

STATE BOARD NEWS -- MAY 1999 ISSUE
(State Section Only)

NEW RULES IN EFFECT

Senate Bill 66, passed by the 122nd General Assembly, took effect on July 22, 1998. As most pharmacists know, Senate Bill 66 contained major revisions to the Pharmacy Practice Act. As a result of these revisions, the Board of Pharmacy needed to review almost the entire set of our rules to ensure that the rules were in compliance with the new laws. The result of this review can be found on the Board's Web site (www.state.oh.us/pharmacy). Under the "What's New" box, there is a document titled "Rules Effective in 1999 Showing Changes" that is over 70 pages long and contains all of the rules that were changed or added during the rule review process last year. In order to read this document, you will need the Adobe Acrobat Reader which you can download for free from the Web site. Be patient as you try to retrieve the list of rules. Most home computers will take a few minutes to obtain the entire document. In this newsletter and the next, a few of the rules will be discussed.

CONTINUING EDUCATION RULES

Over the last few years, there has been an increasing emphasis placed by public interest groups, insurers, and others on the issue of competency among the health care professions. Historically, the boards have tested new applicants to verify that each applicant meets certain minimum qualifications before being allowed to practice. From that point on, the only requirement placed on a practitioner who wishes to maintain the license to practice has been, at most, a small continuing education requirement. In a few states, some or all of the health care professionals do not have even that requirement. They need only to pay their renewal fees to retain their right to practice. The concept of the boards verifying that their practitioners maintain or improve their competence from the minimal level needed to pass the licensing examination has been foreign to most of the health care professions.

The groups mentioned above are seeking to change that attitude on the part of the licensing boards. These groups are demanding that the boards take a more active role in assuring that the health care providers licensed by each board are truly competent to practice the profession. Some have even suggested that mandatory licensing examinations should be given every few years to every health care professional. Nearly all of the groups have agreed that the continuing education system that has been utilized historically throughout the professions is not meeting the requirement. The insistence that something needs to be done, and done quickly, is growing. If the professions and the boards do not cooperate to meet this demand, the public may demand a legislative solution that could be extremely difficult to administer and would probably be unfair to many who practice outside of the normal areas of the profession.

The Ohio Pharmacy Board has been aware of, and a part of, these discussions for the last few years. For the 1998 rule review process, the Board mandated that the continuing

education rules were to be reviewed and, if needed, revised so that the process of continuing pharmacy education (CPE) leading to improved competency to practice might be better realized. The result of this review was a major overhaul of the continuing education rules. Two rules in particular will have an impact on all pharmacists practicing in Ohio and should be reviewed carefully. These two rules are printed here in their entirety with the changes marked. New language is in capital letters and deleted language is shown by crossed out text.

4729-7-02 Requirements for renewal of a pharmacist identification card.

- (A) ~~Evidence~~ EXCEPT AS PROVIDED IN RULE 4729-7-08 OF THE ADMINISTRATIVE CODE, EVIDENCE of four and one-half C.E.U.s of approved continuing education shall be submitted with the application for renewal of a pharmacist identification card at intervals not to exceed three years. At least 0.3 C.E.U.s of the total required ~~4.5~~ C.E.U.s must be obtained from OHIO STATE board OF PHARMACY approved programs in jurisprudence. ~~Pharmacists required to report continuing education in 1996 must show evidence of 0.1 C.E.U. of jurisprudence. Pharmacists required to report continuing education in 1997 must show evidence of 0.2 C.E.U.s of jurisprudence. Pharmacists required to report continuing education in 1998 and after must show evidence of 0.3 C.E.U.s of jurisprudence.~~ BEGINNING WITH THOSE PHARMACISTS REQUIRED TO REPORT CONTINUING EDUCATION IN 2001, EVIDENCE OF SIX C.E.U.S OF APPROVED CONTINUING EDUCATION SHALL BE SUBMITTED WITH THE APPLICATION FOR RENEWAL OF A PHARMACIST IDENTIFICATION CARD AT INTERVALS NOT TO EXCEED THREE YEARS. BEGINNING WITH THOSE PHARMACISTS REQUIRED TO REPORT CONTINUING EDUCATION IN 2001, AT LEAST FOUR AND ONE-HALF C.E.U.S OF THE TOTAL REQUIRED C.E.U.S MUST BE OBTAINED IN PATIENT CARE RELATED PROGRAMS AND AT LEAST 0.3 C.E.U.S OF THE TOTAL REQUIRED C.E.U.S MUST BE OBTAINED FROM BOARD APPROVED PROGRAMS IN JURISPRUDENCE.
- (B) Documentation of the required ~~four and one-half~~ C.E.U.s shall be submitted on forms provided by the STATE board OF PHARMACY and in the manner required for renewal of the pharmacist identification card.
- (C) The C.E.U.s must be obtained ~~during the three year period preceding~~ ON OR AFTER July first of the year THAT IS THREE YEARS PRIOR TO THE YEAR in which evidence of the continuing pharmacy education is required for identification card renewal.
- (D) C.E.U.s obtained in excess of the required ~~four and one-half~~ C.E.U.s; at the time the continuing education is required for identification card renewal; may not be transferred and applied to future requirements.
- (E) A pharmacist whose identification card has lapsed or has been suspended may renew his/her identification card, if he/she qualifies for renewal pursuant to section 4729.12 or section 4729.13 of the Revised Code, by paying the required fee, completing the application for renewal, and, if he/she would have been required to report continuing pharmacy education during the period of lapse or suspension, BY providing evidence of having obtained THE NUMBER OF ~~four and one-half~~ C.E.U.s REQUIRED AT THE TIME OF RENEWAL by submitting the certificates of participation obtained during the three-year period immediately preceding the date of applying for renewal.
- (F) Ohio-registered pharmacists who hold a current license in states where continuing education is mandatory, have met the continuing pharmacy education requirements of that state, and who do not ~~reside or~~ practice pharmacy in Ohio, may renew their identification card by paying the

required fee, completing the application for renewal, and submitting the following signed statement on their continuing PHARMACY education report form:

"I declare under penalties of falsification that I hold a current and valid pharmacist license, number (insert license number), in the state of (insert name of state), that I have met the continuing pharmacy education requirements of this state and I do not presently ~~reside or~~ practice pharmacy in the state of Ohio. I hereby agree to immediately notify the OHIO STATE board of pharmacy if I return and commence the practice of pharmacy in the state of Ohio."

4729-7-08 ALTERNATIVE METHODS OF PROVING CONTINUING COMPETENCY.

(A) AS AN ALTERNATIVE TO PROVIDING EVIDENCE OF ALL OF THE REQUIRED C.E.U.S OF APPROVED CONTINUING EDUCATION AS REQUIRED BY RULE 4729-7-02 OF THE ADMINISTRATIVE CODE EXCEPT FOR THE 0.3 C.E.U.S OF OHIO STATE BOARD OF PHARMACY APPROVED JURISPRUDENCE, A PHARMACIST MAY SATISFY THE CONTINUING PHARMACY EDUCATION REQUIREMENTS BY PROVIDING EVIDENCE AT THE TIME OF RENEWAL THAT HE/SHE HAS MET THE REQUIREMENTS OF AND IS CURRENTLY CERTIFIED BY A BOARD APPROVED PHARMACY PRACTICE SPECIFIC SPECIALTY CERTIFICATION PROGRAM. AT A MINIMUM, SUCH PHARMACY PRACTICE SPECIFIC SPECIALTY CERTIFICATION PROGRAMS SHALL CONSIST OF:

- (1) PERIODIC RECERTIFICATION EXAMINATIONS;
- (2) DOCUMENTATION BY THE CERTIFICATION PROGRAM THAT THE PHARMACIST IS CURRENTLY CERTIFIED BY THE PROGRAM;
- (3) OTHER REQUIREMENTS AS DETERMINED BY THE BOARD.

(B) PHARMACISTS WHO CHOOSE TO MEET THEIR CONTINUING PHARMACY EDUCATION REQUIREMENTS IN THE MANNER DESCRIBED IN PARAGRAPH (A) OF THIS RULE ARE STILL REQUIRED TO PROVIDE EVIDENCE OF HAVING COMPLETED AT LEAST 0.3 C.E.U.S OF OHIO STATE BOARD OF PHARMACY APPROVED PHARMACY JURISPRUDENCE RELATED CONTINUING EDUCATION.

A review of these rules will reveal three major changes from the CPE program that has been in existence for several years. First, beginning with those pharmacists who renew in 2001 (license numbers of the format 03-1-XXXXX), the amount of CPE required will increase from 4.5 C.E.U.s (45 hours) to 6.0 C.E.U.s (60 hours) for the three year reporting period. PLEASE NOTE THAT THIS DOES NOT START UNTIL 2001. Those pharmacists who report this summer (03-2-XXXXX) and those who report next summer prior to September 15, 2000 (03-3-XXXXX) will follow the old requirements and must show 4.2 C.E.U.s (42 hours) in any category plus 0.3 C.E.U.s (3 hours) of Board approved jurisprudence for a total of 4.5 C.E.U.s (45 hours).

The second change is the requirement that, in 2001, 4.5 C.E.U.s (45 hours) of the total required CPE must be in courses that are classified as "Patient Care" related courses. The definition of patient care related courses can be found in Rule 4729-7-01, paragraph (F), and is as follows:

"Patient care" related continuing education shall include continuing pharmacy education experiences dealing with the properties and actions of drugs and dosage forms; the etiology,

characteristics, therapeutics and prevention of disease states; and the monitoring and management of patients by the pharmacist.

From this definition, it should be obvious that the majority of CPE that truly relates to the practice of pharmacy will fall within this definition. Courses on telephone etiquette, stress management, potential civil liability in practice, and other similar subjects may be used for twelve of the remaining 15 hours, but may not be used as part of the core CPE required. Last fall, in an effort to make the reporting easier for the practicing pharmacist, we asked all of the Ohio Board approved providers to change their course numbering system to one similar to ACPE's. Using this system, every course is identified as being Patient Care, Jurisprudence, or Pharmacy Management. Every certificate that you receive from any provider, Ohio-approved or ACPE-approved, should follow the same numbering procedure. The letters H, L, or C are used to denote Home Study, Live, or Combination type courses. These letters are followed by a two-digit number to signify the course content. These numbers are:

- 01 – Patient Care related courses
- 02 – Aids related courses (ACPE only – may be used for patient care)
- 03 – Jurisprudence courses
- 04 – Pharmacy Management courses

A typical course number would be similar to 036-999-99-05-L01. Beginning with those pharmacists reporting in 2001, 4.5 C.E.U.s (45 hours) will need to bear the "01" or "02" tag. 0.3 C.E.U.s (3 hours) will need to bear the "03" designation and be Board approved, and the remaining 1.2 C.E.U.s (12 hours) may have any of the four tags.

The third major change to the CPE rules involves the second rule printed above, 4729-7-08. This rule allows pharmacists an option in meeting their CPE requirements. If a pharmacist has chosen to prove competency by achieving certification from a pharmacy-specific certification program, the Board will waive the requirement for all of the required CPE except for the 0.3 C.E.U.s (3 hours) of Board-approved jurisprudence. The Board is aware of several certification programs that are available that may meet the requirements of this rule. These programs are focused on a particular practice specialty and require study and testing prior to receiving certification. If the programs also require periodic re-testing, they may qualify for this exemption. If you have a certificate that you feel might meet the requirements of the rule, please contact the Board office for further details.

As pharmacists move into the clinical arena with consult agreements and other clinical activities, thereby becoming even more visible, the demands by the public that they prove their competency will only increase. These rule changes are a step towards meeting that demand.#####