



OREGON STATE PHARMACY ASSOCIATION & OREGON SOCIETY OF HEALTH-SYSTEM PHARMACISTS OPPOSE SB 8

The Oregon State Pharmacy Association (OSPA) and the Oregon Society of Health-System Pharmacists (OSHP) **oppose the adoption of SB 8** which would remove the current statutory restriction that limits the authority of nurse practitioners (NPs) to dispense drugs only in practice areas where there is a lack of readily available access to pharmacy services.

If approved, SB 8 will allow NPs throughout the state to dispense narcotic drugs. Pharmacists recognize that NPs are advanced practice nurses who provide high-quality health care services and must graduate with a master's, post-master's or doctoral level degree. However, NPs are not trained as pharmacologists with the in-depth knowledge to identify and understand potentially fatal drug interactions or to recognize a more appropriate drug therapy in a given situation. Because of significant health care access issues, principally in rural areas, the Legislature approved allowing NPs in areas that lack readily available access to pharmacy services to dispense drugs.

Granting NPs universal dispensing authority through the adoption of SB 8 is not needed as there are pharmacies easily accessible in urban areas. Further, it will decrease patient safety because NPs will not have the benefit of the pharmacy's systemic double-checking and Drug Use Review to assure patients receive the highest level of safety when picking up prescriptions. For this reason, few physicians exercise their privilege to dispense prescription medications. In essence, SB 8 allows NPs to become pharmacists and their clinics to become pharmacies without regulatory oversight from the Board of Pharmacy.

SB 8 threatens patient safety

The primary concern of OSPA and OSHP is patient safety. Below is a list of issues that will affect patient safety if SB 8 is passed:

- Loss of double check on prescription by trained pharmacists
- Decreased selection of drugs because NPs can only carry a limited number of medication bottles and may simply choose to use what is on hand
- NPs may not have an accurate record of all other medications the patient is on from other practitioners
- NPs are not the experts on drug interactions

- Lack of drug storage, preparation and labeling regulations, whereas pharmacies and pharmacists have strict standards they must comply with to assure patient safety
- Directly dispensed controlled prescriptions by NPs are not subject to reporting to the Prescription Drug Monitoring Program (PDMP) as are pharmacy dispensed prescriptions. The PDMP was established by the Legislature to support the appropriate use of prescription drugs. The information is intended to help people work with their healthcare providers and pharmacists to determine what medications are best for them. This program is a critical part of reducing inadvertent overdoses of prescription drugs.

Health care transformation means change but Oregon needs to ensure that the patient safety issues are addressed

As professionals cross the threshold into other disciplines, such as NPs and PAs into pharmacy, the regulating board for the cross-over discipline should have regulatory control over them in this area. Therefore, the Board of Pharmacy (BOP) should have the regulatory control over the disbursement of pharmaceuticals.

In the 2012 session, the Legislature adopted just such a policy when it approved legislation allowing a supervising physician or a supervising physician organization to apply for dispensing authority from the Oregon Medical Board for a PA. The Legislature recognized the need for the Board of Pharmacy to have regulatory authority of the dispensing of drugs.

Since the passage of that law, the Board of Pharmacy has adopted rules similar to other regulated drug outlets addressing acquisition, storage, integrity, security, access, dispensing, record keeping, disposal of drugs and consultation with a pharmacist. The Board of Pharmacy's regulatory authority is restricted to the dispensing outlets and not to the physician assistants which remain under the regulatory authority of the Oregon Medical Board.

Should the Legislature adopt this proposal, we believe that this same regulatory framework should be applied to the dispensing outlets of NPs that choose to dispense drugs and urge the Committee to adopt such a provision.

Equally important, SB 8 should require that any directly dispensed controlled prescriptions by NPs be subject to reporting to the PDMP as are pharmacy dispensed prescriptions. This program is a critical part of reducing inadvertent overdoses of prescription drugs and omission of those narcotic drugs dispensed by NPs would be counterproductive to Oregon's efforts to reduce prescription drug abuse.

The Oregon State Pharmacy Association and the Oregon Society of Health-System Pharmacists **opposes SB 8** because it further erodes the historic checks on dispensing pharmaceuticals, diminishes oversight of dispensaries and creates a critical hole in our Prescription Drug Monitoring Program...all at the cost of patient safety.