



California State Board of Pharmacy

1625 N. Market Blvd, N219, Sacramento, CA 95834

Phone: (916) 574-7900

Fax: (916) 574-8618

www.pharmacy.ca.gov

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY

DEPARTMENT OF CONSUMER AFFAIRS

GOVERNOR EDMUND G. BROWN JR.

**STATE BOARD OF PHARMACY
DEPARTMENT OF CONSUMER AFFAIRS
LICENSING COMMITTEE MEETING
MINUTES**

DATE: March 30, 2016

LOCATION: Department of Consumer Affairs
1st Floor Hearing Room
1625 North Market Blvd. Ste. N-219
Sacramento, CA 95834

COMMITTEE MEMBERS

PRESENT: Stanley Weisser, RPh, Committee Chair
Albert Wong, PharmD.
Victor Law, RPh
Allen Schaad, RPh
Ricardo Sanchez, Public Member

**COMMITTEE MEMBERS
NOT PRESENT:** Greg Murphy, Vice Chairperson

STAFF

PRESENT: Virginia Herold, Executive Officer
Anne Sodergren, Assistant Executive Officer
Laura Hendricks, Staff Analyst
Debi Mitchel, Staff Manager
Laura Freedman, DCA Legal Counsel
Joshua Room, Supervising Deputy Attorney General

1. Call to Order and Establishment of Quorum

Chairperson Weisser called the meeting to order at 8:30 a.m.

Chairperson Weisser conducted a roll call. Committee members present: Stanley Weisser, and Ricardo Sanchez.

Note: Victor Law and Albert Wong arrived at 8:52 a.m. Allen Schaad arrived at 9:14 a.m.

2. Demonstration of the Video Instructions for Pharmacy Technician Applicants

Chairperson Weisser noted that because most of the committee members were not present they would take the agenda out of order and view the pharmacy technician applicant video.

Chairperson Weisser explained that in an effort to address deficiency rates of pharmacy technician applicants, the board has tried various approaches to educate applicants, and to keep the pharmacy technician application up to date. To further these efforts, board staff has been working with the Department of Consumer Affairs to make a video designed to assist pharmacy technician applicants with the application process.

The committee viewed the video and stated that the video was well done and would help guide pharmacy technician applicants through the application process. They stated that they would like staff to begin working on videos for other applications.

Members of the public expressed their support of the video and stated that they would use it as a training tool for pharmacy technicians.

A member of the public asked if the video was available with closed captioning and asked if the colors used were ADA compliant. Board staff answered that the video would be available with closed captioning and added that they would verify that the colors used are ADA compliant.

Dr. Wong and Mr. Law arrived at 8:52 a.m.

3. Licensing Statistics

Chairperson Weisser briefly reviewed the licensing statistics as provided in the meeting materials.

Mr. Wong asked if board staff has seen a trend of community pharmacy applications declining while larger chain store applications increase. Staff stated that they would pull data on these statistics and provide it to the committee at the next meeting.

Chairperson Weisser noted that chain stores are looking to increase their presence in communities and are increasing the healthcare services they offer patients.

4. Public Comment on Items Not on the Agenda

Mr. Law asked board staff to provide staff with five years of data showing the trends of community vs. chain store applications.

There were no comments from the public.

5. Discussion of Pharmacy Technician Discipline and Applicant Denials

Chairperson Weisser explained that at prior meetings, the committee was provided information on the number of pharmacy technician application denials and licensee discipline in a 4-year period (FY 11/12 – FY 14/15) and determined that during that period – and of those pharmacy technicians that had been disciplined – a large percentage had qualified for licensure by completing a training program. Those numbers, however, did not reflect the overall populations of those denied and disciplined during that period.

Chairperson Weisser reported that the tables below reflect comparisons of pharmacy technician applicants denied, as well as pharmacy technician licensees revoked for the same 4-year period. For further comparison, the same is provided for pharmacist exam applicants and pharmacist licensees.

Chairperson Weisser stated that with the exception of Technician applicants in FY 2012/13, less than one percent of applicants or licensees were denied or revoked for both pharmacist and pharmacist technicians. During FY 2012/13, just over one percent of pharmacy technician applicants were denied.

Applicant Population: Denied

Pharmacy Technician	FY 11/12	FY 12/13	FY 13/14	FY 14/15
Application Received	9491	8741	8211	7151
Applications Denied	89	101	45	56
Percentage	0.94%	1.16%	0.55%	0.78%

License Population: Revoked

Pharmacy Technician	FY 11/12	FY 12/13	FY 13/14	FY 14/15
License Population	72338	73994	73558	74586
Licenses Revoked	99	85	170	170
Percentage	0.14%	0.11%	0.23%	0.23%

Applicant Population: Denied

Pharmacist	FY 11/12	FY 12/13	FY 13/14	FY 14/15
Application Received	2467	2487	2682	3122
Applications Denied	7	9	8	9
Percentage	0.28%	0.36%	0.30%	0.29%

License Population: Revoked

Pharmacist	FY 11/12	FY 12/13	FY 13/14	FY 14/15
License Population	38526	39793	41176	42521
Licenses Revoked	11	12	21	10
Percentage	0.03%	0.03%	0.05%	0.02%

Mr. Law stated that there has been a dramatic increase in the number of pharmacy technicians who have had their licenses revoked and stated that most of these technicians had qualified for licensure by completing a training program. Chairperson Weisser stated that this would be discussed in more detail later in the meeting.

There were no comments from the public.

6. Presentation by the Pharmacy Technician Certification Board (PTCB)

Note: Mr. Schaad arrived at 9:14 a.m.

Chairperson Weisser explained that the Pharmacy Technician Certification Board (PTCB) administers the PTCB exam for the certification of pharmacy technicians. Currently, certification from the PTCB is one of the methods by which an applicant for a pharmacy technician license may qualify for a California Pharmacy Technician license.

Everett McAllister, CEO of the PTCB, Levi Borne, PhD and Miriam Mobley-Smith, PharmD, provided a presentation to the committee on the PTCB program.

The entire presentation can be found immediately following these minutes.

Following the presentation the representative from the PTCB answered questions from the committee.

Chairperson Weisser asked why the PTCB does not conduct background checks. Mr. McAllister answered that the PTCB has found that a challenge to conducting background checks is that there are many variations on the type of background checks that can be conducted. He also noted that ideally background checks should be completed when the person is applying to enroll in a training program, not when they have reached the point of taking the certification test through the PTCB.

Chairperson Weisser asked if the PTCB would conduct background checks if the board made it a requirement for pharmacy technicians. Mr. McAllister confirmed that the PTCB would conduct background checks if it became a requirement.

Chairperson Weiser asked if other states require continuing education for pharmacy technicians. Dr. Modley-Smith explained that the requirements for pharmacy technicians

vary by state; however she noted that when a state does require continuing education, licensees often use the PTCB's continuing education programs.

Mr. Law asked how the PTCB tracks continuing education. Mr. McAllister explained that the PTCB conducts random audits of licensees to ensure that they are complying with the PTCB's continuing education requirements (similar to the audits the board conducts for pharmacist licensees). Dr. Modley-Smith added that the PTCB is working with the NABP to create a continuing education database. Dr. Borne noted that the PTCB can provide a state with verification of continuing education upon request.

Dr. Wong stated that the role of pharmacy technicians is becoming more important as pharmacists begin providing more healthcare services to patients and the board needs to ensure that they receive the proper training.

Chairperson Weisser asked if the PTCB is tracking SB 952. Mr. McAllister confirmed that they are tracking the bill and noted that the PTCB and ExCPT exam coexist in many states.

Chairperson Weisser asked how the PTCB feels about technicians having hands on experience prior to entering the work force. Dr. Modley-Smith stated that experience is very important, however in the past the PTCB has found that less reputable programs will sign-off on experience hours without actually giving the applicant any actual real-world experience.

Chairperson Weisser asked if currently it would be possible for someone to pass the PTCB exam without stepping foot into a pharmacy or hands-on training program. Mr. McAllister confirmed that this was possible and added that as the profession changes they may need to reconsider requiring experiential hours.

The committee recessed for a break at 10:24 a.m. and resumed at 10:44 a.m.

Dr. Tracy Montez, Chief of the Division of Programs and Policy Review for the DCA, stated that much of this discussion regarding the PTCB and ExCPT exams stemmed from a report that had been released by DCA's Office of Professional Examination Services (OPES) comparing the two exams. She explained that while she had not worked on the report, she did review the report. Dr. Montez noted that much of the detail that is lacking in the report is due to confidentiality agreements that had to be signed prior to OPES conducting their research. Dr. Montez concluded by offering her support and expertise as the board continues comparing the two programs and considers conducting a job analysis of pharmacy technicians.

Pat Whalen, representing NHA and the ExCPT exam, stated that they would be conducting their own pharmacy technician job analysis.

Dr. Steve Gray, representing Kaiser, asked the committee to consider why they are reviewing pharmacy technician licensure requirements – are they concerned with diversion by pharmacy technicians or the quality of work provided by pharmacy technicians? He stated that if the committee is most concerned with diversion by technicians they should focus on background checks.

Dr. Gray also noted that there is a federal requirement for employers to post signage stating that employees are required to report diversion to their supervisor. Mr. Room clarified that the DEA has a regulation that requires staff to report diversion to their employer. The employer can choose how they want to notify their employees of this requirement (via signage, training, procedure manuals etc.).

7. Comparison of the PTCB and ExCPT Certifications

Chairperson Weisser explained that the committee requested that staff provide a comparison of the eligibility requirements to apply for both PTCB and ExCPT certifications.

Ms. Sodergren stated that the comparison chart that had been provided in the meeting materials was laid out in a confusing manner. She explained that staff had created a new version that provides the information in a clearer fashion.

Note: the new comparison is provided immediate following these minutes.

Licensing staff manager Debi Mitchel explained that she used information from the PTCB and ExCPT websites to gather the information.

Mr. Law asked if the PTCB and ExCPT exams ensure that the continuing education covers pharmacy law relevant to the state the person is licensed in. A representative from the ExCPT exam explained that usually when licensees need to complete continuing education they complete it through one of their local associations. She added that if a state has a specific requirement for their continuing education ExCPT makes sure that any continuing education they provide in that state meets the requirement. A representative from the PTCB stated that they ensure that their continuing education complies with relevant state or federal law.

Dr. Wong noted that drug testing is not a requirement for the PTCB or ExCPT programs. Representatives from the PTCB and ExCPT both confirmed that they do not require drug testing. The PTCB representative noted that if someone is on probation the PTCB monitors them to ensure they are complying with the terms (which might include drug testing).

Paul Salverstein, a teacher at a pharmacy technician training program, provided an example of a student who completed a training program only to be denied licensure by the board due to a prior criminal conviction. He explained that that student didn't disclose the

conviction when they enrolled in the training program because they thought that the conviction was so long ago that it wouldn't affect his licensure.

Mr. Room and Ms. Freedman noted that applicants face significant hardships when they are denied licensure and they often have invested significant money to complete the training program only to discover that a prior criminal conviction will prevent them from becoming licensed.

8. Discussion and Consideration of Possible Requirements for Applicants Enrolling in Pharmacy Technician Training Programs

Chairperson Weisser reported that in September 2015, the committee made a recommendation to the board to change the minimum educational requirements for licensure. After reaching consensus to increase pharmacy technician knowledge, the board in October 2015 referred the review back to the committee for further vetting and discussion. The committee was asked to consider various topics, to include (but not limited to) discussion on whether education level correlates to the likelihood of discipline, to receive feedback on pharmacy technician training programs, to consider whether increasing requirements may have unintended consequences, and if the board should consider different levels of pharmacy technician licensure (i.e., hospital, compounding, community, etc.).

Chairperson Weisser explained that in the past, the committee received public feedback in support of increasing the knowledge base of pharmacy technicians, but not necessarily by increasing the minimum statutory educational requirements.

Chairperson Weisser stated that in January 2016 the committee put forth a recommendation that the board modify Title 16 CCR section 1793.6 to require all pharmacy technician programs prior to enrolling students into the program to (1) conduct a criminal background check; (2) administer drug and alcohol testing; (3) be at least 18 years of age; and (4) require the individual to pass a final examination administered by the provider, and to provide proof of successfully passing the final examination to the board. Chairperson Weisser noted that the board requested that the committee continue to vet this issue further.

Ms. Sodergren explained that following the February Board meeting staff drafted some language for the committee to review and discuss at this meeting. Ms. Sodergren noted that the draft language included requirements for applicants to be at least 18 years old and to pass both a background check and a drug screening.

Ms. Sodergren reviewed the draft language and explained that the requirements in the draft language would only apply to the 240-hour training programs.

Note: the draft language was provided to the committee and the public at the meeting and is also provided below.

Draft Proposal to Amend Section 1793.6

1793.6. Training Courses Specified by the Board.

A course of training that meets the requirements of Business and Professions Code section 4202 (a)(2) is:

(a) Any pharmacy technician training program accredited by the American Society of Health--System Pharmacists,

(b) Any pharmacy technician training program provided by a branch of the federal armed services for which the applicant possesses a certificate of completion, or

(c) Any other course that provides a training period of at least 240 hours of instruction covering at least the following:

(1) Knowledge and understanding of different pharmacy practice settings.

(2) Knowledge and understanding of the duties and responsibilities of a pharmacy technician in relationship to other pharmacy personnel and knowledge of standards and ethics, laws and regulations governing the practice of pharmacy.

(3) Knowledge and ability to identify and employ pharmaceutical and medical terms, abbreviations and symbols commonly used in prescribing, dispensing and record keeping of medications.

(4) Knowledge of and the ability to carry out calculations required for common dosage determination, employing both the metric and apothecary systems.

(5) Knowledge and understanding of the identification of drugs, drug dosages, routes of administration, dosage forms and storage requirements.

(6) Knowledge of and ability to perform the manipulative and record-keeping functions involved in and related to dispensing prescriptions.

(7) Knowledge of and ability to perform procedures and techniques relating to manufacturing, packaging, and labeling of drug products.

(8) Include a final examination that demonstrates students understanding and ability to perform the provisions in paragraphs (1) through (7) above.

(d) In addition to the content of coursework specified in subdivision (c) the training program must also satisfy the following:

(1) Prior to admission, the program must conduct a criminal background check

(2) Administer at least one drug and alcohol screening

(3) Require students to be at least 18 years of age.

Authority cited: Sections 4005, 4007, 4038, 4115 and 4202, Business and Professions Code.

Reference: Sections 4005, 4007, 4038, 4115 and 4202, Business and Professions Code.

Mr. Schaad asked if the final examination should be more clearly defined. Ms. Sodergren stated that staff would research ways to better define final examination in the language and bring it to the next committee meeting. She asked if the committee would prefer that the final examination be written or a practical exam. Mr. Schaad responded that a written exam would be sufficient. Mr. Room recommended looking at the advanced practice pharmacist examination requirements for sample language.

Mr. Law stated that 240 hours for the training program is no longer adequate to provide applicants with the knowledge base to become a pharmacy technician. He added that he is concerned that the board does not have any oversight of the training programs. He recommended that the board utilize a third-party accreditation agency to oversee the training programs.

Ms. Herold noted that many employers have created 240 hour technician training programs and if the board requires the 240 hour programs to be certified by an accreditation agency they would no longer be able to have these programs.

Mr. Law made a motion to modify Business and Professions Code section 4202 as provided below.

4202. (a) The board may issue a pharmacy technician license to an individual if he or she is a high school graduate or possesses a general educational development certificate equivalent, and meets any one of the following requirements:

(1) Has obtained an associate's degree in pharmacy technology.

~~—(2) Has completed a course of training specified by the board.~~

(3) Has graduated from a school of pharmacy recognized by the board.

(4) Is certified by the Pharmacy Technician Certification Board

Ms. Freedman explained that modifying Business and Professions Code section 4202 would require a statutory change.

Ms. Herold explained that by changing Business and Professions Code section 4202 military training programs and ASHP accredited programs would also be eliminated as pathways to licensure.

Mr. Law stated that he does not want to eliminate military training or ASHP accredited training programs, just the unaccredited 240 hour training programs.

Ms. Sodergren explained that to accomplish this it would be better to leave Business and Professions Code section 4202 unchanged and instead consider changing Section 1793.6 to eliminate just the 240 hour training programs.

Chairperson Weisser asked if the committee would like to the criminal background check and drug and alcohol screening to apply those who qualify through military training and completing an AA degree. Ms. Herold noted that requiring someone to complete drug screening and background checks prior to enrolling in an AA degree program would be difficult and would not be very useful as the programs take at least two years to complete and in that time the applicant may have been arrested or began using illegal drugs.

Mr. Law stated that the board should require drug screening and background checks prior to applying for licensure with the board. Ms. Sodergren clarified that this would require a statutory change and would require the board to be responsible for conducting the drug testing.

Chairperson Weisser stated that the board does not currently require drug testing for pharmacists prior to licensure and expressed concern that this creates a discrepancy between the requirements for the two licensure programs. The committee elected to not require drug and alcohol screening for pharmacy technicians.

Chairperson Weisser asked if the committee would like to require continuing education for all pharmacy technicians. The committee decided not to require continuing education at this time.

Chairperson Weisser asked the committee if they would like to create a timeline for these changes to be implemented so that programs can become accredited. Mr. Law stated that becoming accredited takes at least two years and recommended that the board make the implementation date three years in the future to allow time for programs to become accredited.

Mr. Schaad expressed his concern with eliminating the 240 hour training programs. He stated that eliminating this pathway to licensure may create a shortage of pharmacy technicians. He also noted that many pharmacy chains have quality 240 hour training programs and he stated that he would not like to eliminate these programs.

Mr. Schaad stated that the committee should consider increasing the number of hours required for the training programs and requiring a final examination for the training programs. He explained that this would raise the bar for pharmacy technician knowledge without creating a barrier to entry into the profession.

Mr. Law recommended requiring *all* applicants to pass the PTCB prior to licensure rather than eliminating the 240 hours training programs. Mr. Schaad agreed that this may be a good way to ensure that all applicants have taken a final examination.

Ms. Sodergren recommended that board staff gather information on the ASHP and military training programs and bring it to the committee for consideration. She stated that staff could also draft new language based on the committee's discussion. The committee agreed with the recommendation.

Dr. Gray encouraged the committee to retain their option to approve training programs other than those offered by PTCB and ASHP. Dr. Gray stated that he would not like the board to over-train entry level pharmacy technicians; instead he recommended creating different levels of pharmacy technician licensure.

Chairperson Weisser asked Dr. Gray if upon hiring Kaiser would require new technicians complete a training program. Dr. Gray responded that Kaiser only hires people who are already licensed as a pharmacy technician and upon hiring them Kaiser has them take training on Kaiser systems, Kaiser policies, privacy policies etc.

Mr. Law asked Dr. Gray if Kaiser had statistics on how many of their pharmacy technicians qualified for licensure via a 240 hour training program or by passing the PTCB. Dr. Gray responded that Kaiser does not have these statistics.

Representatives from the National Association of Chain Drug Stores and the California Retailers Association expressed concern with the board eliminating the 240 hour training programs that their members use to train their pharmacy technicians. Mr. Law clarified that the committee had decided not to eliminate the training programs, rather all applicants would be required to pass the PTCB.

Mr. McAllister stated that the same discussion the committee is having regarding pharmacy technician qualification methods is also being discussed at the national level.

The committee recessed for a break at 12:49 p.m. and resumed at 1:15 p.m.

9. Pharmacy Technician Duties, Functions and Licensure Requirements. The Board may discuss the licensure requirements, functions, roles and responsibilities of the pharmacy technician as well as possible changes

Chairperson Weisser explained that this item was placed on the agenda to provide the committee with information on the current pharmacy technician duties, functions and licensure requirements.

There were no comments from the committee or from the public.

10. Discussion and Consideration of Senate Bill 952, Anderson (Pharmacy Technicians: Licensure Requirements)

Chairperson Weisser explained that currently Business and Professions Code section 4202(a)(4) only allows for a pharmacy technician applicant to earn a certification from the Pharmacy Technician Certification Board (PTCB). SB 952 would amend Business and Professions Code section 4202(a)(4) to specify “Is certified by a pharmacy technician certifying organization offering a pharmacy technician certification program accredited by the National Commission for Certifying Agencies that is approved by the board”, which will allow other agencies with proper accreditation to provide the pharmacy technician exam certification.

Chairperson Weisser noted that SB 952 was introduced by Senator Anderson on February 4, 2016.

Mr. Law asked if the bill had been heard by any committee at the capitol. Pat Whalen, representing NHA and ExCPT, explained that the bill was up for its first policy hearing on April 4.

Dr. Gray, representing Kaiser, stated that the board has had issues with accreditation agencies in the past and stated that the board should not give too much power to accreditation agencies.

Dr. Levi Borne, representing the PTCB, explained that there are other accreditation agencies besides the NCCA. He cautioned the board from placing too much credence in that sole accreditation agency and asked them to consider allow for other accreditation agencies.

Mr. McAllister, representing the PTCB, offered to answer any questions that the committee members may have regarding the differences between the PTCB and ExCPT exam.

Mr. Law asked if the board could add other accreditation agencies. Mr. Room responded that as written the bill does not allow for that flexibility. A representative from ExCPT stated that they would be open to adding other reputable accreditation agencies to the bill. Mr. Room cautioned that committee from simply opening it up to all accreditation agencies.

Mr. Whalen asked if the committee had anything that they would like him to report on their behalf at the April 4 committee hearing at the capitol. Chairperson Weisser thanked Mr. Whalen for the offer but stated that the board would provide any comments on the bill directly to the committee members.

11. Consideration of Proposal to Allow Automated Dispensing Machines to Replenish Medications Administered by Fire Departments and Other Emergency Medical Services Personnel

Chairperson Weisser reported that for over two years, board staff has been discussing possible options for refilling the ambulances operated by fire departments, and more recently emergency medical services (EMS), from a stock of drugs that would be stored in

an automated drug storage device. The drugs would be owned by the fire department or EMS agency.

Chairperson Weisser explained that such a system would ensure the availability of replenishment medications for ambulances that would be stored in secured locations. Access to the medication within the ADDs would be restricted and controlled by the ADD.

Ms. Herold stated that since the last time this item was discussed the fire departments and EMS have found a solution to the issue. She added that the board no longer needs to be involved, however if they require assistance board staff is prepared to help.

12. Discussion and Consideration of Ownership Structures for Pharmacies, including Trusts

Chairperson Weisser explained that the board tracks the beneficial interest of business owners for pharmacies, whether they be natural persons or entities. Board regulation specifies the reporting of a transfer in the beneficial interest in the business and specifies the threshold as to when a change of ownership must be submitted to the board.

Business and Professions Code section 4035 defines a “person” as follows:
“Person” includes firm, association, partnership, corporation, limited liability company, state governmental agency, or political subdivision.

Chairperson Weisser reported that when processing a pharmacy application, the board identifies and records all levels of ownership of the applicant business. This is done through a careful analysis of all information submitted in support of the application, and often times identifies inconsistencies with respect to the ownership reported. For some, what is initially reported as (what appears to be) a simple, two- or three-level ownership structure, when staff uncovers details, it often turns out to be multiple levels of ownership with multiple stakeholders. Chairperson Weisser noted that it is common for applicants with complex ownership structures to argue that the board doesn’t need to know all of the information related to a pharmacy’s ownership.

Chairperson Weisser stated that board staff has also identified where (revocable or irrevocable) trust(s) is/are reported as owners of the applicant business. Pharmacy Law does not currently recognize a “trust” as a person to which the board is authorized to issue a license; however, in researching older licensing records, some trusts have been found to be on record as “shareholders” of existing licensees.

Chairperson Weisser explained that at this meeting, the committee will discuss and consider appropriate ownership structures for pharmacies, to include whether or not a trust should be recognized within the ownership structure.

Mr. Room stated that when considering applicants for licensure it is always the board’s responsibility to ensure that the applicant is qualified for licensure. He explained that the

applicants' ownership structures are becoming increasingly complex and staff has had to increase their knowledge of ownership structures and increase the investigations they conduct regarding ownership structures.

Mr. Room explained that as the statute is currently written, trusts are not a person. Mr. Room stated that the issue with trusts from a regulatory and enforcement standpoint is that they exist only as a contractual entity: they can be changed at any time and it is very difficult to track who is controlling the trust and.

Mr. Law asked if the board impose certain reporting requirements on trusts. Mr. Room responded that the board could create requirements for trusts through statutory changes.

Mr. Room stated that the board has two options: 1) the board could not allow trusts to own pharmacies or, 2) the board could create reporting requirements specific to trusts.

Mr. Law stated that it is not uncommon for pharmacies to be owned by trusts and he stated that the board should create reporting requirements for trusts.

Chairperson Weisser stated that many people use trusts legitimately to protect their assets from probate.

Mr. Room explained that a trust could potentially give ownership of a pharmacy to someone who would not otherwise qualify to own a pharmacy (i.e. a prescriber, someone who has prior convictions for drug diversion, etc.).

Christine Cassetta, representing Quarles and Brady LLP, stated that trusts ownerships have never been an issue. She explained that a trust is a frequently used estate planning tool that is designed to protect the interest of those who will benefit from the assets of the trust and is a common way to avoid probate. Ms. Cassetta asked the committee to decline to adopt any changes to the board's long-standing practice of allowing trusts to be members or managers of limited liability companies or shareholders of a corporation.

Stacie Neroni, representing Hooper, Lundy and Bookman, stated that the same risks that trusts could potentially create are also potential problems with other ownership structures such as LLC's. Ms. Neroni stated that when she submits an application for a trust she provides all of the information on the trustees so that the board is aware of who owns the pharmacy. Ms. Neroni added disallowing trusts would create significant ramifications for licensees.

Mr. Law asked how many trust-owned pharmacies have been disciplined by the board. Ms. Sodergren stated that staff would have to gather the information and report back to the committee.

Chairperson Weisser asked if it would be difficult to disclose the identity of all trustees, beneficiaries and grantors of a trust and to require disclosure whenever there was a change in the amount of beneficial interest. Ms. Cassetta responded that she does not feel that the board needs information on the beneficiaries of a trust. Ms. Neroni stated that she already provides all of this information on applications; however, she noted that corporations and LLC's only have to report changes of 10 percent or more.

The committee decided that they needed more information on trusts prior to making any changes. Mr. Room noted that Matthew Heyn with the Department of Justice could provide the board with more information on trusts at the upcoming board meeting.

13. Discussion and Consideration of Allowing Pharmacists to be Shareholders, Officers or Directors of Professional Corporations, Medical or Otherwise, Pursuant to the Moscone Knox Professional Corporation Act

Chairperson Weisser explained that as part of the board's sunset review, a Background Paper was prepared for the Joint Oversight Hearing held March 14, 2016, wherein staff for the Senate Committee on Business, Professions and Economic Development and the Assembly Committee on Business and Professions (hereafter called the Oversight Committee) identified issues and recommendations regarding the Board of Pharmacy.

Chairperson Weisser reported that one of the issues identified in the Background Paper (Issue #7) questions whether or not pharmacists should be included on the list of individuals that may be a shareholder, officer, or director of a medical corporation.

Ms. Freedman explained that Moscone Knox Professional Corporation Act makes an exception to corporate law to allow specific health care practitioners to be shareholders, officers, and directors of a medical corporation. Ms. Freedman stated that pharmacists are not currently included in this list and the Oversight Committee is recommending that they be added to the list in Corporations Code section 13401.5. Ms. Freedman explained that the concern is that there is a conflict in allowing a pharmacist to own a medical corporation that can issue prescriptions which could then be filled by the pharmacy.

Note: the specifically authorized practitioners in Corporations Code section 13401.5 are listed below.

- Licensed doctors of podiatric medicine.
- Licensed psychologists.
- Licensed chiropractors.
- Registered nurses.
- Licensed acupuncturists.
- Licensed optometrists.
- Naturopathic doctors.
- Licensed marriage and family counselors.

- Licensed professional clinical therapists.
- Licensed clinical social workers.
- Licensed physician assistants.

Chairperson Weisser stated that as the role of pharmacists are evolving to make them more involved in the healthcare team it seems appropriate to afford them the same liability protections as physicians and other healthcare practitioners. Mr. Room explained that pharmacists can already incorporate, adding them to the Moscone Knox list would allow them to own a *medical* corporation.

Dr. Gray supported adding pharmacists to the list of authorized healthcare professionals in Corporations Code section 13401.5.

Ms. Sodergren explained that the board needs to respond (either to add pharmacists to the list or not to add pharmacists to the list, or to remain neutral) to the Oversight Committee as part of the Sunset Review process.

Motion: Pharmacists should be added to the list for medical corporations. In addition, the Board should examine the other professional corporations authorized by the Moscone-Knox Professional Corporation Act and determine whether there are others to which it makes sense for pharmacists to be added as officers, shareholders, or directors.

M/S: Law/Wong

Support: 5 Oppose: 0 Abstain: 0

Board Member	Support	Oppose	Abstain	Not Present
Law	x			
Murphy				x
Sanchez	x			
Schaad	x			
Weisser	x			
Wong	x			

Mr. Room offered to review other professional corporations to determine if pharmacists should be added.

14. Future Committee Meeting Dates

Chairperson Weisser announced the following future committee dates: May 26, 2016 and September 21, 2016.

Chairperson Weisser adjourned the meeting at 3:00 p.m.



PTCB

- Setting the Standard
- Preparing for the Future
- Advancing Patient Safety

California Board of Pharmacy
Licensing Committee

March 30, 2016

PHARMACY TECHNICIAN CERTIFICATION BOARD



Overview

- About PTCB
- Value of PTCB Certification
- PTCB Program Changes
- New Initiatives
- OPES Report
- Partnerships & Collaborations
- Questions/Comments





Mission Statement

PTCB develops, maintains, promotes and administers a nationally accredited certification program for pharmacy technicians to enable the most effective support of pharmacists to advance patient safety.



PTCB's Goals



BE PROUD



- Improve patient care, outcomes, and access
- Provide resources to further enable the evolution of pharmacy technician roles
- Elevate standards within the profession to meet the demands of the growing healthcare system



PTCB Certification Program



Pharmacy Technician Certification Exam (PTCE):

- Widely recognized and trusted throughout the profession
- Psychometrically superior – exceeds many industry standards
- 2013 Updated Blueprint & Exam

Current Certification Requirements:

- A high school diploma or equivalent
- Disclosure of all criminal & state board of pharmacy actions
- A passing score on the PTCE

Recertification Every Two Years



By the Numbers



- 587,000 Pharmacy Technician Certifications Since 1995
- 275,000 Active Certified Pharmacy Technicians
- 56,000 Exam in 2015
- 300+ Secure Testing Centers
 - Pearson Vue
 - CA (18)
- Administered & Accepted in all 50 States, DC, Guam, PR
- PTCB is Accepted in the Regulations of 45 States
- 5 States Accept Only PTCB Certification



By The Numbers



2014, Median Pay	\$14.33 hr / \$29,810 yr
2014, Number of Jobs	372,500
Job Outlook, 2012 - 2022	9% growth
Employment Change, 2014 - 24	34,700

Employment increase is 9% faster than average for all occupations

- 74% (275,000) of technicians are PTCB certified
- Increased demand for prescription medications will lead to more demand for pharmacy services



U.S. Bureau of Labor Statistics, Dec 2015 <http://www.bls.gov/oes/current/oes292052.htm>

Technician Requirements



No National Standards

employment - education - regulations

- Requirements may include:
 - Formal pharmacy technician education
 - Prior experience
 - National certification (Certified Technician -- CPhT)
 - State registration
 - Continuing ED; competency assessments

- Approximately 1200 programs in US
- 281 accredited by ASHP/ACPE



The Value



- Recognized Authority
- PTCB has consistently advocated for a single national standard
- Endorsed by several Major National Pharmacy Organizations
- Advocates on behalf of technicians – “We’re at the table”
- Certification is Portable
- Non-profit & Transparent
- NCCA Accreditation since 2006
- Competed & Awarded 2 Exclusive Contracts with Texas
- Partnering with NABP for Discipline Cases & CE



CERTIFICATION PROGRAM CHANGES

New PTCB requirements to become recertified:

- **2014**, one of the 20 required CE hours to be in **patient safety**, in addition to one already required in law
- **2015**, accept only *pharmacy-technician-targeted CE*
 - If not ACPE accredited, must be contained in blueprint
- **2016**, the number of CE courses allowed from **college courses** will be decreased
 - from 15 to 10 hours
- **2018**, the number of **in-service** hours allowed for CE will be phased out
 - from 10 to five in 2015, and from five to zero in 2018





CERTIFICATION PROGRAM CHANGES

New PTCB certification requirements:

- **2020:** Complete an **ASHP/ACPE-accredited education** program - *Pharmacy Technician Accreditation Commission (PTAC)*
- Why “2020”
 - Expanding Roles of Pharmacy Technicians
 - Quality and Necessity of Education
 - Profession Directed
- Path Forward
 - Stakeholder Meetings & Consensus building
 - Accreditation Training Standards Changes
 - Addressing demand; Distance Learning



New Initiatives

- Research Studies
 - Pharmacy Workforce Center
 - Public Perception
 - Certification Outcomes
- 2016 Job Analysis
- Specialty & Advanced Certifications
 - Sterile Compounding
 - Hospital & Community



Comments on OPES Report



- Major Report Limitations
 - Changing industry standards and their application
 - Does not identify important program differences
 - Generalizability of reviewer findings
 - Does not consider current program impact on pharmacy technicians in California
 - Length of the review process
- Other Comments
 - PTCB is adding education requirement in 2020
 - Recommended practice analysis is part of PTCB's 2016 job analysis



Connections & Partnerships



“2014 CPhT of the Year”

Building Program Partnerships



- Promotion and Advocacy for PTCB certification and recertification as the national standard: value and importance
- PTCB State Associates Program
 - Value/impact
 - 71 organizations representing 45 of 50 states
- PTCB Advocate Programs
 - Educator Program
 - 1120 educators
 - Employer Program
 - 709 employers
- Employer and Educator Sponsorship Program
 - 483 sponsors
- Relationships with 76 schools & hospital training programs and 21 employers in California



Building Program Partnerships



- Initiatives supporting pharmacy practice
 - Committee and task force involvement
 - Consensus conferences
 - Presentations at Board of Pharmacy and Pharmacy Professional Association meetings
- American Associations of Colleges of Pharmacy (AACP)
 - 2014 Professional Affairs Committee
 - Collaborations between colleges/schools of pharmacy and pharmacy technician education programs
 - Alignment of association education, training, certification policy statements with other major pharmacy professional associations
 - Accreditation Council for Pharmacy Education Standards 2016
 - Interprofessional Team-Based Care
 - Co-curricular requirements



Summary



- Roles Are Evolving & Scope of Practice is Expanding
- Setting the Standard – Advancing Patient Care
- PTCB The Difference Maker
 - Value, Respect, Accountable, Advocate & Partner
 - Providing Pathway to Advance Pharmacy Technicians





Everett B. McAllister, MPA, RPh, Colonel (USAF Ret)
Executive Director and CEO

Levi A. Boren, PhD
Director of Certification Programs

Miriam A. Mobley Smith, PharmD, FASHP
Director of Strategic Alliances

2215 Constitution Avenue, NW • Suite 101 • Washington, DC 20037

PHARMACY TECHNICIAN CERTIFICATION BOARD

California State Board of Pharmacy

1625 N. Market Blvd, N219, Sacramento, CA 95834

Phone: (916) 574-7900

Fax: (916) 574-8618

www.pharmacy.ca.gov

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY

DEPARTMENT OF CONSUMER AFFAIRS

GOVERNOR EDMUND G. BROWN JR.

Comparison between the PTCB and the ExCPT

The chart below represents the PTCB and the ExCPT eligibility requirements for applying for their respective pharmacy technician certification examination.

In 2020, the PTCB will require candidates to have completed a training program accredited by the American Society of Health – System Pharmacists (ASHP).

Eligibility Requirements for Applying for the Certification Exam

Age and High School Requirement	PTCB	ExCPT
18 years old		
High School graduate or equivalent	X	
High School graduate or equivalent (be no more than 30 days from possessing a high school diploma or equivalent)		X

Training Program: A candidate must meet one of the following training programs.	PTCB	ExCPT
Pharmacy Technician Training Accredited Program ASHP	2020	
Pharmacy Technician Military Training Program		X
Employer Based Training Program		X
Pharmacy Training Program State Recognized		X
Pharmacy Related Work Experience		X

Additional Requirements	PTCB	ExCPT
Disclose any Criminal History	X	
Drug Testing		
Disclose any State Board Disciplinary Action	X	

Recertification Requirements	PTCB	ExCPT
Every 2 years	X	X
One hour of patient safety CE	X	
Twenty hours of pharmacy technician-specific CE	X	*X

*must include one hour of pharmacy law per two-year certification period.

PTCB ResourcesPTCB Web site <http://www.ptcb.org/>PTCB Candidate Handbook <https://www.ptcb.org/docs/default-source/get-certified/Guidebook.pdf?sfvrsn=69>**NHA ExCPT Certification Resources**NHA Web site <http://www.nhanow.com/>NHA Candidate Handbook <http://www.nhanow.com/docs/default-source/pdfs/handbooks/nha-candidate-handbook.pdf?sfvrsn=2>