## ADOPTED REGULATION OF THE

## STATE BOARD OF PHARMACY

## **LCB File No. R212-09**

Effective August 13, 2010

EXPLANATION - Matter in *italics* is new; matter in brackets [omitted material] is material to be omitted.

AUTHORITY: §1, NRS 639.070; §2, NRS 639.070 and 639.210.

A REGULATION relating to pharmacy; revising provisions governing the dispensing of certain drugs and controlled substances; revising provisions relating to certain acts or practices declared to be unprofessional conduct; and providing other matters properly relating thereto.

**Section 1.** NAC 639.752 is hereby amended to read as follows:

- 639.752 1. Except as otherwise provided in this section and NRS 639.235, a pharmacist shall not fill a prescription for, or dispense, a dangerous drug or a controlled substance if the prescription is:
- (a) Written by a practitioner who is not licensed to practice in this State, but is authorized by the laws of another state to prescribe;
- (b) For a patient who resides in a state other than the state in which the prescribing practitioner's practice is located;
- (c) Requested to be furnished in a manner other than by dispensing directly to the patient, or an agent of the patient, in person; and
- (d) To be paid for in full, in cash or cash equivalent, at the time the prescription is dispensed,
   → unless the pharmacist first verifies the prescription as set forth in subsection 2.
  - 2. A pharmacist who verifies a prescription pursuant to this section must:

- (a) Speak with the patient or the prescribing practitioner;
- (b) Establish that:
  - (1) The prescription is authentic; and
- (2) A bona fide relationship between the patient and the prescribing practitioner did exist when the prescription was written; and
  - (c) Record on the prescription or in the prescription record in the pharmacy's computer:
    - (1) The name of the person with whom he spoke concerning the prescription;
    - (2) The date and time of the conversation; and
- (3) The date and time the patient was **[physically]** examined by the prescribing practitioner.
- 3. Subsection 1 does not apply to a pharmacist who refills a prescription he has previously filled if he verified the prescription before filling it the first time.
- 4. For the purposes of this section, a bona fide relationship between the patient and the prescribing practitioner shall be deemed to exist [if the patient was]:
- (a) If the patient was physically examined by the practitioner within the 6 months immediately preceding the date the prescription was issued [.]; or
- (b) If the patient is incarcerated in a local correctional institution or a facility or institution operated by the Department of Corrections and was examined through the use of a telephone or a videoconferencing system by a practitioner who is a physician licensed pursuant to chapter 630 or 633 of NRS and:
  - (1) The medical history of the patient is available to the physician;
- (2) A nurse or an advanced practitioner of nursing licensed pursuant to chapter 632 of NRS or a physician assistant licensed pursuant to chapter 630 or 633 of NRS is physically

present with the patient when the physician examines the patient and that nurse, advanced practitioner of nursing or physician assistant is trained in the use of the telephone or videoconferencing system; and

- (3) The physician enters the results of the examination into the medical chart of the patient that is maintained by the local correctional institution or the facility or institution operated by the Department of Corrections.
  - 5. As used in this section [, "cash]:
  - (a) "Cash equivalent" includes, without limitation:
  - [(a)] (1) A check;
  - (b) (2) A credit card;
  - [(c)] (3) A draft;
  - [(d)] (4) An electronic funds transfer; and
- [(e)] (5) A prescription drug discount card or other device obtained pursuant to the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, Public Law 108-173, or any regulations adopted pursuant thereto.
  - (b) "Local correctional institution" has the meaning ascribed to it in NAC 211.070.
  - **Sec. 2.** NAC 639.945 is hereby amended to read as follows:
- 639.945 1. The following acts or practices by a holder of any license, certificate or registration issued by the Board or any employee of any business holding any such license, certificate or registration are declared to be, specifically but not by way of limitation, unprofessional conduct and conduct contrary to the public interest:
- (a) Manufacturing, compounding, selling, dispensing or permitting to be manufactured, compounded, sold or dispensed substandard drugs or preparations.

- (b) Except as otherwise provided in NRS 639.2583 to 639. [2807,] 639.2808, inclusive, for substitutions of generic drugs, dispensing or causing to be dispensed a different drug or brand of drug in place of the drug or brand of drug ordered or prescribed, unless the express permission of the orderer or prescriber is obtained and, in the case of a written prescription, unless the following information is recorded on the prescription by the person obtaining permission:
  - (1) The date on which the permission was granted;
  - (2) The name of the practitioner granting the permission;
  - (3) The name of the person obtaining the permission;
  - (4) The name of the drug dispensed; and
  - (5) The name of the manufacturer or distributor of the drug.
  - (c) Using secret formulas.
- (d) Failing strictly to follow the instructions of the person writing, making or ordering a prescription or chart order as to its filling or refilling, the content of the label of the prescription or giving a copy of the prescription or chart order to any person except as permitted by law.
- (e) Failing to confer with the person writing, making or ordering a prescription or chart order if there is an error or omission in it which should be questioned.
- (f) Operating a pharmacy at a location other than the location at which the pharmacy is licensed to operate.
- (g) Supplying or diverting drugs, biologicals, medicines, substances or devices which are legally sold in pharmacies or by wholesalers, so that unqualified persons can circumvent any law pertaining to the legal sale of such articles.
- (h) Performing or in any way being a party to any fraudulent or deceitful practice or transaction.

- (i) Performing any of his duties as the holder of a license, certificate or registration issued by the Board, or as the owner of a business or an entity licensed by the Board, in an incompetent, unskillful or negligent manner.
  - (j) Aiding or abetting a person not licensed to practice pharmacy in the State of Nevada.
- (k) Performing any act, task or operation for which licensure, certification or registration is required without the required license, certificate or registration.
- (l) Violating any term or condition of a subpoena or order issued by the Board or the staff of the Board.
- (m) Failing to provide any document, data or information that is required to be made and maintained pursuant to chapters 453, 454, 585 and 639 of NRS and chapters 453, 454, 585 and 639 of NAC to a member of the Board or a member of the staff of the Board upon his request.
- (n) Dispensing a drug as a dispensing practitioner to a patient with whom the dispensing practitioner does not have a bona fide therapeutic relationship.
- (o) Prescribing a drug as a prescribing practitioner to a patient with whom the prescribing practitioner does not have a bona fide therapeutic relationship.
- 2. The owner of any business or facility licensed, certified or registered by the Board is responsible for the acts of all personnel in his employ.
- 3. [As used in] For the purposes of this section, ["bona] a bona fide therapeutic relationship ["means a relationship in which a practitioner has:] between the patient and practitioner shall be deemed to exist:
  - (a) [Physically] If the patient was physically examined [a patient; and

- (b) As] by the practitioner within the 6 months immediately preceding the date the practitioner dispenses or prescribes a drug to the patient and, as a result of the examination, the practitioner diagnosed a condition for which a given drug therapy is prescribed [...]. 

  → within the 6 months immediately preceding the date the practitioner dispenses or prescribes a drug to the patient.]; or
- (b) If the patient is incarcerated in a local correctional institution or a facility or institution operated by the Department of Corrections and was examined through the use of a telephone or videoconferencing system by a practitioner who is a physician licensed pursuant to chapter 630 or 633 of NRS and:
  - (1) The medical history of the patient is available to the physician;
- (2) A nurse or an advanced practitioner of nursing licensed pursuant to chapter 632 of NRS or a physician assistant licensed pursuant to chapter 630 or 633 of NRS is physically present with the patient when the physician examines the patient and that nurse, advanced practitioner of nursing or physician assistant is trained in the use of the telephone or videoconferencing system; and
- (3) The physician enters the results of the examination into the medical chart of the patient that is maintained by the local correctional institution or the facility or institution operated by the Department of Corrections.
- 4. As used in this section, "local correctional institution" has the meaning ascribed to it in NAC 211.070.

LCB File No. R212-09 NAC 639.752 and 639.945 Bona Fide Therapeutic Relationship (Correctional Facilities)

July 29, 2010

## INFORMATIONAL STATEMENT

The informational statement required by NRS 233B.066 numerically conforms to the subsections of the statute as follows:

1. A DESCRIPTION OF HOW PUBLIC COMMENT WAS SOLICITED, A SUMMARY OF PUBLIC RESPONSE, AND AN EXPLANATION HOW OTHER INTERESTED PERSONS MAY OBTAIN A COPY OF THE SUMMARY.

Public comment was solicited through public notices posted in county courthouses and through mailings to interested parties.

2. THE NUMBER OF PERSONS WHO: (A) ATTENDED EACH HEARING; (B) TESTIFIED AT EACH HEARING; AND (C) SUBMITTED TO THE AGENCY WRITTEN STATEMENTS.

The	number	of persons	who	attended	the hear	ring wa	s <u>:</u>	<u> 30</u>	_•
The	number	of persons	who	testified	at the he	earing v	vas _	<u>1</u>	
The	number	of agency	subm	itted stat	ements v	was <u>1</u>	<u></u>		

3. A DESCRIPTION OF HOW COMMENT WAS SOLICITED FROM AFFECTED BUSINESSES, A SUMMARY OF THEIR RESPONSE, AND AN EXPLANATION HOW OTHER INTERESTED PERSONS MAY OBTAIN A COPY OF THE SUMMARY.

Comments were solicited from affected businesses through posting of public notices in the county courthouses, by direct mailings to all interested persons who have requested notices of board of pharmacy meeting agendas and by direct mailings to professional and trade associations.

All response from affected businesses relative to this proposed regulation expressed support for the amendment.

All interested parties may obtain a summary of public response by written or verbal request to: Nevada State Board of Pharmacy, 431 West Plumb Lane, Reno, Nevada, 89509.

4. IF THE REGULATION WAS ADOPTED WITHOUT CHANGING ANY PART OF THE PROPOSED REGULATION, A SUMMARY OF THE REASONS FOR ADOPTING THE REGULATION WITHOUT CHANGE.

The proposed regulation was amended slightly as a result of testimony offered at the hearing.

- 5. THE ESTIMATED ECONOMIC EFFECT OF THE REGULATION ON THE BUSINESS WHICH IT IS TO REGULATE AND ON THE PUBLIC. THESE MUST BE STATED SEPARATELY, AND IN EACH CASE MUST INCLUDE:
  - A) BOTH ADVERSE AND BENEFICIAL EFFECTS.

This regulation should have no economic impact on affected businesses or on the public.

B) BOTH IMMEDIATE AND LONG-TERM EFFECTS.

This regulation will have no immediate or long-term economic effects on business or the public.

6. THE ESTIMATED COST TO THE AGENCY FOR ENFORCEMENT OF THE PROPOSED REGULATION.

There will be no additional or special costs incurred by the board for enforcement of this regulation.

7. A DESCRIPTION OF ANY REGULATIONS OF OTHER STATE OR GOVERNMENT AGENCIES WHICH THE PROPOSED REGULATION OVERLAPS OR DUPLICATES AND A STATEMENT EXPLAINING WHY THE DUPLICATION OR OVERLAPPING IS NECESSARY. IF THE REGULATION OVERLAPS OR DUPLICATES A FEDERAL REGULATION, THE NAME OF THE REGULATING FEDERAL AGENCY.

The Board of Pharmacy is not aware of any similar regulations of other state or government agencies that the proposed regulation overlaps or duplicates.

8. IF THE REGULATION INCLUDES PROVISIONS WHICH ARE MORE STRINGENT THAN A FEDERAL REGULATION WHICH REGULATES THE SAME ACTIVITY, A SUMMARY OF SUCH PROVISIONS.

The Board of Pharmacy is not aware of any similar regulations of the same activity in which the federal regulation is more stringent.

9. IF THE REGULATION PROVIDES A NEW FEE OR INCREASES AN EXISTING FEE, THE TOTAL ANNUAL AMOUNT THE AGENCY EXPECTS TO COLLECT AND THE MANNER IN WHICH THE MONEY WILL BE USED.

This regulation does not provide a new or increase of fees.