/1,500	None	after 30 hrs of college of pharmacy	480 hours required for those attending in-state pharmacy schools only. 1,500 hours required for those attending out-of-state pharmacy schools or for foreign graduates.
Montana	1,500 B	None	enrollment in professional program	1,500 hours in conjunction with academic credit.
Nebraska	1,500 B	None	first professional year	Up to 1,500 hours for a PharmD degree in conjunction with academic credit.
Nevada	1,500 C	None	enrollment in professional program	1,500 hours required by Board.
New Hampshire	1,500 B, C	None	summer preceding first professional year	Full credit for college-supervised programs.
New Jersey	1,000 B	Varies	first professional year	Varies. 1,000 hours required by regulation.
New Mexico	2,150 B	None	after 30 semester hrs of college of pharmacy credit	1,650 hours.
New York	6 mos B (1,040 hrs)	None	after first professional year	Graduates of registered or accredited programs leading to the doctor of pharmacy degree shall be considered to have completed the internship requirement.
North Carolina	1,500 D	None	after second academic year	Actual hours worked.
North Dakota	1,500	None	after first academic year	1,500 hours required by rule.

Colored text denotes change from 2010 edition.

## 4. Pharmacy Practice Experience Hour Requirements (cont.)

Table 4 responds to the following questions:

1. Number of hours of practical experience required by the Board?
2. Number of hours of practical experience required post graduation?
3. In which academic year does Board recognition of pharmacy internship/externship credit begin?
4. Number of hours of college-supervised experience recognized by the Board?

State	1.	2.	3.	4.
Ohio	1,500 B	None	after successful completion of 60 semester hrs or 90 quarter hrs of college and beginning professional classes	Board-approved hours. Graduates of registered or accredited programs leading to the doctor of pharmacy degree shall be considered to have completed the internship requirement.
Oklahoma	1,500	None	first professional year	Up to 1,500 hours.
Oregon	1,440 E	None	enrolled in a course of study and in good academic standing at a school or college of pharmacy approved by the Board.	1,440 hours required by the Board. E
Pennsylvania	1,500	None	A	Up to 750 hours in conjunction with academic credit.
Puerto Rico	1,500	None	first professional year	1,500 hours. At least 500 of the hours must be in community pharmacy.
Rhode Island	1,500	None	first professional year	1,500 hours required by Board.
South Carolina	1,500 C	None	three months prior to entering pharmacy school	Up to 1,000 hours in conjunction with academic credit.
South Dakota	2,000 B	None	first professional year	1,740 hours.
Tennessee	1,500 B	None	first professional year	1,100 hours in conjunction with academic credit; 400 hours may be obtained through nontraditional programs.
Texas	1,500 B	None	upon enrollment in a Texas school or college of pharmacy whose professional degree program has been accredited by ACPE and approved by the Board or after a student has successfully completed the first professional year with a minimum of 30 credit hours towards a professional degree in pharmacy.	Pharmacist interns completing a Board-approved Texas-college-based structured internship will be awarded the number of hours actually obtained. No credit shall be awarded for didactic experience.
Utah	1,500 C	None	first professional year	900 hours in conjunction with academic credit. At least 120 hours each in community, hospital, and one other pharmacy practice setting.
Vermont	1,500 C	None	first professional year	Up to 1,000 hours in conjunction with academic credit. F
Virginia	1,500	None	Upon enrollment in an ACPE-accredited school of pharmacy when practical experience conforms to current ACPE standards.	1,500 hours within an ACPE-accredited program that must be gained within the US.
Washington	1,500	None	after first quarter/semester of pharmacy education	1,200 hours in conjunction with academic credit.
West Virginia	1,500 C	None	upon pharmacy school enrollment	800 hours allowed by the Board.
Wisconsin	1,500 B	None	second year of pharmacy school curriculum	Up to 1,500 pharmacy school hours for a PharmD program.
Wyoming	1,200 B	None	P1 year once academic studies have begun. P4 clinical clerkship fulfills 1,200 hour requirement.	1,200 hours of college-supervised clinical clerkship.

Colored text denotes change from 2010 edition.

## 4. Pharmacy Practice Experience Hour Requirements (cont.)

2011

All jurisdictions require candidates for licensure to have a record of practical experience or internship training acquired under the supervision and instruction of a licensed practitioner.

NATIONAL ASSOCIATION  
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Survey of  
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### LEGEND

- A — Applicant must successfully complete two years of pharmacy college or an accredited program leading to transfer into the third year of a pharmacy college in which the applicant is enrolled or accepted.
- B — Required by rule or regulation.
- C — Required by statute.
- D — Applicants with ACPE-accredited PharmD received after January 1, 2001, are deemed to have met internship requirements for licensure.
- E — Starting with graduating class of 2011.
- F — New change effective January 1, 2012 – 1,740 hours will be required, of which 1,240 hours in conjunction with academic credit will be acceptable.

LICENSING  
LAW

### NABPLAW Online Search Terms

**Practical Experience: Internship Hours** (*type as indicated below*)

- ◆ interns & requirements
- ◆ internship & hours
- ◆ internship & licensure & requirements
- ◆ practical & experience & requirements



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STATE AND CONSUMER SERVICES AGENCY

DEPARTMENT OF CONSUMER AFFAIRS

GOVERNOR EDMUND G. BROWN JR.

Date: April 9, 2012  
To: Board Members  
Subject: Competency Committee Update

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**California Practice Standards and Jurisprudence Examination for Pharmacists (CPJE)**

The board instituted a quality assurance review of the CPJE effective April 2, 2012. This process is done periodically to ensure the reliability of the examination. As of the date of this report, the quality assurance review is still under review. Based on historical patterns, the board anticipates results being released approximately August 2012.

**Examination Development**

Competency Committee workgroups will continue to conduct examination development meetings during the spring of 2012.

Board of Pharmacy Licensing Statistics - Fiscal Year 2011/12

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN*	FYTD
<b>APPLICATIONS</b>													
Received													
Pharmacist (exam applications)	153	144	105	119	191	80	92	67	108				1059
Pharmacist (initial licensing applications)	149	449	90	381	161	102	106	51	64				1553
Intern pharmacist	36	474	389	296	63	59	112	95	163				1687
Pharmacy technician	929	1127	1054	383	541	476	767	734	959				6970
Pharmacy	23	35	27	14	22	42	28	33	24				248
Pharmacy Exempt	0	0	1	0	0	0	0	1	0				2
Pharmacy - Temp	11	14	6	0	6	19	8	0	6				70
Sterile Compounding	0	9	2	4	7	11	3	4	3				43
Sterile Compounding - Exempt	0	0	0	0	0	0	0	0	0				0
Sterile Compounding - Temp	0	4	0	0	0	5	0	0	2				11
Nonresident Sterile Compounding	1	1	2	0	0	0	1	3	0				8
Clinics	3	3	9	3	8	0	6	14	8				54
Clinics Exempt	0	0	2	0	0	0	0	1	0				3
Hospitals	1	1	0	0	1	0	0	0	0				3
Hospitals Exempt	0	0	0	0	0	0	0	0	0				0
Hospitals - Temp	0	0	0	0	0	0	0	0	0				0
Drug Room	0	0	0	0	0	0	0	0	0				0
Drug Room Exempt	0	0	0	0	0	0	0	0	0				0
Nonresident Pharmacy	4	5	5	2	10	55	6	6	6				99
Nonresident Pharmacy - Temp	1	0	3	0	0	45	0	0	2				51
Licensed Correctional Facility	0	0	0	0	0	0	0	0	0				0
Hypodermic Needle and Syringes	0	2	0	3	6	0	0	0	2				13
Hypodermic Needle and Syringes Exempt	0	0	0	0	0	0	0	0	0				0
Nonresident Wholesalers	7	11	7	5	15	14	4	11	18				92
Nonresident Wholesalers - Temp	1	0	0	0	0	8	0	0	0				9
Wholesalers	5	8	10	6	9	19	5	4	4				70
Wholesalers Exempt	0	0	0	0	0	0	0	1	0				1
Wholesalers - Temp	1	1	0	0	1	0	0	0	1				4
Veterinary Food-Animal Drug Retailer	0	0	1	0	0	0	0	0	0				1
Veterinary Food-Animal Drug Retailer - Temp	0	0	0	0	0	0	0	0	0				0
Designated Representatives	53	53	67	12	39	40	39	46	42				391
Designated Representatives Vet	0	1	1	0	0	0	0	2	0				4
Total	1378	2342	1781	1228	1080	975	1177	1073	1412	0	0	0	12446

Board of Pharmacy Licensing Statistics - Fiscal Year 2011/12

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN*	FYTD
Issued													
Pharmacist	125	437	113	338	150	143	120	53	58				1537
Intern pharmacist	40	229	296	386	181	126	101	99	114				1572
Pharmacy technician	554	730	1200	1362	870	709	549	780	1023				7777
Pharmacy	18	22	27	29	7	8	18	22	23				174
Pharmacy - Exempt	0	0	1	0	0	0	0	0	1				2
Pharmacy - Temp	0	0	0	0	0	0	0	0	0				0
Sterile Compounding	2	2	2	1	4	4	5	4	1				25
Sterile Compounding - Exempt	0	0	0	0	0	0	0	0	0				0
Sterile Compounding - Temp	0	0	0	0	0	0	0	0	0				0
Nonresident Sterile Compounding	2	2	4	1	1	0	1	1	2				14
Clinics	1	2	7	1	4	2	2	4	6				29
Clinics Exempt	1	0	0	2	0	0	0	1	0				4
Hospitals	1	0	0	0	1	2	0	1	0				5
Hospitals Exempt	0	0	0	0	0	0	0	0	0				0
Hospitals - Temp	0	0	0	0	0	0	0	0	0				0
Drug Room	0	0	1	0	0	0	0	0	0				1
Drug Room Exempt	0	0	0	0	0	0	0	0	0				0
Nonresident Pharmacy	3	1	5	4	8	4	4	9	2				40
Nonresident Pharmacy - Temp	0	0	0	0	0	0	0	0	0				0
Licensed Correctional Facility	1	0	0	0	0	0	0	0	0				1
Hypodermic Needle and Syringes	3	2	2	0	0	1	1	1	0				10
Hypodermic Needle and Syringes Exempt	0	0	0	0	0	0	0	0	0				0
Nonresident Wholesalers	9	10	6	8	7	1	11	8	3				63
Nonresident Wholesalers - Temp	0	0	0	0	0	0	0	0	0				0
Wholesalers	4	5	10	15	1	11	2	1	4				53
Wholesalers Exempt	0	1	0	0	0	0	0	0	0				1
Wholesalers - Temp	0	0	0	0	0	0	0	0	0				0
Veterinary Food-Animal Drug Retailer	0	0	0	0	0	0	1	0	0				1
Veterinary Food-Animal Drug Retailer - Temp	0	0	0	0	0	0	0	0	0				0
Designated Representatives	30	51	65	41	42	27	26	42	32				356
Designated Representatives Vet	0	0	2	2	1	0	0	0	1				6
Total	794	1494	1741	2190	1277	1038	841	1026	1270	0	0	0	11671

Board of Pharmacy Licensing Statistics - Fiscal Year 2011/12

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Pending													
Pharmacist (exam applications)	721	538	566	560	530	495	497	479	394				394
Pharmacist (eligible)	1407	1218	163	922	821	744	675	725	611				611
Intern pharmacist	146	358	475	382	260	190	113	107	133				133
Pharmacy technician	4712	4701	4681	3839	3275	2987	3108	2772	2573				2573
Pharmacy	80	89	84	76	91	122	126	114	114				114
Pharmacy - Exempt	0	0	0	0	0	0	0	1	1				1
Pharmacy - Temp	0	0	0	0	0	0	0	0	0				0
Sterile Compounding	8	15	15	19	22	27	22	18	19				19
Sterile Compounding - Exempt	0	0	0	0	0	0	0	0	0				0
Sterile Compounding - Temp	0	0	0	0	0	0	0	0	0				0
Nonresident Sterile Compounding	13	12	10	9	8	8	13	13	10				10
Clinics	7	8	10	14	18	15	19	20	21				21
Clinics - Exempt	7	7	9	7	7	7	20	7	7				7
Hospitals	2	2	3	5	4	1	7	1	2				2
Hospitals - Exempt	0	0	0	0	0	0	2	0	0				0
Hospitals - Temp	0	0	0	0	0	0	0	0	0				0
Drug Room	2	2	1	0	1	1	0	1	1				1
Drug Room - Exempt	0	0	0	0	0	0	1	0	1				1
Nonresident Pharmacy	44	45	45	47	47	95	0	56	94				94
Nonresident Pharmacy - Temp	0	0	0	0	0	0	97	0	0				0
Licensed Correctional Facility	0	0	0	0	0	0	0	0	0				0
Hypodermic Needle and Syringes	7	7	5	9	14	13	0	11	12				12
Hypodermic Needle and Syringes - Exempt	0	0	0	0	0	0	13	0	0				0
Nonresident Wholesalers	77	79	81	82	92	103	87	85	99				99
Nonresident Wholesalers - Temp	0	0	0	0	0	0	0	0	0				0
Wholesalers	52	55	55	45	54	62	66	56	56				56
Wholesalers - Exempt	2	1	1	1	1	1	1	2	2				2
Wholesalers - Temp	0	0	0	0	0	0	0	0	0				0
Veterinary Food-Animal Drug Retailer	0	0	1	0	1	1	0	0	0				0
Veterinary Food-Animal Drug Retailer - Temp	0	0	0	0	0	0	0	0	0				0
Designated Representatives	237	230	237	209	202	216	204	201	213				213
Designated Representatives Vet	4	5	2	1	0	0	0	2	1				1
Total	7528	7372	6444	6227	5448	5088	5071	4671	4364	0	0	0	4671

Board of Pharmacy Licensing Statistics - Fiscal Year 2011/12

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN*	FYTD
<b>Change of Pharmacist-in-Charge***</b>													
Received	95	145	122	98	205	128	99	134	153				1179
Processed	167	152	66	112	43	39	13	12	3				607
Pending	423	416	472	458	620	709	795	917	1067				1067
<b>Change of Exemptee-in-Charge***</b>													
Received	5	13	14	12	16	16	9	6	11				102
Processed	11	23	1	21	20	2	14	8	34				134
Pending	179	169	182	173	169	183	178	176	153				153
<b>Change of Permits</b>													
Received	33	70	68	32	96	43	83	87	75				587
Processed	43	40	28	143	60	13	9	135	117				588
Pending	209	239	279	168	204	234	308	260	218				218
<b>Discontinuance of Business***</b>													
Received	6	13	8	18	25	9	24	27	0				130
Processed	37	2	0	0	0	40	0	0	10				89
Pending	146	144	144	162	187	156	180	207	197				197
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY*	JUN*	FYTD
<b>Renewals Received</b>													
Pharmacist	1238	1811	1472	1128	1508	1436	1769	1591	1625				13578
Pharmacy technician	1875	2871	2235	1821	2456	2061	2932	2595	2766				21612
Pharmacy	112	246	290	789	219	563	616	837	841				4513
Pharmacy - Exempt	0	0	53	56	1	0	1	0	1				112
Sterile Compounding	8	15	16	16	7	15	20	15	13				125
Sterile Compounding - Exempt	0	0	2	38	22	0	0	0	0				62
Nonresident Sterile Compounding	7	11	13	4	7	0	4	6	9				61
Clinics	63	90	71	64	45	59	111	94	90				687
Clinics - Exempt	3	2	21	112	11	4	1	5	0				159
Hospitals	14	23	23	80	24	26	51	30	35				306
Hospitals - Exempt	0	0	35	43	4	0	1	1	0				84
Drug Room	2	1	0	1	3	2	4	4	4				21
Drug Room - Exempt	0	1	3	9	1	0	1	0	0				15
Nonresident Pharmacy	32	34	22	17	24	26	30	28	44				257
Licensed Correctional Facility	0	0	16	25	1	0	0	0	0				42
Hypodermic Needle and Syringes	14	27	0	26	23	17	31	21	17				176
Hypodermic Needle and Syringes - Exempt	0	0	0	0	0	0	0	0	0				0
Nonresident Wholesalers	38	45	22	46	44	42	48	40	55				380
Wholesalers	32	52	33	26	27	41	35	37	42				325
Wholesalers - Exempt	0	0	2	4	0	1	2	0	0				9
Veterinary Food-Animal Drug Retailer	1	2	2	3	2	3	3	0	2				18
Designated Representatives	165	248	179	145	200	206	268	257	279				1947
Designated Representatives Vet	6	8	1	10	2	2	3	4	7				43
Total	3610	5487	4511	4463	4631	4504	5931	5565	5830	0	0	0	44532