



# TEXAS PHARMACY ASSOCIATION

## ~ 2016-2017 STATE PUBLIC POLICY PRIORITIES ~

The 2016-2017 TPA Public Policy Priorities identifies legislative and/or regulatory issues that are priorities for Texas pharmacists, pharmacy technicians, student pharmacists and pharmacies. This membership document does not include all policy issues that the Association will address or all policy issues that will or could affect the pharmacy profession during 2016-2017.

**TPA Mission:** *Advancing the Practice of Pharmacy to Enhance the Delivery of Quality Health Care to All Texans.*

**TPA Goals:** *Enhance the Environment for Pharmacy Professionals to Deliver Patient Care  
Expand Collaborative Efforts to Address Pharmacy and Patient Care Issues  
Maintain an Effective and Viable Association*

**Adopted by the TPA Board of Directors, June, 22 2016  
Modified by the TPA Board of Directors, July 20, 2016**

### GENERAL

Pursue key public policy issues impacting **pharmacists, pharmacy technicians, pharmacy students and pharmacies** for consideration by state agencies and the 85<sup>th</sup> Session of the Texas Legislature including:

- Efforts that expand patient access to care through pharmacists to include payment for such services;
- Issues relating to the business of pharmacy and work place issues; and
- The sunset review of the Texas State Board of Pharmacy.

### I. PHARMACY PRACTICE

#### A. Expanding Access to Patient Care

As the highest Association advocacy priority for the 2017 Texas Legislative session, develop and pursue a legislative and regulatory plan of action to expand access to patient care.

1. Improve patient access and outcomes through drug therapy management services by utilizing the breadth of training, knowledge and expertise of pharmacists through collaborative practice and appropriate patient safeguards.
2. Maximize the role of pharmacists as a member of the health care team.
  - a. Advance the statutory ability of pharmacists to practice “at the top of their license” as permitted by the Texas Pharmacy Practice Act as well as within parameters and guidelines jointly developed with the Texas Medical Association (TMA) and the Texas Board of Medical Examiners (TBME) regarding CLIA-waved tests and other services within a pharmacist’s skills and training.
  - b. Promote the delivery of health care by utilizing their training and knowledge through statewide protocols.
3. Maximize the role of pharmacy technicians to support pharmacists through measures such as tech-check-tech, increased ratios of technicians to pharmacists, creation of advance technicians, educational requirements, etc., and to increase technician satisfaction in the workplace and provide growth opportunities to attract quality technicians.
4. Establish mechanisms to compensate pharmacists for their professional services and broaden payment mechanisms for assessing and recommending drug therapies and providing optimal therapeutic outcomes.
5. Require health insurance carriers to include pharmacists as providers in their provider networks and to reimburse for those covered services provided within the pharmacist’s scope of practice.

#### B. Other Practice Area Issues

1. Oppose efforts to authorize non-pharmacist health care practitioners to dispense pharmaceuticals unless they meet all Texas State Board of Pharmacy storage and informational requirements which a pharmacist and/or pharmacy must meet to protect the health and safety of the public.
2. Support an effective dispensing and payment system for synchronization of prescription medicine.
3. Seek increased access to Naloxone through the utilization of pharmacies and pharmacists through a statewide standing order concept. COMPLETED
4. Support efforts to expand access to immunization services by pharmacists.
5. Support efforts to enhance safety in the preparation and dispensing of sterile compounding medicines.
6. Monitor E-Prescribing activities and support efforts to develop pharmacy-based guidelines. Monitor Electronic Medical Records (EMR) / Electronic Health Records (EHR) activities and support efforts to develop pharmacy-based guidelines.
7. Consider regulatory and/or legislative initiatives to improve existing workplace concerns within the practice of pharmacy to include such issues as maximum/regular 12-hour working shifts, routine breaks and other shift/working issues.

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## STATE PUBLIC POLICY PRIORITIES *(continued)*

### II. STATE FUNDING

#### A. Funding

Assure the adequacy of state funds for health care programs and agencies that impact pharmacies.

1. Oppose efforts to address funding shortfalls in state programs by implementing concepts that have detrimental financial consequences on pharmacists and pharmacies.
2. Oppose redistribution of the existing pool of funds supporting current pharmacy fees and other reimbursements in an effort to address inadequacy of pharmacy reimbursement in selected regions or meeting certain special criteria.
3. Oppose changes to the state's tax structure that would increase tax liabilities for pharmacists, pharmacy technicians and pharmacies.

#### B. Medicaid Fees

Improve the fee structure and reimbursement for pharmacy services in the Medicaid Program.

1. Assure adequate fees for providing immunizations and vaccines to Medicaid patients. Support moving immunizations to the Vendor Drug Program for increased access to care.
2. Support expansion of eligibility in the Medicaid program and the Children's Health Insurance Program to the maximum levels allowed by federal law along with adequate state and local government funding for both programs as well as other indigent health care programs.
3. Support expansion of enhanced, fee-based Medicaid Medication Therapy Management and Drug Therapy Management for improved patient care and cost savings.

#### C. Pharmacy Education

1. Protect state funding for the seven Texas colleges of pharmacy. Monitor the use of state funds directed to the education of pharmacists and pharmacy technicians.
2. Oppose efforts to establish new public or private colleges of pharmacy in Texas because of limited availability of preceptors and training sites as well as limited additional state funding for existing public colleges of pharmacy.

### III. INSURANCE

#### A. Pharmacy Benefits Managers

1. Establish additional safeguards to monitor and regulate pharmacy benefits managers (PBMs) regarding prompt payment, transparency, fair audit processes and other safeguards.
2. Support additional legislative mandates, as needed, to address concerns with formularies or preferred drug lists, confidentiality issues, rebate policies, standardized forms and requirements for prior-authorizations.

#### B. Uninsured and Underinsured

Address the uninsured and underinsured challenge in Texas by:

1. Collaborating with government, business and other health care providers in the development and implementation of a future health care system that expands access to affordable and high-quality health care services to all Texans.
2. Supporting public policies that reduce the number of uninsured and underinsured in Texas and enhance the ability of these individuals to obtain basic and affordable quality health care coverage.

### IV. TEXAS STATE BOARD OF PHARMACY

#### A. Sunset Review

Monitor and provide input regarding the results, impact and related actions regarding the sunset review of the Texas State Board of Pharmacy.

#### B. Prescription Monitoring Program

Oppose any mandatory requirement for pharmacists to query the Texas Prescription Monitoring Program prior to dispensing controlled substances unless it is following an initial two-year period of PMP operation and only if an equal and shared requirement is placed on prescribers prior to writing a prescription.

#### C. Technician Certification

Monitor and influence the 2020 national initiative to address new training and testing requirements for pharmacy technicians that do not reduce the availability of technicians due to onerous and expensive standards.

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## STATE PUBLIC POLICY PRIORITIES *(continued)*

### D. Education Requirements

Influence discussions or subsequent plans of the Texas State Board of Pharmacy to expand and/or specify continuing education requirements for pharmacists and pharmacy technicians with appropriate balance of needs versus costs.

### E. Tech-Check-Tech

Support the efforts to allow tech-check-tech programs in Class A Texas pharmacies.

### F. Pharmacy Automation Systems

1. Oppose implementation of automatic “dispensing” systems located outside of a licensed pharmacy.
2. Support the implementation of a pilot for automated pharmaceutical Dispensing Systems if:
  - The automated system is utilized only for the “pickup” of prescriptions that have already had followed the routine process for handling prescriptions under a pharmacist’s control and not for the “dispensing” of pharmaceuticals;
  - The system allows for proper counseling of patients under the control of a pharmacist; and
  - At the conclusion of the pilot time period, results of its effectiveness, safeguards, impact on quality pharmacy care and benefits to the patient as well as any adverse consequences with the “pick up”- only aspects of the system is documented and made public.

## V. CONSUMER AND PATIENT ISSUES

### A. Patient Rights

Broaden the application of the Association’s pharmacy patient bill of rights.

### B. Disposal of Pharmaceuticals

Support increased efforts to reduce pharmaceuticals in the environment and to facilitate unused drug disposal programs that support increased adherence, enhanced safety and minimize the likelihood of diversion. Assure that legislative or regulatory activities, if any, do not negatively impact the effectiveness of private, voluntary drug collection programs.

### C. Disaster Readiness

Support efforts to enhance collaboration between state agencies and pharmacists and pharmacies regarding disaster readiness and public health support.