

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.

Board of Pharmacy

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

AGENCY NAME

AGENCY ADDRESS



Board President

SIGNATURE

TITLE

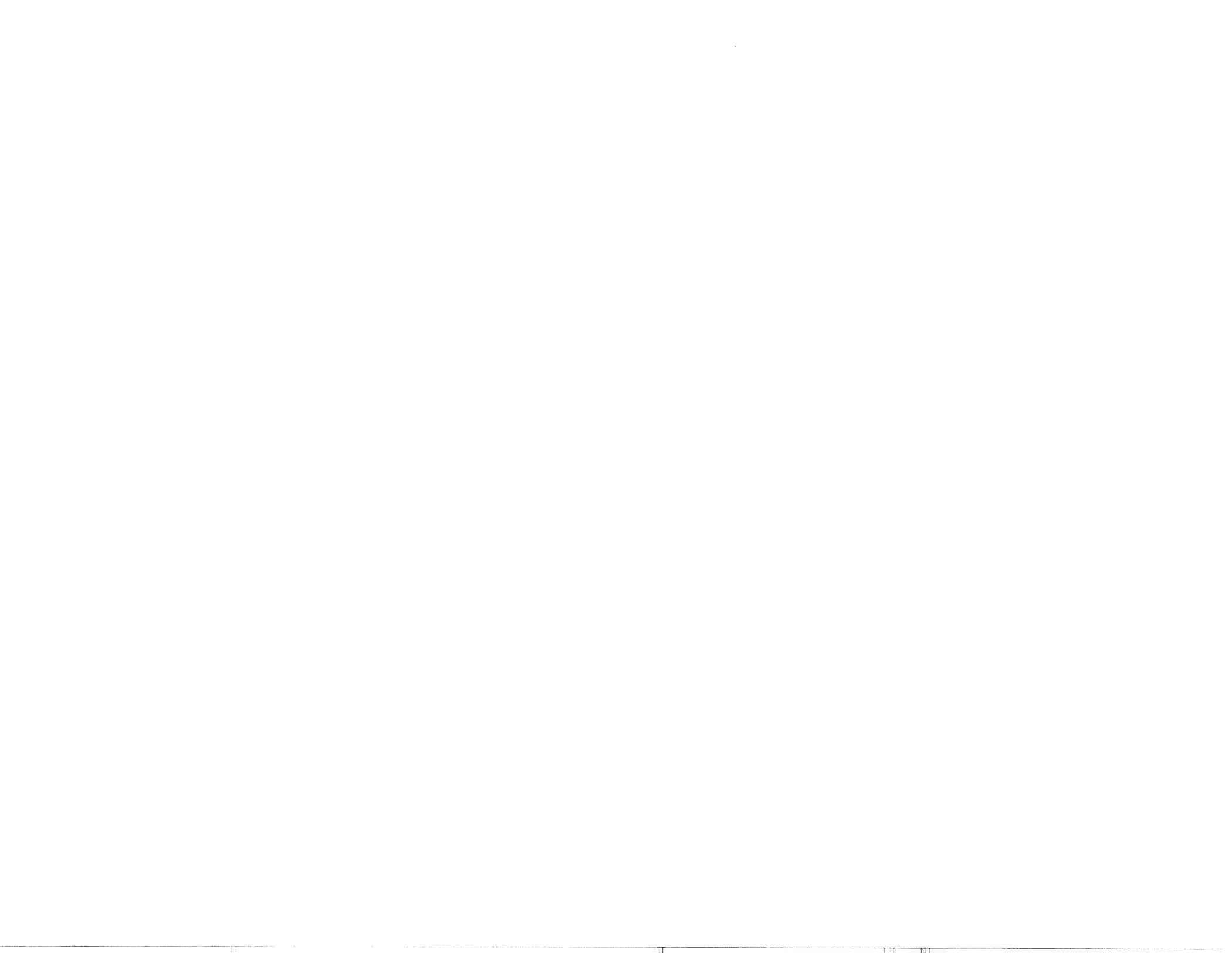
Notice: Requests of those agencies headed by a board or commission must be approved by those bodies of official action and signed by the board or commission chairperson.

The requests of other agencies must be approved and signed by the agency director or administrator. _____ Agency Request

Governor's Recommended

_____ Legislatively Adopted

Budget Page _____



**OREGON BOARD OF PHARMACY 13-15
GOVERNOR’S BALANCED BUDGET**

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76th OREGON LEGISLATIVE ASSEMBLY – 2011 Regular Session
BUDGET REPORT AND MEASURE SUMMARY

MEASURE: SB 5536

JOINT COMMITTEE ON WAYS AND MEANS

Carrier – House: Rep. Sprenger
Carrier – Senate: Sen. Monroe

Action: Do Pass

Vote: 18 – 5 – 2

House – Yeas: Beyer, Buckley, Cowan, Garrard, Komp, Kotek, McLane, Nathanson, Nolan, Richardson, G. Smith
– Nays: Thatcher, Whisnant
– Exc: Freeman

Senate – Yeas: Devlin, Edwards, Girod, Johnson, Monroe, Nelson, Verger
– Nays: Thomsen, Whitsett, Winters
– Exc: Bates

Prepared By: D.J. Vogt, Department of Administrative Services

Reviewed By: Matt Stayner, Legislative Fiscal Office

Meeting Date: May 6, 2011

Agency
Board of Pharmacy

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H-27

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Biennium
2011-13

Budget Summary*

	2009-11 Legislatively Approved Budget (1)	2011-13 Current Service Level	2011-13 Governor's Budget	2011-13 Committee Recommendation	Committee Change from 2009-11 Leg Approved	
					\$ change	% change
Other Funds	\$ 5,105,407	\$ 5,757,095	\$ 5,109,140	\$ 5,109,140	\$ 3,733	0.1%

Position Summary

Authorized positions	20	20	18	18	(2)
Full-time equivalent positions (FTE)	19.00	19.00	17.75	17.75	(1.25)

(1) Includes adjustments through March 2011
 * Excludes Capital Construction expenditures

Summary of Revenue Changes

The Oregon Board of Pharmacy is funded by revenue generated from license, registration and examination fees. The Subcommittee approved increases in various license and registration fees to ensure adequate revenues to meet operational requirements for 2011-13. The Board last increased fees in 2001. This budget will leave a projected ending cash balance of \$924,331, or four months of operating expenses.

Summary of Education Subcommittee Action

The Subcommittee approved a budget for the Board of Pharmacy of \$5,109,140 Other Funds and 17.75 full-time equivalents. This is a 0.1 percent increase from the 2009-11 Legislatively Approved Budget.

The Subcommittee approved package 070, Revenue Shortfall. The package eliminates six positions to adjust expenditures to available revenues.

The Subcommittee approved package 086 and package 087, which eliminate inflation and decrease projected personal services costs by 5.5 percent.

DEAIL OF JOINT COMMITTEE ON WAYS AND MEANS ACTION

SB 5536

Board of Pharmacy
D.J. Vogt -- (503) 378-3117

DESCRIPTION	GENERAL FUND	LOTTERY FUNDS	OTHER FUNDS		FEDERAL FUNDS		TOTAL ALL FUNDS	POS	FTE
			LIMITED	NONLIMITED	LIMITED	NONLIMITED			
2009-11 Legislatively Approved Budget at March 2011 *	\$0	\$0	\$5,105,407	\$0	\$0	\$0	\$5,105,407	20	19.00
2011-13 ORBITS printed Current Service Level (CSL)*	\$0	\$0	\$5,757,096	\$0	\$0	\$0	\$5,757,096	20	19.00
2011-13 Governor's Recommended Budget *	\$0	\$0	\$5,109,140	\$0	\$0	\$0	\$5,109,140	18	17.75
<u>SUBCOMMITTEE ADJUSTMENTS (from GRB)</u>									
No changes									
SUBCOMMITTEE RECOMMENDATION *	<u>\$0</u>	<u>\$0</u>	<u>\$5,109,140</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$5,109,140</u>	<u>18</u>	<u>17.75</u>
% Change from 2009-11 Leg Approved Budget	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	-10.0%	-6.6%
% Change from 2011-13 Current Service Level	0.0%	0.0%	-11.3%	0.0%	0.0%	0.0%	-11.3%	-10.0%	-6.6%
% Change from 2011-13 Governor's Recommended Budget	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

* Excludes Capital Construction Expenditures

The Subcommittee approved package 101, Position Restoration/Fee Increases/Reductions, at a cost of \$585,281 Other Funds. The package restores four positions that were eliminated in package 070 and increases license and registration fees to meet anticipated operational requirements for 2011-13.

The Subcommittee approved package 102, Contested Case Hearings Costs, at a cost of \$100,470 Other Funds. The package funds the increased costs of contested case hearings.

The Subcommittee approved package 103, Banking Fees for E-government, at a cost of \$31,349 Other Funds. The package funds the cost of banking fees associated with the Board's new online license renewal process.

The Subcommittee discussed the operational management of the Board and approved the following budget note:

Budget Note:

The Subcommittee expressed concern about the overall operational management of the Board of Pharmacy. The Board was directed to work with the Department of Administrative Services to contract for a review of its operations including, but not limited to, the delegation of duties by position, the processes by which the Board conducts its administrative functions, how the revenues derived relate to the costs of doing business, management principles and policies, and efficient use of resources. The review should include specific findings on the gaps in operational policies, procedures and directives, allocation of resources, and cost allocation by license type and recommendations on how to address these gaps. The Board is directed to report on the operational review to the Joint Ways and Means during the February 2012 Legislative Session on the findings and the Board's plans on implementing the specific recommendations.

Summary of Performance Measure Action

See attached Legislatively Adopted 2011-13 Key Performance Measures form. The Subcommittee approved the existing KPMS and rejected a replacement KPM proposed by the Board of Pharmacy. The proposed KPM follows:

“Percent of investigations of complaints reported to Board within 120 days.”

The Subcommittee approved keeping the following KPM, which the Board proposed eliminating.

4 - “Average number of days to complete an investigation from complaint to board presentation.”

Legislatively Adopted 2011-2013 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 Adopted KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2012	Target 2013
1 - Percent of inspected pharmacies that are in compliance annually.		Approved KPM	71.00	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	98.00	95.00	95.00
4 - Average number of days to complete an investigation from complaint to board presentation.		Approved KPM	100.00	75.00	75.00
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.	Overall	Approved KPM	95.00	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.	Accuracy	Approved KPM	96.00	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	92.00	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	95.00	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	94.00	85.00	85.00

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 Adopted KPMs	Customer Service Category	Agency Request	Most Current Result	Target 2012	Target 2013
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	94.00	85.00	85.00
6 - Board Best Practices - Percent of total best practices met by the Board.		Approved KPM	100.00	100.00	100.00

LFO Recommendation:

The LFO recommends the adoption of all of the current key performance measures and the rejection of the proposed new measure.

Sub-Committee Action:

The Subcommittee on Education approved the key performance measures as recommended by the LFO

JOINT COMMITTEE ON WAYS AND MEANS – 2012 SESSION

Recording Log

Hearing Room F

2/17/2012
8:30 a.m.

Members Present:

Sen. Devlin, Co-Chair	Rep. Buckley, Co-Chair
Sen. Johnson, Vice-Chair	Rep. Richardson, Co-Chair
Sen. Bates	Rep. Garrard, Co-Vice Chair
Sen. Edwards	Rep. Nathanson, Co-Vice Chair
Sen. Girod	Rep. Beyer
Sen. Monroe	Rep. Freeman
Sen. Nelson	Rep. Komp
Sen. Thomsen	Rep. McLane
Sen. Verger	Rep. Nolan
Sen. Whitsett	Rep. Read
Sen. Winters	Rep. G. Smith
	Rep. Thatcher
	Rep. Whisnant

Members Excused: Rep. Cowan

Staff Present:

- Ken Rocco, Legislative Fiscal Officer
- John Borden, Legislative Fiscal Office
- Monica Brown, Legislative Fiscal Office
- Eric Sorenson, Committee Assistant

Measures or Issues Heard:

- HB 4167, Modifies laws relating to fines
- HB 4168, Revises laws relating to fees in state courts
- HB 4169, Establishes fees for diversions and court programs related to alcohol evaluation and treatment
- FEDERAL GRANT APPLICATION REQUESTS
- Oregon Health Authority – Comprehensive Primary Care Initiative
- Department of Human Services – Employment First
- Parks and Recreation Department – Native American Graves Protection and Repatriation
- AGENCY REPORTS
- Department of Consumer and Business Services – Worker’s Compensation Premium Assessment Rates
- Department of Education – Internal Audit

Page 1

This meeting index is in compliance with Senate and House Rules. For complete content, please refer to the audio.

Department of Education – Long-term Care and Treatment
Department of Education – Budget Plan
Oregon Health Authority – Dental Reductions
Oregon Health Authority – Health Insurance Exchange IT Project
Oregon Health Authority – Community Placement Facilities
Department of Human Services – Alternatives to Employment
Services
Judicial Department – Oregon eCourt General Fund expenditures
Oregon Liquor Control Commission – 2nd Quarterly Report
Military Department – Christmas Valley
Military Department – Comprehensive Strategic Plan
Military Department – Comprehensive Budget
Board of Pharmacy – Operational Review
Public Employees Retirement System – Preliminary Earnings
Crediting
Department of Revenue – Agency Effectiveness
Department of Revenue – Elderly Rental Assistance and Nonprofit
Housing Programs
Department of Revenue – Enforcement Revenue

JWM

2/17/2012 8:35:55 AM

8:36:05 AM Co-Chair Devlin calls meeting to order

8:37:13 AM Co-Chair Devlin OPENS WORK SESSION

9:28:41 AM Report Receipt: Board of Pharmacy - Operational Review

9:28:42 AM Rep. Garrard MOVES subcommittee recommendation, reads pony

9:28:49 AM {Exhibit} #20: Board of Pharmacy, Legislative Fiscal Office analysis packet

9:29:40 AM Co-Chair Devlin

9:29:42 AM VOTE: 24 - 0- 1

9:29:43 AM AYES: Sens. Bates, Devlin, Edwards, Girod, Johnson, Monroe, Nelson, Thomsen, Verger, Whitsett, Winters; Reps. Beyer, Buckley, Freeman, Garrard, Komp, McLane, Nathanson, Nolan, Read, Richardson, G Smith, Thatcher and Whisnant

9:29:45 AM EXC: Rep. Cowan

9:29:46 AM Co-Chair Devlin, hearing no objection, declares motion CARRIED

9:49:12 AM Co-Chair Devlin adjourns meeting

**Board of Pharmacy
Operational Review Report**

The Subcommittee on Education recommends that the Joint Committee on Ways and Means acknowledge receipt of a report on operational management of the Board of Pharmacy.

The Board of Pharmacy was instructed in a budget note to contract for a review of its operations including, but not limited to, the delegation of duties by position, the processes by which the Board conducts its administrative functions, how revenues relate to the costs of doing business, management principles and policies, and efficient use of resources.

The report discusses a number of key issues regarding the operational management of the Board and makes ten specific recommendations to the Board regarding those issues. Along with the contractors report, the Board has included their written responses to the issues discussed and the recommendations provided.

The Subcommittee on Education recommends acknowledgement of the report.

Oregon Board of Pharmacy – Operational Review Report

Request: Acknowledge receipt of a report on the independent operational review of the Oregon Board of Pharmacy and the agency's response to the review.

Recommendation: Acknowledge receipt of the report

Analysis: The 2011-13 Legislatively Adopted Budget (LAB) for the Board of Pharmacy included the following budget note:

“The Subcommittee expressed concern about the overall operational management of the Board of Pharmacy. The Board was directed to work with the Department of Administrative Services to contract for a review of its operations including, but not limited to, the delegation of duties by position, the processes by which the Board conducts its administrative functions, how the revenues derived relate to the costs of doing business, management principles and policies, and efficient use of resources. The review should include specific findings on the gaps in operational policies, procedures and directives, allocation of resources, and cost allocation by license type and recommendations on how to address these gaps. The Board is directed to report on the operational review to the Joint Ways and Means during the February 2012 Legislative Session on the findings and the Board's plans on implementing the specific recommendations.”

The Board of Pharmacy solicited proposals at the end of October 2011 and selected the certified public accounting and business consulting firm of Talbot, Korvola and Warwick (TKW) to perform the operational review required by the budget note on November 22, 2011. The review was performed between December 3, 2011 and January 27, 2012. The summary to the report provided by TKW noted that because of both the timing (during the holiday season) and limited time allowed, that a detailed review of all Board of Pharmacy activities could not be conducted resulting in some review areas still requiring further assessment to determine specific costs, resource impacts, benefits, etc. Key topical discussions that were included in the report that included specific recommendations were:

- Current economic conditions require the board to re-prioritize its activities
- Opportunities to improve licensing efficiency exist
- The board extensively relies on personnel, not documented process
- Communication between management and staff can improve
- Although common practice, the use of pharmacists as inspectors/investigators is costly
- Compliance section management should be more proactive in managing its resources
- The board's current probation policy is not consistently being applied
- Technology should replace paper

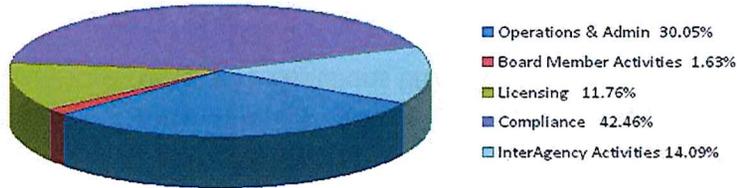
Included with the copy of the operational review report from TKW, the Board of Pharmacy submitted a letter to the Joint Committee on Ways and Means (JWM) detailing the agency's response to each of the ten detailed recommendations resultant from the operational review. The conclusion presented in the Board's letter to the JWM expresses the Board's desire that the Committee view this response as a complete, appropriate, and acceptable conclusion to the operational review.

BUDGET NARRATIVE

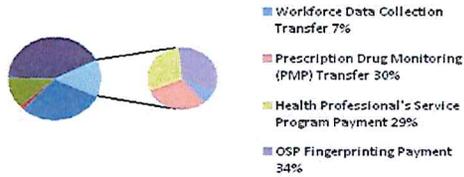
Pharmacy

Program Description AGENCY SUMMARY NARRATIVE

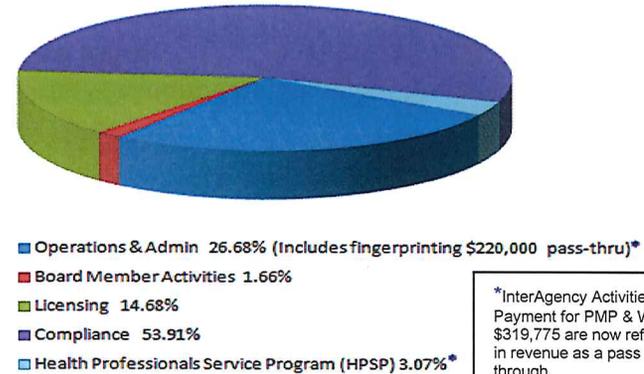
2011-2013 Program Allocation



2011-2013 InterAgency Activities

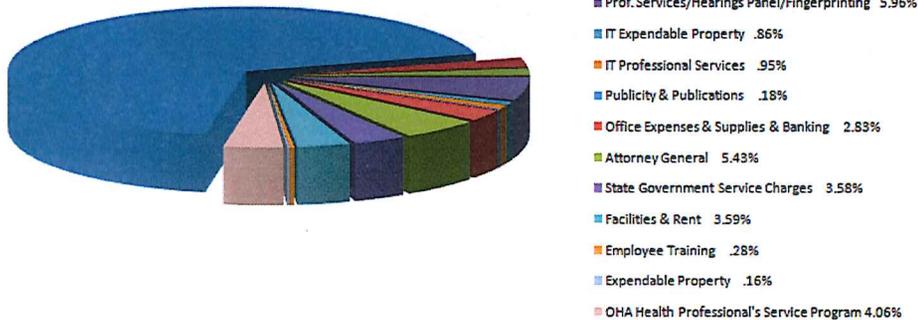


2013-2015 Program Allocation



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

2011-2013 Expenditures by Type
\$5,111,603



2013-2015 Expenditures by Type
\$5,817,527



Agency Request

Governor's Budget

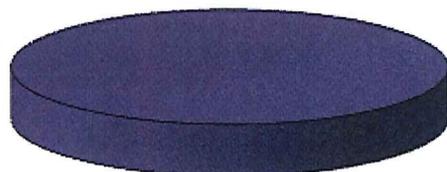
Legislatively Adopted

Budget Page 13

BUDGET NARRATIVE

Mission Statement and Statutory Authority

Oregon Board of Pharmacy Funding Limitation 11-13



■ Other Funds
\$5,111,603

Oregon Board of Pharmacy Funding Limitation 13-15



■ Other Funds
\$5,817,527

Mission: 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).

ORS 689.005 - 995

Pharmacists; Drug Outlets; Drug Sales

ORS 475.005 - 999

Controlled Substances; Illegal Drug Cleanup; Paraphernalia; Precursors

OAR 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.

BUDGET NARRATIVE

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 drug outlets involved in the 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.

“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

BUDGET NARRATIVE

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]

2 Year Strategic Plan

The Board of Pharmacy has an annual Strategic Planning Session where Board members review and establish priorities. The current plan is a two year plan. The Board's current priorities include: ACPE monitoring, animal euthanasia, technician duties, auto refills, case review evaluation and presentation, prescription fraud, medication errors, multicultural issues, patient information and empowerment, medical marijuana, pharmacy benefit managers, practitioner dispensing, probationer policy, semi independence and succession plan.

Long Term Plan

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 are:

1. Protect Oregon consumers by regulating the practice of pharmacy and the distribution of drugs;
2. Provide Excellent Customer Service; and,

BUDGET NARRATIVE

3. Conduct business in a manner that supports a positive environment for the pharmacy and pharmaceutical industries.

In its ongoing efforts to achieve these goals in the public interest the Board will:

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 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 and community pharmacies, drug manufacturers and wholesalers, corrections facilities, county health clinics and other drug outlets for compliance with federal and state laws and rules and to answer questions from pharmacists and others. The Board has developed a pharmacy self-inspection form for hospitals, community pharmacies, and nursing home pharmacies which enables each 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.

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. Because of the current work load, the Board is not getting to all pharmacies every year. Some are being inspected at intervals of one, or two, and in some cases three years. In Oregon "Voluntary Compliance" is the heart of the regulatory process

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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. The Board is considering alternatives to the pharmacist conducted on site annual inspections.

Inspection of non-prescription drug outlets has become increasingly important both in terms of ability to provide these outlets with timely information and resources on drugs and drug law, but also in terms of the ability to regulate and monitor quality and distribution of the various over-the-counter drug products. The Board is currently developing a project to connect with outlets that sell over-the-counter medications for which English is not their native language. The focus of the project is to communicate public health and safety issues pertaining to selling medications that require a prescription, are not approved by the FDA, are counterfeit or expired. The project also focuses on informing outlets that sell over-the-counter medications of registration requirements under Oregon law. According to the Department of Human Services the top three translation languages used in the state are Spanish, Russian and Vietnamese. The Board has composed material intended for store owners within the Hispanic Community. The material consists of an informational brochure that outlines registration requirements and from whom they may legally purchase over-the-counter medications from. A cover letter has also been created to communicate public health and safety issues of selling medications and directs them to the Board's website for a list of law enforcement agencies in which they can safely dispose of any medications that they cannot possess. All documents have been translated into Spanish including a Non Prescription Drug Outlet Application and will be mailed to select businesses throughout the state. The Board is developing relationships within the Hispanic Community to assist us in our outreach efforts. At a later date this information will be translated and distributed to store owners that speak Russian and Vietnamese. Liaisons within the Russian and Vietnamese community will also be obtained.

Because of widely reported concerns of counterfeit or tainted drugs and general concerns about the integrity and security the nation's drug distribution system, the Board feels it is also necessary to perform on sight inspections of the pharmaceutical wholesale and manufacturing drug outlets on a periodic basis. Administrative rules for the licensing of pharmaceutical manufacturers, wholesale drug distributors and drug distribution agents have been updated and provide more appropriate oversight of these outlets. Out of state wholesale distributors must have a current inspection performed by a credentialing agency approved by the Board prior to being issued a license in Oregon. Wholesalers can be inspected by Board of Pharmacy staff in lieu of an approved credentialing agency.

In 2011 a five year rule review was conducted on the Board's Pharmaceutical Wholesaler Rules. The Wholesalers Rules were based on the National Association of Boards of Pharmacy Model Rules and were permanently adopted on December 6, 2006. The modifications strengthened registration requirements, required greater accountability and record keeping in the supply chain, and created a list of prohibited practices. The changes also allowed the Board to have continued authority over outlets that violated rules and subsequently lapsed their registration.

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The review reflected that the Board's Wholesaler rules have been critical in minimizing the prevalence of gray market suppliers in Oregon. The Board's compliance statistics indicated that in 2006 there were 21 cases involving pharmaceutical wholesalers. At the end of 2011 three wholesaler cases had been investigated for the year. This is an 85.7 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 is be unable to purchase drugs from them without an Oregon wholesaler or manufacturer registration without both entities being in violation of the Board's rules and subject to discipline. As the Board continues to update its rules, these rules continue to become 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 much time answering multifaceted questions and responding to requests from licensees and 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 director are 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 and 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

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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 has been more costly than expected, due primarily to expenses for legal interpretations and advice regarding the new program and staff time to develop processes, procedures, and rules, and notify and educate licensees about the details of the new HPSP. Direct costs to the Agency have remained relatively stable since inception. However, a proposal currently exists to increase the contractual payment amount, which will have to be absorbed by the Agency.

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 2011 the Agency worked closely with the Oregon Veterinary Medical Examining Board to discuss issues surrounding animal euthanasia, certified euthanasia technicians and the utilization of sodium pentobarbital. In 2009 the Oregon Euthanasia Task Force, responsible for the training of certified euthanasia technicians, was disbarred due to a lack of funding. The Agency provided the Oregon Veterinary Medical Examining Board a training program regarding the security, storage, disposal and record keeping requirements of sodium pentobarbital for its certified euthanasia technicians. The Agency reviewed requirements for its animal euthanasia outlets. Rules, application requirements as well as the Agency's inspection process relating to animal euthanasia outlets were subsequently updated.

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. A \$300 fee was established through the Department of Administrative Services Fee Approval 333 Process. This budget requests ratification of that fee.

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

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activities are encouraged by the individuals and associations representing the board's licensees, who have supported and continue to support the proposed license fee increases. It has become increasingly difficult to respond to these requests because of limited resources. 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. This is a particular challenge for the 2013-15 biennium because of the ongoing economic pressures to reduce staffing and other expenditures.

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 practitioner to the pharmacy. Ongoing development and maintenance of procedures and regulations will be necessary as professional practice standards evolve with the electronic technology. Electronic prescribing is rapidly becoming more prevalent, which is expected to improve recordkeeping, reduce the opportunity for diversion, and reduce dispensing errors due to illegible handwritten prescriptions. The Agency has encouraged this move to e-prescribing at every opportunity and has amended statutes and rules to further facilitate the evolution.

Key Performance Measures include:

- 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

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Short Term Plan

As previously mentioned, the Board of Pharmacy has an annual Strategic Planning Session during which the board members and staff review the priorities for the next two years. The Board's current priorities include: Continuing Education monitoring, animal euthanasia, technician duties, auto refills, case review evaluation and presentation, prescription fraud, medication errors, multicultural issues, patient information and empowerment, medical marijuana, pharmacy benefit managers, practitioner dispensing, probationer policy, semi independence and succession planning.

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 17.75 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 3.75 positions that handle all details related to licensing and examinations including applications, renewals, production and mailing of more than 23,220 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 using the Oregon Law Enforcement Data System (LEDS) on all new pharmacist, pharmacy technician, certified pharmacy technicians and pharmacy intern applicants. Policies and Procedures are in place and the Board began requiring for national fingerprint background checks for all new applicants effective February 1, 2011. Staff regularly visits the pharmacy schools in Oregon to meet and talk to the incoming students about internship 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 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.

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The *Operations/Administration section* includes six positions that is a combination of operations and administrative functions. It includes the Executive Director, Administrative Director, Project Manager, Office Manager, Receptionist 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, 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, budget preparation, accounting, human resources and contracts. The Compliance Director directly supervises the Compliance section activities and staff. 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 administration, accounts payable/receivable, facilities management, purchasing, and supervises the Receptionist. Staff in this section also 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.

Budget Note: In response to a budget note contained in the 2011-13 LAB the Agency underwent an Operational Review performed by an independent business consultant, Talbot, Korvola & Warwick. The report concluded, “. . . the board appears to be protecting the public’s health, safety and welfare through its regulation activities associated with manufacture, sale and distribution of drugs in Oregon.” Several opportunities for improvement were identified. Staff has developed a plan to address these opportunities. As required, the Board reported back to the 2012 Legislative Ways & Means, providing a copy of the Operational Review Report and the Board’s response.

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Regulating the Practice of Pharmacy & Distribution of Drugs in the Public Interest Ongoing Operational Tasks

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
- Monitor the progress of pharmacy interns
- 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

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

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- 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 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

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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. 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.
2. 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 consumers expectations.
3. A number of calls, contacts and requests being diverted and directed to the Board of Pharmacy that would otherwise more appropriately been directed to OSPA. 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 will impact the 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.
4. 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

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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 advertising and promotion of prescription drugs and devices. This is resulting in an increase in consumer awareness, but an increase in 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. The Oregon Legislature's House Health Care Committee convened a work group intending to draft legislation regarding regulation of PBM 's for the 2013 session. The Board of Pharmacy is a member of this work group.

5. 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. A new section of rules regulating charitable pharmacies was written in response to a 2009 legislative measure. This is a time consuming process and the implementation of new and revised administrative rules is time and resource intensive.
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.

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7. 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. 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 http://cms.oregon.gov/pharmacy/pages/Fraud_info.aspx. 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.

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An additional tool developed for community and health system pharmacy staff is the Board's listserve for pharmacists. When the Board receives reliable information from pharmacies or from law enforcement of an organized prescription scam or confirmation from a prescriber that the prescribers DEA number or prescription blanks have been compromised the Board alerts its pharmacists through its listserve usually within 24 hours of the occurrence. These alerts have been a valuable tool for quickly squelching the fraudulent activity.

Strategic Initiatives & Accomplishments

The Agency has identified a number of strategic initiatives that will support the intermediate outcome targets or objectives of the six-year plan. 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 <http://www.awarerx.org/>. 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. Another tool implemented by the Board is a Research Council that was devoted to researching issues of Patient Safety and Medication Errors. The Council's final report listed a number of recommendations which are currently being addressed by the Board. The Board adopted a position statement on Medication Error Reduction called *Optimizing Patient Safety and Reducing Medication Errors in Oregon*. A performance measure that could indicate progress is the number of consumer complaints of mis-filled prescriptions from Oregon pharmacies.

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 2011 the Board received a request from a stake holder to authorize a local Oregon hospital to utilize a system which became known as a Technician Checking Validation Program or TCVP. In response to the stake holders request the Board developed a work-group to look at information and procedures from other states who had allowed similar programs as well as any correlating safety studies. In April 2012 the Board adopted rules to allow hospitals to implement Technician Checking Validation Programs to allow the redirection of a pharmacist from a distributive role to a patient oriented role.

BUDGET NARRATIVE

Develop high standards in pharmacy practice by working more closely with the Oregon State Pharmacy Association and 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 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. Consumer surveys regarding satisfaction with pharmacy services would measure success.

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

Goal 2. Provide Excellent Customer Service

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Phase one of the Board’s fee increase was implemented in 2011. The Board seeks approval in 2013-2015 to implement phase two of the remaining fees to be increased as described below under Revenue Estimates.

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PHARMACY, BOARD OF

Annual Performance Progress Report (APPR) for Fiscal Year (2011-2012)

Original Submission Date: 2012

Finalize Date: 2/11/2013

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PHARMACY, BOARD OF

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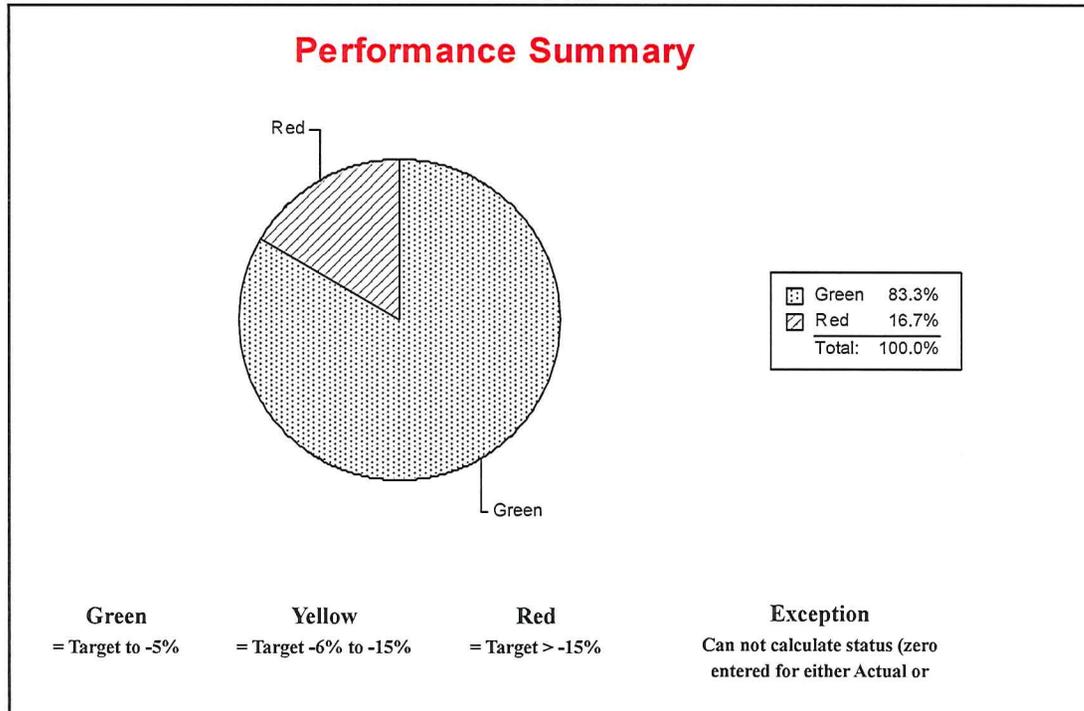
Agency Mission: The mission of the Oregon State Board of Pharmacy is to promote, preserve and protect the public health, safety and welfare by ensuring high standards in the practice of pharmacy and by regulating the quality, manufacture, sale and distribution of drugs.

Contact: Karen MacLean, Administrative Director

Contact Phone: 971-673-0001

Alternate: Gary Schnabel, Executive Director

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Board staff completed 100% of the pharmacy inspections in 2011. This is a 10% increase over 2010. Having a fully trained staff facilitates success for KPM #3.

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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 work groups 's 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 continuation 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.

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

4. CHALLENGES

Goal #1: Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs - With licensure of Pharmacy Technicians transitioning to Certified Oregon Pharmacy Technicians, the Board continues to identify a significant number of Technicians that have a record of drug or alcohol abuse and there is an increase in the number of rejected applications. Due to the economy, there continues to be a large number of people retraining in the area as pharmacy technicians. Nationally accepted standards for technician education programs do not exist. Consequently, the graduates seeking licensure are prepared with inconsistent knowledge and skill levels. Additionally, many of applicants have completed course work and upon application to the Board, find that their application is denied due to failed background checks. Because these individuals have invested so much into their education, we are faced with an increase in the number of hearing requests which drives up agency costs and increases the need for resources for Attorney General and Hearing dollars. The Board is becoming aware of more illegal internet pharmacies which require a considerable amount of time and resources.

Goal #2: Provide excellent customer service -Although the overall average of 87.7% was down by 5.43% from 2010 we can attribute this to the introduction of the National fingerprint background check requirement for individuals which was implemented February 1, 2011. It was a change from the way the Board has done business in the past and provides more thorough applicant information. It is clear that the process still needs to be refined to provide a better customer experience. The Board is continually working on improving the website through frequent updating, the use of plain language, monthly reviews, and suggestions.

One of the most significant challenges continues to be the demand on the Agency's workload requests from other agencies and outside organizations. The Agency is regularly called on to assist with projects that require pharmacist expertise, such as requests from DHS to develop protocols and rules that would be effective in the case of a declared Public Health Emergency, such as the H1N1 Flu epidemic or new legislative mandates.

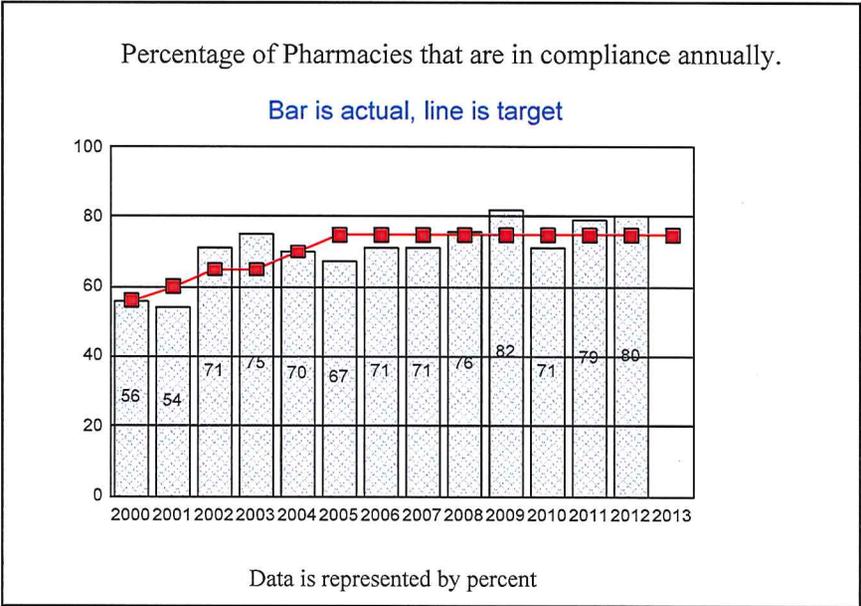
Goal #3: Conduct business in a manner that supports a positive environment for the pharmacy industry- As mentioned above, the biggest challenge is the number of different types of licensees we regulate such as: the pharmacy industry, which includes community and hospital pharmacies, pharmaceutical industry, 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.

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.

36

KPM #1	Percent of inspected pharmacies that are in compliance annually.	2000
Goal	Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs.	
Oregon Context	KPM #1 - 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 inspection of all Oregon pharmacies annually. To achieve this goal, it is necessary to have trained pharmacist Compliance staff.

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 2011 increased slightly from 79 to 80%. This increase relatively small, but is attributed to a reduction in the number of new rule requirements implemented by the Board in the prior years and the challenge for pharmacies and pharmacists to keep up with the changes. The Board continues to educate through the Board's website, CE programs, Pharmacist in Charge Self-Inspection process, training and staff are available for questions daily.

4. HOW WE COMPARE

The Board established a self-inspection report that has assisted pharmacies in complying with Oregon laws and rules. The variance shows that pharmacies compliance increased during calendar year 2011. 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.

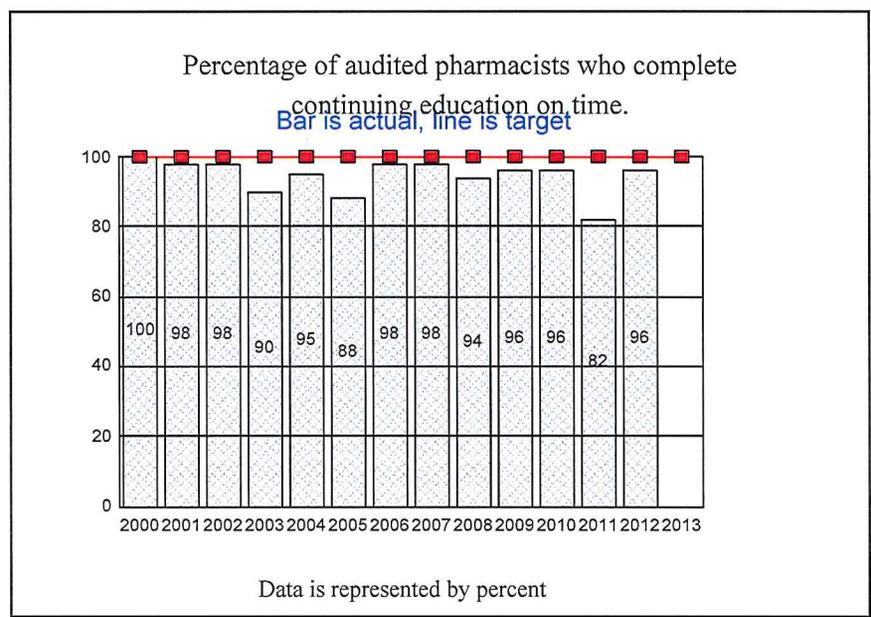
6. WHAT NEEDS TO BE DONE

During 2011 there was a pharmacy inspector/investigator vacancy for the first three months in the Compliance section. Whenever there is a vacancy, it takes six months to a year to train a new staff member. At full staff, this 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

Calendar year 2011 data shows an increase in compliance for this measure. This is strong data because it is easy to determine whether the pharmacy is in compliance or out of compliance. During inspections, Compliance staff use the self inspection form 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.

KPM #2	Percent 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 Context	KPM # 2 - Agency mission.	
Data Source	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.

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 2011, compliance for this measure was much improved over 2010. Statistics reflect that considerably more audited individuals were in compliance for 2011 than in 2010. While in 2010, 83 individuals didn't submit their CE on time and that was higher number than normal, only 3 had disciplinary action taken and were required to take an exam. In 2011, 17 were late and 9 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.

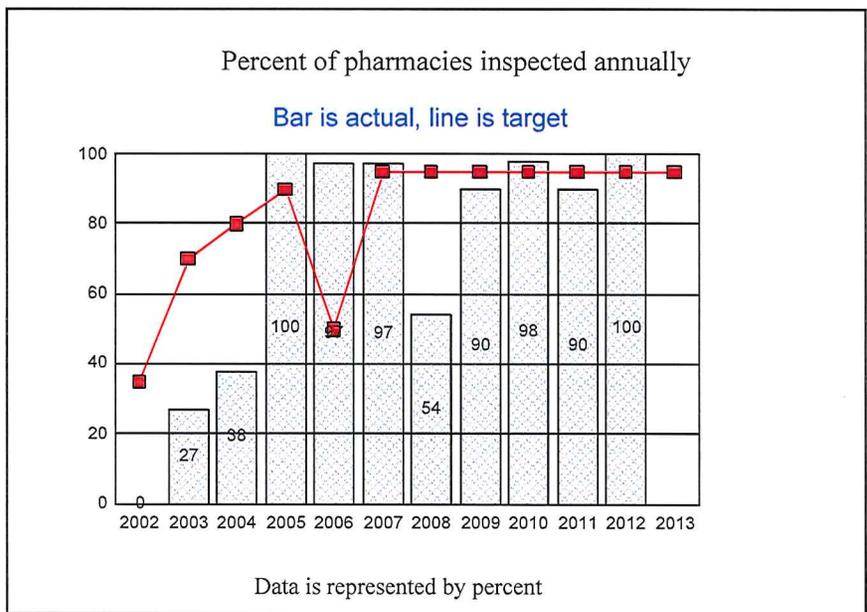
6. WHAT NEEDS TO BE DONE

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.

KPM #3	Percent of pharmacies inspected annually.	2002
Goal	Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs.	
Oregon Context	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 inspection of all Oregon pharmacies annually. To achieve this goal, it is necessary to have positions filled with trained pharmacist Compliance staff.

2. ABOUT THE TARGETS

In 2011, one of the Pharmacy Inspector/Investigator positions was vacant for the first three months. As a result, performance for this measure increased from 90% to 100%. The legislative target is 95%.

3. HOW WE ARE DOING

As mentioned above, in 2011 all of the Pharmacy Inspector positions were filled; while it is not always true with a new staff member, all pharmacies were inspected in 2011. In addition, Board staff were able to inspect 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 section where each member is trained makes a difference in the Board's ability to satisfy this requirement.

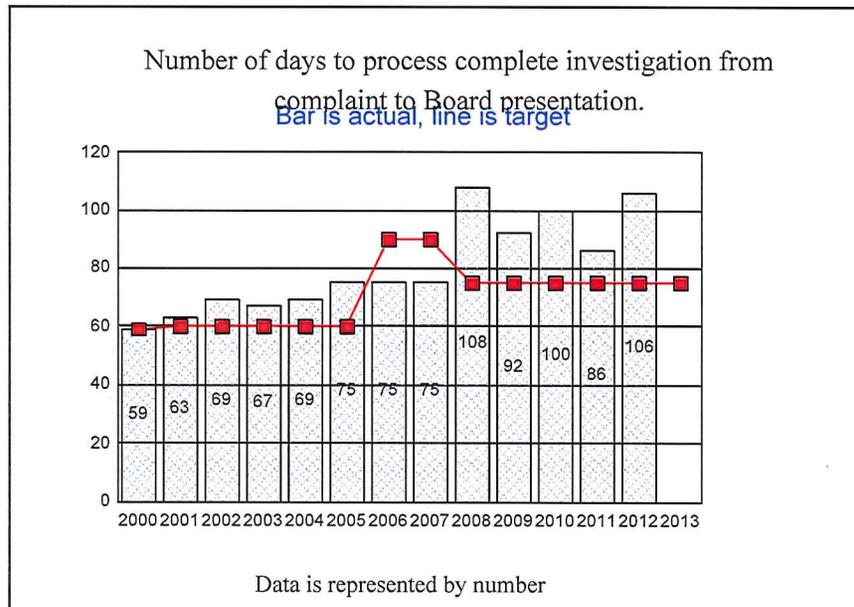
6. WHAT NEEDS TO BE DONE

Continue the current practice of regular pharmacy inspection.

7. ABOUT THE DATA

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

KPM #4	Average number of days to complete an investigation from complaint to board presentation.	2000
Goal	Provide excellent customer service.	
Oregon Context	KPM #4 - Agency mission.	
Data Source	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.

2. ABOUT THE TARGETS

The Board's 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

Anecdotally, this compares favorably to other Oregon regulatory boards and other state boards of pharmacy.

5. FACTORS AFFECTING RESULTS

2012 KPM results indicate that in calendar year 2011, it took longer to take a case from complaint to Board presentation. The corporate culture of licensee's legal departments and government relation teams contributes to delays and adds to the complexity of investigations. Other factors include the availability of Board general counsel resources and need for ongoing investigator training.

6. WHAT NEEDS TO BE DONE

Retain staff, get more training, and review and update investigation procedures. The Board submitted a request in 2011 to drop this measure and replace it with a measure that coincides with the statutory requirement of 120 days, however it was not approved. The Board continues to question the effectiveness of this KPM.

7. ABOUT THE DATA

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

BUDGET NARRATIVE

An additional tool developed for community and health system pharmacy staff is the Board's listserve for pharmacists. When the Board receives reliable information from pharmacies or from law enforcement of an organized prescription scam or confirmation from a prescriber that the prescribers DEA number or prescription blanks have been compromised the Board alerts its pharmacists through its listserve usually within 24 hours of the occurrence. These alerts have been a valuable tool for quickly squelching the fraudulent activity.

Strategic Initiatives & Accomplishments

The Agency has identified a number of strategic initiatives that will support the intermediate outcome targets or objectives of the six-year plan. 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 AWAxE Program website at <http://www.awarerx.org/>. 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. Another tool implemented by the Board is a Research Council that was devoted to researching issues of Patient Safety and Medication Errors. The Council's final report listed a number of recommendations which are currently being addressed by the Board. The Board adopted a position statement on Medication Error Reduction called *Optimizing Patient Safety and Reducing Medication Errors in Oregon*. A performance measure that could indicate progress is the number of consumer complaints of mis-filled prescriptions from Oregon pharmacies.

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 2011 the Board received a request from a stake holder to authorize a local Oregon hospital to utilize a system which became known as a Technician Checking Validation Program or TCVP. In response to the stake holders request the Board developed a work-group to look at information and procedures from other states who had allowed similar programs as well as any correlating safety studies. In April 2012 the Board adopted rules to allow hospitals to implement Technician Checking Validation Programs to allow the redirection of a pharmacist from a distributive role to a patient oriented role.

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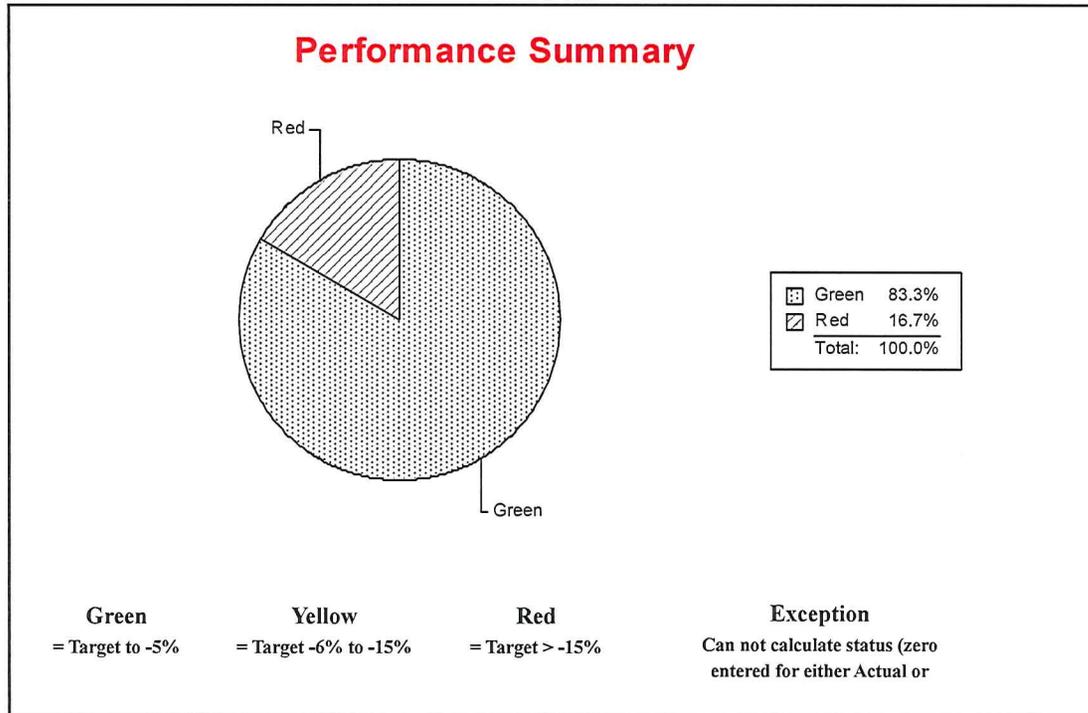
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Board staff completed 100% of the pharmacy inspections in 2011. This is a 10% increase over 2010. Having a fully trained staff facilitates success for KPM #3.

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 did see a decrease in the overall scores. This can be attributed to the fingerprinting requirement that went into effect in February of 2011. The overall license application processing time increased because of the extra time required for national fingerprint processing through Oregon State Police. We are continually striving to provide excellent service in a timely manner in all departments of our agency and hopefully 2012 brings positive changes. The Board continues to streamline processes and procedures while focusing on efficiency and effective use of resources as we serve. The Board's website is a primary method of communication to licensees and the public. We are able to more timely post 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 work groups 's 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 continuation 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.

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

4. CHALLENGES

Goal #1: Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs - With licensure of Pharmacy Technicians transitioning to Certified Oregon Pharmacy Technicians, the Board continues to identify a significant number of Technicians that have a record of drug or alcohol abuse and there is an increase in the number of rejected applications. Due to the economy, there continues to be a large number of people retraining in the area as pharmacy technicians. Nationally accepted standards for technician education programs do not exist. Consequently, the graduates seeking licensure are prepared with inconsistent knowledge and skill levels. Additionally, many of applicants have completed course work and upon application to the Board, find that their application is denied due to failed background checks. Because these individuals have invested so much into their education, we are faced with an increase in the number of hearing requests which drives up agency costs and increases the need for resources for Attorney General and Hearing dollars. The Board is becoming aware of more illegal internet pharmacies which require a considerable amount of time and resources.

Goal #2: Provide excellent customer service -Although the overall average of 87.7% was down by 5.43% from 2010 we can attribute this to the introduction of the National fingerprint background check requirement for individuals which was implemented February 1, 2011. It was a change from the way the Board has done business in the past and provides more thorough applicant information. It is clear that the process still needs to be refined to provide a better customer experience. The Board is continually working on improving the website through frequent updating, the use of plain language, monthly reviews, and suggestions.

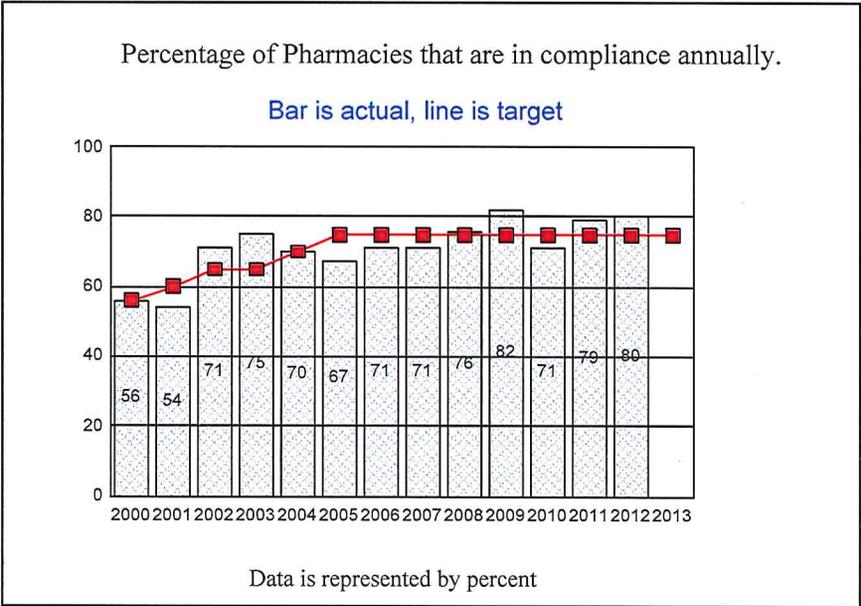
One of the most significant challenges continues to be the demand on the Agency's workload requests from other agencies and outside organizations. The Agency is regularly called on to assist with projects that require pharmacist expertise, such as requests from DHS to develop protocols and rules that would be effective in the case of a declared Public Health Emergency, such as the H1N1 Flu epidemic or new legislative mandates.

Goal #3: Conduct business in a manner that supports a positive environment for the pharmacy industry- As mentioned above, the biggest challenge is the number of different types of licensees we regulate such as: the pharmacy industry, which includes community and hospital pharmacies, 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.

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.

KPM #1	Percent of inspected pharmacies that are in compliance annually.	2000
Goal	Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs.	
Oregon Context	KPM #1 - 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 inspection of all Oregon pharmacies annually. To achieve this goal, it is necessary to have trained pharmacist Compliance staff.

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 2011 increased slightly from 79 to 80%. This increase relatively small, but is attributed to a reduction in the number of new rule requirements implemented by the Board in the prior years and the challenge for pharmacies and pharmacists to keep up with the changes. The Board continues to educate through the Board's website, CE programs, Pharmacist in Charge Self-Inspection process, training and staff are available for questions daily.

4. HOW WE COMPARE

The Board established a self-inspection report that has assisted pharmacies in complying with Oregon laws and rules. The variance shows that pharmacies compliance increased during calendar year 2011. 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.

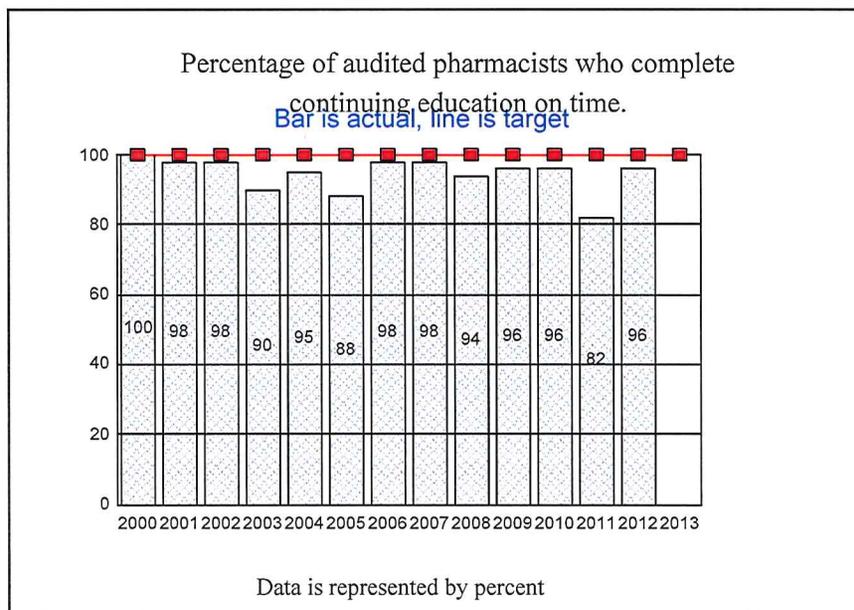
6. WHAT NEEDS TO BE DONE

During 2011 there was a pharmacy inspector/investigator vacancy for the first three months in the Compliance section. Whenever there is a vacancy, it takes six months to a year to train a new staff member. At full staff, this 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

Calendar year 2011 data shows an increase in compliance for this measure. This is strong data because it is easy to determine whether the pharmacy is in compliance or out of compliance. During inspections, Compliance staff use the self inspection form 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.

KPM #2	Percent 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 Context	KPM # 2 - Agency mission.	
Data Source	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.

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 2011, compliance for this measure was much improved over 2010. Statistics reflect that considerably more audited individuals were in compliance for 2011 than in 2010. While in 2010, 83 individuals didn't submit their CE on time and that was higher number than normal, only 3 had disciplinary action taken and were required to take an exam. In 2011, 17 were late and 9 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.

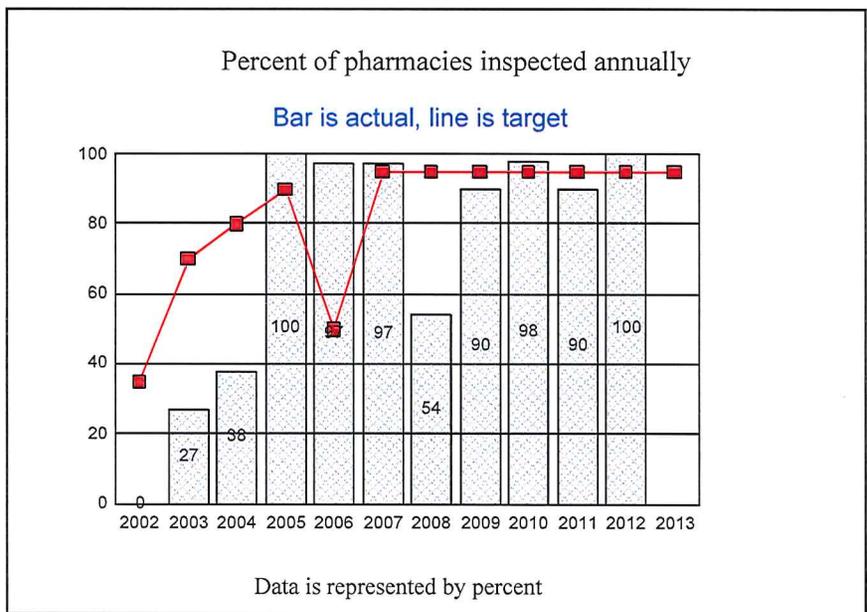
6. WHAT NEEDS TO BE DONE

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.

KPM #3	Percent of pharmacies inspected annually.	2002
Goal	Protect Oregon consumers by regulating the practice of pharmacy and distribution of drugs.	
Oregon Context	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 inspection of all Oregon pharmacies annually. To achieve this goal, it is necessary to have positions filled with trained pharmacist Compliance staff.

2. ABOUT THE TARGETS

In 2011, one of the Pharmacy Inspector/Investigator positions was vacant for the first three months. As a result, performance for this measure increased from 90% to 100%. The legislative target is 95%.

3. HOW WE ARE DOING

As mentioned above, in 2011 all of the Pharmacy Inspector positions were filled; while it is not always true with a new staff member, all pharmacies were inspected in 2011. In addition, Board staff were able to inspect 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 section where each member is trained makes a difference in the Board's ability to satisfy this requirement.

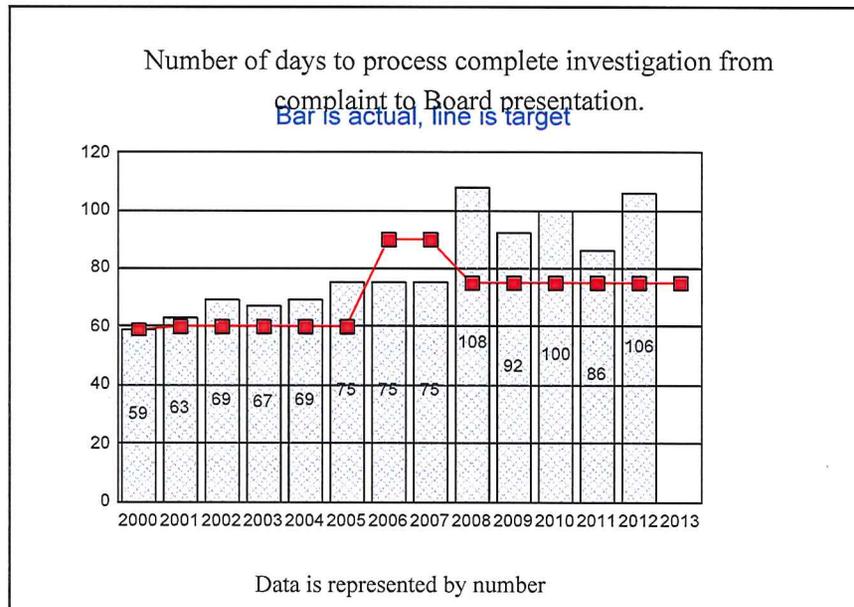
6. WHAT NEEDS TO BE DONE

Continue the current practice of regular pharmacy inspection.

7. ABOUT THE DATA

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

KPM #4	Average number of days to complete an investigation from complaint to board presentation.	2000
Goal	Provide excellent customer service.	
Oregon Context	KPM #4 - Agency mission.	
Data Source	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.

2. ABOUT THE TARGETS

The Board's 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

Anecdotally, this compares favorably to other Oregon regulatory boards and other state boards of pharmacy.

5. FACTORS AFFECTING RESULTS

2012 KPM results indicate that in calendar year 2011, it took longer to take a case from complaint to Board presentation. The corporate culture of licensee's legal departments and government relation teams contributes to delays and adds to the complexity of investigations. Other factors include the availability of Board general counsel resources and need for ongoing investigator training.

6. WHAT NEEDS TO BE DONE

Retain staff, get more training, and review and update investigation procedures. The Board submitted a request in 2011 to drop this measure and replace it with a measure that coincides with the statutory requirement of 120 days, however it was not approved. The Board continues to question the effectiveness of this KPM.

7. ABOUT THE DATA

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

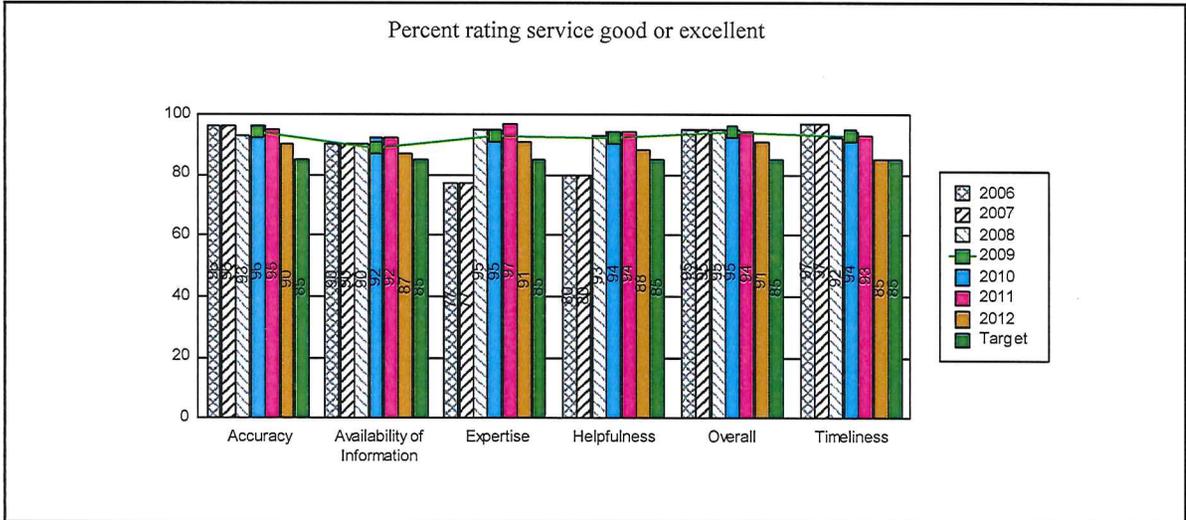
KPM #5	Percent of Customers Rating Their Satisfaction With the Agency’s Customer Service as “Good” or “Excellent” : Overall Customer Service, Timeliness, Accuracy, Helpfulness, Expertise, and Availability of Information.	2006
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Goal	Provide excellent customer service
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Oregon Context	KPM #5 - Customer Service measure added by the 2005 Legislature.
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Data Source	Customer service survey
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Owner	Board of Pharmacy Administrative Director (971) 673-0001
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1. OUR STRATEGY

The Board strives towards excellent customer service through 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 several surveys of various licensees and the public during this reporting period. Combined results indicate a high service rating in all areas.

4. HOW WE COMPARE

Limited data available.

5. FACTORS AFFECTING RESULTS

The 2009 survey results indicate higher scores in all areas of customer service over 2008.

6. WHAT NEEDS TO BE DONE

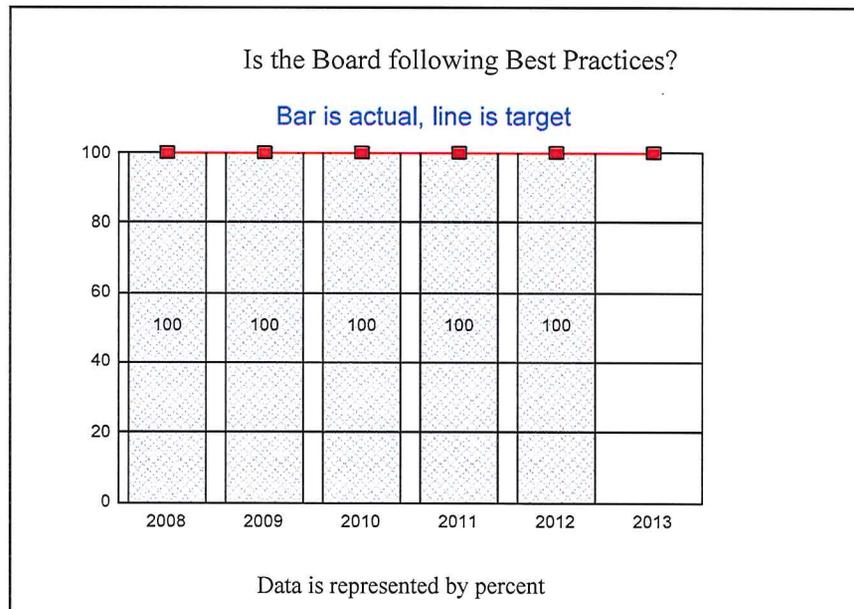
The Agency seeks to continue excellent customer service through ongoing staff training, the use of internet resources and regularly updated agency website.

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?

We emailed a link to the SurveyMonkey Customer Service Survey to Board customers that obtained a new license between the dates of January 1, 2011 and December 31, 2011. These were only sent to new licensees who provided an email address. As of 1/17/12 we emailed the link to 2517 licensees. 122 of the email addresses came back to us as undeliverable. Of the 2395 remaining licensees that provided valid email addresses, 553 have responded to the survey. 544 licensees completed the entire survey. This is a response rate of 22.71%. This is a decrease of 1.62% over the 2010 response rate.

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 Context	KPM #6 Board Best Practices, Legislatively added in 2007.	
Data Source	The Board reviews board best practices annually at their Strategic Planning session.	
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. Unfortunately, it has now been eliminated due to budget cuts. 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

Agency 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.

Contact: Karen MacLean, Administrative Director

Contact Phone: 971-673-0001

Alternate: Gary Schnabel, Executive Director

Alternate Phone: 971-673-0001

The following questions indicate how performance measures and data are used for management and accountability purposes.

1. INCLUSIVITY

- * **Staff:** The Executive Director, along with the Management staff, reviews measures annually and advises the Board. The Performance Measure Coordinator attends periodic trainings and meetings.
- * **Elected Officials:** Through the budget hearing process, legislators participate in review and revision of agency performance measures. This information is available to the public and posted on the agency website.
- * **Stakeholders:** This information is posted on the agency website and is available for review and comment. It is also reviewed annually at the Board's Strategic Planning Session.
- * **Citizens:** This information is posted on the agency website and available 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. Performance measures are analyzed as part of the Board's annual strategic planning process. The Board established a new disciplinary outcome as a result of the KPM #2 data. In addition, in order achieve our inspection goals, Board staff continue to evaluate the most effective way to utilize the pharmacist inspector positions 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 available, although that is very limited.

4 COMMUNICATING RESULTS

- * **Staff:** The staff communicate results at Board meetings and our report is available on the agency website.
- * **Elected Officials:** Any elected official can obtain information about agency performance measures through the website. The legislative sub-committee that reviews the agency budget is also provided up to date information.
- * **Stakeholders:** These documents and Annual Report are posted at <http://www.pharmacy.state.or.us> and available

for all stakeholders to review.

* **Citizens:** All information is posted on the website, or can be received by contacting the Board office.

Agency Management Report

KPMs For Reporting Year 2012

Finalize Date: 2/11/2013

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:	83.33%	0.00%	16.67%	0.00%	0.00%

Detailed Report:

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
1 - Percent of inspected pharmacies that are in compliance annually.	80	75	Green	2012	As the Board continues to update rules, this measure will fluctuate in performance outcomes. The Compliance staff expect to see challenges with compliance as new rules are implemented.
2 - Percent of audited pharmacists who complete continuing education on time.	96	100	Green	2012	The Board continues to emphasize the importance of continuing education to licensees.
3 - Percent of pharmacies inspected annually.	100	95	Green	2012	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 inspection more than just retail and hospital pharmacies and the Inspectors are beginning to expand inspection to include Pharmaceutical Wholesalers as our rules require.

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Agency Management Report

KPMs For Reporting Year 2012

Finalize Date: 2/11/2013

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
4 - Average number of days to complete an investigation from complaint to board presentation.	106	75	Red	2012	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.	91	85	Green	2012	Although our overall average of 87.7% was down by 5.43% from 2010 we can attribute this to the introduction of the new National fingerprint background check requirement for individuals which was implemented February 1, 2011. It was a change from the way we have done business in the past, and although it was our hope that this year's overall scores would be an improvement over 2010, it is clear that we are still trying to refine all of our processes to provide a better customer experience. Due to the fingerprinting requirement, our overall processing time went from about 3 days to approx 2-4 weeks because of the extra time required for national fingerprint processing through OSP. We are continually striving to provide excellent service in a timely manner in all departments of our agency and hopefully 2012 brings positive changes. We are continually working on updating and improving our website through frequent updating, the use of plain language, monthly reviews, and suggestions.

Agency Management Report

KPMs For Reporting Year 2012

Finalize Date: 2/11/2013

KPMs	Actual	Target	Status	Most Recent Year	Management Comments
6 - Board Best Practices - Percent of total best practices met by the Board.	100	100	Green	2012	The Board reviews best practices as part of the strategic planning session each year.

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.

BUDGET NARRATIVE

Major Information Technology Projects/Initiatives

None.

Streamlining

The Board held licensing and registration fee increases to two during the last 22 years through responsible resource management. Agency staff implemented efficient online license renewal system. With the assistance of our IT Consultant, staff also established a secure portal access for Board and staff to view sensitive and confidential communications.

Another streamlining effort is the Agency's effort to go "paperless". Totally paperless is not possible, but the project to eliminate paper where possible is underway. A policy package is proposed in this budget for 2013-15 to contract with an independent organization for this project.

Yet another streamlining effort is the Agency's listserv for pharmacists and pharmacy managers. The Agency has established an e-mail listserv for pharmacists and pharmacy managers. When alerts or time sensitive messages need to be broadcast to the pharmacists or pharmacies, the listserv makes it happen.

Summary of 2013-15 Biennium Budget

Pharmacy, Board of
Pharmacy, Board Of
2013-15 Biennium

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

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
2011-13 Leg Adopted Budget	18	17.75	5,111,603	-	-	5,111,603	-	-	-
2011-13 Emergency Boards	-	-	-	-	-	-	-	-	-
2011-13 Leg Approved Budget	18	17.75	5,111,603	-	-	5,111,603	-	-	-
2013-15 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	340,723	-	-	340,723	-	-	-
Estimated Cost of Merit Increase			-	-	-	-	-	-	-
Base Debt Service Adjustment			-	-	-	-	-	-	-
Base Nonlimited Adjustment			-	-	-	-	-	-	-
Capital Construction			-	-	-	-	-	-	-
Subtotal 2013-15 Base Budget	18	17.75	5,452,326	-	-	5,452,326	-	-	-
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Non-PICS Personal Service Increase/(Decrease)	-	-	(5,829)	-	-	(5,829)	-	-	-
Subtotal	-	-	(5,829)	-	-	(5,829)	-	-	-
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	65,654	-	-	65,654	-	-	-
State Gov't & Services Charges Increase/(Decrease)			18,977	-	-	18,977	-	-	-
Subtotal	-	-	84,631	-	-	84,631	-	-	-

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Summary of 2013-15 Biennium Budget

Pharmacy, Board of
Pharmacy, Board Of
2013-15 Biennium

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

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	(192)	-	-	(192)	-	-	-
Subtotal: 2013-15 Current Service Level	18	17.75	5,530,936	-	-	5,530,936	-	-	-

Summary of 2013-15 Biennium Budget

Pharmacy, Board of
Pharmacy, Board Of
2013-15 Biennium

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

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
Subtotal: 2013-15 Current Service Level	18	17.75	5,530,936	-	-	5,530,936	-	-	-
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2013-15 Current Service Level	18	17.75	5,530,936	-	-	5,530,936	-	-	-
080 - E-Boards									
081 - May 2012 E-Board	-	-	-	-	-	-	-	-	-
082 - September 2012 E-Board	-	-	-	-	-	-	-	-	-
083 - December 2012 E-Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	-	-	-	-	-	-	-	-	-
Policy Packages									
090 - Analyst Adjustments	-	-	-	-	-	-	-	-	-
091 - Statewide Administrative Savings	-	-	(5,196)	-	-	(5,196)	-	-	-
092 - PERS Taxation Policy	-	-	(10,316)	-	-	(10,316)	-	-	-
093 - Other PERS Adjustments	-	-	(82,530)	-	-	(82,530)	-	-	-
100 - Personnel Management	1	1.25	299,633	-	-	299,633	-	-	-
101 - Fee Increases – Part 2	-	-	-	-	-	-	-	-	-
102 - Paperless Records Retention – Part 1	-	-	85,000	-	-	85,000	-	-	-
Subtotal Policy Packages	1	1.25	286,591	-	-	286,591	-	-	-
Total 2013-15 Governor's Budget	19	19.00	5,817,527	-	-	5,817,527	-	-	-
Percentage Change From 2011-13 Leg Approved Budget	5.60%	7.00%	13.80%	-	-	13.80%	-	-	-
Percentage Change From 2013-15 Current Service Level	5.60%	7.00%	5.20%	-	-	5.20%	-	-	-

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Summary of 2013-15 Biennium Budget

**Pharmacy, Board of
Board of Pharmacy
2013-15 Biennium**

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

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
2011-13 Leg Adopted Budget	18	17.75	5,111,603	-	-	5,111,603	-	-	-
2011-13 Emergency Boards	-	-	-	-	-	-	-	-	-
2011-13 Leg Approved Budget	18	17.75	5,111,603	-	-	5,111,603	-	-	-
2013-15 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	340,723	-	-	340,723	-	-	-
Estimated Cost of Merit Increase	-	-	-	-	-	-	-	-	-
Base Debt Service Adjustment	-	-	-	-	-	-	-	-	-
Base Nonlimited Adjustment	-	-	-	-	-	-	-	-	-
Capital Construction	-	-	-	-	-	-	-	-	-
Subtotal 2013-15 Base Budget	18	17.75	5,452,326	-	-	5,452,326	-	-	-
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Non-PICS Personal Service Increase/(Decrease)	-	-	(5,829)	-	-	(5,829)	-	-	-
Subtotal	-	-	(5,829)	-	-	(5,829)	-	-	-
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase-in	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	-	-	-	-	-	-	-
Subtotal	-	-	-	-	-	-	-	-	-
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	65,654	-	-	65,654	-	-	-
State Gov't & Services Charges Increase/(Decrease)	-	-	18,977	-	-	18,977	-	-	-
Subtotal	-	-	84,631	-	-	84,631	-	-	-

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Summary of 2013-15 Biennium Budget

**Pharmacy, Board of
Board of Pharmacy
2013-15 Biennium**

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

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	(192)	-	-	(192)	-	-	-
Subtotal: 2013-15 Current Service Level	18	17.75	5,530,936	-	-	5,530,936	-	-	-

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Summary of 2013-15 Biennium Budget

**Pharmacy, Board of
Board of Pharmacy
2013-15 Biennium**

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

<i>Description</i>	<i>Positions</i>	<i>Full-Time Equivalent (FTE)</i>	<i>ALL FUNDS</i>	<i>General Fund</i>	<i>Lottery Funds</i>	<i>Other Funds</i>	<i>Federal Funds</i>	<i>Nonlimited Other Funds</i>	<i>Nonlimited Federal Funds</i>
Subtotal: 2013-15 Current Service Level	18	17.75	5,530,936	-	-	5,530,936	-	-	-
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2013-15 Current Service Level	18	17.75	5,530,936	-	-	5,530,936	-	-	-
080 - E-Boards									
081 - May 2012 E-Board	-	-	-	-	-	-	-	-	-
082 - September 2012 E-Board	-	-	-	-	-	-	-	-	-
083 - December 2012 E-Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	-	-	-	-	-	-	-	-	-
Policy Packages									
090 - Analyst Adjustments	-	-	-	-	-	-	-	-	-
091 - Statewide Administrative Savings	-	-	(5,196)	-	-	(5,196)	-	-	-
092 - PERS Taxation Policy	-	-	(10,316)	-	-	(10,316)	-	-	-
093 - Other PERS Adjustments	-	-	(82,530)	-	-	(82,530)	-	-	-
100 - Personnel Management	1	1.25	299,633	-	-	299,633	-	-	-
101 - Fee Increases – Part 2	-	-	-	-	-	-	-	-	-
102 - Paperless Records Retention – Part 1	-	-	85,000	-	-	85,000	-	-	-
Subtotal Policy Packages	1	1.25	286,591	-	-	286,591	-	-	-
Total 2013-15 Governor's Budget	19	19.00	5,817,527	-	-	5,817,527	-	-	-
Percentage Change From 2011-13 Leg Approved Budget	5.60%	7.00%	13.80%	-	-	13.80%	-	-	-
Percentage Change From 2013-15 Current Service Level	5.60%	7.00%	5.20%	-	-	5.20%	-	-	-

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BUDGET NARRATIVE

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 budget is \$545,233 of the base budget. To make this kind of reduction and because Personal Services comprises approximately 69% of the overall budget, the only meaningful option is to reduce staff. Individual line items under Office Expenses have been reviewed in intimate detail and only very minimal reductions can be identified unless the Board cancels some of the State Government Service Charge options. This 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 the positions of Pharmacist Inspector/Investigator as well as two OS-2's. 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, especially in the face of additional Board and stakeholder initiatives. Duties assigned to these positions may be eliminated or delayed.



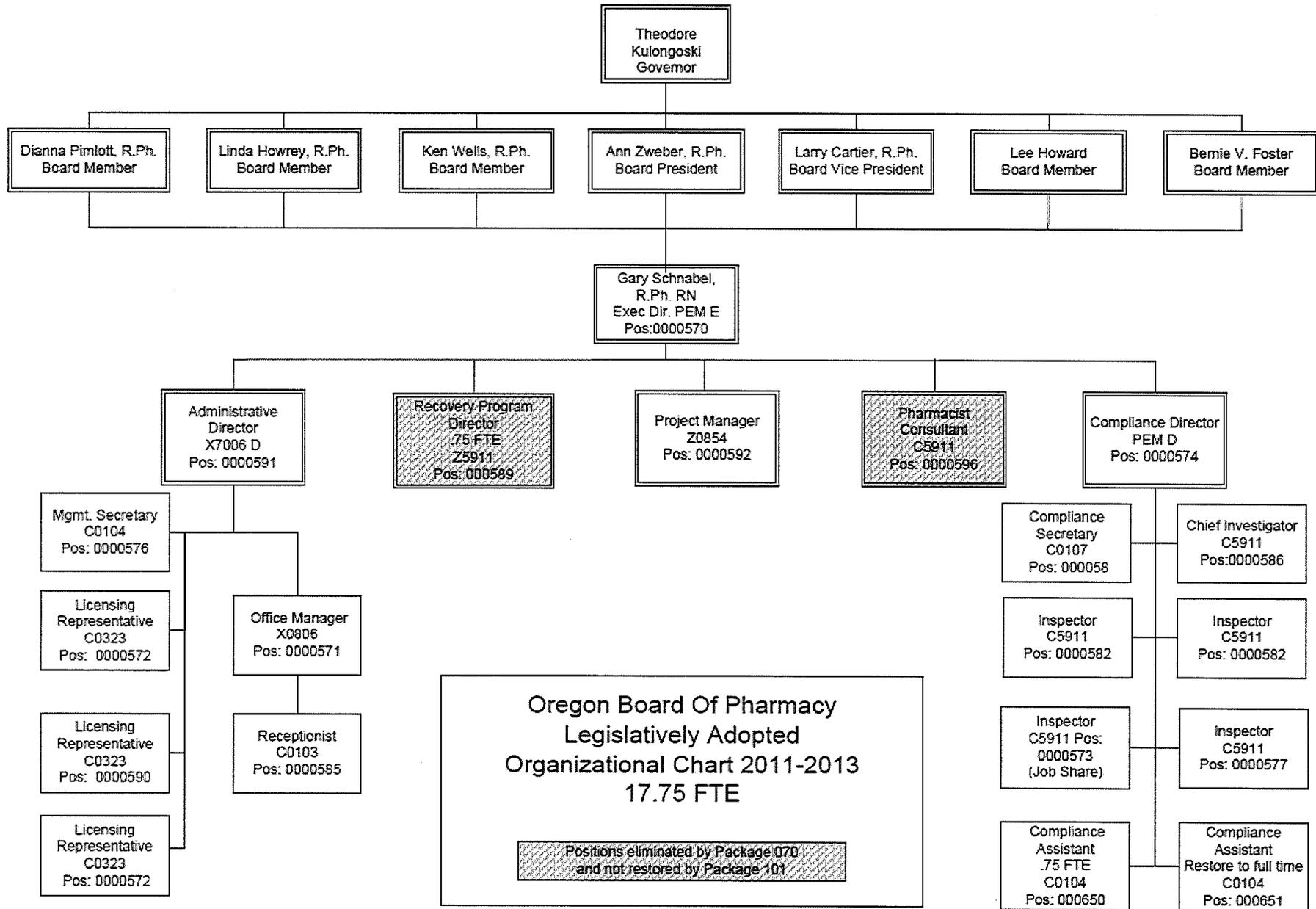
10/25% REDUCTIONS OPTIONS (ORS 291.216)

ACTIVITY OR PROGRAM	DESCRIBE REDUCTION	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 2013-15 AND 2015-17)	(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 Health Care Inspector/Investigator.	<p>ELIMINATING THIS POSITION WOULD REQUIRE RESTRUCTURING AND REASSIGNING DUTIES WITHIN THE REMAINING COMPLIANCE STAFF. ANNUAL INSPECTIONS OF RETAIL & INSTITUTIONAL DRUG OUTLETS WOULD BE COMPROMISED LEADING TO DECREASED COMPLIANCE WITH PHARMACY AND DRUG LAWS AND RULES WHICH IMPOSES AN INCREASED RISK TO THE PUBLIC.</p> <p>REVIEW AND REVISION OF OUTDATED ADMINISTRATIVE RULES WOULD DECREASE AS WELL AS PARTICIPATION IN RESEARCH PROJECTS AND COMMITTEES NEEDED FOR ISSUES RAISED BY STAKE HOLDERS.</p>	\$300,550.63 OF	RANK #1
2. Eliminate one full time OS-2 position.	<p>ELIMINATING THIS POSITION WOULD SIGNIFICANTLY HINDER THE AGENCY'S ABILITY TO PROCESS LICENSE APPLICATIONS IN A TIMELY MANNER AND SUBSEQUENTLY REDUCE THE AGENCY'S CUSTOMER SERVICE.</p> <p>THE PRODUCTION OF LICENSES AND REGISTRATIONS WOULD BE SERIOUSLY AFFECTED AND DELAYED.</p>	\$128,255.43 OF	RANK #2

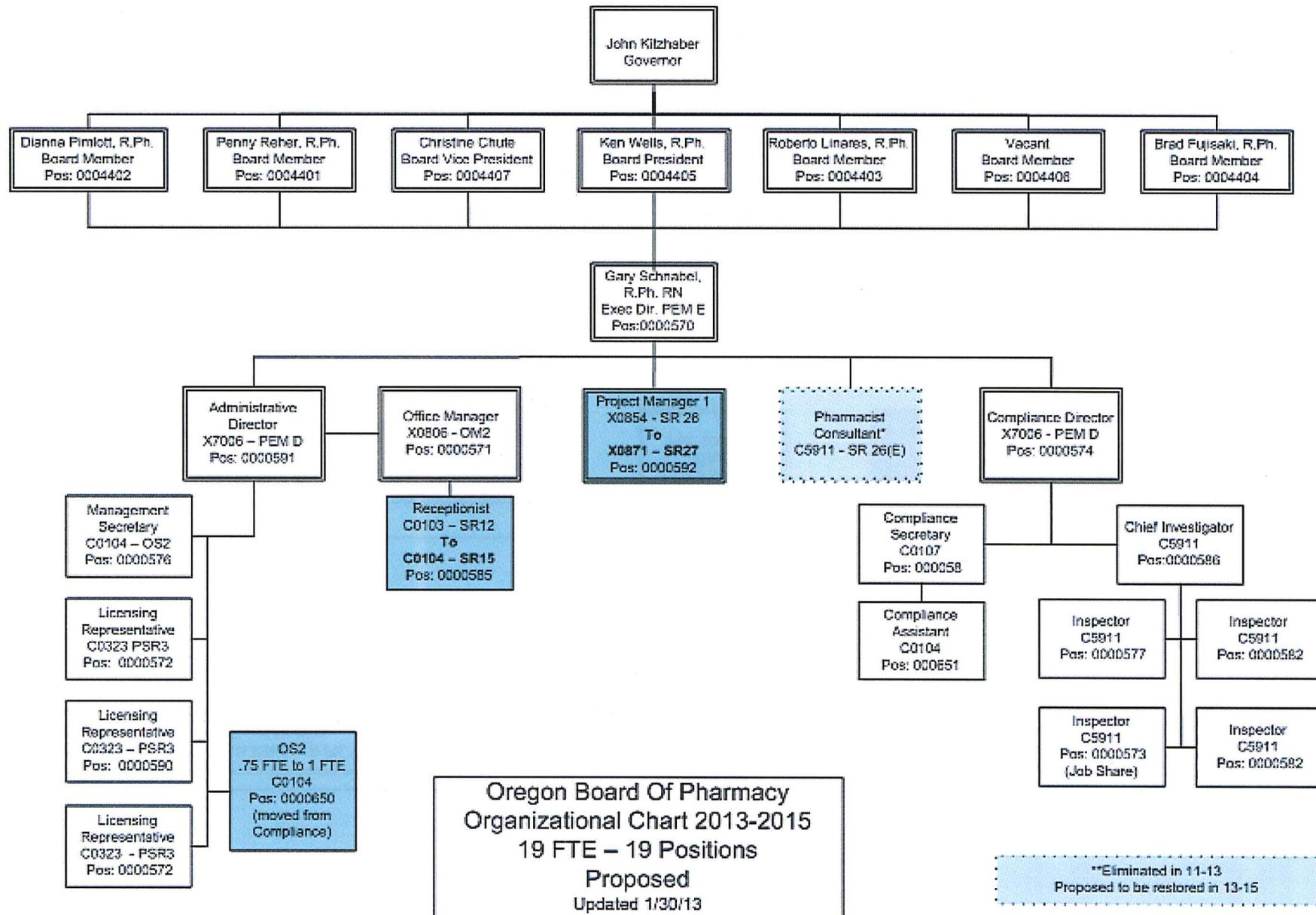
10/25% REDUCTIONS OPTIONS (ORS 291.216)

<p>3. Eliminate one full time OS-2 position.</p>	<p>REDUCTION OF THIS POSITION WOULD REQUIRE PHARMACIST INSPECTORS AS WELL AS THE COMPLIANCE DIRECTOR TO BE DIVERTED FROM THEIR REQUIRED ACTIVITIES IN ORDER TO PERFORM CLERICAL AND SECRETARIAL FUNCTIONS. THIS WOULD INCREASE THE AGENCY'S DEPENDENCE ON PHARMACISTS WHICH WOULD TAKE THEM AWAY FROM INSPECTIONS AND INVESTIGATIONS THAT REQUIRE PHARMACIST KNOWLEDGE. THE OVERALL EFFICIENCY OF THE AGENCY'S COMPLIANCE DIVISION WOULD BE HINDERED.</p>	<p>\$114,183.30 OF</p>	<p>RANK #3</p>
<p>4. Decrease office expenses by 16%</p>	<p>THIS REDUCTION WOULD REDUCE RESOURCES AVAILABLE FOR OFFICE SUPPLIES AND POSTAGE. A REDUCTION OF THIS AMOUNT WOULD HINDER THE BOARD'S ABILITY TO PRINT AND SEND RULEMAKING NOTICE, RENEWALS, NEW LICENSES AND OTHER CORRESPONDENCE.</p>	<p>\$14,756 OF</p>	<p>RANK #4</p>

BUDGET NARRATIVE



BUDGET NARRATIVE



Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
100-PERSONNEL MANAGEMENT - RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	301,027	299,633	-
Authorized Positions	-	-	-	1	1	-
Authorized FTE	-	-	-	1.25	1.25	-
102-PAPERLESS RECORDS RETENTION – PART 1- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	85,000	85,000	-
TOTAL LIMITED BUDGET (Policy Packages)						
Other Funds	-	-	-	386,027	286,591	-
AUTHORIZED POSITIONS	-	-	-	1	1	-
AUTHORIZED FTE	-	-	-	1.25	1.25	-
TOTAL LIMITED BUDGET (Including Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
AUTHORIZED POSITIONS	20	18	18	19	19	-
AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-
OPERATING BUDGET (Excluding Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,467,756	5,452,326	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
OPERATING BUDGET (Essential Packages)						
010-NON-PICS PSNL SVC / VACANCY FACTOR						
Other Funds	-	-	-	(5,824)	(5,829)	-
031-STANDARD INFLATION						
Other Funds	-	-	-	117,658	84,631	-
060-TECHNICAL ADJUSTMENTS						

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
LIMITED BUDGET (Excluding Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,467,756	5,452,326	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
LIMITED BUDGET (Essential Packages)						
010-NON-PICS PSNL SVC / VACANCY FACTOR						
Other Funds	-	-	-	(5,824)	(5,829)	-
031-STANDARD INFLATION						
Other Funds	-	-	-	117,658	84,631	-
060-TECHNICAL ADJUSTMENTS						
Other Funds	-	-	-	-	(192)	-
TOTAL LIMITED BUDGET (Essential Packages)						
Other Funds	-	-	-	111,834	78,610	-
LIMITED BUDGET (Current Service Level)						
Other Funds	4,478,980	5,111,603	5,111,603	5,579,590	5,530,936	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
LIMITED BUDGET (Policy Packages)						
091-STATEWIDE ADMINISTRATIVE SAVINGS- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(5,196)	-
092-PERS TAXATION POLICY- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(10,316)	-
093-OTHER PERS ADJUSTMENTS- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(82,530)	-

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
Other Funds	-	-	-	-	(192)	-
TOTAL OPERATING BUDGET (Essential Packages)						
Other Funds	-	-	-	111,834	78,610	-
OPERATING BUDGET (Current Service Level)						
Other Funds	4,478,980	5,111,603	5,111,603	5,579,590	5,530,936	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
OPERATING BUDGET (Policy Packages)						
091-STATEWIDE ADMINISTRATIVE SAVINGS- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(5,196)	-
092-PERS TAXATION POLICY- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(10,316)	-
093-OTHER PERS ADJUSTMENTS- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(82,530)	-
100-PERSONNEL MANAGEMENT - RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	301,027	299,633	-
Authorized Positions	-	-	-	1	1	-
Authorized FTE	-	-	-	1.25	1.25	-
102-PAPERLESS RECORDS RETENTION – PART 1- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	85,000	85,000	-
TOTAL OPERATING BUDGET (Policy Packages)						
Other Funds	-	-	-	386,027	286,591	-
AUTHORIZED POSITIONS	-	-	-	1	1	-
AUTHORIZED FTE	-	-	-	1.25	1.25	-

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
TOTAL OPERATING BUDGET (Including Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
AUTHORIZED POSITIONS	20	18	18	19	19	-
AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-
TOTAL BUDGET (Excluding Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,467,756	5,452,326	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
TOTAL BUDGET (Essential Packages)						
010-NON-PICS PSNL SVC / VACANCY FACTOR						
Other Funds	-	-	-	(5,824)	(5,829)	-
031-STANDARD INFLATION						
Other Funds	-	-	-	117,658	84,631	-
060-TECHNICAL ADJUSTMENTS						
Other Funds	-	-	-	-	(192)	-
TOTAL BUDGET (Essential Packages)						
Other Funds	-	-	-	111,834	78,610	-
TOTAL BUDGET (Current Service Level)						
Other Funds	4,478,980	5,111,603	5,111,603	5,579,590	5,530,936	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
TOTAL BUDGET (Policy Packages)						
091-STATEWIDE ADMINISTRATIVE SAVINGS- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(5,196)	-

Pharmacy, Board of

Agency Number: 85500

**Agencywide Appropriated Fund Group
2013-15 Biennium**

Version: Y - 01 - Governor's Budget

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
092-PERS TAXATION POLICY- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(10,316)	-
093-OTHER PERS ADJUSTMENTS- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	-	(82,530)	-
100-PERSONNEL MANAGEMENT - RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	301,027	299,633	-
Authorized Positions	-	-	-	1	1	-
Authorized FTE	-	-	-	1.25	1.25	-
102-PAPERLESS RECORDS RETENTION – PART 1- RANK 0 - 001-00-00-00000						
Other Funds	-	-	-	85,000	85,000	-
TOTAL BUDGET (Policy Packages)						
Other Funds	-	-	-	386,027	286,591	-
AUTHORIZED POSITIONS	-	-	-	1	1	-
AUTHORIZED FTE	-	-	-	1.25	1.25	-
TOTAL BUDGET (Including Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
AUTHORIZED POSITIONS	20	18	18	19	19	-
AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-

Pharmacy, Board of

Agency Number: 85500

**Agencywide Program Unit Summary
2013-15 Biennium**

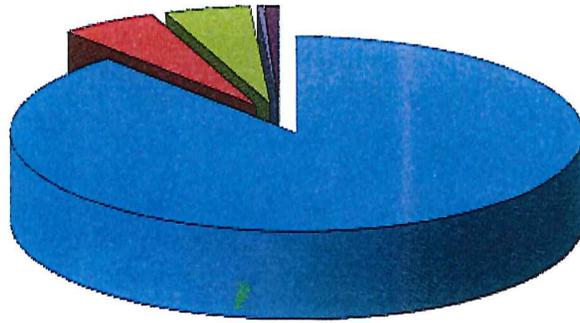
Version: Y - 01 - Governor's Budget

<i>Summary Cross Reference Number</i>	<i>Cross Reference Description</i>	<i>2009-11 Actuals</i>	<i>2011-13 Leg Adopted Budget</i>	<i>2011-13 Leg Approved Budget</i>	<i>2013-15 Agency Request Budget</i>	<i>2013-15 Governor's Budget</i>	<i>2013-15 Leg Adopted Budget</i>
001-00-00-00000	Board of Pharmacy						
	Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
TOTAL AGENCY							
	Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-

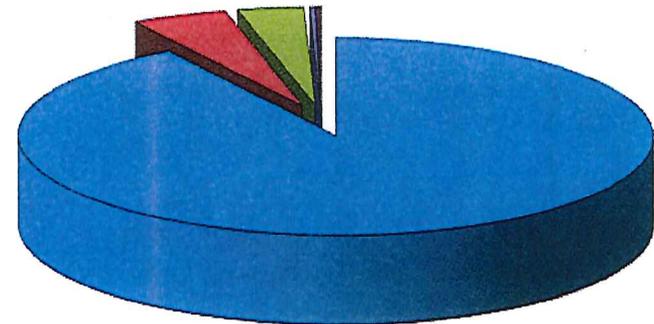
BUDGET NARRATIVE

REVENUES 2013-2015

2011-2013 Estimated Revenues
\$5,511,010



2013-2015 Estimated Revenues
\$7,398,823



■ Business Licensing Fees - 88.56%	■ Non-Business Lic & Fees - 5.51%
■ Delinquent Fees & Civil Penalties - 4.83%	■ Interest Income - .35%
■ Miscellaneous Sales - .76%	

■ Business Licensing Fees - 91.19%	■ Non-Business Lic & Fees - 4.89%
■ Delinquent Fees & Civil Penalties - 3.37%	■ Interest Income - .26%
■ Miscellaneous Sales - .29%	

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 2013-2015 budget was calculated by taking a predicted number of licensees and registrants and multiplying by the amount of each fee. 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.
- During the budget development process for 2011-2013 it became clear that there was a need to increase revenue or decrease expenses. After considerable review and discussion, in addition to cuts in staffing the Board proposed a policy package to increase selected categories of fees for the 2011-2013 biennium and the remaining categories, pharmaceutical wholesalers, pharmaceutical manufacturers and drug distribution agents (DDA's), in the 2013-2015 budget. To put this into perspective, prior to 2011, the last time any fees were increased was 2001. At that

BUDGET NARRATIVE

time, annual fees were raised for pharmacists, pharmacies, pharmacy technicians, pharmaceutical wholesalers and pharmaceutical manufacturers. The 2011-2013 fee increases were expected to sustain current operations for two-three years, necessitating “Phase 2” of the fee increase proposal including wholesalers, manufacturers and DDA's in 2013-2015. For the manufacturers and wholesalers, it will be only their second increase in over 30 years. By all standards, this is a commendable track record for any state agency and a clear statement to responsibly manage the agency's resources.

- All charts reflect inclusion of the new fees as proposed and ratification of fees adopted during the 2011-2013, some required by 2011 or 2012 legislation.

DETAIL OF FEE, LICENSE, OR ASSESSMENT REVENUE INCREASE

PROPOSED FOR INCREASE/ESTABLISHMENT

Purpose or Type of Fee, License or Assessment	Who Pays	2011-13 Estimated Revenue	2013-15 Agency Request	2013-15 Governor's Recommended Budget	2013-15 Legislatively Adopted	Explanation
Drug Distribution Agent	Establishments	22,400	\$44,800			In order to meet anticipated operational requirements the Board implemented Phase 1 - fee increases for the majority of its licensees during the 2011-13 biennium. Drug Distribution Agents, Manufacturers and Wholesalers fees were identified for Phase 2 - fee increases during the 2013-15 biennium. These fees exceed statutory caps and will require rule revision assuming 2013 LC 321 is enacted. The Phase 2 fee increase proposal is Policy Package 101 and generate an additional \$1,124,960 of additional revenue that is included on this document in the 2013-15 Agency Request column.
Manufacturer	Establishments	586,560	\$1,173,120			
Wholesaler	Establishments	516,000	\$1,032,000			
Supervising Physician Dispensing Outlet	Establishments	\$7,200	\$12,000			2012 Oregon Laws Chapter 34 required the Board to implement this license type. The Board obtained authorization for a \$300 annual fee through the Department of Administrative Services Fee Approval 333 Process and conducted / implemented this fee through the public rulemaking process.

Agency Request

Governor's Balanced

Legislatively Adopted

Budget Page 78



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

Source	Fund	ORBITS Revenue Acct	2009-2011 Actual	2011-13 Legislatively Adopted	2011-13 Estimated	2013-15		
						Agency Request	Governor's Recommended	Legislatively Adopted
Animal Euthanasia	4360	0205	1,475	2,700	2,700	2,700		
Certified Pharmacy Technician	4360	0205	405,425	574,500	574,500	574,500		
Charitable Pharmacy	4360	0205	300	400	400	2,700		
Controlled Substance	4360	0205	109,540	335,800	335,800	339,600		
County Health Clinic	4360	0205	21,675	17,800	17,800	27,600		
Drug Distribution Agents	4360	0205	14,930	22,400	22,400	22,400		
Hospital Drug Room	4360	0205	13,150	6,000	6,000	6,000		
Home Dialysis	4360	0205	3,000	3,000	3,000	3,000		
Intern	4360	0205	22,050	35,000	35,000	35,000		
Manufacturers	4360	0205	529,700	586,560	586,560	1,173,120		
Med Device/Equip/ Gases-Class C	4360	0205	30,075	37,700	37,700	42,500		
Non-Prescript – Drug Outlet- Class A	4360	0205	231,825	252,700	252,700	252,700		
Non-Prescript – Drug Outlet- Class B	4360	0205	8,435	13,700	13,700	13,700		
Non-Prescript – Drug Outlet- Class D	4360	0205	100	200	200	200		
Pharmacist	4360	0205	1,358,245	2,358,648	2,358,648	2,400,000		
Pharmacy Technician	4360	0205	82,590	84,000	84,000	84,000		
Precursor	4360	0205	625	2,400	2,400	2,400		

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

Prophylactic/Contraceptive	4360	0205	1,700	2,400	3,400	3,400	
Remote Dispensing	4360	0205	1,000	1,000	1,000	3,000	
Retail/Institutional Drug Outlet	4360	0205	452,575	749,400	749,400	749,400	
Supervising Physician Dispensing Outlet	4360	0205			7200	12,000	
Wholesalers	4360	0205	531,670	516,000	516,000	1,032,000	
Delinquent Fees	4360	0505	95,345	60,000	60,000	60,000	
Reciprocity	4360	0205	114,800	60,000	60,000	60,000	
NAPLEX/Exams	4360	0205	40,265	50,000	50,000	50,000	
Civil Penalty	4360	0505	376,973	200,000	200,000	200,000	
Interest Income	4360	0605	20,551	20,000	20,000	20,000	
NSF	4360	0975	525	400	400	400	
Misc Fees	4360	0975	26,349	15,000	15,000	15,000	
Laws & Rules	4360	0975	17,320	7,000	7,000	7,000	
Prescription Drug Monitoring Fee – transfer to OHA	4360	0205	259,125	260,145	260,145	260,145	
Prescription Drug Monitoring Fee - 10% retention	4360	0205	25,913	26,014.5	26,014.5	26,015	
Workforce Data Collection - transfer to OHA	4360	0210	51,635	53,000	53,000	53,000	
Fingerprinting fees – transfer to OSP depending on volume	4360	0352	42,484	208,000	208,000	208,000	

Agency Request

Governor's Balanced

Legislatively Adopted

Budget Page 80

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

Pharmacy, Board of
2013-15 Biennium

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

<i>Source</i>	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
Other Funds						
Business Lic and Fees	4,230,875	5,132,360	5,132,360	7,038,568	7,038,568	-
Non-business Lic. and Fees	94,119	319,240	319,240	377,630	377,630	-
Fines and Forfeitures	471,718	280,000	280,000	260,000	260,000	-
Interest Income	20,551	20,000	20,000	20,000	20,000	-
Other Revenues	44,195	43,800	43,800	22,400	22,400	-
Tsfr To Oregon Health Authority	(264,409)	(284,390)	(284,390)	(319,775)	(319,775)	-
Total Other Funds	\$4,597,049	\$5,511,010	\$5,511,010	\$7,398,823	\$7,398,823	-

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

Pharmacy, Board of
2013-15 Biennium

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

<i>Source</i>	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
Other Funds						
Business Lic and Fees	4,230,875	5,132,360	5,132,360	7,038,568	7,038,568	-
Non-business Lic. and Fees	94,119	319,240	319,240	377,630	377,630	-
Fines and Forfeitures	471,718	280,000	280,000	260,000	260,000	-
Interest Income	20,551	20,000	20,000	20,000	20,000	-
Other Revenues	44,195	43,800	43,800	22,400	22,400	-
Tsfr To Oregon Health Authority	(264,409)	(284,390)	(284,390)	(319,775)	(319,775)	-
Total Other Funds	\$4,597,049	\$5,511,010	\$5,511,010	\$7,398,823	\$7,398,823	-

Agencywide Revenues and Disbursements Summary
2013-15 Biennium

Version: Y-01-Governor's Budget

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
BEGINNING BALANCE						
0025 Beginning Balance						
Other Funds	1,673,222	945,936	945,936	921,868	921,868	-
0030 Beginning Balance Adjustment						
Other Funds	-	(423,475)	(423,475)	1,268,830	1,268,830	-
TOTAL BEGINNING BALANCE						
Other Funds	1,673,222	522,461	522,461	2,190,698	2,190,698	-
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
Other Funds	4,230,875	5,132,360	5,132,360	7,038,568	7,038,568	-
0210 Non-business Lic. and Fees						
Other Funds	94,119	319,240	319,240	377,630	377,630	-
TOTAL LICENSES AND FEES						
Other Funds	4,324,994	5,451,600	5,451,600	7,416,198	7,416,198	-
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
Other Funds	471,718	280,000	280,000	260,000	260,000	-
INTEREST EARNINGS						
0605 Interest Income						
Other Funds	20,551	20,000	20,000	20,000	20,000	-

Agencywide Revenues and Disbursements Summary
2013-15 Biennium

Version: Y-01-Governor's Budget

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
OTHER						
0975 Other Revenues						
Other Funds	44,195	43,800	43,800	22,400	22,400	-
TOTAL REVENUES						
Other Funds	4,861,458	5,795,400	5,795,400	7,718,598	7,718,598	-
TRANSFERS OUT						
2443 Tsfr To Oregon Health Authority						
Other Funds	(264,409)	(284,390)	(284,390)	(319,775)	(319,775)	-
AVAILABLE REVENUES						
Other Funds	6,270,271	6,033,471	6,033,471	9,589,521	9,589,521	-
EXPENDITURES						
Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
ENDING BALANCE						
Other Funds	1,791,291	921,868	921,868	3,623,904	3,771,994	-

**Proposed Fee Increases for 2013
Phase 2
Oregon Board of Pharmacy**

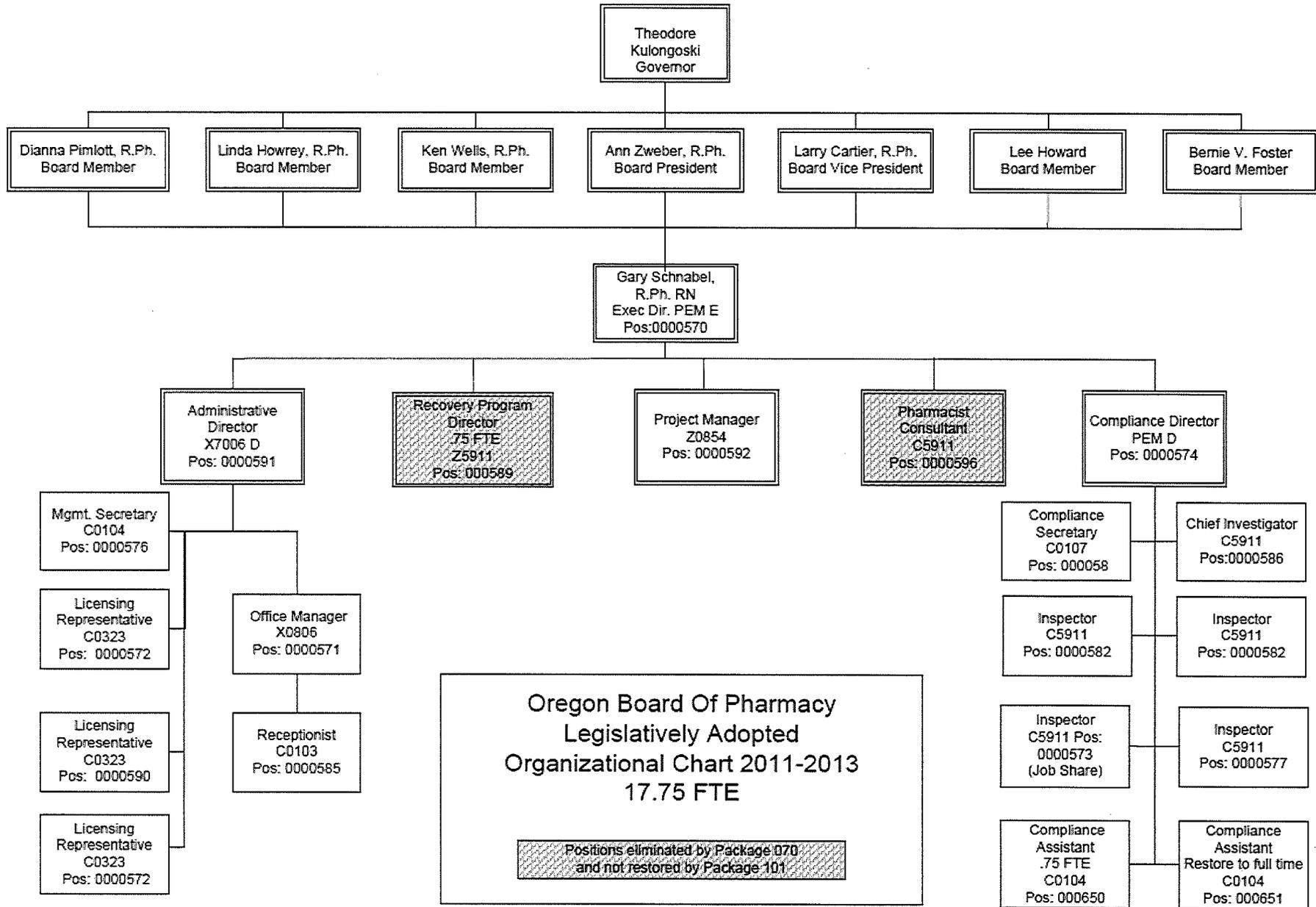
1977-2013 Fee History

	<u>1977</u>	<u>1980</u>	<u>1989</u>	<u>1990</u>	<u>1997</u>	<u>2001</u>	<u>2011 Phase 1</u>	<u>Proposed 2013 Phase 2</u>
Pharmacist	\$30	\$45	\$75	\$75	\$75	\$120	\$200	\$200
Pharmacy	\$35	\$70	\$70	\$100	\$100	\$175	\$300	\$300
Wholesaler	\$100	\$175	\$175	\$225	\$225	\$400	**	\$800
Manufacturer	\$100	\$175	\$175	\$225	\$225	\$400	**	\$800
Drug Distribution Agents	-	-	-	-	-	-	\$400	\$800

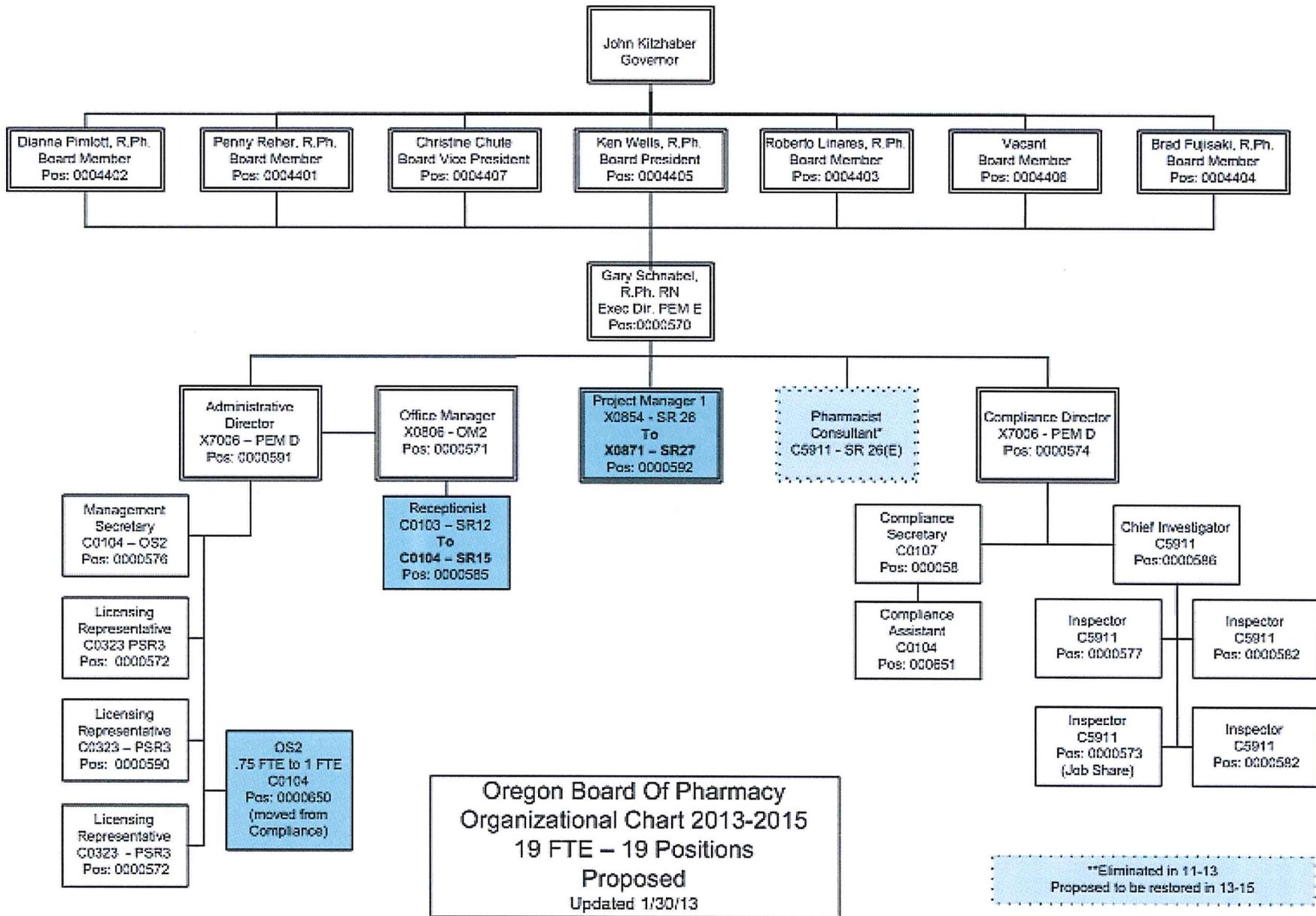
Note:
Drug Distribution Agent category was established in 2010.
Phase 1 fee increases were implemented in 2011 for all other license categories



BUDGET NARRATIVE



BUDGET NARRATIVE



BUDGET NARRATIVE

PROGRAM UNIT NARRATIVE

The Oregon Board of Pharmacy is made up of five members who are practicing pharmacists, two public members who are not pharmacists and a staff of 19 full or part time employees. 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 Board is requesting an increase in 2013-15 of 1.25 FTE.

The *Licensing section* is made up of 4.00* positions that handle all details related to licensing and examinations including applications, renewals, production and mailing of more than 23,220 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 using the Oregon Law Enforcement Data System (LEDS) on all new pharmacist, pharmacy technician, certified pharmacy technicians and pharmacy intern applicants. Policies and Procedures are in place and the Board began requiring for national fingerprint background checks for all new applicants effective February 1, 2011. Staff regularly visits the pharmacy schools in Oregon to meet and talk to the incoming students about internship responsibilities and licensing and to talk to the soon to be graduating students about procedures and requirements for licensure as a pharmacist. *Policy package 100 proposes to increase the fourth position by .25 to make it a full time position.

The *Compliance section*, made up of 8.00 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 seven positions* that is a combination of operations and administrative functions. It includes the Executive Director, Administrative Director, Project Manager, Office Manager, Receptionist 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. *Policy package 100 proposes to reclassify the Project Manager and Receptionist positions as well as add back the Pharmacist Consultant position that was eliminated in the 2011-13 budget.

BUDGET NARRATIVE

The Executive Director directly supervises the Administrative Director, the Compliance Director, and the Project Manager and answers to the President of the Board. The Administrative Director supervises the daily operations of the agency as well as supervises the Office Manager, Management Secretary/Background Check Specialist and Licensing sections' activities and staff. This position also encompasses a variety of other administrative functions including, coordination of board meeting activities, budget preparation, accounting, human resources and contracts. The Compliance Director directly supervises the Compliance section activities and staff. 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 administration, accounts payable/receivable, facilities management, purchasing, and supervises the Receptionist. Staff in this section also 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 (HPSP) costs for impaired professionals to OHA, which is a cost covered by agency resources.

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 figures provided by OHA the cost of the program to the Agency for 2012-2013 is ranges from \$69,000-\$85,000 per year or about \$3,666 per participant per year for 20 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 proposed

BUDGET NARRATIVE

changes to the agencies fee structure for the 2013-2015 biennium. The updated fees are listed on forms 107BF07 and 107BF08. Information on this proposal has been sent to manufacturers, wholesalers and drug distribution agents who renewed their registration for 2012-13. Associations representing wholesalers and manufacturers have also been mailed notification, and details about potential fee increases have been included in the Board's August 2012 newsletter.



ORBITS Budget Narrative

Pharmacy - 85500

ESSENTIAL PACKAGES

010 Non-PICS Psnl Svc / Vacancy Factor

Package Description

This essential package includes an overall decrease of (\$5,829) for personal services. The most notable adjustment is a (\$7221) reduction for the Pension Bond Contribution.

031 Inflation & Price List Adjustments

Package Description

This essential package consists of \$84,631 budget adjustments for inflation and Price List for the cost of goods and services. The bulk of the increases can be found in four areas: State Government Service Charges, Attorney General, for Professional Services (for the Hearings Panel), and for Facilities Rent.

060 Technical Adjustments

Package Description

This package includes a few technical adjustments approved by the agency's Department of Administrative Services (DAS), Chief Financial Office Analyst. The most significant changes are related to the line items where fingerprint expenditures are budgeted and payments for to the Oregon Health Authority for Special Payments for the Health Professional Services Program. The net impact of all the adjustments is (\$192.00).

091 Statewide Administrative Savings

Package Description

The Governor's budget requires increased efficiency in the operation of state government, calls for additional savings in administrative expenditures, and allows for the reinvestment of some of the savings realized through efficiencies into agency programs or to other initiatives that will further improve the administrative operations of state government.

Package 091 was included in all agency budgets as a placeholder for administrative efficiencies to be found in Finance, IT, HR, Accounting, Payroll, and Procurement activities. The Improving Government subcommittee of the Enterprise Leadership Team will be identifying proposed efficiencies or changes in the delivery of service to meet the funding level in the Governor's budget, and will work with individual agencies on the impact to their budget, along with reinvestment opportunities. The net impact of this adjustment is (\$5196.00).

ORBITS Budget Narrative

092 PERS Taxation Policy

Package Description

This package includes an adjustment made by the agency's Department of Administrative Services (DAS), Chief Financial Office Analyst. The net impact of this adjustment is (\$10,316).

093 Other PERS Adjustments

Package Description

This package includes an adjustment made by the agency's Department of Administrative Services (DAS), Chief Financial Office Analyst. The net impact of this adjustment is (\$82,530).

ORBITS Budget Narrative

Pharmacy – 85500 Policy Packages

Policy Package

100 Personnel Management

Package Description

Purpose:

The purpose of this package is to reclassify two positions and add 1.25 positions in order to meet the growing and changing personnel needs of the agency.

How Achieved:

Over the past 11 years, the Board of Pharmacy has grown from an agency of 11 to 19 and most recently reduced to 17.75 FTE in 2011-13 due to budget reductions and program changes. In order to ensure adequate revenue to meet anticipated operational requirements for 2011-13, a combination of position reductions and fee increases were proposed and legislatively approved. During the past four biennia, it has become increasingly apparent that the Board of Pharmacy's workload regularly exceeds staffing limitations. Workload has been impacted by the expectations of the Board, Legislature, growing increasing numbers of licensed and registered people and places, as well as the increasing complexity of stakeholder requests and inquiries.

As previously mentioned, the 2011-13 budget required the Board to have a third party conduct an Operational Review. The first recommendation was to re-allocate current resources to increase licensing staff, dedicate a licensing supervisor, and focus the Administrative Director position on agency operations. Additional recommendations encouraged developing formal, written procedures for all operational activities and establishing a formal approach to cross-training.

Prior to the review, Management Staff had been evaluating some of these very issues and it was determined that it will be necessary to reclassify the Project Manager 1 position that was added in 2005. Over time, it has become clear that this classification is not broad enough to meet the agency's needs. The Project Manger classification is dependent on duties that have a beginning and an end which prevents permanent assignment of duties that by their nature are ongoing and required coordinator duties. By reclassifying this position to an Operations Policy Analyst 2, it is anticipated that this position will be able to assume several responsibilities currently held by the Administrative Director, thereby freeing up time for additional management and oversight of the licensing section. Additional adjustments to help meet growing changes in the licensing section also include reclassifying the Office Specialist 1 position that serves as the agency Receptionist to an Office Specialist 2. Since the implementation of online license renewal, this position has assumed additional responsibilities that has freed up time for the Licensing Representatives to meet the needs of growing license numbers. As the Board has experienced program

ORBITS Budget Narrative

changes in the last two years, the decision was made to shift the .75 Office Specialist 2 position from Compliance to Licensing. At this time, we are asking to increase this position to a 1.0 FTE. These changes will help ensure that more resources are available to meet the growing changes in the licensing section in a cost effective manner and be responsive to the recommendation noted in the Operational Review.

As previously noted, the Board made a few position reductions in the 2011-13 budget proposal; one of those was the elimination of the Pharmacist Consultant position. It has become abundantly clear that this position is necessary to meet the Board's obligations to do professional research, rule writing, policy development, report writing and assist with ongoing and intermittent pharmacy related projects, education and outreach. Without this position for the past two years, many important research, rule writing and policy development projects have fallen to the back burner and become dormant.

Staffing Impact and Revenue Source:

Reclass Project Manager 1 position to an Operations Policy Analyst 2	\$ 6,294
Reclass Office Specialist 1 position to an Operations Specialist 2	\$ 3,040
Increase .75 Office Specialist 2 position to 1.0	\$ 20,440
Restore Pharmacist Consultant position 1.0	\$271,249

The net effect of this package after the Department of Administrative Services, Chief Financial Analyst made adjustments is \$299,633.

Quantifying Results

If this policy package is not approved, the Board will not be able to be responsive to the Operational Review recommendations. Important projects will remain unattended and workload pressures will continue to escalate for the existing staff. In addition, potential responsibilities resulting from anticipated legislation will suffer. Inability to make these enhancements will affect the Agency's ability to effectively operate and meet Key Performance Measures as well as Board and Stakeholder expectations.

Revenue Source:

The revenue source is Other Funds

ORBITS Budget Narrative

Pharmacy - 85500

Policy Package 101 Fee Increase, Phase 2

Package Description

Purpose:

The purpose of this package is to implement the second phase of fee increases that have been planned for the past four years. Phase One was established in the 2012 LAB.

How Achieved:

In the 2007-09 Agency Request Budget, the Board proposed to implement a two phase fee increase for all licensees as revenues required for ending balance were depleted. This proposal was denied and the Board found it necessary to again request fee increases in conjunction with staffing reductions in the 2011-13 Agency Request Budget proposal as projected revenues would not cover the essential budget for current staffing and expenses as required. These "Phase 1" fee increases were legislatively adopted and implemented. Note, most fees had not been increased since 2001 and both staffing and expenses have increased as was anticipated at the time of that proposal.

In 2013-15, the Board proposes to increase the remaining fees. This includes the pharmaceutical Wholesalers & Manufacturers and the Drug Distribution Agents. This fee increase is dependent in part on successful passage of 2013 SB 106 which proposes to remove licensing and registration fee caps from ORS 689.135. The Board of Pharmacy and the Board of Chiropractic Examiners are the only two health professional licensing boards that have fee maximums included in their practice acts. The other fifteen health professional licensing boards have statutory language which allows them to set licensing, application and other fees by administrative rule, subject to the SB 333 provisions (which require legislative approval post-facto). This change will remove an administrative burden and allows the Agency to address fees through the public rulemaking process which is subsequently ratified by the Legislature, maintaining the required legislative oversight.

Wholesalers and Manufactures have only had two fee increases in the last thirty years. During this time, the pharmaceutical industry has changed dramatically and business models have changed, especially in the last ten years. Additionally, the pedigree, number of different drugs, chain of drug distribution system, and demand for prescription drugs needed due to the aging population and advent of counterfeit drug distribution internationally has changed the face of drug distribution worldwide. The Board's focus continues to be the safe distribution of drugs for Oregon citizens. To facilitate that, the Board re-wrote the wholesaler and manufacturer rules in the last five years. This has required Board staff to work more closely with our wholesaler

ORBITS Budget Narrative

and manufacturer registrants regarding licensing requirements and compliance. This has been very labor intensive and the effort and resources that have gone into updating the rules, is overshadowed by the resources required for ongoing vigilance over the drug supply chain, which has increased the cost of the disciplinary process. Counterfeit drugs and the drug grey market have become common issues of discussion and concern for the Agency's staff and the Board. Due to the complexity of these categories, we have dedicated almost one full time employee just to deal with the licensing of these establishments. The business of pharmaceutical wholesaling and manufacturing is an international multi-billion dollar business. Implementing phase 2 of the fee increase plan is necessary for the Board to establish and maintain appropriate resources and reserves for the next six to eight years.

Staffing & Revenue Impact:

The impact on staffing is related to the ability to address current and ongoing workload. This package increases the revenue estimate for 2013-15 by an additional \$1,124,960 assuming passage of 2013 SB 106 and approval of this package. The Board expects to have a higher ending balance as a result of this fee increase because the initial increase will result in a higher ending balance with the intention of sustaining the agency for several biennia.

Quantifying Results

Fees provide the resources necessary for the Agency to achieve its project and performance goals. This policy package does not correspond specifically to a Key Performance Measure. Without these fee increases, the Board will not be able to sustain the current level of staffing, services and operational performance.

Revenue Source:

The revenue source is Other Funds.

ORBITS Budget Narrative

Pharmacy - 85500

Policy Package

102 Paperless Records Retention Part 1

Package Description

Purpose:

The purpose of this package is to implement the phase 1 implementation of scanning documents for records retention.

How Achieved:

Over the last five years, the Board has implemented various technology and scanning abilities to move in the direction of a more electronic driven environment. Board staff has researched the option of scanning records with the Secretary of State's Archives Division and two document conversion vendors. It has been confirmed by the Archives Division that this is the right direction to go to begin establishing a paperless environment. The first phase of this project will cost approximately \$85,000 and includes services for scanning and implementing an indexing system that can be assumed by in-house staff once complete for all currently active licensees and recent compliance case files, which is the bulk of the agencies records. These records are currently contained in approximately 81 filing cabinets and encompasses approximately 552 lineal feet of documents. This package moves the Agency towards paperless recordkeeping and sets it up for more efficient long term records retention as required by ORS 192 and OAR 166-300 and 350.

Once this phase is completed, it is expected that the Board will evaluate participation in the Secretary of State's new Oregon Records Management System (ORMS) which would be phase 2.

The net impact of this package is \$85,000.

Staffing Impact

This project will require in-house project management and require a number of staff members to participate in as decisions are made especially for the indexing portion. Once the conversion is complete, we will need to document processes and procedures in order to train existing staff how to create and index new records for ongoing continuity for electronic recordkeeping.

ORBITS Budget Narrative

Quantifying Results

This policy package does not correspond specifically to a Key Performance Measure but rather 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 and compliance files.

Revenue Source: The revenue source is Other Funds.

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

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

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
Temporary Appointments	-	-	553	-	-	-	553
All Other Differential	-	-	752	-	-	-	752
Public Employees' Retire Cont	-	-	143	-	-	-	143
Pension Obligation Bond	-	-	(7,221)	-	-	-	(7,221)
Social Security Taxes	-	-	100	-	-	-	100
Mass Transit Tax	-	-	(156)	-	-	-	(156)
Total Personal Services	-	-	(\$5,829)	-	-	-	(\$5,829)
Total Expenditures							
Total Expenditures	-	-	(5,829)	-	-	-	(5,829)
Total Expenditures	-	-	(\$5,829)	-	-	-	(\$5,829)
Ending Balance							
Ending Balance	-	-	5,829	-	-	-	5,829
Total Ending Balance	-	-	\$5,829	-	-	-	\$5,829

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 031 - Standard Inflation

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Services & Supplies							
Instate Travel	-	-	2,491	-	-	-	2,491
Out of State Travel	-	-	525	-	-	-	525
Employee Training	-	-	359	-	-	-	359
Office Expenses	-	-	2,162	-	-	-	2,162
Telecommunications	-	-	(1,385)	-	-	-	(1,385)
State Gov. Service Charges	-	-	18,977	-	-	-	18,977
Data Processing	-	-	924	-	-	-	924
Publicity and Publications	-	-	640	-	-	-	640
Professional Services	-	-	6,440	-	-	-	6,440
IT Professional Services	-	-	1,400	-	-	-	1,400
Attorney General	-	-	39,369	-	-	-	39,369
Dues and Subscriptions	-	-	96	-	-	-	96
Facilities Rental and Taxes	-	-	9,923	-	-	-	9,923
Facilities Maintenance	-	-	48	-	-	-	48
Medical Services and Supplies	-	-	24	-	-	-	24
Other Services and Supplies	-	-	1,336	-	-	-	1,336
Expendable Prop 250 - 5000	-	-	203	-	-	-	203
IT Expendable Property	-	-	1,099	-	-	-	1,099
Total Services & Supplies	-	-	\$84,631	-	-	-	\$84,631
Total Expenditures							
Total Expenditures	-	-	84,631	-	-	-	84,631
Total Expenditures	-	-	\$84,631	-	-	-	\$84,631

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 031 - Standard Inflation

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Ending Balance							
Ending Balance	-	-	(84,631)	-	-	-	(84,631)
Total Ending Balance	-	-	(\$84,631)	-	-	-	(\$84,631)

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 060 - Technical Adjustments

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
All Other Differential	-	-	29,068	-	-	-	29,068
Public Employees' Retire Cont	-	-	5,543	-	-	-	5,543
Social Security Taxes	-	-	2,224	-	-	-	2,224
Total Personal Services	-	-	\$36,835	-	-	-	\$36,835
Services & Supplies							
Professional Services	-	-	(220,000)	-	-	-	(220,000)
Agency Program Related S and S	-	-	220,000	-	-	-	220,000
Total Services & Supplies	-	-	-	-	-	-	-
Special Payments							
Other Special Payments	-	-	(37,027)	-	-	-	(37,027)
Total Special Payments	-	-	(\$37,027)	-	-	-	(\$37,027)
Total Expenditures							
Total Expenditures	-	-	(192)	-	-	-	(192)
Total Expenditures	-	-	(\$192)	-	-	-	(\$192)
Ending Balance							
Ending Balance	-	-	192	-	-	-	192
Total Ending Balance	-	-	\$192	-	-	-	\$192

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 091 - Statewide Administrative Savings

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
Undistributed (P.S.)	-	-	(3,693)	-	-	-	(3,693)
Total Personal Services	-	-	(\$3,693)	-	-	-	(\$3,693)
Services & Supplies							
Undistributed (S.S.)	-	-	(1,503)	-	-	-	(1,503)
Total Services & Supplies	-	-	(\$1,503)	-	-	-	(\$1,503)
Total Expenditures							
Total Expenditures	-	-	(5,196)	-	-	-	(5,196)
Total Expenditures	-	-	(\$5,196)	-	-	-	(\$5,196)
Ending Balance							
Ending Balance	-	-	5,196	-	-	-	5,196
Total Ending Balance	-	-	\$5,196	-	-	-	\$5,196

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 092 - PERS Taxation Policy

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
PERS Policy Adjustment	-	-	(10,316)	-	-	-	(10,316)
Total Personal Services	-	-	(\$10,316)	-	-	-	(\$10,316)
Total Expenditures							
Total Expenditures	-	-	(10,316)	-	-	-	(10,316)
Total Expenditures	-	-	(\$10,316)	-	-	-	(\$10,316)
Ending Balance							
Ending Balance	-	-	10,316	-	-	-	10,316
Total Ending Balance	-	-	\$10,316	-	-	-	\$10,316

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 093 - Other PERS Adjustments

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
PERS Policy Adjustment	-	-	(82,530)	-	-	-	(82,530)
Total Personal Services	-	-	(\$82,530)	-	-	-	(\$82,530)
Total Expenditures							
Total Expenditures	-	-	(82,530)	-	-	-	(82,530)
Total Expenditures	-	-	(\$82,530)	-	-	-	(\$82,530)
Ending Balance							
Ending Balance	-	-	82,530	-	-	-	82,530
Total Ending Balance	-	-	\$82,530	-	-	-	\$82,530

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 100 - Personnel Management

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Personal Services							
Class/Unclass Sal. and Per Diem	-	-	211,284	-	-	-	211,284
Empl. Rel. Bd. Assessments	-	-	40	-	-	-	40
Public Employees' Retire Cont	-	-	40,291	-	-	-	40,291
Social Security Taxes	-	-	16,162	-	-	-	16,162
Worker's Comp. Assess. (WCD)	-	-	59	-	-	-	59
Mass Transit Tax	-	-	1,268	-	-	-	1,268
Flexible Benefits	-	-	30,528	-	-	-	30,528
Reconciliation Adjustment	-	-	1	-	-	-	1
Total Personal Services	-	-	\$299,633	-	-	-	\$299,633
Total Expenditures							
Total Expenditures	-	-	299,633	-	-	-	299,633
Total Expenditures	-	-	\$299,633	-	-	-	\$299,633
Ending Balance							
Ending Balance	-	-	(299,633)	-	-	-	(299,633)
Total Ending Balance	-	-	(\$299,633)	-	-	-	(\$299,633)
Total Positions							
Total Positions							1
Total Positions	-	-	-	-	-	-	1

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 100 - Personnel Management

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Total FTE							
Total FTE							1.25
Total FTE	-	-	-	-	-	-	1.25

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 101 - Fee Increases – Part 2

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

<i>Description</i>	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds	All Funds
Revenues							
Business Lic and Fees	-	-	1,124,960	-	-	-	1,124,960
Total Revenues	-	-	\$1,124,960	-	-	-	\$1,124,960
Ending Balance							
Ending Balance	-	-	1,124,960	-	-	-	1,124,960
Total Ending Balance	-	-	\$1,124,960	-	-	-	\$1,124,960

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 102 - Paperless Records Retention – Part 1

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

<i>Description</i>	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)	-	-	-	(85,000)
Total Ending Balance	-	-	(\$85,000)	-	-	-	(\$85,000)

01/11/13 REPORT NO.: PDPFISCAL
 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

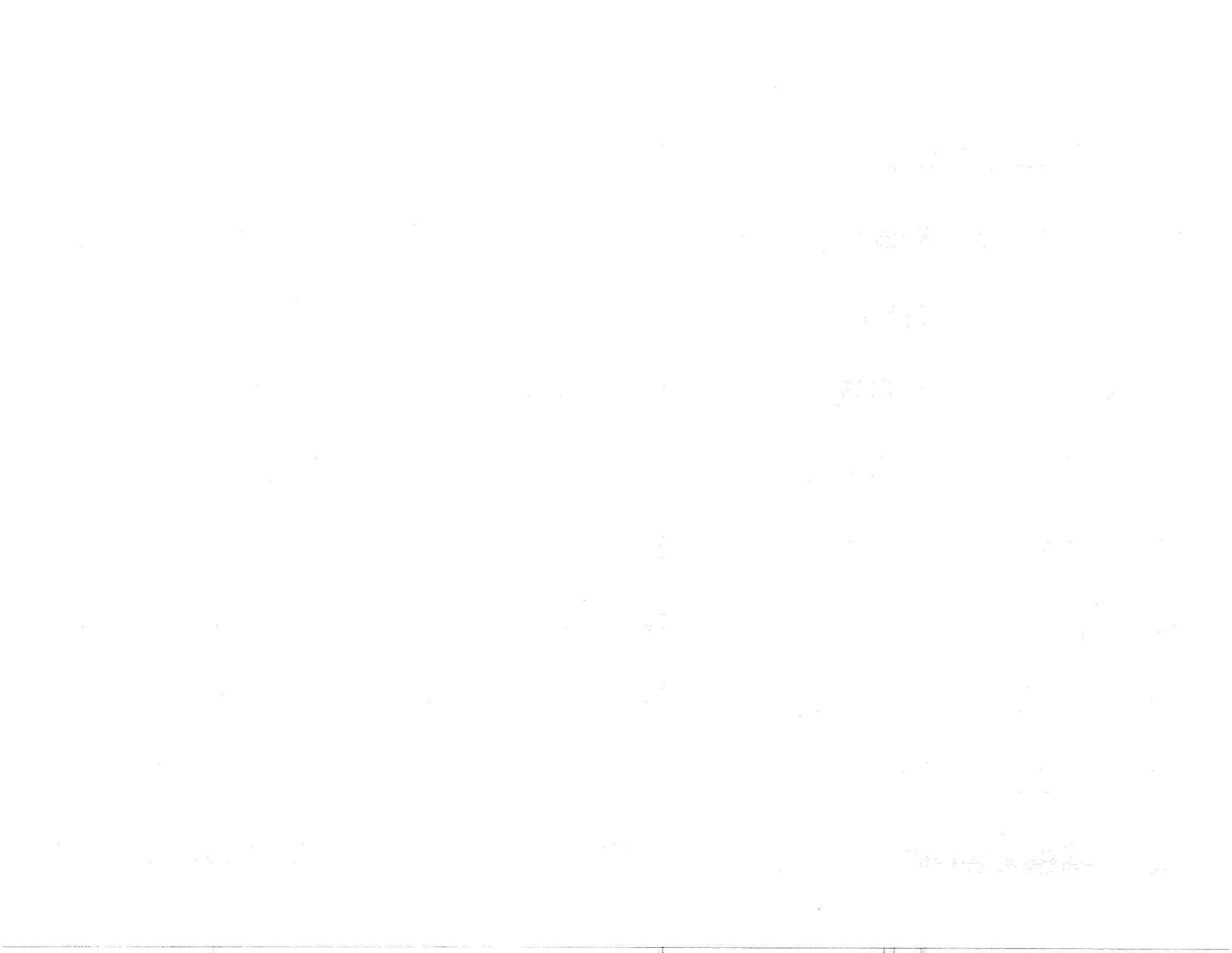
2013-15

PAGE
 PROD FILE

PICS SYSTEM: BUDGET PREPARATION

PACKAGE: 100 - Personnel Management

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
0000585 OA C0103 AA OFFICE SPECIALIST 1	1-	1.00-	24.00-	05	2,352.00		56,448- 45,710-			56,448- 45,710-
0000585 OA C0104 AA OFFICE SPECIALIST 2	1	1.00	24.00	03	2,451.00		58,824 46,345			58,824 46,345
0000592 MMN X0854 AA PROJECT MANAGER 1	1-	1.00-	24.00-	02	4,159.00		99,816- 57,298-			99,816- 57,298-
0000592 MMN X0871 AA OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	02	4,364.00		104,736 58,612			104,736 58,612
0000650 OA C0104 AA OFFICE SPECIALIST 2	1-	.75-	18.00-	05	2,662.00		47,916- 43,431-			47,916- 43,431-
0000650 OA C0104 AA OFFICE SPECIALIST 2	1	1.00	24.00	05	2,662.00		63,888 47,697			63,888 47,697
0000652 OA C5911 EA HEALTH CARE INVESTIGTR/ADVISR	1	1.00	24.00	04	7,834.00		188,016 80,865			188,016 80,865
TOTAL PICS SALARY							211,284			211,284
TOTAL PICS OPE							87,080			87,080
TOTAL PICS PERSONAL SERVICES =	1	1.25	30.00				298,364			298,364



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

Pharmacy, Board of
2013-15 Biennium

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

<i>Source</i>	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
Other Funds						
Business Lic and Fees	4,230,875	5,132,360	5,132,360	7,038,568	7,038,568	-
Non-business Lic. and Fees	94,119	319,240	319,240	377,630	377,630	-
Fines and Forfeitures	471,718	280,000	280,000	260,000	260,000	-
Interest Income	20,551	20,000	20,000	20,000	20,000	-
Other Revenues	44,195	43,800	43,800	22,400	22,400	-
Tsfr To Oregon Health Authority	(264,409)	(284,390)	(284,390)	(319,775)	(319,775)	-
Total Other Funds	\$4,597,049	\$5,511,010	\$5,511,010	\$7,398,823	\$7,398,823	-

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

Pharmacy, Board of
2013-15 Biennium

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

<i>Source</i>	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
Other Funds						
Business Lic and Fees	4,230,875	5,132,360	5,132,360	7,038,568	7,038,568	-
Non-business Lic. and Fees	94,119	319,240	319,240	377,630	377,630	-
Fines and Forfeitures	471,718	280,000	280,000	260,000	260,000	-
Interest Income	20,551	20,000	20,000	20,000	20,000	-
Other Revenues	44,195	43,800	43,800	22,400	22,400	-
Tsfr To Oregon Health Authority	(264,409)	(284,390)	(284,390)	(319,775)	(319,775)	-
Total Other Funds	\$4,597,049	\$5,511,010	\$5,511,010	\$7,398,823	\$7,398,823	-

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

Source	Fund	ORBITS Revenue Acct	2009-2011 Actual	2011-13 Legislatively Adopted	2011-13 Estimated	2013-15		
						Agency Request	Governor's Recommended	Legislatively Adopted
Animal Euthanasia	4360	0205	1,475	2,700	2,700	2,700		
Certified Pharmacy Technician	4360	0205	405,425	574,500	574,500	574,500		
Charitable Pharmacy	4360	0205	300	400	400	2,700		
Controlled Substance	4360	0205	109,540	335,800	335,800	339,600		
County Health Clinic	4360	0205	21,675	17,800	17,800	27,600		
Drug Distribution Agents	4360	0205	14,930	22,400	22,400	22,400		
Hospital Drug Room	4360	0205	13,150	6,000	6,000	6,000		
Home Dialysis	4360	0205	3,000	3,000	3,000	3,000		
Intern	4360	0205	22,050	35,000	35,000	35,000		
Manufacturers	4360	0205	529,700	586,560	586,560	1,173,120		
Med Device/Equip/ Gases-Class C	4360	0205	30,075	37,700	37,700	42,500		
Non-Prescript – Drug Outlet- Class A	4360	0205	231,825	252,700	252,700	252,700		
Non-Prescript – Drug Outlet- Class B	4360	0205	8,435	13,700	13,700	13,700		
Non-Prescript – Drug Outlet- Class D	4360	0205	100	200	200	200		
Pharmacist	4360	0205	1,358,245	2,358,648	2,358,648	2,400,000		
Pharmacy Technician	4360	0205	82,590	84,000	84,000	84,000		
Precursor	4360	0205	625	2,400	2,400	2,400		

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

Prophylactic/Contraceptive	4360	0205	1,700	2,400	3,400	3,400	
Remote Dispensing	4360	0205	1,000	1,000	1,000	3,000	
Retail/Institutional Drug Outlet	4360	0205	452,575	749,400	749,400	749,400	
Supervising Physician Dispensing Outlet	4360	0205			7200	12,000	
Wholesalers	4360	0205	531,670	516,000	516,000	1,032,000	
Delinquent Fees	4360	0505	95,345	60,000	60,000	60,000	
Reciprocity	4360	0205	114,800	60,000	60,000	60,000	
NAPLEX/Exams	4360	0205	40,265	50,000	50,000	50,000	
Civil Penalty	4360	0505	376,973	200,000	200,000	200,000	
Interest Income	4360	0605	20,551	20,000	20,000	20,000	
NSF	4360	0975	525	400	400	400	
Misc Fees	4360	0975	26,349	15,000	15,000	15,000	
Laws & Rules	4360	0975	17,320	7,000	7,000	7,000	
Prescription Drug Monitoring Fee – transfer to OHA	4360	0205	259,125	260,145	260,145	260,145	
Prescription Drug Monitoring Fee - 10% retention	4360	0205	25,913	26,014.5	26,014.5	26,015	
Workforce Data Collection - transfer to OHA	4360	0210	51,635	53,000	53,000	53,000	
Fingerprinting fees – transfer to OSP depending on volume	4360	0352	42,484	208,000	208,000	208,000	

Agency Request

Governor's Balanced

Legislatively Adopted

Budget Page 115

Pharmacy, Board of

Agency Number: 85500

**Program Unit Appropriated Fund Group and Category Summary
2013-15 Biennium
Board of Pharmacy**

**Version: Y - 01 - Governor's Budget
Cross Reference Number: 85500-001-00-00-00000**

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
LIMITED BUDGET (Excluding Packages)						
PERSONAL SERVICES						
Other Funds	3,304,274	3,421,227	3,421,227	3,777,380	3,761,950	-
SERVICES & SUPPLIES						
Other Funds	1,087,766	1,470,376	1,470,376	1,470,376	1,470,376	-
CAPITAL OUTLAY						
Other Funds	5,822	-	-	-	-	-
SPECIAL PAYMENTS						
Other Funds	81,118	220,000	220,000	220,000	220,000	-
TOTAL LIMITED BUDGET (Excluding Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,467,756	5,452,326	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
LIMITED BUDGET (Essential Packages)						
010 NON-PICS PSNL SVC / VACANCY FACTOR						
PERSONAL SERVICES						
Other Funds	-	-	-	(5,824)	(5,829)	-
031 STANDARD INFLATION						
SERVICES & SUPPLIES						
Other Funds	-	-	-	117,658	84,631	-
060 TECHNICAL ADJUSTMENTS						

Pharmacy, Board of

Agency Number: 85500

**Program Unit Appropriated Fund Group and Category Summary
2013-15 Biennium
Board of Pharmacy**

**Version: Y - 01 - Governor's Budget
Cross Reference Number: 85500-001-00-00-00000**

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
PERSONAL SERVICES						
Other Funds	-	-	-	37,027	36,835	-
SPECIAL PAYMENTS						
Other Funds	-	-	-	(37,027)	(37,027)	-
TOTAL LIMITED BUDGET (Essential Packages)						
Other Funds	-	-	-	111,834	78,610	-
LIMITED BUDGET (Current Service Level)						
Other Funds	4,478,980	5,111,603	5,111,603	5,579,590	5,530,936	-
AUTHORIZED POSITIONS	20	18	18	18	18	-
AUTHORIZED FTE	19.00	17.75	17.75	17.75	17.75	-
LIMITED BUDGET (Policy Packages)						
PRIORITY 0						
091 STATEWIDE ADMINISTRATIVE SAVINGS						
PERSONAL SERVICES						
Other Funds	-	-	-	-	(3,693)	-
SERVICES & SUPPLIES						
Other Funds	-	-	-	-	(1,503)	-
092 PERS TAXATION POLICY						
PERSONAL SERVICES						
Other Funds	-	-	-	-	(10,316)	-
093 OTHER PERS ADJUSTMENTS						

Program Unit Appropriated Fund Group and Category Summary
 2013-15 Biennium
 Board of Pharmacy

Version: Y - 01 - Governor's Budget
 Cross Reference Number: 85500-001-00-00-00000

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
PERSONAL SERVICES						
Other Funds	-	-	-	-	(82,530)	-
100 PERSONNEL MANAGEMENT						
PERSONAL SERVICES						
Other Funds	-	-	-	301,027	299,633	-
AUTHORIZED POSITIONS	-	-	-	1	1	-
AUTHORIZED FTE	-	-	-	1.25	1.25	-
102 PAPERLESS RECORDS RETENTION – PART 1						
SERVICES & SUPPLIES						
Other Funds	-	-	-	85,000	85,000	-
TOTAL LIMITED BUDGET (Policy Packages)						
Other Funds	-	-	-	386,027	286,591	-
AUTHORIZED POSITIONS	-	-	-	1	1	-
AUTHORIZED FTE	-	-	-	1.25	1.25	-
TOTAL LIMITED BUDGET (Including Packages)						
Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
AUTHORIZED POSITIONS	20	18	18	19	19	-
AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-
OPERATING BUDGET						
Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
AUTHORIZED POSITIONS	20	18	18	19	19	-

**Program Unit Appropriated Fund Group and Category Summary
2013-15 Biennium
Board of Pharmacy**

**Version: Y - 01 - Governor's Budget
Cross Reference Number: 85500-001-00-00-00000**

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-
TOTAL BUDGET						
Other Funds	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
AUTHORIZED POSITIONS	20	18	18	19	19	-
AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-

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.

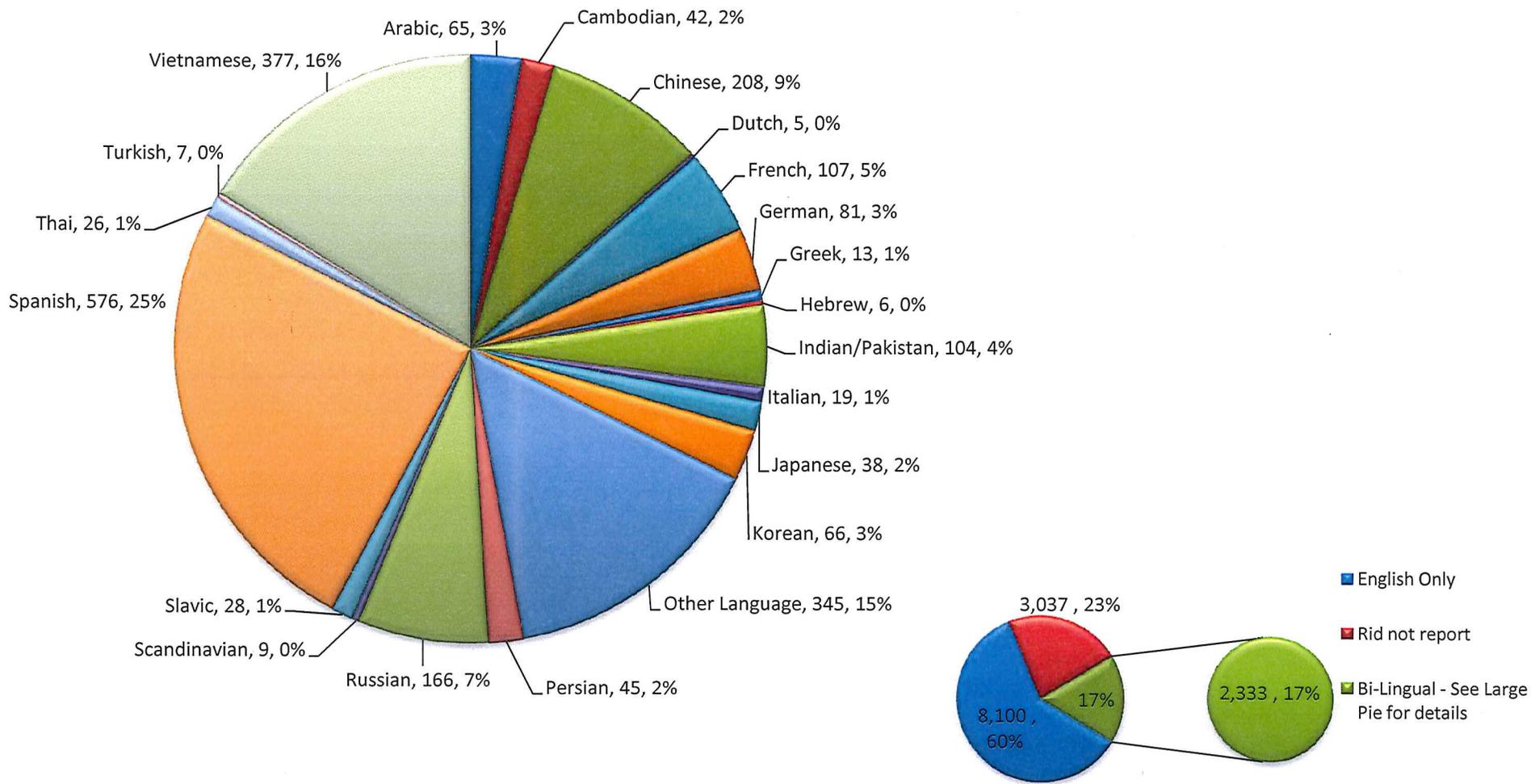
The Board and its management further adopts and affirms the Governor's beliefs that the state has a commitment to the right of all persons to work and advance on the basis of merit, ability, and potential.

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.

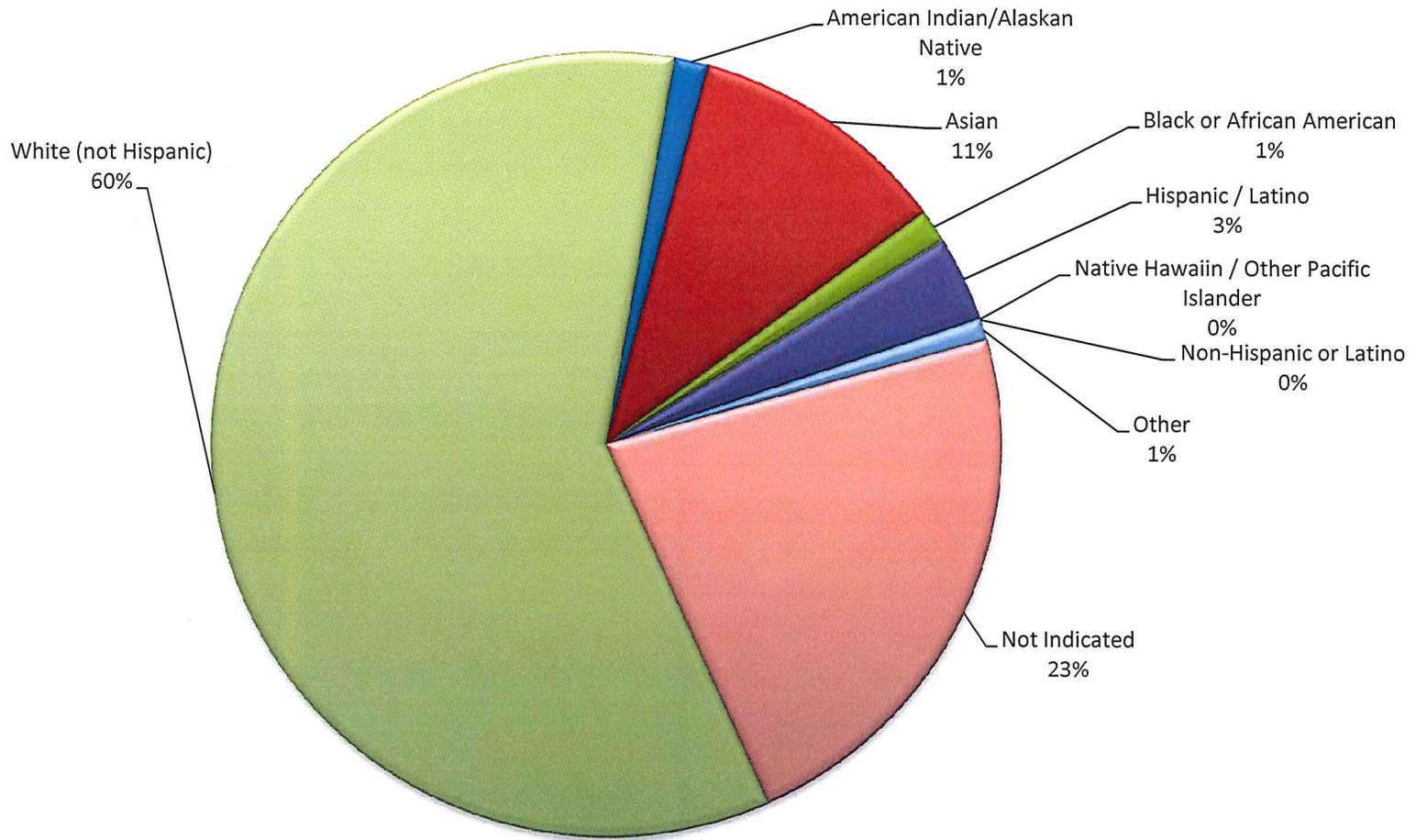
The agency has had only two staff position turnovers during the last two years. The most recent hire is a person of color and bilingual. We have increased multicultural training through staff meetings and strive to seek diversity and improve cultural competency within our staff and Board Members as much as possible. Two new pharmacist Board Members were recently appointed to the board by Governor Kitzhaber, one of whom is Asian and one of whom is Latino. The Board is currently developing material to be used to reach out to multicultural communities within the state. A natural outcome of this project is an increased understanding about diversity and cultural differences. As staff vacancies occur, our recruitment efforts will continue to seek candidates that bring diversity to our staff.

We have conducted training within existing limitation and plan for additional training in the 2013-15 biennium.

Board of Pharmacy - 2012 Bi-lingual Information - Active Licensees



Board of Pharmacy - 2012 Ethnic Breakdown of Active Licensees





Oregon State Board of Pharmacy

Published to promote compliance of pharmacy and drug law

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No. 506: Drug Disposal Sites

Drug disposal sites for consumers sponsored by the various law enforcement agencies are springing up around the state. The list was updated in June 2012 and is updated periodically as new sites are added and existing sites closed. You can find the most current updated list on the Oregon State Board of Pharmacy Web site at www.pharmacy.state.or.us under *Topics of Interest: Law Enforcement Drug Disposal Sites* or go directly to www.pharmacy.state.or.us/Pharmacy/Imports/ORUnwantedDrugDropOffSites.pdf.

Pharmacies should be familiar with this list. Keep it handy and be prepared to provide the list or information on how to access the list to patients and customers when appropriate.

No. 507: New Board Members

Two new Board members have been appointed by Governor John Kitzhaber. **Roberto Linares** is a pharmacist and is on the faculty at the Oregon State University (OSU) College of Pharmacy. He has extensive experience in community retail pharmacy practice. Having graduated with a bachelor of science degree in pharmacy from OSU in 1991, Mr Linares has worked for Bi-Mart in Cottage Grove, OR, and in Monmouth, OR. In 2004 he accepted the position of pharmacy practice instructor at his alma mater. He has continued his community practice part-time doing relief staffing for several community pharmacies and medical clinics. Mr Linares is a member of the American Pharmacists Association and the American Association of Colleges of Pharmacy where he served as OSU College of Pharmacy's delegate to last year's annual conference. His term on the Board began July 1, 2012.

Brad Fujisaki is a pharmacist on the faculty at Pacific University College of Health Professions School of Pharmacy. He is a graduate of the 1999 OSU College of Pharmacy with a bachelor of science degree in pharmacy and received his PharmD degree from the University of Colorado – Denver Health Sciences Center in 2008. Dr Fujisaki completed a general residency at the Portland VA Medical Center in 2001 and a specialty residency at the Oregon Health and Science University (OHSU) Hospitals and Clinics in 2002. He held the position of information systems pharmacist at OHSU prior to taking his current full-time position as assistant professor at Pacific University in 2006. His term also began July 1, 2012.

These new appointees are assigned to serve four-year terms on the Board and are eligible for reappointment at the end of this term. They replace the very active and now outgoing pharmacist Board members Ann Zweber of OSU and Larry Cartier of Wellpartner, both of whom finished their terms June 30, 2012.

No. 508: Pharmaceutical Manufacturer and Wholesaler Registration Fee

As most pharmacists and technicians will remember, the Board raised license fees in 2011 for pharmacists, technicians, and pharmacies with its operating budget. At that time, the Board's budget presentation included a two-part fee increase, which would raise certain fees in 2011 and certain others in 2013. As the staff prepares for the 2013 budget presentation, the second phase of the fee increase is being put into motion. That is, fees for the pharmaceutical manufacturing and wholesale drug outlets will be proposed for increase in 2013.

Organizations representing the manufacturers and wholesalers were recently notified of the Board's intent. A memo was sent to these organizations on June 18, 2012, with the following message:

... The Oregon Board of Pharmacy established the present registration fees in 2001. The fee increase is needed as a result of recent modernization of administrative rules, increased compliance matters over the past several years required to ensure the integrity, security and safety of drugs and prescription devices distributed into or within Oregon and eleven years of inflation.

Costs associated with the investigations and staffing for the regulation of manufacturing and wholesale drug outlets continue to increase. In order to continue to maintain the same level of oversight, protection and regulation, a registration fee increase is included with the Board's 2013-2015 proposed budget, to be considered by 2013 Legislature. If authorized, the annual, registration fee for manufacturing and wholesale drug outlets will increase from \$400 to \$800. If the proposed budget is approved,

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FDA Warned Medical Practices About Counterfeits in US and Risks to Patients

In April 2012, Food and Drug Administration (FDA) sent letters to medical practices in several states requesting that they stop administering drugs purchased from any foreign or unlicensed source. FDA's letters were sent in response to the discovery that the medical practices purchased medications from foreign or unlicensed suppliers that sold illegal prescription medications. FDA has advised that these medical practices are putting patients at risk of exposure to medications that may be counterfeit, contaminated, improperly stored and transported, ineffective, and dangerous.

In an FDA statement, the agency urges the health care community "to examine their purchasing practices to ensure that they buy directly from the manufacturer or from licensed wholesale drug distributors in the United States." Further, FDA reminds health care providers, pharmacies, and wholesalers/distributors that they are valuable partners in protecting consumers from the threat of unsafe or ineffective products that may be stolen, counterfeit, contaminated, or improperly stored and transported. FDA advises that the receipt of suspicious or unsolicited offers from unknown suppliers should be questioned, and extra caution should be taken when considering such offers.

FDA notes that the "Verify Wholesale Drug Distributor Licenses" FDA Web page, available at www.fda.gov/Drugs/DrugSafety/DrugIntegrityandSupplyChainSecurity/ucm281446.htm, may be used to verify that a wholesale drug distributor is licensed in the state(s) where it is conducting business.

The FDA warning letters were sent following two incidences of counterfeit injectable cancer drugs found in US medical practices, one in February 2012, involving counterfeit Avastin® 400 mg/16 mL, and another in April 2012, involving a counterfeit version of Roche's Altuzan® 400 mg/16 ml (bevacizumab).

More information and a list of the medical practices that were sent warning letters are available on the FDA Web site at www.fda.gov/Drugs/DrugSafety/DrugIntegrityandSupplyChainSecurity/ucm299920.htm.

Rethink the Vial



This column was prepared by the Institute for Safe Medication Practices (ISMP). ISMP is an independent nonprofit agency 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 is a federally certified patient safety organization, providing legal protection and confidentiality for submitted patient safety data and error reports. ISMP is also an FDA MedWatch partner. Call 1-800/FAIL-SAF(E) to report medication errors to the ISMP Medication Errors Reporting Program or report online at www.ismp.org. ISMP address: 200 Lakeside Dr, Suite 200, Horsham, PA 19044. Phone: 215/947-7797. E-mail: ismpinfo@ismp.org.

Recently, ISMP has been receiving many reports from consumers who report the pharmacy "shorted them" on a variety of opioid pre-

scriptions. They report that when they call the pharmacy to complain about the missing number of tablets or capsules the pharmacy staff insists the proper quantity was dispensed. ISMP also receives reports from pharmacists reporting this same situation. The concern is that pharmacy personnel may be diverting the medication, the patient may be seeking more medication than what was prescribed, or some of the medication may be taken by someone else in the patient's home.

In the US, we dispense almost all oral solid drugs as loose tablets or capsules in a plastic vial that is labeled for the patient. This manner of dispensing makes diversion of a few tablets or capsules relatively easy. However, in many other countries, unit-dose and unit-of-use packaging is widely used.

It seems to reason that if unit-of-use, manufacturer-sealed containers or individual unit-dose packages of medications were used in the US for these drugs, diversion and/or speculation of diversion could be reduced. Manufacturers could produce unit-dose or unit-of-use packages, in numbered strips for ease of inventory and dispensing. Patients could be asked to sign for and agree to the amount dispensed at the point-of-sale. The numbered packaging would also help patients at home know if they had taken their medication or possibly alert them to diversion within their home. Of course, prescribers would need to prescribe quantities available in patient compliance packs or in multiples of that packaging, and insurance companies would have to pay for this specialized packaging.

Unit-of-use packs would provide other safety benefits. For example, patients would be able to verify the drug name on the label for each dose, which would add a redundancy in checking the pharmacy label to what was actually dispensed. Also, the manufacturer could print and attach the patient information sheet and/or medication guide to the package the patient receives, eliminating extra work in the pharmacy to print and supply these mandated education sheets to the patient.

It is evident that further steps must be taken to reduce and minimize abuse of prescription drugs. It is critical that education be provided to patients, caregivers, and health care providers to increase awareness about the dangers of prescription drug abuse and about ways to appropriately prescribe, dispense, store, and dispose of prescription medications. Development and deployment of consumer-friendly and environmentally responsible prescription drug disposal programs may also help to limit diversion (as well as reduce the risk of accidental ingestion) of drugs by family members and friends. FDA must continue its efforts to require new concepts for risk evaluation and mitigation strategies and provider education for opioid drugs. For more information on understanding prescription drug abuse, and to request *Parents' Guide to Understanding Prescription Drug Abuse* brochures for distribution to your patients, visit www.SafeGuardMyMeds.org.

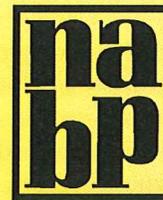
Counterfeit Vicodin ES Sold Via Rogue Internet Drug Outlet, Abbott Reports

In March 2012, Abbott warned consumers and health care providers about counterfeit Vicodin® ES purchased via the Internet. Abbott reports that the counterfeit product drug and package do not match that of Abbott's FDA-approved Vicodin ES (hydrocodone bitartrate and acetaminophen). Descriptions and images of the counterfeit product and authentic Vicodin ES are shown in a consumer alert posted on the Abbott Web site at www.abbott.com/vicodin-consumer-alert.htm. Abbott advises that anyone who has the counterfeit ver-

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



sion should stop taking the product. Further, consumers who suspect a product to be counterfeit or have questions about the legitimacy of Vicodin ES are encouraged to make a report to FDA Office of Criminal Investigations (OCI) by calling 800/551-3989 or by completing the online form on the OCI Web site at www.accessdata.fda.gov/scripts/email/oc/oci/contact.cfm.

PSM LEADER's Guide Offers Tips for Protecting Patients from Counterfeits

The Partnership for Safe Medicines (PSM) released a guide to assist health care providers in protecting patients from counterfeit drugs and recognizing the signs that may indicate use of counterfeits. Three versions of the *LEADER's Guide* – including one for nurses, one for doctors, and another specific to pharmacists – are available for download from the PSM Web site at www.safemedicines.org/resources-for-healthcare-professionals.html. Each guide provides tips specific to these health care provider roles and includes guidance for safe sourcing of medications, evaluating suspect medications, educating patients about counterfeit drugs and the risks of ordering drugs online, and reporting suspected counterfeit drugs.

FDA Urges Providers to Help Prevent Children's Accidental Exposure to Fentanyl Patches

FDA issued a safety alert reminding patients, caregivers, and health care providers to appropriately store, use, and dispose of fentanyl patches to prevent children's accidental exposure to the medication, which is potentially life-threatening. FDA recently evaluated a series of 26 cases of pediatric accidental exposures to fentanyl patches reported over the past 15 years, and determined that 10 of the cases resulted in death, and 12 in hospitalization. In addition, 16 of the 26 cases occurred in children two years old or younger.

FDA warns that young children may be at risk for accidental exposure when fentanyl patches are discarded in trash receptacles, or when children find lost or improperly stored patches. Young children can be harmed when they place the patches in their mouths or stick the patches to their skin. In addition, young children are at risk of exposure when being held by someone wearing a partially detached patch that can then transfer to the child. Exposure of young children to a fentanyl patch can lead to serious adverse events and even death, due to the amount of fentanyl present in the patches. FDA stresses that harm can even occur with used patches because they may still contain a considerable amount of fentanyl.

To prevent accidental exposure, FDA advises that patients securely store needed fentanyl patches out of children's reach and sight. When applying a patch, FDA also recommends that patients consider covering the fentanyl patch with an adhesive film to make sure the patch does not come off. Finally, FDA recommends checking throughout the day to make sure that the patch is still in place.

Further, FDA advises that used or unneeded patches are properly disposed. FDA recommends that the adhesive side of the patch should be folded together and then the patch should be flushed down the toilet. FDA notes that the agency "recognizes that there are environmental concerns about flushing medicines down the toilet. However, FDA believes that the risk associated with accidental exposure to this strong narcotic medicine outweighs any potential risk associated with disposal by flushing. When the patches are no longer needed, disposing by flushing completely eliminates the risk of harm to people in the home."

FDA urges health care providers to educate patients and their caregivers about the appropriate use and disposal of fentanyl patches. FDA's consumer Web page provides detailed information for patients and caregivers and is available at www.fda.gov/ForConsumers/ConsumerUpdates/ucm300803.htm. Providers, patients, and caregivers are also encouraged to review the fentanyl patch product label for instructions. The FDA safety alert is available at www.fda.gov/Drugs/DrugSafety/ucm300747.htm. Additional consumer information about safe medication use and storage, and the importance of proper disposal of unneeded medications, is available on the AWA_Rx_E® Web site at www.awarxerx.org/informedSiteMap.php.

Providers Asked to Advise Patients of Acetaminophen Safe Use Steps

With a world of conditions and hundreds of medicines, the Acetaminophen Awareness Coalition asks pharmacists and other health care providers to educate patients and caregivers about the proper use of medications containing acetaminophen. As the most common drug ingredient in America, acetaminophen can be found in over 600 medicines, including many prescription and over-the-counter medicines. The coalition notes that when used as directed, acetaminophen is safe and effective. The coalition asks providers to advise patients that there is a daily dosage limit for acetaminophen and that taking more than directed is an overdose and can lead to liver damage.

The coalition calls on health care providers to participate in the Know Your Dose campaign, by reminding all patients and caregivers to (1) always read and follow the labels on their medicines; (2) know if a medicine contains acetaminophen; and (3) never take or administer two medicines that contain acetaminophen at the same time. Additional medication safety tips for consumers and more information about the Know Your Dose campaign are available on the "OTC Medication Use" page of the AWA_Rx_E Web site at www.awarxerx.org/OTCMedUse.php. The AWA_Rx_E consumer protection program and the National Association of Boards of Pharmacy® (NABP®) are part of the Acetaminophen Awareness Coalition.



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

CPE Monitor™ integration is underway. Soon all Accreditation Council for Pharmacy Education (ACPE)-accredited providers will require you to submit your NABP e-Profile ID, assigned when you set up your NABP e-Profile, along with your date of birth (MMDD), in order to obtain continuing pharmacy education (CPE) credit for any ACPE-accredited activity. Many have already begun to do so.

Visit www.MyCPEmonitor.net to set up your 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.

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the formal public rulemaking process to implement the fee increase will be conducted following the legislative session.

Please note that fee increases for all other categories were implemented in 2011. It was determined at that time that increases for manufacturers and wholesalers, also necessary to ensure sustainability for the agency, would be delayed until the 2013 budget cycle.

If you have questions about this notice, contact the Board by e-mail at: pharmacy.board@state.or.us.

No. 509: Veterinary Prescriptions

By Terese DeManuelle, DVM. Dr DeManuelle is a board-certified veterinary dermatologist and is the owner of Allergy & Dermatology Veterinary Referral Center in Milwaukie, OR.

An increasing number of veterinarians have serious concerns that some community pharmacists have changed veterinary prescriptions: directing the veterinary client to a different drug, changing the prescribed dosage, or advising the client to lower a drug's dosage.

The community pharmacists lowering the dosage of thyroid medications is perhaps the most common problem we have encountered. But we also have learned of a community pharmacist who counseled a client to lower the dosage of phenobarbital for an epileptic dog and another who switched insulin for a diabetic cat even though the prescribed insulin and the redirected insulin were not interchangeable. When instances like this occur, several things happen:

1. The veterinary patient receives a drug not indicated for the animal's condition or sub-therapeutic treatment for the condition, very possibly jeopardizing – and at times seriously compromising – the animal patient's health.
2. Because an animal may receive sub-therapeutic treatment due to a community pharmacist's decision, the dog or cat might have to be on the medication for an additional period of time – all at extra cost to the veterinary client.
3. The community pharmacist's message to the veterinary client is that the veterinarian does not know what he or

she is doing (ie, often overmedicating the patient – when, in fact, it is the community pharmacist who lacks the sufficient clinical knowledge and understanding of an animal's physiological reaction to drugs to determine which drug and/or dosage is most appropriate for the patient).

It is important for community pharmacists to understand that cats and dogs are not little people. I know, this sounds so simple – and reasonable. But our experience as veterinarians tells otherwise – that some community pharmacists are not making the connection that most animal patients are able to accept a higher dosage of a drug than human patients.

If you have a concern about a drug prescribed by a veterinarian, please call the prescribing veterinarian and ask for clarification about the prescription. We are available to discuss any concerns with you, as we want to ensure that our patients receive the best and most appropriate treatment they need and deserve. You should only change drugs and/or the medication's dosage after fully discussing the issue with the veterinarian and obtaining his or her authorization. This is best for the veterinary patient and best for the animal's owner.

Editorial Comment: *Board of Pharmacy staff has been in contact with the Oregon Veterinary Medical Association, the American Veterinary Medical Association, and the Oregon Veterinary Medical Examining Board to discuss this issue. So far, no formal complaint has been received by the Board against an Oregon pharmacist for inappropriately changing a veterinary prescription or advising a veterinary client.*

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No. 510: New Drug Outlet Conduct Rules

Many pharmacists may remember the Oregon State Board of Pharmacy's Working Conditions Survey that was conducted in July 2011. The survey was provided electronically to 4,813 Oregon-licensed pharmacists and the Board received 1,401 responses for a response rate of 29%. Remarkably, pharmacists who responded to the survey provided over 500 written comments. The Board has posted the survey results on its Web site at www.oregon.gov/pharmacy/Imports/OBOP-Pharmacy_Working_Conditions_Survey_Results11.11.pdf.

Earlier this year, in response to information received by the survey, the Board adopted new rules addressing the operation of pharmacies to ensure patient safety. Following is a summary of the significant provisions of OAR 855-041-0016:

1. Prohibits advertising or soliciting that may jeopardize patient health, safety, or welfare;
2. Prohibits advertising that is false, fraudulent, deceptive, or misleading;
3. Prohibits the outlet from incenting or inducing the transfer of a prescription absent professional rationale;
4. Requires the outlet to provide sufficient personnel to prevent fatigue, distractions, or conditions that interfere with a pharmacist's ability to practice safely;
5. Requires the outlet to provide opportunities for uninterrupted rest periods and meal breaks;
6. Requires the outlet to provide adequate time for a pharmacist to complete professional duties and responsibilities; and
7. Prohibits introduction of external factors such as productivity quotas or programs such as time limits that interfere with the pharmacist's ability to provide appropriate professional services.

This list is provided only as a summary. The complete text of the rule can be found on the Board's Web site at www.oregon.gov/pharmacy/pages/laws_rules.aspx#2012_RULE_CHANGES.

No. 511: Comment Re: August 2012 Newsletter Article No. 509: Veterinary Prescriptions

By Terry Crowder, RPh, PhD. Dr Crowder is a practicing community pharmacist for Wal-Mart in Salem, OR, with experience in veterinary pharmacy.

As community pharmacists increasingly dispense both human and traditional veterinary prescription products for animals it is impor-

tant that we have the education necessary to best serve our animal patients. For instance, we should know that most cats need prednisolone and not prednisone, that dogs really do require 250 mcg or 500 mcg doses of levothyroxine (not 0.025 or 0.050 mcg), that horses require hyaluronic acid for joint injections (not hyaluronidase), and that many veterinarians tell feline owners to use Lantus® for up to six months when stored in the refrigerator (based upon veterinary studies). Further, we need to know that "s.i.d." means once daily.

Many of us did not receive veterinary pharmacy education when in school, so it is important that we discover this education on our own or encourage our employers to provide access to continuing education. As a suggestion, the education should not only cover the medications used in veterinary pharmacy, but should also consider the perspectives of veterinary practice, legal implications for dispensing to animals, and information regarding how we as pharmacists can best provide support to animal owners and veterinarians. It is also important to consider having good reference material handy. My personal favorite is *Plumb's Veterinary Drug Handbook* as it contains the contributions from many members of the Society of Veterinary Hospital Pharmacists.

Finally, please encourage both animal owners and veterinarians to submit medication errors or product issues to Food and Drug Administration (FDA) using Form 1932a. If a medication error has resulted in an adverse drug event (ADE), the veterinarian or animal owner is encouraged to submit a report to the drug or product sponsor, which in turn will report the event to FDA via electronic submission. All names and other identifying information within the ADE reports are confidential. For more information about ADE reporting for industry and veterinarians/consumers, please see the FDA Web site at www.fda.gov/AnimalVeterinary/SafetyHealth/ReportaProblem/default.htm.

No. 512: Fifty-Year Pharmacists

The Board of Pharmacy 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. Following is a list of pharmacists who reached this milestone in 2011 and 2012.

Dean D. Schrunk	April 13, 1961	Scio, OR
Mickey E. Simonson	April 13, 1961	Vancouver, WA
Gary D. Woodson	April 13, 1961	Superior, MT
Leonard Burda	July 13, 1961	Portland, OR

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AHRQ Toolset Can Assist Pharmacies Using e-Prescribing

A toolset released by the Agency for Healthcare Research and Quality (AHRQ) can assist independent pharmacies with the implementation of e-prescribing and may also provide useful guidance to those pharmacies already using e-prescribing. The toolset for independent pharmacies consists of seven chapters that provide guidance on topics ranging from planning the implementation process and launching the system, to troubleshooting common problems and moving into more advanced pharmacy services, states AHRQ. Flyers for use in communicating the launch to patients, templates for communicating with providers about the launch, tools for assessing pharmacy workflow, and a spreadsheet to determine return-on-investment, among other tools, are also available to pharmacies. The toolset can be downloaded from the AHRQ Web site at http://healthit.ahrq.gov/portal/server.pt/community/health_it_tools_and_resources/919/a_toolset_for_e-prescribing_implementation_in_independent_pharmacies/30595.

FDA Database Provides Information on Pediatric Medications

A Food and Drug Administration (FDA) database provides information on pediatric medications, making it easier for both health care providers and caregivers to locate this information. The Pediatric Labeling Information Database is a one-stop resource, where providers and caregivers can search for information by the product's commercial or chemical name, or by the condition for which it was studied. The database was developed by FDA's Office of Pediatric Therapeutics (OPT), in collaboration with the Center for Drug Evaluation and Research. The OPT also provides a Safety Reporting page with information on products that have been tied to safety problems that specifically relate to children. Additional information and a link to the database is available in the Consumer Updates section of the FDA Web site at www.fda.gov/ForConsumers/ConsumerUpdates/ucm305040.htm.

Inattentional Blindness: What Captures Your Attention?

This column was prepared by the Institute for Safe Medication Practices (ISMP). ISMP is an independent nonprofit agency 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 is a federally certified patient safety organization, providing legal protection and confidentiality for submitted patient safety data and error reports. ISMP is also an FDA MedWatch partner. Call 1-800/FAIL-SAF(E) to report medication errors to the ISMP Medication Errors Reporting Program or report online at www.ismp.org. ISMP address: 200 Lakeside Dr, Suite 200, Horsham, PA 19044. Phone: 215/947-7797. E-mail: ismpinfo@ismp.org.

A pharmacist enters a prescription for methotrexate daily into the pharmacy computer. A dose warning appears on the screen. The pharmacist reads the warning, bypasses it, and dispenses the medication as entered. The patient receives an overdose of the medication and dies.

This error, and many more, have happened because the person performing the task fails to see what should have been plainly visible, and later, they cannot explain the lapse.¹ People involved in these errors have been labeled as careless and negligent. But these types of accidents are common – even with intelligent, vigilant, and attentive people. The cause is usually rooted in inattentional blindness.¹

Accidents happen when attention mistakenly filters away important information and the brain fills in the gaps with what is aptly referred to as a “grand illusion.”² Thus, in the example above, the brain of the pharmacist filtered out important information on the computer screen, and filled in the gaps with erroneous information that led him to believe he had read the warning appropriately.

Inattentional blindness is more likely to occur if part of your attention is diverted to secondary tasks, like answering the phone while entering prescriptions into the computer, or even thinking about your dinner plans while transcribing an order.

Low workload causes boredom and reduces the mental attention given to tasks, as does carrying out highly practiced tasks, such as counting out medication. We spend a large majority of our waking life functioning with the equivalent of an automatic pilot, with occasional conscious checks to ensure tasks are being carried out properly. This makes us particularly prone to inattentional blindness.

Our past experiences also teach us what is relevant. Errors occur when new or unusual circumstances happen in highly familiar situations. The pharmacist who did not notice important information on a computer warning had rarely encountered a clinically significant computer alert. The pharmacist had subconsciously learned that there was nothing important to see when reading alerts. Nothing had ever happened, so attention was automatically filtered away from the details to conserve mental processing.

Conspicuity is the degree to which an object or piece of information “jumps out” and captures your attention. The best way to achieve this effect is through use of contrast, color, or shape to call attention to differences in packaging or text.

It is difficult to reduce the risk of inattentional blindness, as it is an involuntary and unnoticed consequence of our adaptive ability to defend against information overload. Error-reduction strategies such as education, training, and rules are of little value. Instead, efforts should center on increasing conspicuity of critical information, and decreasing diversions of attention and secondary tasks when carrying out complex tasks.

1. Green M. “Inattentional blindness” and conspicuity. Visual Expert. 2004. Accessed at www.visualexpert.com/Resources/inattentional-blindness.html, March 1, 2012.

2. Angier N. Blind to change, even as it stares us in the face. The New York Times. April 1, 2008.

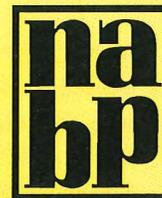
Know Your Dose Game Teaches Safe Acetaminophen Use

As part of the Know Your Dose campaign, the Acetaminophen Awareness Coalition has developed an interactive educational game to teach safe use of acetaminophen. The game not only answers some of the most common questions surrounding the safe use of acetaminophen, it gives an engaging face to the issue. The game, available on the

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Know Your Dose Web site at www.knowyourdose.org/game, invites consumers to follow three characters through a typical day of aches and pains while helping the characters learn how to take medicine that contains acetaminophen safely.

Contraception Products Sold Online With No Prescription Required, Endangering Public Health

Health care providers should help to educate patients about the risks of prescription contraceptive products marketed online as “no prescription” and “over-the-counter” products, pharmaceutical security researchers conclude. A study by these researchers found that Google searches returned results for prescription contraceptive products such as injections, oral contraceptives, and patches, as well as intrauterine devices (IUDs). All of these products were marketed as available without a prescription and researchers found that sellers provided links to YouTube videos with IUD instructions. The researchers also found that these products were being promoted on social media channels, including Facebook, Twitter, SlideShare, and Flickr. Researchers Bryan A. Liang, MD, JD, PhD, Tim K. Mackey, MAS, and Kimberly M. Lovett, MD, conclude that such online contraceptive sales represent potential safety risks and also suggest that policy makers should “employ legal strategies to address these systemic risks.” The study, “Suspect Online Sellers and Contraceptive Access,” is available in the May 25, 2012 issue of *Contraception*.

New FDA Drug Info Rounds Training Video

FDA Drug Info Rounds, a series of online training videos, provides important and timely drug information to practicing clinical and community pharmacists so they can help patients make better medication decisions. In the latest Drug Info Rounds video, available at www.fda.gov/Drugs/ResourcesForYou/HealthProfessionals/ucm313768.htm, pharmacists discuss the Accelerated Approval Program and how FDA helps make new, potentially lifesaving drugs available more quickly. Drug Info Rounds is developed with contributions from pharmacists in FDA’s Center for Drug Evaluation and Research, Office of Communications, and Division of Drug Information.

FDA Resources Help Raise Awareness About Health Fraud Scams

To help raise consumer awareness about health fraud scams, FDA provides numerous educational resources in the Health Fraud Scams section of its Web site. Educating consumers on how to avoid such scams, FDA videos present information on various types of fraudulent products such as fake diet, sexual enhancement, and body building products. Consumers can also access information about specific products that are the subject of FDA warning letters, recalls, public notifications, and safety alerts. FDA news releases related to health fraud are also accessible through this section of the Web site.

NABP Accepting Award Nominations for 109th Annual Meeting

The National Association of Boards of Pharmacy® (NABP®) is currently accepting nominations for the Association’s 2013 awards that will be presented during the 109th Annual Meeting, to be held May 18-21, 2013, at the Hyatt Regency St Louis at the Arch in St Louis, MO.

Nominations are currently being accepted for the following awards: 2013 Lester E. Hosto Distinguished Service Award (DSA), 2013 NABP Honorary President, 2013 Fred T. Mahaffey Award, and 2013 John F. Atkinson Service Award.

Nominations for these awards must be received at NABP Headquarters no later than December 31, 2012. New this year, individuals wanting to submit a nomination will be asked to fill out and complete a nomination form, which may be accessed by visiting the Meetings section on the NABP Web site at www.nabp.net/meetings. Criteria for award nominees will also be posted to the Web site. Nomination forms should be sent to the NABP Executive Director/Secretary Carmen A. Catizone at NABP Headquarters, 1600 Feehanville Dr, Mount Prospect, IL 60056. Directions for electronic submission will be available on the online form. The NABP Executive Committee will review the nominations and select the award recipients.

For more information, please contact the NABP Executive Office via e-mail at exec-office@nabp.net.

NABP Looking for Exam and Assessment Item Writers

NABP is seeking individuals to serve as item writers for the North American Pharmacist Licensure Examination®, the Multistate Pharmacy Jurisprudence Examination®, the Foreign Pharmacy Graduate Equivalency Examination®, the Pharmacy Curriculum Outcomes Assessment®, and the Pharmacist Assessment for Remediation EvaluationSM. Pharmacists in all areas of practice, and faculty from schools and colleges of pharmacy are encouraged to apply. Interested individuals should e-mail, fax, or mail a letter of interest indicating their current practice/educational setting, specialties/certifications, and years of experience, along with a résumé or curriculum vitae:

- ♦ via e-mail at exec-office@nabp.net;
- ♦ via fax at 847/391-4502; or
- ♦ via mail to NABP Executive Director/Secretary Carmen A. Catizone at 1600 Feehanville Drive, Mount Prospect, IL 60056.

Please note, applications are accepted on a continuous basis and kept on file for a period of five years. For more information about item writing, contact NABP at custserv@nabp.net. Additional information may also be found in the August 2012 *NABP Newsletter*.



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

CPE Monitor™ integration is underway. Soon all Accreditation Council for Pharmacy Education (ACPE)-accredited providers will require you to submit your NABP e-Profile ID, assigned when you set up your NABP e-Profile, along with your date of birth (MMDD), in order to obtain continuing pharmacy education (CPE) credit for any ACPE-accredited activity. Many have already begun to do so.

Visit www.MyCPEmonitor.net to set up your 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.

continued from page 1

George R. Clayton	August 9, 1961	Eugene, OR
Leonard T. Sigell	December 18, 1961	Palm Desert, CA
James L. Pullen	June 28, 1962	Milwaukie, OR
John M. Thompson	July 12, 1962	Portland, OR
Edward L. Holland	November 28, 1962	Salem, OR

This information comes from the Board's electronic database system. If you see errors or know of any person missing from this list, please contact the Board.

No. 513: Antibiotics: Will They Work When We Really Need Them?

By Tamara Petersen, MPH. Ms Peterson is program manager for the Oregon Alliance Working for Antibiotic Resistance Education (AWARE)

Scope of the Problem

Today, infections with antibiotic-resistant bacteria have become increasingly common in health care and community settings. Many bacteria have now become resistant to more than one type or class of antibiotic and widespread overuse and inappropriate use of antibiotics is fueling resistance that compromises the effectiveness of important patient treatments. Overuse of antibiotics also increases the problems of drug side effects, allergic reactions, diarrheal infections caused by Clostridium difficile, or even death.

Why We Must Act Now

- ◆ The way we use antibiotics today or in one patient directly impacts how effective they will be tomorrow or in another patient; they are a shared resource.
- ◆ Antibiotic resistance is not just a problem for the person with the infection. Some resistant bacteria have the potential to spread to others – promoting antibiotic-resistant infections.
- ◆ Since it will be many years before new antibiotics are available to treat some resistant infections, we need to improve the use of antibiotics that are currently available.

What Can Pharmacists Do?

Advise the Public

- ◆ Because patients often get advice from their pharmacist before making physicians' appointments, pharmacists should be familiar with treatment guidelines.
- ◆ If a patient wants an antibiotic for the common cold or a sore throat, pharmacists can educate patients on treating

the symptoms of those conditions with over-the-counter medicines instead.

- ◆ Pharmacists can educate patients on the importance of using antibiotics only when necessary and to follow instructions precisely in order to help prevent antibiotic-resistant infections. Counsel patients on when antibiotics are not necessary, that taking unnecessary antibiotics can do more harm than good, and not to press physicians for a prescription.
- ◆ Community pharmacists can alert patients to the possible adverse effects of antibiotics, including nausea, diarrhea, stomach pain, possible allergic reactions, and vaginal yeast infections.

Embrace Antibiotic Stewardship

- ◆ Hospital pharmacists can work with stewardship physicians to get recommendations across and to make decisions about program priorities. There are many pharmacists who are not used to doing interventions and communicating directly with physicians, but the field needs to move in this direction.
- ◆ Recognize and participate in Get Smart About Antibiotics Week, November 12-18, 2012, an international collaboration that coincides with Canada's Antibiotic Awareness Week and European Antibiotic Awareness Day. For more information about the week, visit <http://public.health.oregon.gov/PREVENTIONWELLNESS/SAFELIVING/ANTIBIOTICRESISTANCE/Pages/getsmartweek.aspx>.

For more information, please contact us at AWARE:

Telephone: 1-971/673-1111

E-mail: oregon.aware@state.or.us

Web: www.healthoregon.org/antibiotics

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Oregon State Board of Pharmacy

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No. 514: Report Address Change or Change of Employment

The renewal cycle for pharmacists is just around the corner. Your electronic renewal application must be completed by May 31, 2013. If your renewal is submitted after May 31, you will be assessed a \$50 delinquent fee.

Please be sure that your current correct home address and workplace are on file with the Oregon State Board of Pharmacy before completing your renewal. If you have changed your address or workplace in the past year since your last renewal, please make sure you have updated your records for the Board's file. According to OAR 855-019-0205(7), a pharmacist must notify the Board in writing within 15 days of any change in employment location or residence address.

Similarly, if you have changed your name, please make sure that you have provided the legal documents with a name change request to the Board in plenty of time to get the name changed on the new license.

No. 515: Board Amends Rules

The Board held a public rules hearing on November 29, 2012, to provide an opportunity for public comment on several rule amendments under OAR Chapter 855 that had been proposed for adoption. During the hearing, no public testimony was presented. Throughout the public comment period, no written comments were received from the public. During its regularly scheduled meeting on December 12, 2012, the Board voted to adopt the rules as they were presented at the hearing. These rules took effect upon filing in December 2012. Following is a brief summary of the rules.

OAR Chapter 855, Division 041 – Drug Outlets: The rule amendments reorganize and renumber Division 041. Some rules are repealed because they are old and outdated. In addition, other rules have been amended to provide greater clarity and consistency with federal regulations. Amendments also change the lifespan of a non-controlled substance prescription from two years back to one year.

Division 041 – Emergency Department Distribution: These rule amendments update labeling and record keeping requirements. Also, some new rules are being adopted that establish specific requirements for the use of automated dispensing machines within the emergency department.

Division 065 – Pharmaceutical Wholesaler Definition: This rule amendment modifies the definition of Class II Wholesaler to include Oxygen USP and other medical gases.

Division 110 – Fees: This new rule establishes a permanent annual licensing fee of \$300 and delinquent fee of \$75 for supervising physician dispensing outlets.

The actual text of these new and amended rules can be found on the Board's Web site at www.pharmacy.state.or.us under "What's Hot: Certificate of Permanent Rulemaking."

No. 516: Duty to Cooperate

At a recent Board meeting, several Board members observed that they have been seeing an increase in the number of cases that involve dishonesty and a lack of cooperation with the Board's investigations. The Board is required by law to investigate every consumer complaint it receives. It is the Board's expectation that licensees will be truthful with the Board and will fully cooperate with the inspectors during an investigation.

OAR 855-001-0035 Duty to Cooperate states, "Every licensee and registrant of the Board shall cooperate with the Board and shall respond fully and truthfully to inquiries from and comply with any requests from the Board, subject only to the exercise of any applicable right or privilege." It is your responsibility as a licensee of the Board to cooperate and be truthful with the Board when completing applications or responding to questions during an investigation. If you are asked to respond to questions or allegations during a Board investigation, it is imperative that you answer truthfully and as completely and thoroughly as possible. Furnishing untruthful or incomplete responses to these questions may be considered by the Board as failure to cooperate, which could result in disciplinary action.

No. 517: Duty to Report

The Board has suggested it is time to revisit and review pharmacists' and pharmacy technicians' duty to report suspected violations. Sometimes referred to as the "Snitch Rule," the duty to report is actually a statute, **ORS 689.445 Report of suspected violations; liability for reporting; confidentiality of report.** This law states:

- ♦ A pharmacist or pharmacy technician shall report to the State Board of Pharmacy any suspected violations of this chapter (ORS Chapter 689) or of ORS 4475.005 to 475.285 and 475.940 to 475.999.

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NIH Database Provides Information on Drugs Associated With Liver Injury

The National Institutes of Health (NIH) has launched a free searchable database with information on prescription and over-the-counter (OTC) drugs, herbals, and dietary supplements associated with liver injury. The LiverTox database, www.livertox.nih.gov, is a free resource for health care providers and researchers studying liver injury associated with these products. The database provides up-to-date, accurate, and easily accessed information on the diagnosis, cause, frequency, patterns, and management of liver injury attributable to prescription and nonprescription medications, herbals, and dietary supplements. The database currently contains information on 700 medications, and 300 more will be added.

Coalition Urges Consumers to 'Double Check, Don't Double Up' on Acetaminophen

With the start of cold and flu season in October 2012, the Acetaminophen Awareness Coalition began urging consumers to double check their medicine labels to make sure they do not double up on medicines containing acetaminophen. The coalition's "Double Check, Don't Double Up" message is aimed to reach the more than 50 million Americans who use acetaminophen every week, encouraging them to take three simple steps to avoid acetaminophen overdose: (1) know if your medicine contains acetaminophen; (2) never take two medicines with acetaminophen at the same time; and (3) always read your medicine label. The coalition also wants to educate consumers that taking more acetaminophen than directed is an overdose and can lead to liver damage. Health care providers can join the effort by educating patients about safe use of acetaminophen, and can refer patients to the KnowYourDose.org Web site for more information. The Acetaminophen Awareness Coalition is made up of a diverse group of organizations representing health care providers and consumers who have joined forces through the Know Your Dose campaign to inform consumers about safe acetaminophen use and preventing liver damage that can result from unintentional overdose.

Root Cause Analysis

 *This column was prepared by the Institute for Safe Medication Practices (ISMP). ISMP is an independent nonprofit agency 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 is a federally certified patient safety organization, providing legal protection and confidentiality for submitted patient safety data and error reports. ISMP is also an FDA MedWatch partner. Call 1-800/FAIL-SAF(E) to report medication errors to the ISMP Medication Errors Reporting Program or report online at www.ismp.org. ISMP address: 200 Lakeside Dr, Suite 200, Horsham, PA 19044. Phone: 215/947-7797. E-mail: ismpinfo@ismp.org.*

To assist pharmacists in the process of minimizing the occurrence of medication errors, many state boards of pharmacy are contemplating or already requiring community pharmacies to have a continuous quality improvement program in place. Many of these state's regulations include the requirement of root cause analysis (RCA) in the case of sentinel events. The Joint Commission defines a sentinel event as an "unexpected occurrence involving death or serious physical or psychological injury or

risk thereof," and recommends completing an RCA for all sentinel events for health care organizations in which they accredit. It is anticipated that RCA for sentinel events may be required as part of an accreditation program for community/ambulatory pharmacies.

RCA is a process for identifying the basic or causal factors that underlie variation in performance, including the occurrence or risk of occurrence of a sentinel event. RCA focuses primarily on systems and processes, not individual performance. Finding and identifying root causes during an investigation adds considerable value by pointing out significant, underlying, fundamental conditions that increase the risk of adverse consequences. These analyses can be of enormous value in capturing both the big-picture perspective and the details of the error. They facilitate system evaluation, analysis of need for corrective action, and tracking and trending.

The RCA process starts by creating a team, holding a meeting, and stating the problem. The team gathers documentation (prescriptions, labels, computer reports, etc) and interviews staff involved in the error to determine the sequence of events.

The RCA team will review the documentation and review the sequence of events and continue asking themselves "Why did this happen?" until they arrive at each root cause.

The team must assume that any problem is preventable and caused by weak or vulnerable systems rather than individual incompetence. Even in the case of a person making a mistake, the team must ask "Why do our systems allow these types of mistakes to happen so easily?" or "What factors set this person up to make this error?"

The heart of the process is the analysis itself. Table 1 lists basic questions that should be answered during RCA.

Table 1. Basic Questions to Answer During RCA
1. What happened?
2. What normally happens?
3. What do policies/procedures require?
4. Why did it happen?
5. How was the organization managing the risk before the event?

It is important to answer "What normally happens?" (Question 2, in the above table). The difference between "What normally happens?" and "What do the policies and procedures require?" (Question 3) helps determine the reliability of processes and how often staff cut corners to get the work done.

RCA also includes a method to measure the effectiveness of these strategies over time. Targeting corrective measures at the identified root causes is the best way to ensure that similar problems do not occur in the future.

USP Releases Universal Standards for Prescription Labels

New United States Pharmacopeial Convention (USP) standards for a universal approach to the format, appearance, content, and instructions for medicines in containers dispensed by pharmacists have been released. "Wide variability in prescription container labels exists today across individual prescriptions, pharmacies, retail chains and states. The USP standards provide specific direction on how to organize labels in a 'patient-centered' manner that best reflects how most patients seek out and understand medication instructions," as explained in a USP press release. Lack of universal standards for medication labeling can contribute to patients

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Compliance News



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

misunderstanding dosage instructions and can lead to medication errors. Elements of the new USP standards, contained in General Chapter <17> Prescription Container Labeling, of the USP and the National Formulary, include:

- ◆ Emphasizing instructions and other information important to patients
- ◆ Improving readability
- ◆ Giving explicit instructions
- ◆ Including purpose for use
- ◆ Addressing limited English proficiency
- ◆ Addressing visual impairment

Descriptions of each standard including examples, as well as more information about the development of the standards, are provided in a USP press release, available at <http://us.vocuspr.com/Newsroom/ViewAttachment.aspx?SiteName=USPharm&Entity=PRAsset&AttachmentType=F&EntityID=109587&AttachmentID=5dc9eb96-5706-4e61-b0fa-ce9673fb3010>.

Enforcement of the standards will be the decision of individual state boards of pharmacy, which may choose to adopt it into their regulations, notes USP. The National Association of Boards of Pharmacy® (NABP®) member boards adopted Resolution 108-1-12 at the NABP 108th Annual Meeting stating that the Association should support state boards of pharmacy in efforts to require a standardized prescription label. NABP also convened a task force on this issue in December 2008. The resolution and the Report of the NABP Task Force on Uniform Prescription Labeling Requirements are available in the Members section of the NABP Web site.

New Law Increases Penalties on Medical Cargo Theft

New legislation signed into law by President Obama on October 5, 2012, increases penalties for medical product cargo theft, a significant problem that threatens patient safety when these stolen products are reintroduced into the legitimate supply chain. The Strengthening and Focusing Enforcement to Deter Organized Stealing and Enhance Safety Act of 2012 (SAFE DOSES Act) prohibits theft of medical products as well as trafficking, buying, selling, or distributing illegally obtained pre-retail medical products. The law “prescribes criminal and civil penalties for violations, including a civil penalty of up to the greater of 3 times the economic loss attributable to the violation or \$1 million.” According to the Coalition for Patient Safety and Medicine Integrity, “current federal criminal laws do not distinguish between stealing a load of insulin and stealing a truck full of paper clips.” By increasing the penalties for medical theft, the SAFE DOSES Act should help deter such theft. The text of the new law is available for download from the Government Printing Office Web site at www.gpo.gov/fdsys/pkg/BILLS-112hr4223emr/pdf/BILLS-112hr4223emr.pdf.

NABP Implements Action Plan to Assist States in Regulating Compounding Pharmacies

Supporting state board of pharmacy efforts to enforce compounding regulations, NABP is implementing a four-part action plan centered around inspection of nonresident compounding pharmacies and creating an information-sharing network of regulatory details on such pharmacies. Focusing on inspections of nonresident compounding pharmacies and sharing this data among boards of pharmacy nationwide was determined by NABP and its member state boards of pharmacy to be key to preventing future tragedies like the current meningitis outbreak.

NABP developed the action plan at a November 2012 meeting of board of pharmacy executive directors where the attendees expressed a strong

commitment to correcting system failures that allowed the meningitis outbreak to occur, and implementation began quickly thereafter. The Iowa Board of Pharmacy recently requested NABP to develop an inspection program for entities that are licensed by the state as nonresident pharmacies and dispensing compounded drugs in Iowa. Those in attendance expressed their support of this inspection initiative, which became a cornerstone of the four-part action plan.

In the first part of its action plan, NABP shared the list of nonresident compounding pharmacies provided by the Iowa Board with other NABP member boards of pharmacy and began coordinating the collection of information on these pharmacies. The boards’ collaboration on this data helped NABP identify the initial pharmacies to inspect. NABP believes that the list provided by Iowa represents a significant number of nonresident pharmacies dispensing compounded drugs across the country.

Implementing the inspection program is the second part of the action plan and is currently underway. Initial results will reveal whether the selected pharmacies are compounding pursuant to a prescription in compliance with state regulations, or instead are engaging in manufacturing. Entities that refuse inspection may be subject to disciplinary action by the Iowa Board and such actions will be shared with all of NABP’s member boards.

The third part of the action plan includes NABP collecting and maintaining data on the compounding pharmacies identified by the Iowa Board and by other boards of pharmacy. Initial data collected from the boards and the inspection reports will be stored in an NABP Pharmacy e-Profile, allowing the Association to disseminate pertinent public information among state boards. Ultimately, states will be able to submit inspection reports and other related information to NABP for inclusion in pharmacies’ e-Profiles. The network will be made available at no cost to boards for use in making licensure and registration determinations for pharmacies, and may also help to identify pharmacies whose operations are more akin to manufacturing than compounding.

As the final part of the action plan, NABP plans to schedule immediate and ongoing training of board of pharmacy inspectors and compliance officers via Webinar and field training opportunities. NABP will also continue cooperative efforts with Food and Drug Administration and legislators to address the regulatory quagmire that exists when traditional compounding is exceeded and manufacturing may be occurring.



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

CPE Monitor™ integration is underway. Most Accreditation Council for Pharmacy Education (ACPE)-accredited providers should now be requiring you to submit your NABP e-Profile ID, assigned when you set up your NABP e-Profile, along with your date of birth (MMDD), in order to obtain continuing pharmacy education (CPE) credit for any ACPE-accredited activity.

Visit www.MyCPEmonitor.net to set up your e-Profile, obtain your e-profile ID, 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.

continued from page 1

- ◆ Any pharmacist or pharmacy technician who reports to the board as required by subsection (1) of this section in good faith shall not be subject to an action for civil damages as a result thereof.
- ◆ Any information that the board obtains pursuant to ORS 689.405 or 689.445 or this section is confidential as provided under ORS 676.175.

ORS Chapter 475 referred to in the first bullet point is the Oregon Uniform Controlled Substances Act.

ORS Chapter 676 referred to in the last bullet point relates to "Health Professions Generally" and details the issues around complaints and disciplinary action against health care professionals. **ORS 676.070 Immunity of information providers states,** "A person who reports or supplies information in good faith to a health professional regulatory board or to a committee reporting to a health professional regulatory board shall be immune from an action for civil damages as a result thereof."

These statutes can be found on the Board Web site under "Quick Links: Laws & Rules." All pharmacists and pharmacy technicians should be familiar with them.

No. 518: Pharmacist-in-Charge Training Class

The Board began offering a pharmacist-in-charge (PIC) training course in September 2007. Since then, 1,135 pharmacists have taken the three-hour course. It is being attended by pharmacists newly assigned to a PIC position, new pharmacists who want to be prepared in the event they get a PIC position, and experienced pharmacists who are or have been in the PIC position. Even though the duties of a PIC are spelled out in OAR 855-019-0300, many pharmacists find themselves in the position but are not entirely prepared to take on the PIC duties confidently and competently. This course is an excellent starting point or refresher for anybody in the position of PIC. You can share your experiences and hear first-hand experiences from other pharmacists and the Board inspectors. The course lasts about three hours and you can obtain three hours of continuing education including one hour of law, one hour of patient safety/medication error prevention, and one hour of "other."

The regular course is held in the Board conference room and is limited to 15 participants in order to facilitate more effective dialogue among the inspectors and participants. It is also being offered at the Oregon State Pharmacy Association Annual

Convention. It has been taken to the pharmacy schools at both Oregon State and Pacific Universities for pharmacy students who are near graduation. The inspectors facilitate a review and discussion of the PIC responsibilities, other rules, and the PIC self-inspection form. As time allows, they also review current Board issues and common compliance questions. The course provides a forum for questions and answers as well as discussions about best practices and standards of pharmacy practice. If you are interested in attending one of these classes, contact the Board's compliance office to reserve a seat. You can check the Board's Web site for the date, time, and place for the next upcoming class. And, best of all, there is no cost for the class beyond your commitment of time and attention.

No. 519: New Inspector Joins Compliance Staff

Inspector Jennifer Zanon left the compliance staff in 2011 to take her current position with the Oregon Health & Science University. Following a broad recruitment effort, the Board hired pharmacist Fiona Karbowicz. Fiona comes with an extensive background in community pharmacy practice. She graduated from the University of Connecticut in 1997 and worked at independent pharmacies in Connecticut prior to relocating to Oregon. She also worked at Walgreen's for 13 years. Inspector Karbowicz has been with the Board since March 2011. She has taken on her duties with enthusiasm, and she possesses the curiosity and attention to detail that is so important to an investigator. Besides doing inspections, investigations, and consulting, Fiona is being assigned a variety of other projects such as research, rule writing, and acting as a preceptor for the Board's pharmacy interns. She recently attended Drug Enforcement Administration's Annual Conference on Chemical and Drug Diversion in November 2012. When she is not working, Fiona enjoys skiing and spending leisure time with her family on the slopes of Mt Hood.

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Pharmacy, Board of

**Summary Cross Reference Listing and Packages
2013-15 Biennium**

Agency Number: 85500

BAM Analyst: Ball, Dustin

Budget Coordinator: Forster, Amber - (503)373-0318

Cross Reference Number	Cross Reference Description	Package Number	Priority	Package Description	Package Group
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	050	0	Fundshifts	Essential Packages
001-00-00-00000	Board of Pharmacy	060	0	Technical Adjustments	Essential Packages
001-00-00-00000	Board of Pharmacy	070	0	Revenue Shortfalls	Policy Packages
001-00-00-00000	Board of Pharmacy	082	0	September 2012 E-Board	Policy Packages
001-00-00-00000	Board of Pharmacy	083	0	December 2012 E-Board	Policy Packages
001-00-00-00000	Board of Pharmacy	090	0	Analyst Adjustments	Policy Packages
001-00-00-00000	Board of Pharmacy	091	0	Statewide Administrative Savings	Policy Packages
001-00-00-00000	Board of Pharmacy	092	0	PERS Taxation Policy	Policy Packages
001-00-00-00000	Board of Pharmacy	093	0	Other PERS 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	Fee Increases – Part 2	Policy Packages
001-00-00-00000	Board of Pharmacy	102	0	Paperless Records Retention – Part 1	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

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Pharmacy, Board of

Summary Cross Reference Listing and Packages
2013-15 Biennium

Agency Number: 85500
BAM Analyst: Ball, Dustin
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<i>Cross Reference Number</i>	<i>Cross Reference Description</i>	<i>Package Number</i>	<i>Priority</i>	<i>Package Description</i>	<i>Package Group</i>
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	050	0	Fundshifts	Essential Packages
999-00-00-00000	Suspense	060	0	Technical Adjustments	Essential Packages
999-00-00-00000	Suspense	070	0	Revenue Shortfalls	Policy Packages
999-00-00-00000	Suspense	082	0	September 2012 E-Board	Policy Packages
999-00-00-00000	Suspense	083	0	December 2012 E-Board	Policy Packages
999-00-00-00000	Suspense	090	0	Analyst Adjustments	Policy Packages
999-00-00-00000	Suspense	091	0	Statewide Administrative Savings	Policy Packages
999-00-00-00000	Suspense	092	0	PERS Taxation Policy	Policy Packages
999-00-00-00000	Suspense	093	0	Other PERS Adjustments	Policy Packages

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Pharmacy, Board of

**Policy Package List by Priority
2013-15 Biennium**

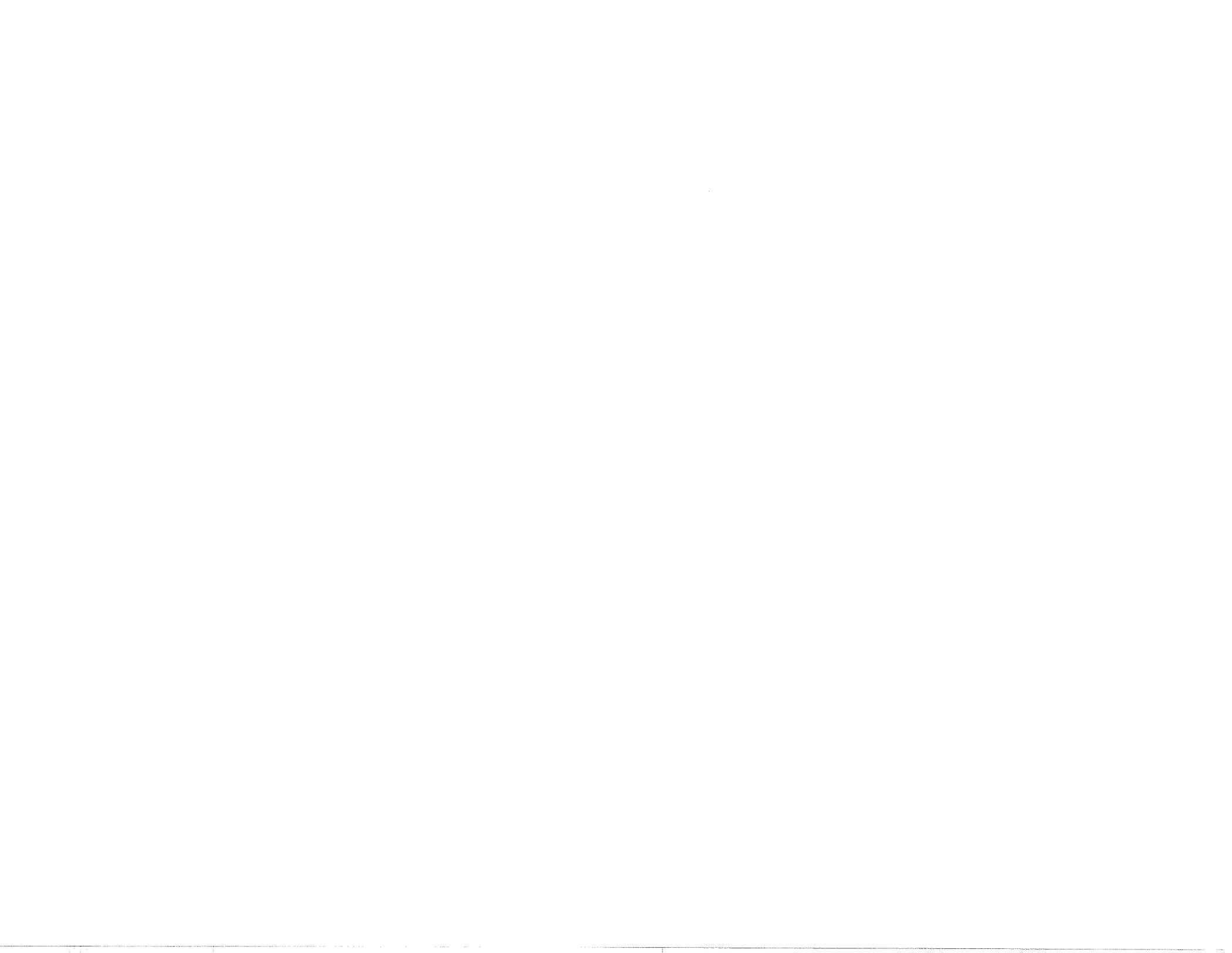
Agency Number: 85500

BAM Analyst: Ball, Dustin

Budget Coordinator: Forster, Amber - (503)373-0318

<i>Priority</i>	<i>Policy Pkg Number</i>	<i>Policy Pkg Description</i>	<i>Summary Cross Reference Number</i>	<i>Cross Reference Description</i>
0	070	Revenue Shortfalls	001-00-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	082	September 2012 E-Board	001-00-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	083	December 2012 E-Board	001-00-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	090	Analyst Adjustments	001-00-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	091	Statewide Administrative Savings	001-00-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	092	PERS Taxation Policy	001-00-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	093	Other PERS Adjustments	001-00-00-00000	Board of Pharmacy
			999-00-00-00000	Suspense
	100	Personnel Management	001-00-00-00000	Board of Pharmacy
	101	Fee Increases – Part 2	001-00-00-00000	Board of Pharmacy
	102	Paperless Records Retention – Part 1	001-00-00-00000	Board of Pharmacy

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Pharmacy, Board of

Agency Number: 85500

**Budget Support - Detail Revenues and Expenditures
2013-15 Biennium
Pharmacy, Board Of**

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

<i>Description</i>	<i>2009-11 Actuals</i>	<i>2011-13 Leg Adopted Budget</i>	<i>2011-13 Leg Approved Budget</i>	<i>2013-15 Agency Request Budget</i>	<i>2013-15 Governor's Budget</i>	<i>2013-15 Leg Adopted Budget</i>
BEGINNING BALANCE						
0025 Beginning Balance						
3400 Other Funds Ltd	1,673,222	945,936	945,936	921,868	921,868	-
0030 Beginning Balance Adjustment						
3400 Other Funds Ltd	-	(423,475)	(423,475)	1,268,830	1,268,830	-
BEGINNING BALANCE						
3400 Other Funds Ltd	1,673,222	522,461	522,461	2,190,698	2,190,698	-
TOTAL BEGINNING BALANCE	\$1,673,222	\$522,461	\$522,461	\$2,190,698	\$2,190,698	-
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	4,230,875	5,132,360	5,132,360	7,038,568	7,038,568	-
0210 Non-business Lic. and Fees						
3400 Other Funds Ltd	94,119	319,240	319,240	377,630	377,630	-
LICENSES AND FEES						
3400 Other Funds Ltd	4,324,994	5,451,600	5,451,600	7,416,198	7,416,198	-
TOTAL LICENSES AND FEES	\$4,324,994	\$5,451,600	\$5,451,600	\$7,416,198	\$7,416,198	-
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	471,718	280,000	280,000	260,000	260,000	-
INTEREST EARNINGS						
0605 Interest Income						
3400 Other Funds Ltd	20,551	20,000	20,000	20,000	20,000	-

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Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Pharmacy, Board Of

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
OTHER						
0975 Other Revenues						
3400 Other Funds Ltd	44,195	43,800	43,800	22,400	22,400	-
REVENUE CATEGORIES						
3400 Other Funds Ltd	4,861,458	5,795,400	5,795,400	7,718,598	7,718,598	-
TOTAL REVENUE CATEGORIES	\$4,861,458	\$5,795,400	\$5,795,400	\$7,718,598	\$7,718,598	-
TRANSFERS OUT						
2443 Tsfr To Oregon Health Authority						
3400 Other Funds Ltd	(264,409)	(284,390)	(284,390)	(319,775)	(319,775)	-
AVAILABLE REVENUES						
3400 Other Funds Ltd	6,270,271	6,033,471	6,033,471	9,589,521	9,589,521	-
TOTAL AVAILABLE REVENUES	\$6,270,271	\$6,033,471	\$6,033,471	\$9,589,521	\$9,589,521	-
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	2,247,913	2,385,090	2,385,090	2,571,552	2,571,552	-
3160 Temporary Appointments						
3400 Other Funds Ltd	19,260	23,061	23,061	23,614	23,614	-
3170 Overtime Payments						
3400 Other Funds Ltd	549	-	-	-	-	-
3190 All Other Differential						
3400 Other Funds Ltd	48,891	31,328	31,328	61,148	61,148	-

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Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Pharmacy, Board Of

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
SALARIES & WAGES						
3400 Other Funds Ltd	2,316,613	2,439,479	2,439,479	2,656,314	2,656,314	-
TOTAL SALARIES & WAGES	\$2,316,613	\$2,439,479	\$2,439,479	\$2,656,314	\$2,656,314	-
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	751	738	738	760	760	-
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	195,719	344,994	344,994	508,846	497,799	-
3221 Pension Obligation Bond						
3400 Other Funds Ltd	134,232	154,953	154,953	147,732	147,732	-
3230 Social Security Taxes						
3400 Other Funds Ltd	174,861	186,616	186,616	199,049	203,210	-
3240 Unemployment Assessments						
3400 Other Funds Ltd	262	-	-	-	-	-
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	913	1,062	1,062	1,121	1,121	-
3260 Mass Transit Tax						
3400 Other Funds Ltd	13,854	14,644	14,644	15,756	15,756	-
3270 Flexible Benefits						
3400 Other Funds Ltd	467,069	541,728	541,728	580,032	580,032	-
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	987,661	1,244,735	1,244,735	1,453,296	1,446,410	-
TOTAL OTHER PAYROLL EXPENSES	\$987,661	\$1,244,735	\$1,244,735	\$1,453,296	\$1,446,410	-

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Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
P.S. BUDGET ADJUSTMENTS						
3465 Reconciliation Adjustment						
3400 Other Funds Ltd	-	(262,987)	(262,987)	-	(10,135)	-
3470 Undistributed (P.S.)						
3400 Other Funds Ltd	-	-	-	-	(3,693)	-
3991 PERS Policy Adjustment						
3400 Other Funds Ltd	-	-	-	-	(92,846)	-
P.S. BUDGET ADJUSTMENTS						
3400 Other Funds Ltd	-	(262,987)	(262,987)	-	(106,674)	-
TOTAL P.S. BUDGET ADJUSTMENTS	-	(\$262,987)	(\$262,987)	-	(\$106,674)	-
PERSONAL SERVICES						
3400 Other Funds Ltd	3,304,274	3,421,227	3,421,227	4,109,610	3,996,050	-
TOTAL PERSONAL SERVICES	\$3,304,274	\$3,421,227	\$3,421,227	\$4,109,610	\$3,996,050	-
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	84,902	103,780	103,780	106,271	106,271	-
4125 Out of State Travel						
3400 Other Funds Ltd	6,157	21,878	21,878	22,403	22,403	-
4150 Employee Training						
3400 Other Funds Ltd	6,709	14,967	14,967	15,326	15,326	-
4175 Office Expenses						
3400 Other Funds Ltd	100,357	90,064	90,064	177,226	177,226	-
4200 Telecommunications						

Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Pharmacy, Board Of

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
3400 Other Funds Ltd	28,114	55,219	55,219	56,088	53,834	-
4225 State Gov. Service Charges						
3400 Other Funds Ltd	182,070	185,279	185,279	232,307	204,256	-
4250 Data Processing						
3400 Other Funds Ltd	32,437	39,274	39,274	40,217	40,198	-
4275 Publicity and Publications						
3400 Other Funds Ltd	25,183	9,664	9,664	10,304	10,304	-
4300 Professional Services						
3400 Other Funds Ltd	65,939	326,543	326,543	115,686	112,983	-
4315 IT Professional Services						
3400 Other Funds Ltd	49,600	50,000	50,000	51,400	51,400	-
4325 Attorney General						
3400 Other Funds Ltd	246,130	264,222	264,222	303,591	303,591	-
4400 Dues and Subscriptions						
3400 Other Funds Ltd	4,843	4,000	4,000	4,096	4,096	-
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	180,862	194,573	194,573	204,496	204,496	-
4475 Facilities Maintenance						
3400 Other Funds Ltd	816	-	-	48	48	-
4525 Medical Services and Supplies						
3400 Other Funds Ltd	504	1,015	1,015	1,039	1,039	-
4575 Agency Program Related S and S						
3400 Other Funds Ltd	-	-	-	220,000	220,000	-

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Pharmacy, Board of

Agency Number: 85500

Budget Support - Detail Revenues and Expenditures

Cross Reference Number: 85500-000-00-000000

2013-15 Biennium

Pharmacy, Board Of

<i>Description</i>	<i>2009-11 Actuals</i>	<i>2011-13 Leg Adopted Budget</i>	<i>2011-13 Leg Approved Budget</i>	<i>2013-15 Agency Request Budget</i>	<i>2013-15 Governor's Budget</i>	<i>2013-15 Leg Adopted Budget</i>
4650 Other Services and Supplies						
3400 Other Funds Ltd	51,605	55,657	55,657	56,993	56,993	-
4675 Undistributed (S.S.)						
3400 Other Funds Ltd	-	-	-	-	(1,503)	-
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	5,070	8,461	8,461	8,664	8,664	-
4715 IT Expendable Property						
3400 Other Funds Ltd	16,468	45,780	45,780	46,879	46,879	-
SERVICES & SUPPLIES						
3400 Other Funds Ltd	1,087,766	1,470,376	1,470,376	1,673,034	1,638,504	-
TOTAL SERVICES & SUPPLIES	\$1,087,766	\$1,470,376	\$1,470,376	\$1,673,034	\$1,638,504	-
CAPITAL OUTLAY						
5600 Data Processing Hardware						
3400 Other Funds Ltd	5,822	-	-	-	-	-
SPECIAL PAYMENTS						
6085 Other Special Payments						
3400 Other Funds Ltd	-	-	-	6,074	6,074	-
6443 Spc Pmt to Oregon Health Authority						
3400 Other Funds Ltd	81,118	220,000	220,000	176,899	176,899	-
SPECIAL PAYMENTS						
3400 Other Funds Ltd	81,118	220,000	220,000	182,973	182,973	-
TOTAL SPECIAL PAYMENTS	\$81,118	\$220,000	\$220,000	\$182,973	\$182,973	-

EXPENDITURES

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Pharmacy, Board of

Agency Number: 85500

Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Pharmacy, Board Of

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
3400 Other Funds Ltd	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
TOTAL EXPENDITURES	\$4,478,980	\$5,111,603	\$5,111,603	\$5,965,617	\$5,817,527	-
ENDING BALANCE						
3400 Other Funds Ltd	1,791,291	921,868	921,868	3,623,904	3,771,994	-
TOTAL ENDING BALANCE	\$1,791,291	\$921,868	\$921,868	\$3,623,904	\$3,771,994	-
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	20	18	18	19	19	-
TOTAL AUTHORIZED POSITIONS	20	18	18	19	19	-
AUTHORIZED FTE						
8250 Class/Unclass FTE Positions	19.00	17.75	17.75	19.00	19.00	-
TOTAL AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-

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Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Board of Pharmacy

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
BEGINNING BALANCE						
0025 Beginning Balance						
3400 Other Funds Ltd	1,673,222	945,936	945,936	921,868	921,868	-
0030 Beginning Balance Adjustment						
3400 Other Funds Ltd	-	(423,475)	(423,475)	1,268,830	1,268,830	-
BEGINNING BALANCE						
3400 Other Funds Ltd	1,673,222	522,461	522,461	2,190,698	2,190,698	-
TOTAL BEGINNING BALANCE	\$1,673,222	\$522,461	\$522,461	\$2,190,698	\$2,190,698	-
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	4,230,875	5,132,360	5,132,360	7,038,568	7,038,568	-
0210 Non-business Lic. and Fees						
3400 Other Funds Ltd	94,119	319,240	319,240	377,630	377,630	-
LICENSES AND FEES						
3400 Other Funds Ltd	4,324,994	5,451,600	5,451,600	7,416,198	7,416,198	-
TOTAL LICENSES AND FEES	\$4,324,994	\$5,451,600	\$5,451,600	\$7,416,198	\$7,416,198	-
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	471,718	280,000	280,000	260,000	260,000	-
INTEREST EARNINGS						
0605 Interest Income						
3400 Other Funds Ltd	20,551	20,000	20,000	20,000	20,000	-

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Pharmacy, Board of

Agency Number: 85500

**Budget Support - Detail Revenues and Expenditures
2013-15 Biennium
Board of Pharmacy**

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

<i>Description</i>	<i>2009-11 Actuals</i>	<i>2011-13 Leg Adopted Budget</i>	<i>2011-13 Leg Approved Budget</i>	<i>2013-15 Agency Request Budget</i>	<i>2013-15 Governor's Budget</i>	<i>2013-15 Leg Adopted Budget</i>
OTHER						
0975 Other Revenues						
3400 Other Funds Ltd	44,195	43,800	43,800	22,400	22,400	-
REVENUE CATEGORIES						
3400 Other Funds Ltd	4,861,458	5,795,400	5,795,400	7,718,598	7,718,598	-
TOTAL REVENUE CATEGORIES	\$4,861,458	\$5,795,400	\$5,795,400	\$7,718,598	\$7,718,598	-
TRANSFERS OUT						
2443 Tsfr To Oregon Health Authority						
3400 Other Funds Ltd	(264,409)	(284,390)	(284,390)	(319,775)	(319,775)	-
AVAILABLE REVENUES						
3400 Other Funds Ltd	6,270,271	6,033,471	6,033,471	9,589,521	9,589,521	-
TOTAL AVAILABLE REVENUES	\$6,270,271	\$6,033,471	\$6,033,471	\$9,589,521	\$9,589,521	-
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	2,247,913	2,385,090	2,385,090	2,571,552	2,571,552	-
3160 Temporary Appointments						
3400 Other Funds Ltd	19,260	23,061	23,061	23,614	23,614	-
3170 Overtime Payments						
3400 Other Funds Ltd	549	-	-	-	-	-
3190 All Other Differential						
3400 Other Funds Ltd	48,891	31,328	31,328	61,148	61,148	-

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Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Board of Pharmacy

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
SALARIES & WAGES						
3400 Other Funds Ltd	2,316,613	2,439,479	2,439,479	2,656,314	2,656,314	-
TOTAL SALARIES & WAGES	\$2,316,613	\$2,439,479	\$2,439,479	\$2,656,314	\$2,656,314	-
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	751	738	738	760	760	-
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	195,719	344,994	344,994	508,846	497,799	-
3221 Pension Obligation Bond						
3400 Other Funds Ltd	134,232	154,953	154,953	147,732	147,732	-
3230 Social Security Taxes						
3400 Other Funds Ltd	174,861	186,616	186,616	199,049	203,210	-
3240 Unemployment Assessments						
3400 Other Funds Ltd	262	-	-	-	-	-
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	913	1,062	1,062	1,121	1,121	-
3260 Mass Transit Tax						
3400 Other Funds Ltd	13,854	14,644	14,644	15,756	15,756	-
3270 Flexible Benefits						
3400 Other Funds Ltd	467,069	541,728	541,728	580,032	580,032	-
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	987,661	1,244,735	1,244,735	1,453,296	1,446,410	-
TOTAL OTHER PAYROLL EXPENSES	\$987,661	\$1,244,735	\$1,244,735	\$1,453,296	\$1,446,410	-

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Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
P.S. BUDGET ADJUSTMENTS						
3465 Reconciliation Adjustment						
3400 Other Funds Ltd	-	(262,987)	(262,987)	-	(10,135)	-
3470 Undistributed (P.S.)						
3400 Other Funds Ltd	-	-	-	-	(3,693)	-
3991 PERS Policy Adjustment						
3400 Other Funds Ltd	-	-	-	-	(92,846)	-
P.S. BUDGET ADJUSTMENTS						
3400 Other Funds Ltd	-	(262,987)	(262,987)	-	(106,674)	-
TOTAL P.S. BUDGET ADJUSTMENTS	-	(\$262,987)	(\$262,987)	-	(\$106,674)	-
PERSONAL SERVICES						
3400 Other Funds Ltd	3,304,274	3,421,227	3,421,227	4,109,610	3,996,050	-
TOTAL PERSONAL SERVICES	\$3,304,274	\$3,421,227	\$3,421,227	\$4,109,610	\$3,996,050	-
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	84,902	103,780	103,780	106,271	106,271	-
4125 Out of State Travel						
3400 Other Funds Ltd	6,157	21,878	21,878	22,403	22,403	-
4150 Employee Training						
3400 Other Funds Ltd	6,709	14,967	14,967	15,326	15,326	-
4175 Office Expenses						
3400 Other Funds Ltd	100,357	90,064	90,064	177,226	177,226	-
4200 Telecommunications						

Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Board of Pharmacy

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
3400 Other Funds Ltd	28,114	55,219	55,219	56,088	53,834	-
4225 State Gov. Service Charges						
3400 Other Funds Ltd	182,070	185,279	185,279	232,307	204,256	-
4250 Data Processing						
3400 Other Funds Ltd	32,437	39,274	39,274	40,217	40,198	-
4275 Publicity and Publications						
3400 Other Funds Ltd	25,183	9,664	9,664	10,304	10,304	-
4300 Professional Services						
3400 Other Funds Ltd	65,939	326,543	326,543	115,686	112,983	-
4315 IT Professional Services						
3400 Other Funds Ltd	49,600	50,000	50,000	51,400	51,400	-
4325 Attorney General						
3400 Other Funds Ltd	246,130	264,222	264,222	303,591	303,591	-
4400 Dues and Subscriptions						
3400 Other Funds Ltd	4,843	4,000	4,000	4,096	4,096	-
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	180,862	194,573	194,573	204,496	204,496	-
4475 Facilities Maintenance						
3400 Other Funds Ltd	816	-	-	48	48	-
4525 Medical Services and Supplies						
3400 Other Funds Ltd	504	1,015	1,015	1,039	1,039	-
4575 Agency Program Related S and S						
3400 Other Funds Ltd	-	-	-	220,000	220,000	-

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Budget Support - Detail Revenues and Expenditures
 2013-15 Biennium
 Board of Pharmacy

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

Description	2009-11 Actuals	2011-13 Leg Adopted Budget	2011-13 Leg Approved Budget	2013-15 Agency Request Budget	2013-15 Governor's Budget	2013-15 Leg Adopted Budget
4650 Other Services and Supplies						
3400 Other Funds Ltd	51,605	55,657	55,657	56,993	56,993	-
4675 Undistributed (S.S.)						
3400 Other Funds Ltd	-	-	-	-	(1,503)	-
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	5,070	8,461	8,461	8,664	8,664	-
4715 IT Expendable Property						
3400 Other Funds Ltd	16,468	45,780	45,780	46,879	46,879	-
SERVICES & SUPPLIES						
3400 Other Funds Ltd	1,087,766	1,470,376	1,470,376	1,673,034	1,638,504	-
TOTAL SERVICES & SUPPLIES	\$1,087,766	\$1,470,376	\$1,470,376	\$1,673,034	\$1,638,504	-
CAPITAL OUTLAY						
5600 Data Processing Hardware						
3400 Other Funds Ltd	5,822	-	-	-	-	-
SPECIAL PAYMENTS						
6085 Other Special Payments						
3400 Other Funds Ltd	-	-	-	6,074	6,074	-
6443 Spc Pmt to Oregon Health Authority						
3400 Other Funds Ltd	81,118	220,000	220,000	176,899	176,899	-
SPECIAL PAYMENTS						
3400 Other Funds Ltd	81,118	220,000	220,000	182,973	182,973	-
TOTAL SPECIAL PAYMENTS	\$81,118	\$220,000	\$220,000	\$182,973	\$182,973	-
EXPENDITURES						

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Pharmacy, Board of

Agency Number: 85500

**Budget Support - Detail Revenues and Expenditures
2013-15 Biennium
Board of Pharmacy**

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

<i>Description</i>	<i>2009-11 Actuals</i>	<i>2011-13 Leg Adopted Budget</i>	<i>2011-13 Leg Approved Budget</i>	<i>2013-15 Agency Request Budget</i>	<i>2013-15 Governor's Budget</i>	<i>2013-15 Leg Adopted Budget</i>
3400 Other Funds Ltd	4,478,980	5,111,603	5,111,603	5,965,617	5,817,527	-
TOTAL EXPENDITURES	\$4,478,980	\$5,111,603	\$5,111,603	\$5,965,617	\$5,817,527	-
ENDING BALANCE						
3400 Other Funds Ltd	1,791,291	921,868	921,868	3,623,904	3,771,994	-
TOTAL ENDING BALANCE	\$1,791,291	\$921,868	\$921,868	\$3,623,904	\$3,771,994	-
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	20	18	18	19	19	-
TOTAL AUTHORIZED POSITIONS	20	18	18	19	19	-
AUTHORIZED FTE						
8250 Class/Unclass FTE Positions	19.00	17.75	17.75	19.00	19.00	-
TOTAL AUTHORIZED FTE	19.00	17.75	17.75	19.00	19.00	-

Description	Agency Request Budget (V-01) 2013-15 Base Budget	Governor's Budget (Y-01) 2013-15 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	921,868	921,868	0	-
0030 Beginning Balance Adjustment				
3400 Other Funds Ltd	1,268,830	1,268,830	0	-
TOTAL BEGINNING BALANCE				
3400 Other Funds Ltd	2,190,698	2,190,698	0	-
REVENUE CATEGORIES				
LICENSES AND FEES				
0205 Business Lic and Fees				
3400 Other Funds Ltd	5,913,608	5,913,608	0	-
0210 Non-business Lic. and Fees				
3400 Other Funds Ltd	377,630	377,630	0	-
TOTAL LICENSES AND FEES				
3400 Other Funds Ltd	6,291,238	6,291,238	0	-
FINES, RENTS AND ROYALTIES				
0505 Fines and Forfeitures				
3400 Other Funds Ltd	260,000	260,000	0	-
INTEREST EARNINGS				
0605 Interest Income				
3400 Other Funds Ltd	20,000	20,000	0	-
OTHER				
0975 Other Revenues				
3400 Other Funds Ltd	22,400	22,400	0	-

Description	Agency Request Budget (V-01) 2013-15 Base Budget	Governor's Budget (Y-01) 2013-15 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
TOTAL REVENUES				
3400 Other Funds Ltd	6,593,638	6,593,638	0	-
TRANSFERS OUT				
2443 Tsfr To Oregon Health Authority				
3400 Other Funds Ltd	(319,775)	(319,775)	0	-
AVAILABLE REVENUES				
3400 Other Funds Ltd	8,464,561	8,464,561	0	-
EXPENDITURES				
PERSONAL SERVICES				
SALARIES & WAGES				
3110 Class/Unclass Sal. and Per Diem				
3400 Other Funds Ltd	2,360,268	2,360,268	0	-
3160 Temporary Appointments				
3400 Other Funds Ltd	23,061	23,061	0	-
3190 All Other Differential				
3400 Other Funds Ltd	31,328	31,328	0	-
TOTAL SALARIES & WAGES				
3400 Other Funds Ltd	2,414,657	2,414,657	0	-
OTHER PAYROLL EXPENSES				
3210 Empl. Rel. Bd. Assessments				
3400 Other Funds Ltd	720	720	0	-
3220 Public Employees' Retire Cont				
3400 Other Funds Ltd	461,277	451,822	(9,455)	-2.05%
3221 Pension Obligation Bond				

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Description	Agency Request Budget (V-01) 2013-15 Base Budget	Governor's Budget (Y-01) 2013-15 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	154,953	154,953	0	-
3230 Social Security Taxes				
3400 Other Funds Ltd	180,563	184,724	4,161	2.30%
3250 Worker's Comp. Assess. (WCD)				
3400 Other Funds Ltd	1,062	1,062	0	-
3260 Mass Transit Tax				
3400 Other Funds Ltd	14,644	14,644	0	-
3270 Flexible Benefits				
3400 Other Funds Ltd	549,504	549,504	0	-
TOTAL OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	1,362,723	1,357,429	(5,294)	-0.39%
P.S. BUDGET ADJUSTMENTS				
3465 Reconciliation Adjustment				
3400 Other Funds Ltd	-	(10,136)	(10,136)	100.00%
TOTAL PERSONAL SERVICES				
3400 Other Funds Ltd	3,777,380	3,761,950	(15,430)	-0.41%
SERVICES & SUPPLIES				
4100 Instate Travel				
3400 Other Funds Ltd	103,780	103,780	0	-
4125 Out of State Travel				
3400 Other Funds Ltd	21,878	21,878	0	-
4150 Employee Training				
3400 Other Funds Ltd	14,967	14,967	0	-
4175 Office Expenses				

Description	Agency Request Budget (V-01) 2013-15 Base Budget	Governor's Budget (Y-01) 2013-15 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	90,064	90,064	0	-
4200 Telecommunications				
3400 Other Funds Ltd	55,219	55,219	0	-
4225 State Gov. Service Charges				
3400 Other Funds Ltd	185,279	185,279	0	-
4250 Data Processing				
3400 Other Funds Ltd	39,274	39,274	0	-
4275 Publicity and Publications				
3400 Other Funds Ltd	9,664	9,664	0	-
4300 Professional Services				
3400 Other Funds Ltd	326,543	326,543	0	-
4315 IT Professional Services				
3400 Other Funds Ltd	50,000	50,000	0	-
4325 Attorney General				
3400 Other Funds Ltd	264,222	264,222	0	-
4400 Dues and Subscriptions				
3400 Other Funds Ltd	4,000	4,000	0	-
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	194,573	194,573	0	-
4525 Medical Services and Supplies				
3400 Other Funds Ltd	1,015	1,015	0	-
4650 Other Services and Supplies				
3400 Other Funds Ltd	55,657	55,657	0	-
4700 Expendable Prop 250 - 5000				

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Description	Agency Request Budget (V-01) 2013-15 Base Budget	Governor's Budget (Y-01) 2013-15 Base Budget	Column 2 minus Column 1	% Change from Column 1 to Column 2
	Column 1	Column 2		
3400 Other Funds Ltd	8,461	8,461	0	-
4715 IT Expendable Property				
3400 Other Funds Ltd	45,780	45,780	0	-
TOTAL SERVICES & SUPPLIES				
3400 Other Funds Ltd	1,470,376	1,470,376	0	-
SPECIAL PAYMENTS				
6085 Other Special Payments				
3400 Other Funds Ltd	43,101	43,101	0	-
6443 Spc Pmt to Oregon Health Authority				
3400 Other Funds Ltd	176,899	176,899	0	-
TOTAL SPECIAL PAYMENTS				
3400 Other Funds Ltd	220,000	220,000	0	-
TOTAL EXPENDITURES				
3400 Other Funds Ltd	5,467,756	5,452,326	(15,430)	-0.28%
ENDING BALANCE				
3400 Other Funds Ltd	2,996,805	3,012,235	15,430	0.51%
AUTHORIZED POSITIONS				
8150 Class/Unclass Positions	18	18	0	-
AUTHORIZED FTE				
8250 Class/Unclass FTE Positions	17.75	17.75	0	-



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				
3160 Temporary Appointments				
3400 Other Funds Ltd	553	553	0	0.00%
3190 All Other Differential				
3400 Other Funds Ltd	752	752	0	0.00%
SALARIES & WAGES				
3400 Other Funds Ltd	1,305	1,305	0	0.00%
TOTAL SALARIES & WAGES	\$1,305	\$1,305	\$0	0.00%
OTHER PAYROLL EXPENSES				
3220 Public Employees Retire Cont				
3400 Other Funds Ltd	148	143	(5)	(3.38%)
3221 Pension Obligation Bond				
3400 Other Funds Ltd	(7,221)	(7,221)	0	0.00%
3230 Social Security Taxes				
3400 Other Funds Ltd	100	100	0	0.00%
3260 Mass Transit Tax				
3400 Other Funds Ltd	(156)	(156)	0	0.00%

Pharmacy, Board of

Agency Number: 85500

**Package Comparison Report - Detail
2013-15 Biennium
Board of Pharmacy**

**Cross Reference Number: 85500-001-00-00-00000
Package: Non-PICS Psnl Svc / Vacancy Factor
Pkg Group: ESS Pkg Type: 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	(7,129)	(7,134)	(5)	(0.07%)
TOTAL OTHER PAYROLL EXPENSES	(\$7,129)	(\$7,134)	(\$5)	(0.07%)
PERSONAL SERVICES				
3400 Other Funds Ltd	(5,824)	(5,829)	(5)	(0.09%)
TOTAL PERSONAL SERVICES	(\$5,824)	(\$5,829)	(\$5)	(0.09%)
EXPENDITURES				
3400 Other Funds Ltd	(5,824)	(5,829)	(5)	(0.09%)
TOTAL EXPENDITURES	(\$5,824)	(\$5,829)	(\$5)	(0.09%)
ENDING BALANCE				
3400 Other Funds Ltd	5,824	5,829	5	0.09%
TOTAL ENDING BALANCE	\$5,824	\$5,829	\$5	0.09%

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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		

EXPENDITURES

SERVICES & SUPPLIES

4100 Instate Travel

3400 Other Funds Ltd 2,491 2,491 0 0.00%

4125 Out of State Travel

3400 Other Funds Ltd 525 525 0 0.00%

4150 Employee Training

3400 Other Funds Ltd 359 359 0 0.00%

4175 Office Expenses

3400 Other Funds Ltd 2,162 2,162 0 0.00%

4200 Telecommunications

3400 Other Funds Ltd 869 (1,385) (2,254) (259.38%)

4225 State Gov. Service Charges

3400 Other Funds Ltd 47,028 18,977 (28,051) (59.65%)

4250 Data Processing

3400 Other Funds Ltd 943 924 (19) (2.01%)

4275 Publicity and Publications

3400 Other Funds Ltd 640 640 0 0.00%

4300 Professional Services

Pharmacy, Board of

Agency Number: 85500

**Package Comparison Report - Detail
2013-15 Biennium
Board of Pharmacy**

**Cross Reference Number: 85500-001-00-00-00000
Package: Standard Inflation
Pkg Group: ESS Pkg Type: 030 Pkg Number: 031**

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	9,143	6,440	(2,703)	(29.56%)
4315 IT Professional Services				
3400 Other Funds Ltd	1,400	1,400	0	0.00%
4325 Attorney General				
3400 Other Funds Ltd	39,369	39,369	0	0.00%
4400 Dues and Subscriptions				
3400 Other Funds Ltd	96	96	0	0.00%
4425 Facilities Rental and Taxes				
3400 Other Funds Ltd	9,923	9,923	0	0.00%
4475 Facilities Maintenance				
3400 Other Funds Ltd	48	48	0	0.00%
4525 Medical Services and Supplies				
3400 Other Funds Ltd	24	24	0	0.00%
4650 Other Services and Supplies				
3400 Other Funds Ltd	1,336	1,336	0	0.00%
4700 Expendable Prop 250 - 5000				
3400 Other Funds Ltd	203	203	0	0.00%
4715 IT Expendable Property				
3400 Other Funds Ltd	1,099	1,099	0	0.00%

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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		
SERVICES & SUPPLIES				
3400 Other Funds Ltd	117,658	84,631	(33,027)	(28.07%)
TOTAL SERVICES & SUPPLIES	\$117,658	\$84,631	(\$33,027)	(28.07%)
EXPENDITURES				
3400 Other Funds Ltd	117,658	84,631	(33,027)	(28.07%)
TOTAL EXPENDITURES	\$117,658	\$84,631	(\$33,027)	(28.07%)
ENDING BALANCE				
3400 Other Funds Ltd	(117,658)	(84,631)	33,027	28.07%
TOTAL ENDING BALANCE	(\$117,658)	(\$84,631)	\$33,027	28.07%

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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		

EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3190 All Other Differential

3400 Other Funds Ltd	29,068	29,068	0	0.00%
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SALARIES & WAGES

3400 Other Funds Ltd	29,068	29,068	0	0.00%
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TOTAL SALARIES & WAGES	\$29,068	\$29,068	\$0	0.00%
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OTHER PAYROLL EXPENSES

3220 Public Employees Retire Cont

3400 Other Funds Ltd	5,735	5,543	(192)	(3.35%)
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3230 Social Security Taxes

3400 Other Funds Ltd	2,224	2,224	0	0.00%
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OTHER PAYROLL EXPENSES

3400 Other Funds Ltd	7,959	7,767	(192)	(2.41%)
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TOTAL OTHER PAYROLL EXPENSES	\$7,959	\$7,767	(\$192)	(2.41%)
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PERSONAL SERVICES

3400 Other Funds Ltd	37,027	36,835	(192)	(0.52%)
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TOTAL PERSONAL SERVICES	\$37,027	\$36,835	(\$192)	(0.52%)
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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		
SERVICES & SUPPLIES				
4300 Professional Services				
3400 Other Funds Ltd	(220,000)	(220,000)	0	0.00%
4575 Agency Program Related S and S				
3400 Other Funds Ltd	220,000	220,000	0	0.00%
SERVICES & SUPPLIES				
3400 Other Funds Ltd	-	-	0	0.00%
TOTAL SERVICES & SUPPLIES	-	-	\$0	0.00%
SPECIAL PAYMENTS				
6085 Other Special Payments				
3400 Other Funds Ltd	(37,027)	(37,027)	0	0.00%
EXPENDITURES				
3400 Other Funds Ltd	-	(192)	(192)	100.00%
TOTAL EXPENDITURES	-	(\$192)	(\$192)	100.00%
ENDING BALANCE				
3400 Other Funds Ltd	-	192	192	100.00%
TOTAL ENDING BALANCE	-	\$192	\$192	100.00%

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

P.S. BUDGET ADJUSTMENTS

3470 Undistributed (P.S.)

3400 Other Funds Ltd	-	(3,693)	(3,693)	100.00%
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P.S. BUDGET ADJUSTMENTS

3400 Other Funds Ltd	-	(3,693)	(3,693)	100.00%
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TOTAL P.S. BUDGET ADJUSTMENTS	-	(\$3,693)	(\$3,693)	100.00%
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PERSONAL SERVICES

3400 Other Funds Ltd	-	(3,693)	(3,693)	100.00%
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TOTAL PERSONAL SERVICES	-	(\$3,693)	(\$3,693)	100.00%
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SERVICES & SUPPLIES

4675 Undistributed (S.S.)

3400 Other Funds Ltd	-	(1,503)	(1,503)	100.00%
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SERVICES & SUPPLIES

3400 Other Funds Ltd	-	(1,503)	(1,503)	100.00%
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TOTAL SERVICES & SUPPLIES	-	(\$1,503)	(\$1,503)	100.00%
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EXPENDITURES

3400 Other Funds Ltd	-	(5,196)	(5,196)	100.00%
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Pharmacy, Board of

Agency Number: 85500

**Package Comparison Report - Detail
2013-15 Biennium
Board of Pharmacy**

**Cross Reference Number: 85500-001-00-00-00000
Package: Statewide Administrative Savings
Pkg Group: POL Pkg Type: 090 Pkg Number: 091**

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	-	(\$5,196)	(\$5,196)	100.00%
ENDING BALANCE				
3400 Other Funds Ltd	-	5,196	5,196	100.00%
TOTAL ENDING BALANCE	-	\$5,196	\$5,196	100.00%

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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		
EXPENDITURES				
PERSONAL SERVICES				
P.S. BUDGET ADJUSTMENTS				
3991 PERS Policy Adjustment				
3400 Other Funds Ltd	-	(10,316)	(10,316)	100.00%
P.S. BUDGET ADJUSTMENTS				
3400 Other Funds Ltd	-	(10,316)	(10,316)	100.00%
TOTAL P.S. BUDGET ADJUSTMENTS	-	(\$10,316)	(\$10,316)	100.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	-	(10,316)	(10,316)	100.00%
TOTAL PERSONAL SERVICES	-	(\$10,316)	(\$10,316)	100.00%
EXPENDITURES				
3400 Other Funds Ltd	-	(10,316)	(10,316)	100.00%
TOTAL EXPENDITURES	-	(\$10,316)	(\$10,316)	100.00%
ENDING BALANCE				
3400 Other Funds Ltd	-	10,316	10,316	100.00%
TOTAL ENDING BALANCE	-	\$10,316	\$10,316	100.00%

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				
P.S. BUDGET ADJUSTMENTS				
3991 PERS Policy Adjustment				
3400 Other Funds Ltd	-	(82,530)	(82,530)	100.00%
P.S. BUDGET ADJUSTMENTS				
3400 Other Funds Ltd	-	(82,530)	(82,530)	100.00%
TOTAL P.S. BUDGET ADJUSTMENTS	-	(\$82,530)	(\$82,530)	100.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	-	(82,530)	(82,530)	100.00%
TOTAL PERSONAL SERVICES	-	(\$82,530)	(\$82,530)	100.00%
EXPENDITURES				
3400 Other Funds Ltd	-	(82,530)	(82,530)	100.00%
TOTAL EXPENDITURES	-	(\$82,530)	(\$82,530)	100.00%
ENDING BALANCE				
3400 Other Funds Ltd	-	82,530	82,530	100.00%
TOTAL ENDING BALANCE	-	\$82,530	\$82,530	100.00%

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	211,284	211,284	0	0.00%
SALARIES & WAGES				
3400 Other Funds Ltd	211,284	211,284	0	0.00%
TOTAL SALARIES & WAGES	\$211,284	\$211,284	\$0	0.00%
OTHER PAYROLL EXPENSES				
3210 Empl. Rel. Bd. Assessments				
3400 Other Funds Ltd	40	40	0	0.00%
3220 Public Employees Retire Cont				
3400 Other Funds Ltd	41,686	40,291	(1,395)	(3.35%)
3230 Social Security Taxes				
3400 Other Funds Ltd	16,162	16,162	0	0.00%
3250 Workers Comp. Assess. (WCD)				
3400 Other Funds Ltd	59	59	0	0.00%
3260 Mass Transit Tax				
3400 Other Funds Ltd	1,268	1,268	0	0.00%

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Pharmacy, Board of

Agency Number: 85500

**Package Comparison Report - Detail
2013-15 Biennium
Board of Pharmacy**

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

Package: Personnel Management

Pkg Group: POL Pkg Type: 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		
3270 Flexible Benefits				
3400 Other Funds Ltd	30,528	30,528	0	0.00%
OTHER PAYROLL EXPENSES				
3400 Other Funds Ltd	89,743	88,348	(1,395)	(1.55%)
TOTAL OTHER PAYROLL EXPENSES	\$89,743	\$88,348	(\$1,395)	(1.55%)
P.S. BUDGET ADJUSTMENTS				
3465 Reconciliation Adjustment				
3400 Other Funds Ltd	-	1	1	100.00%
P.S. BUDGET ADJUSTMENTS				
3400 Other Funds Ltd	-	1	1	100.00%
TOTAL P.S. BUDGET ADJUSTMENTS	-	\$1	\$1	100.00%
PERSONAL SERVICES				
3400 Other Funds Ltd	301,027	299,633	(1,394)	(0.46%)
TOTAL PERSONAL SERVICES	\$301,027	\$299,633	(\$1,394)	(0.46%)
EXPENDITURES				
3400 Other Funds Ltd	301,027	299,633	(1,394)	(0.46%)
TOTAL EXPENDITURES	\$301,027	\$299,633	(\$1,394)	(0.46%)
ENDING BALANCE				
3400 Other Funds Ltd	(301,027)	(299,633)	1,394	0.46%

Pharmacy, Board of

Agency Number: 85500

**Package Comparison Report - Detail
2013-15 Biennium
Board of Pharmacy**

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

Package: Personnel Management

Pkg Group: POL Pkg Type: 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		
TOTAL ENDING BALANCE	(\$301,027)	(\$299,633)	\$1,394	0.46%
AUTHORIZED POSITIONS				
8150 Class/Unclass Positions	1	1	0	0.00%
AUTHORIZED FTE				
8250 Class/Unclass FTE Positions	1.25	1.25	0.00	0.00%

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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		
REVENUE CATEGORIES				
LICENSES AND FEES				
0205 Business Lic and Fees				
3400 Other Funds Ltd	1,124,960	1,124,960	0	0.00%
AVAILABLE REVENUES				
3400 Other Funds Ltd	1,124,960	1,124,960	0	0.00%
TOTAL AVAILABLE REVENUES	\$1,124,960	\$1,124,960	\$0	0.00%
ENDING BALANCE				
3400 Other Funds Ltd	1,124,960	1,124,960	0	0.00%
TOTAL ENDING BALANCE	\$1,124,960	\$1,124,960	\$0	0.00%

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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01/11/13 REPORT NO.: PPDPLEUDCL
 REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
 AGENCY:85500 PHARMACY, OREGON BOARD OF
 SUMMARY XREF:001-00-00 000 Board of Pharmacy

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

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	PRINCIPAL EXECUTIVE/MANAGER E	1	1.00	24.00	8,325.00		199,800			199,800
000	MMN X0854	AA	PROJECT MANAGER 1	1	1.00	24.00	4,159.00		99,816			99,816
000	MMS X0806	AA	OFFICE MANAGER 2	1	1.00	24.00	3,426.00		82,224			82,224
000	MMS X7006	AA	PRINCIPAL EXECUTIVE/MANAGER D	2	2.00	48.00	6,466.00		310,368			310,368
000	OA C0103	AA	OFFICE SPECIALIST 1	1	1.00	24.00	2,352.00		56,448			56,448
000	OA C0104	AA	OFFICE SPECIALIST 2	3	2.75	66.00	2,871.33		190,764			190,764
000	OA C0107	AA	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	3,484.00		83,616			83,616
000	OA C0323	AA	PUBLIC SERVICE REP 3	3	3.00	72.00	2,871.33		206,736			206,736
000	OA C5911	EA	HEALTH CARE INVESTIGTR/ADVISR	5	5.00	120.00	9,234.80		1,108,176			1,108,176
000				18	17.75	426.00	3,163.87		2,360,268			2,360,268



01/11/13 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

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

2013-15
 PICS SYSTEM: BUDGET PREPARATION
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 PROD FILE

PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
100	MMN	X0854	AA PROJECT MANAGER 1	1-	1.00-	24.00-	4,159.00		99,816-			99,816-
100	MMN	X0871	AA OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	4,364.00		104,736			104,736
100	OA	C0103	AA OFFICE SPECIALIST 1	1-	1.00-	24.00-	2,352.00		56,448-			56,448-
100	OA	C0104	AA OFFICE SPECIALIST 2	1	1.25	30.00	2,591.66		74,796			74,796
100	OA	C5911	EA HEALTH CARE INVESTIGTR/ADVISR	1	1.00	24.00	7,834.00		188,016			188,016
100				1	1.25	30.00	3,783.42		211,284			211,284
				19	19.00	456.00	3,278.00		2,571,552			2,571,552
				19	19.00	456.00	3,278.00		2,571,552			2,571,552

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01/11/13 REPORT NO.: PPDPLEBUDCL
REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
AGENCY:85500 PHARMACY, OREGON BOARD OF
SUMMARY XREF:001-00-00 100 Board of Pharmacy

DEPT. OF ADMIN. SVCS. -- PPDB PICS SYSTEM

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PICS SYSTEM: BUDGET PREPARATION

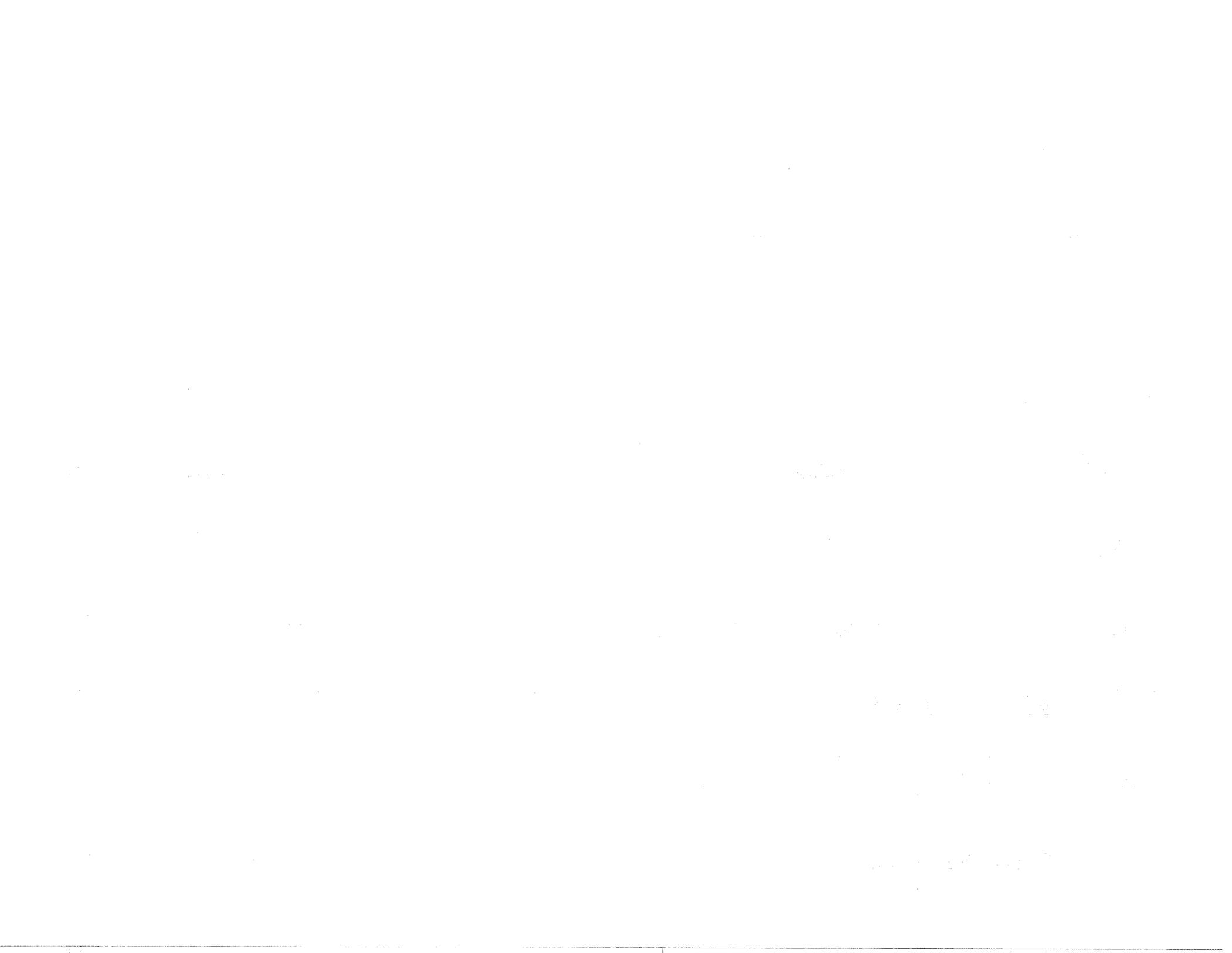
PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
				19	19.00	456.00	3,278.00		2,571,552			2,571,552

01/11/13 REPORT NO.: PPDPLAGYCL
 REPORT: SUMMARY LIST BY PKG BY AGENCY
 AGENCY:85500 PHARMACY, OREGON BOARD OF

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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	PRINCIPAL EXECUTIVE/MANAGER E	1	1.00	24.00	8,325.00		199,800			199,800
000	MMN X0854	AA	PROJECT MANAGER 1		.00	.00	4,159.00					
000	MMN X0871	AA	OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	4,364.00		104,736			104,736
000	MMS X0806	AA	OFFICE MANAGER 2	1	1.00	24.00	3,426.00		82,224			82,224
000	MMS X7006	AA	PRINCIPAL EXECUTIVE/MANAGER D	2	2.00	48.00	6,466.00		310,368			310,368
000	OA C0103	AA	OFFICE SPECIALIST 1		.00	.00	2,352.00					
000	OA C0104	AA	OFFICE SPECIALIST 2	4	4.00	96.00	2,731.50		265,560			265,560
000	OA C0107	AA	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	3,484.00		83,616			83,616
000	OA C0323	AA	PUBLIC SERVICE REP 3	3	3.00	72.00	2,871.33		206,736			206,736
000	OA C5911	EA	HEALTH CARE INVESTIGTR/ADVISR	6	6.00	144.00	9,001.33		1,296,192			1,296,192
				19	19.00	456.00	3,278.00		2,571,552			2,571,552



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PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
				19	19.00	456.00	3,278.00		2,571,552			2,571,552

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 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 85500 PHARMACY, OREGON BOARD OF
 SUMMARY XREF: 001-00-00 100 Board of Pharmacy

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POSITION	AUTH NO	ORG STRUC	F POS	CLASS	COMP	RNG P	POS CNT	FTE	BUDGET RATE	MOS	GF SAL	OF SAL	FF SAL	LF SAL	T R K
0000585	001001800	001-01-00-00000	100 0 PF	OA	C0103 AA	12 05	1-	1.00-	2,352.00	24.00-		56,448-			
EST DATE: 2013/07/01 EXP DATE: 9999/01/01															
0000585	001001800	001-01-00-00000	100 0 PF	OA	C0104 AA	15 03	1	1.00	2,451.00	24.00		58,824			
EST DATE: 2013/07/01 EXP DATE: 9999/01/01															
0000592	001001830	001-01-00-00000	100 0 PF	MMN	X0854 AA	26 02	1-	1.00-	4,159.00	24.00-		99,816-			
EST DATE: 2013/07/01 EXP DATE: 9999/01/01															
0000592	001001830	001-01-00-00000	100 0 PF	MMN	X0871 AA	27 02	1	1.00	4,364.00	24.00		104,736			
EST DATE: 2013/07/01 EXP DATE: 9999/01/01															
0000650	001001960	001-01-00-00000	100 0 PP	OA	C0104 AA	15 05	1-	.75-	2,662.00	18.00-		47,916-			
EST DATE: 2013/07/01 EXP DATE: 9999/01/01															
0000650	001001960	001-01-00-00000	100 0 PF	OA	C0104 AA	15 05	1	1.00	2,662.00	24.00		63,888			
EST DATE: 2013/07/01 EXP DATE: 9999/01/01															
0000652	001189700	001-01-00-00000	100 0 PF	OA	C5911 EA	26 04	1	1.00	7,834.00	24.00		188,016			
EST DATE: 2013/07/01 EXP DATE: 9999/01/01															
			100				1	1.25		30.00		211,284			
							1	1.25		30.00		211,284			
							1	1.25		30.00		211,284			

1. The first part of the document discusses the importance of maintaining accurate records of all transactions. It emphasizes that every entry should be supported by a valid receipt or invoice. This ensures transparency and allows for easy verification of the data.

2. The second part of the document outlines the various methods used to collect and analyze data. It includes a detailed description of the sampling process, which was designed to be representative of the entire population. The analysis then focuses on identifying trends and patterns within the data set.

3. The third part of the document presents the results of the study. It shows that there is a significant correlation between the variables being studied. This finding is supported by statistical tests and is consistent with previous research in the field.

4. The final part of the document discusses the implications of the findings. It suggests that the results could be used to inform policy decisions and to guide future research. The authors also acknowledge the limitations of the study and provide suggestions for how these could be addressed in future work.

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 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 85500 PHARMACY, OREGON BOARD OF
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POSITION NUMBER	AUTH NO	ORG STRUC	F POS PKG Y TYP	CLASS COMP	S T RNG P	POS CNT	FTE	BUDGET RATE	MOS	GF SAL	OF SAL	FF SAL	LF SAL	T R K
						1	1.25		30.00		211,284			

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01/11/13 REPORT NO.: PDPFISCAL
 REPORT: PACKAGE FISCAL IMPACT REPORT
 AGENCY:85500 PHARMACY, OREGON BOARD OF
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PACKAGE: 100 - Personnel Management

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
0000585 OA C0103 AA OFFICE SPECIALIST 1	1-	1.00-	24.00-	05	2,352.00		56,448- 45,710-			56,448- 45,710-
0000585 OA C0104 AA OFFICE SPECIALIST 2	1	1.00	24.00	03	2,451.00		58,824 46,345			58,824 46,345
0000592 MMN X0854 AA PROJECT MANAGER 1	1-	1.00-	24.00-	02	4,159.00		99,816- 57,298-			99,816- 57,298-
0000592 MMN X0871 AA OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	02	4,364.00		104,736 58,612			104,736 58,612
0000650 OA C0104 AA OFFICE SPECIALIST 2	1-	.75-	18.00-	05	2,662.00		47,916- 43,431-			47,916- 43,431-
0000650 OA C0104 AA OFFICE SPECIALIST 2	1	1.00	24.00	05	2,662.00		63,888 47,697			63,888 47,697
0000652 OA C5911 EA HEALTH CARE INVESTIGTR/ADVISR	1	1.00	24.00	04	7,834.00		188,016 80,865			188,016 80,865
TOTAL PICS SALARY							211,284			211,284
TOTAL PICS OPE							87,080			87,080
TOTAL PICS PERSONAL SERVICES =	1	1.25	30.00				298,364			298,364

