

RURAL PHARMACY CHANGES

2001 GENERAL SESSION

STATE OF UTAH

Sponsor: Loraine T. Pace

This act modifies the Occupational and Professional Licensing Code by amending provisions related to supervision of a pharmacy located in remote rural hospitals or clinics. The act uses defined terms to describe required supervision. The act appropriates \$100,000 for fiscal year 2001-02, from the General Fund to the Department of Health Bureau of Primary Care, Rural and Ethnic Health, to establish and oversee a rural telepharmacy system.

This act affects sections of Utah Code Annotated 1953 as follows:

AMENDS:

58-17a-611, as enacted by Chapter 247, Laws of Utah 1996

This act enacts uncodified material.

Be it enacted by the Legislature of the state of Utah:

Section 1. Section **58-17a-611** is amended to read:

58-17a-611. Supervision -- Pharmacist-in-charge.

(1) (a) A drug outlet, except a wholesaler, distributor, or out-of-state mail service pharmacy, shall be under the general supervision of [~~not less than~~] at least one pharmacist licensed to practice in Utah. One pharmacist licensed in Utah shall be designated as the pharmacist-in-charge.

(b) Notwithstanding the provisions of Subsection 58-17a-102(17), a supervising pharmacist does not have to be in the pharmacy or facility in which the drug outlet is located but shall be available via a telepharmacy system for immediate contact with the supervised pharmacy technician or pharmacy intern if:

(i) the drug outlet is located in:

(A) a remote rural hospital as defined in Section 26-21-13.6; or

(B) a clinic located in a remote rural county with less than 20 people per square mile; and

(ii) the supervising pharmacist described in Subsection (1)(a), is not available; and

(iii) the telepharmacy system maintains records and files quarterly reports as required by

division rule adopted in consultation with the Pharmacy Board to assure that patient safety is not compromised.

(2) Each out-of-state mail service pharmacy shall designate and identify to the board a pharmacist holding a current license issued by the state in which the pharmacy is located, who serves as the pharmacist-in-charge for all purposes under this chapter.

Section 2. Intent.

The Legislature finds that:

- (1) rural citizens of the state need access to hospitals and pharmacy services;
- (2) hospitals and clinics in remote rural areas of the state have limited resources to provide 24-hour, on-site supervision of a hospital or clinic pharmacy by a licensed pharmacist; and
- (3) a telepharmacy system in which a consulting pharmacist can oversee the delivery of pharmacy services by a supervised pharmacy technician or pharmacy intern when the remote rural hospital or clinic pharmacist is not available is essential to the viability of rural access to pharmacy services.

Section 3. Appropriation.

(1) There is appropriated from the General Fund for fiscal year 2001-02 only, \$100,000 to the Department of Health Bureau of Primary Care, Rural and Ethnic Health.

(2) It is the intent of the Legislature that the Department of Health Bureau of Primary Care, Rural and Ethnic Health, use the University of Utah Telemedicine Outreach Program to establish and give oversight to a hospital and clinic telepharmacy system by using \$45,000 for one pharmacy dispensing unit located in a general hospital or clinic in San Juan County, and by using \$15,000 to assist with the cost of providing on-line telepharmacy services to San Juan County, and \$40,000 to assist with staff support and oversight of the telepharmacy system.