



STATE OF THE STATES



A pharmacy rule is evoking tensions with healthcare organizations

regarding potential prescription temperature control requirements. The state Board of Pharmacy proposal would set temperature standards for mail-order prescription drugs. Oklahoma regulators set out to implement temperature controls after working with researchers at Southwestern Oklahoma State University's pharmacy school, whose studies showed numerous risks of exposure to extreme temperatures for medications.

A **NBC News spotlight** accompanied by professional research from the **American Society for Health-System Pharmacists** (ASHP) and the **American College of Chest Physicians** (ACCP) confirms that when mail-order prescriptions are exposed to extreme temperatures, they lose effectiveness. ASHP says that most scripts require room temperature settings to maintain efficacy (i.e. 68 to 77 degrees). ACCP findings showed significant physical changes to prescriptions

exposed to 150-degree temperatures for just over 4 hours. As mail-order pharmacies become more popular, temperature controls could pose operational issues. CVS Health and the Pharmaceutical Care Management Association voiced their opposition to the proposal believing it to be "not grounded in science and evidence...based on speculation and an attempt to resolve a perceived issue." Despite being a part of the task force that wrote the rule, Express Scripts asked the board to "be mindful that standards it sets may be subject to legal challenges" and that temperature standards cited in the rule were intended for storage, not shipping.

SB333 filed this week, seeks to cap PTSD benefits for first responders without an accompanying physical injury. Bill language calls for benefits to cease after one year of treatment. A bill provision implements a \$10,000 cap on prescription medicine, stating that "employers shall not be responsible for medical treatment in the form of prescription medicine in excess

of \$10,000." If approved by the legislature, this bill would take effect November 1st.



State leaders proposed legislation to amend the state's prescription drug monitoring program's (PDMP) access protocols this week. **SB 279** would permit law enforcement officers to obtain PDMP information without a warrant. The state Attorney General's (AG) office would also be granted access to the state system. Advisory committee members will be required to work with the state AG's office to develop education procedures concerning the purposes and uses of the PDMP with law enforcement officials. If approved by state lawmakers, the proposal will be in effect once posted to the state's statutes.



After a federal showdown, OSHA **will now withdraw** opposition to the state's correction plan. Federal regulators issued a notice in April of last year proposing to revoke the state's occupational safety and health plan after a "decade-long pattern of failures to adopt adequate maximum penalty levels, workplace safety, and health standards." Specifically, OSHA officials were concerned with the state's lagging compliance with covid-19 Healthcare Emergency Temporary Standards. Following a public comment period Arizona's corrective actions include a.) formally adopting outstanding federal standards and directives b.) enacting state laws to ensure penalty levels are in line with the federal government's c.) authorize adoption of emergency standards when either OSHA or the ICA determine that grave danger criteria are met. Although the federal government may be backing off for now, OSHA remains concerned with declining workplace inspections in the state.



HB557, if passed, would revise the state's prescription authority standards concerning schedule II substances. The bill would permit Advanced Practice Registered Nurses and Physician Assistants (PAs) to prescribe schedule II drugs during emergencies. Advanced Practice Registered Nurses and PAs would be limited to prescribing a maximum five-day supply and must have at least one year of post-licensure clinical experience. The bill is currently awaiting committee assignment.



Legislators are considering a measure that would allow injured workers to choose their physician for treatment. **HB719** would prohibit insurers, managed care organizations, and health care provider organizations from requiring injured workers to utilize physicians within their networks. Bill language also ensures that injured workers do not face retaliation for selecting their physician of choice. The bill is currently assigned to the House Human Services Committee.

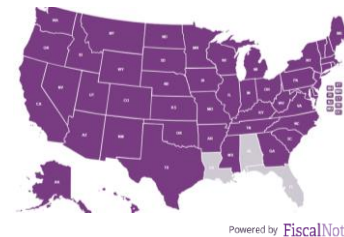
Where in the U.S.A. are Jayne and Ian?

Jayne & Ian in Home Office This week.



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Questions, Concerns, Suggestions? Let Us Know.

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