# OREGON BOARD OF PHARMACY 2015-17 GOVERNOR'S BALANCED BUDGET

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# CERTIFICATION

I hereby certify that the accompanying summary and detailed statements are true and correct to the best of my knowledge and belief and that the accuracy of all numerical information has been verified.

Oregon Board of Pharmacy

AGENCY NAME

800 NE Oregon St., Suite 150, Portland, OR 97232

Semette R. Weller

SIGNATURE

Notice: Requests of agencies headed by a board or commission must be approved by official action of those bodies and signed by the board or commission chairperson. The requests of other agencies must be approved and signed by the agency director or administrator. Agency Request

AGENCY ADDRESS

**Board President** 

# TITLE

X Governor's Budget

\_\_\_\_\_ Legislatively Adopted

Budget Page <u>IV</u>

2015-17

107BF01

# 77<sup>th</sup> OREGON LEGISLATIVE ASSEMBLY – 2013 Session BUDGET REPORT AND MEASURE SUMMARY

### JOINT COMMITTEE ON WAYS AND MEANS

HB 5036

Carrier – House: Rep. Frederick Carrier - Senate: Sen. Girod

Action: Do Pass

22 - 2 - 2Vote:

House

Yeas: Barker, Buckley, Frederick, Huffman, Jenson, Komp, McLane, Nathanson, Smith, Tomei, Williamson Nays: Freeman, Hanna Read, Richardson Exc: Senate Yeas: Bates, Devlin, Edwards, Girod, Hansell, Johnson, Monroe, Steiner Hayward, Thomsen, Whitsett, Winters Nays:

Exc:

Prepared By: Dustin Ball, Department of Administrative Services

Reviewed By: Matt Stayner, Legislative Fiscal Office

Meeting Date: May 31, 2013

Agency

Board of Pharmacy

**Biennium** 2013-15

> HB 5036 Page 1 of 5

### **MEASURE:**

<b>m x</b> /	~	*
Budget	Numma	rv
Duugot	Summu	AT

<u>Dudges Summary</u>	Legislatively ved Budget <sup>(1)</sup>		-15 Current vice Level	2013-15 Committee Recommendation			Committee C 2011-13 Leg	. Approved	
	 					_	\$\$ Change	% Change	
Other Funds	\$ 5,111,603	\$	5,530,936	\$	5,817,527	\$	705,924	13.8%	
Total	\$ 5,111,603	\$	5,530,936	\$	5,817,527	\$	705,924	13.8%	
<b>Position Summary</b>		,							
Authorized Positions	18		18		19		1		
Full-time Equivalent (FTE) positions	17.75		17.75		19.00		1.25		
(1) Includes adjustments through December 2012. * Excludes Capital Construction expenditures									

# Summary of Revenue Changes

The Oregon Board of Pharmacy receives revenue from fees charged to licensees, civil penalties and a small number of administrative "user" fees. The recommended budget eliminates a proposed fee increase and includes an adjustment to budgeted revenues to reflect a temporary reduction in fees implemented by the agency as recommended by the LFO. With the adoption of the subcommittee's recommendation, the agency's estimated 2013-15 ending fund balance is \$1,758,056, or the equivalent of approximately seven months of operating expenditures.

# Summary of Education Subcommittee Action

The Board of Pharmacy promotes, preserves, and protects the health, safety and welfare of Oregon citizens by control and regulation of the practice of pharmacy. The Board regulates the quality and distribution of drugs through outlets involved in the manufacture, production, sale and distribution of prescription drugs, over-the-counter drugs, controlled substance and devices and other materials as may be sued in the diagnosis, cure, mitigation, prevention and treatment of injury, illness and disease.

The Subcommittee recommended \$5,817,527 Other Funds budget for 2013-15, is 13.8 percent higher than the legislatively approved spending level for the 2011-13 biennium.

The Subcommittee approved the following recommendations:

• Package 091, Statewide Administrative Savings, reduces by \$5,196 the Other Funds expenditure limitation for the agency. This package is a placeholder for administrative efficiencies in finance, information technology, human resources, accounting, payroll, and procurement HB 5036

Page 2 of 5

expenditures. The Department of Administrative Services will continue to work on details of these reductions with agencies and report back during the 2014 session.

- Package 092, PERS Tax Policy, reduces by \$10,316 the Other Funds expenditure limitation for the agency. This package reflects the policy change in Senate Bill 822 that eliminates the increased retirement benefits resulting from Oregon income taxation of payments if the person receiving payments does not pay Oregon income tax on those benefits and is not an Oregon resident. This change reduces state employer contribution rates by approximately 0.30 percent.
- Package 093, Other PERS Adjustments, reduces by \$82,530 Other Funds expenditure limitation for the agency. This package reflects the policy change in Senate Bill 822 that modifies the cost-of-living adjustment under the Public Employees Retirement System. This change reduces state employer contribution rates by approximately 2.2 percent.

An administrative action by the PERS Board, as directed by a budget note in the Senate Bill 822 budget report, will reduce state employer contribution rates by up to an additional 1.9 percent. However, no employer rate is reduced below its 2011-13 biennium rate.

• Package 100, Personnel Management, increases by \$299,633 the Other Funds expenditure limitation for the agency. This package reclassifies two positions, increases one position from part-time to full time, and adds one position resulting in the addition of 1.25 FTE. This package addresses the recommendations in an operational review, conducted by a third party, at the direction of the 2011 Legislature. The review recommended the reallocation of resources including an increase in staffing for the licensing division and the appointment of a licensing supervisor.

Reclassification of the two positions, allowing broader scope of responsibility and increasing one of the positions to full-time will allow for the implementation of the recommendation and allow the administrative director to shift focus from licensing to agency operations. The additional 1.00 FTE is a pharmacy consultant position. This position spans all agency divisions and assists in research, rule writing and policy development. This position was eliminated in the 2011-13 biennium due to a projected shortfall in available revenue for the agency however, that projection shortfall was due to an accounting error and therefore never came to fruition. Restoration of this position will reduce workload on existing staff, allowing existing staff to focus on core responsibilities rather than extraneous duties resultant from the missing position.

The individual changes are as follows:

- Reclassification of Project Manager 1 position to Operations Policy Analyst 2 position
- Reclassification of Office Specialist 1 position to Operations Specialist 2 position
- o Increase 0.75 FTE Office Specialist 2 position to 1.00 FTE
- Add Pharmacy Consultant position (1.00 FTE)
- Package 102, Paperless Records Retention Part 1, increases by \$85,000 Other Funds expenditure limitation for the agency. This package implements phase 1 of the agency's paperless record keeping initiative, the implementation of scanning documents for records retention.

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The 2011 independent operational review recommended that the agency move toward a paperless environment. The first phase of this project includes the provision of services for scanning and implementing an indexing system that can be managed by in-house staff once complete. This package moves the agency towards paperless record keeping and positions it for more efficient long-term records retention.

• Package 810, LFO Analyst Adjustments, reduces Other Funds revenue by \$888,978. The adjustments contained in this package are for the purpose of aligning budget revenue amounts with the actual anticipated revenue for the upcoming biennium. At the end of the 2009-11 biennium, actual available revenue, and therefore the ending fund balance for the agency, was higher than anticipated by the Legislatively Approved Budget due to an accounting error and aggressive cost saving measures on the part of the agency. The net impact of these issues was a \$1,268,830 increase in available revenues to the agency and that amount is reflected in the beginning balance adjustment for the agency for the 2013-15 budget.

Additionally, the agency experienced higher than anticipated collections of revenues and lower than anticipated expenditures during the 2011-13 biennium further exacerbating the projected ending fund balance surplus. To better align revenue with expenditures, the board has implemented a temporary reduction in licensing fees to certain licensees that received fee increases in the prior biennium. The negative adjustment to revenue in this package aligns the budgeted revenue with the updated projected revenue resulting from the temporary fee reductions. The net impact of these adjustments is a revenue reduction in available revenue of \$888,978.

# Summary of Performance Measure Action

See attached Legislatively Adopted 2013-15 Key Performance Measures form.

HB 5036 Page 4 of 5

# DETAIL OF JOINT COMMITTEE ON WAYS AND MEANS ACTION

# HB 5036

### Board of Pharmacy

Dustin Ball -- 503-378-3119

· · · ·	ERAL	1.0	·	 OTHER F	UNE	DS	FEDERAI	L FU	NDS	TOTAL		
DESCRIPTION	 IERAL JND		DTTERY FUNDS	LIMITED	NC	ONLIMITED	 LIMITED	NO	NLIMITED	 ALL FUNDS	POS	FTE
2011-13 Legislatively Approved Budget at Dec 2012 *	0	\$	0	\$ 5,111,603	\$	0	\$ 0	\$	0	\$ 5,111,603	18	17.75
2013-15 ORBITS printed Current Service Level (CSL)*	\$ 0	\$	0	\$ 5,530,936	\$	0	\$ .0	\$	0	\$ 5,530,936	18	17.75
SUBCOMMITTEE ADJUSTMENTS (from CSL)												
SCR 001 - Board of Pharmacy	•											
Package 091: Statew ide Administrative Savings												
Personal Services	\$ 0	\$	0	(3,693)	\$	0	\$ 0	\$	0	(\$3,693)	0	0.00
Services and Supplies	\$ 0	\$	0	(1,503)	\$	0	\$ 0	\$	0	(\$1,503)	Ó	0.00
Package 092: PERS Taxation Policy			• .									
Personal Services	\$ 0	\$	0	(10,316)	\$	0	\$ 0	\$	0	(\$10,316)	0	0.00
Package 093: Other PERS Adjustments												
Personal Services	\$ 0	\$	0	(82,530)	\$	0	\$ 0	\$	0	(\$82,530)	0	0.00
Package 100: Personnel Management												
Personal Services	\$ 0	\$	0	\$299,633	\$	0	\$ 0	\$	0	\$299,633	1	1.25
Package 102: Paperless Records Retention Part 1												
Services and Supplies	\$ 0	\$	0	\$85,000	\$	0	\$ 0	\$	0	\$85,000	0	0.00
TOTAL ADJUSTMENTS	\$ 0	\$	0	\$ 286,591	\$	0	\$ 0	\$	0	\$ 286,591	1	1.25
SUBCOMMITTEE RECOMMENDATION *	\$ 0	\$	0	\$ 5,817,527	\$	0	\$ 0	\$	0	\$ 5,817,527	19	19.00
	 			 ******			 	<u></u>				
% Change from 2011-13 Leg Approved Budget	0.0%		0.0%	13.8%		0.0%	0.0%		0.0%	13.8%	5.6%	7.0%
% Change from 2013-15 Current Service Level	0.0%		0.0%	5.2%		0.0%	0.0%		0.0%	5.2%	5.6%	7.0%

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# Legislatively Approved 2013-2015 Key Performance Measures

### Agency: PHARMACY, BOARD OF

Mission: The mission of the Oregon State Board of Pharmacy is to promote, preserve and protect the public health, safety and welfare by ensuring high standards in the practice of pharmacy and by regulating the quality, manufacture, sale and distribution of drugs.

Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2014	Target 2015
1 - Percent of inspected pharmacies that are in compliance annually.		Approved KPM	80.00	75.00	75.00
2 - Percent of audited pharmacists who complete continuing education on time.		Approved KPM	96.00	100.00	100.00
3 - Percent of pharmacies inspected annually.		Approved KPM	100.00	95.00	95.00
4 - Average number of days to complete an investigation from complaint to board presentation.		Approved KPM	106.00	100.00	100.00
5 - Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent": Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	Accuracy	Approved KPM	90.00	85.00	85.00
5 - Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent": Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	Availability of Information	Approved KPM	87.00	85.00	85.00
5 - Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent": Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	Expertise	Approved KPM	91.00	85.00	85.00
5 - Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent" : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	Helpfulness	Approved KPM	88.00	85.00	85.00
5 - Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent" : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	Overail	Approved KPM	91.00	85.00	85.00

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### Agency: PHARMACY, BOARD OF

Mission: The mission of the Oregon State Board of Pharmacy is to promote, preserve and protect the public health, safety and welfare by ensuring high standards in the practice of pharmacy and by regulating the quality, manufacture, sale and distribution of drugs.

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Legislatively Proposed KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2014	Target 2015
5 - Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent": Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	Timeliness	Approved KPM	85.00	85.00	85.00
6 - Board Best Practices - Percent of total best practices met by the Board.		Approved KPM	<sup>·</sup> 100.00	100.00	100.00

LFO Recommendation:

Recommend approval of key performance measures and targets as presented

Sub-Committee Action:

Approved key performance measures and targets as presented

Print Date: 5/29/2013

77th OREGON LEGISLATIVE ASSEMBLY--2014 Regular Session

# Enrolled House Bill 5201

Sponsored by JOINT COMMITTEE ON WAYS AND MEANS

CHAPTER .....

# AN ACT

Relating to state financial administration; creating new provisions; amending sections 1, 2 and 3, chapter 675, Oregon Laws 2013, and sections 67 and 77, chapter 723, Oregon Laws 2013; remoney; limiting expenditures; and declaring an emergency. pealing section 5, chapter 561, Oregon Laws 2013, sections 2, 3, 20, 21, 44, 69, 74, 75 and 89, chapter 723, Oregon Laws 2013, and section 10, chapter 740, Oregon Laws 2013; appropriating

Be It Enacted by the People of the State of Oregon:

the capital improvement program. not described in this section, collected or received by the Oregon Military Department, for is imbursements from federal service agreements, but excluding lottery funds and federal funds of expenses from fees, moneys or other revenues, including Miscellaneous Receipts and reestablished for the biennium beginning July 1, 2013, as the maximum limit for payment SECTION 1. Notwithstanding any other law limiting expenditures, the amount of \$385,000

munity support, is increased by \$1,404,971. 555, Oregon Laws 2013, collected or received by the Oregon Military Department for com-<u>SECTION 2.</u> Notwithstanding any other law limiting expenditures, the limitation on expenditures established by section 2 (4), chapter 555, Oregon Laws 2013, for the biennium beagreements, but excluding lottery funds and federal funds not described in section 2, chapter ginning July 1, 2013, as the maximum limit for payment of expenses from fees, moneys or other revenues, including Miscellaneous Receipts and reimbursements from federal service

ment Department by sections 2 and 3, chapter 629, Oregon Laws 2013, but excluding lottery funds and federal funds other than those described in section 2, chapter 629, Oregon Laws 2013, collected or received by the Employment Department, is increased by \$3,645,151 for inother revenues, including Miscellaneous Receipts and moneys appropriated to the Employformation technology-related expenditures. beginning July 1, 2013, as the maximum limit for payment of expenses from fees, moneys or <u>SECTION 3.</u> (1) Notwithstanding any other law limiting expenditures, the limitation on expenditures established by section 1 (1), chapter 629, Oregon Laws 2013, for the biennium

funds other than those described in section 2, chapter 629, Oregon Laws 2013, collected or including Miscellaneous Receipts and moneys appropriated to the Employment Department by sections 2 and 3, chapter 629, Oregon Laws 2013, but excluding lottery funds and federal 1, 2013, as the maximum limit for payment of expenses from fees, moneys or other revenues. established by section 1 (2), chapter 629, Oregon Laws 2013, for the biennium beginning July (2) Notwithstanding any other law limiting expenditures, the limitation on expenditures

Enrolled House Bill 5201 (HB 5201-A)

Page 1

(2) CONSUMER AND BUSINESS SERVICES	USINESS SE	RVICES.		
Agency/Program/Funds	2013 Oregon Laws Chapter/ Section	, Adjustment	-	,
Oregon Board of Licensed Professional Counselors				
and Therapists:				
Other funds State Board of Tax	Ch. 400 1	+\$31,497		
Practitioners:				
Other lunds Oregon Board of Accountancy:	Uh. 490 I acy:	+26,720		
Other funds	Ch. 393 1	+30,796		
State Board of Psychologist				
Examiners: Other funde	CF 101 1	1 29 669		
State Board of Licensed	UI, 401 1	+34,004		
Other funds	Ch. 458 1	+45,110		
Department of Consumer				
other funds	Ch. 452 1	+5,336,039		
Federal funds		+27,522		
State Board of Chiropractic Examiners:				
Other funds	Ch, 543 1	+25,316		
Health-related licensing				
Other funds	Ch. 455 1	+37.237		
Other funds	Ch. 455 2	+22,229		
Other funds	Ch. 455 3	+12,275		
Other funds	Ch, 455 4	+19,519	•	
Other funds	Ch. 455 6	+14,337 +16 096		
Oregon Board of Dentistry:	010 100 0	1 - 10,000		
Other funds	Ch. 544 1	+25,650		
Bureau of Labor and Industries:				
General Fund	Ch. 445 1	+261,821		
Other funds	Ch. 445 2	+228,838		
Federal funds Oregon Medical Board:	Ch. 445 4	+41,986		
Other funds Oregon State Reard of	Ch. 395 1	+275,846		
Nursing:				
Other funds	Ch. 396 1	+297,473	、	
but bour of the many.	:			
Enrolled House Bill 5201 (HB 5201-A)	-A)		Page 29	

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Ch. 503 1	+174,411 Brand of Thar mary
Ch. 291 2	+29,633
Ch. 291 1(2)	+920,384 +40,751
Ch. 291 1(3)	+273,115
Ch. 291 1(4)	+17,189
Ch. 451 1	+413.112
CH. TUL L	T#10,114
Ch. 292 1	+223,678
OMMUNITY D	(3) ECONOMIC AND COMMUNITY DEVELOPMENT.
2013 Oregon T <sub>iawe</sub>	
	Adjustment
622	+\$31,914
622	+119,205
622 622	+183,323
622	+37,957
622	+239,580
	+247,772
622	+12,700 +40,599
	+3,794
Ch. 723 83(2)	+9,737
Ch. 782 18e(1)	+4,165
Ch. 732 14	+2,665
Ch. 509 1(1)	+108,002
Ch. 509 2(1)	+381,205
	+4,248,818
	+2,390,476
	+844,200
Cn. 961 1	+10,918 +607 345
Ch. 561 2	
	Ch. 503 1         Ch. 291 2         Ch. 291 1(2)         Ch. 291 1(2)         Ch. 291 1(2)         Ch. 291 1(3)         Ch. 291 1(4)         Ch. 622 1(1)         Ch. 622 1(1)         Ch. 622 1(1)         Ch. 622 2(1)         Ch. 622 2(2)         Ch. 622 3(1)         Ch. 622 4(2)         Ch. 782 18e(1)         Ch. 782 18e(1)         Ch. 629 1(1)         Ch. 629 1(1)         Ch. 629 1(1)         Ch. 629 1(1)         Ch. 629 1(2)

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Enrolled House Bill 5201 (HB 5201-A)

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Enrolled House Bill 5201 (HB 5201-A)	· · ·	· · · · · · · · · · · · · · · · · · ·	Peter Courtney, President of Senate	Passed by Senate March 7, 2014	Tina Kotek, Speaker of House	Ramona J. Line, Chief Clerk of House	Passed by House March 7, 2014	<u>SECTION 106.</u> This 2014 Act being necess peace, health and safety, an emergency is d on its passage.	Other funds       Ch. 556 3(16) +3         Federal funds       Ch. 556 4(2)         Federal funds       Ch. 556 4(3)         Federal funds       Ch. 556 4(4)         Federal funds       Ch. 556 4(4)         Federal funds       Ch. 556 4(4)
Page 38	· · ·	· ·	 	John Kitzhaber, Governor Filed in Office of Secretary of State:		Approved: 	Received by Governor: 	This 2014 Act being necessary for the immediate preservation of the public safety, an emergency is declared to exist, and this 2014 Act takes effect	+3,195,206 +28,356 +2,170 -43,100 +82,201

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# **BUDGET NARRATIVE**

# Pharmacy

# Program Description AGENCY SUMMARY NARRATIVE

### 2013-2015 Program Allocation



Operations & Admin 26.68% (Includes fingerprinting \$220,000 pass-thru)\*
 Board Member Activities 1.66%
 Licensing 14.68%
 Compliance 53.91%
 Health Professionals Service Program (HPSP) 3.07%\*

\*InterAgency Activities – Payment for PMP & WDC of \$319,775 are reflected in revenue as a pass through.

# 2013-2015 Expenditures by Type \$5,957,609



### Personel 70.06%

Travel 2.16% II Data Processing & Telecommunications 1.58% Prof. Services/Hearings Panel 1.90% Agency Program Related S & S (Fingerprinting) 3.61% \*PASS THRU Expendable Property .79% T Professional Services .86% Publicity & Publications .24% Office Expenses/Supplies (Includes Storage Fees & Postage) 2.97% Attorney General 4.85% State Government Service Charges 3.10% Facilities & Rent 3,43% Employee Training .26% Expendable Property .15% OHA Health Professional's Service Program 2.97% Other Special Payments .10% Other Services & Supplies .96% Medical Services & Supplies .02%

### 2015-2017 Program Allocation



Operations & Admin 23.42% (Includes fingerprinting \$221,248 pass-thru)
 Board Member Activities 2.38%

Licensing 25.33%
 Compliance 42.23%
 Health Professionals Service Program (HPSP) 2.57%
 Capital Outlay (IT - Database Upgrade) 4.06%

2015-2017 Expenditures by Type

\$6,872,049

\*InterAgency Activities – Payment for PMP & WDC of \$349,445 are reflected in revenue as a pass through.

Personel 66.87% Travel 1.84% Data Processing & Telecommunications 5.41% Capital Outlay (IT - Database Upgrade) 4.06% Prof. Services/Hearings Panel 1.70% Agency Program Related S & S (Fingerprinting) 3.22% \*PASS THRU IT Expendable Property .59% IT Professional Services 1.14% Publicity & Publications .55% Office Expenses/Supplies (Includes Storage Fees & Postage) 1.80% Attorney General 4.78% State Government Service Charges 1.08% Facilities & Rent 3.17% Employee Training .71% Expendable Property .15% OHA Health Professional's Service Program 2.57% Other Special Payments .17% Other Services & Supplies 4.25% Medical Services & Supplies .02%

Budget Page

\_ Agency Request

X Governor's Budget

# \_\_ Legislatively Adopted

2015-17



107BF02

**Mission Statement and Statutory Authority** 

Oregon Board of Pharmacy Funding Limitation 13-15



Conter Funds \$5,957,609

# Oregon Board of Pharmacy Funding Limitation 15-17



<u>Mission</u>: The mission of the Oregon Board of Pharmacy is to promote, preserve and protect the public health safety and welfare by establishing high standards in the practice of pharmacy and by regulating the quality, manufacture, sale and distribution of pharmaceutical products.

Statutory Authority: The authority and responsibilities of the Board of Pharmacy are contained in Chapter 689 of the Oregon Revised Statutes (The Oregon Pharmacy Act) and Chapter 475 (Uniform Controlled Substances Act).

DRS 689.005 - 995	Pharmacists; Drug Outlets; Drug Sales	
DRS 475.005 - 999	Controlled Substances; Illegal Drug Cleanup; Paraphernalia; Precursors	
DAR 855 Divisions 001 – 110	Board of Pharmacy Administrative Rules	

Statement of Purpose: The practice of pharmacy in the State of Oregon is declared a professional practice affecting the public health, safety and welfare and is subject to regulation and control in the public interest. It is further declared to be a matter of public interest and concern that the practice of pharmacy, as defined in ORS Chapter 689, merit and receive the confidence of the public and that only qualified persons be permitted to engage in the practice of pharmacy in the State of Oregon.

Agency Request	X Governor's Budget	Legislatively Adopted	Budget Page
2015-17	13		107BF02

The purpose of the Board of Pharmacy under chapter 689 is to promote, preserve, and protect the public health, safety and welfare by and through:

- 1. Control and regulation of the practice of pharmacy.
- 2. Regulation of all entities involved in the commerce, manufacture, production, sale and distribution of:
  - a. legend (prescription) drugs
  - b. over-the-counter (nonprescription) drugs
  - c. controlled substances (*drugs with abuse or addiction potential*)
  - d. devices and other materials as may be used in the diagnosis and treatment of injury, illness and disease
  - that is required under federal or state law to be prescribed by a practitioner and dispensed by a pharmacist.

"Drug" means: [ORS 689.005] (10)

a. Articles recognized as drugs in the official United States Pharmacopoeia, official National Formulary, official Homeopathic Pharmacopoeia, other drug compendium or any supplement to any of them;

b. Articles intended for use in the diagnosis, cure, mitigation, treatment or prevention of disease in a human or other animal;

c. Articles (other than food) intended to affect the structure or any function of the body of humans or other animals;

d. Articles intended for use as a component of any articles specified in a, b, or c.

"Practice of Pharmacy" means: [ORS 689.015]

(a) The interpretation and evaluation of prescription orders;

(b) The compounding, dispensing and labeling of drugs and devices, except labeling by a manufacturer, packer or distributor

of nonprescription drugs and commercially packaged legend drugs and devices;

(c) The administering of vaccines and immunizations pursuant to ORS 689.645;

(d) The administering of drugs and devices to the extent permitted under ORS 689.655;

(e) The participation in drug selection and drug utilization reviews;

(f) The proper and safe storage of drugs and devices and the maintenance of proper records therefore;

(g) The responsibility for advising, where necessary or where regulated, of therapeutic values, content, hazards and use of drugs and devices;

(h) The monitoring of therapeutic response or adverse effect to drug therapy; and

(i) The offering or performing of those acts, services, operations or transactions necessary in the conduct, operation, management and control of pharmacy.

# **BUDGET NARRATIVE**

"Drug Outlet" means: [ORS 689.005](12) any pharmacy, nursing home, shelter home, convalescent home, extended care facility, drug abuse treatment center, penal institution, hospital, family planning clinic, retail store, wholesaler, manufacturer, mail-order vendor or other establishment with facilities located within or out of this state that is engaged in dispensing, delivery or distribution of drugs within this state.

Registration of drug outlets; rules [ORS 689.305] (1) All drug outlets shall annually register with the State Board of Pharmacy.

(2)(a) Each drug outlet shall apply for a certificate of registration in one or more of the following classifications:

(A) Retail drug outlet.

(B) Institutional drug outlet.

(C) Manufacturing drug outlet.

(D) Wholesale drug outlet.

(E) Nonprescription drug outlet.

(b) No individual who is employed by a corporation which is registered under any classification listed in paragraph (a) of this subsection need register under the provisions of this section.

(3) The board shall establish by rule under the powers granted to it under ORS 689.155 and 689.205 the criteria which each drug outlet must meet to qualify for registration in each classification designated in subsection (2)(a) of this section. The board may issue various types of certificates of registration with varying restrictions to the designated outlets where the board deems it necessary by reason of the type of drug outlet requesting a certificate.

(4) It shall be lawful for a drug outlet registered under this section to sell and distribute nonprescription drugs. Drug outlets engaging in the sale and distribution of such items shall not be deemed to be improperly engaged in the practice of pharmacy. [1979 c.777 §30; 1993 c.571 §8]

This includes the following categories of drug outlets:

Charitable Pharmacy	12	Non-Prescript Drug Outlet-A	2232
Consulting / Drugless Pharmacy	6	Non-Prescript Drug Outlet-B	126
Institutional Drug Outlet	161	Med Device/Equip/Gases-C	425
Retail Drug Outlet	1229	Non-Prescript Drug Outlet-D	0
Supervising Physician Dispensing Outlet	18	Precursor	24
Home Dialysis Drug Outlet	4	Prophylactic/Contraceptive	14
Hospital Drug Room	28	Drug Distribution Agent	36
Remote Dispensing	5	Manufacturer	865
Correctional Facility	57	Wholesaler - Nonprescription	284
County Health Clinic	84	Wholesaler with Prescription	506
Family Planning	50	Controlled Substance	1867
Animal Euthanasia	25	TOTAL:	8058

### Agency two-year Strategic Plan

The Agency is tied to the Governor's Safety primary outcome area. The Agency has identified three long-term strategic goals consistent with its mission statement that will provide direction for ongoing activities and resource allocation. These three goals are tied to the agency Key Performance Measures. They are:

- 1. Protect Oregon consumers by regulating the practice of pharmacy and the commerce of drugs from manufacturer to the end user;
- 2. Provide Excellent Customer Service; and,
- 3. Conduct business in a manner that supports a positive environment for the pharmacy and pharmaceutical industries.

The Board of Pharmacy has an annual Strategic Planning Session where Board members review and establish priorities. The current Strategic Plan is a two year plan and was established March 2014. The Board has three Strategic Objectives, they are: Licensees' operating excellence: "At the top of their license," "No adverse impact on patient safety due to the workplace environment," and "An adequate and safe drug supply for the State or Oregon." The following are the Board's current Objectives for 2014-2016 / Strategic Outcomes, included are: Technician Licensing that is streamlined and workable, resulting in fewer administrative errors by technicians, A valid framework from which to take workplace safety actions that meet the intent of patient safety. A strategy is in place to insure critical drug shortages are avoided and Non-pharmacy dispensing issues are resolved in support of patient safety. Other priories continue to include: telemedicine, awareness of and rapid response to new technologies, medication reconciliation, a renewed customer service focus, non-pharmacy dispensing, prescription fraud, medication errors, legalization of marijuana and succession planning. A list of the Strategies and Tactics are included in the following plan.

# **OREGON BOARD OF PHARMACY STRATEGIC PLAN**

THE MISSION OF THE OREGON STATE BOARD OF PHARMACY

TO PROMOTE, PRESERVE AND PROTECT THE PUBLIC HEALTH, SAFETY AND WELFARE BY ENSURING HIGH STANDARDS IN THE PRACTICE OF PHARMACY AND BY REGULATING THE QUALITY, MANUFACTURE, SALE AND DISTRIBUTION OF DRUGS.

	STRATEGIC OBJEC	TIVES				
Licensees' operating excellence: "At the top of their license."	No adverse impact on patient safety due to the workplace environment	An adequate and safe drug supply for the State of Oregon.				
Objectives 2014 – 2016 / Priority Outcomes						
Technician licensing that is streamlined and workable, resulting in fewer administrative errors by technicians	A valid framework from which to take workplace safety actions that meet the intent of patient safety	A strategy is in place to insure critical drug shortages are avoided	Non-pharmacy dispensing issues are resolved in support of patient safety.			
	Strategies & Tac	tics				
<ul> <li>Hold an informational hearing on the technician licensing process. If "go":</li> <li>Draft and adopt administrative rules.</li> <li>Create a graphic representation to clearly illustrate how technician licensing works.</li> </ul>	<ul> <li>Conduct proactive outreach to licensees outlining concerns and issues, and providing prevention advice and education on conditions that could trigger an action / mitigation.</li> <li>Create a graphic representation of the paths to workplace action.</li> <li>Draft and adopt administrative rules.</li> </ul>	<ul> <li>Staff work with FDA to insure Oregon has/retains the ability to use compounders for shortage drugs.</li> <li>Obtain a root-cause analysis of drug shortage causes as they relate to Oregon.</li> <li>Open Division 45.</li> <li>Establish and implement the strategy.</li> </ul>	<ul> <li>Conduct outreach and debrief feedback with stakeholders. Compile and document stake- holders' interests and concerns.</li> <li>Refine and share our plan and timeline.</li> <li>Obtain support from legislators, boards and associations.</li> </ul>			

# **Agency Process Improvement Efforts**

The Agency regularly reviews processes for improvement, to streamline and the Management Team tracks performance measurement for Licensing and Compliance, as well as other administrative responsibilities. An example of continuous improvement is the implementation of I-Pads for Board Members and Compliance Pharmacy Inspectors. We are now able to distribute all Board Meeting materials through the most protected means possible. A significant portion of the meeting is dedicated to compliance and these materials are highly confidential. The Board Members now receive these materials and the general Board Meeting mailings on their I-Pads and the information never leaves the agency server. The Compliance Pharmacy Inspectors are now utilizing I-Pads during outlet inspections. This has streamlined and automated the recordkeeping process for inspections. Staff can now delete records from an I-Pad as soon as it is reported to the office lost or stolen. The Department of Administrative Services, Information Technology office reviewed and approved this technology option prior to implementation. The Board is currently reevaluating the concept of moving towards biennial license renewal from a licensure, compliance, continuing education, and revenue timing perspective. This is also directly tied to improve work flow and customer service.

The Compliance Director provides regular updates to the Board regarding compliance statistics. The Administrative Director provides regular updates to the Board regarding licensing statistics. Staff continues to develop reports that expand the options available for reporting to the Board and others as needed or requested.

# 2015-17 Short-Term Plan

As noted previously, the Board has identified goals, objectives and priority outcomes for the next two years; however in addition, the Board continues to also do the following to achieve the overall mission, goals, objectives and priorities of the Agency.

# Assess and monitor the competency levels of pharmacists through testing, peer review, and improved continuing education:

Evaluating continued competence of licensees beyond initial licensure is a difficult and controversial endeavor. The Oregon Board of Pharmacy participates as an active member with the National Association of Boards of Pharmacy (NABP) to provide a nationally standardized pharmacist licensure exam for candidates who have met approved minimum entry level education, training and competency standards. The Board of Pharmacy staff maintains and updates annually a large pool of questions used with the computerized national Multi-State Pharmacy Jurisprudence Exam (MPJE) and the North American Pharmacy Licensure Exam (NAPLEX). A candidate for licensure as a pharmacist must take and pass both the NAPLEX exam, and the MPJE for the state or states in which he or she desires to become licensed. A pharmacist wishing to reciprocate (transfer) his or her license from another state to practice in Oregon, and who has taken and passed the NAPLEX exam, must take and pass the MPJE for Oregon. A pharmacist from another country wishing to transfer his or her license to Oregon, or any other U. S. state, must take and pass the Foreign Pharmacy Graduate Equivalency Examination (FPGEE). The Board's NABP membership and participation has been an important aspect of the Board of Pharmacy's efforts to maintain high professional standards. In the

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# **BUDGET NARRATIVE**

absence of NABP membership and active participation, the Board of Pharmacy would be held responsible for and bear the cost of developing, maintaining, administering and defending its own examination process for the entry level licensing and continued competency of pharmacists in Oregon at a significantly increased expense. The long term financial savings directly attributable to the Board's active participation and membership in NABP is substantial.

# Review and evaluate the frequency of on-site inspections of the various drug outlets:

Board of Pharmacy inspectors evaluate hospital, charitable, consulting, and community pharmacies, supervising physician dispensing outlets, drug manufacturers and wholesalers, correctional facilities, county health and family planning clinics and other drug outlets for compliance with federal and state laws and rules. The Board has developed a pharmacy self-inspection form for each of these outlet types which enable the outlet's pharmacist-in-charge to assess compliance before an on-site inspection is made. The form is reviewed and updated annually by Board of Pharmacy staff to reflect current priorities and is provided to each pharmacy at the beginning of each year for completion. This has been received by pharmacists as a valuable educational tool and has helped the inspectors and the pharmacists-in-charge in bringing pharmacies into voluntary compliance without need of warning notices or other corrective or disciplinary measures. Oregon was the first state and continues to be one of the few states to vigorously encourage voluntary compliance by the use of the pharmacy self-inspection form. Additionally, Board of Pharmacy inspectors are available to answer questions from pharmacists, interns, pharmacy technicians, other healthcare professionals, and the general public.

The Oregon Pharmacy Practice Act requires the Board to perform on sight inspections at regular intervals. The Board has traditionally interpreted this as meaning annually. All retail and hospital and institutional pharmacies are inspected annually. As time allows and necessity dictates, Inspectors also inspect Manufacturers and Wholesalers within the state. In Oregon "Voluntary Compliance" is the heart of the regulatory process which enables the pharmacy and pharmaceutical industries and pharmacy profession to provide quality products and services to consumers without intrusive presence or intervention by the Board's investigators. The "sentinel effect", the uncertainty of when the inspector might appear on sight, provided by these unannounced on-site inspections of pharmacies serves to facilitate the needed voluntary compliance. Compliance staff reports current inspection statistics to the Board at each scheduled Board meeting.

Because of widely reported concerns of counterfeit or tainted drugs and general concerns about the integrity and security of the nation's drug distribution system, the Board feels it is also necessary to perform on sight inspections of the pharmaceutical wholesaler and manufacturing drug outlets on a periodic basis. In addition, for nonresident wholesale drug outlets that distribute prescription drugs into Oregon, the Board requires confirmation of a recent inspection. Inspection reports from other Boards of Pharmacy or the Food and Drug Administration (FDA) are reviewed and proper bonding requirements are verified annually. The Board also works with the National Association of Boards of Pharmacy to annually verify if its resident and nonresident wholesale drug outlets are Verified Accredited Wholesaler Distributors (VAWD). To further ensure public safety the Board requires that all disciplinary action be reported with initial and annual renewal applications. Any disciplinary action is thoroughly reviewed prior to issuing a registration.

# **BUDGET NARRATIVE**

Administrative rules for the licensing of pharmaceutical manufacturers, wholesale drug distributors and drug distribution agents are continuously reviewed and updated to provide the most appropriate oversight of these outlets. In 2013 the Board updated its manufacturer rules relating to compounding. The purpose of this update was to ensure that nonresident compounders shipping non-patient specific products into Oregon register with the Board as a manufacturer. Note that in order to qualify for a manufacturer registration, registration with the Food and Drug Administration is required as a licensure prerequisite. This requirement provided the Board with an additional safety control over nonresident compounders and deterrent for illegitimate nonresident compounders to apply for licensure. In 2014, the Board began drafting amendments to its drug distribution wholesale, and manufacturer drug outlet rules as a result of the 2013 Federal Drug Supply Chain Security Act (DSCSA). As a result of this law, a system will be established that will enable verification of the legitimacy of the drug product identifier down to the package level. Detection and notification of illegitimate products in the drug supply chain will be enhanced, and more efficient recalls of drug products will be facilitated. The Board continues to work with the Food and Drug Administration and other stakeholders to ensure its rules will support the DSCSA. Once finalized, the intent of the updated rules is to help protect consumers from exposure to drugs that may be counterfeit, stolen, contaminated, or otherwise harmful and to improve detection and removal of potentially dangerous drugs from the drug supply chain to protect consumers.

Data continues to reflect that since 2006, when the Board made its last significant changes to the wholesaler rules in their entirety, which included amendments that strengthened registration requirements, required greater accountability and recordkeeping in the supply chain and established a list of prohibited practices, the prevalence of gray market suppliers in and into Oregon has significantly decreased. The Board's compliance statistics indicate that in 2006 there were 21 cases involving pharmaceutical wholesalers by the end of 2013, one wholesaler case had been investigated for the year. This is a 95 percent decrease. By enhancing registration requirements to require items in rule, such as the Verified Accredited Wholesale Distributor (VAWD) Accreditation and a \$100,000 surety bond, illegitimate wholesalers have been deterred from attempting to obtain a registration. A pharmacy registered with the Oregon Board must purchase drugs from an Oregon licensed wholesaler or manufacturer to ensure that both entities are in compliance with the Board's rules. If not, one or both may be in violation of the Board's rules and subject to discipline. As the Board continues to update its rules, they continue to be tools that help to protect the drug supply by ensuring that the Board has adequate oversight over companies doing business with or in Oregon on behalf of its citizens.

Because of the complexity of the drug distribution process through manufacturers and wholesalers, staff devotes considerable time answering multifaceted questions and responding to high level inquiries from licensees, legal teams, and various other stakeholders. Over the past several years, one full time licensing representative has been assigned exclusively to wholesaler and manufacturers, as they require a high level of detail and comprehension. A licensing representative and a manager are now required to review every wholesaler and manufacturer application. This requires a significant amount of the Agency's staff time. However, it is necessary in order to ensure protection of the state's drug supply. It should be noted that although compliance cases involving wholesalers has decreased significantly, because of the work done on the administrative rules, when compliance cases do occur they are not only very costly they are also extremely time and labor intensive.

# Focus on the investigation of consumer complaints and allegations of diversion and other drug distribution violations:

The Board's Compliance staff investigates all consumer complaints as required by Oregon law. Some complaints are minor and require minimal investigation or involve issues over which the Board has no jurisdiction. The majority of complaints require full and comprehensive investigations involving complex and evolving issues of professional practice and intrastate, interstate and international drug distribution. Each investigation results in a report to the full Board for deliberation and possible action, and a response to the complainant regarding the disposition of the case. Increasingly, these investigations are consuming greater amounts of agency resources including investigator time, administrative involvement, settlement negotiations and legal advice from the Attorney General's office.

Work closely with the Medical, Nursing, Dental, Optometry, Veterinary and Naturopathic Boards and Associations as well as Local State and Federal Law Enforcement Agencies, the Colleges of Pharmacy at Oregon State University and Pacific University in an ongoing effort to eliminate the diversion of drugs from legitimate distribution channels to illegal and harmful recreational use:

Controlled substance prescription drug diversion, deliberately or through carelessness, incompetence or indifference, continues to be a challenge for the professions of medicine, nursing, dentistry and pharmacy. The risk of addiction and drug diversion by pharmacists and pharmacy technicians, with their necessary ongoing access to controlled substance inventories, is a constant concern for the Board of Pharmacy. Audits of controlled substance purchases and distribution are done by the agency's compliance staff in hospital and community pharmacies if there have been unexplained shortages. When a pharmacist or pharmacy technician is discovered illegally diverting or using prescription controlled substances, the Board has a range of disciplinary options including suspension or revocation of the individual's license.

The Health Professionals Services Program (HPSP) has been established within the Oregon Health Authority (OHA). This program allows the Board to refer an individual licensee for treatment in lieu of or in addition to disciplinary action. Working with the program continues to cost more anticipated. Direct costs to the Agency have remained relatively stable since inception.

Over the past several years, the health professions regulatory boards, including nursing, medicine, dentistry, veterinary medicine and other Health Professional Regulatory Boards (HPRB's) have been meeting at regular intervals to discuss issues of mutual interest and explore ways to develop and incorporate efficiencies by reducing duplication of resources and taking advantage of opportunities for collaboration. This group has developed an orientation packet for new legislators to help them understand the HPRB's. The group also meets regularly with the Governor's Staff and invited representatives from the Department of Administrative Services (DAS), other public and private entities, and works with various legislators on issues affecting the agencies and public health.

In 2012 the Agency wrote rules for Physician Assistant Dispensing and worked with Medical Board to create Physician Assistant Dispensing Training Program as required by 2012 legislation. These rules established a new license category called the "Supervising Physician Dispensing Outlet" that was implemented in June 2012 as required by this legislation. The initial fee was reduced in 2013 to be aligned with other similar drug outlet fees through the rulemaking process.

Maintain staffing levels and resources necessary to accomplish the long term plan and to provide timely and informative presentations on pharmacy and drug law to pharmacists, pharmacy students, consumer groups and other health care providers and students and meet other stakeholder demands;

Agency staff have responded to requests from a variety of stakeholder organizations, including colleges, professional associations, consumer organizations and other groups to speak on topics related to pharmacy and drug law at meetings, conferences, workshops and classes. These activities are encouraged by the individuals and associations representing the Board's licensees. These requests are evaluated regularly and we participate to the fullest extent possible. This agency needs not only to be prepared to respond to requests, but should also be able to take a pro-active posture in reaching out to its stakeholders including individuals, and appropriate consumer, health care provider and business organizations. As the Agency's workload and responsibilities continue to evolve, so must the Agency's staffing and resource level. The Board benefits from these outreach activities by improving our relationships with our licensees, as well as achieving higher compliance without having to resort to disciplinary measures.

Work closely with appropriate state and federal agencies to develop policies and guidelines for the use of electronic signatures and coding to facilitate the use of electronic technologies in prescribing and dispensing drugs and devices;

These policies and guidelines must facilitate the use of appropriate technology and protect the integrity of electronic data by providing a means of positively identifying the prescriber and the dispenser electronically. They must also address the broader issue of privacy by protecting the confidentiality of and preventing unauthorized access to an individual's confidential medical and pharmacy records. The confidentiality requirements of the Health Insurance Portability and Accountability Act (HIPAA) must be included in the overall development of electronic technologies applied to prescribing and dispensing. Proposals for the use of electronic technologies in the practice of pharmacy and the distribution of drugs are currently before the Board, challenging the existing regulations. Regulations need to be updated to facilitate emerging technologies. Board members and staff have participated in activities with NABP, Drug Enforcement Administration (DEA), Food and Drug Administration (FDA) and the state Health Professional Regulatory Boards (HPRB's) to facilitate the transition from hand written prescriptions to prescriptions that can be electronically generated and transmitted from the practice standards evolve with the electronic technology. Electronic prescribing is rapidly becoming more prevalent with the added ability to transmit controlled substance prescriptions electronically. It is expected to improve recordkeeping, reduce the opportunity for diversion, and reduce dispensing errors due to illegible handwritten prescriptions. The Agency has encouraged the move to e-prescribing at every opportunity and has sought to amend statutes and rules to further facilitate this evolution. 2014 Legislation authorized the ability for practitioners to electronically transmit prescriptions for Schedule II controlled substance in nonemergency situations; this went into effect on March 13, 2014.

# Agency Programs

The Oregon Board of Pharmacy is currently made up of five members who are practicing pharmacists, two public members who are not pharmacists and 19 full or part time positions. The Board is budgeted and accounted as a single program. The staff is internally organized into three distinct sections including Licensing, Compliance and Operations/Administration. The agency additionally tracks expenditures separately for Board Member Activities and Interagency Activities.

The *Licensing section* is made up of 5 positions that handle all details related to licensing and examinations including applications, renewals, production and mailing of more than 25,093 certificates of registration and licensure and frequent communication with licensees and applicants. Examinations include the North American Pharmacy Licensure Examination (NAPLEX), the Multi-state Pharmacy Jurisprudence Examination (MPJE), the Foreign Pharmacy Graduate Equivalency Examination (FPGEE), and the Test of English as a Foreign Language (TOEFL *i*BT). The Licensing and Background Check Specialist staff also performs criminal background checks with established Policies and Procedures using the Oregon Law Enforcement Data System (LEDS) on all new pharmacist, pharmacy technician, certified pharmacy technicians and pharmacy intern applicants. The Board requires national fingerprint background checks for all new applicants. The Board recently converted to electronic Fingerprint background checks that are valid for 12 months. Staff regularly visits the pharmacy schools in Oregon to meet and talk to the incoming students about professional responsibilities and licensing and to talk to the soon to be graduating students about procedures and requirements for licensure as a pharmacist.

The *Compliance section*, made up of eight positions, which includes six pharmacists and two administrative staff and is responsible for all onsite inspections of pharmacies and drug outlets, all investigations of consumer complaints, reports of possible drug diversion and other suspected violations, administrative details of proposed and ordered disciplinary action and monitoring all licensees who have been placed on probation through the disciplinary process. Compliance staff is also responsible for interpretation and review of pharmacy laws and rules and provision of information to and consultation with all stakeholders on pharmacy and drug laws upon request.

The *Operations/Administration section* includes six positions that is a combination of operations and administrative functions. It includes the Executive Director, Administrative Director, Pharmacist Consultant, Project Manager, Office Manager, and Management Secretary/Background Check Specialist. The Executive Director is responsible for the overall operation of the Agency, which includes, supervision of the Operations, Licensing and Compliance sections and the performance of all staff, the interpretation and implementation of Board policy, oversight of all public and media relations, active participation with the National Association of Boards of Pharmacy (NABP), the American Council of Pharmaceutical Education (ACPE), and the state and federal regulatory bodies including the U.S. Food and Drug Administration (FDA) and the Drug Enforcement Administration (DEA) and the development and maintenance of the network of stake holder relationships.

# **BUDGET NARRATIVE**

The Executive Director directly supervises the Administrative Director, the Compliance Director, Pharmacist Consultant, and the Project Manager and answers to the President of the Board. The Administrative Director supervises and oversees the daily operations of the agency and supervises the Office Manager, Management Secretary and Licensing sections' activities and staff. This position also encompasses a variety of other administrative functions including, coordination of board meeting activities, agenda development, budget preparation, accounting, contracts, and coordinates human resource activities with the Department of Administrative Services Enterprise Human Resource Services. The Compliance Director directly supervises the Compliance section activities and staff. The Pharmacist Consultant position was added back to the agency as approved in the 2013-15 Legislatively Approved Budget. This position is specifically responsible for conducting research and managing projects that require pharmacist expertise. The position also assists the Executive Director with media requests and legislative activities to name a few. The Project Manager position provides essential support in researching issues and managing projects for the Agency. The Office Manager is responsible for general office management, including database and network administration, accounts payable/receivable, facilities management, purchasing. This position currently provides day to day direct oversight of the Licensing Section and works directly with the Administrative Director on licensing policy issues. Staff in this section is involved in conducting policy research, writing reports and recommendations, and coordinating committees and task forces as required by the Board.

"Board Member Activities" includes capturing all activities related to board members' compensation, travel, lodging and other expenses and all activities related to holding board meetings.

*"Interagency Activities"* includes pass through payments to Oregon State Police for fingerprint for criminal background checks for all new licensees, Workforce Data Collection fees for data analysis to the Oregon Health Authority (OHA), Prescription Drug Monitoring Program fees to OHA and the Health Professional's Services Program costs for impaired professionals to OHA.

The following list reflects additional ongoing operational tasks that are required of the Agency.

# <u>Regulating the Practice of Pharmacy & Distribution of Drugs in the Public Interest</u> <u>Ongoing Operational Tasks</u>

# **Office/Agency Management**

- Operate office efficiently consistent with DAS administrative requirements for state agencies
- Develop & maintain efficient internal information and data management systems
- Perform all aspects of the budget process, including preparation, monitoring, accounting and reporting
- Develop & maintain appropriate operational structure for efficient administration of Board meetings, timely implementation of Board policies and effective achievement of goals identified by the Board

# Licensing & Examinations

- Verify qualifications and provide licenses to all qualified applicants in a timely manner
- Develop and maintain a large pool of exam questions for the NAPLEX and MPJE national licensure examinations
- Conduct criminal background checks on all new licensees and annual renewing licensees

# Investigations

- Investigate all consumer complaints fully in a timely manner
- Investigate all allegations of drug abuse or diversion by licensees in a timely manner
- Provide complete and timely reports to the Board
- Collaborate with federal, state and local law enforcement agencies when appropriate

# **On Site Inspections**

- Inspect Pharmacies annually, other Drug Outlets as resources permit
- Monitor outcomes, identify trends, report, educate and discipline when necessary

# Information and Assistance

- Answer questions & provide information requested by stakeholders in a timely manner
- Produce quarterly OBOP/NABP Newsletter and OBOP Internet website

# **Pharmacy Profession**

- Monitor state and national trends in pharmacy & pharmaceutical industries, and professional practice
- Monitor state and federal drug laws and rules affecting the pharmacy & pharmaceutical industries, and professional practice
- Maintain and update Oregon administrative rules and laws related to pharmacy practice and drug distribution
- Develop and maintain collaborative working relationships with pharmacy professional associations
- Develop and maintain appropriate entry level education and continuing competency policies for pharmacists and pharmacy technicians as required by law

# **Other Stake Holders**

• Develop and maintain collaborative working relationships with consumers & consumer groups, industry stakeholders, and other health care professional associations, pharmacy students and faculty, state agencies and the legislature

# **Oregon Legislature**

- Monitor for Legislative measures affecting the agency or the prescribing, dispensing or distribution of drugs
- Draft legislative measures and provide oral and written testimony as necessary
- Actively participate with legislators, legislative committees, and task forces when appropriate

# Outreach

- Communicate safety practices to consumers and collaborate with other agencies when appropriate
- Provide appropriate education to pharmacists
- Communicate laws to non-English speaking citizens when needed
- Boards of pharmacy, unlike other health regulatory boards, are required to interface and interact with many other state and federal regulatory agencies. These include, on the federal level, the U.S. Food and Drug Administration (FDA), with federal authority over prescription and non-prescription drugs and devices and the U.S. Drug Enforcement Administration (DEA), with federal authority over narcotics and other controlled substances. These also include, at the state level, the Health Professional Regulatory Boards (HPRB's) for every discipline with the authority to prescribe, dispense, administer or possess drugs and devices including physicians, nurses, nurse practitioners, dentists, veterinarian, optometrists, physician assistants, and naturopathic physicians.
- Boards of pharmacy also uniquely differ from other health regulatory boards in that boards of pharmacy not only regulate the licensed professional individual, but they also regulate the commerce of all drugs from manufacturer to end user for the quality and distribution of products and services by registering the various types of drug outlets. These are locations at which the licensed health professional practices his or her profession, and the locations at which un-licensed employees manufacture and distribute drugs and devices. It is the drug outlet, not the individual pharmacist or employee that has the authority to possess prescription and non-prescription drug inventory for distribution. This creates a dual role that involves a variety of unique circumstances with which pharmacy boards must be concerned and which are not shared by the other health regulatory boards. The impact of this multi-disciplinary and dual role is compounded by the fact that these individuals and drug outlets exist not only within Oregon, but also outside of Oregon in all U.S. states and jurisdictions where drug outlets are involved in distributing drugs into Oregon or are planning to do so. These out of state pharmacies, wholesalers and manufacturers must be licensed by the Oregon Board of Pharmacy to do business in the state.
- The Oregon Board of Pharmacy, pursuant to ORS Chapter 475, regulates the narcotics and other controlled substances and investigates complaints and allegations of prescription controlled substance diversion. Some states have established separate bureaus of narcotics and dangerous drugs which assume authority over the investigation and enforcement activities involving controlled substances. Oregon is not one of these.

# **Environmental Factors**

- 1. Because changes in the focus of pharmacy practice and technological advances are being incorporated into systems of drug distribution, the Board is being required to rewrite many of its major administrative rules. Rules relating to continuing professional education, the licensing and supervision of pharmacy technicians, the licensing and operation of pharmaceutical wholesalers, manufacturers and drug distribution agents and the operation of pharmacies serving long term care facilities are in the process of being reviewed and updated.
- 2. While U.S. drug supplies are generally considered safe, incidents of counterfeit and diverted or stolen drugs have been increasing. Counterfeiters are becoming more sophisticated in their technologies and methods of remaining undetected while introducing adulterated and counterfeit drugs into the US system. Prescription controlled substances are increasingly becoming targets of theft from pharmacies and pharmaceutical distributors. The country's drug supply is under unprecedented attack from a variety of increasingly sophisticated threats. Although counterfeiting and prescription drug theft was once a rare event, we are seeing increasing numbers of pharmacy and pharmaceutical wholesaler robberies and large supplies of counterfeit versions of finished drugs being manufactured and distributed by well-funded and elaborately organized networks.

There are several reasons for the increase. There is generally a higher recognition and demand for prescription drugs, as more drugs are developed to treat more diseases. Drugs are getting more expensive, so consumers may be more willing to turn to nontraditional sources and criminals are more willing to assume risk for higher returns. Prescription controlled substances are replacing traditional "street drugs" such as marijuana, cocaine, methamphetamine and heroine. New technologies make it easier for criminals to make counterfeit drugs, and now that drugs are being sold over the Internet, without face-to-face contact between buyer and seller, it's more difficult for consumers to know if the source is legitimate.

Some prescription drugs follow a long path, through wholesalers and re-packagers, before reaching the pharmacy shelf. Some unscrupulous individuals have been able to sneak counterfeit drugs into the system of wholesale distribution. When pharmaceutical wholesalers or re-packagers get their drug products from sources other than original manufactures, opportunities for introducing inexpensive counterfeit products into the system unbeknownst to the legitimate wholesaler are opened up. Once outside the "regular distribution system" and into the "gray market system" the drugs are no longer protected by the regulatory safeguards for packaging and storage. Drug counterfeiting has become a very lucrative, and in some cases a very systematically coordinated and organized crime. Adding to this, the Internet and the advent of "on-line" drug distribution schemes have created a dynamic that goes far beyond the Agency's ability and authority. Increasingly, the Agency has been required to devote significant resources in its efforts to regulate websites involved in legal distribution, as well as illegal distribution of adulterated and counterfeit drugs.

In 2011 the Board convened a Prescription Fraud Work-Group which consists of representatives from law enforcement, chain pharmacies, independent community pharmacies, the Oregon Medical Board and the Oregon Prescription Drug Monitoring Program (PDMP). Within the

# BUDGET NARRATIVE

last year, the PDMP has received authority to expand access to the program for other users within the healthcare system and use has increased. The Board also continues to advocate for PDMP use within the pharmacy community. The work-group reviewed rule requirements and guidelines implemented by other states to help decrease the prevalence of prescription fraud and utilized the information to develop suggested best practices to address prescription fraud and pharmacy robbery. This information was provided to all pharmacies in the state and is available on the Board's website at <a href="http://cms.oregon.gov/pharmacy/pages/Fraud\_info.aspx">http://cms.oregon.gov/pharmacy/pages/Fraud\_info.aspx</a>. It consists of an informational brochure, a voluntary fraudulent prescription reporting form as well as a list of non-emergency Oregon law enforcement agency phone numbers. These tools were developed to help promote preparedness as well as foster communication between pharmacy staff and law enforcement in an effort to help deter fraudulent activity.

An additional tool developed for community and health system pharmacy staff is the Board's list serve for pharmacists. When the Board receives reliable information from pharmacies or from law enforcement of an organized prescription forgery ring or confirmation from a prescriber that the prescribers DEA number or prescription blanks have been compromised the Board alerts its pharmacists through its list serve usually within 24 hours of the occurrence. These alerts have been a valuable tool for quickly reducing the fraudulent activity. In the last two and an half years, the Board has received over 300 reports and sent out fraud alert reports to the pharmacies, which has resulted in arrests and increased awareness of prescription fraud.

- 3. In addition to increasing numbers of licensees the Agency's workload continues to be driven primarily by an increase in the complexity of consumer complaints, and to the growing complexity as well as number of investigations and requests for information. This has led to an increase in the amount staff time required to adequately address and attend to stake holder issues. The consumer of pharmaceutical supplies and services is becoming more informed (or misinformed) and thus, is demanding or needing a higher level of service and a greater amount of information. The drugs and devices available to consumers through pharmacies and other drug outlets are becoming more sophisticated and more potent, have the potential for more serious adverse effects and are being used to treat more conditions and more critical conditions. More pharmacies than ever before are owned and operated by corporations, many of whom are large, publicly held national and multinational companies with complex business and financial structures, with heavily staffed legal departments and government relations teams. Pharmaceutical researchers and manufacturers are becoming more involved in direct to consumer confusion, as well as an increase in demand for pharmaceutical products, information and services. Medicaid, managed care companies and pharmacy benefit management companies (PBM's), in their zeal to reduce costs, are inadvertently contributing to a disruptive environment by placing barriers, restrictions and requirements on access to and reimbursement for pharmacy services, drugs and devices.
- 4. As the state's population increases in age and number, the use of prescription and non prescription drugs continues to increase. This increase in demand for prescription drugs and services is stressing the industries abilities to meet consumer's expectations.
# **BUDGET NARRATIVE**

- 5. As pharmacists' professional activities assume increased responsibility in areas of direct patient care, such as medication therapy management (MTM) under Medicare, disease state management programs and protocols, collaborative drug therapy management (CDTM), immunizations and clinical laboratory health screen testing, pharmacy technicians are being trained, certified and licensed to perform many of the mechanical tasks of preparing and packaging medications, and other production functions that were previously performed by pharmacists. Pharmacists have become trained and are much more focused on patient care and drug therapy management while pharmacy technicians are focusing on production activities under training and supervision of the pharmacist. This has required an extensive revision of the pharmacy practice rules which are currently being reviewed and updated regularly.
- 6. Agency staff is being asked to contribute increasing time and resources to participate in a variety of new and ongoing activities with other state agencies. Increased activity at the state level regarding preparation for natural disasters, public health emergencies and bio-terrorism events has required agency staff participation. Increased activity at the state level to develop mechanisms for assessing quality and systems for effectively reporting to appropriate entities such as the Oregon Patient Safety Commission, has required Agency staff participation. Other issues such as emergency and business continuity planning, ethnic diversity, language and cultural competence, health care workforce shortages, the Oregon Health Authority's Health Professional's Services Programs, Prescription Drug Monitoring Program, and the OHA's Workforce Data Collection and Opioid Workgroups are requiring agency staff participation.

In the past several years, Agency staff worked closely with law enforcement agencies and researchers from the Oregon State University College of Pharmacy to ban the sale of synthetic cannabis and dangerous stimulants such as substituted cathinones known as bath salts. In 2011 the Board adopted rules to amend Controlled Substance Schedule One to include synthetic cannabinoids and cathinone-type derivatives that are subject to abuse, and have no legitimate medical purpose. Instead of scheduling only known cathinone-type drugs the Board scheduled derivatives of cathinone and methcathinone, as well as all cannabinoid receptor agonists that are not FDA approved drugs. At its August 2012 Board meeting the Oregon Narcotics Enforcement Association reported that the adoption of this rule has made a significant positive impact in the prevalence of designer drugs throughout the State. In 2013, the Oregon State Police Forensics Laboratory requested the Board update these rules to capture additional derivatives of these synthetic drugs that continue to be developed and abused.

7. A number of calls, contacts and requests being diverted and directed to the Board of Pharmacy that would otherwise more appropriately be directed to Oregon State Pharmacist Association (OSPA) continue. The Board does not function as or in lieu of a professional association. In the absence of a visible and active professional association, the Board will continue to carefully determine appropriate responses to the various requests for attention to pharmacy related issues. This does impact staff work load and flow, but it is important that Board resources and activities remain focused on representing the interest of public health and safety and not the interest of the pharmacy profession or the pharmaceutical industry.

#### Strategic Initiatives & Accomplishments

The Agency has identified a number of strategic initiatives that will support the intermediate outcome targets or objectives of the Board's strategic and business plans. The Board will:

#### Work toward reducing the number of dispensing errors, or mis-filled prescriptions,

The Board is aggressively addressing ways to improve patient safety and reduce medication errors. One of the tools implemented by the Board is its prescription identification label, or "PIL" rule. It is intended to help the patient at home, long after the dispensing, to positively identify tablets and capsules. Oregon was the first and remains one of the few states requiring the PIL. In January 2012 the Agency created an educational display in the Portland State Office Building focused on PIL and on the National Association of Boards of Pharmacy AWARxE Program website at <a href="http://www.awarerx.org/">http://www.awarerx.org/</a>. The material developed for this display was also used at other healthcare events across the state and was given to a representative in Mississippi for use by the Board of Pharmacy at a local health expo. The Board also adopted a position statement on *Medication Error Reduction called Optimizing Patient Safety and Reducing Medication Errors in Oregon*. This topic continues to be a top priority of the Board.

#### Explore ways to better assess and appropriately respond to the public and other stake holder interests in a timely manner.

It is in the interest of the public health, safety and welfare that consumers have reasonably convenient access to pharmacy services provided by qualified and competent pharmacists and reasonable trust that the pharmaceutical products are safe and effective. It is the role of the Board of Pharmacy to regulate the industry and the professional practice of pharmacy in the public interest, as well as to eliminate or, at least, to not introduce unreasonable or unnecessary regulatory barriers to the public's access to pharmaceutical products and services.

In April 2012 the Board adopted rules to allow hospitals to implement Technician Checking Validation Programs (TCVP) to allow the redirection of a pharmacist from a distributive role to a patient oriented role. Within the last two years, five hospitals have received the Board's approval to implement TCVP systems. The Board requires each hospital to report back after one year of implementation and the Board is receiving good feedback on their progress and ways to improve the rule requirements that were unidentified at the time of rulemaking.

Develop high standards in pharmacy practice by working more closely with the Oregon State University and Pacific University Colleges of Pharmacy to facilitate the transition of pharmacists to drug therapy managers and drug counseling specialists to function in a manner more consistent with their education and training.

By working closely with physicians and other health care professionals, pharmacists can focus primarily on the health and quality of life of the patient. Pharmacists are required, by both federal and state law, to provide information to patients on drugs, to keep complete pharmacy records on every patient, and to review those records for therapeutic duplication, drug interactions, side effects, appropriate dosing, allergies, etc. They are also expected to advise prescribers on what drugs and dosages are available and to provide other information to help determine

# **BUDGET NARRATIVE**

which might be the preferred drug product, dose or dosage form for a particular patient. Patient counseling, drug therapy management and patient monitoring and follow up are a part of the 'therapeutic outcome' approach to pharmacy practice. The end results are better drug therapy outcomes, a more involved and knowledgeable patient and better overall health care for the population. To this end, the Board will continue to encourage appropriate collaborative drug therapy management relationships, and disease state management programs. Pharmacists also have an increased responsibility to administer immunizations and improve immunization rates for the Oregon population.

In July of 2013 the Agency conducted a follow up opinion survey to the 2011 survey of pharmacists regarding workplace conditions related to professional practice and patient safety. The results of the survey have been published on the Agency's website: <u>http://www.oregon.gov/pharmacy/Imports/OBOP-Pharmacy\_Working\_Conditions\_Survey\_Results11.13.pdf</u>. The Agency utilized the results of the survey to determine whether its drug outlet conduct rules were effective and which remaining issues still need to be addressed. However, survey results clearly identify there is still room for improvement.

Find ways to increase the public's awareness of the Board of Pharmacy and understanding of services provided by pharmacists; Direct contact and outreach with consumer advocacy groups, written publications and electronic communications through the Board of Pharmacy's Internet website are being used in this effort to help consumers understand what to expect from their pharmacist or pharmacy, and how and when to report problems they might have experienced or concerns they may have.

The Agency continues to work with NABP to promote and develop content for the AWARxE website <u>http://www.awarerx.org/</u> which provides information for consumers on counterfeit medications, prescription drug abuse and medication safety issues. This year, the Board also participated with NABP to link to a <u>Red Flag video</u> that helps pharmacists identify signs of drug seeking behavior, drug diversion and prescription forgeries. Pharmacists play a critical role in limiting inappropriate entry of controlled substances into the population. This video can also be accessed from our home page, <u>www.oregon.gov/pharmacy</u>.

Accomplishments: Key accomplishments over the last few years include:

- Scheduled Synthetic cannabis (Spice) and substituted cathinones (pond cleaner, potpourri) as C-I on state CSA list in 2011 and updated in 2013.
- Completed a "Pharmacy/Workplace Safety" opinion survey in 2011 and drafted new applicable rules in 2012 that have shown improvements in working conditions and thereby minimize errors and improve patient safety outcomes.
- Accepted the Fredrick T. Mahaffey Award at the 105th NABP Annual Meeting and Conference in Miami, FL. May 17, 2009, "for *Exceptional Contributions to the Health and Welfare of the Public*..." for its work related to scheduling pseudoephedrine as a controlled substance.
- Accepted the Fredrick T. Mahaffey Award at the 109<sup>th</sup> NABP Annual Meeting and Conference in St. Louis, MO. May 21, 2013, "for *Exceptional Contributions to the Health and Welfare of the Public*..." for its work related to the Pharmacy/Workplace Safety survey

# **BUDGET NARRATIVE**

and subsequent rulemaking that defines grounds for discipline for outlets that fail to provide a working environment that protects the health, safety and welfare of patients, see <u>OAR 855-041-1170</u>.

• Expanded online license renewal system options to include interns, non-prescription drug outlets, wholesalers, manufacturers and drug distribution agents. Pharmacists and pharmacy technicians continue to renew online and this has improved licensing efficiency.

#### Criteria for 2015-2017 Budget Development

The following goals have been identified by the Board to be used as a basis to develop this budget proposal. From these general goals, and with these goals in mind, all agency activities and allocation of resources are determined. Agency staff continues to ensure that Agency direction remains consistent with the Agency's mission statement. The short and long term goals of the agency all tie directly to the mission of public safety.

Goal 1. Protect Oregon Consumers by regulating the practice of pharmacy and the distribution of drugs

Goal 2. Provide Excellent Customer Service

Goal 3. Conduct business in a manner that supports a positive environment for the pharmacy industry

#### Annual Performance Progress Report

The Board has the following legislatively approved Key Performance Measures:

- Percent of inspected pharmacies that are in compliance annually
- Percent of audited pharmacists who complete continuing education on time
- Percent of pharmacies inspected annually
- · Average number of days required to complete an investigation from complaint to board presentation
- · Percent of customers rating their satisfaction with the agency's customer services as "good" or "excellent"
- Board Best Practices Percent of total best practices met by the Board

See the following pages for the 2014 Annual Performance Progress Report which reflects 2013 data.

## PHARMACY, BOARD OF

## Annual Performance Progress Report (APPR) for Fiscal Year (2013-2014)

Original Submission Date: 2014

Finalize Date: 12/30/2014

2013-2014 KPM #	2013-2014 Approved Key Performance Measures (KPMs)
1	Percent of inspected pharmacies that are in compliance annually.
2	Percent of audited pharmacists who complete continuing education on time.
3	Percent of pharmacies inspected annually.
4	Average number of days to complete an investigation from complaint to board presentation.
5	Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent" : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.
6	Board Best Practices - Percent of total best practices met by the Board.

New Delete	Proposed Key Performance Measures (KPM's) for Biennium 2015-2017
	Title:
	Rationale:



ARMACY, BOARD OF I. EXECUTIVE SUMMAR	
Agency Mission: The mission of the Oregon State Board of Pharmacy is to promote, pres high standards in the practice of pharmacy and by regulating the quality	
Contact: Karen MacLean, Administrative Director	<b>Contact Phone:</b> 971-673-0001
Alternate: Marcus Watt, Executive Director	Alternate Phone: 971-673-0001



#### **1. SCOPE OF REPORT**

The Board of Pharmacy is identified as one program. Current key performance measures specifically address issues relating to the Compliance and Licensing programs in the agency, as well as general overall agency performance for customer service and the Board's Best Practices. The Agency has four operational components: Licensing, Compliance, Administration/Operations and Board Member Meeting/Activities. This report covers calendar year 2013. The 2014 data reflects 2013 results.

#### 2. THE OREGON CONTEXT

The Board's mandate is to promote, preserve and protect the health, safety and welfare of the citizens of Oregon. The desired outcome is safe practices within the profession that result in a healthier and safer Oregon. The Board's role is to make sure that only competent individuals are allowed to practice or work in the profession and that Oregon citizens have confidence in the security and integrity of our drug supply. There are not currently any high level societal outcome measures that exist within the Oregon Benchmarks.

#### **3. PERFORMANCE SUMMARY**

Goal #1: Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs - Successes: During 2013, Board staff and stakeholders worked on the development of a number of rules including: Manufacturers, Fees, Customized Patient Medication Packaging, Controlled Substances, Consulting Pharmacist Practice, Central Fill Drug Outlets, Remote Processing Drug Outlets, and Consulting or Drugless Pharmacies, Central Fill Drug Outlets, Remote Processing Drug Outlets, and Consulting or Drugless Pharmacies, Central Fill Drug Outlets, Remote Processing Drug Outlets and Consulting or Drugless Pharmacies. The Board worked to expand its communication to licensees and added several list-serves to get timely information out to licensees more quickly. The Board continues to work closely with other state agencies, Boards of Pharmacy's and the National Association of Boards of Pharmacy. The Board continues to offer "Pharmacist In Charge" or PIC Training. This training continues to be a useful outreach to help new pharmacists, especially new managing pharmacists understand their responsibilities as required by the Board. The Board continues to emphasize that it is important to complete Pharmacist Continuing Education requirements and stay current on new developments in the practice of pharmacy.

Board staff completed 100% of the pharmacy inspections in 2013. This measurement remains consistent from 2012. Having a fully trained staff facilitates success for KPM #3.

Goal #2: Provide excellent customer service - Successes: The customer service measure (KPM #5) clearly identifies in all categories that the Board continues to be rated as excellent or good. The Board observed an increase in the overall scores. We are continually striving to provide excellent service in a timely manner in all departments of our agency and strive for even better services in 2014. The Board continues to streamline processes and procedures while focusing on efficiency and effective use of resources as we serve the public. The Board's website is a primary method of communication to licensees and the public. We are able to post more lengthy documents on the website to reduce the cost of printing and mailing. Additionally, the Board continues to add public records associated with disciplinary actions going back to 2007 to the Board's license verification website for individuals and outlets. This assists in transparency and reduces the number of requests for public records. The response has been favorable.

Goal #3: Conduct business in a manner that supports a positive environment for the pharmacy industry - Successes: The Board does not currently have a performance measure attached to this goal; however, this is something that the Board considers with regularity. The Board continues to utilize stakeholder workgroups as an effective way to support a collaborative review of Administrative Rules and address topics that require specific research and stakeholder input. Stakeholders are invited to participate and have been very helpful in identifying issues that support the Board's goal to conduct business in a business friendly manner. In addition, the Board regularly evaluates what is happening in other states and federally. The Board also encourages participation at Board meetings by providing continuing education credit for attendance. Board members and staff regularly attend professional practice association meetings such as the Professional Practice Roundtable and the Statewide Pharmacy Coalition to be accessible and transparent to the profession. Board staff also hold Pharmacist-in-Charge classes

to educate licensees on Board rules and expectations.

The development of new rules mentioned above are good examples of stakeholders input and the Board updating rules to address technology and current practices.

#### 4. CHALLENGES

<u>Goal #1:</u> Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs - Prescription fraud continues to be a significant issue impacting those who practice in the pharmacy profession and has severe consequences on the citizens of the state. The Prescription Drug Monitoring Program went into effect on June 1, 2011. However, this tool has not been as widely used among practitioners as anticipated. The Board continues to encourage pharmacists and pharmacies to utilize the Prescription Drug Monitoring Program. In 2012 the Board developed a prescription fraud electronic listserve to notify pharmacists of fraudulent prescriptions and remind them of suggested best practices when dealing with a fraudulent prescription. The listserve was used frequently in 2013. As of September 23, 2014, over 64 email notifications alerting pharmacists of fraudulent activity have been sent. Prescription fraud continues to be a concern of the Board's as each fraudulent prescription takes valuable time away from pharmacy staff. This continues to trouble the Board and law enforcement alike. Additionally, the Board continues to spend time and resources on illegal internet pharmacies. Goal #2: Provide excellent customer service -Although the overall average increased between 2012 and 2013 the Board is continually working on improving

<u>Goal #2:</u> Provide excellent customer service -Although the overall average increased between 2012 and 2013 the Board is continuarly working of infiftoving the website through frequent updating, the use of plain language, monthly reviews, and suggestions. <u>Goal #3:</u> Conduct business in a manner that supports a positive environment for the pharmacy industry. The biggest challenge continues to be the number of different types of licensees we regulate such as: the pharmacy industry, which includes community and hospital pharmacies, the pharmaceutical industry, which includes wholesalers and manufactures, and the practitioners/support personnel which includes pharmacists, pharmacy interns, preceptors and pharmacy technicians. These distinct categories with their diverse issues are all subject to the Board's authority and require the Board's attention. The Board also faces challenges keeping up with emerging technology. New technology requires the Board to evaluate its rules to ensure new technology is encompassed in existing rules or the development of new rules.

#### 5. RESOURCES AND EFFICIENCY

None of the existing key performance measures specifically speak to efficiency measures, but rather to the Agency's goals. The Agency has some internal efficiency measures that were removed from the KPM's in 2005 that relate to timing of licensure processes.

PHARMA	CY, BO	ARD OF II. KEY MEASURE ANALY	
KPM #1	Percer	of inspected pharmacies that are in compliance annually.	
Goal		Protect Oregon consumers by regulating the practice of pharmacy and	d distribution of drugs.
Oregon Co	ontext	KPM #1 - Agency mission.	
Data Sour	ce	Query database.	
Owner		Board of Pharmacy Compliance Director (971) 673-0001	



#### **1. OUR STRATEGY**

The Board's goal is to complete inspection of all Oregon pharmacies annually. To achieve this goal, it is necessary to have trained pharmacist Compliance

#### PHARMACY, BOARD OF

#### 2. ABOUT THE TARGETS

Ideally, the target should be 100% compliance. The legislature set this target to 75%.

#### 3. HOW WE ARE DOING

This performance measure indicates that the number of inspected pharmacies that were in compliance in 2013 increased slightly from 82 to 83%. This increase is relatively small, but is attributed to Board education and outreach. Such education and outreach is conducted through the Board's website, CE programs, Pharmacist in Charge classes, Pharmacist-in-Charge Self-Inspection process, Board meetings and training, as well as staff that are available for questions daily.

#### 4. HOW WE COMPARE

The Board continues to promote its Self-Inspection Report that is updated regularly and required annually. The Self-Inspection Report has been a valuable tool that has assisted pharmacies in complying with Oregon laws and rules. The training class for Pharmacists-in-Charge is also valuable to pharmacists and the Board receives excellent feedback on its benefits from its licensees. The variance shows that pharmacy's compliance increased during calendar year 2013. This performance ties directly to the pharmacies maintaining compliance with agency laws and rules. This appears to compare favorably with rates of compliance with laws and rules of other Oregon agencies.

#### 5. FACTORS AFFECTING RESULTS

The Compliance staff is available to respond to questions and counsel on best practices leading to compliance. Annually updated Self Inspection forms provide the pharmacists with information and references to issues the Board feels are important, reflect new rules and which leads to increased levels of compliance

#### 6. WHAT NEEDS TO BE DONE

Complete staffing in our Compliance department assists with a greater ability to serve the pharmacy community and the public. Additionally, regular updates to the Self Inspection form, based on the analysis of the compliance statistics or new rules of significance identified by the Board, help pharmacies stay in compliance.

#### 7. ABOUT THE DATA

12/30/2014

PHARMACY, BOARD OF	II. KEY MEASURE ANALYSIS

Calendar year 2013 data shows an increase in compliance for this measure. This is strong data because it is easy to determine whether the pharmacy is in or out of compliance. During inspections, Compliance staff use the Self Inspection Report to identify deficiencies and educate pharmacy managers where improvement is necessary. Pharmacies have 30 days to report back to the Board on corrections to the deficiencies. This continues to be a useful tool for the Board and pharmacies. Only those pharmacies that continue to be out of compliance after 30 days are included in this report's calculations.

PHARMA	CY, BC	, BOARD OF II. KEY M	
KPM #2	Percer	at of audited pharmacists who complete continuing education on time.	2000
Goal		Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs.	
Oregon Co	ontext	KPM # 2 - Agency mission.	
Data Sour	ce	Manual review of audited licensee CE renewal data sheets.	
Owner		Board of Pharmacy Licensing (Administrative Director) (971) 673-0001	



#### **1. OUR STRATEGY**

Continuing education is one strategy to ensure pharmacist competency to practice. The Board adopted rules requiring a minimum of 15 hours of continuing education annually. The Board annually audits 10% of pharmacists for compliance.

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#### PHARMACY, BOARD OF

#### 2. ABOUT THE TARGETS

The 100% target is maintained because pharmacists are required to achieve 15 hours of continuing education annually in order to renew their license.

#### 3. HOW WE ARE DOING

For calendar year 2013, compliance for this measure remained the same when compared to 2012. Statistics reflect that there were more individuals that were audited in 2013, this is due to a growth in the number of pharmacists licensed in Oregon. In 2013 571 pharmacists were audited while in 2012, 531 pharmacists were audited. In 2013, 31 individuals were late and 13 had to take an exam. In 2012, 26 were late and 5 had to take an exam. Any pharmacist not in compliance is subject to disciplinary action. The Board continues to emphasize the importance of keeping up with continuing education by participating in the previously mentioned Pharmacist in Charge training and various professional meetings held around the state. Staff also provides presentations on pharmacy and drug law at various professional association meetings. The Board Compliance Director also regularly reviews CE programs offered in Oregon for approval and the Compliance staff periodically audits these programs to make sure the content is appropriate for credit hours as directed by the Board.

#### 4. HOW WE COMPARE

Most other Oregon health licensing boards have requirements for continuing education.

#### 5. FACTORS AFFECTING RESULTS

The decreased availability of live CE programs in rural areas is a barrier to achieving the required number of hours. The availability of some CE programs on the internet and in pharmacy journals provides an alternative to attending live CE programs. Out of state pharmacists have different CE requirements and time frames than Oregon and they may miss the required audit period for our state. They usually have everything they need, but not during the right time frame.

#### 6. WHAT NEEDS TO BE DONE

We continue to audit pharmacists hours to ensure compliance with the CE requirement.

#### 7. ABOUT THE DATA

This data reflects 10% of pharmacists audited annually. This is used to estimate compliance with the CE requirement across the profession.

PHARMACY, BOARD OF	II. KEY MEASURE ANALYSIS

<b>КРМ #3</b> Р	ercent of pharmacies inspected annually.	2002
Goal	Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs.	l'
Oregon Cont	Ext KPM # 3 - Agency mission.	
Data Source	Query database.	
Owner	Board of Pharmacy Compliance Director (971) 673-0001	



#### **1. OUR STRATEGY**

The Board's goal is to complete inspections of all Oregon pharmacies annually. To achieve this goal, it is necessary to have positions filled with trained pharmacist Compliance staff.

12/30/2014

#### PHARMACY, BOARD OF

#### 2. ABOUT THE TARGETS

In 2013, 100% of pharmacies were inspected. This performance measure remained constant with the 2012 results of 100%. The legislative target is 95%.

#### 3. HOW WE ARE DOING

All retail and institutional pharmacies were inspected in 2013. In addition, Board staff were able to inspect some other outlets as well. Performance for this measure varies depending on the Board's workload and direction to focus on inspections for other outlets the Board licenses.

#### 4. HOW WE COMPARE

Our data compares favorably to other states in which on site inspections occur every second or third year; sometimes even longer.

#### 5. FACTORS AFFECTING RESULTS

Having a fully staffed Compliance department where each member is trained makes a positive difference in the Board's ability to satisfy this requirement.

#### 6. WHAT NEEDS TO BE DONE

Continue the current practice of regular pharmacy inspections.

#### 7. ABOUT THE DATA

This is strong data. The pharmacy was either inspected or not.



PHARMA	CY, BC	I. KEY		KEY MEASURE ANALYSIS	
KPM #4	Average number of days to complete an investigation from complaint to board presentation.			2000	
Goal		Provide excellent customer service.			
Oregon Co	ontext	KPM #4 - Agency mission.			
Data Sour	ce	Query database.			
Owner		Board of Pharmacy Compliance Director (971) 673-0001			



#### **1. OUR STRATEGY**

Decreasing the lag time from complaint to presentation is in the public interest. The Oregon Department of Justice, law enforcement and regulatory agencies both state and federal are regular partners in the Board's investigations.

12/30/2014

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#### 2. ABOUT THE TARGETS

Statutorily, staff has 120 days to present a complaint to the Board or obtain an exception. The Boards goal is to reduce the number of days between complaint to Board presentation.

#### 3. HOW WE ARE DOING

Some years ago, the Board moved to bi-monthly Board Meetings in a cost saving effort, which means the opportunity to present cases occurs approximately every 60 days rather than every 30 days. The time it takes to conduct investigations, criminal background checks, and prepare reports for the Board impacts the delivery of a completed report to the Board. Depending on the complexity of the case and the organization involved, there may be corporate legal departments that the Board needs to work through in order to complete an investigation. This often creates significant delays.

#### 4. HOW WE COMPARE

The results of this measure compares favorably to other Oregon regulatory boards and other state boards of pharmacy.

#### 5. FACTORS AFFECTING RESULTS

2014 KPM results indicate that in calendar year 2013, on average it took more days to take a case from complaint to Board presentation. The Compliance staff has worked on streamlining its processes and works diligently with the Department of Justice to present its cases to the Board in a timely manner. Reports are frequently analyzed to determine the status of cases and expedite things as appropriate, without compromising public safety. However, complexities in cases, the responsiveness of the licensee being investigated, and workload factors affects the timeliness of when a case in brought to the Board for presentation.

#### 6. WHAT NEEDS TO BE DONE

Retain staff, continue more training, and continue to evaluate investigation procedures.

#### 7. ABOUT THE DATA

The Compliance staff enters the date a complaint is received or an investigation is initiated into the database. The Compliance Agenda for the Board helps us

PHARMACY, BOARD OF	II. KEY MEASURE ANALYSIS
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identify when a case is presented to the Board. Statute requires cases to be presented to the Board within 120 days. Reports have been established to provide more accurate data for this measure.

PHARMA	CY, BC	DARD OF	II. KEY MEASURE ANALYSIS	
KPM #5	1 #5 Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent" : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.		xcellent" : Overall	2006
Goal	-11	Provide excellent customer service		
Oregon Co	ontext	KPM #5 - Customer Service measure added by the 2005 Legislature.		
Data Sour	ce	Customer service survey		
Owner		Board of Pharmacy Administrative Director (971) 673-0001		



#### **1. OUR STRATEGY**

The Board strives towards excellent customer service though the services it provides, including investigations, licensing, examinations and consumer information.

#### 2. ABOUT THE TARGETS

The goal is to achieve excellence. However, licensees who are disciplined by the Board are not likely to give the Board excellent scores.

#### 3. HOW WE ARE DOING

The Board conducted monthly surveys of new licensees during this reporting period. Results indicate a high service rating in all areas.

#### 4. HOW WE COMPARE

Limited data available.

#### 5. FACTORS AFFECTING RESULTS

The 2013 survey results indicate higher scores in all areas of customer service over 2012.

#### 6. WHAT NEEDS TO BE DONE

The Agency seeks to continue excellent customer service through ongoing staff training, the use of internet resources and regularly updating the agency

#### 7. ABOUT THE DATA

Please provide the following specific information: a) survey name; b) surveyor; b) date conducted; c) population; d) sampling frame; e) sampling procedure; f) sample characteristics; g) weighting. For clarification, see pages four through six of the Customer Service Guidance. The Board used one Customer Service Survey that was distributed and conducted as follows: The Oregon Board of Pharmacy used 2 surveys through SurveyMonkey to obtain results to the following Questions: 1. How would you rate the timeliness of services provided by the Board of Pharmacy? 2. How would you rate the ability of the Board of Pharmacy to provide services correctly the first time? 3. How would you rate the helpfulness of employees? 4. How would you rate the knowledge and expertise of Board of Pharmacy staff? 5. How would you rate the availability of information at the Oregon Board of Pharmacy? 6. How would you rate the overall quality of information and services provided by the Board of Pharmacy? 7. How does the service you received at the Oregon Board of Pharmacy compare to that provided by other states? 8. How would you rate the Oregon Board of Pharmacy's website? 9. What type of license do you hold? 10. If you have contacted the Oregon Board of Pharmacy, what method did you use?

The 2014 report results are for the 2013 calendar year. We emailed a link to the SurveyMonkey Customer Service Survey to Board customers that obtained a



PHARMACY, BOARD OF II. KEY MEASURE
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new license between the dates of January 1, 2013 and December 31, 2013. These were only sent to new licensees who provided an email address. As of January 13, 2014 we emailed the link to 3,303 licensees. 118 of the email addresses came back to us as undeliverable. Of the 3185 remaining licensees that provided valid email addresses, 588 responded to the survey. 543 licensees completed the survey in its entirety. This is a response rate of 17.5% which is a decrease of 5.5% in comparison to the 2012 response rate.

PHARMA	CY, BC	DARD OF	II. KEY MEASURE ANALYSIS				
KPM #6	Board	Best Practices - Percent of total best practices met by the Board.	2007				
Goal		To have a high level of success in following board best practices.					
Oregon Co	ontext	KPM #6 Board Best Practices, Legislatively added in 2007.					
Data Source		The Board reviews Board best practices annually.					
Owner		Board of Pharmacy - Administrative Director (971) 673-0001					



#### 1. OUR STRATEGY

It is the Board's goal to regularly operate within the guidelines required statutorily and administratively. We regularly review new laws and rules and attend trainings to keep the Board informed.



#### 2. ABOUT THE TARGETS

The Board intends to comply with all Board Best Practices.

#### 3. HOW WE ARE DOING

A majority of Board members attended the Governor's training upon appointment or conducted training online via the I-Learn Board and Commission Member training that is now available. In addition, Board staff keep the Board up to date on statutory and administrative requirements. The Board is complying with all best practice areas.

#### 4. HOW WE COMPARE

The Board is doing well.

#### 5. FACTORS AFFECTING RESULTS

The Board Members, Executive Director and Management Staff work very well with each other.

#### 6. WHAT NEEDS TO BE DONE

Continue reviewing best practice issues and educate as needed.

#### 7. ABOUT THE DATA

The Board reviews the best practices each year.



PHARMACY, BOARD OF		III. USING PERFORMANCE DATA					
	Dregon State Board of Pharmacy is to promote, preserve and protect the pub e practice of pharmacy and by regulating the quality, manufacture, sale and						
Contact: Karen MacLean, Administr	<b>Contact Phone:</b> 971-673-0001						
Alternate: Marcus Watt, Executive D	Alternate Phone:971-673-0001						
The following questions	indicate how performance measures and data are used for management	and accountability purposes.					
1. INCLUSIVITY 2 MANAGING FOR RESULTS	<ul> <li>* Staff: The Executive Director, along with the Management staff, revise Board. The Performance Measure Coordinator attends periodic traingings.</li> <li>* Elected Officials: Through the budget hearing process, legislators parperformance measures. This information is available to the public and point of the stakeholders: This information is posted on the agency website and it also reviewed annually.</li> <li>* Citizens: This information is posted on the agency website and availate Performance measures are used to develop policies and procedures that fit is the state of the procedures and procedures that fit is posted on the agency website and availate performance measures are used to develop policies.</li> </ul>	s and meetings. rticipate in review and revision of agency sted on the agency website. is available for review and comment. It is able for review and comment.					
2 MANAGING FOR RESULTS	Performance measures are used to develop policies and procedures that facilitate customer service and further the agency's mission to protect the health, safety and welfare of the citizens of Oregon. In order achieve our inspection goals, Board staff continue to evaluate the most effective way to utilize the pharmacist inspector positons in order to accomplish 100% of the on-site inspections exclusively for KPM #3.						
3 STAFF TRAINING	The Performance Measure Coordinator attends training as it becomes ava	ailable, although that is very infrequent.					
4 COMMUNICATING RESULTS	<ul> <li>* Staff: The staff communicate results at Board meetings and our report * Elected Officials: Any elected official can obtain information about a website. The legislative sub-committee that reviews the agency budget is</li> <li>* Stakeholders: These documents and Annual Report are posted at http available for all stakeholders to review.</li> </ul>	agency performance measures through the also provided up to date information.					

## Agency Management Report

### **KPMs For Reporting Year 2014**

Finalize Date: 12/30/2014

#### Agency: PHARMACY, BOARD OF

	Green = Target to -5%	Yellow = Target -6% to -15%	Red = Target > -15%	Pending	Exception Can not calculate status (zero entered for either Actual or Target)
Summary Stats:	100.00%	0.00%	0.00%	0.00%	0.00%

#### **Detailed Report:**

KPMs	A	Terret	<u>0</u> 4-4	Most Recent	
KI 1415	Actual	Target	Status	Year	Management Comments
1 - Percent of inspected pharmacies that are in compliance annually.	83	75	Green	2014	As the Board continues to update rules, this measure will fluctuate in performance outcomes. The Compliance staff expects to see challenges with compliance as new rules are implemented.
2 - Percent of audited pharmacists who complete continuing education on time.	95	100	Green	2014	The Board continues to emphasize the importance of continuing education to licensees.
3 - Percent of pharmacies inspected annually.	100	95	Green	2014	This measure is significantly impacted by staffing. If there are vacancies in the Compliance department, the ability to complete the annual inspections suffer. In addition, there is a growing need to inspect more than just retail and hospital pharmacies and the inspectors are beginning to expand inspections to include Pharmaceutical Wholesalers and Supervising Physician Dispensing Outlets.



## **Agency Management Report**

#### **KPMs For Reporting Year 2014**

#### Finalize Date: 12/30/2014

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
4 - Average number of days to complete an investigation from complaint to board presentation.	97	100	Green	2014	Depending on the investigation process and the timing of Board meetings, this process may take more or less time. However, the Board has been able in most cases, to meet the statutory requirement of 120 days. All pending investigations are reported to the Board at each meeting. Board staff have updated the way complaints are tracked in the database which differs from how the grand total of complaints and investigations have been calculated for this measure in the past. Today, the focus is now on complaints alone rather than including Board initiated investigations.
5 - Percent of Customers Rating Their Satisfaction With the Agency's Customer Service as "Good" or "Excellent" : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	93	85	Green	2013	Our overall average of 93% is up from 2012 by 2%. We are continually striving to provide excellent service in a timely manner in all departments of our agency. We are anticipating additional changes in our processes and training. It is our hope that these changes in 2014 will bring improvements in our processes to provide excellent customer service to the licensees and public we serve. We are continually working on updating and improving our website through frequent updating, the use of plain language, monthly reviews, and suggestions.
<ul><li>6 - Board Best Practices - Percent of total best practices met</li><li>by the Board.</li></ul>	100	100	Green	2014	The Board reviews best practices annually.

This report provides high-level performance information which may not be sufficient to fully explain the complexities associated with some of the reported measurement results. Please reference the agency's most recent Annual Performance Progress Report to better understand a measure's intent, performance history, factors impacting performance and data gather and calculation methodology.

#### Major Information Technology Projects/Initiatives

The Board proposes to upgrade the Agency's Licensing and Compliance database and enhance online e-government opportunities for applicants and licensees, as well as upgrade the online Licensee Look Up & Verification system. The Board has worked closely with the current vendor to identify the estimated cost of this project. The Governor's Budget proposal includes \$316,756 for this project and is described in detail in Policy Package 101 under the Program Unit tab. These upgrades will allow the Agency to leverage new technology and therefore expand the database with current technology that is more flexible and customizable. Implementation will facilitate the application and renewal processes for both the applicant and the Agency staff. Applicants will be able to apply for new licenses online rather than by paper and this supports the Board's business plan to move towards a more paperless office that is currently being implemented. This upgrade will also be beneficial to the public with an upgrade to the License Verification system. Complete information can be found in the Program Unit section under Policy Package 101.

#### **10% REDUCTION OPTION**

As a small other funded agency, it is difficult to identify where significant reductions can be made. A 10% reduction for our 15-17 current service level is \$616,444. To make this kind of reduction and because Personal Services comprises approximately 70% of the overall budget, the only meaningful option is to reduce staff. Individual line items under Office Expenses have been reviewed in close detail and minimal reductions can be identified unless the Board cancels or reduces some of the State Government Service Charge options or reductions are implemented that may affect having enough resources for printing and postage which are essential. This all presents other challenging options for example; we could eliminate the Shared Client Services budget and accounting services and bring that work in-house. However, we do not have the expertise in-house to handle the work and would need to add a staff member with the appropriate qualifications.

Reluctantly, the Board proposes to eliminate one full time Pharmacist Inspector/Investigator, one full time Office Specialist 2 and one full time Public Service Representative 3. In addition to the elimination of three staff members the Board also proposes to decrease office expenses to fulfill this reduction option requirement. The Board has worked very hard to identify staffing and expenditures to meet its operational requirements. Eliminating these positions and resources will hamper the Board's ability to do business, achieve its statutory public safety obligations and mission, especially in the face of additional Board and stakeholder initiatives. Duties assigned to these positions would have to be absorbed and result in significant delays and potential harm to the public if complaints are not investigated and licenses are not issued in a timely manner.

Fund Type: Other Funds



### Pharmacy, Board of

Pharmacy, Board Of

2015-17 Biennium

ALL FUNDS General Fund Lottery Other Funds Nonlimited Positions Full-Time Federal Nonlimited Equivalent Funds Funds Other Funds Federal Description (FTE) Funds 5,783,198 5.783.198 2013-15 Leg Adopted Budget 19 19.00 --\_ \_ 174,411 174.411 2013-15 Emergency Boards -----\_ 5,957,609 5,957,609 19 19.00 2013-15 Leg Approved Budget ----2015-17 Base Budget Adjustments Net Cost of Position Actions Administrative Biennialized E-Board, Phase-Out 125,595 125,595 Estimated Cost of Merit Increase Base Debt Service Adjustment Base Nonlimited Adjustment Capital Construction ----19 19.00 6,083,204 6.083.204 Subtotal 2015-17 Base Budget --**Essential Packages** 010 - Non-PICS Pers Svc/Vacancy Factor Non-PICS Personal Service Increase/(Decrease) 20,737 20,737 20,737 20,737 Subtotal 020 - Phase In / Out Pgm & One-time Cost 021 - Phase-in ---022 - Phase-out Pgm & One-time Costs (85,000) (85,000) (85,000) (85,000) Subtotal 030 - Inflation & Price List Adjustments 108,608 108,608 Cost of Goods & Services Increase/(Decrease) 16,370 State Gov"t & Services Charges Increase/(Decrease) 16,370 Subtotal 124,978 124,978 -

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BDV104 - Biennial Budget Summary **BDV104** 

Governor's Budget Cross Reference Number: 85500-000-00-00-00000

## Pharmacy, Board of

Pharmacy, Board Of

#### 2015-17 Biennium

Governor's Budget Cross Reference Number: 85500-000-00-00-00000

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-					-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-					-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-					-
Subtotal: 2015-17 Current Service Level	19	19.00	6,143,919	_		- 6,143,919			-



#### Pharmacy, Board of

Governor's Budget Cross Reference Number: 85500-000-00-00-00000

#### Pharmacy, Board Of 2015-17 Biennium

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2015-17 Current Service Level	19	19.00	6,143,919	-		- 6,143,919			
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-					
Modified 2015-17 Current Service Level	19	19.00	6,143,919	-		- 6,143,919			
080 - E-Boards									
080 - May 2014 E-Board	-	-	-	. <u>-</u>					
081 - September 2014 E-Board	-	-	-			-			
Subtotal Emergency Board Packages	-	-	-						
Policy Packages									
090 - Analyst Adjustments	-	-	-						
100 - Personnel Management	1	1.00	363,604	-		- 363,604			
101 - Business Improvement Database Upgrade	-	-	316,756	i -		- 316,756			
102 - IT Professional Services	-	-	25,000			- 25,000			
103 - Paperless Records Retention Part 2	-	-	22,770			- 22,770			· · ·
104 - Medical Lab Testing	-	-							
105 - Merchant Fees	-	-	-						
Subtotal Policy Packages	1	1.00	728,130	-		- 728,130		-	
Total 2015-17 Governor's Budget	20	20.00	6,872,049	-		- 6,872,049		-	
Percentage Change From 2013-15 Leg Approved Budge	t 5.26%	5.26%	15.35%	, -		- 15.35%			
Percentage Change From 2015-17 Current Service Leve		5.26%	11.85%			- 11.85%			

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BDV104 - Biennial Budget Summary BDV104

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2013-15 Leg Adopted Budget	19	19.00	5,783,198	-		- 5,783,198			
2013-15 Emergency Boards	-	-	174,411	-		- 174,411			
2013-15 Leg Approved Budget	19	19.00	5,957,609	-		- 5,957,609			
2015-17 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	125,595	-		- 125,595			
Estimated Cost of Merit Increase			-	-					
Base Debt Service Adjustment			-	-					
Base Nonlimited Adjustment			-	-					
Capital Construction			-						
Subtotal 2015-17 Base Budget	19	19.00	6,083,204	-		- 6,083,204		-	
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Non-PICS Personal Service Increase/(Decrease)	-		20,737	· _		- 20,737			
Subtotal	-	-	20,737			- 20,737			
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in									
022 - Phase-out Pgm & One-time Costs			(85,000)	) –		- (85,000)			
Subtotal			(85,000)	) -		- (85,000)			
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)			108,608			- 108,608			-
State Gov"t & Services Charges Increase/(Decrease	e)		16,370	) -		- 16,370			-
Subtotal			124,978	- 3		- 124,978			-

Governor's Budget Cross Reference Number: 85500-001-00-00-00000

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BDV104 - Biennial Budget Summary BDV104

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#### Pharmacy, Board of Governor's Budget **Board of Pharmacy** Cross Reference Number: 85500-001-00-00-00000 2015-17 Biennium Positions ALL FUNDS General Fund Full-Time Lottery Other Funds Nonlimited Federal Nonlimited Equivalent Funds Description Funds Other Funds Federal . (FTE) Funds 040 - Mandated Caseload 040 - Mandated Caseload 050 - Fundshifts and Revenue Reductions 050 - Fundshifts 060 - Technical Adjustments 060 - Technical Adjustments ------~ Subtotal: 2015-17 Current Service Level 19 19.00 6,143,919 6,143,919 ----

BDV104 - Biennial Budget Summary BDV104

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## Pharmacy, Board of

Governor's Budget Cross Reference Number: 85500-001-00-00-00000

# Board of Pharmacy 2015-17 Biennium

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2015-17 Current Service Level	19	19.00	6,143,919	-		- 6,143,919			
070 - Revenue Reductions/Shortfall							<u> </u>		
070 - Revenue Shortfalls	-	-	-	-					
Modified 2015-17 Current Service Level	19	19.00	6,143,919	-		- 6,143,919			
080 - E-Boards									
080 - May 2014 E-Board	-	-	-	-					
081 - September 2014 E-Board	-	-	-	-					
Subtotal Emergency Board Packages	-								
Policy Packages						·····			
090 - Analyst Adjustments	-		-	-					
100 - Personnel Management	1	1.00	363,604	-		- 363,604			
101 - Business Improvement Database Upgrade	-	-	316,756	-		- 316,756			
102 - IT Professional Services	-	-	25,000	-		- 25,000			
103 - Paperless Records Retention Part 2	-	-	22,770	-		- 22,770			
104 - Medical Lab Testing	-	-	-	-					
105 - Merchant Fees	-	-	-	-					
Subtotal Policy Packages	1	1.00	728,130			- 728,130			
Total 2015-17 Governor's Budget	20	20.00	6,872,049	-	10	- 6,872,049			- <u></u>
· · · · · · · · · · · · · · · · · · ·									
Percentage Change From 2013-15 Leg Approved Budget	5.26%	5.26%	15.35%	-		- 15.35%			
Percentage Change From 2015-17 Current Service Level	5.26%	5.26%	1 <b>1.85%</b>	-		- 11.85%			-

BDV104 - Biennial Budget Summary BDV104

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## Summary of 2015-17 Biennium Budget

Pharmacy, Board of Suspense 2015-17 Biennium									
Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
2013-15 Leg Adopted Budget	-	_	-	-		- <u>-</u>		l	
2013-15 Emergency Boards	-	-	-	-				· _	_
2013-15 Leg Approved Budget	-		-	-	,		·······	·	
2015-17 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	-	-			_		
Estimated Cost of Merit Increase			-	-				-	-
Base Debt Service Adjustment			-	-		. <u>.</u>		-	-
Base Nonlimited Adjustment			-	-		- <u>-</u>		_	-
Capital Construction			-	-	-	- <u>-</u>		_	-
Subtotal 2015-17 Base Budget		-	-				•		
020 - Phase In / Out Pgm & One-time Cost									-
021 - Phase-in	-	-	-	-	-	· _	_		
022 - Phase-out Pgm & One-time Costs	-	-	-		-			-	-
Subtotal	-	-	-	-	-	. <u> </u>	_	-	-
040 - Mandated Caseload								-	-
040 - Mandated Caseload	-	-	-	-	-	_	_		
050 - Fundshifts and Revenue Reductions								-	-
050 - Fundshifts	-	-	-	-	-	-	_		
060 - Technical Adjustments								-	_
060 - Technical Adjustments	-	-	-	-	_	-	_		
Subtotal: 2015-17 Current Service Level	-	-							

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BDV104 - Biennial Budget Summary BDV104

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## Summary of 2015-17 Biennium Budget

### Pharmacy, Board of

Governor's Budget Cross Reference Number: 85500-999-00-00-00000

#### Suspense

## 2015-17 Biennium

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2015-17 Current Service Level	-	-	-	_					
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	. <u> </u>					
Modified 2015-17 Current Service Level		-	•••••••••••••••••••••••••••••••••••••••	-	······				
080 - E-Boards					·····				
080 - May 2014 E-Board	-	-	-	-					
081 - September 2014 E-Board	-	-	-	-					
Subtotal Emergency Board Packages	•	-		-	•	-			
Policy Packages									
090 - Analyst Adjustments	-	-	-	-	-		-	· _	
100 - Personnel Management	-	-	-	-			-		
101 - Business Improvement Database Upgrade	-	-	-	-	-		-		
102 - IT Professional Services	-	-	· _	-	-	. <u> </u>	-		
103 - Paperless Records Retention Part 2	-	~	-	-	-		-		
104 - Medical Lab Testing	-	-	-	-	-		-		
105 - Merchant Fees	-	-	-	-	-	· _	-	- <u>-</u>	
Subtotal Policy Packages	•	-		-	tin and the second s	· _			·····
									· · · · · · · · · · · · · · · · · · ·
Total 2015-17 Governor's Budget	-	-	-	-	-	• -			
Percentage Change From 2013-15 Leg Approved Budget	-	-	-	-	-	· _	_	-	
Percentage Change From 2015-17 Current Service Level	-	-	-	-	-	· _	_	_	

BDV104 - Biennial Budget Summary BDV104

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#### **PROGRAM PRIORITIZATION FOR 2015-17**

Agency Name	e:	Board of Phar	macy		-											_	-		1	W.
2015-17 Bienniu	im														Agency M	umber:	85500			
Program 1							-		_	_										
1 0 1				Program/Di	vision Pric	orities fo				_	_			_						
1 2		4	5	6	17	8	9	1 10	11	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)	Agency Initials	Program or Activity Initials	Program Unit/Activity Description	Identify Key Performance Measure(s)	Primary Purpose Program- Activity Code	GF	LF	OF	NL-OF	FF	NL-FF	TOTAL FUNDS	Pos.	FTE	New or Enhanced Program (Y/N)	Included as Reduction Option (Y/N)	Legal Req. Code (C, D, FM, FO, S)	Legal Graden	Explain What Is Mandatory (for C., FM, and FC Only)	Comments on Proposed Changes to CSL Included in Agency Request
Agey Prgm/ Div				1									-J				- 51			
85500 1	OBOP		Operations/Administration - Office and Operational Management, Budget, Clerical, Policy Research, Committees, Administrative Rules, Project Management	And in case of the second	3			1,990,581				5 1,990.581		6,00	ń	у	s	ORS 475 and 689		Policy Packages include the addition of 2 FTE to the licensing section and personne management adjustments, an IT databasi
85500 1	OBOP		Licensing & Exams	85500 2, 5	3			1,465,544				\$ 1,465,544	1-0	7,00	У	y	s	ORS 475 and		upgrade, additional resources for IT Professional Services for risk
85500 1	OBOP			85500 7, 3-5	3			3,168,968				\$ 3,168,958	1	8,00	n	У	s	ORS 475 and 689		management, additional resources for paperless records retention part 2,
15500 1	OBOP		Board Activities	85500 6	3		1	164,783				\$ 164,783			n	· · · · ·	5	ORS 475 and		additional resources for medical lab testing and additional resources for merchant fees.
35500 1	OBOP		Interagency Activities		I		100	176,899				\$ 176,899			п		5	ORS 475 and 689		
					-		-		-			5 .						-		
				-				1	-			5 -		-						1
			1				1	############	1.1.1		1	\$ 6,966,775	0	21.00						

7. Primary Purpose Program/Activity Exists

- 1 Civil Justice 2 Community Development
- **3** Consumer Protection 4 Administrative Function
- 5 Criminal Justice
- 6 Economic Development 7 Education & Skill Development
- 8 Emergency Services
- 9 Environmental Protection
- 10 Public Health
- 11 Recreation, Heritage, or Cultural 12 Social Support

#### 19. Legal Requirement Code C Constitutional

D Debt Service

FM Federal - Mandatory

FO Federal - Optional (once you choose to participate, certain requirements exist) S Statutory

Within each Program/Division area, prioritize each Budget Program Unit (Activities) by detail budget level in ORBITS

#### Document criteria used to prioritize activities:

This agency is budgeted as one Program Unit. For the purpose of this exercise, we have broken out the key areas of agency function. However, all areas are required to accomplish the statutory mission of the agency. The 10% Reduction Options identified for this exercise includes a reduction of 3 positions and some services and supplies. These reductions will seriously impact the Board's ability to accomplish the mission of the Board as detailed in ORS 475 and 689. This biennium we have broken out the Inter-Agency charges, most that do not directly relate to the Agency's mission, but are statutory in nature.

ACTIVITY OR PROGRAM	<b>DESCRIBE REDUCTION</b>	Amount and Fund Type	RANK AND JUSTIFICATION
(WHICH PROGRAM OR ACTIVITY WILL NOT BE UNDERTAKEN)	(DESCRIBE THE EFFECTS OF THIS REDUCTION. INCLUDE POSITIONS AND FTE IN 2015-17 AND 2017-19)	(GF, LF, OF, FF. IDENTIFY REVENUE SOURCE FOR OF, FF)	(RANK THE ACTIVITIES OR PROGRAMS NOT UNDERTAKEN IN ORDER OF LOWEST COST FOR BENEFIT OBTAINED)
1. ELIMINATE ONE FULL TIME HEALTHCARE INSPECTOR/INVETIGATOR.	Eliminating this position would require restructuring and reassigning duties within the remaining compliance staff. Annual inspections of retail & institutional drug outlets could be delayed and compromised leading to decreased compliance with pharmacy and drug laws and rules which imposes an increased risk to	282,577 OF	RANK #1
2. ELIMINATE ONE FULL TIME OFFICE SPECIALIST 2 POSITION.	the public. Eliminating this position would significantly hinder the agency's ability to process fingerprint background checks in a timely manner and subsequently reduce the agency's customer service. The production of licenses and registrations would be delayed significantly and negatively impact applicants employment opportunities.	128,109 OF	RANK #2
3. ELIMINATE ONE FULL TIME PUBLIC SERVICE REPRESENTATIVE 3 POSITION.	Eliminating this position would significantly hinder the agency's ability to process license applications and renewals in a timely manner and subsequently hinder the agency's ability to provide customer service that is expected. The production of licenses and registrations would be delayed and negatively impact applicants and licensees alike. It could also impact their employment opportunities.	112 <b>,289</b> OF	RANK #3
4. DECREASE VARIOUS SERVICE AND SUPPLY ACCOUNTS.	To make a reduction in this amount seriously impacts the ability of the agency to have sufficient resources	93,469 OF	RANK #4

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available to cover the co	e l	
business. It would be r	necessary to	
make reductions on bot	th general line	
items like Office Expen	ises, but also	
Agency Program Relate	ed S&S which	
provides resources for v		
essential services like p		
DAS services in additio		
categories that are not d		
to the agency. A reduct		
amount would hinder th		
ability to have adequate	e l	
printing and postage to		
Rulemaking notices, ren		
would also impact the d	dedicated	
resources for state gove	ernment	
licenses and other corre would also impact the d resources for state gove service charges, and ser Attorney General and F	dedicated ernment rvices,	



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Agencywide Program 2015-17 Biennium	Unit Summary				Vei	rsion: Y - 01 - Go	vernor's Budget
Summary Cross Reference Number	Cross Reference Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
001-00-00-00000	Board of Pharmacy						
	Other Funds	4,684,935	5,783,198	5,957,609	6,966,775	6,872,049	-
TOTAL AGENCY							
	Other Funds	4,684,935	5,783,198	5,957,609	6,966,775	6,872,049	-

### Pharmacy, Board of

Agency Number: 85500

\_\_\_\_\_ Agency Request 2015-17 Biennium





## BOARD REVENUE FORCAST

- Board of Pharmacy revenues are in the Other Fund Category and come from pharmacist, pharmacy technician, pharmacy intern and the various drug outlet license fees and miscellaneous charges. Miscellaneous charges include delinquent license fees, charges for printing and mailing laws and rules, photo copying, civil penalties, re-inspection fees and interest income.
- The projected revenue for the 2015-2017 budget was calculated by taking a predicted number of licensees and registrants and multiplying by the amount of each fee. It also anticipates revenue impact for new and lapsing applicants and for each category. This method assumes projected changes in the numbers of licensees and registrants based upon analysis of factors affecting the state's economy, the profession and the industry. Note the 2015-17 estimated revenue has been reduced in the Governor's Budget to reflect implementation of biennial licensure in a few categories. The first renewal in the conversion will be at the one year rate to assist in reducing the Agencies ending balance as required by the Legislature.

Please note\* the 2013-2015 Estimated Revenues noted on the chart above reflect the Legislatively Adopted Budget. However, the Board was required to implement temporary revenue surplus fee reductions pursuant to ORS 291.055(3) because of the inflated ending balance due to unanticipated licensees and prior savings. Most fees that had been increased during 2011-13 as approved by the Legislature were rolled back to the prior fee. The Agency was directed to reduce the ending balance by reduced revenue and by biennial expenditures. The fee adjustments should reflect a lower than estimated amount at the end of 2013-15, however it is growing more difficult to identify the pace at which some categories of new licensees/registrants apply.

The Board ended the 2011-13 with additional savings from unspent budget limitation and the ending balance was adjusted accordingly. During the budget development process for 2015-2017, the Board hired a new Executive Director and a number of policy packages have been developed to modify staffing to better meet the growing workload needs with the addition of one new position approved in the Governor's Budget, implement information technology upgrades and add resources to further the Board's operational requirements. In July 2014, the Board received a one-time civil penalty which will more than cover the expenses associated with the 2015-2017 proposed information technology policy package. This will allow us to upgrade our systems with no additional cost to our licensees. The other proposed policy packages included in the Governor's Budget also serve to draw down on the ending balance as required. By all standards, the Board has managed its resources well and rolling back fees after one biennia is a commendable track record for any state agency and a clear statement to responsibly manage the agency's resources. The Board proposes to keep the temporary fee reduction in place until the ending balance is reduced to an acceptable level.

		ORBITS		2013-15	a salah tabula	2015-17		
Source	Fund	Revenue Acct	2011-2013 Actual	Legislatively Adopted	2013-15 Estimated	Agency Request	Governor's	Legislatively Adopted
Animal Euthanasia	4360	0205	2,800	2,302	2,200	2,100	2,100	
Certified Pharmacy Technician	4360	0205	626,612	489,714	635,500	661,900	661,900	
Charitable Pharmacy	4360	0205	1,575	384	1,500	1,800	1,800	
Consulting/Drugless Pharmacy	4360	0205		1350	1350	1,750	1,750	
Controlled Substance	4360	0205	376,400	286,242	221,100	194,200	194,200	
County Health Clinic	4360	0205	29,100	24,038	31,500	20,400	20,400	
Drug Distribution Agents	4360	0205	27,650	41,494	34,000	16,400	16,400	
Hospital Drug Room	4360	0205	16,600	14,321	21,450	12,700	12,700	
Home Dialysis	4360	0205			2,100	1,750	1,750	
Intern	4360	0205	45,240	29,835	56,700	45,000	45,000	
Manufacturers			700,000	1,086,554	694,000	850,400	850,400	
Med Device/Equip/ Gases-Class C	4360	0205	55,125	32,136	42,100	41,750	41,750	
Non-Prescript – Drug Outlet- Class A	4360	0205	244,750	215,407	221,700	224,100	224,100	
Non-Prescript – Drug Outlet- Class B	4360	0205	14,550	11,678	13,400	12,600	12,600	
Non-Prescript – Drug Outlet- Class D	4360	0205	200	170	400	0	0	
Pharmacist	4360	0205	2,007,543	2,010,553	1,464,720	1,584,480	777,932	
Pharmacy Technician	4360	0205	90,342	71,603	40,500	113,700	113,700	
Precursor	4360	0205	3,000	1,200	1,400	1,550	1,550	

Prophylactic/Contraceptive	4360	0205	4,300	2,898	1,850	1,650	1,650	
Remote Dispensing	4360	0205	1,200	852	1,000	1,000	1,000	
Retail/Institutional	4360	0205	843,375	641,359	408,975	437,675	560,468	
Drug Outlet Supervising Physician Dispensing Outlet	4360	0205	8,400	0	7,800	8,400	8,400	
Wholesalers	4360	0205	622,100	955,847	560,800	681,600	681,600	
Delinquent Fees	4360	0505	87,300	49,255	85,000	70,000	70,000	
Reciprocity	4360	0205	196,350	51,145	125,000	125,000	125,000	
NAPLEX/Exams	4360	0205	53,275	42,621	50,000	42,621	43,485	
Civil Penalty	4360	0505	348,911	200,000	300,000	200,000	200,000	
Interest Income	4360	0605	32,875	20,000	25,000	20,000	35,000	
NSF	4360	0975	1,200	400	1,225	400	400	
Misc Fees	4360	0975	10,938	15,000	26,000	15,000	28,600	
Laws & Rules	4360	0975	11,050	7,000	10,000	7,000	7,000	
Prescription Drug Monitoring Fee – transfer to OHA	4360	0205	284,450	246,391	267,885	283,590	283,590	
Prescription Drug Monitoring Fee - 10% retention	4360	0205	28,445	24,639	26,788	28,359	28,359	
Workforce Data Collection - transfer to OHA	4360	0210	58,376	59,630	61,040	64,105	65,855	
Fingerprinting fees – transfer to OSP depending on volume	4360	0352	238,540	208,000	208,000	208,000	211,248	
Agency Request		<u>X</u> Governor's E	Budget	Legis	latively Adopted			Buo

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Budget Page \_

## DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

# Pharmacy, Board of 2015-17 Biennium

## Agency Number: 85500

Cross Reference Number: 85500-000-00-00000

Source	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
Other Funds						
Business Lic and Fees	6,254,937	6,149,590	6,149,590	5,731,380	4,924,832	-
Non-business Lic. and Fees	296,915	377,630	377,630	65,855	65,855	-
Fines and Forfeitures	434,711	260,000	260,000	270,000	270,000	-
Interest Income	32,875	20,000	20,000	35,000	35,000	-
Other Revenues	42,657	22,400	22,400	29,700	29,700	-
Tsfr To Oregon Health Authority	(310,053)	(319,775)	(319,775)	(349,445)	(349,445)	-
Total Other Funds	\$6,752,042	\$6,509,845	\$6,509,845	\$5,782,490	\$4,975,942	-





## PROGRAM UNIT NARRATIVE

PROGRAM UNIT EXECUTIVE SUMMARY

10 Year Plan Outcome Areas that are impacted by the program

Primary Outcome Area:SafetySecondary Outcome Area:N/AProgram Contact:Marcus Watt or Karen MacLean, 971-673-0001



The chart above reflects the actual and estimated expenditures and licensee for the Oregon Board of Pharmacy from 2003-2023, including the 2015-17 Governor's Budget. The business of pharmacy has moved from the corner drug store to the national chain drug store. This is true throughout all aspects of pharmaceutical industry and is directly related to the number of licensees that the Board has grown to have and expects to see in the future. It also includes the current and projected FTE for 2015-2017.

## **Program Overview**

The Oregon Board of Pharmacy (OBOP) under ORS Chapter 689 regulates the practice of pharmacy and the quality, commerce and distribution of drugs within and into the State. The practice of pharmacy in the State of Oregon has been declared by the Oregon Legislature to be a professional practice affecting public health, safety and welfare and is subject to regulation and control in the interest of Oregon Citizens. The Legislature further declared it to be a matter of public interest and concern that the practice of pharmacy merit and receive the confidence of the citizens of Oregon and that only qualified person are permitted to engage in the practice of pharmacy in the State.

## **Program Funding Request**

- The Board is requesting Other Funds budget limitation of \$6,872,049 for the 2015-17 biennium in this Governor's Budget. This includes funding for the Current Service Level budget and four Governor's Budget Policy Packages.
- Policy Package 100 encompass four Personnel Management adjustments that adds one new position (1.0 FTE) to meet the growing and changing personnel needs of the agency, as well as the Services and Supplies associated with adding new personnel. This package also includes resources to contract with the Department of Administrative Services (DAS), Enterprise Human Resource Services in 2015-17 and increase funding for the "other differential" budget object. This package aligns agency staffing to better meet the needs and performance expectations set forth by the legislature, licensees, stakeholders and requirements of the State as well as the ability to be responsive to the 2012 Agency Operational Review recommendations. Without these adjustments, the new Executive Director will not be able to implement his vision for Agency change and important projects will remain unattended and workload pressures will continue to escalate for the existing staff. Inability to make these enhancements will affect the Agency's ability to effectively meet operational goals and Key Performance Measures, as well as Board and Stakeholder expectations. Governor's Budget Package 100 is projected to cost <u>\$363,604</u>. Complete details regarding this and each of the following Policy Packages can be found on pages 91-101.
- Policy Package 101 implements an upgrade of the Agency's Licensing and Compliance database and enhances online e-government opportunities for applicants and licensees, as well as upgrades the online Licensee Look Up & Verification system. Governor's Budget Package 101 is project to cost \$316,756.
- Policy Package 102 is created to meet the DAS Risk Management recommendation to require increased Professional Liability Insurance limit requirements for IT Professional Service providers. Governor's Budget Package 102 is projected to cost <u>\$25,000</u>.
- Policy Package 103 is created to establish funding to pay for the Agency's use of the State Archives Oregon Records Management Solution (ORMS). This package continues the Agency's Paperless Records Retention Part 1 that is in the progress of being implemented. Governor's Budget Package 103 is projected to cost <u>\$22,770</u>.

- Policy Package 104 is established to increase expenditure limitation for Medical Services to allow of Medical Lab Testing for Compounded Prescriptions. In the Governor's Budget, Policy Package 104 was <u>not approved</u>.
- Policy Package 105 is established to increase expenditure limitation for credit card Merchant Fees. In the Governor's Budget, Policy Package 105 was <u>not approved</u>.
- Estimated costs on the charts incorporated into this Executive Summary assume a standard inflation rate for 2017-19 as 2.9%, 2019-21 as 3.0% and 2021-23 as 3.1% and the personnel costs are increased by 9% each biennia as directed by the Department of Administrative Services. The estimated number of licensees for the next ten years is based on an average increase for the last 10 years and the estimated number of complaints is based on historical perspective and also assumes a 2% increase consistent with the increase in licensees.

## **Program Description**

The purpose of the Board of Pharmacy under ORS Chapter 689 is to promote, preserve, and protect the health, safety and welfare of Oregon citizens by control and regulation of the practice of pharmacy and the quality and distribution of drugs through outlets involved in the manufacture, production, sale and distribution of legend drugs (*prescription*), over-the-counter drugs (*non-prescription*), controlled substances (*drugs identified by the U.S. Drug Enforcement Administration (DEA) as having abuse or addiction potential*) and devices and other materials as may be used in the diagnosis, cure, mitigation, prevention and treatment of injury, illness and disease.

This is accomplished through:

<u>Examinations</u>: Any individual wishing to practice as a pharmacist in the State must take and pass an entry level competency exam, the North American Pharmacy Licensure Examination (NAPLEX). This exam has been standardized throughout all fifty states. Candidates for licensure in Oregon must also take and pass a pharmacy law exam, the Multistate Pharmacy Jurisprudence Examination (MPJE). These exams are administered by the National Association of Boards of Pharmacy (NABP). The exam questions are written and maintained and updated by OBOP staff and members through annual review of the exam question pool and psychometric analysis of the questions by NABP.

Licensing: Upon verifying that the exams have been taken and passed, the candidate is allowed to submit an application. The application and required documents are vetted through the NABP Disciplinary Clearinghouse and a criminal background check is performed. Licenses are renewable annually. The OBOP has established an electronic online renewal process for licensees. Pharmacy technicians must be licensed in the State and must become nationally certified within one year of their initial Oregon license. Pharmacies, pharmaceutical manufacturers & wholesalers, non-prescription drug outlets, practitioner dispensing outlets and a variety of other drug outlets must also be licensed with the OBOP to do business in the State. Establishments seeking licensure undergo similar scrutiny and vetting of applications and documents for licensure.

<u>Investigations</u>: The OBOP investigates complaints and allegations of violations of the Oregon Pharmacy Act (ORS Chapter 689) and corresponding administrative rules (OAR Chapter 855). The OBOP also investigates allegations of drug diversion, illegal online drug distribution operations or unlicensed pharmacies and local prescription fraud activity.

<u>Information and Education</u>: A receptionist answers questions and routes calls to a designated pharmacist investigator and to one of the licensing representatives who are available to answer questions regarding licensure requirements and processes as well as general questions from the public. OBOP staff also responds to many requests for appearances and presentations to pharmacy professional associations and pharmacy schools regarding pharmacy and drug law and licensing issues.

Agency costs are primarily reflected in staff payroll. Ongoing expenses for "services and supplies" are inherent and tend to not fluctuate significantly. Major cost drivers are described below.

Staffing is the largest single expenditure since what the agency does involves people working with people.

<u>Instate travel</u> is another cost. The OBOP's authority is statewide, therefore, onsite inspections and investigations occur throughout the State. Board members also reside throughout the State, therefore, wherever meetings are held, some Board members are required to travel. Most meetings are held in Portland.

<u>Administrative initiatives</u> and projects such as budget preparation, document security, business continuity, workforce data, disaster planning, Program Funding Teams and cultural competence are some of the many activities that consume an increasing portion of staff time.

Legislative mandates utilize an increasing portion of staff time. Such Legislative mandates include supervising physician dispensing outlets, charitable pharmacies, expedited partner therapy and Health Professionals Service Program, among many others.

<u>Prescription drug abuse</u> requires an increasing amount of staff time. Staff investigates illegal Internet drug distribution, local fraudulent prescription scams and diversion and theft of controlled substances from pharmacies. Many drug related issues such as these are also covered by the news media and requests for information, interviews and statements from Board members and staff are common.

<u>Prescription drug overutilization</u> continues to impact staff work load. Prescription drugs have become ubiquitous and efforts to educate citizens in areas such as medication safety, proper drug disposal and the dangers of polypharmacy are needed more and more. Prescription drugs appear in our medicine cabinets, in the pockets of our sons & daughters and in our schools. Drugs are advertized on television and radio, in newspapers and in magazines, on bill boards. The nation's health care delivery system is so rushed that the standard solution to each medial office visit is a "quick fix" prescription. Staff allocates a significant amount of time to patient education to promote awareness and help ensure public safety.

## Program Justification and Link to 10-Year Outcome

Because of the efforts and diligence of the OBOP in administering the Oregon Pharmacy Act and the Oregon Controlled Substances Act, the safety of Oregon's citizens is enhanced and protected. Active participation by Board members and staff with the NABP, DEA and U.S. Food and Drug Administration evokes national best practice standards on behalf of Oregonians.

### **Program Performance**

The following chart reflects the actual / estimated number of Final Orders and the actual / estimated number of Complaints & Investigations conducted by the Board since 2012. The more complex the industry becomes, including from the number of drugs available to increased laws and regulation, demonstrates just a few of the reasons why there is more of a possibility for compliance and complaint related issues.



The following chart includes a graphic representation of the 30 different categories of licensure and registration covered by the Board, along with the number of licensees represented in each category and the percentage each represents. Each is unique and different and requires all Board staff whether Licensing, Compliance or Administration to understand the different laws & rules associated with each license type.

2015-17

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The Agency Key Performance, Customer Service Measure addresses the question of timeliness of services provided and quality of the services provided. The Agency continues to exceed the targeted goal of 85% with the most recent report at 93% over all for all customer service satisfaction.

2015-17

If the Board were to divide its total proposed budget by the number of licensees, it could presume that the current cost per service unit would be \$244.62. However, not all licenses are alike, as has been demonstrated throughout this narrative, nor are all the services the Board provides directly attributed to individual licensees. Therefore, it is very difficult to identify an accurate cost per service unit.

### **Enabling Legislation/Program Authorization**

The OBOP was established and received its authority and responsibility through a mandate of the Oregon Legislature, ORS Chapter 689 the Oregon Pharmacy Act. The OBOP received further authority and responsibility through ORS Chapter 475 the Oregon Controlled Substances Act. The Board does not have any Legislative Concepts proposed for consideration.

#### **Funding Streams**

The OBOP is entirely other funded and receives revenue by fees charged to licensees, civil penalties and a handful of administrative "user" fees. No lottery or general funds are allotted to the OBOP.

#### Significant Proposed Program Changes from 2013-15

Significant changes from the 2013-15 budget modify the Current Service Level by adding one position to current staff, upgrading the Agency database systems, continuing the paperless records retention project and adding resources for IT Professional Services. See further explanation under "Program Funding Request" above and a detailed description of the Policy Packages included after this section.

The Oregon Board of Pharmacy is currently made up of five members who are practicing pharmacists, two public members who are not pharmacists and 19 full or part time positions. The Board is budgeted and accounted as a single program. The staff is internally organized into three distinct sections including Licensing, Compliance and Operations/Administration. The agency additionally tracks expenditures separately for Board Member Activities and Interagency Activities.

The Licensing section is made up of 5 positions that handle all details related to licensing and examinations including applications, renewals, production and mailing of more than 25,093 certificates of registration and licensure and frequent communication with licensees and applicants. Examinations include the North American Pharmacy Licensure Examination (NAPLEX), the Multi-state Pharmacy Jurisprudence Examination (MPJE), the Foreign Pharmacy Graduate Equivalency Examination (FPGEE), and the Test of English as a Foreign Language (TOEFL iBT). The Licensing and Background Check Specialist staff also performs criminal background checks with established Policies and Procedures using the Oregon Law Enforcement Data System (LEDS) on all new pharmacist, pharmacy technician, certified pharmacy technicians and pharmacy intern applicants. The Board requires national fingerprint background checks for all new applicants. Fingerprint background checks are valid for 15 months. Staff regularly visits the pharmacy schools in Oregon to meet and talk to the incoming students about professional responsibilities and licensing and to talk to the soon to be graduating students about procedures and requirements for licensure as a pharmacist.

2015-17

107BF02

The Compliance section, made up of eight positions, which includes six pharmacists and two administrative staff and is responsible for all on-site inspections of pharmacies and drug outlets, all investigations of consumer complaints, reports of possible drug diversion and other suspected violations, administrative details of proposed and ordered disciplinary action and monitoring all licensees who have been placed on probation through the disciplinary process. Compliance staff is also responsible for interpretation and review of pharmacy laws and rules and provision of information to and consultation with all stakeholders on pharmacy and drug laws upon request.

The Operations/Administration section includes six positions that is a combination of operations and administrative functions. It includes the Executive Director, Administrative Director, Pharmacist Consultant, Project Manager, Office Manager, and Management Secretary/Background Check Specialist. The Executive Director is responsible for the overall operation of the Agency, which includes, supervision of the Operations, Licensing and Compliance sections and the performance of all staff, the interpretation and implementation of Board policy, oversight of all public and media relations, active participation with the National Association of Boards of Pharmacy (NABP), the American Council of Pharmaceutical Education (ACPE), and the state and federal regulatory bodies including the U.S. Food and Drug Administration (FDA) and the Drug Enforcement Administration (DEA) and the development and maintenance of the network of stake holder relationships.

The Executive Director directly supervises the Administrative Director, the Compliance Director, Pharmacist Consultant, and the Project Manager and answers to the President of the Board. The Administrative Director supervises and oversees the daily operations of the agency and supervises the Office Manager, Management Secretary and Licensing sections' activities and staff. This position also encompasses a variety of other administrative functions including, coordination of board meeting activities, agenda development, budget preparation, accounting, contracts, and coordinates human resource activities with the Department of Administrative Services Enterprise Human Resource Services. The Compliance Director directly supervises the Compliance section activities and staff. The Pharmacist Consultant position was added back to the agency as approved in the 2013-15 Legislatively Approved Budget. This position is specifically responsible for conducting research and managing projects that require pharmacist expertise. The position also assists the Executive Director with media requests and legislative activities to name a few. The Project Manager position provides essential support in researching issues and managing projects for the Agency. The Office Manager is responsible for general office management, including database and network administration, accounts payable/receivable, facilities management, purchasing. This position currently provides day to day direct oversight of the Licensing Section and works directly with the Administrative Director on licensing policy issues. Staff in this section is involved in conducting policy research, writing reports and recommendations, and coordinating committees and task forces as required by the Board.

"Board Member Activities" includes capturing all activities related to board members' compensation, travel, lodging and other expenses and all activities related to holding board meetings.

"Interagency Activities" includes pass through payments to Oregon State Police for fingerprint for criminal background checks for all new licensees, Workforce Data Collection fees for data analysis to the Oregon Health Authority (OHA), Prescription Drug Monitoring Program fees to OHA and the Health Professional's Services Program costs for impaired professionals to OHA.

From 1990 to 2010, the Board's operation included a recovery program for chemically dependent licensees (PRN) as authorized by ORS 689.342-348. The 2009 Legislature established a statewide impaired health professionals program, which repealed 689.342-348 and eliminated the Board's authority to maintain its PRN program. This statewide program allows the Board to refer an individual licensee for treatment in lieu of or in addition to disciplinary action. Preparation for and transition into the program has been more costly than expected. Using current projected figure provided by OHA for the cost of the program to the Agency for 2014-15 is \$69,595 per year or about \$4971 per participant per year for 14 people. This is a fee paid by the Agency for the ability to participate in the program. Individual participants pay for their own program expenses such as lab toxicology tests. The former PRN program clients numbered approximately 100 with a budget of \$125,000 per year or \$1250 per person, per year. There are a number of licensees who do not meet the Board's criteria for referral into the HPSP program. These individuals have been placed on probation and the Board's staff monitors their compliance with the conditions of probation. This is a workload challenge for the existing Board staff.

The Board's participation in the HPSP program is optional. The Board is currently participating in the HPSP and plans to annually review its decision to participate.

The Agency's operating revenue is "other funds" and is derived from annual license and registration fees collected during the year from the following: animal euthanasia, certified pharmacy technicians, correctional facility & hospital drug rooms, county health clinics, pharmaceutical manufacturers and wholesalers, nonprescription drug distributors, pharmacies, pharmacists, pharmacy interns, pharmacy technicians, precursor substance distributors, prophylactic/contraceptive manufacturers, delinquent fees, examination fees, out of state pharmacist license reciprocity, and miscellaneous service charges. Details on who pays, number of payees, and the rates are on form 107BF07 in this binder. There are no new fees that were established during 2013-15.

## **ORBITS Budget Narrative**

### Pharmacy - 85500 ESSENTIAL PACKAGES 010 Non-PICS Psnl Svc / Vacancy Factor Package Description - No revisions in the Governor's Budget.

This essential package includes an overall increase of \$20,737 for non-PICS personal services such as inflation for All Other Differentials. Temporary Appointments and most significantly, \$16,956 for the Pension Bond Contribution.

## 022 Phase Outs & One-time Cost Eliminations

## Package Description - No revisions in the Governor's Budget.

This essential package removes (\$85,000) of funds that were added in the 2013-15 Legislatively Adopted Budget for the Paperless Records **Retention Part 1** policy package. New additional resources for 2015-17 are noted in Policy Package 103 for part two with the same title.

## 031 Standard Inflation & Price List Adjustments

### **Package Description -**

This essential package increases consist of an additional \$116,785 for overall inflation for the Price List for the cost of goods and services. The bulk of the adjustments and increases can be found in the following areas:

- State Government Service Charge Assessments / Other Services & Supplies have been re-organized by the Department of Administrative ٠ Services (DAS) in a variety of different budget fund categories for 42 various services and assessments, as well as a change in rate setting for all areas which resulted in significant increases as noted below:
  - State Government Service Charges \$21,112, this is a 36.73% increase • Shared Payroll and Financial Client Services
  - DAS EHRS PPDB assessment

\$21,244, this is an 18.69% increase \$ 7,224, this is a 993.67% increase

- There are many other Assessment / Service categories, two categories were removed and four new assessments were added. ٠
  - All together, there are nine reductions ranging from (\$4 to \$2165) in various categories.
  - All together, there are different increases ranging from \$6 to \$7224 in various categories.
- Other significant Standard Inflation is associated with: Attorney General, Facilities Rental & Taxes and general Other Services and Supplies. ٠

## **NOTE:** Governor's Budget Revisions to Package 031:

• The Governor's Budget incorporated \$20,524 of reductions for Package 031. They include a reduction of \$4373 for overall State Government Service Charges and a reduction of \$16,151 for Attorney General expenses. The new package amount is \$96,261.

#### 032 Above Standard Inflation Package Description

This essential package adds an additional \$28,717 for "above standard inflation" to cover for the increased 2015-17 estimated State Government Service Charges identified by DAS. No revisions in the Governor's Budget.

## 060 Technical Adjustments

### Package Description

This package includes an \$8,000 adjustment approved by the agency's Department of Administrative Services (DAS), Chief Financial Office Analyst. Resources were reallocated from IT Expendable Property to Data Processing Hardware to establish funds for this category that was not funded. This will allow the Board to better align budget expenditures with agency budget objects in the future. <u>No revisions in the Governor's Budget</u>.

#### **090** Analyst Adjustments

#### **Package Description**

Approved in the Governor's Budget, the Department of Administrative Services, Chief Information Office Agency Analyst made a reduction of \$806,548 to the Other Funds revenue estimate for Business Licenses and Fees revenue. This package reduces Other Fund revenues to provide for a transition to biennial licensure for Pharmacists, Pharmacy Technicians and Certified Oregon Pharmacy Technicians at a reduced rate. This package will allow the Board to adjust the workload associated with two of its largest renewal cycles to alternate years and allow the Board to reduce its large ending balance that resulted from an accounting error in the 2011-13 biennium. This change will result in improved operational efficiencies and customer service. It is not expected to negatively impact consumer protection as the Board has added additional reporting requirements during the interim and adjusted standards for continuing education accordingly. This change will impact a onetime reduction in revenue for each category adjusted and achieve a reduction to ending balance as required by the Agency's 2013-15 Legislatively Adopted Budget. The conversion to biennial licensure is being implemented in April 2015 for Pharmacists and the other categories will follow in 2016. The savings for the other categories will be realized in the revenue estimates for 2017-19 as part of the ongoing plan to reduce our ending balance. <u>Pharmacy – 85500 Policy Packages</u> Policy Package 100 Personnel Management

## **Package Description**

## Purpose:

The purpose of this package is to add two new positions (2.0 FTE) to meet the growing and changing personnel needs of the agency, as well as the Services and Supplies associated with adding new personnel. This package also includes resources to contract with the Department of Administrative Services (DAS), Enterprise Human Resource Services in 2015-17 and increase funding for the "other differential" budget object.

## NOTE: Governor's Budget Revisions to Package 100:

Approved in the Governor's Budget are the following Department of Administrative Services, Chief Information Office Agency Analyst revisions:

- 1. This package is reduced to only add one new position (1.0 FTE), the Program Analyst 1.
- 2. This package retains the resources for DAS Enterprise Human Resource Services contract.
- 3. This package incorporates increased funding for the "other differential" line item for the Executive Director and the Compliance Director positions in order to align compensation with market rates and address salary compression in the agency. These were approved by the Department of Administrative Services (DAS) Director and the Chief Human Resources Office (CHRO). Both have been implemented.

## How Achieved:

1) The Board hired a new Executive Director in January 2014 after the former Director retired in November 2013, after 19 years with the Agency. This individual is a licensed pharmacist as required by the Board. This package includes additional differential resources to incorporate the DAS Director's approved pay line exception, which was necessary for salary negotiation. There has always been a pay line exception for the Director; however the new exception is higher than the former Director's and has been incorporated into this policy package. There has always been a significant compression issue between executive and management staff pharmacists and the union represented pharmacist staff in the agency. In addition, after receiving approval from the DAS CHRO, the Board implemented an adjusted salary differential for the Compliance Director to better align compensation for this position with market rates and address salary inversion in the agency.

2) The new Director supports a Management Staff concept to establish a full time dedicated resource to lead the daily oversight of the Licensing team. With the assistance of the Department of Administrative Services (DAS) Enterprise Human Resource Services (EHRS)

## **ORBITS Budget Narrative**

Classification and Compensation staff, the classification of a Program Analyst 1 (Lead Worker) was identified as an appropriate class for this position. This role has been assigned to the Administrative Director for many years; however other competing workload and growing demands have necessitated a need for change.

The Licensing Team is currently comprised of five full time staff that is responsible for the issuance/renewal of 24,893 licenses as of July 1, 2014. The Receptionist position was recently incorporated into this work group to promote cross-training and expand the positions responsibilities as approved in the 2013-15 Legislatively Approved Budget from Office Specialist 1 to Office Specialist 2.

This team's responsibilities include 30 different categories of licensure/registration for people and business entities; each is unique, some are required components of others and many are very complex. Adding a dedicated employee 100% to this section to assist with the workload and to serve as the Lead Worker to provide orientation, assignment & reassignment of tasks to accomplish prescribed work efficiently, give direction to workers concerning work procedures, transmit established standards of performance to workers and provide informal assessment of workers performance to the supervisor. This change is expected to provide increased oversight, efficiency and productivity within the Licensing Team, as well as incorporate a review and audit function. This position concept change implements a recommendation that was suggested in the 2012 Operational Review. **NOTE: The addition of a Program Analyst 1, dedicated Licensing Lead Worker position is included in the Governor's Budget.** 

This package also includes a full time, Public Service Representative 3, which would be added to the Licensing Team in anticipation of a new category of licensure that is being currently evaluated. It is the Director's intention to avoid implementing this position until such a time as it is essential to meet the agencies growing licensure numbers. **NOTE: This position was not approved in the Governor's Budget.** 

The Board has not traditionally asked for funding for services and supplies to add new staff, however there will be a need to re-design a portion of the office to add work space for these new positions within our current space; we'll need DAS Facilities assistance for the design and additional systems furniture. Also included are resources for other miscellaneous services and supplies to meet the new staff's basic needs, i.e. employee training, computer, monitor, phone, supplies etc.

3) The new Director is also taking his first year to evaluate all staffing and resources. Effective July 1, 2014, he contracted for the use of DAS EHRS to evaluate and conduct the agencies Human Resource services though June 30, 2014. Once he receives their evaluation, he'll determine whether or not to continue with these services or bring them in-house, as they've been for many years. However, absent the evaluation, the Director anticipates this package to include the total cost of DAS EHRS services for the 2015-17 biennium. Note, there is a significant rate increase from 2013-15, where a per FTE charge is currently \$39 per person, per month for this service, to \$149 per FTE, per month in 2015-17.

2015-17 Governor's Budget



## **ORBITS Budget Narrative**

#### **Staffing Impact and Revenue Source:** NOTE: The Governor's Budget now includes:

Establish Position 0654, OA C0860 AA, Project Analyst 1 (Lead Worker)	<u>Salary OPE</u> <u>Lead Wk Diff.</u> \$82,800 + \$51,541 + \$4140	$\frac{\text{Total}}{=\$138,482}$
Fund All Other Differentials & Other Payroll Expenses		= \$136,182
Fund Services and Supplies for one FTE		= \$ 17,420
Fund Department of Administrative Services (DAS) Enterprise Human Res	source Services (EHRS)	<u>= \$ 71,520</u>
Governor's Budget revised total on Package 100		= \$363,604

#### **Quantifying Results**

If this policy package is not approved, the Board will not have adequate resources to meet the negotiated salary of the Executive Director or meet the new Director's plan to implement the organizational changes identified. This package also further supports the 2012 Operational Review recommendations in the Licensing area. The new positions will support the Agency's ability to be responsive to its Stakeholders and the always increasing new applicants and renewing licensees in a timely manner with more dedicated oversight. The Key Performance Measure for Customer Service will be improved upon specifically in the areas of timeliness and accuracy. Recent survey results indicate a need for improvement and additional resources specifically tie to this outcome.

This package would increase the existing 19 FTE to 21 FTE, although as noted above, there is no intention of going beyond 20 FTE unless there are significant increases in licensure that cannot be absorbed. The Board has the resources to implement this package in full through Other Funds resources within the existing Ending Balance.

#### **Revenue Source:**

The revenue source is Other Funds.

Pharmacy - 85500

## Policy Package 101 Business Improvement Database Upgrade

## **Package Description**

## Purpose:

The purpose of this package is to upgrade the Agency's Licensing and Compliance database and enhance online e-government opportunities for applicants and licensees, as well as upgrade the online Licensee Look Up & Verification system.

NOTE: That package was approved in the Governor's Budget, the Department of Administrative Services, Chief Information Office Agency Analyst made an adjustment to increase the total by 10% or \$28,796, based on input from the Chief Information Office to accommodate the likelihood that vendor cost estimates from May and June of 2014 will increase before the project is launched in the 2015-17 biennium. <u>Governor's Budget, the revised total cost of Package 101 is now \$316,756.</u>

## How Achieved:

In November 2003, the Board implemented the System Automation (SA) License 2000 (L2k) software, an off the shelf product. We have maintained the software since then and added various hybrid systems to allow for greater flexibility to allow for online license renewals and online licensee look up and verification. However, System Automation is no longer making improvements to the License 2000 software. Instead, they have shifted their development to a more advanced web-based platform called MyLicense Office (MLO) that would provide us with options for expansion and configuration. MLO uses the same back office database as L2k, however, the user interface is much more customizable and user friendly. MLO is one part of a suite of products SA offers.

This package also considers adding SA's MyLicense e-Gov and MyLicense Verification, two additional suites that we are interested in leveraging off MLO. These would replace the hybrid systems that have been developed and require adjustments annually to connect into our database because they are external to our database.

The proposal is to implement, MyLicense Office, MyLicense e-Gov and MyLicense Verification during the course of 2015-17. The agency would be able to centralize online licensing services. As mentioned previously, we currently have a hybrid system where our IT Consultant "builds" or uniquely programs each of our online renewals, connects securely to US Bank's payment system and the Oregon Health Authority's Workforce Data Collection survey as needed for specific licensing categories. He's also created a "connector" to take the online renewal data securely from the renewal and back into L2k. MyLicense e-Gov would remove the need to maintain three different pieces in order to facilitate a license renewal. It will incorporate a safe and secure environment for payments. It would also expand our licensee's

2015-17 Governor's Budget



## **ORBITS Budget Narrative**

opportunities to change their address or employer online themselves, and as incorporated into this proposal, establish the ability to implement online license applications and the ability to receive electronic documents. Applicants would be able to track their own licensure and renewal process and see what else is outstanding for licensure or renewal. Receiving documents electronically is a growing expectation for many, including recently passed Oregon legislation regarding healthcare professional credentialing. This also complements the work that we are currently doing to scan all of our licensing and compliance files and move towards paperless recordkeeping which was a 2013-15 legislatively approved policy package. Finally, we would also implement My License Verification which is a public facing application that would replace our current hybrid for Online Licensee Look up and it would all be contained within the same system. Last, SA also has I-Phone and android apps to access the Board's verification information from almost anywhere.

Implementing this upgrade of Suite options is a natural progression for the Board of Pharmacy. It builds on our existing database without totally replacing the existing database. Establishing this provides for more customizable options for the Licensing Team the opportunity to enhance our ability to provide greater customer service to our licensees, applicants and the public. In addition, SA has upgraded the Enforcement portion of the database which should assist our Compliance Team with much needed customizable improvements.

Some combination of these products is currently in use in 21 states; this includes 11 Boards of Pharmacy.

The package includes resources to implement the software upgrade and the required training, which would be a one-time cost. It also includes a new additional required annual maintenance fee for MyLicense eGov. This is added to the current annual maintenance fees that are currently established within the Agency budget limitation. The current annual maintenance fees are \$13,282. Adding the new fees for MyLicense eGov will increase this expenditure by \$6,480 which is a total of \$19,761 annually and a biennial rate of \$39,522 for maintenance fees, \$12,960 of additional new resources will be required and are included in this policy package.

## Staffing & Revenue Impact:

The expected impact on staffing is related to project management that will be handled by the current Office Manager who serves as the Database Administrator and the IT Consultant as required. The Database Administrator and assigned back-up's will receive MLO and eGov System Administrator Training. There will be user training for agency staff once the migration is complete.

This package is projected to cost \$287,960, of that; \$275,000 is a onetime expenditure, as noted above, this package also requests \$12,960 for new maintenance fees associated with this change. This will be an ongoing expense. Note, the Board received a unique one time civil penalty in July 2014 which will more than cover the expenses associated with this policy package. This will allow us to upgrade our systems with no additional cost to our licensees.

The agency will also be required to get project authorization through the DAS Chief Information Office, conduct procurement with the assistance of DAS Procurement and have the contract evaluated by the Department of Justice as required by the DAS Procurement

2015-17 Governor's Budget

## **ORBITS Budget Narrative**

Administrative rules. A copy of the CIO 15-17 Information Technology Project Spreadsheet is located in the Special Reports section of the binder on page 122.

The Board has the resources to implement this package in full through Other Funds resources within the existing Ending Balance.

#### **Quantifying Results:**

With this upgrade that allows for greater customization, the Agency will be able to improve services to our Licensees, Stakeholders and the public. We would also have an increased ability to respond to information gathering requests or the need for new fields of data collection within our database that are asked for regularly. This policy package does not correspond specifically to a Key Performance Measure, however it does relate to internal performance measures which are currently difficult capture. Without this upgrade, the Board will continue to need to maintain external hybrid systems and we would not be able to offer the option for online applications, the ability to collect information electronically, check license application status, the ability for licensees to update their address and employer themselves without building more unique and complex hybrid systems etc. We expect that with these enhancements, we expect to see greater efficiencies in our processing and client interactions.

**<u>Revenue Source:</u>** The revenue source is Other Funds.

Pharmacy - 85500

Policy Package 102 IT Professional Services

#### Package Description

**<u>Purpose</u>**: This package is created to meet the Risk Management recommendation to require increased Professional Liability Insurance limit requirements for IT Professional Service providers.

#### NOTE: This package was approved in the Governor's Budget. Net impact \$25,000.

#### How Achieved:

DAS Risk Management identified a need to require vendors of IT Professional Services to increase their Professional Liability Insurance coverage covering any damages by an error, omission or any negligent acts of the Contractor, its sub-contractors, agents, officers, or employee's performance under their contract. The combined single limit per occurrence shall not be less than \$100,000. Annual aggregate limit shall not be less than \$250,000.

The Agency implemented this requirement effective 8/30/2013. The selected vendor increased their hourly rates to cover the cost of incorporating the increased insurance requirements from a rate of \$100 to \$150 per hour. This is the first and only rate increase that the Agency has experienced for IT Professional Services in seven years. What was a biennial contract for services not to exceed \$50,000 in prior biennia, is now a contract for \$74,999 for the 2013-15.

#### **Staffing Impact:**

There is no staffing impact.

#### The total package amount is \$25,000.

#### **Quantifying Results:**

This package complies with DAS Risk Management recommendations for increased Professional Liability Insurance requirements and assures the State and Agency of additional insurance protection.

**<u>Revenue Source</u>**: The revenue source is Other Funds.

2015-17 Governor's Budget

### Pharmacy - 85500

### Policy Package 103 Paperless Records Retention Part 2

## **Package Description**

## Purpose:

The purpose of this package is to establish funding to pay for the Agency's use of the State Archives Oregon Records Management Solution (ORMS).

## NOTE: This package was approved in the Governor's Budget. Net impact \$22,770.

### How Achieved:

This package continues the Agency's Paperless Records Retention Part 1 that is in the progress of being implemented. The Agency is required to implement the use of HP Trim as part of the Electronic Records Management Services and ORMS enterprise solution. HP Trim is the established access application, software, data hosting and storage that is used to provide connectivity to the State's Electronic Records Management Services. There is currently a required fee of \$37.02 per user, per month charge that is expected to decrease as more users are added based to the system, payable to the vendor. The current contract is in effect for 10 years and the per user charge will decrease as more users are added. The lowest rate will be \$10.54 when there are 20,000 users. There are currently less than 2000 users as this contract is relatively new and has only been in effect through the Secretary of State's Archives Division for a few years and was originally a Pilot Project that has recently concluded.

This package also includes \$5000 for possible additional software or scanning needs that may be identified by the Archives Division.

This package continues the Agency's goal towards paperless recordkeeping and establishes it for more efficient long term records retention as required by ORS 192 and OAR 166-300 and 350.

Part 1 funding was phased out in Essential Package 022 in the amount of \$85,000.

The net impact of this package is \$22,770.

#### **Staffing Impact:**

This project will require end users to use HP Trim for records management. During Part 1 the Secretary of State Archives Division will conduct training for Agency staff. Once the document scanning conversion is complete, staff will be equipped to create and index new records for ongoing continuity for electronic recordkeeping.

#### **Quantifying Results:**

This policy package does not correspond specifically to a Key Performance Measure but rather further establishes a paperless mechanism for organizational efficiency and effectiveness. It will ultimately reduce the space needed for filing cabinets and the cost of new cabinets and supplies currently used to make paper licensing, compliance files and agency records.

**<u>Revenue Source</u>**: The revenue source is Other Funds.
### Policy Package 104 Medical Lab Testing

### **Package Description**

Purpose: This package is to increase expenditure limitation for Medical Services to allow of Medical Lab Testing for Compounded Prescriptions.

### NOTE: This package was denied in the Governor's Budget. Net impact \$0.00.

### How Achieved:

Additional resources will be used to contract for random testing of compounded drugs in Oregon to ensure safe compounding practices. This package relates to the new Drug Quality Security Act passed by Congress and signed into law in 2013 that is being implemented over the next 10 years that relates to manufacturers, distribution and sale of pharmaceutical drugs. Many states are expanding their testing requirements for compounded drugs to ensure that these products are safe for the public. The Board estimates conservatively that it may want to add the testing of compounded drugs, the ingredients and final products when necessary. The extent of potential problems is unclear.

### **Staffing Impact:**

There is no staffing impact. The total package amount is \$50,000.

### **<u>Quantifying Results</u>:**

This package will allow the Agency to order testing on raw materials and compounded drugs produced by licensees as needed. Without additional resources, this kind of testing cannot be implemented.

**Revenue Source:** The revenue source is Other Funds.

Policy Package 105 Merchant Fees

**Package Description Purpose:** This package is to increase expenditure limitation for credit card Merchant Fees.

### NOTE: This package was denied in the Governor's Budget. Net impact \$0.00.

### How Achieved:

The Agency continues to encourage licensees to renew and pay via a secure payment site with US Bank. As more licensees pay by credit card, the cost for merchant fees increases. Additional funding is necessary.

Based on 2011-13 and current expenditures, an additional \$25,000 should meet the growing fees for existing and new categories of renewals to be added for the online payment option. This will continue to grow as more people/places choose to pay by credit card.

### **Staffing Impact:**

There is no staffing impact. The total package amount is \$25,000.

### Quantifying Results:

This package will accommodate the growing use of online payment services and pay for bank merchant fees as required.

**<u>Revenue Source</u>**: The revenue source is Other Funds.

### Pharmacy, Board of Pkg: 010 - Non-PICS PsnI Svc / Vacancy Factor

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
L							
Personal Services							
Temporary Appointments	-	-	708	-	-	· _	708
All Other Differential	-	-	1,834	-		• • <u>-</u>	1,834
Public Employees' Retire Cont	-	-	290	-	-		290
Pension Obligation Bond	-	-	16,956	-	-	· _	16,956
Social Security Taxes	-	•	194	-	-	· _	194
Mass Transit Tax	-	-	755	-	-	· -	755
Total Personal Services			\$20,737	•	-	-	\$20,737
Total Expenditures							
Total Expenditures	-	-	20,737	-	-	· _	20,737
Total Expenditures		-	\$20,737	•		-	\$20,737
Ending Balance							
Ending Balance	-	-	(20,737)	-	-		(20,737)
Total Ending Balance	-	-	(\$20,737)	-		• •	(\$20,737)

### Pharmacy, Board of Pkg: 022 - Phase-out Pgm & One-time Costs

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Office Expenses	-	-	(85,000)	-			(85,000)
Total Services & Supplies	-		(\$85,000)				(\$85,000)
Total Expenditures							
Total Expenditures		-	(85,000)	-			(85,000)
Total Expenditures	-	=	(\$85,000)		· · · · · · · · · · · · · · · · · · ·	•	(\$85,000)
Ending Balance							
Ending Balance	-	-	85,000	-		. <u> </u>	85,000
Total Ending Balance		-	\$85,000		•••••••••••••••••••••••••••••••••••••••	-	\$85,000

### Pharmacy, Board of Pkg: 031 - Standard Inflation

### Cross Reference Name: Board of Pharmacy Cross Reference Number: 85500-001-00-000000

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Description							
Services & Supplies			•	<u>.</u>	•		<u> </u>
Instate Travel	-	-	3,098	-	· -	· -	3,098
Out of State Travel	-	-	582	-		· -	582
Employee Training	-	-	460	-		· -	460
Office Expenses	-	-	2,767	-	· -		2,767
Telecommunications	-	-	1,015	-		· -	1,015
State Gov. Service Charges	-	-	16,370	-			16,370
Data Processing	-	-	1,206	-			1,206
Publicity and Publications	-	-	1,089	-			1,089
Professional Services	-	-	3,389	-	· · ·	. <u>-</u>	3,389
IT Professional Services	-	-	1,542	-		· -	1,542
Attorney General	-		39,346	-			39,346
Dues and Subscriptions	-	-	123	-		· -	123
Facilities Rental and Taxes	-	-	6,135	-			6,135
Facilities Maintenance	-	-	· 1	-			1
Medical Services and Supplies	-	· -	31	-	· .		31
Agency Program Related S and S	-	-	6,444	-			6,444
Other Services and Supplies	-	-	5,508	-			5,508
Expendable Prop 250 - 5000	-	-	260	-			260
IT Expendable Property	-	-	1,406	-	-		1,406
Total Services & Supplies			\$90,772		•		\$90,772

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### Pharmacy, Board of Pkg: 031 - Standard Inflation

### Cross Reference Name: Board of Pharmacy Cross Reference Number: 85500-001-00-00-00000

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
		l					
Special Payments							
Spc Pmt to Oregon Health Authority	-	-	5,489	-	<u> </u>		5,489
Total Special Payments			\$5,489	-	•		\$5,489
Total Expenditures							
Total Expenditures	-	-	96,261	-	•		96,261
Total Expenditures	-	-	\$96,261				\$96,261
Ending Balance							
Ending Balance	-	-	(96,261)	-			(96,261)
Total Ending Balance	-	-	(\$96,261)	-	•	-	(\$96,261)

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### Pharmacy, Board of Pkg: 032 - Above Standard Inflation

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Professional Services	-	-	339	-	-	-	339
IT Professional Services	-	-	154	-	-	-	154
Other Services and Supplies	-	-	28,224	-	-		28,224
Total Services & Supplies	-	-	\$28,717			-	\$28,717
Total Expenditures							
Total Expenditures	-	-	28,717	-	-	· <u> </u>	28,717
Total Expenditures	-	-	\$28,717	-		-	\$28,717
Ending Balance							
Ending Balance	-	-	(28,717)	-	-	-	(28,717)
Total Ending Balance	-	-	(\$28,717)			-	(\$28,717)



Pharmacy, Board of Pkg: 060 - Technical Adjustments

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies	I	I	11			_L	
IT Expendable Property	-	-	(8,000)	-			(8,000)
Total Services & Supplies	-	H	(\$8,000)	-	•	- 4	(\$8,000)
Capital Outlay							
Data Processing Hardware	-	-	8,000	-			8,000
Total Capital Outlay			\$8,000			••••••••••••••••••••••••••••••••••••••	\$8,000
Total Expenditures							
Total Expenditures	-	-	-	-			-
Total Expenditures			-	-	•		
Ending Balance							
Ending Balance	-	-	-	-			-
Total Ending Balance	-			-	•		

Pharmacy, Board of Pkg: 090 - Analyst Adjustments

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Revenues		<b></b>			•	• · · · · · · · · · · · · · · · · · · ·	
Business Lic and Fees	-	-	(806,548)	-	-		(806,548)
Total Revenues			(\$806,548)		-	•	(\$806,548)
Ending Balance							
Ending Balance	-	_	(806,548)	-	-		(806,548)
Total Ending Balance	-	-	(\$806,548)	-	-	•	(\$806,548)

### Pharmacy, Board of Pkg: 100 - Personnel Management

### Cross Reference Name: Board of Pharmacy Cross Reference Number: 85500-001-00-00-00000

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services		I			•		
Class/Unclass Sal. and Per Diem	-	-	82,800	-			82,800
All Other Differential	-	-	113,929	-			113,929
Empl. Rel. Bd. Assessments	-	-	44	-			44
Public Employees' Retire Cont	-	-	31,063	-			31,063
Social Security Taxes	-	-	15,050	-			15,050
Worker's Comp. Assess. (WCD)	-	-	69	-			69
Mass Transit Tax	-	-	1,181	-	<b>.</b> .		1,181
Flexible Benefits	-	-	30,528	-	<b>.</b> .		30,528
Total Personal Services	-	-	\$274,664		-		\$274,664
Services & Supplies							
Instate Travel	-	-	270	-	<b>.</b> .		270
Employee Training	. <u> </u>	-	1,350	-	<b>.</b> .		1,350
Office Expenses	-	-	1,700	-			1,700
Telecommunications	-	-	1,500	-	<b>.</b> .		1,500
Data Processing	-	-	400	-			400
Publicity and Publications	-	-	200		- ,		200
Employee Recruitment and Develop	-	-	200	-	-		200
Dues and Subscriptions	-	-	200				200
Facilities Rental and Taxes	-	-	6,975		-		6,975
Other Services and Supplies	-	. <del>-</del>	74,945		-		74,945
Expendable Prop 250 - 5000	-	-	1,200	-	-		1,200
Total Services & Supplies		-	\$88,940		-		\$88,940

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Pharmacy, Board of Pkg: 100 - Personnel Management Cross Reference Name: Board of Pharmacy Cross Reference Number: 85500-001-00-00-00000

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Total Expenditures	I	I	I		<b>1</b>		
Total Expenditures	-	-	363,604	-	-	. <u>-</u>	363,604
Total Expenditures	-	-	\$363,604	-		-	\$363,604
Ending Balance							
Ending Balance	-	-	(363,604)	-	-	· _	(363,604)
Total Ending Balance	•	-	(\$363,604)	·····	· · · · · · · · · · · · · · · · · · ·	-	(\$363,604)
Total Positions							
Total Positions							1
Total Positions						-	1
Total FTE							
Total FTE							1.00
Total FTE		-	-	w		•	1.00

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### Pharmacy, Board of

Pkg: 101 - Business Improvement Database Upgrade

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Employee Training	-	-	. 31,423	-	<b>.</b> .		31,423
Data Processing	-	-	. 14,256	-	<b>.</b> .		14,256
Total Services & Supplies	-	-	\$45,679	-		-	\$45,679
·							
Capital Outlay							
Data Processing Software	_	-	271,077	-	-		271,077
Total Capital Outlay	-		\$271,077	•	•		\$271,077
Total Expenditures							
Total Expenditures	-	-	316,756		<b>.</b> .		316,756
Total Expenditures			\$316,756		•		\$316,756
Ending Balance							
Ending Balance	-	-	(316,756)	-	<b>.</b> .		(316,756)
Total Ending Balance	-		(\$316,756)			-	(\$316,756)

Pharmacy, Board of Pkg: 102 - IT Professional Services

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
IT Professional Services	-	-	25,000	-	-	· _	25,000
Total Services & Supplies		-	\$25,000	-		•	\$25,000
Total Expenditures							
Total Expenditures	-	-	25,000	-	-		25,000
Total Expenditures	-		\$25,000			-	\$25,000
Ending Balance							
Ending Balance	-	-	(25,000)	-	-		(25,000)
Total Ending Balance	-	-	(\$25,000)	-		-	(\$25,000)

Pharmacy, Board of

Pkg: 103 - Paperless Records Retention Part 2

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies		I	I		1	1	
Office Expenses	-	-	22,770	-	-		22,770
Total Services & Supplies	-		\$22,770	-		•	\$22,770
Total Expenditures							
Total Expenditures	-	-	22,770	-		· -	22,770
Total Expenditures	=	-	\$22,770	=			\$22,770
Ending Balance							
Ending Balance	-	-	(22,770)	-	-	· _	(22,770)
Total Ending Balance	-		(\$22,770)				(\$22,770)

### Pharmacy, Board of Pkg: 104 - Medical Lab Testing

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies			<b></b>	<b>L</b>	•	······	
Medical Services and Supplies	-	-	-	_	-		
Total Services & Supplies			-	-	-	-	
Total Expenditures Total Expenditures	-	-	-	-			
Total Expenditures	-					-	
Ending Balance							
Ending Balance	-	-	-	-	-		
Total Ending Balance	-	-	-	-			

### Pharmacy, Board of Pkg: 105 - Merchant Fees

Description	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Other Services and Supplies	-	-		-	-	-	-
Total Services & Supplies	-	-	-	-	-	-	
Total Expenditures Total Expenditures	-	-	-	-			
Total Expenditures					•	• <u> </u>	
Ending Balance							
Ending Balance	-		-	-			
Total Ending Balance	-	-	-			-	

12/30/14 REPORT NO.: PPDPFISCAL REPORT: PACKAGE FISCAL IMPACT REPORT AGENCY:85500 PHARMACY, OREGON BOARD OF SUMMARY XREF:001-00-00 Board of Pharmacy					PPDB PICS		PIC		5-17 GET PREPARATION	PAGE 1 PROD FILE
POSITION NUMBER CLASS COMP CLASS NAME	POS CNT	FTE	MOS	STEP	RATE	GF SAL/OPE	OF SAL/OPE	FF SAL/OPE	LF SAL/OPE	AF SAL/OPE
NONDER CHASS COMP. CHASS NAME	CNI	2115	100		IGA1 D	SAL/OFE	SAL/ OF L	BAD/OFE	SAL/ OPE	SAL/OPE
0000654 OA C0860 AA PROGRAM ANALYST 1	1	1.00	24.00	02	3,450.00		82,800			82,800
							50,049			50,049
TOTAL PICS SALARY							82,800			82,800
TOTAL PICS OPE							50,049			50,049
TOTAL PICS PERSONAL SERVICES =	1	1.00	24.00				132,849			132,849

# DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

## Agency Number: 85500

Cross Reference Number: 85500-000-00-00-00000

2015-17 Biennium					ence Number: 8550	
Source	2011-13 Actuals	2013-15 Leg Adopted Budget			2015-17 Governor's Budget	2015-17 Leg Adopted Budget
Other Funds						
Business Lic and Fees	6,254,937	6,149,590	6,149,590	5,731,380	4,924,832	
Non-business Lic. and Fees	296,915	377,630	377,630	65,855	65,855	
Fines and Forfeitures	434,711	260,000	260,000	270,000	270,000	
Interest Income	32,875	20,000	20,000	35,000	35,000	
Other Revenues	42,657	22,400	22,400	29,700	29,700	
Tsfr To Oregon Health Authority	(310,053)	(319,775)	(319,775)	(349,445)	(349,445)	
Total Other Funds	\$6,752,042	\$6,509,845	\$6,509,845	\$5,782,490	\$4,975,942	

\_Agency Request 2015-17 Biennium

Pharmacy, Board of

		ORBITS		2013-15		2015-17				
Source	Fund	Revenue Acct	2011-2013 Actual	Legislatively Adopted	2013-15 Estimated	Agency Request	Governor's	Legislatively Adopted		
Animal Euthanasia	4360	0205	2,800	2,302	2,200	2,100	2,100			
Certified Pharmacy Technician	4360	0205	626,612	489,714	635,500	661,900	661,900			
Charitable Pharmacy	4360	0205	1,575	384	1,500	1,800	1,800			
Consulting/Drugless Pharmacy	4360	0205		1350	1350	1,750	1,750			
Controlled Substance	4360	0205	376,400	286,242	221,100	194,200	194,200			
County Health Clinic	4360	0205	29,100	24,038	31,500	20,400	20,400			
Drug Distribution Agents	4360	0205	27,650	41,494	34,000	16,400	16,400			
Hospital Drug Room	4360	0205	16,600	14,321	21,450	12,700	12,700			
Home Dialysis	4360	0205			2,100	1,750	1,750			
Intern	4360	0205	45,240	29,835	56,700	45,000	45,000			
Manufacturers			700,000	1,086,554	694,000	850,400	850,400			
Med Device/Equip/ Gases-Class C	4360	0205	55,125	32,136	42,100	41,750	41,750			
Non-Prescript – Drug Outlet- Class A	4360	0205	244,750	215,407	221,700	224,100	224,100			
Non-Prescript – Drug Outlet- Class B	4360	0205	14,550	11,678	13,400	12,600	12,600			
Non-Prescript – Drug Outlet- Class D	4360	0205	200	170	400	0	0			
Pharmacist	4360	0205	2,007,543	2,010,553	1,464,720	1,584,480	777,932			
Pharmacy Technician	4360	0205	90,342	71,603	40,500	113,700	113,700			
Precursor	4360	0205	3,000	1,200	1,400	1,550	1,550			

Prophylactic/Contraceptive	4360	0205	4,300	2,898	1,850	1,650	1,650	
Remote Dispensing	4360	0205	1,200	852	1,000	1,000	1,000	
Retail/Institutional	4360	0205	843,375	641,359	408,975	437,675	560,468	
Drug Outlet								
Supervising Physician Dispensing Outlet	4360	0205	8,400	0	7,800	8,400	8,400	
Wholesalers	4360	0205	622,100	955,847	560,800	681,600	681,600	
Delinquent Fees	4360	0505	87,300	49,255	85,000	70,000	70,000	
Reciprocity	4360	0205	196,350	51,145	125,000	125,000	125,000	
NAPLEX/Exams	4360	0205	53,275	42,621	50,000	42,621	43,485	
Civil Penalty	4360	0505	348,911	200,000	300,000	200,000	200,000	
Interest Income	4360	0605	32,875	20,000	25,000	20,000	35,000	
NSF	4360	0975	1,200	400	1,225	400	400	
Misc Fees	4360	0975	10,938	15,000	26,000	15,000	28,600	
Laws & Rules	4360	0975	11,050	7,000	10,000	7,000	7,000	
Prescription Drug Monitoring Fee – transfer to OHA	4360	0205	284,450	246,391	267,885	283,590	283,590	
Prescription Drug Monitoring Fee - 10% retention	4360	0205	28,445	24,639	26,788	28,359	28,359	
Workforce Data Collection - transfer to OHA	4360	0210	58,376	59,630	61,040	64,105	65,855	
Fingerprinting fees – transfer to OSP depending on volume	4360	0352	238,540	208,000	208,000	208,000	211,248	
Agency Request		<u>X</u> Governor's B	Budget	Legis	latively Adopted			Budget Page

# **BUDGET NARRATIVE**

## AFFIRMATIVE ACTION

The Board of Pharmacy affirms and supports the Governor's Affirmative Action Plan and is dedicated to creating a work environment which will attract and retain employees who represent the broadest possible spectrum of society including women, minorities, and the disabled.

The Board of Pharmacy will not tolerate discrimination or harassment on the basis of race, color, sex, marital status, religion, national origin, age, mental or physical disability, or any reason prohibited by state or federal statute.

The Board and its management further adopts and affirms the Governor's beliefs that the state has a commitment to the right of all persons to work and advance on the basis of merit, ability, and potential.

The seven members of the Board of Pharmacy are appointed by the Governor and confirmed by the Senate to four-year terms. By statute, five members are licensed pharmacists and two members are representative of the public.

The agency has had 6 staff position turnovers during the last two years. Our Board and staff are comprised of a diverse group of individuals. Two members of our staff now represent the Hispanic/Latino culture. Of the seven board members, 4 are women, and 3 are men and two represent the Pacific Islander and Hispanic/Latino cultures. As staff vacancies occur, our recruitment efforts will continue to seek candidates that bring diversity to our staff.



# **BUDGET NARRATIVE**



### Agency: Oregon Board of Pharmacy, 85500

Project Name	Project Description	Estimated End Date	Project cost to date	Estimated 15- 17 Costs	All biennia total project cost	Base or POP	Project Phase: I=Initiation, P=Planning, r E=Execution, C=Close-out	If continuing project - Has it been rebaselined for either cost, scope or schedule? Y/N - If Y, how many times?	Replacement; U=Upgrade existing system; N=	What Program or line of business does the project support?
My License Office/E-Gov upgrade	This project proposes to implement upgrades to existing System Automation products the Board currently uses. The proposal includes an upgrade to MyLicense Office (MLO) to achieve current web-based technology, System Administrator training, transfer of existing data and updated configuration. Also included is the development of new online license applications for several key complex categories, as well as agency training to ensure that staff can implement future applications as needed. This proposal also would replace various hybrid systems that are used for online license renewals and license verification. The proposal includes implenting connectivity for the agencies online payment system with US Bank and also to the OHA Workforce Data Collection survey. This proposal is tied to Policy Package 101 and a copy of the proposal information is available upon request.	6/30/2017	, \$0	\$316,756	\$316,756	РОР	1	No	U	OBOP Licensing and Compliance

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### No. 535: A Message from the Board's New Executive Director, Marc Watt, RPh

To my fellow Oregon pharmacy colleagues:

It is my honor to assume the duties of executive director of your Oregon State Board of Pharmacy. My service began on February 3, of this year. I am extremely fortunate to be inheriting an agency that is well run and staffed with highly competent individuals. Gary Schnabel is to be commended for leaving behind an agency that functions at such a high level.

For those of you who do not know me, I have been a pharmacist in Oregon since 1977, and have spent the majority of my time in retail pharmacy, with a recent three-year period working in a specialty pharmacy. I have held positions from staff pharmacist to pharmacy manager along with a number of management positions in several different companies. I served as an appointed member of the Board from 2000 to 2008. I am a member of the Oregon State Pharmacy Association (OSPA), and also served on the Board of Directors of OSPA for a period of time.

I have the utmost admiration for all the pharmacists who are in the trenches of health care every day. I am constantly impressed with your dedication to your patients and your profession and how well you perform under the pressures of the modern medical system.

One of the things that I have always admired about the Board is its philosophy of "Compliance through Education." For as long as I can remember, the Board has attempted to communicate to its licensees at a high enough level so that it can avoid having to take disciplinary action on a licensee if at all possible. I intend to continue this philosophy. I also have strong feelings about operating in a transparent and collaborative manner and will do my best to make sure the Board does so whenever possible.

### No. 536: Recent FDA Actions Related to Acetaminophen-Containing Products and Codeine

Food and Drug Administration (FDA) has made two recent actions relevant to daily pharmacy practice that licensees should be aware of and understand. First, manufacturers of acetaminophen (APAP)-containing products are required to reduce the total dose of APAP per unit to no more than 325 mg. Please see the *National Pharmacy Compliance News* article entitled "FDA Issues Alert on Acetaminophen Products" on pages two and three of this *Newsletter* for additional information. Second, FDA has declared that certain prescription drug products containing codeine sulfate, codeine phosphate, and dihydrocodeine are not FDA approved and must be removed from pharmacy shelves. Please see the listserv e-mail article sent to licensees on March 24, 2014, entitled "FDA Update: Codeine and Dihydrocodeine Products" for additional information.

These changes in the landscape present the perfect opportunity for pharmacists to discuss drug therapy regimens and choices with patients. Pharmacists are encouraged to take the proactive approach to initiate the conversations for recommendation of appropriate alternatives to prescribers and patients. Also, consider visiting the website www.knowyourdose.com, which has valuable information for practitioners and patients regarding judicious APAP prescribing.

# *No. 537: Update on the PDMP – Are You Using the System?*

# By Oksana Khrapach, 2014 PharmD Candidate and Nicole O'Kane, PharmD

The Oregon Prescription Drug Monitoring Program (PDMP) was created in 2011 because of the increased number of deaths associated with controlled substance (CS) prescriptions. One mission of the program is for all health care practitioners, including pharmacists, to use the PDMP to support the appropriate use of prescription medications. Among Schedule II through IV CS reported to the PDMP, opioids are by far the class most often prescribed, with benzodiazepines being the second. Commonly these two classes are prescribed together, greatly increasing the risk of overdose. The pharmacist has a unique role in identifying and addressing these types of drug utilization review issues. A systematic approach should be used when dispensing and monitoring the use of CS, and the PDMP is a cornerstone of this approach. The Board recommends that pharmacists use the PDMP along with other available



# **National Pharmacy**

(Applicability of the contents of articles in the National Pharmacy Com and can only be ascertained by examini

### New USP Webpage Answers Common Questions About USP Chapters <795> and <797>

In response to questions concerning United States Pharmacopeia-National Formulary (USP-NF) General Chapters <795> and <797>, USP has created a new frequently asked questions (FAQs) page on its website. The FAQs answer questions related to the Revision Bulletin for Chapter <795> that was issued on November 22, 2013, and became official on January 1, 2014. Among other topics, the FAQs address common questions regarding beyond-use dating and the differences between testing stability with strength (potency) or stability-inducing methods. The FAQs can be accessed at where .usp.org/support-home/frequently-asked-questions/compounding. Question four on the page includes a link to a USP article, "Strength and Stability Testing for Compounded Preparations."

### Only You Can Prevent Look-Alike Sound-Alike Drug Names



This column was prepared by the Institute for Safe Medication Practices (ISMP). ASTITUTE 104 SATE MEDIATION PRACTICES ISMP is an independent nonprofit agency

and federally certified patient safety organization that analyzes medication errors, near misses, and potentially hazardous conditions as reported by pharmacists and other practitioners. ISMP then makes appropriate contacts with companies and regulators, gathers expert opinion about prevention measures, and publishes its recommendations. To read about the risk reduction strategies that you can put into practice today, subscribe to ISMP Medication Safety Alert!\* Community/Ambulatory Care Edition by visiting www.ismp.org. ISMP provides legal protection and confidentiality for submitted patient safety data and error reports. Help others by reporting actual and potential medication errors to the ISMP National Medication Error Reporting Program. Report online at www.ismp.org. E-mail: ismpinfo@ismp.org.

VESIcare/Vesanoid Mix-Up. A prescriber's office sent an electronic prescription to the patient's pharmacy; the prescriber intended to prescribe VESIcare® (solifenacin succinate) for overactive bladder but inadvertently selected Vesanoid® (tretinoin), which is used to induce remission of acute promyelocytic leukemia. The pharmacy technician entered the prescription for generic tretinoin; however, the pharmacy was unable to dispense the medication as the patient's pharmacy benefit manager required a prior authorization. The technician faxed a request and the prescriber's office replied back that VESIcare was intended. Both of these products are available in 10 mg solid oral dosage forms, increasing the risk of confusion. Investigate strategies (eg, tall man letters) to differentiate these products on computer screens. Prescribers should include the indication for the drug with the prescription. As always, providing patient education, especially for new prescriptions, is a good strategy to intercept errors before they impact the patient.

Benazepril Confused With Benadryl. A pharmacist reported a mix-up between benazepril (Lotensin®) and Benadryl® (diphenhydramine). A patient faxed a request to the pharmacy to ask for her "benazapryl." The pharmacist who received the fax interpreted

it as Benadryl and placed a bottle of diphenhydramine in the bag for pick-up. Around this same time, the pharmacy went through a change in wholesaler and many manufacturers of generic products were changed. A few days later, a coworker of the patient picked up the medication (along with several others). The technician at the point-of-sale told the coworker that many of the manufacturers had changed recently and that some of the pills may look different. The patient received the diphenhydramine, filled her medication box with the capsules, and took diphenhydramine daily for three weeks before noticing she was unusually tired. When she brought the bottle back to the pharmacy, the error was recognized.

ISMP continues to receive reports of confused drug name pairs being involved in errors. ISMP wants to inform its readers of these drug name confusions so they may continue evaluating what measures they have in place to protect against these possible confusions.

Your Help Is Needed With Product Safety Testing. If you are a pharmacist, nurse, pharmacy technician, or other health care practitioner who is interested in furthering medication safety and error prevention, you can make a difference! Med-ERRS (a subsidiary of ISMP) is looking for assistance to help evaluate medication labels, drug packaging, and proposed drug names prior to submission by pharmaceutical and biotech companies for approval by Food and Drug Administration (FDA). The process is fun, simple, and easy. A small honorarium is paid. For more information or to sign up, visit www.med-errs.com and click on "Become a Reviewer."

### FDA Issues Alert on Acetaminophen Products

In light of all the recent news alerts and warnings about the use of acetaminophen and acetaminophen-containing products, FDA issued a recommendation of importance to pharmacists, prescribers, and patients.

FDA recommends that health care providers consider prescribing combination drug products that contain 325 mg or less of acetaminophen. FDA also recommends that when a pharmacist receives a prescription for a combination product with more than 325 mg of acetaminophen per dosage unit that he or she contacts the prescriber to discuss a product with a lower dose of acetaminophen. A two-tablet or two-capsule dose may still be prescribed, if appropriate. In that case, the total dose of acetaminophen would be 650 mg (the amount in two 325 mg dosage units). When making individual dosing determinations, health care providers should always consider the amounts of both the acetaminophen and the opioid components in the prescription combination drug product.

FDA, in its MedWatch Safety Alert, reports that, "There are no available data to show that taking more than 325 mg of acetaminophen per dosage unit provides additional benefit that outweighs the added risks for liver injury. Further, limiting the amount of acetaminophen per dosage unit will reduce the risk of severe liver injury from inadvertent acetaminophen overdose, which can lead to liver failure, liver transplant, and death."

In January 2011, FDA asked manufacturers of prescription combination drug products containing acetaminophen to limit the amount of acetaminophen to no more than 325 mg in each tablet or capsule by January 14, 2014. FDA requested this action to protect consumers from the risk of severe liver damage that

# **Compliance** News

pliance News to a particular state or jurisdiction should not be assumed ng the law of such state or jurisdiction.)



National Association of Boards of Pharmacy FOUNDATION

can result from taking too much acetaminophen. More than half of manufacturers have voluntarily complied with FDA's request. However, some prescription combination drug products containing more than 325 mg of acetaminophen per dosage unit remain available. In the near future, FDA intends to institute proceedings to withdraw approval of prescription combination drug products containing more than 325 mg of acetaminophen per dosage unit that remain on the market.

Boards of pharmacy have received inquiries from pharmacists about remaining stock of the higher dose acetaminophen and what procedures should be followed. The FDA recommendation notes that pharmacists are advised to contact prescribers and request a change in the prescription. If the prescriber is not willing to make the change in the prescription, unfortunately, there is no clear cut recommendation at this point as to whether to dispense the higher dose acetaminophen product. It would appear that the higher dose acetaminophen-containing products will be regarded by FDA as unapproved and delisted from FDA's *Approved Drug Products With Therapeutic Equivalence Evaluations*, commonly known as the "Orange Book." Until this occurs, pharmacists must make a judgment regarding continuing to dispense the higher dose acetaminophen containing products in light of the FDA recommendation and concern for patient safety.

### Some Rohto Eye Drops Products Recalled

The Mentholatum Company of Orchard Park, NY, has issued a voluntary recall of some Rohto<sup>®</sup> eye drop products due to a manufacturing review at the production facility in Vietnam involving sterility controls. The recall has been issued at the retail level and includes Rohto Arctic, Rohto Ice, Rohto Hydra, Rohto Relief, and Rohto Cool eye drops that were manufactured in Vietnam. Products made in other facilities are not affected by the recall. To date, there has been no evidence indicating the recalled products do not meet specifications, according to a press release.

The recalled products are sold over the counter at pharmacies and retail stores throughout the United States, and can be identified by the words "Made in Vietnam" on the side carton panel under the company name and address information as well as on the back label of the bottle. Lot numbers for the recalled products contain the letter "V." Distributors and retailers are being notified by letter to stop distributing the products and to follow the recall instructions provided by the company. Questions about the recall can be directed to The Mentholatum Company at 877/636-2677, Monday through Friday, 9 AM to 5 PM Eastern Time. FDA urges consumers and health care providers to report any adverse events or side effects related to the use of these products to FDA's Med-Watch Safety Information and Adverse Event Reporting Program. More information is available at www.fda.gov/Safety/Recalls/ ucm382076.htm.

### FDA Provides Compounding Law Implementation Information

FDA has provided implementation information on Title I of the recently passed Drug Quality and Security Act – known as the Compounding Quality Act – through its website. Of note, FDA specifies that compounding entities may register as an outsourcing facility, which, under certain conditions, may be exempt from the Federal Food, Drug, and Cosmetic Act's (FD&C Act) approval and labeling requirements. Drugs produced by compounders that are not registered as outsourcing facilities must meet the conditions of Section 503A of the FD&C Act, which was amended by the new law, to qualify for certain exemptions.

The document adds, "If a compounded drug does not qualify for exemptions under either section 503A or 503B of the [FD&C Act], the compounded drug would be subject to all of the requirements of the [FD&C Act] that are applicable to drugs made by conventional manufacturers, including the new drug approval and adequate directions for use requirements." FDA also notes it will provide additional information about how the agency will interpret certain provisions of Section 503A at a later date.

The implementation information may be viewed at www. .fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/ PharmacyCompounding/ucm375804.htm.

### New e-LTP Fees Effective July 1, 2014

Supporting ongoing efforts to protect the integrity of its licensure transfer programs and to support the expansion of new technologies that are being implemented to enhance the program, the National Association of Boards of Pharmacy<sup>®</sup> (NABP<sup>®</sup>) is adjusting the fees for the Electronic Licensure Transfer Program<sup>®</sup> (e-LTP<sup>TM</sup>).

Beginning July 1, 2014, the e-LTP fees will be adjusted as follows:

- The preliminary application and first state transfer fee will increase from \$350 to \$375
- Each additional state transfer will increase from \$50 to \$75
- Change of states will increase from \$50 to \$75
- Time extensions will increase from \$50 to \$75

The fees for e-LTP were last adjusted in 2010. More information about e-LTP is available in the Programs section of the NABP website at www.nabp.net. Additional questions about the fee adjustment may be directed to Neal Watson, licensure programs manager, at 847/391-4406, or at nwatson@nabp.net.



Pharmacists & Technicians: Don't Miss Out on Valuable CPE Credit. Set Up Your NABP e-Profile and Register for CPE Monitor Today!

Continuing pharmacy education (CPE) providers who are accredited by the Accreditation Council for Pharmacy Education (ACPE) have integrated CPE Monitor<sup>®</sup> into their systems and are requiring pharmacists and pharmacy technicians to provide an NABP e-Profile ID number and date of birth (MMDD) in order to process ACPE-accredited CPE credit.

Visit www.MyCPEmonitor.net to set up your NABP e-Profile and register for CPE Monitor and avoid possible delays in your CPE reporting.

CPE Monitor is a national collaborative service from NABP, ACPE, and ACPE providers that will allow licensees to track their completed CPE credit electronically. National Association of Boards of Pharmacy Foundation 1600 Feehanville Drive Mount Prospect, IL 60056

#### OREGON STATE BOARD OF PHARMACY

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information, first, to ensure patients are receiving the safest, most effective treatments, and second, to ensure public safety by screening for potential drug diversion.

The program receives data from Oregon-licensed pharmacies dispensing CS to Oregon residents. Pharmacies are required to report this data within seven days. According to the 2013 Annual Report to the PDMP Advisory Commission, close to 100% of the pharmacies required to report had uploaded data by December 31, 2013. Unfortunately, only 1,636 pharmacists currently have active PDMP accounts to access this data. This is a small percentage of the total number of pharmacists practicing in the state. If you are not currently a registered user, sign up today using the following steps:

- ◆ Go to www.orpdmp.com
- Click the PDMP User Access & Registration link in the left-hand menu
- Open and read the Terms & Conditions
- ♦ Click the Registration link
- When prompted to log in, type in the following:
  - ♦ Username: newacct
  - ◊ Password: welcome
- Complete the required fields on the form
- Print and sign the form and then have it notarized
- Mail the completed form to: Oregon Prescription Monitoring Program – IPE PO Box 14450 Portland, OR 97293-0450

As a user of the Oregon PDMP system, it is important to understand the following:

Though health care providers and pharmacists are not required to obtain information about their patients' medications from the PDMP, it is highly recommended that it be utilized as a health care tool. Utilization can assist pharmacists caring for patients and in recognition of the pharmacist's corresponding responsibility to properly dispense CS (see 21 CFR 1306.04). Individual company requirements may expand these responsibilities.

- If the PDMP system is offline or unavailable, pharmacists are prohibited from refusing to dispense CS to patients solely based on this reason.
- It is against the law to access information of individuals not under your direct care.
- Patients can request a list of who has accessed their data.
- Information obtained from the PDMP is okay to discuss with other health care providers if it involves patient care.

Recent changes to the PDMP:

- Pharmacists and health care providers may authorize staff – known as a delegate – to access information from the PDMP. The practitioner must acknowledge a delegate and he or she is responsible for search queries done by the delegate. The delegate will have his or her own login information and will be required to input the authorizing provider's information upon each log in. The process of creating a delegate involves the same steps listed above, but under license type, choose "delegate."
- Neighboring states (California, Idaho, and Washington) now have access to the Oregon PDMP for their Oregon patients.

Currently, the Board does not require pharmacists to use the PDMP. However, the use of the system is in line with the Board's mission to promote, preserve, and protect the public health, safety, and welfare. Every pharmacist dispensing and monitoring CS treatments is encouraged to use this program. For more information on this topic, please visit www.orpdmp.com/.

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Marc Watt, RPh - State News Editor Carmen A. Catizone, MS, RPh, DPh - National News Editor & Executive Editor Deborah Zak - Communications Manager



### No. 538: New Board Member and New Pharmacy Inspector Introductions

The Oregon State Board of Pharmacy welcomes pharmacist Kate James, RPh, FIACP, to the Board. Kate was appointed by the governor and confirmed by the Oregon Legislative Senate Rules Committee. Her appointment began July 1, 2014, and runs until June 30, 2018. Kate received her pharmacy degree from Oregon State University College of Pharmacy, and is a compounding pharmacist and owner/ president of Broadway Apothecary Compounding Pharmacy in Eugene, OR. In 2008, her pharmacy was one of the first in the nation to achieve accreditation by the Pharmacy Compounding Accreditation Board. Kate is active in a number of professional organizations such as the Pain Society of Oregon, Oregon State Pharmacy Association, American Pharmacists Association, and the International Academy of Compounding Pharmacists (IACP). Her other honors and awards include the designation of fellow from the IACP in 2012. In addition to her pharmacy contributions, she is also a board member for the Science Factory Children's Museum and the Pain Society of Oregon. Kate's knowledge and experiences are a welcome addition to the Board.

The Board also welcomes its newest pharmacy inspector, **Brianne Cooper, RPh.** Brianne joined the Board in February 2014. She is a 2009 graduate of the University of the Sciences Philadelphia College of Pharmacy. Brianne worked primarily in retail prior to moving to Oregon and is excited to be living in the great northwest. In her free time, she enjoys hiking and loves to cook.

### No. 539: Certified Pharmacy Technician License Renewal

A reminder to all: the Board is in the midst of the Certified Oregon Pharmacy Technician license renewal cycle. Renewal notices were mailed the first week of July. If for some reason you did not receive your 2015 renewal, you can still go online and renew at www.pharmacy.state.or.us and click on the renewal link. If necessary, you can update your address online when completing your renewal. Remember, the renewal is done online and a delinquent fee applies to applications received or postmarked after August 31, 2014. A technician must be compliant with continuing education and active national certification requirements prior to completion of the renewal in order to honestly attest to the moral turpitude questions.

### No. 540: Oregon Immunizations

It is that time of year again – the 2014-2015 flu season is upon us. August is a good time each year to review your pharmacy's policies and procedures relating to immunization practices. The Board's compliance department shares the following thoughts for your consideration, and may be reached for inquiries at 971/673-0001 or via e-mail at pharmacy.board@state.or.us.

- Confirm the Credentials of All Your Immunizing Pharmacists and Interns: Have they successfully taken the certification training? Are they familiar with this year's protocols and expectations? (Note: Do not administer the flu vaccine prior to this year's protocol being issued.) Do they have active CPR certification? Board inspectors will look for evidence of this documentation for every vaccinator at your pharmacy. Remember that the minimum requirement for CPR certification is participation in a program that contains a hands-on training component, and is retaken at least every three years. A photocopy of each vaccinator's current CPR card is sufficient.
- Evaluate Your "E-kit": The immunization protocol entitled "Guidelines for Treatment of Severe Adverse Events" was written to remind us that emergency situations can, in fact, occur when administering a drug to a patient, and we as health care professionals must be prepared to act in such an event. The protocol specifically states that you must have items such as epinephrine, diphenhydramine, and smelling salts stored as an emergency kit (e-kit). The properly stocked e-kit expedites access to the contents, thereby reducing the time to assemble them in an emergency. Remember that because the e-kit contains prescription medication, it must be stored properly in the pharmacy. The protocol also requires a printed copy of the protocol to be with the emergency supplies. The inspector will check for a complete e-kit and compliance with these requirements.
- Assess Your Pharmacy's Vaccine Storage Area: Oregon Administrative Rule 855-019-0290(5) states



# National Pharmacy

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### New Educational Video for Pharmacists Addresses Prescription Drug Abuse

The National Association of Boards of Pharmacy<sup>®</sup> (NABP<sup>®</sup>) and the Anti-Diversion Industry Working Group (ADIWG), a consortium of pharmaceutical manufacturers and distributors of controlled substances (CS), have released an educational video for pharmacists to help them identify the warning signs of prescription drug abuse and diversion when dispensing CS prescriptions. The video, entitled "Red Flags," encourages pharmacists to help combat this national problem by exercising their professional judgment to ensure that the prescriptions they dispense were written for a legitimate medical purpose, and to act upon any unusual behavior they observe.

Drug Enforcement Administration and various state pharmacy boards have described "red flags" as circumstances surrounding the presentation of a CS prescription that should raise reasonable suspicion about the validity of that prescription. The video highlights a number of these potential warning signs, some of which are not easy to spot, by weaving personal narratives with interactions between pharmacists and customers.

The video is available in the Pharmacists section of the AWAR<sub>x</sub>E<sup>®</sup> Prescription Drug Safety website at *www*. AWARERX.org/pharmacists.

### Root Causes: A Roadmap to Action

This column was prepared by the Institute for Safe Medication Practices WELLEDTE IOT SATE MICHANNER PLACENES (ISMP). ISMP is an independent nonprofit agency and federally certified patient safety organization that analyzes medication errors, near misses, and potentially hazardous conditions as reported by pharmacists and other practitioners. ISMP then makes appropriate contacts with companies and regulators, gathers expert opinion about prevention measures, and publishes its recommendations. To read about the risk reduction strategies that you can put into practice today, subscribe to ISMP Medication Safety Alert!® Community/Ambulatory Care Edition by visiting www.ismp .org. ISMP provides legal protection and confidentiality for submitted patient safety data and error reports. Help others by reporting actual and potential medication errors to the ISMP National Medication Error Reporting Program Report online at www.ismp.org. E-mail: ismpinfo@ismp.org.

Errors are almost never caused by the failure of a single element in the system. More often, there are **multiple** underlying system failures that lead to an error, many of which can be identified when the involved health care providers take the time to uncover them.

Consider the following error: A doctor sent a hand-written order for carbamazepine 400 mg twice daily for an adult patient with a history of seizures. The pharmacist entered the medication into the profile of a four-year-old child with the same last name as the adult patient for whom the medication had been prescribed.

The pharmacist failed to notice that the patient was a child, as age was not in a prominent location on the order entry screen. The nurse failed to recognize that the dose was too high and administered 400 mg of carbamazepine to the child. She also never thought to question why the pharmacy would send oral tablets for a four-year-old child, considering that the drug is available in chewable tablets and as a liquid suspension.

The nurse **assumed** that the child was receiving the medication because he had a history of seizures. However, the nurse did not check the patient's medical record. In fact, the child did **not** have a history of seizures.

The parents had a very limited understanding of English, so they were unable to intervene to correct the erroneous seizure history.

The error was finally detected after the child became lethargic and developed nausea and vomiting. At the time of discovery, the child's carbamazepine level was 18 mcg/mL; levels greater than 12 in pediatric patients are supratherapeutic.<sup>1</sup>

It may be discouraging to see how many things go wrong when a medication error reaches a patient. However, a thorough root cause analysis (RCA) can uncover the latent failures and produce an action plan to avoid future errors.

ISMP, through a generous grant from the National Association of Boards of Pharmacy Foundation<sup>™</sup>, has developed the *Root Cause Analysis Workbook for Community/Ambulatory Pharmacy.* The workbook is designed to assist community pharmacy personnel in completing RCA for a sentinel event that may have occurred in their pharmacy. The RCA workbook uses a specific set of steps and associated tools to identify the primary causes of the **sentinel event**.

The goal of the RCA is to create an action plan framework, including risk-reduction strategies, communication and implementation strategies, and measurement of effectiveness.

RCA for sentinel events is required in the Center for Pharmacy Practice Accreditation's standards developed by NABP, American Pharmacists Association, and American Society of Health-System Pharmacists Association, as well as by several boards of pharmacy in conjunction with their continuous quality improvement regulations.

This ISMP RCA workbook is suitable for use in community pharmacy, mail-order pharmacy, or other ambulatory pharmacy practice settings that need to investigate a sentinel event. For more information and to access the free workbook, visit www.ismp.org/tools/rca/.

http://pediatrics.aappublications.org/content/113/2/406.abstract

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# **Compliance News**

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### National Association of Boards of Pharmacy FOUNDATION

## FDA Withdraws Approval of Some High Dose Acetaminophen Products

Food and Drug Administration (FDA) is withdrawing approval of 108 abbreviated new drug applications (ANDAs) for prescription combination drug products containing more than 325 mg of acetaminophen per dosage unit. For the 108 AN-DAs, the manufacturers asked to withdraw their applications, as announced in the March 27, 2014 *Federal Register* notice. A second *Federal Register* notice addresses the applications of six manufacturers who have discontinued marketing their products, but who have not withdrawn their applications. The notice also announces FDA's intention to begin the process of withdrawing approval of those applications.

In light of these announcements, and to protect patients from inadvertent acetaminophen overdose, NABP advises that pharmacies no longer dispense combination drugs containing more than 325 mg of acetaminophen per dosage unit. NABP also advises that pharmacists consult with prescribers to discuss alternative products with lower acetaminophen doses.

FDA asked manufacturers to voluntarily withdraw these products from the market to reduce the risk of severe liver injury from inadvertent acetaminophen overdose. In January 2014, FDA recommended that providers consider prescribing acetaminophen products containing 325 mg or less per dose. The original announcement may be found in the Drug Safety and Availability section of FDA's website at www.fda.gov/Drugs/DrugSafety.

### NCPDP Recommends Standardized Metric Measurements on Oral Liquid Medication Labels

The National Council for Prescription Drug Programs (NCPDP) has issued new recommendations and guidance for standardizing the dosing designation used on prescription container labels of oral liquid medications dispensed by community pharmacies in order to reduce dosing errors. NCPDP notes that such errors have been "a source of concern for many years," and that dosing errors involving young children are of particular concern because they may be more susceptible to harm from measurement errors and overdoses. The paper outlines the following recommendations for the dosing designation on prescription container labels for oral liquid medications:

- The millimeter (mL) should be used as a standard unit of measurement.
- Dose amounts should always use leading zeros before decimal points for amounts less than one and should not use trailing zeros after a decimal point.

Dosing devices with numeric graduations and units corresponding to the container label should be made easily and universally available. For example, a device should be included with each dispensed medication.

The white paper was developed following a meeting with stakeholders representing 27 participants, including NABP. In addition to its general recommendations, the white paper also issued calls to action for relevant stakeholders, including government agencies, standards organizations, pharmacists and pharmacy technicians, pharmacy leadership, and health care associations. The white paper, NCPDP Recommendations and Guidance for Standardizing the Dosing Designations on Prescription Container Labels of Oral Liquid Medications, is available for download from the NCPDP website at http:// ncpdp.org/Education/Whitepaper.

### USP Proposes New General Chapter Addressing Compounding of Hazardous Drugs

In an effort to protect health care providers and personnel who handle hazardous drugs, United States Pharmacopeial Convention (USP) has proposed new General Chapter <800> Hazardous Drugs-Handling in Healthcare Settings. The new proposed chapter addresses standards that apply to all personnel who compound hazardous drug preparations and all places where hazardous drugs are prepared, stored, transported, and administered. The new chapter also covers standards for receiving, storing, compounding, dispensing, administering, and disposing of nonsterile and sterile products and preparations. The proposed chapter applies to all personnel who are involved in handling hazardous drugs, including health care providers and staff, occupational health and safety specialists, and human resources. General Chapter <800> was published in the May/June issue of Pharmacopeial Forum, and may currently be viewed on the USP website at www.usp .org/usp-nf. Comments were accepted until July 31, 2014.



Pharmacists & Technicians: Don't Miss Out on Valuable CPE Credit. Set Up Your NABP e-Profile and Register for CPE Monitor Today!

Continuing pharmacy education (CPE) providers who are accredited by the Accreditation Council for Pharmacy Education (ACPE) have integrated CPE Monitor® into their systems and are requiring pharmacists and pharmacy technicians to provide an NABP e-Profile ID number and date of birth (MMDD) in order to process ACPE-accredited CPE credit.

Visit www.MyCPEmonitor.net to set up your NABP e-Profile and register for CPE Monitor and avoid possible delays in your CPE reporting.

CPE Monitor is a national collaborative service from NABP, ACPE, and ACPE providers that will allow licensees to track their completed CPE credit electronically. National Association of Boards of Pharmacy Foundation 1600 Feehanville Drive Mount Prospect, IL 60056

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that "a pharmacist who administers any vaccine will follow storage and handling guidance from the vaccine manufacturer and the Centers for Disease Control and Prevention." Be sure to manage your temperature logs appropriately and recognize that the intention of this monitoring is to ensure that your drug supply has been stored properly and that vaccines are effective and safe to administer. At a minimum, a pharmacy is expected to log the temperatures at least once per day. Additionally, a pharmacy is expected to have current policies and procedures for staff to follow in the event that the temperature falls out of range. What will you do if you realize that power to your pharmacy's refrigerator was disrupted overnight, potentially negatively affecting your vaccines? What happens if your refrigerator records a freezing temperature? May the vaccine(s) still be administered?

• Remember to Utilize the ALERT IIS: This handy database is useful to provide quality care to your patients. Because all immunization data are uploaded to the system regularly by pharmacists and other immunizing health care professionals, it can be a source of information for your professional drug utilization review processes. Recall that step one of each protocol states, "Check the ALERT IIS to determine whether the patient needs this vaccine and any other vaccines." Take a moment to confirm that your immunizing pharmacists and interns have access to the system, understand the intention of the forecasting responsibility, and are fulfilling that responsibility. Did you know that technicians can register to be users of the database as well? The Oregon Immunization Program (OIP) allows for "providers" agents working under the guidance of a practitioner to assist with the database lookups. Additionally, by the end of the year, the OIP plans to incorporate the ability for the user to reset his or her password directly from the ALERT Immunization Information System (IIS) website. For questions, please contact the ALERT IIS help desk at 800/980-9431 or via e-mail at alertiis@ state.or.us.

Pharmacists across the state play a key role in prevention and wellness in our communities. The Oregon Health Authority's OIP analyzed data submitted to the ALERT IIS and published a report about rates of influenza vaccinations in Oregon during the 2013-2014 influenza season and determined the following conclusions:

- Seasonal flu immunizations began in September, peaked in mid-October, and steadily declined into the holiday season. A second spike occurred around mid-January, likely due to news media coverage of influenza and the presence of cases in local communities.
- ♦ Young children and older adults have the highest flu immunization rates, while young adults remain the least vaccinated member of society. It is important for pharmacists and interns to identify these individuals in the pharmacy and initiate conversations with them regarding the merits of flu vaccination. Many people may not be worried for their own health and the risks associated with the flu; however, their capacity to spread the disease to more vulnerable populations is a public health concern. For example, young adults tend to work in positions with close public contact, such as cashiering or working in other service industries, and can more easily spread disease.
- Patterns of immunization rates across the state suggest that pharmacists are filling an unmet need for influenza immunizations in our communities, especially where barriers to adult vaccinations exist in the traditional medical model.

The complete 2013-2014 flu vaccination report, authored by Steve Robison, an OIP epidemiologist, can be read in its entirety on the Board's website at www.oregon.gov/pharmacy/ Imports/2013-14\_OregonInfluenzaReport.pdf.

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Marc Watt, RPh - State News Editor Carmen A. Catizone, MS, RPh, DPh - National News Editor & Executive Editor Deborah Zak - Communications Manager



### No. 541: Controlled Substance Transfers

The rescheduling of medications serves as a good time to go back to the basics regarding transfers of a controlled substance (CS) prescription. Prescription transfers are not mandated federally or by the state of Oregon. However, in the event of transferring a CS, would you be able to answer the following questions?

- Do you obtain the physical address of the pharmacy to which you transfer?
- What is the process for voiding the prescription in the eyes of Drug Enforcement Administration (DEA)?
- What additional information is required for a CS transfer versus a non-controlled transfer?

Verify that the procedure performed at your pharmacy is up to date and meets the federal law below.

#### §1306.25 Transfer between pharmacies of prescription information for Schedules III, IV, and V controlled substances for refill purposes.

- (a) The transfer of original prescription information for a controlled substance listed in Schedule III, IV, or V for the purpose of refill dispensing is permissible between pharmacies on a one-time basis only. However, pharmacies electronically sharing a real-time, online database may transfer up to the maximum refills permitted by law and the prescriber's authorization.
- (b) Transfers are subject to the following requirements:
  - (1) The transfer must be communicated directly between two licensed pharmacists.
  - (2) The transferring pharmacist must do the following:
    - (i) Write the word "VOID" on the face of the invalidated prescription; for electronic prescriptions, information that the prescription has been transferred must be added to the prescription record.
    - (ii) Record on the reverse of the invalidated prescription the name, address, and DEA registration number of the pharmacy to which it was transferred and the name of the pharmacist receiving the prescription information; for electronic prescriptions, such information must be added to the prescription record.
    - (iii) Record the date of the transfer and the name of the pharmacist transferring the information.

- (3) For paper prescriptions and prescriptions received orally and reduced to writing by the pharmacist pursuant to §1306.21(a), the pharmacist receiving the transferred prescription information must write the word "transfer" on the face of the transferred prescription and reduce to writing all information required to be on a prescription pursuant to §1306.05 and include:
  - (i) Date of issuance of original prescription.
  - (ii) Original number of refills authorized on original prescription.
  - (iii) Date of original dispensing.
  - (iv) Number of valid refills remaining and date(s) and locations of previous refill(s).
  - (v) Pharmacy's name, address, DEA registration number, and prescription number from which the prescription information was transferred.
  - (vi) Name of pharmacist who transferred the prescription.
  - (vii) Pharmacy's name, address, DEA registration number, and prescription number from which the prescription was originally filled...
- (c) The original and transferred prescription(s) must be maintained for a period of two years from the date of last refill. (Note: Oregon law requires record keeping for three years.)
- (d) Pharmacies electronically accessing the same prescription record must satisfy all information requirements of a manual mode for prescription transferal.
- (e) The procedure allowing the transfer of prescription information for refill purposes is permissible only if allowable under existing State or other applicable law.

The complete rule language is available at www.deadiversion .usdoj.gov/21cfr/cfr/1306/1306\_25.htm.

### No. 542: Cultural Competency

The Oregon State Board of Pharmacy is charged with preserving and protecting the health of our state's citizens in the delivery of pharmacy-related health care. Oregon's population is growing increasingly diverse, and inequities in access to quality health care are apparent, according to the Oregon Health Authority's Office of Equity and Inclusion (OEI). The OEI has determined that some racial and ethnic populations; lesbian, gay, bisexual, and transgender communities; low literacy level individuals; and rural



# National Pharmacy

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## DEA Reschedules Hydrocodone Combination Products as Schedule II

Drug Enforcement Administration (DEA) has published its final rule rescheduling hydrocodone combination products from Schedule III to Schedule II in the *Federal Register*. The change imposes Schedule II regulatory controls and sanctions on anyone handling hydrocodone combination products, effective October 6, 2014. DEA first published the proposed rules in March 2014 in response to a Food and Drug Administration (FDA) recommendation. DEA received almost 600 public comments regarding the proposed rules after they were published, with a small majority of the commenters supporting the change, DEA notes in a press release, which is available at www.justice .gov/dea/divisions/hq/2014/hq082114.shtml.

The announcement is available on the Federal Register website at https://federalregister.gov/articles/2014/08/22/2014-19922/ schedules-of-controlled-substances-rescheduling-ofhydrocodone-combination-products-from-schedule.

### The mL-Only Standard for Liquid Dosing Gathers Steam

This column was prepared by the -ISMP? Institute for Safe Medication Practices ASSISTANTE FOR SAFE MEDICATION PRACTICES (ISMP). ISMP is an independent nonprofit agency and federally certified patient safety organization that analyzes medication errors, near misses, and potentially hazardous conditions as reported by pharmacists and other practitioners. ISMP then makes appropriate contacts with companies and regulators, gathers expert opinion about prevention measures, and publishes its recommendations. To read about the risk reduction strategies that you can put into practice today, subscribe to ISMP Medication Safety Alert!\* Community/Ambulatory Care Edition by visiting www.ismp .org. ISMP provides legal protection and confidentiality for submitted patient safety data and error reports. Help others by reporting actual and potential medication errors to the ISMP National Medication Errors Reporting Program Report online at www.ismp.org. E-mail: ismpinfo@ismp.org.

ISMP first reported on the confusion of teaspoonfuls and milliliters (mL) in its newsletter in 2000, and in 2009, issued a call for practitioners to move to sole use of the metric system for measuring over-the-counter and prescription oral liquid doses, but mix-ups have continued to result in the serious injury of children and adults. Use of the metric system alone when prescribing, dispensing, and administering medications would prevent mix-ups because there would only be one method used to communicate and measure doses.

The health care industry is beginning to acknowledge the risk of confusion when using non-metric measurements, especially with oral liquid medications. The National Council for Prescription Drug Programs (NCPDP) just released a white paper entitled NCPDP Recommendations and Guidance for Standardizing the Dosing Designations on Prescription Container Labels of Oral Liquid Medications, which is available at www.ismp.org/sc?id=337. The white paper supports mL as the standard unit of liquid measure used on prescription container labels for oral liquid medications. It also calls for dosing devices with numeric graduations, and for units that correspond to the container labeling to be easily and universally available, such as including a device each time oral liquid prescription medications are dispensed. NCPDP also reiterates that dose amounts should always use leading zeroes before the decimal point for amounts less than one, and should not use trailing zeroes after a decimal point on labels for oral liquid medications.

The white paper comes as welcome news and is wellaligned with the *ISMP 2014-15 Targeted Medication Safety Best Practices for Hospitals*, Best Practice 5, which calls for organizations to use oral liquid dosing devices (oral syringes/ cups/droppers) that only display the metric scale. The white paper also comes at a time when the Centers for Disease Control and Prevention, ISMP, the Consumer Healthcare Products Association, the United States FDA, the US Metric Association, and the American Academy of Pediatrics have initiatives in place that will help guide health care organizations to commit to metric measurements.

ISMP recommends the following actions to help prevent errors:

- Use only metric units, not teaspoon or other non-metric measurements, for all patient instructions, including those listed in prescribing and pharmacy computer systems. This should cover directions incorporated into computer system mnemonics, speed codes, or any defaults used to generate prescriptions and prescription labels.
- Take steps to ensure patients have an appropriate device to measure oral liquid volumes in milliliters.
- Coach patients on how to use and clean measuring devices; use the "teach back" approach and ask patients or caregivers to demonstrate their understanding.

# DEA Classifies Tramadol a Controlled Substance

Under a final rule published in the *Federal Register*, the pain reliever tramadol is now classified as a Schedule IV controlled substance. As of August 18, 2014, DEA requires manufacturers to print the "C-IV" designation on all labels that contain 2-[(dimethylamino)methyl]-1-(3-methoxyphenyl) cyclohexanol (tramadol), including its salts, isomers, and salts of isomers. The agency notes that every "DEA registrant who possesses any quantity of tramadol on the effective date of this final rule must take an inventory of all stocks of tramadol on hand as of August 18, 2014, pursuant to 21 U.S.C. 827 and 958, and in accordance with 21 CFR 1304.03, 1304.04, and 1304.11 (a) and (d)." In addition, all "prescriptions for tramadol

# **Compliance** News

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National Association of Boards of Pharmacy FOUNDATION

or products containing tramadol must comply with 21 U.S.C. 829, and be issued in accordance with 21 CFR part 1306 and subpart C of 21 CFR part 1311 as of August 18, 2014."

The announcement is available on the Federal Register website at www.federalregister.gov/articles/2014/07/02/2014-15548/ schedules-of-controlled-substances-placement-of-tramadolinto-schedule-iv.

### FDA Lowers Recommended Starting Dose for Lunesta Due to Risk of Morning Impairment

FDA has lowered the recommended starting dose of the sleep drug Lunesta<sup>40</sup> (eszopiclone) from 2 mg to 1 mg. Patients who are currently taking 2 mg and 3 mg doses of eszopiclone should contact their health care provider to ask for instructions on how to continue to take their medication safely at a dose that is best for them, FDA advises. The dose change came after findings from a study of 91 healthy adults found that the medication was associated with impairment to driving skills, memory, and coordination for as long as 11 hours after the drug is taken, FDA notes.

More information is available in an FDA news release at www.fda.gov/newsevents/newsroom/pressannouncements/ ucm397453.htm.

### Lidocaine Should Not Be Used to Treat Teething Pain in Children, FDA Warns

FDA is recommending that prescription oral viscous lidocaine 2% solution should not be used to treat infants and children with teething pain, and is now requiring a new boxed warning to be added to the drug label to highlight this information. Oral viscous lidocaine solution is not approved to treat teething pain, and use in infants and young children can cause serious harm, including death, indicates FDA in a June 2014 Safety Announcement. FDA advises health care providers not to prescribe or recommend this product for teething pain. FDA is also requiring the "Warnings" and "Dosage and Administration" sections of the drug label to describe the risk of severe adverse events and to include additional instructions for dosing when the drug is prescribed for approved uses.

In 2014, FDA reviewed 22 case reports of serious adverse reactions, including deaths, in infants and young children who were either given lidocaine for treatment of mouth pain, or who accidentally ingested the medication.

More information is available in the safety announcement on FDA's website at www.fda.gov/Drugs/DrugSafety/ ucm402240.htm.

### FDA Reiterates Warning Against Using NuVision Pharmacy Products

Health care providers should not use or distribute compounded drugs marketed as sterile produced by Downing Labs, LLC, of Dallas, TX, also known as NuVision Pharmacy, warns FDA. Inspection results issued on July 16, 2014, indicate that FDA observed unsanitary conditions resulting in a lack of sterility assurance of sterile drug products produced by the company, which may put patients at risk, FDA notes in the safety announcement. "The inspection revealed sterility failures in 19 lots of drug products intended to be sterile, endotoxin failures in three lots of drug products, and inadequate or no investigation of these failures," states FDA in the announcement.

In 2013, the agency issued several similar warnings following NuVision's refusal to recall all sterile products. In April 2013, NuVision recalled methylcobalamin injection and lyophilized injection products, citing concerns about sterility in the wake of adverse event reports. Health care providers and consumers may report adverse events or quality problems associated with NuVision products to FDA's MedWatch Safety Information and Adverse Event Reporting Program.

Additional information is available in the safety announcement, available on FDA's website at www.fda.gov/Drugs/ DrugSafety/ucm405940.htm.

### JCPP Releases New Patient-Care Document to Promote Consistency

The Joint Commission of Pharmacy Practitioners (JCPP) has released a resource document aimed at promoting consistency in the pharmacists' process of patient care service delivery. "Pharmacists' Patient Care Process" was developed by examining key source documents on pharmaceutical care and medication therapy management. The document describes the process in five parts: collect, assess, plan, implement, and follow-up.

JCPP brings together the chief executive officers and elected officers of national pharmacy associations, including the National Association of Boards of Pharmacy<sup>®</sup>, to create a forum for discussion and opportunity for collaborative work on issues and priorities of pharmacy practice.

The document can be downloaded online at www.pharmacist .com/sites/default/files/JCPP\_Pharmacists\_Patient\_Care\_ Process.pdf.

## CPE Credit Offered for FDA Course on Misleading Prescription Drug Promotion

To raise awareness about the risks associated with false or misleading prescription medication marketing, FDA, in partnership with Medscape, is offering an online, one-hour continuing education course through its Bad Ad Program. Pharmacists may receive continuing pharmacy education (CPE) credit by taking this course. Learning objectives, faculty information, and other information is available on the course's website at *www.sigmatech.com/BadAd*. There is no registration fee for the course. Upon completion, pharmacists will receive one Accreditation Council for Pharmacy Education-accredited CPE hour (0.1 continuing education unit). National Association of Boards of Pharmacy Foundation 1600 Feehanville Drive Mount Prospect, IL 60056

#### OREGON STATE BOARD OF PHARMACY

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Oregonians experience health disparities. The Board believes that increasing understanding and awareness of the necessity to provide culturally competent health care is a patient safety priority.

The National Institutes of Health (NIH) speaks to the critical importance of health care practitioners' awareness and competency in equal care given to patients across cultural lines. The NIH provides the following background to define cultural competence.

Culture is often described as the combination of a body of knowledge, a body of belief and a body of behavior. It involves a number of elements, including personal identification, language, thoughts, communications, actions, customs, beliefs, values, and institutions that are often specific to ethnic, racial, religious, geographic, or social groups. For the provider of health information or health care, these elements influence beliefs and belief systems surrounding health, healing, wellness, illness, disease, and delivery of health services. The concept of cultural competency has a positive effect on patient care delivery by enabling providers to deliver services that are respectful of and responsive to the health beliefs, practices and cultural and linguistic needs of diverse patients.<sup>1</sup>

Cultural competency continuing education (CE) is a lifelong process of examining values and beliefs while developing and applying an inclusive approach to health care practice in a manner that recognizes the context and complexities of provider-patient interactions and preserves the dignity of individuals, families, and communities. CE in cultural competency should teach attitudes, knowledge, and skills to care effectively for patients from diverse cultures, groups, and communities. The OEI states that such training enables health care providers to work effectively in cross-cultural situations.

The Board recommends and encourages licensees to pursue ongoing CE opportunities for cultural competency. For purposes of maintenance of licensure, the Board considers CE in cultural competency to be relevant to the current practice of all licensees, and licensees may use this type of CE toward satisfying the required CE hours for license renewal. The Board will document licensees' voluntary participation in cultural competency CE through the license renewal process beginning in 2015.

In order for Oregon to achieve the triple aim of improving health, improving care, and lowering cost, providers must be responsive to the needs of diverse populations. Cultural competency training for health care providers is one method for helping Board licensees adapt to the needs of Oregon's socially and culturally diverse communities.

<sup>1</sup>www.nih.gov/clearcommunication/culturalcompetency.htm

### No. 543: Fifty-Year Pharmacists

The Board is pleased to acknowledge the pharmacists who have been licensed in Oregon for 50 years. The Board recognizes their many years of service and contributions to the profession and to the health and well-being of the citizens of Oregon. These distinguished individuals should be proud of their accomplishments, and they deserve the recognition and acknowledgement of their profession. The following is a list of pharmacists who reached this milestone in 2013 and 2014.

David Andersen	David Foster
Gresham, OR	Woodland Hills, CA
William Baily	George Freiberg
Lake Oswego, OR	Eugene, OR
David Beach	Marie Haener
San Diego, CA	Aurora, OR
Arlen Berger	Rose-Ellen Hope
Happy Valley, OR	Silverton, OR
Donna Caldwell	Wallace Muzzy
Portland, OR	John Day, OR
Bruce Carlson	Richard Parsons
Umatilla, OR	Salem, OR
Edward Cole	Darrel Purkerson
Portland	Saint Helens, OR
George Constantine	Keith Steele
Albany, OR	Ontario, OR
Lando Crittenden	Albert Takahashi
Lebanon, OR	San Jose, CA
Michael Dardis	Charles Walters
Portland	Shell Beach, CA
Raymond Elliott	Donald Wiseley
Kailua-Kona, HI	Coquille, OR

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Marc Watt, RPh - State News Editor Carmen A. Catizone, MS, RPh, DPh - National News Editor & Executive Editor Deborah Zak - Communications Manager
Summary Cross Reference Listing and Packages 2015-17 Biennium

## Agency Number: 85500 BAM Analyst: Clark, Clair

# Budget Coordinator: Carson-Phillips, Jenny - (503)373-0257

Cross Reference	Cross Reference Description	Package	Priority	Package Description	Package Group
Number		Number			
001-00-00-00000	Board of Pharmacy	010	0	Non-PICS Psnl Svc / Vacancy Factor	Essential Packages
001-00-00-00000	Board of Pharmacy	021	0	Phase-in	Essential Packages
001-00-00-00000	Board of Pharmacy	022	0	Phase-out Pgm & One-time Costs	Essential Packages
001-00-00-00000	Board of Pharmacy	031	0	Standard Inflation	Essential Packages
001-00-00-00000	Board of Pharmacy	032	0	Above Standard Inflation	Essential Packages
001-00-00-00000	Board of Pharmacy	033	0	Exceptional Inflation	Essential Packages
001-00-00-00000	Board of Pharmacy	060	0	Technical Adjustments	Essential Packages
001-00-00-00000	Board of Pharmacy	081	0	September 2014 E-Board	Policy Packages
001-00-00-00000	Board of Pharmacy	090	0	Analyst Adjustments	Policy Packages
001-00-00-00000	Board of Pharmacy	100	0	Personnel Management	Policy Packages
001-00-00-00000	Board of Pharmacy	101	0	Business Improvement Database Upgrade	Policy Packages
001-00-00-00000	Board of Pharmacy	Ì02	0	IT Professional Services	Policy Packages
001-00-00-00000	Board of Pharmacy	103	0	Paperless Records Retention Part 2	Policy Packages
001-00-00-00000	Board of Pharmacy	104	0	Medical Lab Testing	Policy Packages
001-00-00-00000	Board of Pharmacy	105	0	Merchant Fees	Policy Packages
999-00-00-00000	Suspense	010	0	Non-PICS Psnl Svc / Vacancy Factor	Essential Packages
999-00-00-00000	Suspense	021	0	Phase-in	Essential Packages
999-00-00-00000	Suspense	022	0	Phase-out Pgm & One-time Costs	Essential Packages
999-00-00-00000	Suspense	031	0	Standard Inflation	Essential Packages
999-00-00-00000	Suspense	032	0	Above Standard Inflation	Essential Packages
999-00-00-00000	Suspense	033	0	Exceptional Inflation	Essential Packages
999-00-00-00000	Suspense	081	0	September 2014 E-Board	Policy Packages

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Summary Cross Reference Listing and Packages BSU-003A

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#### Summary Cross Reference Listing and Packages

### 2015-17 Biennium

## Agency Number: 85500

### BAM Analyst: Clark, Clair

Budget Coordinator: Carson-Phillips, Jenny - (503)373-0257

Cross Reference Number	Cross Reference Description	Package Number	Priority	Package Description	Package Group
999-00-00-00000	Suspense	090	0	Analyst Adjustments	Policy Packages

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Policy Package List by Priority 2015-17 Biennium

# Agency Number: 85500

# BAM Analyst: Clark, Clair

Budget Coordinator: Carson-Phillips, Jenny - (503)373-0257

Priority	Policy Pkg Number	Policy Pkg Description	Summary Cross Reference Number	Cross Reference Description
0	081	September 2014 E-Board	001-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	090	Analyst Adjustments	001-00-00-0000	Board of Pharmacy
			999-00-00-00000	Suspense
	100	Personnel Management	001-00-00-00000	Board of Pharmacy
	101	Business Improvement Database Upgrade	001-00-00-00000	Board of Pharmacy
	102	IT Professional Services	001-00-00-00000	Board of Pharmacy
	103	Paperless Records Retention Part 2	001-00-00-00000	Board of Pharmacy
	104	Medical Lab Testing	001-00-00-00000	Board of Pharmacy
	105	Merchant Fees	001-00-00-00000	Board of Pharmacy

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Policy Package List by Priority BSU-004A

.

Agency Number: 85500

#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Pharmacy, Board Of

Cross Reference Number: 85500-000-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
BEGINNING BALANCE	-					
0025 Beginning Balance						
3400 Other Funds Ltd	1,791,291	921,868	921,868	4,622,723	4,622,723	
0030 Beginning Balance Adjustment						
3400 Other Funds Ltd	-	1,268,830	1,268,830	-	-	
BEGINNING BALANCE						
3400 Other Funds Ltd	1,791,291	2,190,698	2,190,698	4,622,723	4,622,723	
TOTAL BEGINNING BALANCE	\$1,791,291	\$2,190,698	\$2,190,698	\$4,622,723	\$4,622,723	
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	6,254,937	6,149,590	6,149,590	5,731,380	4,924,832	
0210 Non-business Lic. and Fees						
3400 Other Funds Ltd	296,915	377,630	377,630	65,855	65,855	
LICENSES AND FEES						
3400 Other Funds Ltd	6,551,852	6,527,220	6,527,220	5,797,235	4,990,687	
TOTAL LICENSES AND FEES	\$6,551,852	\$6,527,220	\$6,527,220	\$5,797,235	\$4,990,687	
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	434,711	260,000	260,000	270,000	270,000	1
INTEREST EARNINGS						
0605 Interest Income						
3400 Other Funds Ltd	32,875	20,000	20,000	35,000	35,000	I
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# Budget Support - Detail Revenues and Expenditures 2015-17 Biennium

Pharmacy, Board Of

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
OTHER						
0975 Other Revenues						
3400 Other Funds Ltd	42,657	22,400	22,400	29,700	29,700	
REVENUE CATEGORIES						
3400 Other Funds Ltd	7,062,095	6,829,620	6,829,620	6,131,935	5,325,387	
TOTAL REVENUE CATEGORIES	\$7,062,095	\$6,829,620	\$6,829,620	\$6,131,935	\$5,325,387	
TRANSFERS OUT						
2443 Tsfr To Oregon Health Authority						
3400 Other Funds Ltd	(310,053)	(319,775)	(319,775)	(349,445)	(349,445)	
AVAILABLE REVENUES						
3400 Other Funds Ltd	8,543,333	8,700,543	8,700,543	10,405,213	9,598,665	
TOTAL AVAILABLE REVENUES	\$8,543,333	\$8,700,543	\$8,700,543	\$10,405,213	\$9,598,665	· · · · · · · · · · · · · · · · · · ·
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	2,101,021	2,571,552	2,697,156	2,931,312	2,872,872	
3160 Temporary Appointments						
3400 Other Funds Ltd	14,087	23,614	23,614	24,322	24,322	
3170 Overtime Payments						
3400 Other Funds Ltd	463	-	-	-	-	
3190 All Other Differential						
3400 Other Funds Ltd	51,659	61,148	61,148	99,954	176,911	
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Agency Number: 85500

Cross Reference Number: 85500-000-00-00-00000

BDV103A

#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Pharmacy, Board Of

Age	ncy Number:	85500
Cross Reference Number:	85500-000-00-0	0-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budge
SALARIES & WAGES		-			······································	••••••••••••••••••••••••••••••••••••••
3400 Other Funds Ltd	2,167,230	2,656,314	2,781,918	3,055,588	3,074,105	
TOTAL SALARIES & WAGES	\$2,167,230	\$2,656,314	\$2,781,918	\$3,055,588	\$3,074,105	
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	677	760	760	924	880	
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	305,027	382,940	401,040	475,115	478,038	
3221 Pension Obligation Bond						
3400 Other Funds Ltd	129,343	147,732	159,618	176,574	176,574	
3230 Social Security Taxes						
3400 Other Funds Ltd	161,712	203,210	212,819	233,751	235,168	
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	865	1,121	1,121	1,449	1,380	
3260 Mass Transit Tax						
3400 Other Funds Ltd	12,882	15,756	16,509	18,333	18,445	
3270 Flexible Benefits						
3400 Other Funds Ltd	458,923	580,032	588,491	641,088	610,560	
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	1,069,429	1,331,551	1,380,358	1,547,234	1,521,045	
TOTAL OTHER PAYROLL EXPENSES	\$1,069,429	\$1,331,551	\$1,380,358	\$1,547,234	\$1,521,045	

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#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Pharmacy, Board Of

Agency Number: 85500

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	-	104,724	104,724	_	_	
3470 Undistributed (P.S.)						
3400 Other Funds Ltd	-	(3,693)	-	-	-	
3991 PERS Policy Adjustment						
3400 Other Funds Ltd	-	(92,846)	(92,846)	-	-	
P.S. BUDGET ADJUSTMENTS						
3400 Other Funds Ltd	-	8,185	11,878	-	-	
TOTAL P.S. BUDGET ADJUSTMENTS		\$8,185	\$11,878			
PERSONAL SERVICES						
3400 Other Funds Ltd	3,236,659	3,996,050	4,174,154	4,602,822	4,595,150	
TOTAL PERSONAL SERVICES	\$3,236,659	\$3,996,050	\$4,174,154	\$4,602,822	\$4,595,150	
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	85,944	106,271	106,271	106,639	106,639	
4125 Out of State Travel						
3400 Other Funds Ltd	9,788	22,403	22,403	19,985	19,985	
4150 Employee Training						
3400 Other Funds Ltd	11,941	15,326	15,326	47,052	48,559	
4175 Office Expenses						
3400 Other Funds Ltd	104,833	177,226	177,226	121,163	119,463	
4200 Telecommunications						
3400 Other Funds Ltd	19,431	53,834	53,834	37,849	36,349	
4225 State Gov. Service Charges						

Cross Reference Number: 85500-000-00-00-00000

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#### **Budget Support - Detail Revenues and Expenditures** 2015-17 Biennium Pharmacy, Board Of

Agency Number: 85500

Cross Reference Number: 85500-000-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	169,787	184,470	184,470	78,590	74,217	
4250 Data Processing						
3400 Other Funds Ltd	32,066	40,198	40,198	55,164	56,060	
4275 Publicity and Publications						
3400 Other Funds Ltd	35,587	10,304	10,304	37,593	37,593	
4300 Professional Services						
3400 Other Funds Ltd	60,377	112,983	112,983	116,711	116,711	
4315 IT Professional Services						
3400 Other Funds Ltd	46,400	51,400	51,400	78,096	78,096	
325 Attorney General						
3400 Other Funds Ltd	215,109	289,048	289,048	344,545	328,394	
375 Employee Recruitment and Develop						
3400 Other Funds Ltd	-	-	-	400	200	
400 Dues and Subscriptions						
3400 Other Funds Ltd	6,758	4,096	4,096	4,419	4,419	
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	167,598	204,496	204,496	224,581	217,606	
4475 Facilities Maintenance						
3400 Other Funds Ltd	416	48	48	49	49	
4525 Medical Services and Supplies						
3400 Other Funds Ltd	1,653	1,039	1,039	51,070	1,070	
4575 Agency Program Related S and S					·	
3400 Other Funds Ltd	204,535	220,000	214,804	221,248	221,248	
14	······	Page 5 of 14		BDV103A - Budg	et Support - Detail Re	venues & Expenditure

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# Agency Number: 85500

Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Pharmacy, Board Of Cross Reference Number: 85500-000-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
4650 Other Services and Supplies						• ••• •••
3400 Other Funds Ltd	70,169	56,993	56,993	324,294	292,293	
4675 Undistributed (S.S.)						
3400 Other Funds Ltd	-	(1,503)	-	-	-	
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	3,977	8,664	8,664	11,324	10,124	
4715 IT Expendable Property						
3400 Other Funds Ltd	44,610	46,879	46,879	40,285	40,285	
SERVICES & SUPPLIES						
3400 Other Funds Ltd	1,290,979	1,604,175	1,600,482	1,921,057	1,809,360	
TOTAL SERVICES & SUPPLIES	\$1,290,979	\$1,604,175	\$1,600,482	\$1,921,057	\$1,809,360	
CAPITAL OUTLAY						
5550 Data Processing Software						
3400 Other Funds Ltd	-	-	· _	246,434	271,077	
5600 Data Processing Hardware						
3400 Other Funds Ltd	6,559	-	-	8,000	8,000	
CAPITAL OUTLAY						
3400 Other Funds Ltd	6,559	-	-	254,434	279,077	
TOTAL CAPITAL OUTLAY	\$6,559	-	and the second of the second o	\$254,434	\$279,077	
SPECIAL PAYMENTS			<u></u>			
6085 Other Special Payments						
3400 Other Funds Ltd	-	6,074	6,074	11,563	11,563	
6443 Spc Pmt to Oregon Health Authority						
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		. 1				BDV10

#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Pharmacy, Board Of

Agency Number: 85500

Cross Reference Number:	85500-000-00-00-00000
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Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	150,738	176,899	176,899	176,899	176,899	
SPECIAL PAYMENTS						
3400 Other Funds Ltd	150,738	182,973	182,973	188,462	188,462	
TOTAL SPECIAL PAYMENTS	\$150,738	\$182,973	\$182,973	\$188,462	\$188,462	
EXPENDITURES	1110 1010 and					
3400 Other Funds Ltd	4,684,935	5,783,198	5,957,609	6,966,775	6,872,049	
TOTAL EXPENDITURES	\$4,684,935	\$5,783,198	\$5,957,609	\$6,966,775	\$6,872,049	
ENDING BALANCE						
3400 Other Funds Ltd	3,858,398	2,917,345	2,7 <b>4</b> 2,934	3,438, <b>4</b> 38	2,726,616	
TOTAL ENDING BALANCE	\$3,858,398	\$2,917,345	\$2,742,934	\$3,438,438	\$2,726,616	
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	18	19	19	21	20	
TOTAL AUTHORIZED POSITIONS	18	19	19	21	20	11 H
AUTHORIZED FTE						
8250 Class/Unclass FTE Positions	17.75	19.00	19.00	21.00	20.00	
TOTAL AUTHORIZED FTE	17.75	19.00	19.00	21.00	20.00	

## Agency Number: 85500

#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium **Board of Pharmacy**

Cross Reference Number: 85500-001-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
BEGINNING BALANCE				_		
0025 Beginning Balance						
3400 Other Funds Ltd	1,791,291	921,868	921,868	4,622,723	4,622,723	
0030 Beginning Balance Adjustment						
3400 Other Funds Ltd	-	1,268,830	1,268,830	-	-	
BEGINNING BALANCE						
3400 Other Funds Ltd	1,791,291	2,190,698	2,190,698	4,622,723	4,622,723	
TOTAL BEGINNING BALANCE	\$1,791,291	\$2,190,698	\$2,190,698	\$4,622,723	\$4,622,723	
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	6,254,937	6,149,590	6,149,590	5,731,380	4,924,832	
0210 Non-business Lic. and Fees						
3400 Other Funds Ltd	296,915	377,630	377,630	65,855	65,855	
LICENSES AND FEES						
3400 Other Funds Ltd	6,551,852	6,527,220	6,527,220	5,797,235	4,990,687	
TOTAL LICENSES AND FEES	\$6,551,852	\$6,527,220	\$6,527,220	\$5,797,235	\$4,990,687	
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	434,711	260,000	260,000	270,000	270,000	
INTEREST EARNINGS						
0605 Interest Income						
3400 Other Funds Ltd	32,875	20,000	20,000	35,000	35,000	
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# Budget Support - Detail Revenues and Expenditures 2015-17 Biennium

**Board of Pharmacy** 

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
OTHER						
0975 Other Revenues						
3400 Other Funds Ltd	42,657	22,400	22,400	29,700	29,700	
REVENUE CATEGORIES						
3400 Other Funds Ltd	7,062,095	6,829,620	6,829,620	6,131,935	5,325,387	
TOTAL REVENUE CATEGORIES	\$7,062,095	\$6,829,620	\$6,829,620	\$6,131,935	\$5,325,387	
TRANSFERS OUT						
2443 Tsfr To Oregon Health Authority						
3400 Other Funds Ltd	(310,053)	(319,775)	(319,775)	(349,445)	(349,445)	1
AVAILABLE REVENUES						
3400 Other Funds Ltd	8,543,333	8,700,543	8,700,543	10,405,213	9,598,665	i
TOTAL AVAILABLE REVENUES	\$8,543,333	\$8,700,543	\$8,700,543	\$10,405,213	\$9,598,665	
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	2,101,021	2,571,552	2,697,156	2,931,312	2,872,872	:
3160 Temporary Appointments						
3400 Other Funds Ltd	14,087	23,614	23,614	24,322	24,322	:
3170 Overtime Payments						
3400 Other Funds Ltd	463	-	-	-	-	
3190 All Other Differential						
3400 Other Funds Ltd	51,659	61,148	61,148	99,954	176,911	
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Agency Number: 85500

Cross Reference Number: 85500-001-00-00-00000

# Budget Support - Detail Revenues and Expenditures 2015-17 Biennium

Board of Pharmacy

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
SALARIES & WAGES						
3400 Other Funds Ltd	2,167,230	2,656,314	2,781,918	3,055,588	3,074,105	
TOTAL SALARIES & WAGES	\$2,167,230	\$2,656,314	\$2,781,918	\$3,055,588	\$3,074,105	
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	677	760	760	924	880	
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	305,027	382,940	401,040	475,115	478,038	
3221 Pension Obligation Bond						
3400 Other Funds Ltd	129,343	147,732	159,618	176,574	176,574	
3230 Social Security Taxes						
3400 Other Funds Ltd	161,712	203,210	212,819	233,751	235,168	
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	865	1,121	1,121	1,449	1,380	
3260 Mass Transit Tax						
3400 Other Funds Ltd	12,882	15,756	16,509	18,333	18,445	
3270 Flexible Benefits						
3400 Other Funds Ltd	458,923	580,032	588,491	641,088	610,560	
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	1,069,429	1,331,551	1,380,358	1,547,234	1,521,045	
TOTAL OTHER PAYROLL EXPENSES	\$1,069,429	\$1,331,551	\$1,380,358	\$1,547,234	\$1,521,045	

P.S. BUDGET ADJUSTMENTS

3465 Reconciliation Adjustment

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Agency Number: 85500

#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Board of Pharmacy

Cross Reference Number: 85500-001-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	-	104,724	104,724	-	-	
3470 Undistributed (P.S.)						
3400 Other Funds Ltd	-	(3,693)	-	-	-	
3991 PERS Policy Adjustment						
3400 Other Funds Ltd	-	(92,846)	(92,846)	-	-	
P.S. BUDGET ADJUSTMENTS						
3400 Other Funds Ltd	-	8,185	11,878	-	-	
TOTAL P.S. BUDGET ADJUSTMENTS		\$8,185	\$11,878	-		
PERSONAL SERVICES						
3400 Other Funds Ltd	3,236,659	3,996,050	4,174,154	4,602,822	4,595,150	
TOTAL PERSONAL SERVICES	\$3,236,659	\$3,996,050	\$4,174,154	\$4,602,822	\$4,595,150	
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	85,944	106,271	106,271	106,639	106,639	
4125 Out of State Travel						
3400 Other Funds Ltd	9,788	22,403	22,403	19,985	19,985	
4150 Employee Training						
3400 Other Funds Ltd	11,941	15,326	15,326	47,052	48,559	
4175 Office Expenses						
3400 Other Funds Ltd	104,833	177,226	177,226	121,163	119,463	
4200 Telecommunications						
3400 Other Funds Ltd	19,431	53,834	53,834	37,849	36,349	
4225 State Gov. Service Charges						

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# Agency Number: 85500

#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Board of Pharmacy

Cross Reference Number: 85500-001-00-00-00000

Agency Number: 85500

	Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
	3400 Other Funds Ltd	169,787	184,470	184,470	78,590	74,217	-
4250	Data Processing						
	3400 Other Funds Ltd	32,066	40,198	40,198	55,164	56,060	-
4275	Publicity and Publications						
	3400 Other Funds Ltd	35,587	10,304	10,304	37,593	37,593	-
4300	Professional Services						
	3400 Other Funds Ltd	60,377	112,983	112,983	116,711	116,711	-
4315	IT Professional Services						
	3400 Other Funds Ltd	46,400	51,400	51,400	78,096	78,096	-
4325	Attorney General						
	3400 Other Funds Ltd	215,109	289,048	289,048	344,545	328,394	-
4375	Employee Recruitment and Develop						
	3400 Other Funds Ltd	-	-	-	400	200	-
4400	Dues and Subscriptions						
	3400 Other Funds Ltd	6,758	4,096	4,096	4,419	4,419	-
4425	Facilities Rental and Taxes					•	
	3400 Other Funds Ltd	167,598	204,496	204,496	224,581	217,606	-
4475	Facilities Maintenance						
	3400 Other Funds Ltd	416	48	48	49	49	-
4525	Medical Services and Supplies						
	3400 Other Funds Ltd	1,653	1,039	1,039	51,070	1,070	-
4575	Agency Program Related S and S						
	3400 Other Funds Ltd	204,535	220,000	214,804	221,248	221,248	-

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BDV103A - Budget Support - Detail Revenues & Expenditures BDV103A



#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium **Board of Pharmacy**

Agency Number: 85500

Cross Reference Number: 85500-001-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
4650 Other Services and Supplies				-		
3400 Other Funds Ltd	70,169	56,993	56,993	324,294	292,293	-
4675 Undistributed (S.S.)						
3400 Other Funds Ltd	-	(1,503)	-	-	-	-
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	3,977	8,664	8,664	11,324	10,124	-
4715 IT Expendable Property						
3400 Other Funds Ltd	44,610	46,879	46,879	40,285	40,285	-
SERVICES & SUPPLIES						
3400 Other Funds Ltd	1,290,979	1,604,175	1,600,482	1,921,057	1,809,360	-
TOTAL SERVICES & SUPPLIES	\$1,290,979	\$1,604,175	\$1,600,482	\$1,921,057	\$1,809,360	-
CAPITAL OUTLAY			····			
5550 Data Processing Software						
3400 Other Funds Ltd	-	-	-	246,434	271,077	-
5600 Data Processing Hardware						
3400 Other Funds Ltd	6,559	-	-	8,000	8,000	-
CAPITAL OUTLAY						
3400 Other Funds Ltd	6,559	-	-	254,434	279,077	-
TOTAL CAPITAL OUTLAY	\$6,559	-		\$254,434	\$279,077	
SPECIAL PAYMENTS				· · · · · · · · · · · · · · · · · · ·		
6085 Other Special Payments						
3400 Other Funds Ltd	-	6,074	6,074	11,563	11,563	-
6443 Spc Pmt to Oregon Health Authority						
12/30/14		Page 13 of 14		BDV103A - Budg	jet Support - Detail Re	evenues & Expenditures
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#### Budget Support - Detail Revenues and Expenditures 2015-17 Biennium Board of Pharmacy

Agency Number: 85500

Cross Reference Number: 85500-001-00-00-00000

Description	2011-13 Actuals	2013-15 Leg Adopted Budget	2013-15 Leg Approved Budget	2015-17 Agency Request Budget	2015-17 Governor's Budget	2015-17 Leg Adopted Budget
3400 Other Funds Ltd	150,738	176,899	176,899	176,899	176,899	_
SPECIAL PAYMENTS						
3400 Other Funds Ltd	150,738	182,973	182,973	188,462	188,462	-
TOTAL SPECIAL PAYMENTS	\$150,738	\$182,973	\$182,973	\$188,462	\$188,462	-
EXPENDITURES						
3400 Other Funds Ltd	4,684,935	5,783,198	5,957,609	6,966,775	6,872,049	-
TOTAL EXPENDITURES	\$4,684,935	\$5,783,198	\$5,957,609	\$6,966,775	\$6,872,049	
ENDING BALANCE						
3400 Other Funds Ltd	3,858,398	2,917,345	2,742,934	3,438,438	2,726,616	-
TOTAL ENDING BALANCE	\$3,858,398	\$2,917,345	\$2,742,934	\$3,438,438	\$2,726,616	-
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	18	19	19	21	20	
TOTAL AUTHORIZED POSITIONS	18	19	19	21	20	
AUTHORIZED FTE			<u> </u>			
8250 Class/Unclass FTE Positions	17.75	19.00	19.00	21.00	20.00	-
TOTAL AUTHORIZED FTE	17.75	19.00	19.00	21.00	20.00	-

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## Agency Number: 85500

Cross Reference Number:85500-001-00-00-00000

#### Version / Column Comparison Report - Detail 2015-17 Biennium

**Board of Pharmacy** 

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
BEGINNING BALANCE		· · · · · · · · · · · · · · · · · · ·		
0025 Beginning Balance				
3400 Other Funds Ltd	4,622,723	4,622,723	0	-
REVENUE CATEGORIES				
LICENSES AND FEES				
0205 Business Lic and Fees				
3400 Other Funds Ltd	5,731,380	5,731,380	0	-
0210 Non-business Lic. and Fees				
3400 Other Funds Ltd	65,855	65,855	0	-
TOTAL LICENSES AND FEES				
3400 Other Funds Ltd	5,797,235	5,797,235	0	-
FINES, RENTS AND ROYALTIES				
0505 Fines and Forfeitures				
3400 Other Funds Ltd	270,000	270,000	0	-
INTEREST EARNINGS				
0605 Interest Income				
3400 Other Funds Ltd	35,000	35,000	0	-
OTHER				
0975 Other Revenues				
3400 Other Funds Ltd	29,700	29,700	0	-
TOTAL REVENUES				
3400 Other Funds Ltd	6,131,935	6,131,935	0	-
TRANSFERS OUT				
2443 Tsfr To Oregon Health Authority				
12/30/14	Page 1 of	5	ANA100A - Version / Col	umn Comparison Report - Detai

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#### Version / Column Comparison Report - Detail 2015-17 Biennium

#### Board of Pharmacy

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	(349,445)	(349,445)	0	-
AVAILABLE REVENUES				
3400 Other Funds Ltd	10,405,213	10,405,213	0	-
EXPENDITURES				
PERSONAL SERVICES				
SALARIES & WAGES				
3110 Class/Unclass Sal. and Per Diem				
3400 Other Funds Ltd	2,790,072	2,790,072	0	-
3160 Temporary Appointments				
3400 Other Funds Ltd	23,614	23,614	0	-
3190 All Other Differential				
3400 Other Funds Ltd	61,148	61,148	0	-
TOTAL SALARIES & WAGES				
3400 Other Funds Ltd	2,874,834	2,874,834	0	-
OTHER PAYROLL EXPENSES				
3210 Empl. Rel. Bd. Assessments				
3400 Other Funds Ltd	836	836	0	-
3220 Public Employees' Retire Cont				
3400 Other Funds Ltd	446,685	446,685	0	-
3221 Pension Obligation Bond				
3400 Other Funds Ltd	159,618	159,618	0	-
3230 Social Security Taxes				
3400 Other Funds Ltd	219,924	219,924	0	-
3250 Worker's Comp. Assess. (WCD)				

Cross Reference Number:85500-001-00-00-00000

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#### Version / Column Comparison Report - Detail 2015-17 Biennium **Board of Pharmacy**

Cross Reference Number:85500-001-00-00-00000

Agency Number: 85500

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	1,311	1,311	0	-
3260 Mass Transit Tax				
3400 Other Funds Ltd	16,509	16,509	0	-
3270 Flexible Benefits				
3400 Other Funds Ltd	580,032	580,032	0	-
TOTAL OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	1,424,915	1,424,915	0	-
TOTAL PERSONAL SERVICES				
3400 Other Funds Ltd	4,299,749	4,299,749	0	-
SERVICES & SUPPLIES				
4100 Instate Travel				
3400 Other Funds Ltd	103,271	103,271	0	-
4125 Out of State Travel				
3400 Other Funds Ltd	19,403	19,403	0	-
4150 Employee Training				
3400 Other Funds Ltd	15,326	15,326	0	-
4175 Office Expenses				
3400 Other Funds Ltd	177,226	177,226	0	-
4200 Telecommunications				
3400 Other Funds Ltd	33,834	33,834	0	-
4225 State Gov. Service Charges				
3400 Other Funds Ltd	57,847	57,847	0	-
4250 Data Processing				
3400 Other Funds Ltd	40,198	40,198	0	-
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## Version / Column Comparison Report - Detail 2015-17 Biennium

# Board of Pharmacy

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
4275 Publicity and Publications	•	······································		L Contractions and a contraction of the contraction
3400 Other Funds Ltd	36,304	36,304	0	-
4300 Professional Services				
3400 Other Funds Ltd	112,983	112,983	0	-
4315 IT Professional Services				
3400 Other Funds Ltd	51,400	51,400	0	-
4325 Attorney General				
3400 Other Funds Ltd	289,048	289,048	0	-
4400 Dues and Subscriptions				
3400 Other Funds Ltd	4,096	4,096	0	-
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	204,496	204,496	0	-
4475 Facilities Maintenance				
3400 Other Funds Ltd	48	48	0	-
4525 Medical Services and Supplies				
3400 Other Funds Ltd	1,039	1,039	0	-
4575 Agency Program Related S and S				
3400 Other Funds Ltd	214,804	214,804	0	-
4650 Other Services and Supplies				
3400 Other Funds Ltd	183,616	183,616	0	-
4700 Expendable Prop 250 - 5000			-	
3400 Other Funds Ltd	8,664	8,664	0	
4715 IT Expendable Property			Ŭ	
3400 Other Funds Ltd	46,879	46,879	0	-
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Cross Reference Number:85500-001-00-00-00000

## Version / Column Comparison Report - Detail 2015-17 Biennium

### Board of Pharmacy

Description	Agency Request Budget (V-01) 2015-17 Base Budget	Governor's Budget (Y-01) 2015-17 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
TOTAL SERVICES & SUPPLIES				
3400 Other Funds Ltd	1,600,482	1,600,482	0	-
SPECIAL PAYMENTS				
6085 Other Special Payments				
3400 Other Funds Ltd	11,563	11,563	0	-
6443 Spc Pmt to Oregon Health Authority				
3400 Other Funds Ltd	171,410	171,410	0	-
TOTAL SPECIAL PAYMENTS				
3400 Other Funds Ltd	182,973	182,973	0	-
TOTAL EXPENDITURES				
3400 Other Funds Ltd	6,083,204	6,083,204	0	-
ENDING BALANCE				
3400 Other Funds Ltd	4,322,009	4,322,009	0	-
AUTHORIZED POSITIONS				
8150 Class/Unclass Positions	19	19	0	-
AUTHORIZED FTE				
8250 Class/Unclass FTE Positions	19.00	19.00	0	-

Cross Reference Number:85500-001-00-00-00000

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ackage Comparison Report - Detail 015-17 Biennium soard of Pharmacy	Cross Reference Number: 85500-001-00-00-0 Package: Non-PICS PsnI Svc / Vacancy F Pkg Group: ESS Pkg Type: 010 Pkg Number:			
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
XPENDITURES		• • • • • • • • • • • • • • • • • • •	000 00 0	
PERSONAL SERVICES				
SALARIES & WAGES				
3160 Temporary Appointments				
3400 Other Funds Ltd	708	708	0	0.00%
3190 All Other Differential				
3400 Other Funds Ltd	1,834	1,834	0	0.00%
SALARIES & WAGES				
3400 Other Funds Ltd	2,542	2,542	0	0.00%
TOTAL SALARIES & WAGES	\$2,542	\$2,542	\$0	0.00%
OTHER PAYROLL EXPENSES	·····			
3220 Public Employees Retire Cont				
3400 Other Funds Ltd	290	290	0	0.00%
3221 Pension Obligation Bond				
3400 Other Funds Ltd	16,956	16,956	0	0.00%
3230 Social Security Taxes				
3400 Other Funds Ltd	· 194	194	0	0.00%
3260 Mass Transit Tax				
3400 Other Funds Ltd	755	755	0	0.00%

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Pharmacy, Board of				Agency Number: 85500
Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy		Ρ	Package: Non-PIC	ber: 85500-001-00-00-00000 S Psnl Svc / Vacancy Factor e: 010 Pkg Number: 010
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
OTHER PAYROLL EXPENSES				• • • • • • • • • • • • • • • • • • •
3400 Other Funds Ltd	18,195	18,195	0	0.00%
TOTAL OTHER PAYROLL EXPENSES	\$18,195	\$18,195	\$0	0.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	20,737	20,737	0	0.00%
TOTAL PERSONAL SERVICES	\$20,737	\$20,737	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	20,737	20,737	0	0.00%
TOTAL EXPENDITURES	\$20,737	\$20,737	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(20,737)	(20,737)	0	0.00%
TOTAL ENDING BALANCE	(\$20,737)	(\$20,737)	\$0	0.00%

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Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy		Ρ	Package: Phase	ber: 85500-001-00-00-0000 -out Pgm & One-time Cost e: 020 Pkg Number: 02
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES	-			-
SERVICES & SUPPLIES				
4175 Office Expenses				
3400 Other Funds Ltd	(85,000)	(85,000)	0	0.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	(85,000)	(85,000)	0	0.00%
TOTAL SERVICES & SUPPLIES	(\$85,000)	(\$85,000)	\$0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	(85,000)	(85,000)	0	0.00%
TOTAL EXPENDITURES	(\$85,000)	(\$85,000)	\$0	0.00%
ENDING BALANCE		· · · · · · · · · · · · · · · · · · ·		
3400 Other Funds Ltd	85,000	85,000	0	0.00%
TOTAL ENDING BALANCE	\$85,000	\$85,000	\$0	0.00%

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Package Comparison Report - Detail 2015-17 Biennium		D		ber: 85500-001-00-00-0000 Package: Standard Inflation pe: 030 Pkg Number: 03
Board of Pharmacy Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES	•			
SERVICES & SUPPLIES				
4100 Instate Travel				
3400 Other Funds Ltd	3,098	3,098	0	0.00%
4125 Out of State Travel				
3400 Other Funds Ltd	582	582	0	0.00%
4150 Employee Training				
3400 Other Funds Ltd	460	460	0	0.00%
4175 Office Expenses				
3400 Other Funds Ltd	2,767	2,767	0	0.00%
4200 Telecommunications				
3400 Other Funds Ltd	1,015	1,015	0	0.00%
4225 State Gov. Service Charges				
3400 Other Funds Ltd	20,743	16,370	(4,373)	(21.08%)
4250 Data Processing				
3400 Other Funds Ltd	1,206	1,206	0	0.00%
4275 Publicity and Publications				
3400 Other Funds Ltd	1,089	1,089	0	0.00%
4300 Professional Services				
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kage Comparison Report - Detail				ber: 85500-001-00-00-0000
5-17 Biennium rd of Pharmacy		Р		Package: Standard Inflatio e: 030 Pkg Number: 03
Description	Agency Request Budget (V-01)		Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	3,389	3,389	0	0.00%
4315 IT Professional Services				
3400 Other Funds Ltd	1,542	1,542	0	0.00%
4325 Attorney General				
3400 Other Funds Ltd	55,497	39,346	(16,151)	(29.10%)
4400 Dues and Subscriptions				
3400 Other Funds Ltd	123	123	0	0.00%
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	6,135	6,135	0	0.00%
4475 Facilities Maintenance				
3400 Other Funds Ltd	1	1	0	0.00%
4525 Medical Services and Supplies				
3400 Other Funds Ltd	31	31	O	0.00%
4575 Agency Program Related S and S				
3400 Other Funds Ltd	6,444	6,444	0	0.00%
4650 Other Services and Supplies				
3400 Other Funds Ltd	5,508	5,508	0	0.00%
4700 Expendable Prop 250 - 5000				
3400 Other Funds Ltd	260	260	0	0.00%

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Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy		Cross Reference Number: 85500-0 Package: Sta Pkg Group: ESS Pkg Type: 030 Pkg			
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus	% Change from Column 1 to Column 2	
	Column 1	Column 2			
4715 IT Expendable Property		•			
3400 Other Funds Ltd	1,406	1,406	0	0.00%	
SERVICES & SUPPLIES					
3400 Other Funds Ltd	111,296	90,772	(20,524)	(18.44%)	
TOTAL SERVICES & SUPPLIES	\$111,296	\$90,772	(\$20,524)	(18.44%)	
SPECIAL PAYMENTS					
6443 Spc Pmt to Oregon Health Authority					
3400 Other Funds Ltd	5,489	5,489	0	0.00%	
XPENDITURES					
3400 Other Funds Ltd	116,785	96,261	(20,524)	(17.57%)	
TOTAL EXPENDITURES	\$116,785	\$96,261	(\$20,524)	(17.57%)	
ENDING BALANCE					
3400 Other Funds Ltd	(116,785)	(96,261)	20,524	17.57%	
TOTAL ENDING BALANCE	(\$116,785)	(\$96,261)	\$20,524	17.57%	

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Agency Number: 85500

Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy		Pk	Packag	ber: 85500-001-00-00-0000 e: Above Standard Inflation e: 030 Pkg Number: 032	
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2	
	Column 1	Column 2			
EXPENDITURES		•		• ····································	
SERVICES & SUPPLIES					
4300 Professional Services					
3400 Other Funds Ltd	339	339	0	0.00%	
4315 IT Professional Services					
3400 Other Funds Ltd	154	154	0	0.00%	
4650 Other Services and Supplies					
3400 Other Funds Ltd	28,224	28,224	0	0.00%	
SERVICES & SUPPLIES					
3400 Other Funds Ltd	28,717	28,717	0	0.00%	
TOTAL SERVICES & SUPPLIES	\$28,717	\$28,717	\$0	0.00%	
EXPENDITURES					
3400 Other Funds Ltd	28,717	28,717	0	0.00%	
TOTAL EXPENDITURES	\$28,717	\$28,717	\$0	0.00%	
ENDING BALANCE					
3400 Other Funds Ltd	(28,717)	(28,717)	0	0.00%	
TOTAL ENDING BALANCE	(\$28,717)	(\$28,717)	\$0	0.00%	

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Package Comparison Report - Detail			Cross Reference Nun	nber: 85500-001-00-00-00000
2015-17 Biennium				age: Technical Adjustments
Board of Pharmacy		P	kg Group: ESS Pkg Ty	pe: 060 Pkg Number: 060
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
SERVICES & SUPPLIES				
4715 IT Expendable Property				
3400 Other Funds Ltd	(8,000)	(8,000)	0	0.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	(8,000)	(8,000)	0	0.00%
TOTAL SERVICES & SUPPLIES	(\$8,000)	(\$8,000)	\$0	0.00%
CAPITAL OUTLAY				
5600 Data Processing Hardware				
3400 Other Funds Ltd	8,000	8,000	0	0.00%
CAPITAL OUTLAY				
3400 Other Funds Ltd	8,000	8,000	0	0.00%
TOTAL CAPITAL OUTLAY	\$8,000	\$8,000	\$0	0.00%
EXPENDITURES				-
3400 Other Funds Ltd	-	-	0	0.00%
TOTAL EXPENDITURES	-	•	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	-	-	0	0.00%
TOTAL ENDING BALANCE		-	\$0	0.00%
12/30/14	Page 8 of 19		ANA101A - F	ackage Comparison Report - Detai ANA101/
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Pharmacy, Board of				Agency Number: 85500
Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy		PI	Pac	ber: 85500-001-00-00-00000 ckage: Analyst Adjustments e: 090 Pkg Number: 090
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
REVENUE CATEGORIES				•
LICENSES AND FEES				
0205 Business Lic and Fees				
3400 Other Funds Ltd	-	(806,548)	(806,548)	100.00%
AVAILABLE REVENUES				
3400 Other Funds Ltd	-	(806,548)	(806,548)	100.00%
TOTAL AVAILABLE REVENUES	•	(\$806,548)	(\$806,548)	100.00%
ENDING BALANCE				
3400 Other Funds Ltd	-	(806,548)	(806,548)	100.00%
TOTAL ENDING BALANCE	-	(\$806,548)	(\$806,548)	100.00%

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Package Comparison Report - Detail				ber: 85500-001-00-00-0000	
015-17 Biennium	Package: Personnel Manageme				
Board of Pharmacy			Group: POL Pkg Typ	e: POL Pkg Number: 100	
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2	
	Column 1	Column 2			
EXPENDITURES					
PERSONAL SERVICES					
SALARIES & WAGES					
3110 Class/Unclass Sal. and Per Diem					
3400 Other Funds Ltd	141,240	82,800	(58,440)	(41.38%)	
3190 All Other Differential					
3400 Other Funds Ltd	36,972	113,929	76,957	208.15%	
SALARIES & WAGES					
3400 Other Funds Ltd	178,212	196,729	18,517	10.39%	
TOTAL SALARIES & WAGES	\$178,212	\$196,729	\$18,517	10.39%	
OTHER PAYROLL EXPENSES	,				
3210 Empl. Rel. Bd. Assessments					
3400 Other Funds Ltd	88	44	(44)	(50.00%)	
3220 Public Employees Retire Cont					
3400 Other Funds Ltd	28,140	31,063	2,923	10.39%	
3230 Social Security Taxes					
3400 Other Funds Ltd	13,633	15,050	1,417	10.39%	
3250 Workers Comp. Assess. (WCD)					
3400 Other Funds Ltd	138	69	(69)	(50.00%)	
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Package Comparison Report - Detail				ber: 85500-001-00-00-0000
015-17 Biennium Board of Pharmacy		Dk		ige: Personnel Managemen e: POL Pkg Number: 10
Description	(V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3260 Mass Transit Tax				
3400 Other Funds Ltd	1,069	1,181	112	10.48%
3270 Flexible Benefits				
3400 Other Funds Ltd	61,056	30,528	(30,528)	(50.00%)
OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	104,124	77,935	(26,189)	(25.15%)
TOTAL OTHER PAYROLL EXPENSES	\$104,124	\$77,935	(\$26,189)	(25.15%)
PERSONAL SERVICES				
3400 Other Funds Ltd	282,336	274,664	(7,672)	(2.72%)
TOTAL PERSONAL SERVICES	\$282,336	\$274,664	(\$7,672)	(2.72%)
SERVICES & SUPPLIES				
4100 Instate Travel				
3400 Other Funds Ltd	270	270	0	0.00%
4150 Employee Training				
3400 Other Funds Ltd	2,700	1,350	(1,350)	(50.00%)
4175 Office Expenses				
3400 Other Funds Ltd	3,400	1,700	(1,700)	(50.00%)
4200 Telecommunications				
3400 Other Funds Ltd	3,000	1,500	(1,500)	(50.00%)
2/30/14	Page 11 of 19		ANA101A - P	ackage Comparison Report - Det
:17 PM	17.	-1		ANA101

ackage Comparison Report - Detail				ber: 85500-001-00-00-0000
015-17 Biennium		Die		ge: Personnel Managemer
oard of Pharmacy		· · · · · · · · · · · · · · · · · · ·	g Group: POL Pkg Type	e: POL Pkg Number: 10
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
4250 Data Processing		•		
3400 Other Funds Ltd	800	400	(400)	(50.00%)
4275 Publicity and Publications				
3400 Other Funds Ltd	200	200	0	0.00%
4375 Employee Recruitment and Develop				
3400 Other Funds Ltd	400	200	(200)	(50.00%)
4400 Dues and Subscriptions				
3400 Other Funds Ltd	200	200	0	0.00%
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	13,950	6,975	(6,975)	(50.00%)
4650 Other Services and Supplies				
3400 Other Funds Ltd	81,946	74,945	(7,001)	(8.54%)
4700 Expendable Prop 250 - 5000				
3400 Other Funds Ltd	2,400	1,200	(1,200)	(50.00%)
SERVICES & SUPPLIES				
3400 Other Funds Ltd	109,266	88,940	(20,326)	(18.60%)
TOTAL SERVICES & SUPPLIES	\$109,266	\$88,940	(\$20,326)	(18.60%)
XPENDITURES				
3400 Other Funds Ltd	391,602	363,604	(27,998)	(7.15%)
2/30/14	Pag	e 12 of 19	ANA101A - P	ackage Comparison Report - Det
:17 PM	Ile	C		ANA10 <sup>7</sup>
2015-17 Biennium Board of Pharmacy		Pk		ge: Personnel Managemen e: POL Pkg Number: 100
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Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
TOTAL EXPENDITURES	\$391,602	\$363,604	(\$27,998)	(7.15%)
ENDING BALANCE		· · · · · · · · · · · · · · · · · · ·	sume -	
3400 Other Funds Ltd	(391,602)	(363,604)	27,998	7.15%
TOTAL ENDING BALANCE	(\$391,602)	(\$363,604)	\$27,998	7.15%
AUTHORIZED POSITIONS				
8150 Class/Unclass Positions	2	1	(1)	(50.00%)
AUTHORIZED FTE				
8250 Class/Unclass FTE Positions	2.00	1.00	(1.00)	(50.00%)

## Pharmacy, Board of

Package Comparison Report - Detail 2015-17 Biennium

Cross Reference Number: 85500-001-00-00-00000 Package: Personnel Management

Agency Number: 85500

12/30/14

Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy			Package: Business Impr	ber: 85500-001-00-00-0000 ovement Database Upgrade e: POL Pkg Number: 101
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
SERVICES & SUPPLIES				
4150 Employee Training				
3400 Other Funds Ltd	28,566	31,423	2,857	10.00%
4250 Data Processing				
3400 Other Funds Ltd	12,960	14,256	1,296	10.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	41,526	45,679	4,153	10.00%
TOTAL SERVICES & SUPPLIES	\$41,526	\$45,679	\$4,153	10.00%
CAPITAL OUTLAY				
5550 Data Processing Software				
3400 Other Funds Ltd	246,434	271,077	24,643	10.00%
CAPITAL OUTLAY				
3400 Other Funds Ltd	246,434	271,077	24,643	10.00%
TOTAL CAPITAL OUTLAY	\$246,434	\$271,077	\$24,643	10.00%
EXPENDITURES				
3400 Other Funds Ltd	287,960	316,756	28,796	10.00%
TOTAL EXPENDITURES	\$287,960	\$316,756	\$28,796	10.00%
ENDING BALANCE				
12/30/14	Pag	e 14 of 19	ANA101A - Pa	ackage Comparison Report - Deta
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Pharmacy, Board of	Agency Number: 85500							
Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy		Ρ	Cross Reference Number: 85500-001-00-00-00000 Package: Business Improvement Database Upgrade Pkg Group: POL Pkg Type: POL Pkg Number: 101					
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2				
	Column 1	Column 2						
3400 Other Funds Ltd	(287,960)	(316,756)	(28,796)	(10.00%)				
TOTAL ENDING BALANCE	(\$287,960)	(\$316,756)	(\$28,796)	(10.00%)				

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Pharmacy, Board of				Agency Number: 85500
Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy			Packag	ber: 85500-001-00-00-00000 ge: IT Professional Services e: POL Pkg Number: 102
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01	Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES	······································	•	• • • • • • • • • • • • • • • • • • •	
SERVICES & SUPPLIES				
4315 IT Professional Services				
3400 Other Funds Ltd	25,000	25,000	0	0.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	25,000	25,000	0	0.00%
TOTAL SERVICES & SUPPLIES	\$25,000	\$25,000	\$0	0.00%
EXPENDITURES	· · · · · · · · · · · · · · · · · · ·			
3400 Other Funds Ltd	25,000	25,000	0	0.00%
TOTAL EXPENDITURES	\$25,000	\$25,000	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	(25,000)	(25,000)	0	0.00%
TOTAL ENDING BALANCE	(\$25,000)	(\$25,000)	\$0	0.00%

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Package Comparison Report - Detail 2015-17 Biennium			Package: Paperles	ber: 85500-001-00-00-00000 ss Records Retention Part 2	
Board of Pharmacy		P	kg Group: POL Pkg Type	e: POL Pkg Number: 10	
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	% Change from Column 1 to Column 2	
	Column 1	Column 2			
EXPENDITURES	•				
SERVICES & SUPPLIES					
4175 Office Expenses					
3400 Other Funds Ltd	22,770	22,770	0	0.00%	
SERVICES & SUPPLIES					
3400 Other Funds Ltd	22,770	22,770	0	0.00%	
TOTAL SERVICES & SUPPLIES	\$22,770	\$22,770	\$0	0.00%	
EXPENDITURES					
3400 Other Funds Ltd	22,770	22,770	0	0.00%	
TOTAL EXPENDITURES	\$22,770	\$22,770	\$0	0.00%	
ENDING BALANCE	·				
3400 Other Funds Ltd	(22,770)	(22,770)	0	0.00%	
TOTAL ENDING BALANCE	(\$22,770)	(\$22,770)	\$0	0.00%	

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Pharmacy, Board of				Agency Number: 85500
Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy			Р	nber: 85500-001-00-00-00000 ackage: Medical Lab Testing be: POL Pkg Number: 104
Description	Agency Request Budget (V-01)	Governor's Budget (Y-0	01) Column 2 Minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES			··· •	
SERVICES & SUPPLIES				
4525 Medical Services and Supplies				
3400 Other Funds Ltd	50,000	. –	(50,000)	(100.00%)
SERVICES & SUPPLIES				• • • •
3400 Other Funds Ltd	50,000	-	(50,000)	(100.00%)
TOTAL SERVICES & SUPPLIES	\$50,000		(\$50,000)	(100.00%)
EXPENDITURES				
3400 Other Funds Ltd	50,000	-	(50,000)	(100.00%)
TOTAL EXPENDITURES	\$50,000	-	(\$50,000)	(100.00%)
ENDING BALANCE				
3400 Other Funds Ltd	(50,000)	-	50,000	100.00%
TOTAL ENDING BALANCE	(\$50,000)	·····	\$50,000	100.00%

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Pharmacy, Board of				Agency Number: 8550
Package Comparison Report - Detail 2015-17 Biennium Board of Pharmacy		Pk	Cross Reference Num	ber: 85500-001-00-00-0000 Package: Merchant Fee
Description	Agency Request Budget (V-01)	Governor's Budget (Y-01)	Column 2 Minus Column 1	e: POL Pkg Number: 10 % Change from Column 1 to Column 2
	Column 1	Column 2		
EXPENDITURES				
SERVICES & SUPPLIES				
4650 Other Services and Supplies				
3400 Other Funds Ltd	25,000	<u> </u>	(25,000)	(100,00%)
SERVICES & SUPPLIES			(20,000)	(100.00%)
3400 Other Funds Ltd	25,000	-	(25,000)	(100.00%)
TOTAL SERVICES & SUPPLIES	\$25,000		(\$25,000)	(100.00%)
EXPENDITURES			(+,)	(100.00 %)
3400 Other Funds Ltd	25,000	-	(25,000)	(100.00%)
TOTAL EXPENDITURES	\$25,000		(\$25,000)	(100.00%)
ENDING BALANCE			(+,000)	(100.0076)
3400 Other Funds Ltd	(25,000)	- · · ·	25,000	100.00%
TOTAL ENDING BALANCE	(\$25,000)	<u> </u>	\$25,000	100.00%

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12/30/14 REPORT NO.: PPDPLBUDCL REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF AGENCY:85500 PHARMACY, OREGON BOARD OF SUMMARY XREF:001-00-00 000 Board of Pharmacy

2015-17 PROD FILE PICS SYSTEM: BUDGET PREPARATION

PKG CLASS COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
000 B Y7500 AE BOARD	AND COMMISSION MEMBER		.00	.00	0.00		22,320			22,320
000 MEAHZ7008 HA PRINCI	PAL EXECUTIVE/MANAGER E	1	1.00	24.00	8,619.00		206,856			206,856
000 MMN X0871 AA OPERAT	IONS & POLICY ANALYST 2	1	1.00	24.00	4,979.00		119,496			119,496
000 MMS X0806 AA OFFICE	MANAGER 2	1	1.00	24.00	3,915.00		93,960			93,960
000 MMS X7006 AA PRINCI	PAL EXECUTIVE/MANAGER D	2	2.00	48.00	7,170.50		344,184			344,184
000 OA C0104 AA OFFICE	SPECIALIST 2	4	4.00	96.00	3,014.50		289,392			289,392
000 OA C0107 AA ADMINI	STRATIVE SPECIALIST 1	1	1.00	24.00	3,607.00		86,568			86,568
000 OA CO323 AA PUBLIC	SERVICE REP 3	3	3.00	72.00	3,061.66		220,440			220,440
000 OA C5911 EA HEALTH	I CARE INVESTIGTR/ADVISR	6	6.00	144.00	9,769.83		1,406,856			1,406,856
000		19	19.00	456.00	3,603.84		2,790,072			2,790,072

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12/30/14 REPORT NO.: PPDPLBUDCL REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF AGENCY:85500 PHARMACY, OREGON BOARD OF SUMMARY XREF:001-00-00 100 Board of Pharmacy PAGE 2

2015-17 PROD FILE PICS SYSTEM: BUDGET PREPARATION

PKG CLASS COMP 100 OA C0323 AA PUBLI	DESCRIPTION C SERVICE REP 3	POS CNT	FTE .00	MOS .00	AVERAGE RATE 2,435.00	GF SAL	OF SAL	FF LF SAL SAL	AF SAL
100 OA C0860 AA PROGR	AM ANALYST 1	1	1.00	24.00	3,450.00		82,800		82,800
100		1 20	1.00	24.00 480.00	2,942.50 3,564.94		82,800 2,872,872		82,800
								,	

2,872,872 3,564.94 20 20.00 480.00 2,872,872

AGENCY:85500 PHARMACY	BY PKG BY SUMMARY XREF		DEPT. OF ADMIN. SVCS PPDB PICS SYSTEM					PAG 2015-17 PRO PICS SYSTEM: BUDGET PREPARATION			
PKG CLASS COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL	
		20	20.00	480.00	3,564.94		2,872,872			2,872,872	
								nga la sana sa			

12/30/14 REPORT NO.: PPDPLAGYCL REPORT: SUMMARY LIST BY PKG BY AGENCY

2015-17 PICS SYSTEM: BUDGET PREPARATION

PKG CLASS COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
000 B Y7500 AE BOARD A	ND COMMISSION MEMBER		.00	.00	0.00		22,320			22,320
000 MEAHZ7008 HA PRINCIP.	AL EXECUTIVE/MANAGER E	1	1.00	24.00	8,619.00		206,856			206,856
000 MMN X0871 AA OPERATI	ONS & POLICY ANALYST 2	. 1	1.00	24.00	4,979.00		119,496			119,496
000 MMS X0806 AA OFFICE	MANAGER 2	1	1.00	24.00	3,915.00		93,960			93,960
000 MMS X7006 AA PRINCIP.	AL EXECUTIVE/MANAGER D	2	2.00	48.00	7,170.50		344,184			344,184
000 CA CO104 AA OFFICE	SPECIALIST 2	4	4.00	96.00	3,014.50		289,392			289,392
000 OA CO107 AA ADMINIS	TRATIVE SPECIALIST 1	1	1.00	24.00	3,607.00		86,568			86,568
100 OA CO323 AA PUBLIC	SERVICE REP 3	3	3.00	72.00	2,905.00		220,440			220,440
100 OA C0860 AA PROGRAM	ANALYST 1	1	1.00	24.00	3,450.00		82,800			82,800
000 OA C5911 EA HEALTH	CARE INVESTIGTR/ADVISR	6	6.00	144.00	9,769.83		1,406,856			1,406,856
		20	20.00	480.00	3,564.94		2,872,872			2,872,872

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12/30/14 REPORT NO.: H REPORT: SUMMARY LIST H AGENCY:85500 PHARMACY	BY PKG BY AGENCY		DEPT.	. OF ADMIN.	SVCS PPDB	PICS SYSTEM		PIÇS SYSTEM:	2015-17 BUDGET PRE	PARATION	PAGE PROD F	2 ILE
PKG CLASS COMP	DESCRIPTION	POS CNT 20	FTE 20.00	MOS 480.00	AVERAGE RATE 3,564.94	GF SAL	OF SAL 2,872,872	FF SAL	LF SAL	AF SAL 2,872	,872	

12/30/14 REPORT NO.: PPDPLWSBUD REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY AGENCY: 85500 PHARMACY, OREGON BOARD OF SUMMARY XREF: 001-00-00 100 Board of Pharmacy	DEPT. OF ADMIN. SVC	S PPDB PICS SYSTEM	PAGE 1 2015-17 PROD FILE PICS SYSTEM: BUDGET PREPARATION
POSITION F POS NUMBER AUTH NO ORG STRUC PKG Y TYP CLASS COMP	S T POS RNG P CNT FTE	BUDGET GF RATE MOS SAL	T OF FF LF R SAL SAL K
0000653 001239580 001-01-00-00000 100 0 PF OA C0323 AA EST DATE: 2015/07/01 EXP DATE: 9999/01/01	A 15 02 .0	0 2,435.00 .00	
0000654 001239590 001-01-00-00000 100 0 PF OA C0860 AA EST DATE: 2015/07/01 EXP DATE: 9999/01/01	A 23 02 1 1.0	0 3,450.00 24.00	82,800
100	1 1.0	0 24.00	82,800
	1 1.0	0 24.00	82,800
	1 1.0	0 24.00	82,800

12/30/14 REPORT NO.: PPDPLWSBUD REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY AGENCY: 85500 PHARMACY, OREGON BOARD OF SUMMARY XREF: 001-00-00 100 Board of Pharmacy	DEPT. OF ADMIN. SVCS PPDB PICS SYSTEM	PAGE 2 2015-17 PROD FILE PICS SYSTEM: BUDGET PREPARATION				
POSITION F POS NUMBER AUTH NO ORG STRUC PKG Y TYP CLASS COMP	S T POS BUDGET GF RNG P CNT FTE RATE MOS SAL	T OF FF LF R SAL SAL K				
	1 1.00 24.00	82,800				
	183					

12/30/14 REPORT NO.: PPDPFISCAL REPORT: PACKAGE FISCAL IMPACT REPORT AGENCY:85500 PHARMACY, OREGON BOARD OF SUMMARY XREF:001-00-00 Board of Pharmacy		DEPT. OF ADMIN. SVCS PPDB PICS SYSTEM 2015-17									PAGE PROD FILE
		PACKAGE: 100 - Personnel Management							PICS SYSTEM: BUDGET PREPARATION		
POSITION NUMBER CLASS COMP	CLASS NAME	POS CNT	FTE	MOS	STEP	RATE	GF SAL/OPE	OF SAL/OPE	FF SAL/OPE	LF SAL/OPE	AF SAL/OPE
0000654 OA C0860 AA PROG	RAM ANALYST 1	1	1.00	24.00	02	3,450.00		82,800 50,049			82,800 50,049
	PICS SALARY PICS OPE				•.			82,800 50,049			82,800 50,049
TOTAL PICS PERSO	NAL SERVICES =	1	1.00	24.00				132,849			132,849
				í							
				184							