## Public Health and Pharmacy Formulary Advisory Committee

Formerly known as the Public Health Advisory Committee within the Oregon Health Authority, the Public Health and Pharmacy Formulary Advisory Committee (hereafter referred to as the Advisory Committee) was established in 2017 with the passage of HB 2397. The Advisory Committee is, by statute, composed of seven members appointed by the Governor and to include two physicians, two advance practice nurses and three pharmacists and started in January 2018.

Prior to the adoption of HB 2317, the Oregon Pharmacy Practice Act enabled the adoption of statewide drug therapy management protocols for a pharmacist to provide approved patient care services, including smoking cessation therapy and travel health services (2015) and the adoption of rules allowing a pharmacist to prescribe vaccines (1999). In addition, 2015 legislation (HB 2879) authorized pharmacist prescribing or oral and hormonal contraceptive patches and in 2016, HB 4214 allowed pharmacists to prescribe naloxone.

HB 2397 authorized the Board of Pharmacy (hereafter referred to as the Board) to establish by rule a formulary of drugs and devices, as recommended by the Advisory Committee, that a pharmacist may prescribe and dispense a drug or device pursuant to a diagnosis by a healthcare practitioner (with prescriptive authority and qualified to make the diagnosis) and to provide approved patient care services via established protocols. The formulary may include post-diagnostic drugs and devices such as diabetic testing supplies, emergency refills of insulin, albuterol inhalers, epinephrine auto injectors, smoking cessation aids, discharge medications for transitions of care, rapid strep tests and spacers.

In October 2018, the Board adopted rules that establish a pharmacist's authority to prescribe drugs and devices approved by the Board's formulary and via protocols recommended by the Advisory Committee. This authority is for an Oregon licensed pharmacist, practicing in Oregon and the patient assessment must be performed via a face-to-face, in-person interaction.

The rules describe the Board's compliance expectations for prescribing from the formulary. Standards defined include (1) education and competency, (2) patient assessment, and determination of inclusion, exclusion and referral criteria (3) collaboration with other healthcare providers, including mandated notification (4) treatment and follow-up care planning, (5) recordkeeping, and (6) prohibited practices.

To date, the Advisory Committee has approved and the Board adopted:

- Pharmacist Prescribing Core Elements
- Extension of Prescription Therapy protocol (insulin would be covered under this option)
- Devices to the Formulary (including diabetic blood sugar testing supplies, pen needles, syringes, nebulizers, inhalation spacers, peak flow meters, INR testing supplies, enteral nutrition supplies and ostomy products)
- Pseudoephedrine
- Intranasal corticosteroids, benzonatate and short-acting beta-agonists
- Emergency Contraception protocol

Prepared by Bill Cross & Niki Terzieff, OSPA & OSHP Government Affairs