

**OREGON BOARD OF PHARMACY 2019-21
AGENCY REQUEST BUDGET**

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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.

Oregon Board of Pharmacy

AGENCY NAME

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

AGENCY ADDRESS



SIGNATURE

Board President

TITLE

Notice: Requests of agencies headed by a board or commission must be approved by official action of those bodies 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 Budget

Legislatively Adopted

HB 5030 A BUDGET REPORT and MEASURE SUMMARY

Carrier: Rep. Hernandez

Joint Committee On Ways and Means

Action Date: 04/21/17

Action: Do pass with amendments. (Printed A-Eng.)

House Vote

Yeas: 9 - Gomberg, Holvey, Huffman, McLane, Nathanson, Rayfield, Smith G, Stark, Williamson

Exc: 2 - Smith Warner, Whisnant

Senate Vote

Yeas: 12 - DeBoer, Devlin, Frederick, Girod, Hansell, Johnson, Manning Jr, Monroe, Roblan, Steiner Hayward, Thomsen, Winters

Prepared By: Anthony Medina, Department of Administrative Services

Reviewed By: Kim To, Legislative Fiscal Office



Budget Summary*

	2015-17 Legislatively Approved Budget ⁽¹⁾	2017-19 Current Service Level	2017-19 Committee Recommendation	Committee Change from 2015-17 Leg. Approved	
				\$ Change	% Change
Other Funds Limited	\$ 7,061,708	\$ 7,163,478	\$ 7,596,546	\$ 534,838	7.6%
Total	\$ 7,061,708	\$ 7,163,478	\$ 7,596,546	\$ 534,838	7.6%

Position Summary

Authorized Positions	20	20	20	0
Full-time Equivalent (FTE) positions	20.00	20.00	20.00	0.00

⁽¹⁾ Includes adjustments through December 2016

* Excludes Capital Construction expenditures

Summary of Revenue Changes

The Oregon Board of Pharmacy is primarily supported by Other Funds revenues generated from examination, licensing and renewal application fees charged to pharmacists, pharmacy technicians, pharmacy interns and various types of drug outlets. With the adoption of the Subcommittee recommendations, the agency's estimated 2017-19 ending fund balance is \$1,816,816, or the equivalent of approximately 5.7 months of operating expenses.

Summary of Education Subcommittee Action

The Board of Pharmacy promotes, preserves and protects the health, safety and welfare of Oregon citizens through the control and regulation of the practice of pharmacy. The Board regulates the quality and distribution of drugs through outlets involved in the manufacture, production, sale and distribution of prescription drugs, over-the-counter drugs, controlled substances and devices and other materials as may be used in the diagnosis, cure, mitigation, prevention and treatment of injury, illness and disease.

The Subcommittee recommended a budget for the Board of Pharmacy of \$7,596,546 Other Funds and 20.00 full-time equivalent positions. This is a 7.6% increase from the 2015-17 Legislatively Approved Budget.



The Subcommittee approved the following recommendations:

- Package 100: Licensing Software Upgrade – Carry over \$351,989 from the 2015-17 biennium to complete the implementation of the agency’s licensing and compliance database upgrade.
- Package 101: Academic and Regulatory Fellowship – Increase Other Funds by \$69,260 to establish a partnership with Pacific University School of Pharmacy to offer a one-year fellowship designed to transition the fellow from a general practitioner to a regulatory pharmaceutical specialist and clinical educator.
- Package 102: Board Member Per Diem – Increase Other Funds by \$11,819 to cover per diem for new board members and to increase daily per diem from \$30 to \$100 to allow for diversity of board members who may not be employer supported.

Summary of Performance Measure Action

See attached Legislatively Adopted 2017-19 Key Performance Measures form.



DETAIL OF JOINT COMMITTEE ON WAYS AND MEANS ACTION

Oregon Board of Pharmacy
 Anthony Medina - (971) 209-9980

DESCRIPTION	GENERAL FUND	LOTTERY FUNDS	OTHER FUNDS		FEDERAL FUNDS		TOTAL ALL FUNDS	POS	FTE
			LIMITED	NONLIMITED	LIMITED	NONLIMITED			
2015-17 Legislatively Approved Budget at Dec 2016 *	\$ -	\$ -	\$ 7,061,708	\$ -	\$ -	\$ -	7,061,708	20	20.00
2017-19 Current Service Level (CSL)*	\$ -	\$ -	\$ 7,163,478	\$ -	\$ -	\$ -	7,163,478	20	20.00
SUBCOMMITTEE ADJUSTMENTS (from CSL)									
SCR 001 - Operations									
Package 100: My License Business Upgrade Services and Supplies	\$ -	\$ -	\$ 351,989	\$ -	\$ -	\$ -	351,989	0	0.00
SCR 001 - Operations									
Package 101: Academic and Regulatory Fellowship Services and Supplies	\$ -	\$ -	\$ 69,260	\$ -	\$ -	\$ -	69,260	0	0.00
SCR 001 - Operations									
Package 102: Board Member Per Diem Personal Services	\$ -	\$ -	\$ 11,819	\$ -	\$ -	\$ -	11,819	0	0.00
TOTAL ADJUSTMENTS	\$ -	\$ -	\$ 433,068	\$ -	\$ -	\$ -	433,068	20	20.00
SUBCOMMITTEE RECOMMENDATION *	\$ -	\$ -	\$ 7,596,546	\$ -	\$ -	\$ -	7,596,546	20	20.00
% Change from 2015-17 Leg Approved Budget	0.0%	0.0%	7.6%	0.0%	0.0%	0.0%	7.6%		
% Change from 2017-19 Current Service Level	0.0%	0.0%	6.0%	0.0%	0.0%	0.0%	6.0%		

*Excludes Capital Construction Expenditures

Legislatively Approved 2017 - 2019 Key Performance Measures

Published: 4/19/2017 12:44:34 PM

Agency: Pharmacy, Board of

Mission Statement:

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 Approved KPMs	Metrics	Agency Request	Last Reported Result	Target 2018	Target 2019
1. Percent of inspected pharmacies that are in compliance annually.		Approved	79%	80%	80%
2. Percent of audited pharmacists who complete continuing education on time.		Approved	97%	0%	100%
3. Percent of pharmacies inspected annually.		Approved	100%	100%	100%
4. Average number of days to complete an investigation from complaint to board presentation.		Approved	98	100	100
5. CUSTOMER SERVICE - 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	90%	90%	90%
	Expertise		94%	90%	90%
	Accuracy		93%	90%	90%
	Helpfulness		92%	90%	90%
	Overall		93%	90%	90%
	Availability of Information		90%	90%	90%
6. Board Best Practices - Percent of total best practices met by the Board.		Approved	99%	100%	100%

LFO Recommendation:

For KPM #2, LFO recommends the agency reports information only in odd number years when pharmacists renew their license and are audited.

For the remaining KPMs, LFO recommends approval of KPM and targets as presented.

SubCommittee Action:

Approved LFO recommendation.

HB 5006 A BUDGET REPORT and MEASURE SUMMARY

Carrier: Rep. Nathanson

Joint Committee On Ways and Means

Action Date: 07/03/17

Action: Do pass with amendments. (Printed A-Eng.)

House Vote

Yeas: 7 - Gomberg, Holvey, Huffman, Nathanson, Rayfield, Smith Warner, Williamson

Nays: 1 - McLane

Exc: 3 - Smith G, Stark, Whisnant

Senate Vote

Yeas: 11 - DeBoer, Devlin, Frederick, Girod, Hansell, Johnson, Manning Jr, Monroe, Roblan, Steiner Hayward, Winters

Nays: 1 - Thomsen

Prepared By: Laurie Byerly and Gregory Jolivette, Legislative Fiscal Office

Reviewed By: Paul Siebert, Legislative Fiscal Office

**Emergency Board
2017-19**

**Various Agencies
2015-17**

Budget Summary*

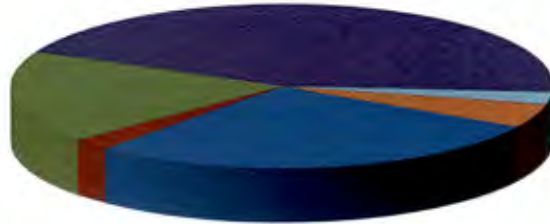
	<u>2015-17 Legislatively Approved Budget</u>	<u>2017-19 Committee Recommendation</u>	<u>Committee Change</u>
<u>Consumer and Business Services</u>			
Other Funds	-	\$ (5,252,286)	\$ (5,252,286)
Federal Funds	-	\$ (475,260)	\$ (475,260)
<u>Construction Contractors Board</u>			
Other Funds	-	\$ (461,875)	\$ (461,875)
<u>Board of Dentistry</u>			
Other Funds	-	\$ (38,848)	\$ (38,848)
<u>Health Related Licensing Boards</u>			
Other Funds	-	\$ (83,199)	\$ (83,199)
<u>Bureau of Labor and Industries</u>			
General Fund	-	\$ (127,909)	\$ (127,909)
Other Funds	-	\$ (278,736)	\$ (278,736)
Federal Funds	-	\$ (960)	\$ (960)
<u>Licensed Professional Counselors and Therapists. Board of</u>			
Other Funds	-	\$ (24,871)	\$ (24,871)
<u>Licensed Social Workers, Board of</u>			
Other Funds	-	\$ (25,841)	\$ (25,841)
<u>Medical Board</u>			
Other Funds	-	\$ (345,981)	\$ (345,981)
<u>Board of Nursing</u>			
Other Funds	-	\$ (450,604)	\$ (450,604)
<u>Board of Pharmacy</u>			
Other Funds	-	\$ (261,147)	\$ (261,147)



BUDGET NARRATIVE – 2019-21

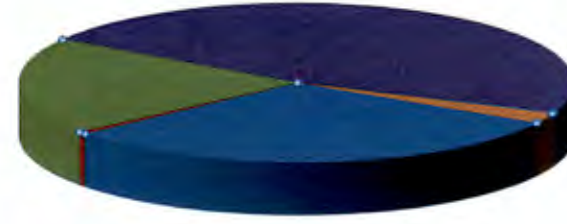
Program Description AGENCY SUMMARY NARRATIVE

2017-2019 Program Allocation



- Operations & Admin 27.9% (Includes fingerprinting \$229,434 pass-thru)
- Board Member Activities 2.3%
- Licensing 18.4%
- Compliance 44.3%
- Health Professionals Service Program (HPSP) 2.4%
- MyLicense (IT Upgrade) 4.6%

2019-2021 Program Allocation



- Operations & Admin 30.81%
- Board Member Activities .45%
- Licensing 18.93%
- Compliance 47.55%
- Formulary Committee .19%
- Health Professionals Service Program (HPSP) 2.07%

**2017-2019 Expenditures by Type
\$7,335,399 LAB**



- Personnel Services 66.46%
- Travel 1.58%
- Data Processing & Telecommunications 1.69%
- Prof. Services/Hearings Panel 2.92%
- Agency Program Related S & S (Fingerprinting) 3.07% *PASS THRU
- IT Expendable Property .59%
- IT Professional Services 4.73%
- Publicity & Publications .57%
- Office Expenses/Supplies (Includes Storage Fees & Postage) 1.66%
- Attorney General 4.38%
- State Government Service Charges 1.61%
- Facilities & Rent 2.94%
- Employee Training .70%
- Expendable Property .14%
- Health Professional's Service Program 2.47%
- Other Special Payments .16%
- Other Services & Supplies 3.73%
- Medical Services & Supplies .01%

**2019-2021 Expenditures by Type
\$8,640,208**



- Personnel Services 67.41%
- Travel 1.52%
- Data Processing & Telecommunications 1.56%
- Prof. Services/Hearings Panel 2.72%
- Agency Program Related S & S (Fingerprinting) 2.78% *PASS THRU
- IT Expendable Property .50%
- IT Professional Services 4.21%
- Publicity & Publications .52%
- Office Expenses/Supplies (Includes Storage Fees & Postage) 1.53%
- Attorney General 6.57%
- State Government Service Charges 2.03%
- Facilities & Rent 2.81%
- Employee Training .26%
- Expendable Property .16%
- Health Professional's Service Program 1.85%
- Other Special Payments .14%
- Other Services & Supplies 3.43%
- Medical Services & Supplies .01%

BUDGET NARRATIVE – 2019-21

Mission Statement and Statutory Authority

Oregon Board of Pharmacy Funding Limitation 17-19 LAB



■ Other Funds
\$7,335,399

Oregon Board of Pharmacy Funding Limitation 19-21 ARB



■ Other Funds
\$8,640,208

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 – 2019-21

In healthcare realm most board's practice act is specific to the profession and scope of practice, however the Pharmacy Practice Act includes both the profession as well as outlet registration complexities. 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 all entities involved in the commerce, 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 (11)]

- (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; and
- (d) Articles intended for use as a component of any articles specified in paragraph (a), (b) or (c) of this subsection.

“Practice of Pharmacy” means: [ORS 689.005 (31)]

- (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 prescribing and administering of vaccines and immunizations and the providing of patient care services 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 regarding the safe storage of drugs and devices;
- (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;
- (i) The optimizing of drug therapy through the practice of clinical pharmacy;
- (j) Patient care services, including medication therapy management and comprehensive medication review;

BUDGET NARRATIVE – 2019-21

(k) The offering or performing of those acts, services, operations or transactions necessary in the conduct, operation, management and control of pharmacy; and

(L) The prescribing and administering of injectable hormonal contraceptives and the prescribing and dispensing of self-administered hormonal contraceptives pursuant to ORS 689.689.

“Drug Outlet” means: [ORS 689.005(13)]

Any pharmacy, nursing home, shelter home, convalescent home, extended care facility, drug abuse treatment center, penal institution, hospital, family planning clinic, student health center, retail store, wholesaler, manufacturer, mail-order vendor or other establishment with facilities located within or out of this state that is engaged in dispensing, delivery or distribution of drugs within this state.

Licensing, Standards and Discipline for Individuals [ORS 689.151, 689.225 – 689.295, 689.486 – 689.499]

Any individual engaged in the practice of pharmacy on behalf of an Oregon patient must be licensed by the Board.

This includes the following individual categories as of 8/1/18:

INDIVIDUALS LICENSED IN OREGON	
Certified Oregon Pharmacy Technician	6112
Federal Preceptor*	31
Intern	944
Non-Pharmacist Preceptor*	14
Pharmacist	7967
Pharmacy Technician	1142
Preceptor*	<u>3186</u>
TOTAL	19396
<i>(*Note: All preceptors are licensed Pharmacists in Oregon with the exception of non-pharmacist preceptors)</i>	

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.



BUDGET NARRATIVE – 2019-21

(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]

This includes the following categories of drug outlets as of 8/1/18:

OUTLETS LICENSED IN OREGON			
Animal Euthanasia	25	Non-Prescript Drug Outlet-A	2768
Charitable Pharmacy	12	Non-Prescript Drug Outlet-B	81
Community Health Clinic	123	Non-Prescript Drug Outlet-D	1
Consulting / Drugless Pharmacy	11	Non-Prescript Drug Outlet-E	1
Controlled Substance	1995	Precursor	10
Correctional Facility	51	Prophylactic/Contraceptive	13
Dispensing Practitioner Drug Outlet	10	Remote Dispensing Machine	1
Drug Distribution Agent	268	Remote Distribution Facility	4
Home Dialysis Drug Outlet	6	Retail Drug Outlet	1356
Hospital Drug Room	20	Supervising Physician Dispensing Outlet	41
Institutional Drug Outlet	142	Volunteer Limited Liability	3
Manufacturer	1087	Wholesaler - Class III	160
Med Device/Equip/Gases-C	463	Wholesaler - Nonprescription	130
		<u>Wholesaler with Prescription</u>	<u>464</u>
		OUTLET TOTAL	9246

The total number of Board of Pharmacy licensees as of 8/1/18 is 28,642.

BUDGET NARRATIVE – 2019-21

Agency two-year Strategic Plan

The Agency is tied to the Governor’s Safety primary outcome area. 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 three goals are tied to the agency Key Performance Measures. They are:

1. Protect Oregon consumers by regulating the practice of pharmacy and the commerce of drugs from manufacturer to the end user;
2. Provide Excellent Customer Service; and,
3. Conduct business in a manner that supports a positive environment for the pharmacy and pharmaceutical industries.

Each year, the Board of Pharmacy has a Strategic Planning Session where Board members review, establish and update priorities. In November 2017, the Board reevaluated its Strategic Plan and established three new pillars as an approach to its plan for work in 2018-2022. These pillars fit into three categories: 1) Safe Drug Accessibility and Distribution 2) Entrustable Professional Activities (EPAs) and 3) Define the Standards of Practice.

A new focus for the agency this past biennium was the implementation of the Public Health and Pharmacy Formulary Advisory Committee established during the 2017 Legislative Session and effective January 1, 2018. This seven member, multi-disciplinary committee’s responsibility is to evaluate proposals for drugs and devices that may be safely prescribed by pharmacists and directs the committee to recommend drugs and devices for inclusion on the formulary. Based on the Committee’s recommendations, the Board of Pharmacy is to establish by rule a formulary of drugs and devices that pharmacists may prescribe and dispense to patients under specified conditions. This further establishes the pharmacists as a part of the medical team and expands the utilization of pharmacists to additional areas of prescribing other than birth control and naloxone where it will be safe and supports greater access to health care.

The follow illustrations visualize how laws & rules establish the foundation for engaged, knowledgeable leadership, the three pillars that expect to result in strategic outcomes and ultimately satisfy the Board’s primary mission of public safety.

BUDGET NARRATIVE – 2019-21



BUDGET NARRATIVE – 2019-21

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

Goal 2. Provide Excellent Customer Service

Goal 3. Conduct business in a manner that supports a positive environment for the pharmacy industry

Annual Performance Progress Report (APPR)

The Board has the following legislatively approved Key Performance Measures:

- 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

See the Special Reports tab for a copy of the 2017 Annual Performance Progress Report, which reflects a combination of 2016 and 2017 data available at the time of this document on [page 87](#).

BUDGET NARRATIVE – 2019-21

Agency Process Improvement Efforts

The Agency regularly reviews processes for improvement, to streamline and the Management Team tracks performance measurement for Licensing and Compliance, as well as other administrative responsibilities. Two of the most significant improvements implemented towards continuous improvement are:

Transitioning various IT Services

With increasing technology and security changes mandated by the Office of the State Chief Information Officer (OSCIO), the Board's technology consultant who has managed all agency systems for over 12 years decided to move away from supporting small state agencies/boards. This arrangement has afforded the Board full service and effective information technology (IT) services at a low price for many years; however, as state requirements have evolved, it became necessary to identify new and different resources. Through a very long and collaborative effort with the Department of Administrative Services Procurement Services, OSCIO and their Enterprise Technology Services, as well as with other boards impacted by this change, we have moved most of our IT services to the state data center and via an intergovernmental agency agreement have obtained a new desktop support provider.

Database Upgrade

The Board is currently in the process of upgrading its licensing and compliance database program and services, which will modernize the application, establish greater accessibility for our licensees to update their own information, while ensuring greater security for agency data overall. This too has been a very collaborative process with the OSCIO, Enterprise Security Office (ESO), Procurement Services, Oregon State Police and Treasury.

Additional Program Objectives

As noted previously, the Board has identified goals, objectives and priority outcomes for the next two years; however, the Board continues to regularly do the following to achieve the overall mission, goals, objectives and priorities of the Agency.

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

BUDGET NARRATIVE – 2019-21

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 educated in 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) to obtain a Foreign Pharmacy Graduate Equivalency Certificate (FPGEC). 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, charitable, consulting, and community pharmacies, supervising physician dispensing outlets, drug manufacturers and wholesalers, correctional facilities, community health clinics and other drug outlets for compliance with federal and state laws and rules. The Board has developed a pharmacy self-inspection form for each of these outlet types which enable the 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 a deficiency notification or a non-compliance notification 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. Additionally, Board of Pharmacy inspectors are available to answer questions from pharmacists, interns, pharmacy technicians, other healthcare professionals, and the general public.

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. All retail and hospital and institutional pharmacies are inspected annually. As time allows and necessity dictates, Inspectors also inspect Manufacturers and Wholesalers within the state. A newer additional goal is to inspect all outlets located in Oregon every four years. In Oregon "Voluntary Compliance" is the heart of the regulatory process 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. Inspections also serve as an educational opportunity to share new information and answer questions an outlet may need more information about. The Compliance Director provides current inspection progress to the Board at each scheduled Board meeting.

Because of widely reported concerns of counterfeit or tainted drugs and general concerns about the integrity and security of the nation's drug distribution system, the Board feels it is also necessary to perform on-site inspections of the pharmaceutical wholesaler and manufacturing drug outlets on a periodic basis. In addition, for nonresident wholesale drug outlets that distribute prescription drugs into Oregon, the Board

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requires confirmation of a recent inspection. Inspection reports from other Boards of Pharmacy or the Food and Drug Administration (FDA) are reviewed and proper bonding requirements are verified annually. The Board also works with the National Association of Boards of Pharmacy to annually verify if its resident and nonresident wholesale drug outlets are Verified Accredited Wholesaler Distributors (VAWD). To further ensure public safety the Board requires that all disciplinary action be reported with initial and annual renewal applications. Any disciplinary action is thoroughly reviewed prior to issuing a registration.

Administrative rules for the licensing of pharmaceutical manufacturers, wholesale drug distributors and drug distribution agents are continuously reviewed and updated to provide the most appropriate oversight of these outlets. In November 2013, the Drug Quality and Security Act (DQSA) was signed into federal law. Title I is called the Compounding Quality Act and Title II is the Drug Supply Chain Security Act (DSCSA). The Board continues to work with the Food and Drug Administration and other stakeholders to ensure its rules support the DQSA. A national system is established to enable verification of the legitimacy of the drug product identifier, eventually down to the package (or patient/end user) level. Detection and notification of illegitimate products in the drug supply chain will be enhanced, and more efficient recalls of drug products will be facilitated. Updated rules help protect consumers from exposure to drugs that may be counterfeit, stolen, contaminated, or otherwise harmful and to improve detection and removal of potentially dangerous drugs from the drug supply chain to protect consumers.

In 2013, the Board updated its manufacturer rules relating to compounding. The purpose of this update was to ensure that nonresident compounders shipping non-patient specific products into Oregon register with the Board as a manufacturer. Note that in order to qualify for a manufacturer registration, registration with the Food and Drug Administration is required as a licensure prerequisite. This requirement provided the Board with an additional safety control over nonresident compounders and deterrent for illegitimate nonresident compounders to apply for licensure. The Board is currently in the process of updating its compounding rules to work toward achieving the newest proposed national U.S. Pharmacopeia (USP) standards for both non-sterile and sterile compounding with the goal of improving safety outcomes for Oregon patients.

In 2015, the Board adopted amendments to its drug distribution agents, wholesale distributors, and manufacturer drug outlet rules as a result of the 2013 Federal Drug Supply Chain Security Act (DSCSA). Oregon continues to be a leader as it was the first state to update its administrative rules in response to the DQSA and the Board's registration processes and rules are effective 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 considerable time answering multifaceted questions and responding to high-level inquiries from licensees, legal teams, and various other stakeholders. Over the past several years, one full time licensing representative has been assigned exclusively to wholesalers and manufacturers, as they require a high level of detail and comprehension. A licensing representative and a manager 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

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should be noted that although compliance cases involving wholesalers have decreased significantly due to the work done on the administrative rules over the years, when compliance cases do occur they are costly and 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, 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 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 Board utilizes the Health Professionals Services Program (HPSP) established in 2010 for healthcare professional licensees who have been diagnosed with alcohol or substance abuse or a mental disorder. This program allows the Board to refer an individual licensee for treatment in lieu of or in addition to disciplinary action.

The health professions regulatory boards, including nursing, medicine, dentistry, veterinary medicine and other Health Professional Regulatory Boards (HPRB's) meet 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.

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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 regularly respond 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 activities are encouraged by the individuals and associations representing the Board's licensees. These requests are evaluated regularly and we participate to the fullest extent possible. 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. The Board benefits from these outreach activities by improving our relationships with our licensees, as well as achieving higher compliance without having to resort to disciplinary measures.

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 a regular topic of the Board and one they are evaluating to update rules to facilitate the changing landscape of new technology. Ongoing development and maintenance of procedures and regulations will be necessary as professional practice standards evolve with the electronic technology. Electronic prescribing has become more prevalent with the added ability to transmit controlled substance prescriptions electronically. This improves recordkeeping, reduces the opportunity for diversion, and reduces dispensing errors due to illegible handwritten prescriptions.

Agency Programs

The Oregon Board of Pharmacy is made up the nine member Board, representing five practicing pharmacist members, two public members and two pharmacy technicians who are not pharmacists; the new seven member Public Health and Pharmacy Formulary Advisory Committee, representing two physicians, two advanced practice nurses and three pharmacists and an agency staff of 20 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 and Formulary Committee Activities.

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The *Licensing section* is made up of 6 positions which includes a Licensing Program Supervisor that handles all details related to licensing and examinations including applications, renewals, production and mailing of more than 28,600 certificates of registration and licensure and frequent communication with licensees and applicants that represent 33 different categories of licensure for individuals and drug outlets. 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 Board requires national fingerprint based FBI background checks for all new applicants for pharmacist, pharmacy technician, certified pharmacy technicians and pharmacy intern licensure. The Licensing and Background Check Specialist staff also performs annual criminal background checks with established Policies and Procedures using the Oregon Law Enforcement Data System (LEDS). Staff regularly visits the pharmacy schools in Oregon to meet and talk to the incoming students about professional 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.

The *Operations/Administration section* includes six positions that is a combination of operations and administrative functions. It includes the Executive Director, Administrative Director, Pharmacist Consultant, Project Manager, Executive Support Specialist, 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, the Licensing Program Supervisor, Pharmacist Consultant, 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 Executive Support Specialist and Management Secretary. This position also encompasses a variety of other administrative functions including, coordination of Board and Committee meeting activities, agenda development, meeting materials, budget preparation, accounting, contracts, and public records requests and coordinates various activities with the Department of Administrative Services. The Executive Support Specialist is responsible for general office coordination including technology system services and vendors, accounts payable, facilities, purchasing, website management etc. The Management Secretary

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processes the Criminal Background checks, provides assistance with board meeting activities and clerical assistance. The Compliance Director directly supervises the Compliance section activities and staff previously described. The Licensing Program Supervisor directly supervises the Licensing section activities and staff previously described. The Pharmacist Consultant position is specifically responsible for conducting research and managing projects that require pharmacist expertise. The position also assists the Executive Director with media requests and legislative activities to name a few. The Project Manager position provides support in managing projects for the Agency. Staff in this section are 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. OBOP Staff provides support the Board.

“*Formulary Committee Activities*” includes capturing all activities related to the committees’ compensation, travel, lodging and other expenses and all activities related to holding a Committee meeting. OBOP Staff provides support to this Committee.

The following list reflects additional ongoing operational tasks that are required of the Agency.

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
- 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 and annual renewing 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

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- 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
- Respond to public records requests in a timely manner
- Produce quarterly OBOP/NABP Newsletter and OBOP Internet website
- Outreach to licensees through CE presentations, participation in Professional Practice Roundtable and Pharmacy Association meetings.

Pharmacy Profession

- 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

Formulary Advisory Committee

- Evaluate concepts for completeness
- Coordinate Committee meetings and materials
- Prepare recommendations for the Board in a timely manner

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

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- 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, interns and pharmacy technicians, 29 and 34 outreach activities/presentations were conducted in 2016 and 2017 respectively.
- 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 commerce of all drugs from manufacturer to end user for 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 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.

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Environmental Factors

1. 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 the Formulary Committee and new formulary/protocol authorization for pharmacist prescribing, compounding, Pharmacist-in-Charge (PIC) / Community Pharmacy Personnel and compliance requirements, the licensing and supervision of pharmacy technicians, and the operation of pharmacies are in the process of being reviewed and updated among others.
2. 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 continue to be 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 heroin. 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.

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3. Prescription Opioid abuse and deaths are at an all time high in Oregon and across the country. The Oregon Public Health Division created a new Oregon Prescribing Guidelines Task Force, which has adopted the CDC Guidelines for Prescribing Opioids for Chronic Pain as the foundation for opioid prescribing in Oregon; they are now working on guidelines for Acute Pain. The Task Force is actively engaged in furthering discussions at the state, regional and organizational levels to implement consistent application of the guidelines. The Legislature continues to pass laws to expand access to the life-saving opiate overdose reversal drug, naloxone. Pharmacists can prescribe naloxone and the necessary supplies for administration. The Board has updated its rules and participates in outreach efforts to educate pharmacists and others around the state. The Oregon Prescription Drug Monitoring Program (PDMP) continues to evolve and expand access to the program for other users within the healthcare system and use has increased to be a more effective tool for prescribers in Oregon to identify fraudulent activity and over prescribing. The Board continues to advocate for PDMP use within the pharmacy community.

The Board operates a list serve for community pharmacists and health system pharmacy’s staff to share reliable information from pharmacies or from law enforcement of organized prescription forgery rings or confirmation from a prescriber that the prescribers DEA number or prescription blanks have been compromised. The Board alerts its pharmacists through its list serve usually within 24 hours of the occurrence. These alerts have been a valuable tool for the timely sharing fraudulent activity information and have resulted in arrests and increased awareness of prescription fraud.

Agency staff continues to contribute increased time and resources to participate in a variety of new and ongoing activities with other state agencies and the legislature. Work related to the reduction and prevention of opioid prescribing, dispensing and deaths continues to be a priority for the state Opioid Workgroups. This topic has increased at not only the state level, but also national level with mandates for reduced production of opioids for the last two years in addition to the announcement for 2019 that was recently released. The Board continues to participate with the Oregon Health Authority Public Health Department and Lines for Life to educate pharmacists regarding naloxone prescribing around the state. Additionally, staff continue to provide input to assist with options for a drug take-back program that will help reduce the availability of un-needed and expired medications in homes and on the streets. Other issues such as emergency and business continuity planning, ethnic diversity, language and cultural competence, health care workforce shortages, the Health Professional’s Services Program, Prescription Drug Monitoring Program, and the OHA’s Workforce Data Collection are requiring agency staff participation.

The Board continues to work with the Oregon State Police Forensics Lab as controlled or other substances have impacted the public due to illicit or harmful use. The latest such concern has been the substance called Kratom. Kratom is a plant that has effects similar to both stimulants and opioids. It is consumed as a drink, chewed, smoked or taken in capsule form. The health effects of kratom use show possible links to psychosis, seizures and death. These can be more severe when kratom is used along with alcohol and other drugs, prescription and other the counter. Kratom is being sold in convenience stores, head-shops and recreational marijuana stores. In 2018, there have been salmonellosis outbreaks related to the consumption of kratom because it is being used as an herb / dietary supplement that falls in between the regulatory cracks. The FDA and DEA are considering scheduling kratom as a controlled substance 1, but have received significant opposition to considering this action. The very mention of kratom on our Board’s agenda invited national attention to a meeting within the last year.

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The Board's priority is public safety; if there is an increase in Oregon public harm identified, there may be a need to research this further and consider scheduling this as a controlled substance.

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 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.
5. 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 consumer's expectations.
6. As pharmacists' professional activities assume increased responsibility in areas of direct patient care, such as prescribing contraceptives, naloxone or other authorized drugs and devices, 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.
7. A number of calls, contacts and requests being diverted and directed to the Board of Pharmacy that would otherwise more appropriately be directed to Oregon State Pharmacist Association (OSPA) continue. 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 does impact staff work load and flow, but it is important that Board resources

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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.

Strategic Initiatives & Accomplishments

The Agency has identified a number of strategic initiatives that will support the intermediate outcome targets or objectives of the Board's strategic and business plans. The Board will:

Establish Public Health and Pharmacy Formulary Advisory Committee and associated rulemaking activities by the Board

With the passage of HB 2397, which became effective January 1, 2018, the Governor appointed a multi-disciplinary committee of two physicians, two advanced practice nurses and three pharmacists to evaluate concepts for recommendation for the Board of Pharmacy to adopt by rule of protocols, drugs and devices fitting for pharmacists to prescribe to Oregon patients. The Committee has met three times this year, evaluating core elements of prescribing and recommending six of the eight concepts submitted to the Board for rule consideration. Rulemaking is currently in process that establishes a pharmacist's authority to prescribe via protocol and formulary and contemplates requirements for the patient assessment that must be performed via a face-to-face, in-person interaction. Included are compliance expectations for prescribing 1) education and competency, 2) patient assessment, and determination of inclusion, exclusion and referral criteria 3) collaboration with other healthcare providers, including mandated notification 4) treatment and follow-up care planning, 5) record-keeping, and 6) prohibited practices.

Formulary items recommended include drugs and devices that are pursuant to a documented diagnosis by a health care practitioner such as diabetic blood sugar testing supplies; pen needles; syringes; nebulizers and associated supplies, inhalation spacers; peak-flow meters, etc. Protocol items include continuation of therapy for non-controlled medications to extend a patient's prescription therapy to avoid interruption of treatment; cough and cold symptom management, which allows for pseudoephedrine, benzonatate, short-acting inhalers, intranasal corticosteroids, emergency contraception, not including abortifacients. Each of these items may or may not have prescribing limitations or certain parameters associated with them based on the Committee's recommendation for Board consideration.

This legislation like prior laws for pharmacist prescribing for contraception and naloxone is voluntary and intended to expand the pharmacist role in access to the public as part of the overall healthcare team.

Implementation of additional legislatively approved injectable hormonal contraceptives and self-administered hormonal contraceptives

The Board amended rules to add additional options for pharmacists to prescribe injectable and self-administered hormonal contraceptives. Board staff worked with Oregon State University (OSU) to implement a new online training module added to the Comprehensive Contraceptive Education and Training for the Prescribing Pharmacist to include these new options for prescribing. The state has received

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national attention for its role in expanding access to contraceptives through pharmacist prescribing. Approximately 1437 Oregon pharmacists have completed all of the modules since the initial legislation was implemented January 1, 2016.

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. The Board also adopted a position statement on *Medication Error Reduction called Optimizing Patient Safety and Reducing Medication Errors in Oregon*. This topic continues to be a top priority of the Board.

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 April 2012 the Board adopted rules to allow hospitals to implement Technician Checking Validation Programs (TCVP) to allow the redirection of a pharmacist from a distributive role to a patient oriented role. There are now ten hospitals have received the Board’s approval to implement TCVP systems. The Board requires each hospital to report back after one year of implementation and the Board is receiving good feedback on their progress and ways to improve the rule requirements that were unidentified at the time of rulemaking. The Board requires hospitals to report and request renewal for TCVP approval every five years and this year we have seen renewals from those who implemented in 2012 and 2013; the program continues to be a valuable resource for increased hospital pharmacy efficiency.

Develop high standards in pharmacy practice by working more closely with 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

BUDGET NARRATIVE – 2019-21

continue to encourage appropriate collaborative drug therapy management relationships, and disease state management programs. Pharmacists also have an increased responsibility to administer immunizations and improve immunization rates for the Oregon population.

The Board continues to be concerned about workplace conditions related to professional practice and patient safety. This too is getting greater attention across the country as pharmacy outlets are open for longer hours, expanded services are available and reduced staffing continues. Board Staff continues to hear concerns and complaints about this issue. Last year the Board adopted a rule to reduce outlets use of auto refill programs that requires patients to agree to participate rather than just filling prescriptions that have been discontinued or a patient is no longer on that drug therapy. Chains were resistant to adopting this change, but it is the Board's hope that it will help reduce workload by filling prescriptions that are never picked up and have to be reversed, or worse, those that are dispensed unnecessarily and potentially sold on the street.

Find ways to increase the public's awareness of the Board of Pharmacy and understanding of services provided by pharmacists; Direct contact and outreach with consumer advocacy groups, written publications and electronic communications through the Board of Pharmacy's website are being used to help consumers understand what to expect from their pharmacist or pharmacy, and how and when to report problems they might have experienced or concerns they may have.

Accomplishments: Key accomplishments over the last few years include:

- Transition various IT services from a single vendor to various DAS state providers and an intergovernmental agency agreement for desktop services.
- Work toward a database upgrade continues
- Biennial licensure for individuals fully implemented
- Active cross-training & succession planning - ongoing

Criteria for 2017-2019 Budget Development

The following goals have been identified by the Board to be used as a basis to develop this budget proposal. From these general goals, and with these goals in mind, all agency activities and allocation of resources are determined. Agency staff continues to ensure that Agency direction remains consistent with the Agency's mission statement. The short and long term goals of the agency all tie directly to the mission of public safety.

BUDGET NARRATIVE – 2019-21

Safe Drug Access & Distribution

- Develop and maintain strong partnerships to ensure manufacturing practices that lead to strong, full pipeline of necessary medications (regulatory bodies).
- Clearly defined distribution pathways from manufacturing all the way to the patient.
- Ensure workplace conditions that allow for safe distribution of medications.
- Zero errors/Zero counterfeits.
- Feds and state work together.
- Technology is used to safely support patient access.

Entrustable Professional Activities *(what Rph's do)*

- Each patient's medication and health needs are being met.
- Pharmacy workflow facilitates meaningful patient interactions.
- Clinical recordkeeping is expanded and perfected.
- The public has a clear understanding of pharmacy services provided; they trust and want to use those services.
- Pharmacists & technicians are confident, prepared professionals through education and training.
- Pharmacists communicate to the patient in a way they can HEAR: Listen and verify their understanding of their medicine regimens.
- Licensees retain competence in the practice of pharmacy.
- Clearly defined Rph-only activities

Define Standards of Practice *(how Rph's do their work)*

- Decreased to zero errors.
- Licensees roles have been redefined.
- Technology's role has been defined.
- Facilitate the advancement of safe practice (by board & staff).
- Education and training produce competent, confident and trusted pharmacy professionals.
- Technology supports goals and roles of pharmacists and technicians.
- Allow for evolving roles (do not "define" everything).
- Clear definition of Board's role in the "practice" of pharmacy (this may need to be re-defined).

A copy of the Board's minutes from this meeting is in the Special Reports tab on page 99.

BUDGET NARRATIVE – 2019-21

Major Information Technology Projects/Initiatives

The 2017-19 Legislatively Approved Budget included Policy Package #100 to upgrade the Agency’s Licensing and Compliance database and enhance online e-government opportunities for applicants and licensees, as well as upgrade the online Licensee Look Up & Verification system. This project has been renamed the “MyLicense Office Upgrade”. Staff continues to work closely with the Office of the State Chief Information Officer, Oregon State Police, Oregon State Treasury and the Enterprise Security Office to finalize project procurement and contract requirements. The Board has worked closely with the current vendor to identify the estimated cost of this project. The 2019-21 Agency Request includes a Database Cloud Hosting - Maintenance and Operations Policy Package #103 for ongoing cloud hosting, database administration and maintenance costs. The original plan was to continue to host the database in-house, however with OSCIO security changes and the changes for agency technology support, it became clear that the safer security option overall is to have dedicated database administration and hosting. The Board anticipates implementing the new solution later this fall and into 2019. Complete information can be found in the Program Unit section under Policy Package 103.

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 19-21 current service level is \$769,815. To make this kind of reduction and because Personal Services comprises approximately 67% of the overall budget, the only meaningful option is to reduce staff.

Reluctantly, the Board proposes to eliminate one full time Operations & Policy Analysts 2, one full time Pharmacist Inspector/Investigator, one full time Office Specialist 2 and to 0.50 FTE and reduce a full time Executive Support Specialist 2 to 0.75 FTE. The Board has worked very hard to identify staffing and expenditures to meet its operational requirements. Eliminating these positions will hamper the Board’s ability to do business, achieve its statutory public safety obligations and mission, especially in the face of additional Board and stakeholder initiatives. Duties assigned to these positions would have to be absorbed and result in significant delays and potential harm to the public if complaints are not investigated and licenses are not issued in a timely manner.

Fund Type: Other Funds

10% REDUCTION 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 2019-21 AND 2021-23)	(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 OPERATIONS POLICY ANALYST / PROJECT MANAGEMENT.	<p>This position is primarily responsible for managing agency operational projects and Rules Coordinator. Eliminating this position would require restructuring and reassigning duties within the remaining administrative team. The ability to meet agency management needs or deadlines with this staff reduction would be impacted considerably.</p> <p>Staffing which is already stretched thin, this reduction will result in increased delays to managing routine requirements and new project requirements.</p>	241,526 OF	RANK #1
2. ELIMINATE ONE FULL TIME OFFICE SPECIALIST 2 POSITION	<p>The production of licenses and registrations would be delayed significantly and negatively impact applicant's employment opportunities and potentially Oregon patient safety if employers can't fill positions because licensing is delayed due to reduced staffing at the agency.</p> <p>Eliminating this position would require restructuring and reassigning duties within the remaining licensing staff that is already stretched thin for the workload associated with over 28,642 licensees and applicants</p>	\$147,610 OF	RANK #2



10% REDUCTION OPTIONS (ORS 291.216)

	<p>served in 30+ unique license types.</p> <p>This would likely result in overtime to get the work done within the required deadlines for license renewal and this would eliminate any savings seen by the elimination of this FTE.</p>		
<p>3. ELIMINATE ONE FULL TIME HEALTHCARE INVESTIGATOR/ADVISOR.</p>	<p>Eliminating a position would result in a delay of response to respond to and complete complaint investigations and report them to the Board within the statutorily mandated 120 days.</p> <p>The Board is currently on track to have twice as many cases in 2018 than 2017. A reduction in staff would definitely affect the agencies Key Performance Measure (KPM) and statute driven productivity requirement.</p> <p>In addition, Annual inspections of retail & institutional drug outlets would also be delayed and compromised leading to decreased compliance with pharmacy and drug laws and rules which imposes an increased risk to the public. This too would affect our KPM results.</p>	<p>\$339,798 OF</p>	<p>RANK #3</p>
<p>4. REDUCE ONE FULL TIME EXECUTIVE SUPPORT SPECIALIST 2 POSITION TO THREE QUARTER TIME.</p>	<p>This position functions essentially as the Office Manager and oversees all accounts payable processing for payment by DAS Shared Financial</p>	<p>\$45,428 OF</p>	<p>RANK #4</p>

10% REDUCTION OPTIONS (ORS 291.216)

	<p>Services. Additionally, this position provides coordination of most agency technology system services with multiple vendors, facilities oversight and regularly provides support to senior staff by taking and preparing draft Board Meeting minutes, and multiple state mandated reports.</p> <p>Reducing this position to less than full time would seriously compromise day to day agency operations and likely make it hard to keep filled. This full time position is essential to the function of the agency.</p>		
	<p>A reduction would require restructuring and reassigning duties within the limited remaining administrative staff available and create delays for many deadline driven activities or support needs. Additionally, this position keeps our agency website updated regularly, without this position, it will be difficult to update the website as readily.</p>		

Program Prioritization for 2019-21

Agency Name: Board of Pharmacy **Agency Number:** 85500

019-21 Biennium **Program 1**

Program/Division Priorities for 2019-21 Biennium																					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
Priority (ranked with highest priority first)	Agency Initials	Program or Activity Initials	Program Unit/Activity Description	Identify Key Performance Measure(s)	Primary Purpose Program- Activity Code	GF	LF	OF	NL-OF	FF	NL-FF	TOTAL FUNDS	Pos.	FTE	New or Enhanced Program (Y/N)	Included as Reduction Option (Y/N)	Legal Req. Code (C, D, FM, FO, S)	Legal Citation	Explain What is Mandatory (for C, FM, and FO Only)	Comments on Proposed Changes to CSL included in Agency Request	
85500	1	OBOP	Operations/Administration - Office & Operational Mgmt, Budget, Clerical, Policy Research, Committees, Administrative Rules, Project Mgmt.	85500 1-6	3			2,662,479				\$ 2,662,479		6.00	N		Y	S	ORS 475 & 689	The most significant changes to CSL includes additional resources for DOJ, database maintenance and operations and Fellowship.	
85500	1	OBOP	Licensing & Exams	85500 2,5	3			1,635,315				\$ 1,635,315		7.00	N		Y	S	ORS 475 & 689	Adds one additional FTE	
85500	1	OBOP	Compliance	85500 7, 3-5	3			4,287,399				\$ 4,287,399		9.00	N		Y	S	ORS 475 & 689	Adds one additional FTE	
85500	1	OBOP	Board Activities	85500 6	3			39,024				\$ 39,024		0.00	N		N	S	ORS 475 & 689	The Board has 9 members.	
85500	1	OBOP	Formulary Committee	Agency Mission	3			15,991				\$ 15,991		0.00	Y		N	S	ORS 689 645 and 649	This Committee includes 7 members, legislatively authorized and effective 1/1/18. Agency requests funding for per diem and expense reimbursement.	
												\$ -									
												\$ -									
												\$ -									
								8,640,208				\$ 8,640,208		o 22.00							

7. Primary Purpose Program/Activity Exists

- 1 Civil Justice
- 2 Community Development
- 3 Consumer Protection
- 4 Administrative Function
- 5 Criminal Justice
- 6 Economic Development
- 7 Education & Skill Development
- 8 Emergency Services
- 9 Environmental Protection
- 10 Public Health
- 11 Recreation, Heritage, or Cultural
- 12 Social Support

19. Legal Requirement Code

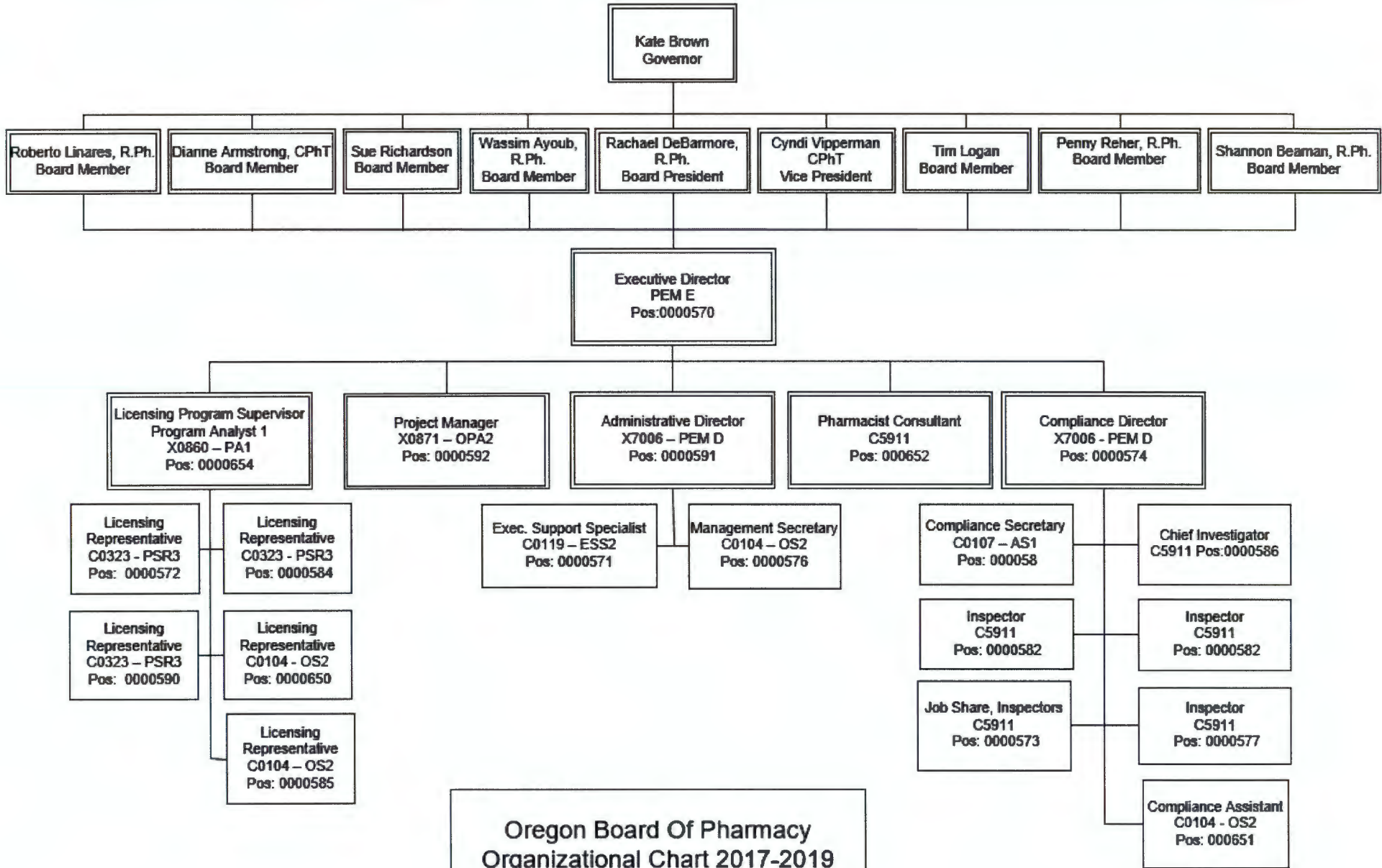
- C Constitutional
- D Debt Service
- FM Federal - Mandatory
- FO Federal - Optional (once you choose to participate, certain requirements exist)
- S Statutory

Within each Program/Division area, prioritize each Budget Program Unit (Activities) by detail budget level in ORBITTS

Document criteria used to prioritize activities:

This agency is budgeted as one Program Unit. For the purpose of this exercise, we have broken out the key areas of agency function. However, all areas are required to accomplish the statutory mission of the agency. The Formulary Committee is newly created by 2017 HB 2397 and was unfunded at that time.

BUDGET NARRATIVE – 2019-21



Oregon Board Of Pharmacy
Organizational Chart 2017-2019
20 FTE Legislative Adopted

Summary of 2019-21 Biennium Budget

Pharmacy, Board of
Pharmacy, Board Of
2019-21 Biennium

Agency Request 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>
2017-19 Leg Adopted Budget	20	20.00	7,335,399	-	-	7,335,399	-	-	-
2017-19 Emergency Boards	-	-	129,211	-	-	129,211	-	-	-
2017-19 Leg Approved Budget	20	20.00	7,464,610	-	-	7,464,610	-	-	-
2019-21 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	194,389	-	-	194,389	-	-	-
Estimated Cost of Merit Increase	-	-	-	-	-	-	-	-	-
Base Debt Service Adjustment	-	-	-	-	-	-	-	-	-
Base Nonlimited Adjustment	-	-	-	-	-	-	-	-	-
Capital Construction	-	-	-	-	-	-	-	-	-
Subtotal 2019-21 Base Budget	20	20.00	7,658,999	-	-	7,658,999	-	-	-
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	169,448	-	-	169,448	-	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	19,492	-	-	19,492	-	-	-
Subtotal	-	-	188,940	-	-	188,940	-	-	-
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase - In	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(336,307)	-	-	(336,307)	-	-	-
Subtotal	-	-	(336,307)	-	-	(336,307)	-	-	-
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	131,336	-	-	131,336	-	-	-
State Gov't & Services Charges Increase/(Decrease)	-	-	55,187	-	-	55,187	-	-	-

Summary of 2019-21 Biennium Budget

Pharmacy, Board of
Pharmacy, Board Of
2019-21 Biennium

Agency Request 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	-	-	186,523	-	-	186,523	-	-	-
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2019-21 Current Service Level	20	20.00	7,698,155	-	-	7,698,155	-	-	-

Summary of 2019-21 Biennium Budget

Pharmacy, Board of
Pharmacy, Board Of
2019-21 Biennium

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

Description	Positions	Full-Time Equivalent (FTE)	ALL FUNDS	General Fund	Lottery Funds	Other Funds	Federal Funds	Nonlimited Other Funds	Nonlimited Federal Funds
Subtotal: 2019-21 Current Service Level	20	20.00	7,698,155	-	-	7,698,155	-	-	-
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2019-21 Current Service Level	20	20.00	7,698,155	-	-	7,698,155	-	-	-
080 - E-Boards									
080 - May 2018 E-Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	-	-	-	-	-	-	-	-	-
Policy Packages									
101 - License Fee Increases	-	-	-	-	-	-	-	-	-
102 - DOJ Expenditure Increase	-	-	174,862	-	-	174,862	-	-	-
103 - Database Cloud Hosting	-	-	279,021	-	-	279,021	-	-	-
104 - Compliance & Licensing Staffing	2	2.00	468,403	-	-	468,403	-	-	-
105 - Formulary Per Diem & Expense Funding	-	-	16,027	-	-	16,027	-	-	-
106 - OBOP/Pacific Fellowship Continuation	-	-	3,740	-	-	3,740	-	-	-
Subtotal Policy Packages	2	2.00	942,053	-	-	942,053	-	-	-
Total 2019-21 Agency Request Audit	22	22.00	8,640,208	-	-	8,640,208	-	-	-
Percentage Change From 2017-19 Leg Approved Budget	10.00%	10.00%	15.75%	-	-	15.75%	-	-	-
Percentage Change From 2019-21 Current Service Level	10.00%	10.00%	12.24%	-	-	12.24%	-	-	-

Summary of 2019-21 Biennium Budget

Pharmacy, Board of
Board of Pharmacy
2019-21 Biennium

Agency Request 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>
2017-19 Leg Adopted Budget	20	20.00	7,335,399	-	-	7,335,399	-	-	-
2017-19 Emergency Boards	-	-	129,211	-	-	129,211	-	-	-
2017-19 Leg Approved Budget	20	20.00	7,464,610	-	-	7,464,610	-	-	-
2019-21 Base Budget Adjustments									
Net Cost of Position Actions									
Administrative Biennialized E-Board, Phase-Out	-	-	194,389	-	-	194,389	-	-	-
Estimated Cost of Merit Increase	-	-	-	-	-	-	-	-	-
Base Debt Service Adjustment	-	-	-	-	-	-	-	-	-
Base Nonlimited Adjustment	-	-	-	-	-	-	-	-	-
Capital Construction	-	-	-	-	-	-	-	-	-
Subtotal 2019-21 Base Budget	20	20.00	7,658,999	-	-	7,658,999	-	-	-
Essential Packages									
010 - Non-PICS Pers Svc/Vacancy Factor									
Vacancy Factor (Increase)/Decrease	-	-	169,448	-	-	169,448	-	-	-
Non-PICS Personal Service Increase/(Decrease)	-	-	19,492	-	-	19,492	-	-	-
Subtotal	-	-	188,940	-	-	188,940	-	-	-
020 - Phase In / Out Pgm & One-time Cost									
021 - Phase - In	-	-	-	-	-	-	-	-	-
022 - Phase-out Pgm & One-time Costs	-	-	(336,307)	-	-	(336,307)	-	-	-
Subtotal	-	-	(336,307)	-	-	(336,307)	-	-	-
030 - Inflation & Price List Adjustments									
Cost of Goods & Services Increase/(Decrease)	-	-	131,336	-	-	131,336	-	-	-
State Gov't & Services Charges Increase/(Decrease)	-	-	55,187	-	-	55,187	-	-	-

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Summary of 2019-21 Biennium Budget

Pharmacy, Board of
Board of Pharmacy
2019-21 Biennium

Agency Request 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	-	-	186,523	-	-	186,523	-	-	-
040 - Mandated Caseload									
040 - Mandated Caseload	-	-	-	-	-	-	-	-	-
050 - Fundshifts and Revenue Reductions									
050 - Fundshifts	-	-	-	-	-	-	-	-	-
060 - Technical Adjustments									
060 - Technical Adjustments	-	-	-	-	-	-	-	-	-
Subtotal: 2019-21 Current Service Level	20	20.00	7,698,155	-	-	7,698,155	-	-	-

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Summary of 2019-21 Biennium Budget

Pharmacy, Board of
Board of Pharmacy
2019-21 Biennium

Agency Request 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: 2019-21 Current Service Level	20	20.00	7,698,155	-	-	7,698,155	-	-	-
070 - Revenue Reductions/Shortfall									
070 - Revenue Shortfalls	-	-	-	-	-	-	-	-	-
Modified 2019-21 Current Service Level	20	20.00	7,698,155	-	-	7,698,155	-	-	-
080 - E-Boards									
080 - May 2018 E-Board	-	-	-	-	-	-	-	-	-
Subtotal Emergency Board Packages	-	-	-	-	-	-	-	-	-
Policy Packages									
101 - License Fee Increases	-	-	-	-	-	-	-	-	-
102 - DOJ Expenditure Increase	-	-	174,862	-	-	174,862	-	-	-
103 - Database Cloud Hosting	-	-	279,021	-	-	279,021	-	-	-
104 - Compliance & Licensing Staffing	2	2.00	468,403	-	-	468,403	-	-	-
105 - Formulary Per Diem & Expense Funding	-	-	16,027	-	-	16,027	-	-	-
106 - OBOP/Pacific Fellowship Continuation	-	-	3,740	-	-	3,740	-	-	-
Subtotal Policy Packages	2	2.00	942,053	-	-	942,053	-	-	-
Total 2019-21 Agency Request Audit	22	22.00	8,640,208	-	-	8,640,208	-	-	-
Percentage Change From 2017-19 Leg Approved Budget	10.00%	10.00%	15.75%	-	-	15.75%	-	-	-
Percentage Change From 2019-21 Current Service Level	10.00%	10.00%	12.24%	-	-	12.24%	-	-	-

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Pharmacy, Board of

Agency Number: 85500

**Agencywide Program Unit Summary
2019-21 Biennium**

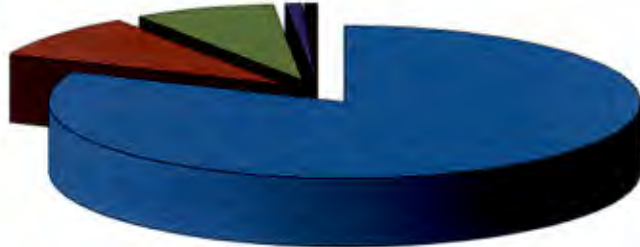
Version: V - 01 - Agency Request Budget

<i>Summary Cross Reference Number</i>	<i>Cross Reference Description</i>	<i>2015-17 Actuals</i>	<i>2017-19 Leg Adopted Budget</i>	<i>2017-19 Leg Approved Budget</i>	<i>2019-21 Agency Request Audit</i>	<i>2019-21 Governor's Budget</i>	<i>2019-21 Leg. Adopted Audit</i>
001-00-00-00000	Board of Pharmacy						
	Other Funds	6,253,007	7,335,399	7,464,610	8,640,208	-	-
TOTAL AGENCY							
	Other Funds	6,253,007	7,335,399	7,464,610	8,640,208	-	-

BUDGET NARRATIVE – 2019-21

OTHER FUND REVENUES 19-21

**2017-2019 LAB Estimated Revenues
\$5,444,919**



■ Business Licensing Fees - 80.52%	■ Non-Business Lic & Fees - 9.70%
■ Delinquent Fees & Civil Penalties - 8.09%	■ Interest Income - .92%
■ Miscellaneous Sales - .76%	

2017-2019
Note: If biennial licensure fees had been implemented, an additional \$1,350,670 of revenue would have been collected bringing the total revenue estimate in 2017-19 to \$6,735,589



■ Business Licensing Fees - 65.21%	□ Additional Biennial Fees not implemented 19.88%
■ Non-Business Lic & Fees - 7.44%	■ Delinquent Fees & Civil Penalties - 6.18%
■ Interest Income - .71%	■ Miscellaneous Sales - .58%

**2019-2021 ARB Proposed Revenues
\$7,792,636**



■ Business Licensing Fees - 91.71%	■ Non-Business Lic & Fees - 1.79%
■ Delinquent Fees & Civil Penalties - 5.20%	■ Interest Income - .58%
■ Miscellaneous Sales - .73%	

BUDGET NARRATIVE – 2019-21

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 estimate for the 2019-21 was calculated by taking a predicted number of licensees and registrants and multiplying by the amount of each fee. It also anticipates revenue impact for new and lapsing applicants and for each category. 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. The past six years, the Agency has worked closely with the Department of Administrative Services Chief Financial Office and the Legislative Fiscal Office to reduce its ending balance.
- To put this request into perspective, the last actual fee increase for the Board of Pharmacy was in 2001. There were fee increases in 2011-13 for most categories; however, they were reversed in 2013 back to the 2001 rates due to an unanticipated high ending balance. At this time, we have re-evaluated all fees, taking into consideration, that biennial licensure was implemented for pharmacists, pharmacy technicians and certified Oregon pharmacy technicians within the last four years without a fee adjustment for multiple years as approved within the agency’s revenue plan. Package 101 increases licensing fee revenue by \$2,411,800. If licensure fees had not been frozen at the time of biennial conversion, the policy package for 19-21 would only raise fees by \$1,061,130. If this Package 101 is authorized, it is anticipated to cover the cost of the 2019-21 policy packages and maintain fees at the current level for at least two biennia, while retaining an adequate ending balance.

A variety of measures were taken including reducing fee increases that were authorized in 2011 in 2013 and implementing biennial licensure without increasing the licensure fee for individuals from 2015-2018. See charts at the beginning of this section how revenue would have increased had this occurred sooner. The next page reflects some of the larger categories fees since 1997 to these proposed fees.

Proposed Fee Increases for 2019-21
(Large License Categories)
Oregon Board of Pharmacy

1997-2019 Fee History

	<u>1997</u>	<u>2001</u>	<u>2011</u>	<u>2013</u>	<u>2015</u>	<u>2017</u>	<u>2019</u>
Pharmacist	\$75	\$120	\$200	\$120	\$120	\$120	\$250
Pharmacy	\$100	\$175	\$300	\$175	\$175	\$175	\$225
Wholesaler	\$225	\$400	\$400	\$400	\$400	\$400	\$525
Manufacturer	\$225	\$400	\$400	\$400	\$400	\$400	\$525
Certified Oregon Pharmacy Tech. & Pharmacy Technicians	\$25*	\$35	\$50	\$50	\$50	\$50	\$100
Controlled Substances -	\$25/\$50	\$25/\$50	\$100	\$50	\$50	\$50	\$100
Reciprocity & (License Transfer)	\$200 -	\$200	\$300	\$200	\$200	\$200	\$200

Note:

*Pharmacy Technician fee established in 1997, added 2nd category of Certified OR Pharmacy Technicians in 2005 w/registration to licensure change, same price.

** Wholesalers and Manufacturers were the only licenses listed above not increased in 2011.

***Drug Distribution Agents category was added in 2009 and matched to Wholesalers and Manufacturers.

Detail of Fee, License, or Assessment Revenue Increase

Proposed For Increase/Establishment

Purpose or Type of Fee, License or Assessment	Who Pays	2017-19 Estimated Revenue	2019-21 Agency Request	2019-21 Governor's Budget	2019-21 Legislatively Adopted	Explanation
ANIMAL EUTHANASIA	outlet	2400	3750			
CERTIFIED PHARMACY TECHNICIAN	individual	350168	689400			renews in even yrs April/June
COMMUNITY HEALTH CLINIC	outlet	18750	29000			
CONSULTING/DRUGLESS PHARMACY	outlet	4200	10800			
CONTROLLED SUBSTANCE	outlet	199950	404200			
DRUG ROOM & Correctional	outlet	12000	16000			includes Correction Facilities, Hospital and other drug rooms
GASES-MEDICAL CLASS C	outlet	44000	66000			
INSTITUTIONAL PHARMACY	outlet	50750	693000			
INTERN LICENSE/2 YEAR	individual	44350	88700			may not renew more than twice unless authorized
MANUFACTURER	outlet	830400	1089900			
NONPRESCRIPTION A	outlet	2497000	382500			
NONPRESCRIPTION B	outlet	8000	12000			
PHARMACIST LICENSE	individual	1005905	1982500			renews in odd yrs April/June
PRECURSOR	outlet	1000	2400			
REMOTE DISPENSING/Distribution	outlet	1000	1200			includes Remote Distribution Facilities and Remote Dispensing Machines
RETAIL PHARMACY	outlet	474950	636750			includes Home Dialysis. Note: Consulting and Drugless Pharmacies are part of the Retail
TECHNICIANS	individual	95100	108600			2 yr license, not renewable
WHOLESALE	outlet	581600	763350			

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

Source	Fund	ORBITS Revenue Acct	2015-2017 Actual	2017-19 Legislatively Adopted	2017-19 Estimated	2019-21		
						Agency Request	Governor's	Legislatively Adopted
Animal Euthanasia	4360	0205	2,750	2,500	2,400	3,750		
Certified Pharmacy Technician	4360	0205	640,841	325,685	350,168	689,400		
Charitable Pharmacy	4360	0205	2,025	1,950	1,800	2,100		
Consulting/Drugless Pharmacy	4360	0205	4,725	3,889	4,200	10,800		
Controlled Substance	4360	0205	219,450	201,635	199,500	404,200		
Community Health Clinic (formally known as County Health Clinic/Family Planning)	4360	0205	21,750	12,016	18,750	29,000		
Drug Distribution Agents	4360	0205	151,600	153,720	206,400	206,400		
Hospital Drug Room	4360	0205	12,525	4,212	12,000	16,000		
Interns	4360	0205	57,900	44,570	44,350	88,700		
Manufacturers	4360	0205	897,300	769,488	830,400	1,089,900		
Med Device/Equip/Gases-Class C	4360	0205	54,100	42,622	44,000	66,000		
Non-Prescript – Drug Outlet – Class A	4360	0205	249,075	226,646	249,700	382,500		
Non-Prescript – Drug Outlet – Class B	4360	0205	10,550	10,400	8,000	12,000		
Non-Prescript – Drug Outlet – Class D	4360	0205	0.00	0.00	200	200		
Pharmacist	4360	0205	1,014,530	940,658	1,005,905	1,982,500		

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

Pharmacy Technician	4360	0205	107,985	115,331	95,100	108,600		
Precursor	4360	0205	1,650	1,600	1,000	2,400		
Prophylactic/Contraceptive	4360	0205	2,000	1,400	1,300	1,300		
Remote Dispensing	4360	0205	1,000	800	1,000	1,200		
Retail/Institutional Drug Outlet	4360	0205	532,375	502,705	525,700	706,050		
Supervising Physician Dispensing Outlet	4360	0205	13,475	13,440	12,950	15,400		
Wholesalers	4360	0205	701,150	691,856	581,600	763,350		
Delinquent Fees	4360	0505	117,022.50	70,000	55,000	55,000		
Reciprocity	4360	0205	173,200	160,000	126,000	126,000		
NAPLEX/Exams	4360	0205	50,425	58,000	27,967.50	35,000		
Civil Penalty	4360	0505	413,118.50	350,000	350,000	350,000		
Interest Income	4360	0605	88,652	48,000	45,000	45,000		
NSF	4360	0975	968	700	600	600		
Misc Fees	4360	0975	22,282	10,000	20,000	20,000		
Laws & Rules	4360	0975	11,440.31	8,000	3,000	3,000		
Prescription Drug Monitoring Fee – transfer to OHA	4360	0205	322,290	352,747	349,920	356,850		
Prescription Drug Monitoring Fee – 10% retention	4360	0205	35,810	39,194	38,880	39,650		
Workforce Data Collection – Transfer to OHA	4360	0210	66,399	56,610	58,040	59,296		
Fingerprinting Fees – Transfer to OSP depending on volume	4360	0352	237,519	228,800	80,000	80,000		

Agency Request

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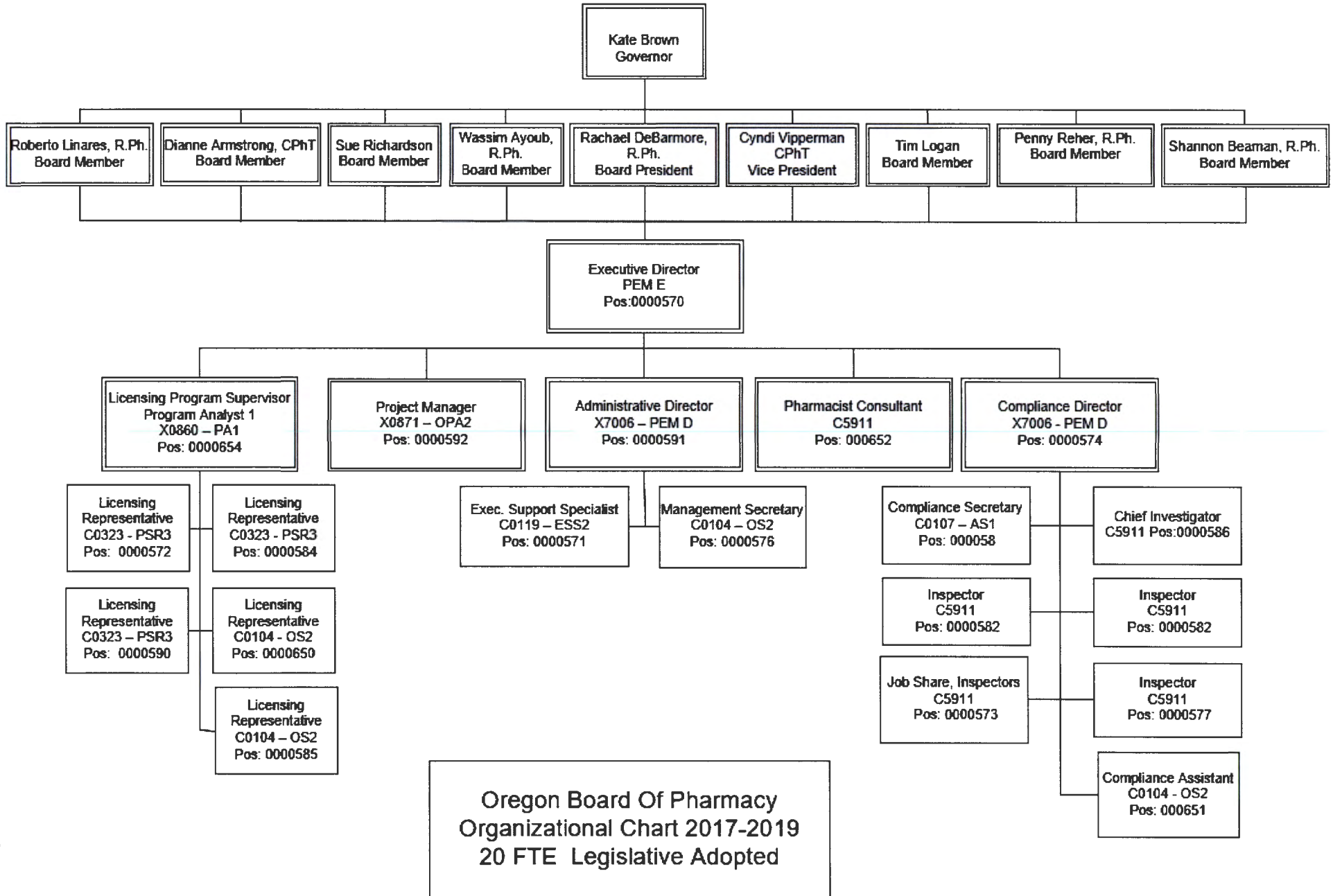
DETAIL OF LOTTERY FUNDS, OTHER FUNDS, AND FEDERAL FUNDS REVENUE

Pharmacy, Board of
2019-21 Biennium

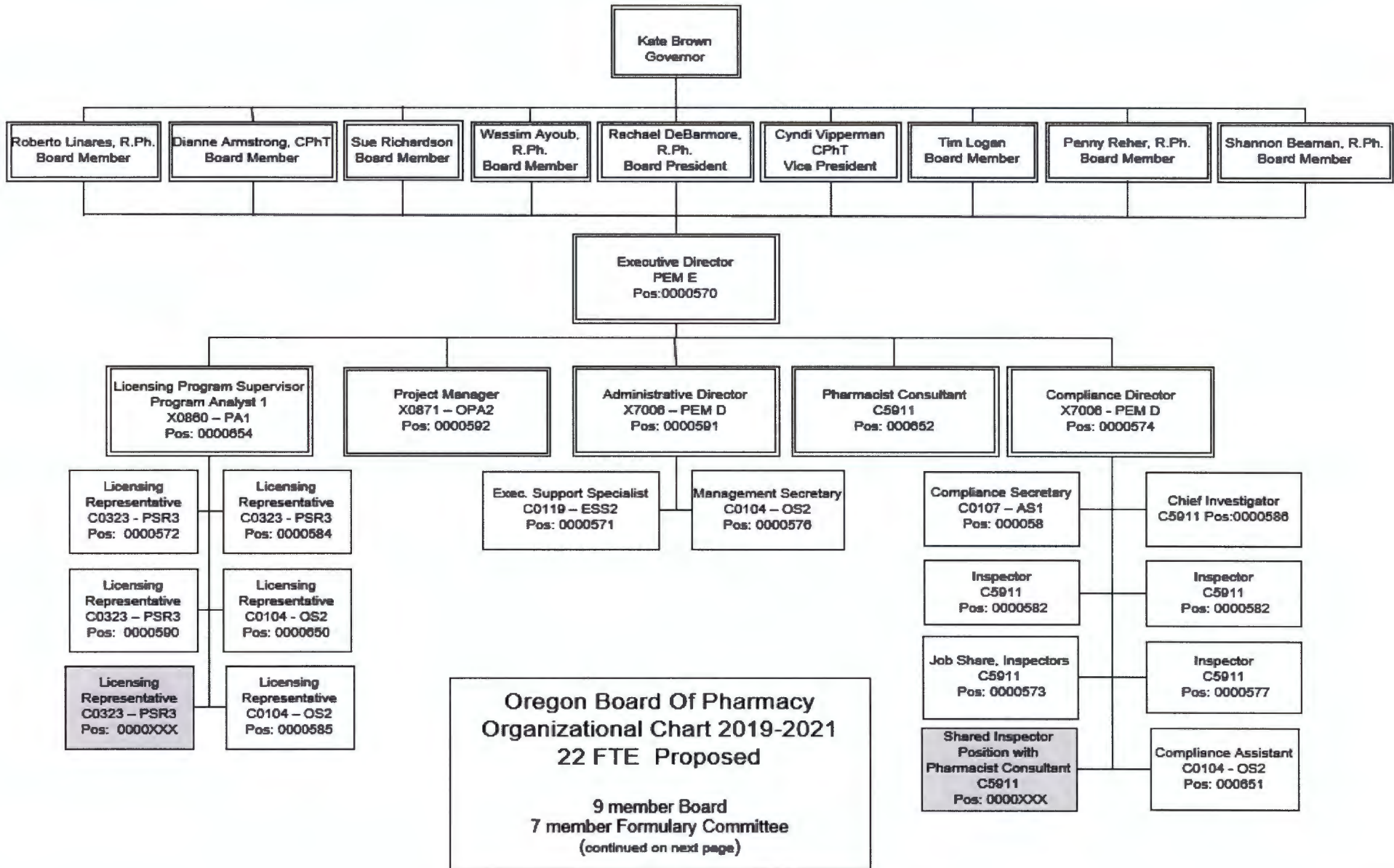
Agency Number: 85500
Cross Reference Number: 85500-000-00-00-00000

<i>Source</i>	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Leg Approved Budget	2019-21 Agency Request Audit	2019-21 Governor's Budget	2019-21 Leg. Adopted Audit
Other Funds						
Business Lic and Fees	5,334,681	4,431,667	4,431,667	7,146,250	-	-
Non-business Lic. and Fees	303,918	505,552	505,552	139,296	-	-
Fines and Forfeitures	530,141	420,000	420,000	405,000	-	-
Interest Income	88,652	48,000	48,000	45,000	-	-
Other Revenues	64,935	39,700	39,700	57,090	-	-
Tsfr To Oregon Health Authority	(369,118)	(409,357)	(409,357)	(416,146)	-	-
Total Other Funds	\$5,953,209	\$5,035,562	\$5,035,562	\$7,376,490	-	-

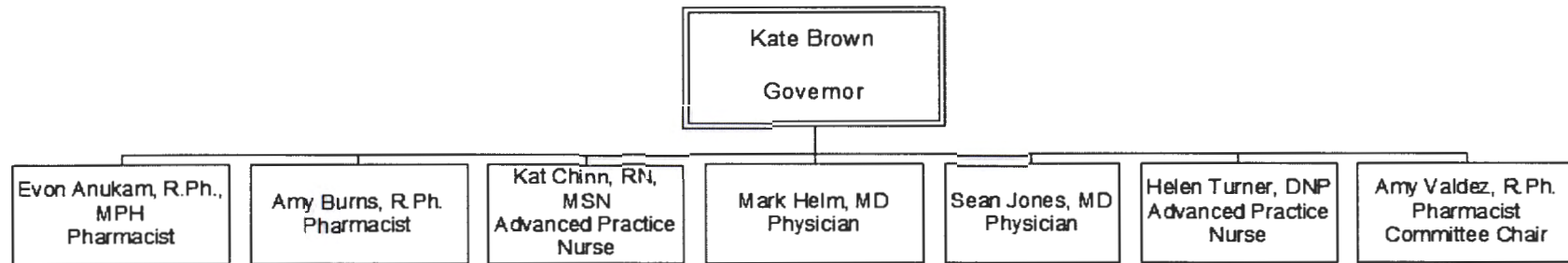
BUDGET NARRATIVE – 2019-21



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PUBLIC HEALTH AND PHARMACY FORMULARY ADVISORY COMMITTEE
Established January 1, 2018
2 year terms

Members are appointed by the Governor to make recommendations to the Oregon Board of Pharmacy regarding pharmacist prescriptive authority

PROGRAM UNIT NARRATIVE

2019-21

Agency Request

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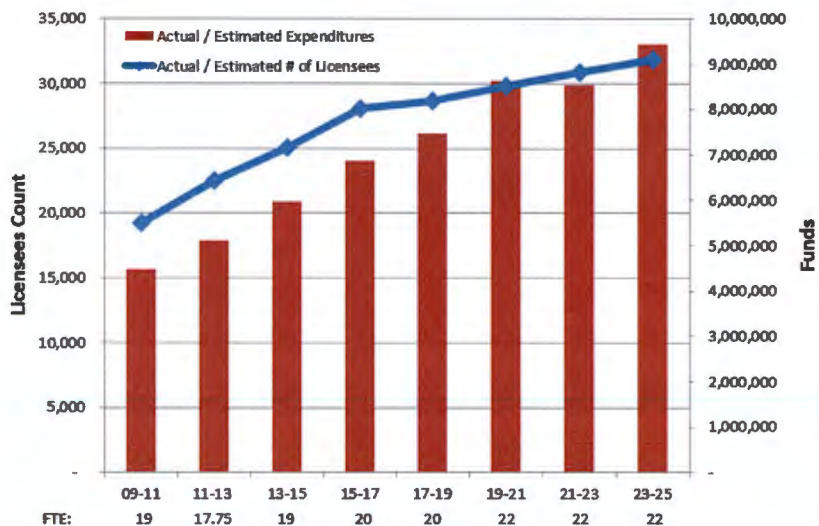
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PROGRAM UNIT EXECUTIVE SUMMARY

10 Year Plan Outcome Areas that are impacted by the program

Primary Outcome Area: Safety
 Secondary Outcome Area: N/A
 Program Contact: Marcus Watt or Karen MacLean, 971-673-0001



The chart above reflects the actual and estimated expenditures and licensee numbers for the Oregon Board of Pharmacy from 2009-2025, including the 2019-21 Agency Request Budget. The business of pharmacy has moved from the corner drug store to the national chain drug store. This is true throughout all aspects of the pharmaceutical industry, and is directly relates to the number of licensees that the Board has grown to have and expects to see in the future. It also includes the current and projected FTE for 2019-21.

Program Overview

The Oregon Board of Pharmacy (OBOP) under ORS Chapter 689 regulates the practice of pharmacy and the quality, commerce and distribution of drugs within and into the State. The practice of pharmacy in the State of Oregon has been declared by the Oregon Legislature to be a professional practice affecting public health, safety and welfare and is subject to regulation and control in the interest of Oregon Citizens. The Legislature further declared it to be a matter of public interest and concern that the practice of pharmacy merit and receive the confidence of the citizens of Oregon and that only qualified person are permitted to engage in the practice of pharmacy in the State.

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Program Funding Request

The Board's Agency Request Budget includes Other Funds budget limitation of \$8,640,208 for the 2019-21 biennium. This includes funding for the Current Service Level budget and six Policy Packages. The following describes each of the packages briefly and the desired outcomes:

- Policy Package 101 implements updated licensing fees. The last actual fee increase for the Board of Pharmacy was in 2001. There was a fee increase in 2011-13 for most categories; however, they were reversed in 2013 back to the 2001 rates due to an unanticipated high ending balance. At this time, we have re-evaluated all fees, taking into consideration, that biennial licensure was implemented for pharmacists, pharmacy technicians and certified Oregon pharmacy technicians within the last four years without a fee adjustment for multiple years as approved within the agency's revenue plan. Package 101 increases licensing fee revenue by \$2,411,800. The increase is anticipated to cover the cost of the 2019-21 policy packages and maintain fees at the current level for at least two biennia, while retaining an adequate ending balance.
- Policy Package 102 seeks an expenditure increase for DOJ. The Board has utilized the DOJ flat-rate agreement to better anticipate legal costs since 2011. More recently, this has helped the agency through two senior staff changes (Executive Director and Compliance Director) and the implementation of legislation that was unfunded in addition to a higher than normal season of contested hearings. The flat-rate is evaluated each biennium based the past 36 months of legal services usage. 2015-17 usage caused the rate for 2017-19 to be \$144,000 higher than Legislatively Approved Budget allocation for DOJ; the agency has worked to absorb this overage. However, even with a reduction of legal services during the first year of 17-19, it is anticipated that with the 2019-21 pricelist inflation adjustment, Package 102 will require an additional \$174,862 of DOJ resources.
- Policy Package 103 IT Cloud Hosting – Maintenance and Operation seeks to add ongoing resources to the agency's limitation for IT Professional Services. This package will allow for ongoing cloud hosting, database administration and maintenance costs. This implementation solution expects to provide greater licensee access, safer security options, as well as dedicated database administration and maintenance by the vendor. Package 103 will result in an ongoing cost of \$279,021. Absent dedicated in-house IT staffing, this has been determined to be the most cost-effective and secure solution to continue providing online resources to the public and licensees.
- Policy Package 104 seeks to increase Compliance and Licensing staffing. The Board's workload has increased in the number of licensees, case workload in addition to the new Public Health and Pharmacy Formulary Advisory Committee (Formulary Committee) activities. The Agency seeks to add 1 pharmacist FTE to be shared between Compliance and Administration to support the work of rulemaking efforts for the Formulary Committee with the Pharmacist Consultant. In addition, the Board seeks to add one additional staff member to the Licensing department to address workload associated with the increased number of licensees and growing number of specialty license categories. Package 104 will cost \$468,403.

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- Policy Package 105 seeks to fund the Formulary Committee, implemented effective 2018 that was unfunded. Legislation requires the Board to pay per diem and travel/meal reimbursement expenses for seven committee members. Package 105 will result in \$16,000 of ongoing costs for personnel per diem, instate travel and Agency Program related services and supplies. This amount assumes the committee meets four times a year.
- Policy Package 106 seeks to continue the Academic and Regulatory Fellowship in partnership with Pacific University School of Pharmacy (PUSOP). This Fellowship is the first of its kind and establishes a one-year program designed to transition the fellow from a general practitioner to a regulatory pharmaceutical specialist and clinical educator. Upon successful completion of the PUSOP-OBOP Fellowship, graduates will be on track to pursue careers in: 1) Regulatory oversight services at a State Board of Pharmacy, and 2) Academic/faculty positions that involve pharmacy practice, the tripartite mission of didactic and experiential teaching responsibilities, scholarship, and school service, as well as preceptor development opportunities. The fellowship gives participants the unique opportunity to experience careers in the areas of government and academia, thereby qualifying graduates to pursue career opportunities in these respective areas. Policy Package 106 will cost \$3,740 to increase existing funding for this program to continue (inflation).

Program Description

The purpose of the Board of Pharmacy under ORS Chapter 689 is to promote, preserve, and protect the health, safety and welfare of Oregon citizens by control and regulation of the practice of pharmacy (*individual licensure*) and the quality and distribution of drugs through outlets involved in the manufacture, production, sale and distribution of legend drugs (*prescription*), over-the-counter drugs (*non-prescription*), controlled substances (*drugs identified by the U.S. Drug Enforcement Administration (DEA) as having abuse or addiction potential*) and devices and other materials as may be used in the diagnosis, cure, mitigation, prevention and treatment of injury, illness and disease.

This is accomplished through:

Examinations: Any individual wishing to practice as a pharmacist in the State must take and pass an entry level competency exam, the North American Pharmacy Licensure Examination (NAPLEX). This exam has been standardized throughout all fifty states. Candidates for licensure in Oregon must also take and pass a pharmacy law exam, the Multistate Pharmacy Jurisprudence Examination (MPJE). These exams are administered by the National Association of Boards of Pharmacy (NABP). The exam questions are written and maintained and updated by OBOP staff and members through annual review of the exam question pool and psychometric analysis of the questions by NABP.

Licensing: Upon verifying that the exams have been taken and passed, the candidate is allowed to submit an application. The application and required documents are vetted through the NABP Disciplinary Clearinghouse and a national criminal background check is performed. Licenses are renewable for individuals biennially. The OBOP has established an electronic online renewal process for most licenses. Pharmacy technicians must be licensed in the State and must become nationally certified within two years of their initial Oregon license. Pharmacies, pharmaceutical manufacturers & wholesalers, non-prescription drug outlets, practitioner dispensing outlets and a variety of other drug outlets must also be licensed with the OBOP to

BUDGET NARRATIVE – 2019-21

do business in the State. Establishments seeking licensure undergo similar scrutiny and vetting of applications and documents for licensure. The Board currently has 28,642 licensees that are licensed and renew either annually (outlets) or biennially (individuals).

Inspections: The OBOP inspects retail, institutional and other Oregon based drug outlets regularly. All retail and hospital pharmacies are inspected annually.

Investigations: The OBOP investigates complaints and allegations of violations of the Oregon Pharmacy Act (ORS Chapter 689) and corresponding administrative rules (OAR Chapter 855). The OBOP also investigates allegations of drug diversion, illegal online drug distribution operations or unlicensed pharmacies and local prescription fraud activity.

Information and Education: Board staff answer all calls and route calls to a designated pharmacist investigator, licensing representatives who are available to answer questions regarding licensure requirements and processes or other administrative staff address other general questions from the public. OBOP collaborates in responding to the opioid epidemic and Board staff responds to many requests for appearances and presentations to pharmacy professional associations and pharmacy schools regarding pharmacy and drug law, licensing issues, compounding regulations and compliance enforcement.

Agency costs are primarily reflected in staff payroll. Ongoing expenses for “services and supplies” are inherent and tend to not fluctuate significantly. Major cost drivers are described below.

Staffing is the largest single expenditure since what the agency does involves people working with people.

Instate travel is another cost. The OBOP’s authority is statewide, therefore, onsite inspections and investigations occur throughout the State. Board members and the new Formulary Committee members also reside throughout the State, therefore, wherever meetings are held, members are required to travel. Most meetings occur in Portland.

Administrative initiatives and projects such as budget preparation, document security, business continuity, workforce data collection, disaster planning, various joint rulemaking requirements and cultural competence are some of the many activities that consume an increasing portion of staff time.

Legislative mandates utilize an increasing portion of staff time. Such Legislative mandates include pharmacist prescriptive authority for hormonal contraceptives, naloxone, formulary, charitable pharmacies and Health Professionals Service Program, among many others.

Prescription drug abuse Staff investigates illegal Internet drug distribution, local fraudulent prescription scams and diversion and theft of controlled substances from pharmacies. Many drug related issues such as these are also covered by the news media and requests for information, interviews and statements from Board members and staff are common.

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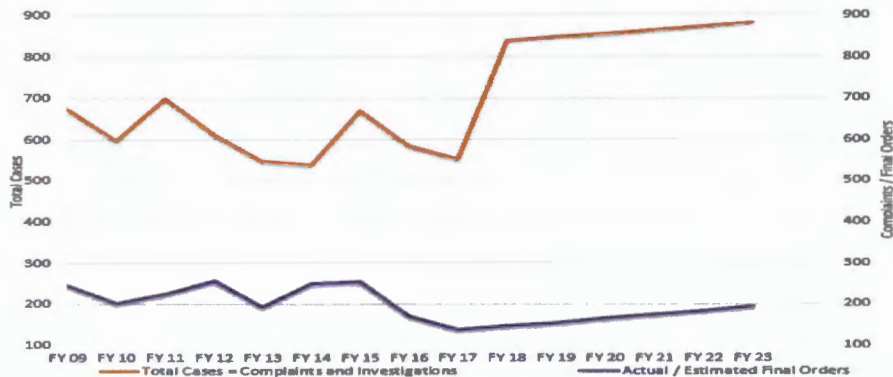
Prescription drug overutilization continues to impact staff work load. Prescription drugs have become ubiquitous and efforts to educate citizens in areas such as medication safety, proper drug disposal and the dangers of polypharmacy are needed more and more. Prescription drugs appear in our medicine cabinets, in the pockets of our sons & daughters and in our schools. Drugs are advertised on television and radio, in newspapers and in magazines, on billboards. The nation’s health care delivery system is so rushed that the standard solution to each medical office visit is a “quick fix” prescription. The opioid epidemic and drug overdose contributes to this problem.

Program Justification and Link to 10-Year Outcome

Because of the efforts and diligence of the OBOP in administering the Oregon Pharmacy Act and the Oregon Controlled Substances Act, the safety of Oregon’s citizens is enhanced and protected. Active participation by Board members and staff with the NABP, DEA and U.S. Food and Drug Administration evokes national best practice standards on behalf of Oregonians. All of the items included in the program description work together for the Agency to successfully achieve its statutory mission of public safety.

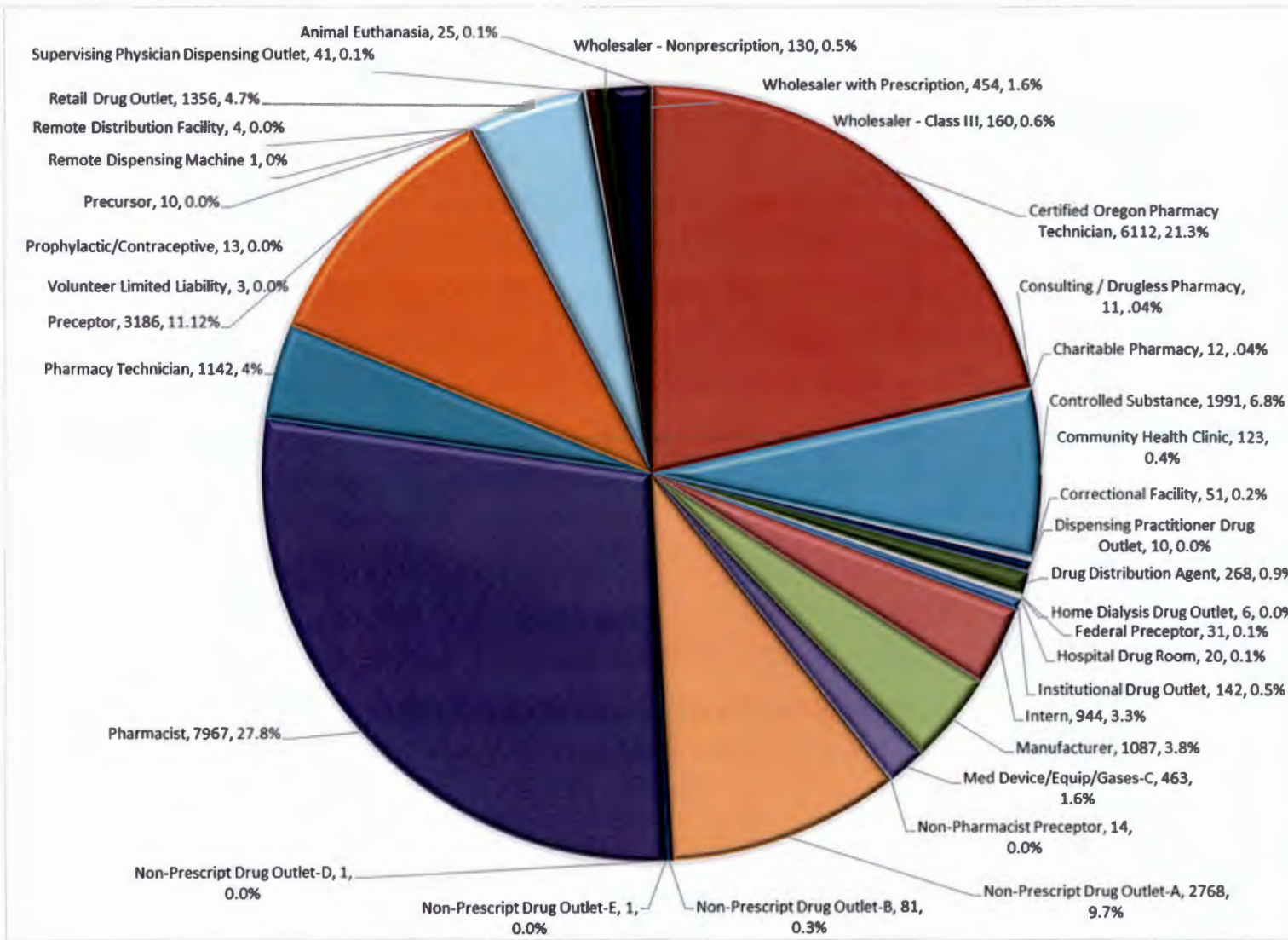
Program Performance

The following chart reflects the total / estimated number of cases (complaints & investigations) each year and the actual / estimated number of Final Orders since 2009. These numbers can be a result of outlet inspections that may turn in to one or more cases, consumer complaints or reported violations that need to be investigated. The more complex the industry becomes, including from the number of drugs available to increased laws and regulation, demonstrates just a few of the reasons why there is more of a possibility for compliance and complaint related issues. The total number of cases is significantly higher because it includes warning notices that are a result of annual pharmacy inspections. Some of these go on to become cases of non-compliance, where others are resolved in a timely manner. Additionally, every complaint and violation the Board receives requires some level of investigation. Some low level of complaints or issues do not rise the level of Board formal disciplinary action. The complexity of the Board’s oversight makes it difficult to show in a picture the volume of work that is completed by our Compliance Staff for the Board.



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The following chart includes a graphic representation of the 33 different categories of licensure and registration covered by the Board, along with the number of licensees represented in each category and the percentage each represents. Each is unique and different and requires all Board staff whether Licensing, Compliance or Administration to understand the different laws & rules associated with each license type.



BUDGET NARRATIVE – 2019-21

The Agency Key Performance, Customer Service Measure addresses the question of timeliness of services provided and quality of the services provided. The Agency continues to exceed the targeted goal of 85% with the most recent report at 91% over all for all customer service satisfaction.

If the Board were to divide its total proposed budget by the number of licensees, it could presume that the current cost per service unit would be \$289.53. However, not all licenses are alike, as has been demonstrated throughout this narrative, nor are all the services the Board provides directly attributed to individual licensees. Therefore, it is very difficult to identify an accurate cost per service unit.

Enabling Legislation/Program Authorization

The OBOP was established and received its authority and responsibility through a mandate of the Oregon Legislature, ORS Chapter 689 the Oregon Pharmacy Act. The OBOP received further authority and responsibility through ORS Chapter 475 the Oregon Controlled Substances Act. The Board does not have any Legislative Concepts proposed for consideration.

Funding Streams

The OBOP is entirely other funded and receives revenue by fees charged to licensees, civil penalties and a handful of administrative “user” fees. No lottery or general funds are allotted to the OBOP.

Significant Proposed Program Changes from 2017-19

Significant changes from the 2017-19 budget including updating revenue by implementing fee increases; modify the Current Service Level by adding two FTE for licensing and compliance; further implementing the upgrade to the database system and online services through cloud hosting, database administration and maintenance; continuing the paperless records retention initiative and adding the Public Health and Pharmacy Formulary Advisory Committee, See further explanation under “Program Funding Request” above and a detailed description of the Policy Packages included after this section.

The Oregon Board of Pharmacy is currently made up of five members who are practicing pharmacists, two pharmacy technicians, two members of the public and 20 full or part time positions; seeking to add two 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 Public Health and Pharmacy Formulary Advisory Committee activities.

The Oregon Board of Pharmacy is made up the nine member Board, representing five practicing pharmacist members, two public members and two pharmacy technicians who are not pharmacists; the new seven member Public Health and Pharmacy Formulary Advisory Committee, representing two physicians, two advanced practice nurses and three pharmacists and an agency staff of 20 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 and Formulary Committee Activities.

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The *Licensing section* is made up of 6 positions which includes a Licensing Program Supervisor that handles all details related to licensing and examinations including applications, renewals, production and mailing of more than 28,600 certificates of registration and licensure and frequent communication with licensees and applicants that represent 33 different categories of licensure for individuals and drug outlets. 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 Board requires national fingerprint based FBI background checks for all new applicants for pharmacist, pharmacy technician, certified pharmacy technicians and pharmacy intern licensure. The Licensing and Background Check Specialist staff also performs annual criminal background checks with established Policies and Procedures using the Oregon Law Enforcement Data System (LEDS). Staff regularly visits the pharmacy schools in Oregon to meet and talk to the incoming students about professional 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.

The *Operations/Administration section* includes six positions that is a combination of operations and administrative functions. It includes the Executive Director, Administrative Director, Pharmacist Consultant, Project Manager, Executive Support Specialist, 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, the Licensing Program Supervisor, Pharmacist Consultant, 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 Executive Support Specialist and Management Secretary. This position also encompasses a variety of other administrative functions including, coordination of Board and Committee meeting activities, agenda development, meeting materials, budget preparation, accounting, contracts, and public records requests and coordinates various activities with the Department of Administrative Services. The Executive Support Specialist is responsible for general office coordination including technology system services and vendors, accounts payable, facilities, purchasing, website management etc. The Management Secretary processes the Criminal Background checks, provides assistance with board meeting activities and clerical assistance. The Compliance Director directly supervises the Compliance section activities and staff previously

BUDGET NARRATIVE – 2019-21

described. The Licensing Program Supervisor directly supervises the Licensing section activities and staff previously described. The Pharmacist Consultant position is specifically responsible for conducting research and managing projects that require pharmacist expertise. The position also assists the Executive Director with media requests and legislative activities to name a few. The Project Manager position provides support in managing projects for the Agency. Staff in this section are 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. OBOP Staff provides support the Board.

“*Formulary Committee Activities*” includes capturing all activities related to the committees’ compensation, travel, lodging and other expenses and all activities related to holding a Committee meeting. OBOP Staff provides support to this Committee.

The Board’s budget includes pass-through payments to Oregon State Police for fingerprint for criminal background checks for all new licensees. Payments for Professional Services to cover the Health Professional’s Services Program costs for impaired professionals, as well as fund transfers for Workforce Data Collection fees for data analysis to the Oregon Health Authority (OHA), Prescription Drug Monitoring Program fees to OHA.

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. 2016 HB 4016, effective July 1, 2017, authorized the health professional regulatory boards to establish or contract for an impaired health professional program rather than using the Oregon Health Authority to contract for such a program. This transition has allowed more administrative transparency with the vendor and increased control over vendor performance reviews. The boards are committed to ensuring that participant monitoring is uninterrupted while keeping patient safety paramount. 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 and form 107bf22 Fee Change Detail Report that identifies proposed fee changes in this binder.

Pharmacy – 85500

ESSENTIAL PACKAGES

010 Non-PICS Psnl Svc / Vacancy Factor

Package Description

This essential package includes an overall increase of \$188,940 for non-PICS personal services such as inflation for All Other Differentials, Temporary Appointments and most significantly, restoration of the \$169,448 of vacancy savings previously reduced as there hasn't been any savings during the 2017-19 biennium.

022 Phase Outs & One-time Cost Eliminations

Package Description

This essential package removes one-time funds in the amount of (\$336,307) that were added in the 2017-19 Legislatively Adopted Budget for the **MyLicense Business Upgrade** Policy Package 100.

031 Standard Inflation & Price List Adjustments

Package Description -

This essential package consists of increases for an additional \$186,523 for overall inflation for the Price List for the cost of goods and services.

Pharmacy – 85500 Policy Packages

Policy Package 101 License Fee Increases

Package Description

Purpose:

The purpose of this package is to implement updated licensing fees.

How Achieved:

The last actual fee increase for the Board of Pharmacy was in 2001. There was a fee increase in 2011-13 for most categories; however, the majority of these were reversed in 2013 back to the 2001 rates due to an unanticipated high ending balance. Between 2001 and today, the agency has grown from 11 to 20 FTE, from 7 to 9 board members and most recently, 7 committee members were formally recently added through the appointment process. Our Agency Request Budget is projected to exceed \$8 million dollars. At this time, we have re-evaluated all fees, taking into consideration, that biennial licensure was implemented for pharmacists, pharmacy technicians and certified Oregon pharmacy technicians within the last four years without a fee adjustment for multiple years as approved within the agency's revenue plan.

Staffing Impact and Revenue Source:

This package increases most licensing fees as identified and increases licensing fee revenue by \$2,411,800. This is anticipated to cover the cost of the 2019-21 policy packages and maintain fees at the current level for at least two biennia, while retaining an ending balance of 4.4 months ending balance.

Quantifying Results

If this policy package is not approved, the Board will be forced to operate at the 2019-21 Current Service Level leaving less than a one month ending balance. This will affect the Agency's ability to effectively operate, maintain IT investments and meet several of the Key Performance Measures. In addition, implementation of the following policy packages will be compromised.

Revenue Source:

The revenue source is Other Funds

**Pharmacy - 85500
Policy Package
102 DOJ Expenditure Increase**

Package Description

Purpose:

Policy Package 102 seeks an expenditure increase for DOJ. Since 2011, the Board has utilized the DOJ flat-rate agreement to better anticipate legal costs. More recently, this has helped the agency through two senior staff changes (Executive Director and Compliance Director) and the implementation of legislation that was unfunded in addition to a higher than normal season of contested hearings last biennium. The flat-rate is evaluated each biennium based the past 36 months of legal services usage. 2015-17 usage caused the rate for 2017-19 to be \$144,000 higher than Legislatively Approved Budget allocation for DOJ; the agency has worked to absorb this overage. However, even with a reduction of legal services during the first year of 17-19, it is anticipated that with the 2019-21 pricelist inflation adjustment, an additional \$174,862 of DOJ resources will be required.

How Achieved:

Board Counsel is essential to ensure the Board is prepared for contested case hearings and the ability to negotiate many of these cases prior to hearing.

Staffing Impact and Revenue Source:

This package is dependent on the approval of Policy Package 101. Staffing: There will be no direct impact on agency staffing, however the burden to negotiate cases will fall solely on the Executive and Compliance Directors.

Quantifying Results

Should funding not be secured for this package, the Board may need to revert back to the hourly rate payment system and reduce use of Board Counsel which would be detrimental to the overall success of the agencies function and mission.

Revenue Source:

The revenue source is Other Funds.
Total Other Funds Request \$174,862.

Policy Package

103 Database Cloud Hosting – Maintenance and Operations

Package Description

Purpose:

Policy Package 103 IT Cloud Hosting – Maintenance and Operation seeks to add ongoing resources to the agency’s limitation for IT Professional Services.

How Achieved:

This package will allow for ongoing cloud hosting, database administration and maintenance costs. The Board is currently working towards the implementation of the legislatively authorized database upgrade. As mentioned earlier in the narrative, during 2017-19 the Board’s technology consultant who has managed all agency systems for over 12 years decided to move away from supporting small state agencies/boards. Part of his services included providing support to maintain the database, as well as creating and managing the online license renewals and licensee look up. We will lose this capability to provide online services without this additional support. The OSCIO and Oregon State Police for CJIS and FBI criminal history information require increased security that makes it essential to have the vendor manage all technical maintenance and database administration which was previously done by staff and the consultant. This solution expects to provide a more secure and safer data security option, which meet the OSCIO and federal CJIS/FBI security requirements as well as greater licensee & public access. This package also establishes dedicated database administration and maintenance by the vendor. Besides general maintenance to the database, the monthly fee includes database administration for setting up new staff users, set up to establish new license types, revising existing license types, reports, online applications and renewals. This also includes support for the online services that require updates for individuals to apply and renew online as well as for licensees and the public to look up license verifications.

Staffing & Revenue Impact:

This package is dependent on the approval of Policy Package 101. The expected impact on staffing is to allow the Licensing Department Supervisor to be able to focus on oversight and supervision of the Licensing staff, as well as free up some time to coordinate database administration with the vendor rather than having to spend as much time trouble-shooting database issues without IT technical expertise on staff. Absent dedicated in-house IT staffing, this has been determined to be the most effective and secure solution to continue providing online resources to the public and licensees.

Quantifying Results:

It is expected that once the upgrade is complete and full cloud hosting / maintenance and operations are implemented services to our licensees, stakeholders and the public will be more effective and efficient in processing our client interactions. The ability to have full security and functionality of the database which is maintained by our vendor should result in more streamlined processes, use and updates.

Revenue Source: The revenue source is Other Funds.
Package 103 will result in an ongoing cost of \$279,021.

Agency Request

Governor’s Budget

Legislatively Adopted

Budget Page

Policy Package
104 Compliance and Licensing Staffing

Package Description

Purpose:

Policy Package 104 seeks to increase Compliance and Licensing staffing. The Board's workload has increased in the number of applicants for licensure and compliance case workload in addition to the new Public Health and Pharmacy Formulary Advisory Committee (Formulary Committee) activities.

How Achieved:

The Agency seeks to add 1 pharmacist FTE to be shared between Compliance and Administration to support the work of inspections and investigations, as well as rulemaking efforts for the Formulary Committee with the Pharmacist Consultant. In addition, the Board seeks to add one additional staff member to the Licensing department to address workload associated with the increased number of applicants, licensees and growing number of complex outlet license categories.

Staffing Impact and Revenue Source:

Staffing:

Add one FTE Healthcare Investigator / Advisor	OAS C5911 EA to start at step 4 (due to hiring limitations)
Add one FTE Public Service Representative 3	OAS C0323AA to start no higher than step 2

This package is dependent on the approval of Policy Package 101 and includes \$430,578 for to establish ongoing Personal Services limitation for the above two positions and \$37,825 associated with new employee set up, supplies, work station setup, training etc. for a total of \$468,403.

Quantifying Results

The addition of these new positions is expected to support the work of the Board, add to existing staff where workload has caused delays in processing licenses or investigations being conducted in a timely manner. The Board is regularly asked to do more and faster. At the current staffing level, it is very difficult to meet all of the demands of our licensees or stakeholders in a timely manner. Issues of public safety always come first and this can cause delays in our ability to be responsive.

Revenue Source:

The revenue source is Other Funds.
Package 104 will cost \$468,403.

Policy Package
105 Formulary Per Diem & Expense Funding

Package Description

Purpose:

Policy Package 105 seeks to fund the Public Health and Pharmacy Formulary Advisory Committee, implemented effective 1/2018 that was unfunded.

How Achieved:

The passage of 2017 HB 2397 established this Governor appointed, multi-disciplinary Committee which is comprised of 2 physicians, 2 advance practice nurses and 3 pharmacists that located throughout the state. The Board is required to provide support and pay per diem and travel/meal reimbursement expenses for these seven committee members.

Staffing Impact and Revenue Source:

This package is dependent on the approval of Policy Package 101. The staffing for this committee is primarily absorbed by existing staff, with the exception of the shared position mentioned in Package 103 to assist with rulemaking that is a result of this Committee's recommendations for the Board to adopt items for formulary or protocol by rule.

Total Other Funds Request \$16,000.

Quantifying Results

The Committee has met three times this year and will meet one additional time before the end of the year. They plan to meet four times a year to respond to any concepts submitted for consideration to the formulary or protocol listing. This package will cover ongoing costs for daily per diem, instate travel and Agency Program related services and supplies. This cost is currently being absorbed by the agency, however we request these positions be funded for per diem and expenses associated with these new committee positions. In 2017, the Board adopted rules that include a daily per diem rate of \$100 for service of at least six hours or \$50 if at least three hours. The current position rate is \$0.00 in the system. Travel costs were calculated based on published reimbursement rates for the existing committee members for four meetings; two of the seven members are located outside of the Portland/Salem area and require an overnight stay.

Should funding not be secured for this package, the Agency may need the Committee to meet less frequently, which defeats the purpose of this new legislation to expand pharmacist prescriptive authority.

Revenue Source:

The revenue source is Other Funds.

**Policy Package
106 OBOP/Pacific Fellowship Continuation**

Package Description

Purpose:

Policy Package 106 seeks to continue the Academic and Regulatory Fellowship in partnership with Pacific University School of Pharmacy (PUSOP).

How Achieved:

The 2017-19 Legislatively Adopted Budget authorized the Board to implement this Fellowship. The Board worked closely with DOJ to establish a grant which created the funding mechanism needed for a successful implementation. This grant will need to be funded appropriately to continue renewing the Fellowship.

The Fellowship was the first of its kind and established a one-year program designed to transition the fellow from a general practitioner to a regulatory pharmaceutical specialist and clinical educator. Upon successful completion of the PUSOP-OBOP Fellowship, graduates will be on track to pursue careers in: 1) Regulatory oversight services at a State Board of Pharmacy, and 2) Academic/faculty positions that involve pharmacy practice, the tripartite mission of didactic and experiential teaching responsibilities, scholarship, and school service, as well as preceptor development opportunities. The fellowship gives participants the unique opportunity to experience careers in the areas of government and academia, thereby qualifying graduates to pursue career opportunities in these respective areas. To date, one individual has completed the inaugural year of this program and has moved on to a career in the private sector. Due to a lack of qualified candidates, the Board does not have a candidate for the second fiscal year of this biennium. For the program is to continue, an additional \$3,740 of inflation costs will need to be addressed.

Staffing Impact and Revenue Source:

This package is dependent on the approval of Policy Package 101.

Other Funds request: \$3,740 to increase existing funding for this program to continue for inflation.

This funding is to be added to Professional Services with the existing \$69,260 funding continued in the Current Service Level for 2019-21.

Quantifying Results

This Fellow will work for Pacific University and spend approximately half their time with the Board of Pharmacy learning about government and agency related activities. Should funding not be secured for this package, this program will likely not be continued. The State's academic pharmacy programs will continue have a shortage of qualified, experienced Social and Administrative Sciences professors or a pool of future, trained regulators that might be interested in state service.

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	-	-	958	-	-	-	958
All Other Differential	-	-	6,971	-	-	-	6,971
Public Employees' Retire Cont	-	-	1,183	-	-	-	1,183
Pension Obligation Bond	-	-	8,584	-	-	-	8,584
Social Security Taxes	-	-	607	-	-	-	607
Mass Transit Tax	-	-	1,189	-	-	-	1,189
Vacancy Savings	-	-	169,448	-	-	-	169,448
Total Personal Services	-	-	\$188,940	-	-	-	\$188,940
Total Expenditures							
Total Expenditures	-	-	188,940	-	-	-	188,940
Total Expenditures	-	-	\$188,940	-	-	-	\$188,940
Ending Balance							
Ending Balance	-	-	(188,940)	-	-	-	(188,940)
Total Ending Balance	-	-	(\$188,940)	-	-	-	(\$188,940)

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 022 - Phase-out Pgm & One-time Costs

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							
Employee Training	-	-	(34,565)	-	-	-	(34,565)
Professional Services	-	-	(27,500)	-	-	-	(27,500)
IT Professional Services	-	-	(272,042)	-	-	-	(272,042)
IT Expendable Property	-	-	(2,200)	-	-	-	(2,200)
Total Services & Supplies	-	-	(\$336,307)	-	-	-	(\$336,307)
Total Expenditures							
Total Expenditures	-	-	(336,307)	-	-	-	(336,307)
Total Expenditures	-	-	(\$336,307)	-	-	-	(\$336,307)
Ending Balance							
Ending Balance	-	-	336,307	-	-	-	336,307
Total Ending Balance	-	-	\$336,307	-	-	-	\$336,307

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	-	-	3,886	-	-	-	3,886
Out of State Travel	-	-	598	-	-	-	598
Employee Training	-	-	675	-	-	-	675
Office Expenses	-	-	4,708	-	-	-	4,708
Telecommunications	-	-	1,667	-	-	-	1,667
State Gov. Service Charges	-	-	55,187	-	-	-	55,187
Data Processing	-	-	2,800	-	-	-	2,800
Publicity and Publications	-	-	1,433	-	-	-	1,433
Professional Services	-	-	15,746	-	-	-	15,746
IT Professional Services	-	-	3,415	-	-	-	3,415
Attorney General	-	-	65,776	-	-	-	65,776
Employee Recruitment and Develop	-	-	8	-	-	-	8
Dues and Subscriptions	-	-	174	-	-	-	174
Facilities Rental and Taxes	-	-	8,342	-	-	-	8,342
Facilities Maintenance	-	-	2	-	-	-	2
Medical Services and Supplies	-	-	42	-	-	-	42
Agency Program Related S and S	-	-	8,718	-	-	-	8,718
Other Services and Supplies	-	-	10,589	-	-	-	10,589
Expendable Prop 250 - 5000	-	-	399	-	-	-	399
IT Expendable Property	-	-	1,587	-	-	-	1,587
Total Services & Supplies	-	-	\$185,752	-	-	-	\$185,752

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
Capital Outlay							
Data Processing Hardware	-	-	315	-	-	-	315
Total Capital Outlay	-	-	\$315	-	-	-	\$315
Special Payments							
Other Special Payments	-	-	456	-	-	-	456
Total Special Payments	-	-	\$456	-	-	-	\$456
Total Expenditures							
Total Expenditures	-	-	186,523	-	-	-	186,523
Total Expenditures	-	-	\$186,523	-	-	-	\$186,523
Ending Balance							
Ending Balance	-	-	(186,523)	-	-	-	(186,523)
Total Ending Balance	-	-	(\$186,523)	-	-	-	(\$186,523)

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 101 - License Fee Increases

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	-	-	2,411,800	-	-	-	2,411,800
Total Revenues	-	-	\$2,411,800	-	-	-	\$2,411,800
Ending Balance							
Ending Balance	-	-	2,411,800	-	-	-	2,411,800
Total Ending Balance	-	-	\$2,411,800	-	-	-	\$2,411,800

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 102 - DOJ Expenditure Increase

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							
Attorney General	-	-	174,862	-	-	-	174,862
Total Services & Supplies	-	-	\$174,862	-	-	-	\$174,862
Total Expenditures							
Total Expenditures	-	-	174,862	-	-	-	174,862
Total Expenditures	-	-	\$174,862	-	-	-	\$174,862
Ending Balance							
Ending Balance	-	-	(174,862)	-	-	-	(174,862)
Total Ending Balance	-	-	(\$174,862)	-	-	-	(\$174,862)

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 103 - Database Cloud Hosting

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							
IT Professional Services	-	-	279,021	-	-	-	279,021
Total Services & Supplies	-	-	\$279,021	-	-	-	\$279,021
Total Expenditures							
Total Expenditures	-	-	279,021	-	-	-	279,021
Total Expenditures	-	-	\$279,021	-	-	-	\$279,021
Ending Balance							
Ending Balance	-	-	(279,021)	-	-	-	(279,021)
Total Ending Balance	-	-	(\$279,021)	-	-	-	(\$279,021)

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 104 - Compliance & Licensing Staffing

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	-	-	287,472	-	-	-	287,472
Empl. Rel. Bd. Assessments	-	-	122	-	-	-	122
Public Employees' Retire Cont	-	-	48,784	-	-	-	48,784
Social Security Taxes	-	-	21,991	-	-	-	21,991
Worker's Comp. Assess. (WCD)	-	-	116	-	-	-	116
Mass Transit Tax	-	-	1,725	-	-	-	1,725
Flexible Benefits	-	-	70,368	-	-	-	70,368
Total Personal Services	-	-	\$430,578	-	-	-	\$430,578
Services & Supplies							
Instate Travel	-	-	590	-	-	-	590
Employee Training	-	-	2,955	-	-	-	2,955
Office Expenses	-	-	3,723	-	-	-	3,723
Telecommunications	-	-	3,284	-	-	-	3,284
Data Processing	-	-	877	-	-	-	877
Publicity and Publications	-	-	438	-	-	-	438
Employee Recruitment and Develop	-	-	438	-	-	-	438
Dues and Subscriptions	-	-	438	-	-	-	438
Facilities Rental and Taxes	-	-	15,117	-	-	-	15,117
Other Services and Supplies	-	-	7,337	-	-	-	7,337
Expendable Prop 250 - 5000	-	-	2,628	-	-	-	2,628
Total Services & Supplies	-	-	\$37,825	-	-	-	\$37,825

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 104 - Compliance & Licensing Staffing

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 Expenditures							
Total Expenditures	-	-	468,403	-	-	-	468,403
Total Expenditures	-	-	\$468,403	-	-	-	\$468,403
Ending Balance							
Ending Balance	-	-	(468,403)	-	-	-	(468,403)
Total Ending Balance	-	-	(\$468,403)	-	-	-	(\$468,403)
Total Positions							
Total Positions							2
Total Positions	-	-	-	-	-	-	2
Total FTE							
Total FTE							2.00
Total FTE	-	-	-	-	-	-	2.00

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 105 - Formulary Per Diem & Expense Funding

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	-	-	5,600	-	-	-	5,600
Social Security Taxes	-	-	427	-	-	-	427
Total Personal Services	-	-	\$6,027	-	-	-	\$6,027
Services & Supplies							
Instate Travel	-	-	8,000	-	-	-	8,000
Agency Program Related S and S	-	-	2,000	-	-	-	2,000
Total Services & Supplies	-	-	\$10,000	-	-	-	\$10,000
Total Expenditures							
Total Expenditures	-	-	16,027	-	-	-	16,027
Total Expenditures	-	-	\$16,027	-	-	-	\$16,027
Ending Balance							
Ending Balance	-	-	(16,027)	-	-	-	(16,027)
Total Ending Balance	-	-	(\$16,027)	-	-	-	(\$16,027)

ESSENTIAL AND POLICY PACKAGE FISCAL IMPACT SUMMARY

Pharmacy, Board of
Pkg: 106 - OBOP/Pacific Fellowship Continuation

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							
Professional Services	-	-	3,740	-	-	-	3,740
Total Services & Supplies	-	-	\$3,740	-	-	-	\$3,740
Total Expenditures							
Total Expenditures	-	-	3,740	-	-	-	3,740
Total Expenditures	-	-	\$3,740	-	-	-	\$3,740
Ending Balance							
Ending Balance	-	-	(3,740)	-	-	-	(3,740)
Total Ending Balance	-	-	(\$3,740)	-	-	-	(\$3,740)

07/09/18 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

2019-21
 PICS SYSTEM: BUDGET PREPARATION

PACKAGE: 104 - Compliance & Licensing Staffin

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
0000655	OAS C5911	EP HEALTH CARE INVESTIGTR/ADVISR	1	1.00	24.00	04	9,212.00		221,088 89,735			221,088 89,735
0000656	OAS C0323	AP PUBLIC SERVICE REP 3	1	1.00	24.00	02	2,766.00		66,384 51,646			66,384 51,646
TOTAL PICS SALARY									287,472			287,472
TOTAL PICS OPE									141,381			141,381
TOTAL PICS PERSONAL SERVICES =			2	2.00	48.00				428,853			428,853

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07/09/18 REPORT NO.: PPDPFISCAL
 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

2019-21
 PICS SYSTEM: BUDGET PREPARATION
 PAGE 2
 PROD FILE

PACKAGE: 105 - Formulary Per Diem & Expense F

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
0004421	B	Y7500 AE BOARD AND COMMISSION MEMBER		.00	.00	00	0.00		800 61			800 61
0004422	B	Y7500 AE BOARD AND COMMISSION MEMBER		.00	.00	00	0.00		800 61			800 61
0004423	B	Y7500 AE BOARD AND COMMISSION MEMBER		.00	.00	00	0.00		800 61			800 61
0004424	B	Y7500 AE BOARD AND COMMISSION MEMBER		.00	.00	00	0.00		800 61			800 61
0004425	B	Y7500 AE BOARD AND COMMISSION MEMBER		.00	.00	00	0.00		800 61			800 61
0004426	B	Y7500 AE BOARD AND COMMISSION MEMBER		.00	.00	00	0.00		800 61			800 61
0004427	B	Y7500 AE BOARD AND COMMISSION MEMBER		.00	.00	00	0.00		800 61			800 61
TOTAL PICS SALARY									5,600			5,600
TOTAL PICS OPE									427			427
TOTAL PICS PERSONAL SERVICES =				.00	.00				6,027			6,027

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

Source	Fund	ORBITS Revenue Acct	2015-2017 Actual	2017-19 Legislatively Adopted	2017-19 Estimated	2019-21		
						Agency Request	Governor's	Legislatively Adopted
Animal Euthanasia	4360	0205	2,750	2,500	2,400	3,750		
Certified Pharmacy Technician	4360	0205	640,841	325,685	350,168	689,400		
Charitable Pharmacy	4360	0205	2,025	1,950	1,800	2,100		
Consulting/Drugless Pharmacy	4360	0205	4,725	3,889	4,200	10,800		
Controlled Substance	4360	0205	219,450	201,635	199,500	404,200		
Community Health Clinic (formally known as County Health Clinic/Family Planning)	4360	0205	21,750	12,016	18,750	29,000		
Drug Distribution Agents	4360	0205	151,600	153,720	206,400	206,400		
Hospital Drug Room	4360	0205	12,525	4,212	12,000	16,000		
Interns	4360	0205	57,900	44,570	44,350	88,700		
Manufacturers	4360	0205	897,300	769,488	830,400	1,089,900		
Med Device/Equip/Gases-Class C	4360	0205	54,100	42,622	44,000	66,000		
Non-Prescript – Drug Outlet – Class A	4360	0205	249,075	226,646	249,700	382,500		
Non-Prescript – Drug Outlet – Class B	4360	0205	10,550	10,400	8,000	12,000		
Non-Prescript – Drug Outlet – Class D	4360	0205	0.00	0.00	200	200		
Pharmacist	4360	0205	1,014,530	940,658	1,005,905	1,982,500		

Agency Request

Governor's Budget

Legislatively Adopted

Budget Page **84**

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

Pharmacy Technician	4360	0205	107,985	115,331	95,100	108,600		
Precursor	4360	0205	1,650	1,600	1,000	2,400		
Prophylactic/Contraceptive	4360	0205	2,000	1,400	1,300	1,300		
Remote Dispensing	4360	0205	1,000	800	1,000	1,200		
Retail/Institutional Drug Outlet	4360	0205	532,375	502,705	525,700	706,050		
Supervising Physician Dispensing Outlet	4360	0205	13,475	13,440	12,950	15,400		
Wholesalers	4360	0205	701,150	691,856	581,600	763,350		
Delinquent Fees	4360	0505	117,022.50	70,000	55,000	55,000		
Reciprocity	4360	0205	173,200	160,000	126,000	126,000		
NAPLEX/Exams	4360	0205	50,425	58,000	27,967.50	35,000		
Civil Penalty	4360	0505	413,118.50	350,000	350,000	350,000		
Interest Income	4360	0605	88,652	48,000	45,000	45,000		
NSF	4360	0975	968	700	600	600		
Misc Fees	4360	0975	22,282	10,000	20,000	20,000		
Laws & Rules	4360	0975	11,440.31	8,000	3,000	3,000		
Prescription Drug Monitoring Fee – transfer to OHA	4360	0205	322,290	352,747	349,920	356,850		
Prescription Drug Monitoring Fee – 10% retention	4360	0205	35,810	39,194	38,880	39,650		
Workforce Data Collection – Transfer to OHA	4360	0210	66,399	56,610	58,040	59,296		
Fingerprinting Fees – Transfer to OSP depending on volume	4360	0352	237,519	228,800	80,000	80,000		

Agency Request

Governor's Budget

Legislatively Adopted

Budget Page **85**

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

Pharmacy, Board of
2019-21 Biennium

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

<i>Source</i>	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Leg Approved Budget	2019-21 Agency Request Audit	2019-21 Governor's Budget	2019-21 Leg. Adopted Audit
Other Funds						
Business Lic and Fees	5,334,681	4,431,667	4,431,667	7,146,250	-	-
Non-business Lic. and Fees	303,918	505,552	505,552	139,296	-	-
Fines and Forfeitures	530,141	420,000	420,000	405,000	-	-
Interest Income	88,652	48,000	48,000	45,000	-	-
Other Revenues	64,935	39,700	39,700	57,090	-	-
Tsfr To Oregon Health Authority	(369,118)	(409,357)	(409,357)	(416,146)	-	-
Total Other Funds	\$5,953,209	\$5,035,562	\$5,035,562	\$7,376,490	-	-

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Pharmacy, Board of

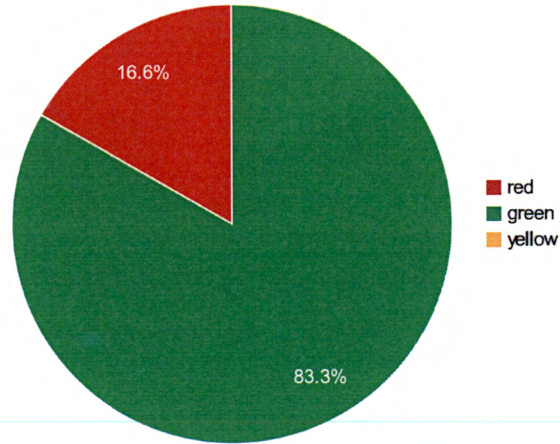
Annual Performance Progress Report

Reporting Year 2017

Published: 10/2/2017 11:32:40 AM

KPM # Approved Key Performance Measures (KPMs)

- 1 Percent of inspected pharmacies that are in compliance annually. -
- 2 Percent of audited pharmacists who complete continuing education on time. -
- 3 Percent of pharmacies inspected annually. -
- 4 Average number of days to complete an investigation from complaint to board presentation. -
- 5 CUSTOMER SERVICE- 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.
- 6 Board Best Practices - Percent of total best practices met by the Board.



Performance Summary

Summary Stats:

Green

= Target to -5%
83.33%

Yellow

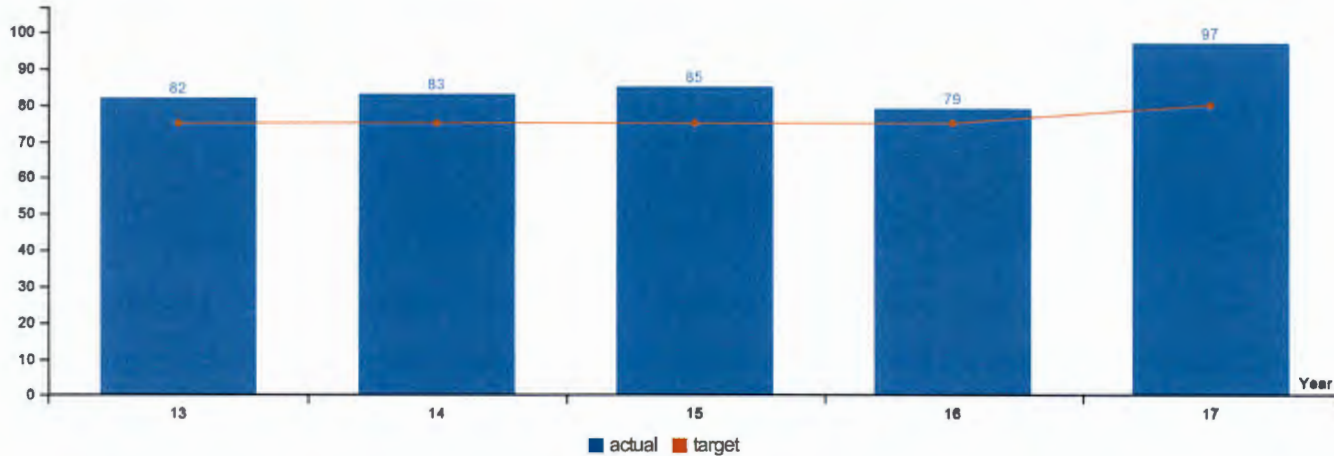
= Target -5% to -15%
0%

Red

= Target > -15%
16.67%

KPM #1 Percent of inspected pharmacies that are in compliance annually. -
Data Collection Period: Feb 01 - Jan 31

* Upward Trend = positive result



Report Year	2013	2014	2015	2016	2017
Percentage of Pharmacies that are in compliance annually.					
Actual	82%	83%	85%	79%	97%
Target	75%	75%	75%	75%	80%

How Are We Doing

The Board's inspection year runs February 1 through January 31 annually. Outlets are required to complete their Annual Self Inspection Report prior to February 1 in order for the Inspectors to be able to conduct a thorough inspection. This form needs to be completed and available for inspection by the Board at all times. The purpose of the self-inspection is to ensure the pharmacy is in compliance with all state and federal laws and rules governing the practice of pharmacy. Newly assigned PICs are required to complete a self-inspection of their pharmacy within 15 days of becoming the PIC.

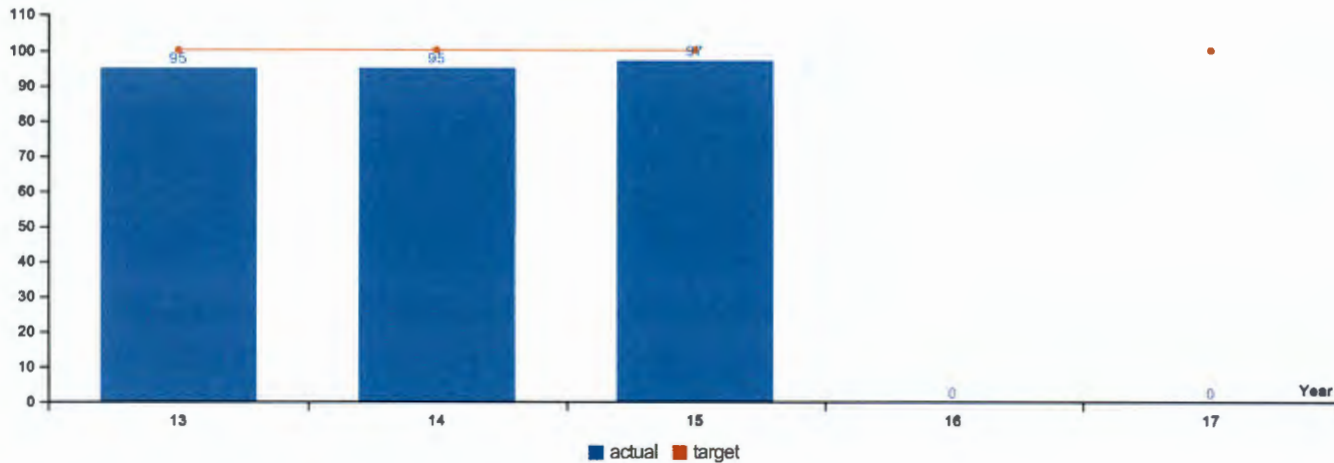
This report includes results from February 1, 2016 - January 31, 2017, the Board completed 924 pharmacy inspections. This is 100% of the retail and institutional pharmacies licensed and located in Oregon. Upon inspection, 83% or 763 passed, there were 136 Deficiency Notices issued, however after correcting deficiencies noted during inspection, 97% were in compliance. Outlets have 30 days to correct deficiencies and report back to the Board. During this period, 25 received notices of Non-Compliance because they did not correct deficiencies in a timely manner.

Factors Affecting Results

The Board's axiom is "Compliance through Education" and Inspectors strive to educate pharmacists during the inspection process. Where there are deficiencies, outlets are advised what needs to be corrected. The Self Inspection Report cites to the specific laws and rules Inspectors are evaluating to check compliance. The Board allows time for outlets to achieve compliance with newer laws and rules upon implementation. However, some outlets are not always as quick to change or comply. We continue to work with these outlets to achieve compliance and maintain public safety.

KPM #2 Percent of audited pharmacists who complete continuing education on time. -
 Data Collection Period: Jan 01 - Dec 31

* Upward Trend = positive result



Report Year	2013	2014	2015	2016	2017
Percentage of audited pharmacists who complete continuing education on time.					
Actual	95%	95%	97%	No Data	No Data
Target	100%	100%	100%	TBD	100%

How Are We Doing

The Board is currently in the process of conducting the 2017 pharmacist continuing education audit. In 2015, the Board moved to biennial licensure for pharmacists and the renewal period ended June 30, 2017. We increased the number of individuals audited from 10 to 20% for this year. Therefore, we are auditing 1389 out of 7257 pharmacists licensed in Oregon. The audit notice was emailed to licensees in August 19th with a due date of October 11th. At this time we have logged and acknowledged the 1111 or 79% responses received. In October, staff will begin reviewing individual's responses for completeness. Due to our transition to biennial licensure, this is the first year that pharmacists were required to submit 30 hours of continuing pharmacy education. This is to include a minimum of at least two hours earned in the area of pharmacy and drug law and a minimum of two hours earned in the area of patient safety or medication error prevention. The remaining 26 hours may be earned in the area the individual practices in, therapeutics, pain management, cultural competency or pharmacy and drug law or other aspects of health care. When the audit is complete, we will update the actual number of pharmacists that completed their continuing education on time to complete reporting on this measure.

Factors Affecting Results

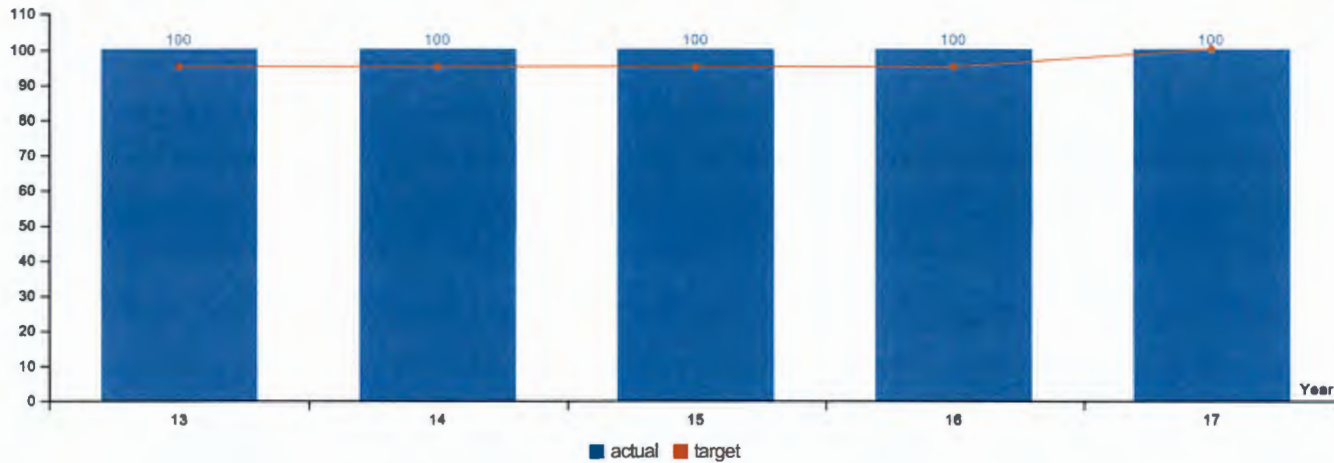
The 2017 audit is not complete yet.

KPM #3

Percent of pharmacies inspected annually. -

Data Collection Period: Feb 01 - Jan 31

* Upward Trend = positive result



Report Year	2013	2014	2015	2016	2017
Percent of pharmacies inspected annually					
Actual	100%	100%	100%	100%	100%
Target	95%	95%	95%	95%	100%

How Are We Doing

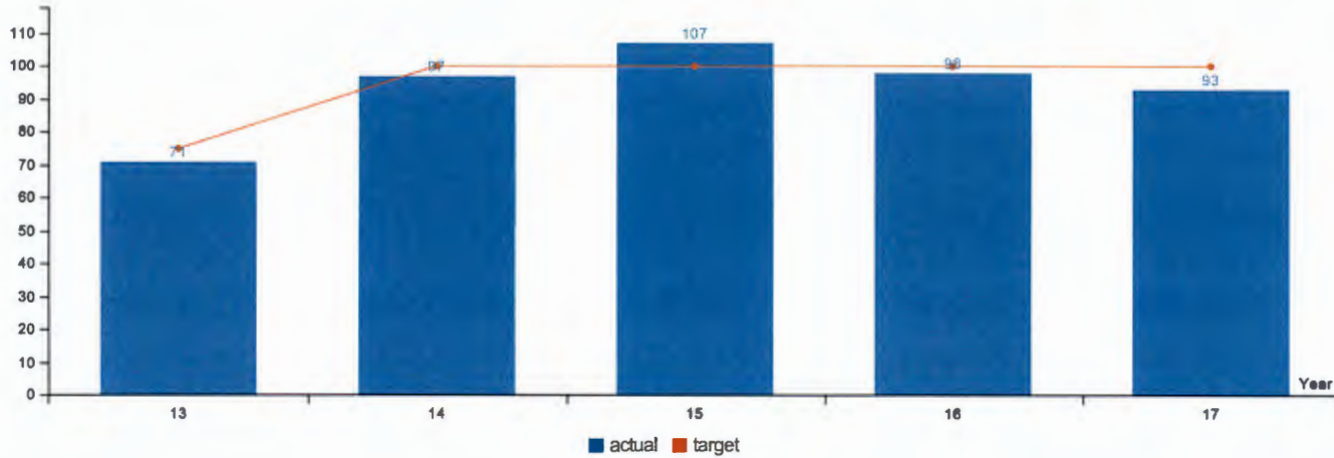
For the reporting period February 1, 2016 - January 31, 2017, the Board completed 100% inspections of retail and institutional pharmacy outlets licensed and located in Oregon. The Board is seeing a greater need to inspect additional drug outlets and staff works to incorporate these into the inspection schedule.

Factors Affecting Results

While we have achieved 100% of the primary inspections required, we are limited in expanding inspections to other categories unless there is a complaint or identified compliance issue reported.

KPM #4 Average number of days to complete an investigation from complaint to board presentation. -
 Data Collection Period: Jan 01 - Dec 31

* Upward Trend = negative result



Report Year	2013	2014	2015	2016	2017
Number of days to process complete investigation from complaint to Board presentation.					
Actual	71	97	107	98	93
Target	75	100	100	100	100

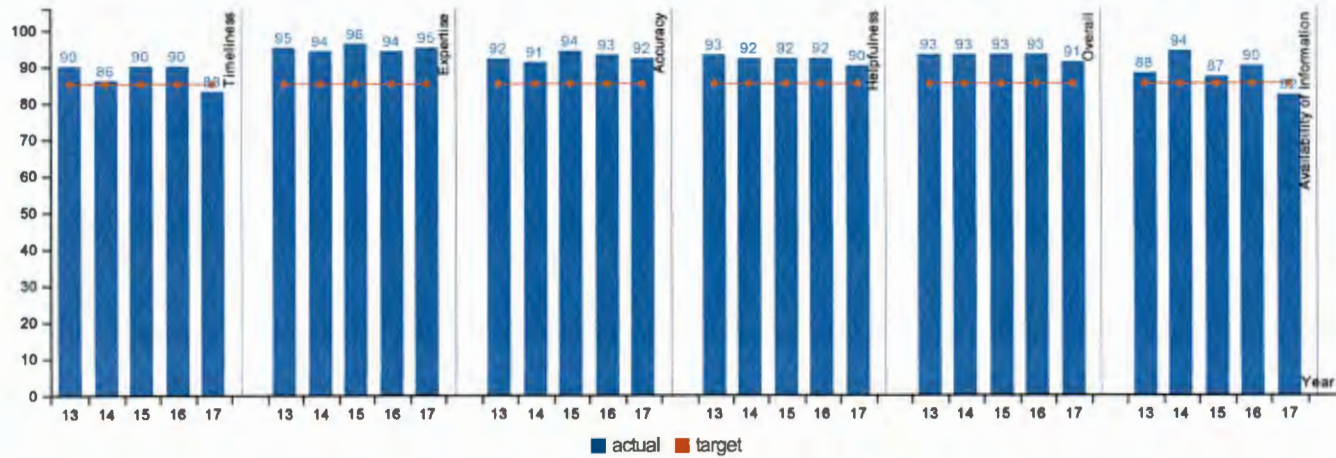
How Are We Doing

The Board investigates more than just consumer complaints that become cases. We do not have a backlog at this point. We are continually working on cases which includes complaints, Board initiated cases, cases initiated because of inspection deficiencies, inspection notices of non-compliance, license application cases etc. Cases of drug diversion, theft or impairment always take priority for public's safety and may delay complaints from immediate investigation. For the calendar year January 1, 2016 - December 31, 2016, Board staff investigated 585 cases, of those 272 were specifically complaints which were on average reported to the Board within 92 days.

Factors Affecting Results

The Board meets six times a year for two to three days each to conduct case deliberation and general business. Depending on the date a complaint/case is initiated and the deadlines for submitting investigated cases for the next Board meeting, there may be a delay in how quickly the Board receives a complaint/case for review. The Board strives to meet the statutory reporting requirement of 120 days (ORS 676.165(4)).

KPM #5 CUSTOMER SERVICE - 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.
 Data Collection Period: Jan 01 - Dec 31



Report Year	2013	2014	2015	2016	2017
Timeliness					
Actual	90%	86%	90%	90%	83%
Target	85%	85%	85%	85%	85%
Expertise					
Actual	95%	94%	96%	94%	95%
Target	85%	85%	85%	85%	85%
Accuracy					
Actual	92%	91%	94%	93%	92%
Target	85%	85%	85%	85%	85%
Helpfulness					
Actual	93%	92%	92%	92%	90%
Target	85%	85%	85%	85%	85%
Overall					
Actual	93%	93%	93%	93%	91%
Target	85%	85%	85%	85%	85%
Availability of Information					
Actual	88%	94%	87%	90%	82%
Target	85%	85%	85%	85%	85%

How Are We Doing

The Board utilized three surveys via the SurveyMonkey Customer Service Survey to Board customers that obtained a new license between the dates of January 1, 2016 and December 31, 2016. We emailed the survey link to 2827 new licensees. 38 email addresses came back to us as undeliverable. Of the 2789 remaining licensees that provided valid email addresses, 587 individuals responded to the surveys. This represents an overall response rate of 21.05%. This is a 9.67% increase from the 2015 overall response rate.

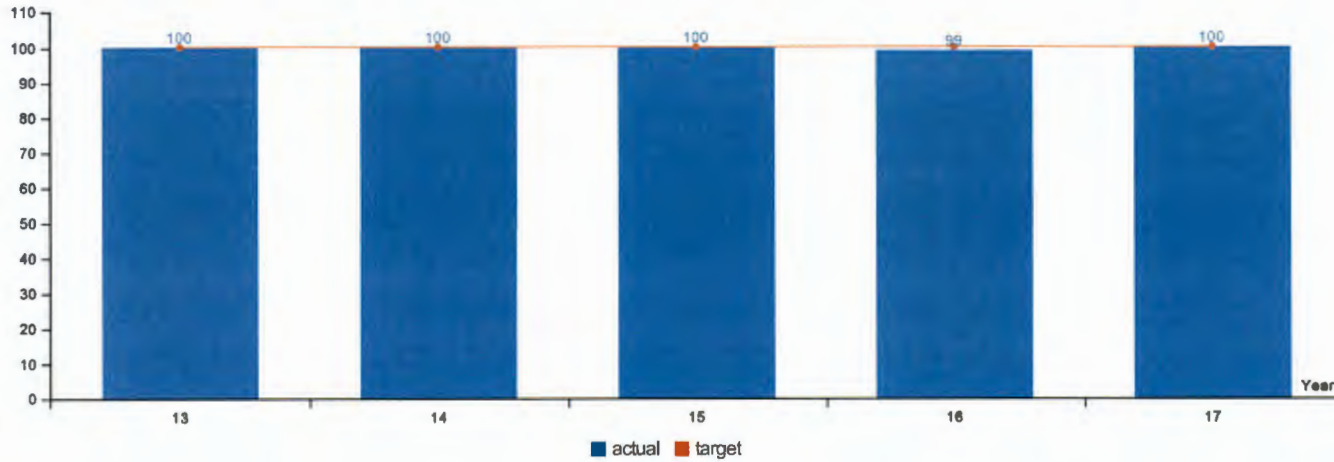
Customer Service is a priority for the Board and staff. We strive to provide excellent customer service daily and the Director reviews survey results monthly and provides feedback to the staff at staff meetings.

Factors Affecting Results

The number of significant rule changes implemented in 2015 added to the time it takes to process new applications and renewals which is reflected in the decreased percentages.

KPM #6 Board Best Practices - Percent of total best practices met by the Board.
 Data Collection Period: Jan 01 - Dec 31

* Upward Trend = positive result



Report Year	2013	2014	2015	2016	2017
Is the Board following Best Practices?					
Actual	100%	100%	100%	99%	100%
Target	100%	100%	100%	100%	100%

How Are We Doing

At the Board's Annual Business Meeting each June, the Board reviews the Best Practices Self-Assessment criteria and scores. This year the Board scored 100% on the best practices criteria. The Board and staff are always looking at ways to do things better and more efficiently.

Factors Affecting Results

The Board and its Officers are very active. They are committed to excellence and ensuring the Board and agency are run effectively through the work of the Executive Director and staff.

BUDGET NARRATIVE – 2019-21

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, sexual orientation, 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.

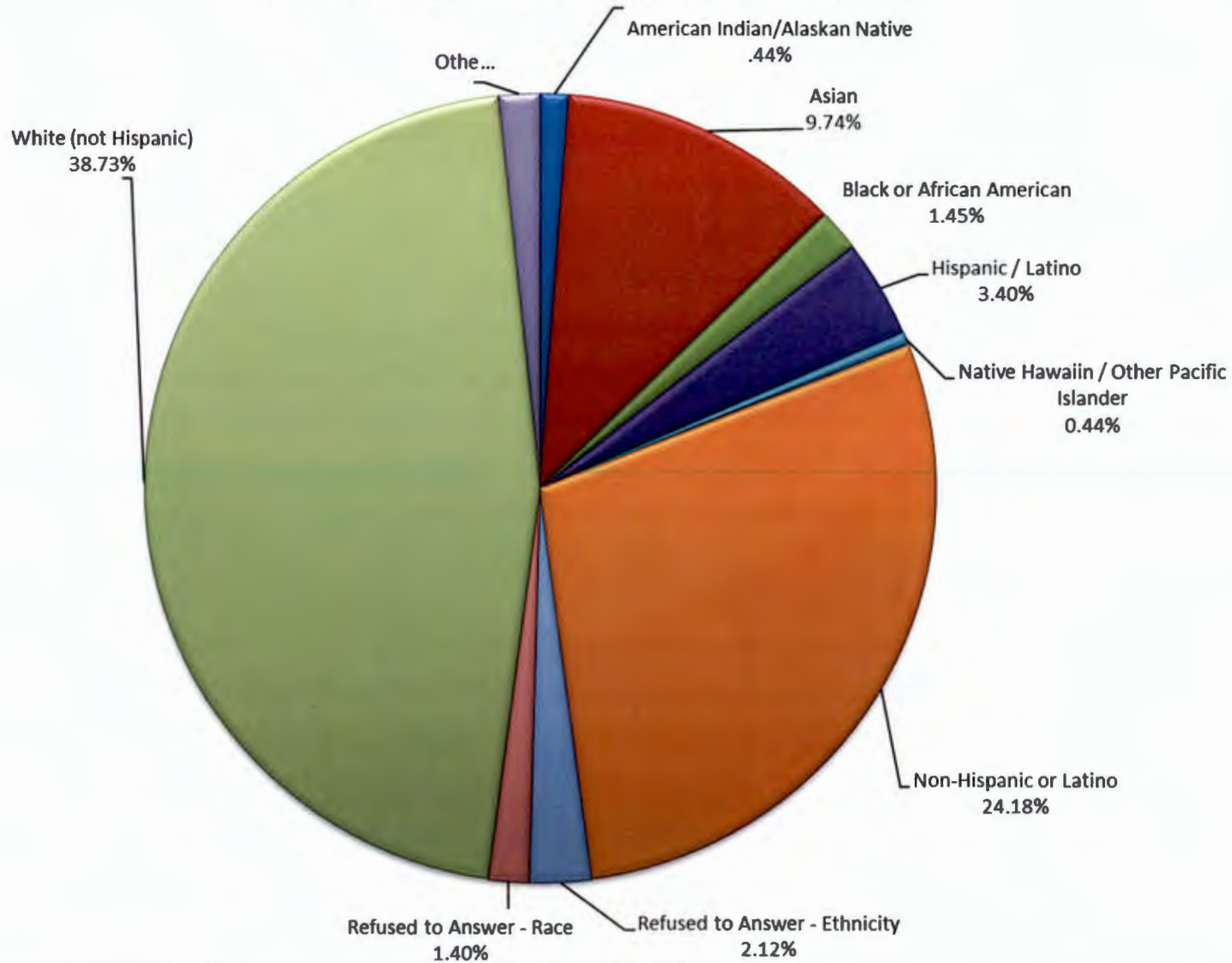
The nine members of the Board of Pharmacy are appointed by the Governor and confirmed by the Senate to four-year terms. The Board grew from seven to nine members in 2016. Effective February 17, 2016, five members are licensed pharmacists, two members are pharmacy technicians and two members are representatives of the public. Effective January 1, 2018, the new Public Health and Pharmacy Formulary Advisory Committee, which is comprised of seven members, two doctors, two advanced practice nurses and three pharmacists who are also appointed by the Governor to two-year terms.

The agency had six staff position changes, including one retirement during the last two years. Our Board and staff are comprised of a diverse group of individuals. Two members of our staff now represent the Asian and Hispanic or Latino cultures. Of the nine board members, 6 female and 3 male, representing African American, Hispanic/Latino and White ethnic groups. Of the seven Formulary Committee members, 5 female and 2 male representing the American Indian or Alaska Native, Asian, African American and White ethnic groups. As staff vacancies occur, our recruitment efforts will continue to seek candidates that bring diversity to our staff and Board.

The following charts diagram a breakdown of active individual licensee’s ethnic grounds and bi-lingual information.

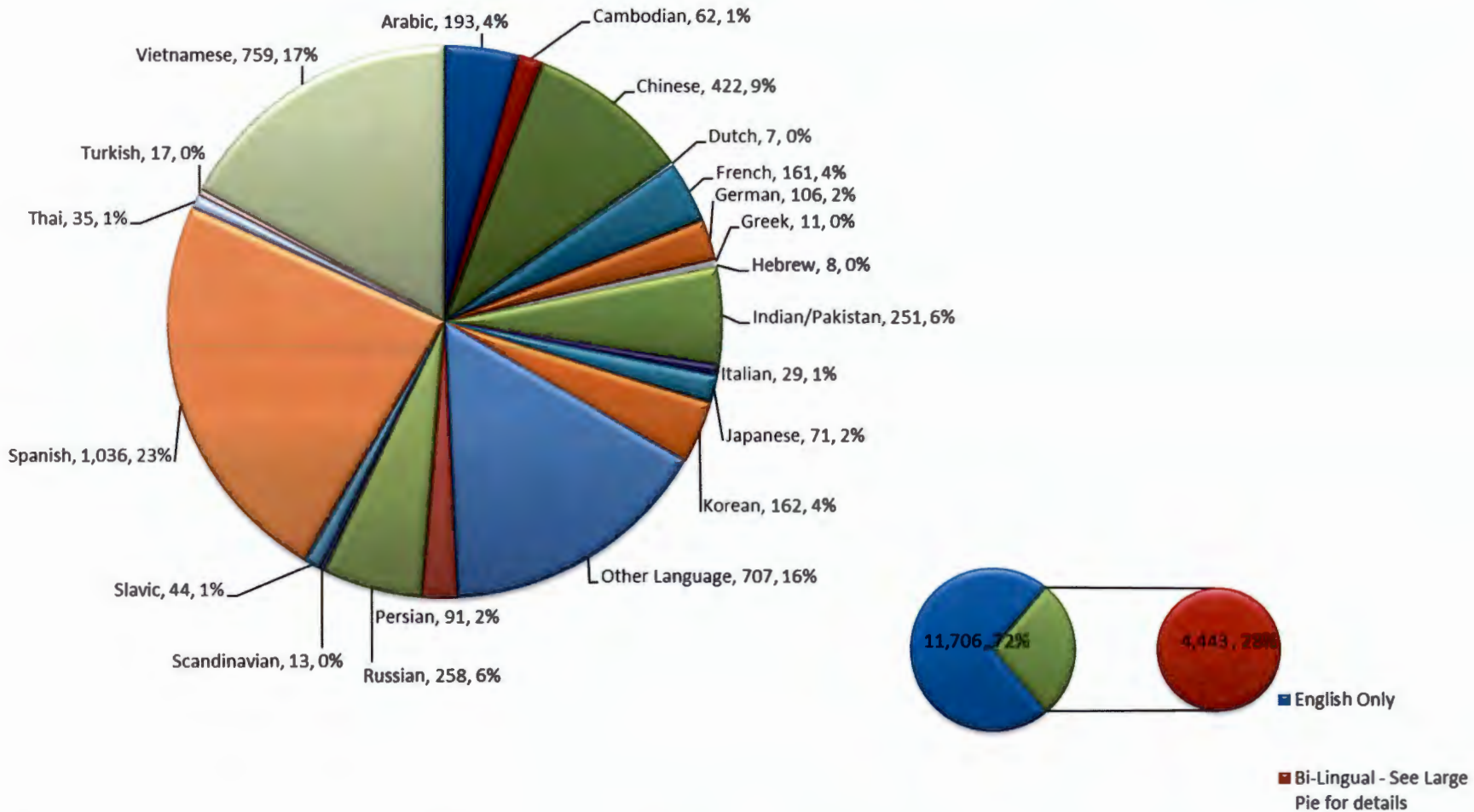
BUDGET NARRATIVE – 2019-21

Board of Pharmacy - 2018 Ethnic Breakdown of Active Licensees



BUDGET NARRATIVE – 2019-21

Board of Pharmacy - 2018 Bi-lingual Information - Active Licensees



MEETING MINUTES

**Oregon Board of Pharmacy
2016 Strategic Planning Meeting
November 8-9, 2017**

**Oregon Garden Resort
895 West Main St.
Silverton, OR**

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.

Wednesday, November 8, 2017 @ 9:00 AM – 4:30 PM - Orchid Ballroom
Thursday, November 9, 2017 @ 8:30 AM – 4:00 PM - Orchid Ballroom

WEDNESDAY, NOVEMBER 8, 2017

9:03 AM OPEN SESSION, Penny Reher, Presiding

Roll Call

Penny Reher, President
Roberto Linares
Shannon Larson
Dianne Armstrong

Rachael DeBarmore, Vice President
Kate James
Cyndi Vipperman
Second Public Member - vacant

Excused Absence: Christine Chute

The following staff members will be present for all or part of this session:

Marc Watt, Executive Director	Brianne Efremoff, Compliance Director
Karen MacLean, Administrative Director	Chrisy Hennigan, Licensing Supervisor
Fiona Karbowicz, Pharmacist Consultant	Tim Frost, Board Fellow

Tom Cowan, Sr. AAG Board Counsel

MOTION

Motion to approve the agenda was made and unanimously carried (Motion by James, second by Armstrong).

Board President, Penny Reher, introduced facilitator, Donna Silverberg, and turned the meeting over to her for introductions. Donna welcomed board members, staff and members of the public to the Oregon Board of Pharmacy's 2017 Strategic Planning Meeting. Students in the audience were invited to introduce themselves, and discussion protocols were presented to the room.

Following board member and staff introductions, Donna noted that strategic planning is the prerogative for the board, and that the public was invited to watch, listen and learn, not to engage. She also emphasized that this retreat would be different than issue specific meetings in the past, and that the group would focus on looking ahead at the bigger picture to brainstorm 5 to 10-year plans. Donna asked that board and staff think about what the group can do as a team to find ways to connect with each other and dream for the future. Some questions to consider included: (1) What does the board collectively want to work towards? (2) How can the board and staff achieve these high-level plans within the scope of OBOP's mission?

Donna provided some background to general strategic planning approaches. She concluded that the Board would be best served by using the "Balanced Scorecard" (see Appendix A) approach and explained that the pillars of the house represent the strategic themes the board thinks OBOP should focus on for the next 5-10 years. Each pillar, or strategic theme, will lead to a strategic result.

Donna then asked the board to consider: what pillars of excellence or stability are needed to support OBOP's desired strategic results and mission? The pillars should clarify strong and stable strategic themes that the board believes the organization needs to focus on for the next 5 to 10 years, within the context of OBOP's mission:

***Mission:** 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.*

The board discussed 5 to 10-year visions and how they would like to strategically plan annually. Executive Director Marc Watt added suggested the Board look toward painting a vivid high-level picture and staff can make a step-by-step process for how to the board where it wants to go to achieve its visions.

Current Trends that Impact and Influence OBOP's Work

Donna reminded the group that OBOP is a regulatory board, which has unique oversight and relationships with its communities. Before defining the pillars of OBOP, she asked the group to work in small groups to brainstorm local, state, and national level **trends** that board members are seeing. She noted that the '5 to 10-year ideas' that were listed on the agenda have a good variety of levels to talk about. The board and staff divided into two groups to identify these trends, discussing influences, impacts, and pressure points that most affect the board, with the goal of determining the next direction for OBOP. (see Appendix B)

Some of these included:

Technology intersection with many rules/pace, Pharmacy technician roles - minimum qualifications/training/ education/certification and Pharmacist expanded scope of practice, financial constraints leading to downward pressures on pharmacy and continued industry disruption related to the delivery of pharmacy.

Some comments and reflections from this small group brainstorming included:

- We have a broad spectrum authority as a board to make change.
- It's a little bit discouraging, because it all comes down to money.

- When talking about the issue of money, we can trace a lot of the pressures back to where the money comes from. Many of these topics have been discussed in pharmacy for years, and it would be beneficial to look back and acknowledge that we've been struggling with some of these issues for a long time.
- It's interesting to see how interwoven a lot of topics tend to be, there is a lot of blending that's happening which makes it more complex
- Many of the trends dovetail into one another.
- There are many similarities between the two groups' lists.
- Are we driving our own priorities or are they being given to us by the requests we receive for waivers etc.?

Current Organizational Capacity

Donna reviewed the trends identified, and asked the board to continue thinking about the 5 to 10-year strategic-theme pillars, as well as previous 5 to 10-year vision ideas. Keeping in mind OBOP's organizational capacity load, what can staff undertake on top of current load?

Executive Director Marc Watt provided an update on OBOP's organizational capacity. He stressed that staff are just about at capacity to do their work. He outlined some of the challenges staff is working with, including upgrading in-house software and support within the state's slow-moving system, MLO project, drug take-back, HB 2397 Pharmacy Formulary Advisory Committee implementation and rule concepts in the pipeline.

The good news is that OBOP is fully staffed, with inspectors working at 100%. The efficiency is there, but Marc emphasized that staff is at maximum load. Other staff stated that they want to do it right. They are seeking operational excellence. Still, the consequences and complexity of how everything intersects is what keeps them up at night.

The board thanked staff for their continued hard work and efforts. They also noted the significance of doing this long-term planning, and the importance of looking into the future and having something to work towards to get priorities aligned.

Strategic Themes: Pillars to Pursue in the Next Five Years

Donna summarized that OBOP has engaged leadership and a solid foundation, and despite being fully-staffed, capacity is maxed out. She posed the question: When considering the mission and issues that the board has already, what are three or four areas on which you want to focus your attention, energy and staff to get you where you want to be in five years?

To answer this question, the group decided it would be helpful first to articulate and agree on their stakeholder list. Stakeholders were defined as "anyone affected by the decisions the board makes":

Review of OBOP's Stakeholders

- | | |
|------------------------|--|
| • Public (#1 Priority) | • Other State Agencies |
| • Patient | • Federal |
| • Healthcare Providers | • Accrediting Bodies |
| • Payers (?) | • Educators |
| • Industry | • Associations – NABP, OSPA, OSHP etc. |

- Legislature
- Licensees
 - Retail
 - Hospital
 - Pharmacists
 - Technicians
- Wholesalers
- Distributors
- Manufacturers
- (31 categories!)
- Law Enforcement
- Governor's Office (accountability)

Everyone agreed that the key stakeholder is the public. The number one job is protecting the public.

Once the board clarified its stakeholders, board members wrote the strategic theme they each thought the Board should focus on to represent their pillars of excellence for the next five years. Once these ideas were posted, common themes emerged: technology, human capital (workplace conditions, rules that assist with and support structure etc.), safety, patient care, standards of pharmacy (scope of practice and its changes, licensing) and organizational (board related). The board then assessed the themes for commonalities and, over lunch, considered how they wanted to name the pillars.

The group agreed that the following should be the three pillars for OBOP's 2018—2022 work:

Three Pillars

1. Safe Drug Accessibility and Distribution
2. Entrustable Professional Activities (EPAs)
3. Define Standards of Practice



Testing the Identified Pillars

Questions to consider for each of the pillars:

- Is there organizational capacity and staff to work on these pillars?
- Are there internal processes to support these?
- Have we considered all stakeholders?

The board felt confident that they currently are and can continue to support the three pillars. Staff is already working on these issues; internal processes can support them, and all stakeholders can be related to one or more of them.

As a test case, the board engaged in a brainstorming session about the passage of 2017 HB 2397, the Formulary bill, which establishes a committee to determine what drugs can be prescribed by pharmacists and what protocols can be followed.

Marc asked the board to talk about what the impacts from the prescribing bill might look like in 5 to 10 years within the retail and health system realms. He asked for the board's thoughts about what it should be, so he can take the vision to the committee when they meet next year.

Some of the comments associated with 2017 HB 2397 are listed under the possible pillar categories below:

1. Safe Drug Accessibility and Distribution

- Access to information/ Medical Records
 - Medical records are important because missing anything is critical.
 - Would be ideal to see retail pharmacists have access to medical records and healthcare information. The model for this already exists in closed health-care systems.
 - In retail, it's going to be harder.
 - In hospitals, there are lab tests the pharmacists can link back to, so patients can get access to care faster.
- Create that 3rd class of drugs for pharmacists to prescribe.
- Consider continuation of refill medications.
- Some concepts may require an established protocol for a pharmacist to follow.
- Need a relationship between physician and pharmacist
- Detailed recordkeeping

2. Entrustable Professional Activities (EPAs)

- Appointments for complicated medication therapies may be utilized.
- Traditional retail pharmacy workflows may need to be altered to accommodate these new services.
- Establish systems which allow patients to be treated quickly and carefully.
- The "dream" would be that pharmacists could rely on a universal electronic medical record, this way pharmacists could check it for every evaluation.

3. Define Standards of Practice

- We would want the committee and pharmacists to consider what the increased liability for pharmacists will be going forward.
- Whenever the dispenser and prescriber are the same entity, there is danger for conflict of interest. That conflict of interest is worrisome, and activities will need to be described clearly, so the public can trust this new system.
- Pharmacists will also need to create new records that back up their decisions.

Implications outlined for retail and health system pharmacy practice:

RETAIL (considering future formulary)

- Use established protocol (if no access to medical record)
- Look at guidance to avoid problems
- Established relationship & communication with doctor for more complex cases
- “Pharmacist-Only” drugs
 - Spacers/Diabetic supplies
 - Strep tests & meds
- Faster PDMP updates (Prescribed Drug Monitoring Program)
- No controlled pain meds
 - Avoid “pharmacy shopping”
- New set of liabilities need to be clear
- Help with short-term refill

HEALTH-SYSTEM

- Improved care via shared medical records & speed of prescribing
- Potential for out-of-system record sharing?
- Share access with retail
- Shared medical records to support context for prescribing – “MyChart” travels to pharmacy
- Definite post-diagnosis
- Continuing therapy
- Third class of drugs
- Inter-company standard for records so all can understand
- **NO:** Initiation of therapy that requires diagnosis

OBOP's Relationship to & Picture of Technology in Pharmacy in 2027

- How does the technology make it safer for the patient?
- GOAL: TO MAKE IT AS SAFE OR SAFER
- Pharmacists removed from physical distribution of drugs
- Barcode scanning to verify correct meds & protocol
- Photos of mixing/preparation to double-check safety/errors
- Human monitoring of new technology to assure safety (not just efficient)
- VIGILANCE!
- Standards of practice evolve to meet/exceed degrees of technology
- New technology is tested, evaluated, and has a track record.
- Technology does not replace or erode role of pharmacist in patient safety/care (*What are the non-negotiable aspects of practice?*)

Some additional comments made during this discussion included:

- Sometimes it's good to be cautious. We need to make sure that the human element is kept in the process, not just blindly trusting the technology in the process. Because it's being done more efficiently, the expectation is that people don't have to

check things as closely – humans still must be vigilant in their responsibility to protecting the public.

- When talking about pillars, we have the ultimate goal of perfectly filled prescriptions.
 - Did the pharmacist correctly educate the patient on the drug? Our goal is that the patient has the correct understanding on how to use it. We need to think of this as a wider discussion, we cannot have one rule for each drug.
 - Fill the prescription right, educate the patient, using the standards of practice as baseline for evaluation.
- How do you know, if technology is so immature and there is no history of accuracy, what happens if harm comes to hundreds of people? The technology needs to be mature enough and have enough testing.
 - There may be times when Oregon wants to be first – but there needs to be adequate testing.
- Clearly defining critical elements of pharmacist practice will allow for appropriate delegation and automation of non-professional activities.

Donna then asked what the board wanted to do next with the strategic theme pillars, which lead to a discussion of **non-negotiables** for pharmacists. The following is an initial brainstormed list that the board created. One or two board members suggested items that might be considered as negotiable at a later date. These items are italicized, and the board will need revisit them in the future:

Non-Negotiables

- Patient Counseling
- DUR (Drug Utilization Review)
- Open pharmacy outlet- onsite security
- Clinical decisions
 - e.g. Counsel, assessment, & recommendations
- Ordering / Signing “CIIIs”
- Therapy management
- Prescribing
- Immunization / administering drugs
- New prescriptions/transfers (only a pharmacist can take them)
- Review order verification
- Professional discussions with doctors and others
- Final verification of prescription/order
 - (*Consider delegating ‘product verification’ task*)
- No delegation of duties that are specific to the pharmacist scope of practice
- Supervision, direction & control of ancillary staff
 - (*Consider allowing technicians to be unsupervised in certain, clearly defined circumstances*)

Discussion

The board discussed the process of final product verification – which includes the components of matching a picture to a picture or a number to a number. One member suggested the potential for delegating the task of product verification. The board needs to define exactly what final verification is to determine whether that is something that could even be delegated away from pharmacists?

Board members spoke about the idea of having unsupervised technicians in certain circumstances. Some board members had positive thoughts, while others felt strongly against the idea, and had concerns about accountability, security, and oversight. Comments included:

- Consider when technicians could be unsupervised and under which certain circumstances.
 - Understand implications if allowing that there are conditions when a pharmacist may not need to be present at all times when ancillary staff is in the pharmacy.
 - We would have to raise the bar on accountability.
 - This would require a statutory change. The board would have to define the circumstances VERY well.
- Paying attention to context is critical. Under what circumstances would these scenarios work? How can we reframe the conversation?
 - It keeps going back to accountability. The pharmacist being asked to accept these new potential rules, puts his/her license at risk.

MOTION

Motion to adjourn at 4:30PM was made and unanimously carried (Motion by James, second by DeBarmore)

THURSDAY, NOVEMBER 9, 2017

8:30 AM OPEN SESSION, Penny Reher, Presiding

Penny Reher, President

Roberto Linares

Shannon Larson

Dianne Armstrong

Rachael DeBarmore, Vice President

Kate James

Cyndi Vipperman

Second Public Member – vacant

Excused Absence: Christine Chute

The following staff members will be present for all or part of this session:

Marc Watt, Executive Director

Karen MacLean, Administrative Director

Fiona Karbowicz, Pharmacist Consultant

Tom Cowan, Sr. AAG Board Counsel

Brianne Efremoff, Compliance Director

Chrisy Hennigan, Licensing Supervisor

Tim Frost, Board Fellow

Board President, Penny Reher, called the meeting to order and turned it over to Karen MacLean to address housekeeping issues.

Reflecting on Desired State of the Profession

Donna provided the group with an agenda for the day and began by asking board members to envision their “overall desired state” for the field in 5 to 10 years. What should the field of pharmacy look like? *(Facilitator’s note: board members shared their responses aloud at the session. See Appendix C “Desired State” for individual written responses)*

There was a strong, shared board sentiment regarding the need to strengthen relationships between the pharmacy/pharmacist and their patients.

- Patients’ needs will be met when they can connect with pharmacy staff.
- In addition, in community pharmacy, documentation is critical because everyone in an office should be able to access every record and understand every interaction with each patient within that pharmacy.

- This means the patient can seamlessly visit with any pharmacist in the office.

This only works when there is diligent record keeping and documentation.

Further comments from board members included:

- Taking the time to develop relationships makes you a more valuable provider. Technician roles are valuable, too, as they do prep and time-consuming work assisting pharmacists. If I can recruit someone good to my team that brings their patients with them, that helps everyone.
- We document every interaction, by doing that and having a system, it doesn’t matter who picks up the phone, all previous interactions have been recorded, and we are able to follow up accurately based on that documentation. This level of care helps people decide that this is where they want to have prescriptions filled.

Desired Strategic Results from Strategic Theme Pillars

Donna asked the board to consider their desired strategic results based on the three pillars. She posed the question: How do you know you have met your goal for each pillar?

The group identified the following results for each strategic theme:

Safe Drug Access & Distribution

- Develop and maintain strong partnerships to ensure manufacturing practices that lead to strong, full pipeline of necessary medications (regulatory bodies).
- Clearly defined distribution pathways from manufacturing all the way to the patient.
- Ensure workplace conditions that allow for safe distribution of medications.
- Zero errors/Zero counterfeits.
- Feds and state work together.
- Technology is used to safely support patient access.

Entrustable Professional Activities *(what Rph's do)*

- Each patient's medication and health needs are being met.
- Pharmacy workflow facilitates meaningful patient interactions.
- Clinical recordkeeping is expanded and perfected.
- The public has a clear understanding of pharmacy services provided; they trust and want to use those services.
- Pharmacists & technicians are confident, prepared professionals through education and training.
- Pharmacists communicate to the patient in a way they can HEAR: Listen and verify their understanding of their medicine regimens.
- Licensees retain competence in the practice of pharmacy.
- Clearly defined Rph-only activities

Define Standards of Practice *(how Rph's do their work)*

- Decreased to zero errors.
- Technology's role has been defined.
- Facilitate the advancement of safe practice (by board & staff).
- Education and training produce competent, confident and trusted pharmacy professionals.
- Technology supports goals and roles of pharmacists and technicians.
- Allow for evolving roles (do not "define" everything).
- Clear definition of Board's role in the "practice" of pharmacy (this may need to be re-defined).

-> **ACTION:** Prior to the February board meeting, staff will research and present models of standards of practice from other fields/organizations.

The board and staff voiced concerns over the ideas they were discussing and the potential for them to get lost given the day-to-day demands of their work as a board. Donna suggested the board look 5-10 years out to determine a timeline that matches administrative and legislative deadline constraints with the desired results the board hopes to achieve.

Tom Cowan, Board Counsel, said he was sensitive to concerns about strategic planning results, and noted that it comes down to the board building consensus for developing specific concepts. He suggested that time be set aside on future board meeting agendas to continue with strategic planning work. This is why staff observes these conversations: to see where board consensus is building, in order to build a basis for their work, and to get

concrete deliverables. He discussed the appropriate flow of communications between board members and staff.

The group agreed that future meeting agenda management was critical in order to keep strategic planning concepts within the proper overall agency priorities.

Other comments made during this discussion included:

- Use the agenda placeholder more effectively - Set aside 30 minutes at every meeting to look at strategic plan and figure out 'next deliverables', so staff knows exactly what they need to work on next.
- There needs to be clear direction on the board's list of priorities for staff
- It is important to integrate the plan with other things we are working on or things will get lost. Especially with legislative work in front of us, priorities will change over time and we need to recognize and focus on the desired deliverable.
- Staff needs the board's destination, a picture of where they want to be. With this, staff can figure out the process and how to get there.
- Kate James suggested creating a roadmap to put into the resources folder for people to review before meetings. This would establish clarity on the work needed to be done on rules and how that work relates to progress towards our bigger plan. It was noted that the resource folder was very helpful to all.
- It will be important to bring Christine up-to-date at the next board meeting.

AGREEMENT: The board agreed that every meeting should have at least some link back to these strategic planning discussions, to keep momentum going, and to review what the group is working on in relation to and as a result/outcome of the pillars. The group will watch to be sure discussions do not become redundant.

Marc stressed that the key to success will be prioritization, while always keeping in mind patient safety. The board needs to be clear on what exactly they want, so staff can prioritize to meet board goals. Staff needs to know if the board wants something in the pipeline. The board wondered if the current priority list needed to be revisited to determine how it fit with the current vision. They also noted that some new board members might not understand the realities of rules and rule-making.

Revisiting Goals of Strategic Theme Pillars

1. Safe Drug Access & Distribution

The board quickly reached consensus on this pillar and offered the following comments/desired results:

- Strong area that the board is committed to as an ongoing core value.
- Develop and maintain strong partnerships to ensure this.
- This is the black and white area, so it is logical for us to clearly define the boundaries. We are responsible for right drug distribution.

- Included zero counterfeits to ensure the grey and black market is addressed - that the board cannot do on its own.
- How do we find with whom we need to work while managing all of these pieces?
->**ACTION:** Regularly review whether we are following these concepts.

2. Entrustable Professional Activities (EPAs) *(the what, scope of what you do)*

The board reached consensus on this pillar, and offered the following comments/desired results:

- Each patient's medical and health needs are being met.
- Clinical record keeping is expanded and perfected.
- Public has a clear understanding of pharmacy services provided.
- Pharmacists and techs are confident, prepared professionals.
- Communicate to patient in a way they can hear.
- Licensee remains competent.
- Clearly defined EPAs.
- Counseling will be different as technology evolves. Must clearly communicate with patients, because hearing the information does not mean "digesting the information and understanding." Maybe it involves face-timing, skyping etc.

3. Standards of Practice *(guidance on how; standards for doing the job)*

The board almost reached consensus, but hopeful about the concepts. Follow-up clarification will be needed on this pillar.

- Clearly defined elements of the practice of pharmacy.
- Decreased to zero errors.
- Technology rules have been defined.
- Allow for some rules/practices to evolve; do not define everything.

Donna asked if more clarification and discussions were needed. The intent of the final bullet was to support evolution of practice - without micromanaging, yet while also maintaining high degree of patient safety components. This will require evaluating practice regularly, with a constant focus on safety. A thought was the first step is to agree on pharmacist-only activities, then the other pieces will fill in. Are there simple rule changes or do they need statutory changes? There was then a concern about grey areas, fear of change, and needing things black-and-white for pharmacy to be safe and liabilities minimized.

Marc noted that many rules in place are prescriptive because another board thought they were important and needed to be clearer. He said, if the board wants changes, it will need to be done well, so that everything needing to be addressed doesn't have to be rewritten. There are times that regulations need to be descriptive and other times they should be broad.

Donna asked what would be necessary for the board to reach consensus on the Standards of Practice issues. Could anything be added or clarified? This prompted a few board members to voice their concern because there were still so many things needing to be defined. There currently is no set standard of practice in the field so this area will take time. Further comments regarding standards of practice included:

- The more work done on pillar 3, the more pillar 2 will become clearer.
- It goes with HB 2397
- The board should utilize their Fellow for research in this area.
- There remains a need to discuss what pharmacists can and cannot do, because accountability falls into all three pillars.
- Do not expect all lists to be finished by December: expectations must be set, understood, and managed together.
- As the formulary committee develops, integrate some of their questions into the conversation: what does that mean for prescribing and pharmacy practice?

->**ACTION:** Staff should bring models from other healthcare professions for the board to look and consider by the February meeting.

Donna summarized the Define Standards of Practice pillar discussion: Over the next five years, the board will work to describe guidance for pharmacists about Standards of Practice. This information will be based on models from other healthcare settings, which staff will present to the board.

Vision Statement for Strategic Planning Session

The board came up with the following statements:

- “We are the safety link between members of the healthcare team, patients, manufacturers & drugs”
- “Oregon’s pharmacists and pharmacy technicians focus on patient/public medication safety and needs while adapting to (and being **accountable** for) changes in technology, patient relationships & the healthcare system.”
- “Oregon pharmacists & technicians utilize changes in technology and advances in clinical information and practice to safely provide pharmaceutical services for patients in the healthcare system”

Board Input:

- Do we need to clarify “accountability”?
- Insert word “medication”
- Don’t like “focus” – rather have “the experts”
- Difference between pharmacists and technicians
- Not just about the medication, it’s about caring about patients’ general wellbeing
- Patient safety is about a lot of different things

After discussing issues and edits to the vision statement, the board agreed to proceed without a vision statement because it did not seem to add any clarity to their other work.



Staff Capacity and Workload Issues to Consider

The board thought they are still asking staff to prepare too many items for board meetings and discussions. Staff spends a lot of time preparing things for the board to discuss but, if the board were to delegate more to staff, then OBOP can utilize resources more efficiently.

Staff asked how they could be more efficient. Some board members expressed a hesitancy to delegate too many things to staff because not doing so is a more cautious approach.

->**ACTION:** Marc will look at ways to streamline the process for issues coming before the board.

Succession Planning

Marc reminded the group that, although it was subject to change, his plan was to retire after the 2019 legislative session. As such, the board needs to start thinking about the timeline and process for seeking his replacement. The board had previously said they might want internal candidates, which would require an internal hiring process. But, if the board wants to consider an external candidate, this may require a different hiring process. Marc noted that the board would need to: meet with the Executive Recruiter from DAS, create a recruitment plan, and remember that there are many points which must be discussed in open session. Marc noted that it would be good to start sooner than later, and address overlap.

The board requested that the schedule be developed from the back end. There should be two timelines: one for external candidates, one for internal. Clarification is needed about what the maximum allowed overlap is. Karen noted that a hiring plan should be established well in advance to allow for a smooth transition.

-> **ACTION:** Karen will get preliminary hiring process information to the board at one of the next two board meetings.

Opioid Crisis

Have Done
<input type="checkbox"/> Made Naloxone available.
<input type="checkbox"/> Work with patients to shift off opioids to other therapies.
<input type="checkbox"/> Increased education for pharmacists about protocols for Naloxone.
<input type="checkbox"/> Keep doing (and highlight) new requirements for dispensing.

Could Do
<input type="checkbox"/> Encourage pain CE for pharmacists.
<input type="checkbox"/> Drug take-back (with grants/funds, if possible).
<input type="checkbox"/> Remember: There are patients who legitimately need these pain medications & help their access/lack of stigma.
<input type="checkbox"/> Work with other healthcare boards to develop a hotline for when pharmacist sees over prescribing by...dentists, doctors etc. (add to PDMP training).

The group turned to discuss the Opioid Crisis and what, if anything, the Board could impact. A lot of multi-disciplinary work is being done on this topic throughout the state. PBMs (Pharmacy Benefit Manager) are trying to lobby for a seven-day supply of opioids given to patients. Some questions that arose included:

- Is the board doing everything we can?
- Is the board missing anything?
- Are we being helpful in this crisis and epidemic?
- Is anyone involved in his or her community?
- Is there anything that the board can be doing that it is not being done?

Important factors that were discussed included: pharmacy and ER hopping; good reviews for ER doctors; concept of two types of pain; slow updates on the PDMP allowing for multiple fills; discount cards; drug take-back; lack of training on Naloxone; requests for mandates; lack of funding; legitimate pain patients experiencing barriers; pharmacists' difficulty reporting abuse; and lack of a communication channel.

Potential ways to combat the crisis included: an option for partial fills; licensees re-learning pain management; counseling patients regarding the pros and cons of multiple drugs at the same time; and including an article about abuse reporting process in OBOP's newsletter. Penny asked Roberto to raise this issue and awareness at OSU. She sees an opportunity to educate both nursing and pharmacy students.

Next Steps and Overview of 2016 Retreat Outcomes

The group reviewed the 2016 strategic planning retreat outcomes, and revised the tasks: The "Division 45 Rewrite" might need to be revisited. Brianne and Fiona have been revising and working on new compounding rules, and looking at what is going on with the FDA. In response to drug shortages, Penny offered that Oregon might want to tap into the National Drug Stockpile for those experiencing shortages due to national disasters.

- It was also noted that if the board wants to consider "Legislative Concepts" again, they must be submitted by April 13th, 2018. The board asked that staff discuss this and bring ideas back to the board.
- Concerning "Preventing Medication Errors," the idea to work with the Oregon Patient Safety Commission never worked out due to staff changes at OPSC. Marc was encouraged to talk with other states about their approach, or through ISMP. The ability to confidentially report needs to be made much easier. One board member advocated working with OPSC if it became feasible. Marc noted it is difficult to draw any conclusions from the small amount of data that currently exists. The goal of this item was to get enough information reported to study the data.
- Staff is putting their compilation of meeting notes for "Medication Reconciliation History" into writing as an FAQ. They are seeing general consistency, and expect this will be coming out soon.
 - The board would like to see the FAQs before it is published, and staff would be happy to share it.

- Tom noted that there was a lot of merit in keeping this topic in both pillar 2 and 3. Medication reconciliation could show why there is an important difference between pharmacists and ancillary technicians. Also, it is a national patient safety goal, licensees are held accountable, and OBOP needs to be on same page.
- ACTION - The board asked to have this added to a future agenda.
- ACTION - Karen will update the new 'outcome plan' with information from this strategic planning session.

To close the meeting, Donna asked the group to think about takeaways from the last two days. Board members agreed that these discussions were a long time coming, and, while difficult at times, they were pleased with the process and results. They were pleased to learn that others shared similar concerns and priorities. Many expressed excitement to see the issues and the field of pharmacy continue to evolve with positive energy and hope. There also was excitement expressed for furthering opportunities for technicians and pharmacists to 'create a world where everyone in the field knows exactly how to get people the medications they need in a safe environment'. Penny was glad to see such positive energy, and said the group did a lot of great work. She wished everyone the best and noted that their work was a great endeavor.

Staff was realistic about their concerns on where to start to get these plans done, and they felt confident that the group was heading in a great direction. Donna closed by acknowledging that this kind of high-level thinking can be very challenging, and appreciated that the group enthusiastically worked through the process together.

OPEN FORUM

Only one member of the public wished to comment in the Open Forum.

- Chris Humberson, R.Ph. shared his thoughts on the opioid discussion: He had concerns about the pharmacist complaint process, and fears many have of retaliation for bringing up issues. He noted that pharmacists would benefit from reinforcement and support so they are not afraid to report. It is their duty to report.

Adjourn

MOTION

Motion to adjourn at 3:27PM was made and unanimously carried (Motion by James, second by Armstrong).

Attachments:

Appendix A – Defining Strategic Planning

Appendix B – Current Trends that Impact and Influence OBOP's Work

Appendix C – Board Members' Overall "Desired State" in 5-10 Years

Appendix A

Defining Strategic Planning

Donna began by reminding the board that strategic planning is an important activity which allows the board, its staff and others to clarify the direction they are headed and be able to head there together. She presented the board members with two models to consider as they started their time thinking:

1) Strategic Planning 101 Model:

Most strategic planning processes have four distinct steps:

- **Analysis / Assessment** –this step allows an organization to consider current trends and realities: What is impacting the organization? What are the realities you see? Given these realities, what does this suggest for the future?
- **Strategy Formulation** is a step which is high level. It serves as the basis for the plan. It is the step through which the board clarifies what is important and what it seeks to do for the life of the plan. This is where we will spend our time during this meeting.
- **Strategy Execution** - Once the high-level view is clarified, then staff can put the ideas into operational action items. This step includes detailed actions and defines performance measurements.
- **Strategy Evaluation / Sustainment** is an active management phase, which includes: performance towards the goals, addressing organizational culture issues, communications with a variety of audiences, and on-going data reporting.

Donna presented two models for strategic planning.

1. Strategic Planning 101 Model:



- **Analysis / Assessment** (what are the current trends and realities; what is impacting, what are the realities that we see?)
- **Strategy Formulation** (high-level / basic plan)
- **Strategy Execution** (operational / action items, details & measurements)
- **Strategy Evaluation / Sustainment** (management phase; includes performance, culture, communications, data reporting)

2). The Balanced Scorecard organization, a think tank for strategic planning in the public setting, suggests that a good strategic plan is like a house: the foundation is engaged leadership which describes and focuses on the pillars of excellence, which uphold the organization's overall mission. This house can and should be looked at from a variety of perspectives, starting from the bottom and working up:

- **Organizational Capacity** – given the human and fiscal resources, what can the organization do?
- **Internal Processes** – how do the organization's processes allow us to affect the actions and changes we hope to achieve?
- **Stakeholders** – who are they? What impact does OBOP's actions have on them and vice versa?
- **Public Policy** – how do all of the above affect what policies OBOP should create?



Appendix B

Current Trends that Impact and Influence OBOP's Work

Group 1 Trends: (Dianne, Kate, Shannon, Bri and Tim)

- Technology intersection with many rules/pace
- Pharmacy technician roles
 - Minimum qualifications/training/education/certification
- Pharmacist expanded scope of practice
 - Prescribing
 - Training/education/qualification
- Business and Financial pressures
- Public patient safety
 - Awareness
 - Pressure
 - Accountability
- Patient cost/access to healthcare (ACA)
 - Political pressure
- Medication shortages
- Opioid epidemic
- Transitions of care
- Increased friction between expanded scope and the board role of protecting public
- Pharmacist as educator
 - Being impacted by "technology" replacing (self-driving?)
- Organizational issues/trends
- Fewer "volunteers" willing to assist with organizational work
- Broader scope of input/wider set of stakeholders (e.g. technicians et al)
 - More voices to hear
 - Need for board to consider responses/reactions
 - Too nice?
- Board hearing/responding to more questions/request from stakeholders that push edges of rules
 - Require more reaction from Board & Staff
 - Pulling from higher-level view/work/priorities?
- Regulating increase in case complexity
- Continuing to write rules based on "one-offs" waivers
- Regulating based on the "exception"

Group 2 Trends: (Cyndi, Penny, Rachael, Roberto, Chrisy, Fiona, and Tom)

- Change in tech scope in other states
 - Big inconsistencies in other states
- Change in RPh scope
- Tele-pharmacy/Tele health
- Pharmacy as Partner in healthcare
 - More responsibility
 - More decision-making
 - Pharmacy metrics (health system grading)
- Money & downward pressure because of payers
- Drug Costs
- Continued industry disruption (Amazon, healthcare delivery methods)
- Technology
- Medical policy is being driven by "payers"
- Drug shortages – critical meds
- Consolidation of manufacturers
- Regulatory over-burden
- Natural and/or man-made disasters
- Counterfeit drugs (ex: illicit Fentanyl)
- Opioid crisis
 - What is the board's role?
 - What is RPh role? What is within our control?
- Accrediting bodies requiring compliance & standards (ex: Med rec)
- Regulatory bodies setting boundaries
- Patient-centric care
- Organizational capacity trends
 - Legislative changes
 - Budget constraints

Appendix C

Board Members' Overall "Desired State" in 5-10 Years (note card statements that were read during the meeting)

- Enhance opportunity for pharmacist / patient relationships
- Increased role for pharmacy in management of people's medications by
 - Having pharmacist truly manage all of patients' meds
- Pharmacist documenting patient interactions (including self-care), refills, new rules to truly create a pharmacy chart
- Pharmacist reimbursement for care

-
- We will need to have adapted to market forces
 - No small challenges
 - NYT article that Rx largely hasn't changed
 - Bricks & mortar vs. regulatory constraints
 - Techs advance to do much of mechanical functions of Rx along and technologies help
 - Those technologies that have successfully kept patient safety advances at the forefront of their innovations will dominate

-
- Patient centered care, individualized, not standardized
 - RPh is the provider managing all patient medications. Necessary part of care team. A UNR between all providers ensuring good transitions of care. RPh has been removed from majority of dispensing model.
 - Tech role is more professional / career oriented, technical training, more leadership opportunities
 - Open access to medications & information
 - Technology that allows the RPh to reach any patient

-
- Evolution of accountability that coincides with evolution of RPh/tech roles & technology
 - Maintaining the pharmacist as central to patient care & education
 - Increased collaboration between RPh, MDs & providers
 - RPh prescribing divisive, trend toward collaboration on a universal scale (i.e. outside of health systems)
 - Restructuring workload & or increasing support systems of staff – mental health, abuse/diversion & education, coping mechanisms, stress reductions, etc.

- Roles for RPh & Techs cohesive and able to handle increased/expanded areas of service (standards of practice)
 - Technology rules addressed in such a way “must-haves” are clear, concise and allow for innovation (in distribution, EPA)
 - Clearly communicated strategic plan and timeline is integrated with other priorities of the agency and tracked/discussed each meeting.
-

- Pharmacists to be focused strictly on clinical functions & continuing patient care utilizing greatly expanded responsibilities of technicians to perform all operational duties.
 - Also expect a much wider implementation of technology, for example unique barcodes via mobile devices used to dispense meds at an ATM like device.
 - Expect pharmacy technicians to evolve into roles much as medical assistants today, performing various operational & managerial duties to free the pharmacists for prescribing consultations & clinical functions.
-

- I see the pharmacy as a place where the technicians are used as a bigger role in getting info from patient before the RPh steps in. Example is making sure to have the records of anything they need, all the scripts done after the DUR, so that they can experience, research, and do clinical stuff.

Accepted by:



Marcus Watt, RPh
Executive Director

February 2018

News



Oregon State Board of Pharmacy

Published to promote compliance of pharmacy and drug law

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No. 591 Board Member News

Oregon State Board of Pharmacy Public Member Christine Chute has concluded her service to the Board. In 2010, Christine was appointed to the Board by Governor Ted Kulongoski; she was reappointed in 2014 by Governor John Kitzhaber. She brought years of service to the Board as a former Board counsel between 2002-2006. Among Christine's many noteworthy accomplishments was her work with the scheduling of pseudoephedrine in Oregon. During her time as Board counsel, Christine assisted with the development of the scheduling of pseudoephedrine, and she largely authored the temporary and permanent rules associated with that event. Her leadership with rule development and the ensuing fiscal impact statements in 2005 helped to curb the methamphetamine epidemic in our state. Christine was dedicated to representing the Board on the Governor's Advisory Committee for Driving Under the Influence of Intoxicants, and she served as a panel member at various association meetings representing the perspective of the Board from the public member's point of view. Thank you, Christine, for your many years of service to the citizens of the state of Oregon by serving as both Board counsel and public Board member.

No. 592 Medication Reconciliation and the Role of the Oregon Pharmacy Technician

The term "medication reconciliation" is defined by the Joint Commission as "the process of comparing the medications a patient is taking (and should be taking) with newly ordered medications" in order to resolve discrepancies or potential problems. This definition emphasizes the importance of reconciliation, which is the act of comparing medication lists and noting inconsistencies versus the act of merely collecting a medication history. It is nationally recommended that pharmacists be involved in functions including, but not limited to, developing policies and processes, implementing and continuously improving those processes, and training and ensuring the continuing competency of those involved in medication reconciliation. When pharmacy is involved, the Board expects a

pharmacist to establish roles and responsibilities of health care providers in medication reconciliation processes, including pharmacy technicians, interns, and other medical support personnel.

When implementing a pharmacy technician medication history program, it is essential to be in compliance with Board laws and rules regarding what pharmacy technicians can and cannot do. Pharmacy technicians are not allowed to make clinical decisions, of any kind, during the medication reconciliation process or otherwise. They may write down the information gathered from the patient, gather information from a secondary source if needed, and present it to the pharmacist for verification. For example, a patient reports taking furosemide as needed based on his or her weight. However, the pharmacy technician finds that the patient's prescription has a direction for furosemide 20 mg daily. In this scenario, the pharmacy technician may not make a judgment call to include only the direction from the prescription and omit the information about how the patient is taking it. In a different scenario, a patient tells the pharmacy technician that he or she takes a medication for blood pressure at home and is unable to recall the name. The pharmacy technician then goes down the Prior to Admit medication list and picks out a drug that he or she believes is the blood pressure medication. By doing that, the pharmacy technician uses clinical judgment to identify which drug has an indication for high blood pressure, which is not within the scope of pharmacy technician duties and is not permitted by the Board.

Pharmacy technicians who perform medication history gathering must have proper training on how to collect medication history and interview a patient. Pharmacy technicians may compare the list they gather from medication history to what is currently ordered for the patient in the hospital and make note of differences when updating the patient's medical record. It is a pharmacist's responsibility to verify and review any clinical scenarios or discrepancies in the patient medical record **prior** to making prescribing decisions.

continued on page 4

National Pharmacy Compliance News

February 2018



NABPF
National Association of Boards
of Pharmacy Foundation

The applicability of articles in the *National Pharmacy Compliance News* to a particular state or jurisdiction can only be ascertained by examining the law of such state or jurisdiction.

FDA Draft Guidance Addresses Delayed Enforcement of DSCSA Requirements for Product Identifiers

Food and Drug Administration (FDA) issued a draft guidance for industry that informs manufacturers and other supply chain stakeholders that although manufacturers are to begin including a product identifier on prescription drug packages and cases on November 27, 2017, FDA is delaying enforcement of those requirements until November 2018 to provide manufacturers additional time and avoid supply disruptions. The compliance policy outlined in the June 2017 draft guidance, *Product Identifier Requirements Under the Drug Supply Chain Security Act – Compliance Policy*, applies solely to products without a product identifier that are introduced into commerce by a manufacturer between November 27, 2017, and November 26, 2018. While manufacturers work to meet product identifier requirements, they must comply with other Drug Supply Chain Security Act (DSCSA) requirements. The draft guidance can be accessed from FDA's website at www.fda.gov/Drugs/DrugSafety/DrugIntegrityandSupplyChainSecurity/DrugSupplyChainSecurityAct/ucm565358.htm.

Amount of Prescribed Opioids Remains High, Reports CDC

The amount of opioids prescribed remains approximately three times as high as in 1999, despite reductions in each year after 2010 through 2015. Centers for Disease Control and Prevention (CDC) researchers analyzed retail prescription data to assess opioid prescribing in the United States from 2006 to 2015 and county-level prescribing patterns in 2010 and 2015. According to a CDC report, results of the study showed higher amounts of opioids were prescribed in counties that had a greater percentage of non-Hispanic white residents, a higher prevalence of diabetes and arthritis, micropolitan status (ie, town/city; nonmetro), and higher unemployment and Medicaid enrollment rates. The researchers conclude that health care providers should carefully weigh the benefits and risks when prescribing opioids outside of end-of-life care, follow evidence-based guidelines (eg, CDC's *Guideline for Prescribing Opioids for Chronic Pain*), and consider non-opioid therapy for chronic pain treatment.

Additionally, the researchers conclude that state and local jurisdictions can use these findings along with

prescription drug monitoring program (PDMP) data to identify prescribing patterns that place patients at risk for opioid use disorder and overdose and to target interventions with prescribers based on opioid prescribing guidelines. The July 7, 2017 *Morbidity and Mortality Weekly Report*, "Vital Signs: Changes in Opioid Prescribing in the United States, 2006–2015," can be accessed on the CDC website at www.cdc.gov/mmwr/index.html in the Weekly Report section.

AMA Opioid Task Force Encourages Co-Prescribing Naloxone to At-Risk Patients

The American Medical Association (AMA) Opioid Task Force encourages physicians to consider co-prescribing naloxone when it is clinically appropriate to do so. The AMA Opioid Task Force offers several questions for determining whether to co-prescribe naloxone to a patient or a patient's family member or close friend, which may be found in the August 2017 document, "AMA Opioid Task Force naloxone recommendations," available on the AMA opioid microsite at <https://www.end-opioid-epidemic.org>.

The Naloxone section of the AMA opioid microsite also offers physicians multiple resources on co-prescribing naloxone in their practice and community. To help end the opioid epidemic, the AMA Opioid Task Force made several recommendations for physicians, including registering and using state PDMPs, training and education on evidence-based treatment, and promoting safe storage and disposal of opioids and medications.

Opioid Addiction Medications Should Not Be Withheld From Patients Taking Benzodiazepines or CNS Depressants

Opioid addiction medications – buprenorphine and methadone – should not be withheld from patients taking benzodiazepines or other drugs that depress the central nervous system (CNS), advises FDA. The combined use of these drugs increases the risk of serious side effects; however, the harm caused by untreated opioid addiction usually outweighs these risks. Careful medication management by health care providers can reduce these risks, notes a safety alert. FDA is requiring this information to be added to the buprenorphine and methadone drug labels along with detailed recommendations for

minimizing the use of medication-assisted treatment drugs and benzodiazepines together.

Health care providers should take several actions and precautions and should develop a treatment plan when buprenorphine or methadone is used in combination with benzodiazepines or other CNS depressants. Additional information may be found in an FDA Drug Safety Communication announcement at www.fda.gov/Drugs/DrugSafety/ucm575307.htm.

New Study Shows Substantial Variation in the Availability of Pharmacies Across the Country

Despite the rising number of US pharmacies from 2007 to 2015, the availability of pharmacies varied significantly across local areas, indicates a new study. The study, *The availability of pharmacies in the United States: 2007–2015*, found that the number of community pharmacies increased 6.3% from 63,752 to 67,753 between 2007 and 2015. Although the number of pharmacies per capita remained at 2.11 per 10,000 individuals between 2007 and 2015, the researchers found substantial variation across counties. “Some counties have 13 pharmacies per capita, while others have none,” said Dima Qato, lead study author and assistant professor of pharmacy systems, outcomes and policy, in a University of Illinois at Chicago (UIC) news release.

In 2015, counties in the highest quintile had nearly three-fold more pharmacies than those in the lowest quintile. Counties in the lowest quintile are located in the Pacific West, Southwest, and Great Lakes regions, while counties with the highest tend to be located in the Northeast, Southeast, Northern Appalachia, and Plains states. The researchers conclude that future programs and policies should address the availability of pharmacies and ensure that pharmacy characteristics, including accommodations such as multilingual staffing and home delivery, align with local population needs.

To view the study, visit <https://doi.org/10.1371/journal.pone.0183172>. The UIC news release is available at <https://today.uic.edu/access-to-pharmacies-limited-to-some-patients>.

Consent Decree Entered Against Outsourcing Facility Isomeric Pharmacy Solutions

Under a consent decree of permanent injunction entered in August 2017, Isomeric Pharmacy Solutions of Salt Lake City, UT, its owners, and chief operating officer are prohibited from manufacturing, processing, packing, holding, or distributing drugs until they

comply with the Federal Food, Drug, and Cosmetic Act (FD&C Act) and its regulations, in addition to other requirements. Isomeric manufactured and distributed purportedly sterile drug products, including injectable and ophthalmic drugs, that were adulterated because the drugs were made under insanitary conditions and in violation of current good manufacturing practice requirements under the FD&C Act, according to the complaint for permanent injunction. The complaint also alleges that Isomeric manufactured and distributed unapproved drugs and drugs that were misbranded because their labeling did not bear adequate directions for use. Isomeric initially registered as an outsourcing facility in July 2015 and reregistered in December 2015 and January 2017. Additional information is available in an FDA news release at www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm570130.htm.

FDA Issues Warning on Alcohol Pads or Benzalkonium Chloride Antiseptic Towelettes Made by Foshan

In September 2017, FDA alerted health care providers and patients to not use alcohol pads or benzalkonium chloride antiseptic towelettes made by Foshan Flying Medical Products Co, Ltd, located in China, due to lack of sterility assurance and other quality issues. These products are distributed by Total Resources International, of Walnut, CA, and Simple Diagnostics, Inc, of Williston Park, NY. The use of these alcohol pads and antiseptic towelettes could cause infections.

FDA placed all drug products made by Foshan on import alert on May 23, 2017, to stop these products from entering the US. However, FDA is concerned these products might still be in distribution in the US. FDA also sent Foshan a warning letter on August 1, 2017, for violations of current good manufacturing practice regulations. FDA initially contacted Foshan regarding a recall on May 25, 2017, and had several follow-up meetings with the company. Foshan has not taken action to remove its alcohol pads or antiseptic towelettes from the market. The safety alert posted to FDA’s website may be found at www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm574576.htm.

Pharmacies and health care facilities that have alcohol pads and antiseptic towelettes labeled by Total Resources or Simple Diagnostics should immediately stop using them and discard the products. Adverse events or side effects related to the use of these products may be reported to FDA’s MedWatch Safety Information and Adverse Event Reporting Program at www.fda.gov/MedWatch/report.

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The following frequently asked questions are provided to address pharmacy involvement in the medication reconciliation process. The Board does not have jurisdictional oversight over what functions nurses and other non-pharmacy personnel may be permitted to perform.

Q. What is medication reconciliation?

A. Medication reconciliation (or “med rec”) is the process of creating the most accurate list possible of all medications a patient is taking – including drug name, dosage, frequency, and route – and comparing that list against the physician’s admission, transfer, and/or discharge orders, with the goal of providing correct medications to the patient at all transition points within the hospital.

Q. Are pharmacy technicians allowed to perform medication reconciliation without a pharmacist oversight and review?

A. No. However, a pharmacy technician who has received training appropriate for the medication reconciliation process may assist in the data collection process in order to obtain the best possible medication history for the patient. Please note that while pharmacy technicians are allowed to assist in the medication reconciliation process, they **may not** do so independently. A supervising pharmacist must verify a medication history summary collected by a pharmacy technician and be available to assist the technician if requested.

A person licensed to perform the duties of a pharmacy technician may perform the duties of a pharmacy technician only under the supervision, direction, and control of a licensed pharmacist.

Q. Is a pharmacist required to verify the medication history obtained by a pharmacy technician?

A. Yes. A pharmacist is required to verify all medication histories obtained by pharmacy technicians in the medication reconciliation process. This task may not be delegated to non-pharmacist staff.

Q. Are pharmacy technicians allowed to make clinical decisions during the medication reconciliation process?

A. No. Pharmacy technicians are not allowed to make clinical decisions, of any kind, during the medication reconciliation process or otherwise. Making clinical decisions is not in the scope of the pharmacy technician’s duties. If a technician makes a clinical decision, the technician, pharmacist, and outlet may be subject to discipline for engaging in the practice of pharmacy without a license.

Q. Is the verbal communication of a patient’s medication history from pharmacy technician to pharmacy technician allowed? This could be a request for a patient’s medical history printout from a health care provider outside of a hospital or health system,

such as a patient’s local pharmacy or primary care provider.

A. Yes. However, technician to technician communication would require verifiable documentation (ie, faxed medication history) for the pharmacist who is verifying the medication history to be able to validate the information. Clinical decisions may not be made during communications such as these.

Q. Is the communication of a patient’s medical history between pharmacy technicians using disease states or medication indications allowed?

A. No. Pharmacy technicians are **not allowed** to communicate a patient’s medication history to another pharmacy technician by discussing disease states or indications.

No. 593 Oregon Patient Safety Commission Seeking New Board Member Nominations

The Oregon Patient Safety Commission (OPSC) welcomes nominations to fill the pharmacist seat on its Board of Directors, effective October 9, 2018. Qualified individuals – pharmacists licensed under Oregon Revised Statutes Chapter 689 – may self-nominate or receive nominations from others.

Members of the OPSC Board of Directors meet in the Portland, OR vicinity every two months for two to three hours to advise OPSC staff on patient safety policy and programs. OPSC Board members volunteer their time and are appointed by the Oregon governor to serve a four-year term, with the option to reappoint for a second term. OPSC’s board consists of 17 members, reflecting the diversity of facilities, providers, insurers, purchasers, and consumers who are involved in patient safety.

OPSC is a semi-independent state agency charged by the Oregon Legislature with reducing the risk of serious adverse events occurring in Oregon’s health care system and encouraging a culture of patient safety. More information about OPSC is available at oregonpatientsafety.org.

Before applying, nominees or those wishing to nominate an individual are encouraged to contact Tom Stuebner, OPSC executive director, at tom.stuebner@oregonpatientsafety.org, or Kristina Rice-Whitlow, executive appointments manager, Office of the Governor, at kristina.rice-whitlow@oregon.gov. More information about how to apply for a governor-appointed board or commission is outlined on the [How to Apply web page](#) on the state of Oregon website.

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The *Oregon State Board of Pharmacy News* is published by the Oregon State Board of Pharmacy and the National Association of Boards of Pharmacy Foundation® (NABPF®) to promote compliance of pharmacy and drug law. The opinions and views expressed in this publication do not necessarily reflect the official views, opinions, or policies of NABPF or the Board unless expressly so stated.

Marc Watt, RPh - State News Editor

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Amy Suhajda - Communications Manager

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**Summary Cross Reference Listing and Packages
2019-21 Biennium**

**Agency Number: 85500
BAM Analyst: McGehee, Breanna
Budget Coordinator: Moreland, Katherine - (503)373-0741**

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	040	0	Mandated Caseload	Essential Packages
001-00-00-00000	Board of Pharmacy	101	0	License Fee Increases	Policy Packages
001-00-00-00000	Board of Pharmacy	102	0	DOJ Expenditure Increase	Policy Packages
001-00-00-00000	Board of Pharmacy	103	0	Database Cloud Hosting	Policy Packages
001-00-00-00000	Board of Pharmacy	104	0	Compliance & Licensing Staffing	Policy Packages
001-00-00-00000	Board of Pharmacy	105	0	Formulary Per Diem & Expense Funding	Policy Packages
001-00-00-00000	Board of Pharmacy	106	0	OBOP/Pacific Fellowship Continuation	Policy Packages
999-00-00-00000	Suspense	010	0	Non-PICS Psnl Svc / Vacancy Factor	Essential Packages
999-00-00-00000	Suspense	031	0	Standard Inflation	Essential Packages
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	040	0	Mandated Caseload	Essential Packages

Pharmacy, Board of

**Policy Package List by Priority
2019-21 Biennium**

Agency Number: 85500

BAM Analyst: McGehee, Breanna

Budget Coordinator: Moreland, Katherine - (503)373-0741

<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	101	License Fee Increases	001-00-00-00000	Board of Pharmacy
	102	DOJ Expenditure Increase	001-00-00-00000	Board of Pharmacy
	103	Database Cloud Hosting	001-00-00-00000	Board of Pharmacy
	104	Compliance & Licensing Staffing	001-00-00-00000	Board of Pharmacy
	105	Formulary Per Diem & Expense Funding	001-00-00-00000	Board of Pharmacy
	106	OBOP/Pacific Fellowship Continuation	001-00-00-00000	Board of Pharmacy

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Agency Number: 85500

Agency Worksheet - Revenues & Expenditures
 2019-21 Biennium
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Version: V - 01 - Agency Request Budget
 Cross Reference Number: 85500-000-00-00-00000

DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
BEGINNING BALANCE						
0025 Beginning Balance						
3400 Other Funds Ltd	5,094,726	3,970,352	-	3,970,352	2,848,229	2,848,229
0030 Beginning Balance Adjustment						
3400 Other Funds Ltd	-	302,500	-	302,500	-	-
TOTAL BEGINNING BALANCE						
3400 Other Funds Ltd	5,094,726	4,272,852	-	4,272,852	2,848,229	2,848,229
TOTAL BEGINNING BALANCE	\$5,094,726	\$4,272,852	-	\$4,272,852	\$2,848,229	\$2,848,229
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	5,334,681	4,431,667	-	4,431,667	4,734,450	4,734,450
0210 Non-business Lic. and Fees						
3400 Other Funds Ltd	303,918	505,552	-	505,552	139,296	139,296
TOTAL LICENSES AND FEES						
3400 Other Funds Ltd	5,638,599	4,937,219	-	4,937,219	4,873,746	4,873,746
TOTAL LICENSES AND FEES	\$5,638,599	\$4,937,219	-	\$4,937,219	\$4,873,746	\$4,873,746
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	530,141	420,000	-	420,000	405,000	405,000

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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
INTEREST EARNINGS						
0605 Interest Income						
3400 Other Funds Ltd	88,652	48,000	-	48,000	45,000	45,000
OTHER						
0975 Other Revenues						
3400 Other Funds Ltd	64,935	39,700	-	39,700	57,090	57,090
REVENUES						
3400 Other Funds Ltd	6,322,327	5,444,919	-	5,444,919	5,380,836	5,380,836
TRANSFERS OUT						
2443 Tsfr To Oregon Health Authority						
3400 Other Funds Ltd	(369,118)	(409,357)	-	(409,357)	(416,146)	(416,146)
AVAILABLE REVENUES						
3400 Other Funds Ltd	11,047,935	9,308,414	-	9,308,414	7,812,919	7,812,919
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	2,791,489	3,191,268	104,724	3,295,992	3,370,596	3,370,596
3160 Temporary Appointments						
3400 Other Funds Ltd	-	25,222	-	25,222	25,222	26,180

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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
3170 Overtime Payments						
3400 Other Funds Ltd	3,253	-	-	-	-	-
3190 All Other Differential						
3400 Other Funds Ltd	187,898	183,457	-	183,457	183,457	190,428
TOTAL SALARIES & WAGES						
3400 Other Funds Ltd	2,982,640	3,399,947	104,724	3,504,671	3,579,275	3,587,204
TOTAL SALARIES & WAGES	\$2,982,640	\$3,399,947	\$104,724	\$3,504,671	\$3,579,275	\$3,587,204
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	883	1,083	-	1,083	1,159	1,159
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	382,167	504,012	3,269	507,281	597,475	598,658
3221 Pension Obligation Bond						
3400 Other Funds Ltd	170,598	195,224	(3,502)	191,722	191,722	200,306
3230 Social Security Taxes						
3400 Other Funds Ltd	217,533	256,020	-	256,020	273,515	274,122
3240 Unemployment Assessments						
3400 Other Funds Ltd	3,298	-	-	-	-	-
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	1,144	1,380	-	1,380	1,160	1,160

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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
3260 Mass Transit Tax						
3400 Other Funds Ltd	17,830	20,334	-	20,334	20,334	21,523
3270 Flexible Benefits						
3400 Other Funds Ltd	552,965	666,720	24,720	691,440	703,680	703,680
TOTAL OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	1,346,418	1,644,773	24,487	1,669,260	1,789,045	1,800,608
TOTAL OTHER PAYROLL EXPENSES	\$1,346,418	\$1,644,773	\$24,487	\$1,669,260	\$1,789,045	\$1,800,608
P.S. BUDGET ADJUSTMENTS						
3455 Vacancy Savings						
3400 Other Funds Ltd	-	(169,448)	-	(169,448)	(169,448)	-
TOTAL PERSONAL SERVICES						
3400 Other Funds Ltd	4,329,058	4,875,272	129,211	5,004,483	5,198,872	5,387,812
TOTAL PERSONAL SERVICES	\$4,329,058	\$4,875,272	\$129,211	\$5,004,483	\$5,198,872	\$5,387,812
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	108,023	102,270	-	102,270	102,270	106,156
4125 Out of State Travel						
3400 Other Funds Ltd	11,390	15,724	-	15,724	15,724	16,322
4150 Employee Training						
3400 Other Funds Ltd	34,528	52,335	-	52,335	52,335	18,445

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<i>DESCRIPTION</i>	<i>2015-17 Actuals</i>	<i>2017-19 Leg Adopted Budget</i>	<i>2017-19 Emergency Boards</i>	<i>2017-19 Leg Approved Budget</i>	<i>2019-21 Base Budget</i>	<i>2019-21 Current Service Level</i>
4175 Office Expenses						
3400 Other Funds Ltd	108,382	123,883	-	123,883	123,883	128,591
4200 Telecommunications						
3400 Other Funds Ltd	43,300	43,879	-	43,879	43,879	45,546
4225 State Gov. Service Charges						
3400 Other Funds Ltd	78,511	119,969	-	119,969	119,969	175,156
4250 Data Processing						
3400 Other Funds Ltd	55,084	73,694	-	73,694	73,694	76,494
4275 Publicity and Publications						
3400 Other Funds Ltd	27,223	37,712	-	37,712	37,712	39,145
4300 Professional Services						
3400 Other Funds Ltd	155,376	402,408	-	402,408	402,408	390,654
4315 IT Professional Services						
3400 Other Funds Ltd	63,900	353,340	-	353,340	353,340	84,713
4325 Attorney General						
3400 Other Funds Ltd	306,084	326,595	-	326,595	326,595	392,371
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	13	207	-	207	207	215
4400 Dues and Subscriptions						
3400 Other Funds Ltd	5,806	4,583	-	4,583	4,583	4,757

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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	192,333	219,519	-	219,519	219,519	227,861
4475 Facilities Maintenance						
3400 Other Funds Ltd	-	51	-	51	51	53
4525 Medical Services and Supplies						
3400 Other Funds Ltd	1,343	1,110	-	1,110	1,110	1,152
4575 Agency Program Related S and S						
3400 Other Funds Ltd	209,303	229,434	-	229,434	229,434	238,152
4650 Other Services and Supplies						
3400 Other Funds Ltd	258,313	278,652	-	278,652	278,652	289,241
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	14,830	10,499	-	10,499	10,499	10,698
4715 IT Expendable Property						
3400 Other Funds Ltd	28,287	43,976	-	43,976	43,976	43,363
TOTAL SERVICES & SUPPLIES						
3400 Other Funds Ltd	1,702,029	2,439,840	-	2,439,840	2,439,840	2,289,285
TOTAL SERVICES & SUPPLIES	\$1,702,029	\$2,439,840	-	\$2,439,840	\$2,439,840	\$2,289,285
CAPITAL OUTLAY						
5600 Data Processing Hardware						
3400 Other Funds Ltd	-	8,296	-	8,296	8,296	8,611

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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
SPECIAL PAYMENTS						
6085 Other Special Payments						
3400 Other Funds Ltd	-	11,991	-	11,991	11,991	12,447
6443 Spc Pmt to Oregon Health Authority						
3400 Other Funds Ltd	221,920	-	-	-	-	-
TOTAL SPECIAL PAYMENTS						
3400 Other Funds Ltd	221,920	11,991	-	11,991	11,991	12,447
TOTAL SPECIAL PAYMENTS	\$221,920	\$11,991	-	\$11,991	\$11,991	\$12,447
EXPENDITURES						
3400 Other Funds Ltd	6,253,007	7,335,399	129,211	7,464,610	7,658,999	7,698,155
ENDING BALANCE						
3400 Other Funds Ltd	4,794,928	1,973,015	(129,211)	1,843,804	153,920	114,764
TOTAL ENDING BALANCE	\$4,794,928	\$1,973,015	(\$129,211)	\$1,843,804	\$153,920	\$114,764
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	20	20	-	20	20	20
AUTHORIZED FTE POSITIONS						
8250 Class/Unclass FTE Positions	20.00	20.00	-	20.00	20.00	20.00

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Version: V - 01 - Agency Request Budget
 Cross Reference Number: 85500-001-00-00-00000

DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
BEGINNING BALANCE						
0025 Beginning Balance						
3400 Other Funds Ltd	5,094,726	3,970,352	-	3,970,352	2,848,229	2,848,229
0030 Beginning Balance Adjustment						
3400 Other Funds Ltd	-	302,500	-	302,500	-	-
TOTAL BEGINNING BALANCE						
3400 Other Funds Ltd	5,094,726	4,272,852	-	4,272,852	2,848,229	2,848,229
TOTAL BEGINNING BALANCE	\$5,094,726	\$4,272,852	-	\$4,272,852	\$2,848,229	\$2,848,229
REVENUE CATEGORIES						
LICENSES AND FEES						
0205 Business Lic and Fees						
3400 Other Funds Ltd	5,334,681	4,431,667	-	4,431,667	4,734,450	4,734,450
0210 Non-business Lic. and Fees						
3400 Other Funds Ltd	303,918	505,552	-	505,552	139,296	139,296
TOTAL LICENSES AND FEES						
3400 Other Funds Ltd	5,638,599	4,937,219	-	4,937,219	4,873,746	4,873,746
TOTAL LICENSES AND FEES	\$5,638,599	\$4,937,219	-	\$4,937,219	\$4,873,746	\$4,873,746
FINES, RENTS AND ROYALTIES						
0505 Fines and Forfeitures						
3400 Other Funds Ltd	530,141	420,000	-	420,000	405,000	405,000

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Pharmacy, Board of

Agency Number: 85500

Agency Worksheet - Revenues & Expenditures
 2019-21 Biennium
 Board of Pharmacy

Version: V - 01 - Agency Request Budget
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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
INTEREST EARNINGS						
0605 Interest Income						
3400 Other Funds Ltd	88,652	48,000	-	48,000	45,000	45,000
OTHER						
0975 Other Revenues						
3400 Other Funds Ltd	64,935	39,700	-	39,700	57,090	57,090
REVENUES						
3400 Other Funds Ltd	6,322,327	5,444,919	-	5,444,919	5,380,836	5,380,836
TRANSFERS OUT						
2443 Tsfr To Oregon Health Authority						
3400 Other Funds Ltd	(369,118)	(409,357)	-	(409,357)	(416,146)	(416,146)
AVAILABLE REVENUES						
3400 Other Funds Ltd	11,047,935	9,308,414	-	9,308,414	7,812,919	7,812,919
EXPENDITURES						
PERSONAL SERVICES						
SALARIES & WAGES						
3110 Class/Unclass Sal. and Per Diem						
3400 Other Funds Ltd	2,791,489	3,191,268	104,724	3,295,992	3,370,596	3,370,596
3160 Temporary Appointments						
3400 Other Funds Ltd	-	25,222	-	25,222	25,222	26,180

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Pharmacy, Board of

Agency Number: 85500

**Agency Worksheet - Revenues & Expenditures
2019-21 Biennium
Board of Pharmacy**

**Version: V - 01 - Agency Request Budget
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<i>DESCRIPTION</i>	<i>2015-17 Actuals</i>	<i>2017-19 Leg Adopted Budget</i>	<i>2017-19 Emergency Boards</i>	<i>2017-19 Leg Approved Budget</i>	<i>2019-21 Base Budget</i>	<i>2019-21 Current Service Level</i>
3170 Overtime Payments						
3400 Other Funds Ltd	3,253	-	-	-	-	-
3190 All Other Differential						
3400 Other Funds Ltd	187,898	183,457	-	183,457	183,457	190,428
TOTAL SALARIES & WAGES						
3400 Other Funds Ltd	2,982,640	3,399,947	104,724	3,504,671	3,579,275	3,587,204
TOTAL SALARIES & WAGES	\$2,982,640	\$3,399,947	\$104,724	\$3,504,671	\$3,579,275	\$3,587,204
OTHER PAYROLL EXPENSES						
3210 Empl. Rel. Bd. Assessments						
3400 Other Funds Ltd	883	1,083	-	1,083	1,159	1,159
3220 Public Employees' Retire Cont						
3400 Other Funds Ltd	382,167	504,012	3,269	507,281	597,475	598,658
3221 Pension Obligation Bond						
3400 Other Funds Ltd	170,598	195,224	(3,502)	191,722	191,722	200,306
3230 Social Security Taxes						
3400 Other Funds Ltd	217,533	256,020	-	256,020	273,515	274,122
3240 Unemployment Assessments						
3400 Other Funds Ltd	3,298	-	-	-	-	-
3250 Worker's Comp. Assess. (WCD)						
3400 Other Funds Ltd	1,144	1,380	-	1,380	1,160	1,160

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Pharmacy, Board of

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Agency Worksheet - Revenues & Expenditures
 2019-21 Biennium
 Board of Pharmacy

Version: V - 01 - Agency Request Budget
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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
3260 Mass Transit Tax						
3400 Other Funds Ltd	17,830	20,334	-	20,334	20,334	21,523
3270 Flexible Benefits						
3400 Other Funds Ltd	552,965	666,720	24,720	691,440	703,680	703,680
TOTAL OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	1,346,418	1,644,773	24,487	1,669,260	1,789,045	1,800,608
TOTAL OTHER PAYROLL EXPENSES	\$1,346,418	\$1,644,773	\$24,487	\$1,669,260	\$1,789,045	\$1,800,608
P.S. BUDGET ADJUSTMENTS						
3455 Vacancy Savings						
3400 Other Funds Ltd	-	(169,448)	-	(169,448)	(169,448)	-
TOTAL PERSONAL SERVICES						
3400 Other Funds Ltd	4,329,058	4,875,272	129,211	5,004,483	5,198,872	5,387,812
TOTAL PERSONAL SERVICES	\$4,329,058	\$4,875,272	\$129,211	\$5,004,483	\$5,198,872	\$5,387,812
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	108,023	102,270	-	102,270	102,270	106,156
4125 Out of State Travel						
3400 Other Funds Ltd	11,390	15,724	-	15,724	15,724	16,322
4150 Employee Training						
3400 Other Funds Ltd	34,528	52,335	-	52,335	52,335	18,445

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Pharmacy, Board of

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**Agency Worksheet - Revenues & Expenditures
2019-21 Biennium
Board of Pharmacy**

**Version: V - 01 - Agency Request Budget
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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
4175 Office Expenses						
3400 Other Funds Ltd	108,382	123,883	-	123,883	123,883	128,591
4200 Telecommunications						
3400 Other Funds Ltd	43,300	43,879	-	43,879	43,879	45,546
4225 State Gov. Service Charges						
3400 Other Funds Ltd	78,511	119,969	-	119,969	119,969	175,156
4250 Data Processing						
3400 Other Funds Ltd	55,084	73,694	-	73,694	73,694	76,494
4275 Publicity and Publications						
3400 Other Funds Ltd	27,223	37,712	-	37,712	37,712	39,145
4300 Professional Services						
3400 Other Funds Ltd	155,376	402,408	-	402,408	402,408	390,654
4315 IT Professional Services						
3400 Other Funds Ltd	63,900	353,340	-	353,340	353,340	84,713
4325 Attorney General						
3400 Other Funds Ltd	306,084	326,595	-	326,595	326,595	392,371
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	13	207	-	207	207	215
4400 Dues and Subscriptions						
3400 Other Funds Ltd	5,806	4,583	-	4,583	4,583	4,757

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Pharmacy, Board of

Agency Number: 85500

**Agency Worksheet - Revenues & Expenditures
2019-21 Biennium
Board of Pharmacy**

**Version: V - 01 - Agency Request Budget
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<i>DESCRIPTION</i>	<i>2015-17 Actuals</i>	<i>2017-19 Leg Adopted Budget</i>	<i>2017-19 Emergency Boards</i>	<i>2017-19 Leg Approved Budget</i>	<i>2019-21 Base Budget</i>	<i>2019-21 Current Service Level</i>
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	192,333	219,519	-	219,519	219,519	227,861
4475 Facilities Maintenance						
3400 Other Funds Ltd	-	51	-	51	51	53
4525 Medical Services and Supplies						
3400 Other Funds Ltd	1,343	1,110	-	1,110	1,110	1,152
4575 Agency Program Related S and S						
3400 Other Funds Ltd	209,303	229,434	-	229,434	229,434	238,152
4650 Other Services and Supplies						
3400 Other Funds Ltd	258,313	278,652	-	278,652	278,652	289,241
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	14,830	10,499	-	10,499	10,499	10,898
4715 IT Expendable Property						
3400 Other Funds Ltd	28,287	43,976	-	43,976	43,976	43,363
TOTAL SERVICES & SUPPLIES						
3400 Other Funds Ltd	1,702,029	2,439,840	-	2,439,840	2,439,840	2,289,285
TOTAL SERVICES & SUPPLIES	\$1,702,029	\$2,439,840	-	\$2,439,840	\$2,439,840	\$2,289,285
CAPITAL OUTLAY						
5600 Data Processing Hardware						
3400 Other Funds Ltd	-	8,296	-	8,296	8,296	8,611

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 Board of Pharmacy

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DESCRIPTION	2015-17 Actuals	2017-19 Leg Adopted Budget	2017-19 Emergency Boards	2017-19 Leg Approved Budget	2019-21 Base Budget	2019-21 Current Service Level
SPECIAL PAYMENTS						
6085 Other Special Payments						
3400 Other Funds Ltd	-	11,991	-	11,991	11,991	12,447
6443 Spc Pmt to Oregon Health Authority						
3400 Other Funds Ltd	221,920	-	-	-	-	-
TOTAL SPECIAL PAYMENTS						
3400 Other Funds Ltd	221,920	11,991	-	11,991	11,991	12,447
TOTAL SPECIAL PAYMENTS	\$221,920	\$11,991	-	\$11,991	\$11,991	\$12,447
EXPENDITURES						
3400 Other Funds Ltd	6,253,007	7,335,399	129,211	7,464,610	7,658,999	7,698,155
ENDING BALANCE						
3400 Other Funds Ltd	4,794,928	1,973,015	(129,211)	1,843,804	153,920	114,764
TOTAL ENDING BALANCE	\$4,794,928	\$1,973,015	(\$129,211)	\$1,843,804	\$153,920	\$114,764
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	20	20	-	20	20	20
AUTHORIZED FTE POSITIONS						
8250 Class/Unclass FTE Positions	20.00	20.00	-	20.00	20.00	20.00

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Detail Revenues & Expenditures - Requested Budget

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Pharmacy, Board Of

Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
BEGINNING BALANCE					
0025 Beginning Balance					
3400 Other Funds Ltd	2,848,229	-	2,848,229	-	2,848,229
REVENUE CATEGORIES					
LICENSES AND FEES					
0205 Business Lic and Fees					
3400 Other Funds Ltd	4,734,450	-	4,734,450	2,411,800	7,146,250
0210 Non-business Lic. and Fees					
3400 Other Funds Ltd	139,296	-	139,296	-	139,296
TOTAL LICENSES AND FEES					
3400 Other Funds Ltd	4,873,746	-	4,873,746	2,411,800	7,285,546
FINES, RENTS AND ROYALTIES					
0505 Fines and Forfeitures					
3400 Other Funds Ltd	405,000	-	405,000	-	405,000
INTEREST EARNINGS					
0605 Interest Income					
3400 Other Funds Ltd	45,000	-	45,000	-	45,000
OTHER					
0975 Other Revenues					
3400 Other Funds Ltd	57,090	-	57,090	-	57,090
TOTAL REVENUES					
3400 Other Funds Ltd	5,380,836	-	5,380,836	2,411,800	7,792,636
TRANSFERS OUT					

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Pharmacy, Board of

Agency Number: 85500

**Detail Revenues & Expenditures - Requested Budget
2019-21 Biennium
Pharmacy, Board Of**

**Version: V - 01 - Agency Request Budget
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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
2443 Tsfr To Oregon Health Authority					
3400 Other Funds Ltd	(416,146)	-	(416,146)	-	(416,146)
AVAILABLE REVENUES					
3400 Other Funds Ltd	7,812,919	-	7,812,919	2,411,800	10,224,719
EXPENDITURES					
PERSONAL SERVICES					
SALARIES & WAGES					
3110 Class/Unclass Sal. and Per Diem					
3400 Other Funds Ltd	3,370,596	-	3,370,596	293,072	3,663,668
3160 Temporary Appointments					
3400 Other Funds Ltd	25,222	958	26,180	-	26,180
3190 All Other Differential					
3400 Other Funds Ltd	183,457	6,971	190,428	-	190,428
TOTAL SALARIES & WAGES					
3400 Other Funds Ltd	3,579,275	7,929	3,587,204	293,072	3,880,276
OTHER PAYROLL EXPENSES					
3210 Empl. Rel. Bd. Assessments					
3400 Other Funds Ltd	1,159	-	1,159	122	1,281
3220 Public Employees' Retire Cont					
3400 Other Funds Ltd	597,475	1,183	598,658	48,784	647,442
3221 Pension Obligation Bond					
3400 Other Funds Ltd	191,722	8,584	200,306	-	200,306
3230 Social Security Taxes					

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Pharmacy, Board of

Agency Number: 85500

Detail Revenues & Expenditures - Requested Budget

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Pharmacy, Board Of

Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
3400 Other Funds Ltd	273,515	607	274,122	22,418	296,540
3250 Worker's Comp. Assess. (WCD)					
3400 Other Funds Ltd	1,160	-	1,160	116	1,276
3260 Mass Transit Tax					
3400 Other Funds Ltd	20,334	1,189	21,523	1,725	23,248
3270 Flexible Benefits					
3400 Other Funds Ltd	703,680	-	703,680	70,368	774,048
TOTAL OTHER PAYROLL EXPENSES					
3400 Other Funds Ltd	1,789,045	11,563	1,800,608	143,533	1,944,141
P.S. BUDGET ADJUSTMENTS					
3455 Vacancy Savings					
3400 Other Funds Ltd	(169,448)	169,448	-	-	-
TOTAL PERSONAL SERVICES					
3400 Other Funds Ltd	5,198,872	188,940	5,387,812	436,605	5,824,417
SERVICES & SUPPLIES					
4100 Instate Travel					
3400 Other Funds Ltd	102,270	3,886	106,156	8,590	114,746
4125 Out of State Travel					
3400 Other Funds Ltd	15,724	598	16,322	-	16,322
4150 Employee Training					
3400 Other Funds Ltd	52,335	(33,890)	18,445	2,955	21,400
4175 Office Expenses					
3400 Other Funds Ltd	123,883	4,708	128,591	3,723	132,314

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Agency Number: 85500

**Detail Revenues & Expenditures - Requested Budget
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Pharmacy, Board Of**

**Version: V - 01 - Agency Request Budget
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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
4200 Telecommunications					
3400 Other Funds Ltd	43,879	1,667	45,546	3,284	48,830
4225 State Gov. Service Charges					
3400 Other Funds Ltd	119,969	55,187	175,156	-	175,156
4250 Data Processing					
3400 Other Funds Ltd	73,694	2,800	76,494	877	77,371
4275 Publicity and Publications					
3400 Other Funds Ltd	37,712	1,433	39,145	438	39,583
4300 Professional Services					
3400 Other Funds Ltd	402,408	(11,754)	390,654	3,740	394,394
4315 IT Professional Services					
3400 Other Funds Ltd	353,340	(268,627)	84,713	279,021	363,734
4325 Attorney General					
3400 Other Funds Ltd	326,595	65,776	392,371	174,862	567,233
4375 Employee Recruitment and Develop					
3400 Other Funds Ltd	207	8	215	438	653
4400 Dues and Subscriptions					
3400 Other Funds Ltd	4,583	174	4,757	438	5,195
4425 Facilities Rental and Taxes					
3400 Other Funds Ltd	219,519	8,342	227,861	15,117	242,978
4475 Facilities Maintenance					
3400 Other Funds Ltd	51	2	53	-	53
4525 Medical Services and Supplies					

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Detail Revenues & Expenditures - Requested Budget
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 Pharmacy, Board Of

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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
3400 Other Funds Ltd	1,110	42	1,152	-	1,152
4575 Agency Program Related S and S					
3400 Other Funds Ltd	229,434	8,718	238,152	2,000	240,152
4650 Other Services and Supplies					
3400 Other Funds Ltd	278,652	10,589	289,241	7,337	296,578
4700 Expendable Prop 250 - 5000					
3400 Other Funds Ltd	10,499	399	10,898	2,628	13,526
4715 IT Expendable Property					
3400 Other Funds Ltd	43,976	(613)	43,363	-	43,363
TOTAL SERVICES & SUPPLIES					
3400 Other Funds Ltd	2,439,840	(150,555)	2,289,285	505,448	2,794,733
CAPITAL OUTLAY					
5600 Data Processing Hardware					
3400 Other Funds Ltd	8,296	315	8,611	-	8,611
SPECIAL PAYMENTS					
6085 Other Special Payments					
3400 Other Funds Ltd	11,991	456	12,447	-	12,447
TOTAL EXPENDITURES					
3400 Other Funds Ltd	7,658,999	39,156	7,698,155	942,053	8,640,208
ENDING BALANCE					
3400 Other Funds Ltd	153,920	(39,156)	114,764	1,469,747	1,584,511
AUTHORIZED POSITIONS					
8150 Class/Unclass Positions	20	-	20	2	22

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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
<p>AUTHORIZED FTE</p> <p>8250 Class/Unclass FTE Positions</p>	20.00	-	20.00	2.00	22.00

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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
BEGINNING BALANCE					
0025 Beginning Balance					
3400 Other Funds Ltd	2,848,229	-	2,848,229	-	2,848,229
REVENUE CATEGORIES					
LICENSES AND FEES					
0205 Business Lic and Fees					
3400 Other Funds Ltd	4,734,450	-	4,734,450	2,411,800	7,146,250
0210 Non-business Lic. and Fees					
3400 Other Funds Ltd	139,296	-	139,296	-	139,296
TOTAL LICENSES AND FEES					
3400 Other Funds Ltd	4,873,746	-	4,873,746	2,411,800	7,285,546
FINES, RENTS AND ROYALTIES					
0505 Fines and Forfeitures					
3400 Other Funds Ltd	405,000	-	405,000	-	405,000
INTEREST EARNINGS					
0605 Interest Income					
3400 Other Funds Ltd	45,000	-	45,000	-	45,000
OTHER					
0975 Other Revenues					
3400 Other Funds Ltd	57,090	-	57,090	-	57,090
TOTAL REVENUES					
3400 Other Funds Ltd	5,380,836	-	5,380,836	2,411,800	7,792,636

TRANSFERS OUT

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Detail Revenues & Expenditures - Requested Budget
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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
2443 Tsfr To Oregon Health Authority					
3400 Other Funds Ltd	(416,146)	-	(416,146)	-	(416,146)
AVAILABLE REVENUES					
3400 Other Funds Ltd	7,812,919	-	7,812,919	2,411,800	10,224,719
EXPENDITURES					
PERSONAL SERVICES					
SALARIES & WAGES					
3110 Class/Unclass Sal. and Per Diem					
3400 Other Funds Ltd	3,370,596	-	3,370,596	293,072	3,663,668
3160 Temporary Appointments					
3400 Other Funds Ltd	25,222	958	26,180	-	26,180
3190 All Other Differential					
3400 Other Funds Ltd	183,457	6,971	190,428	-	190,428
TOTAL SALARIES & WAGES					
3400 Other Funds Ltd	3,579,275	7,929	3,587,204	293,072	3,880,276
OTHER PAYROLL EXPENSES					
3210 Empl. Rel. Bd. Assessments					
3400 Other Funds Ltd	1,159	-	1,159	122	1,281
3220 Public Employees' Retire Cont					
3400 Other Funds Ltd	597,475	1,183	598,658	48,784	647,442
3221 Pension Obligation Bond					
3400 Other Funds Ltd	191,722	8,584	200,306	-	200,306
3230 Social Security Taxes					

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Board of Pharmacy**

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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
3400 Other Funds Ltd	273,515	607	274,122	22,418	296,540
3250 Worker's Comp. Assess. (WCD)					
3400 Other Funds Ltd	1,160	-	1,160	116	1,276
3260 Mass Transit Tax					
3400 Other Funds Ltd	20,334	1,189	21,523	1,725	23,248
3270 Flexible Benefits					
3400 Other Funds Ltd	703,680	-	703,680	70,368	774,048
TOTAL OTHER PAYROLL EXPENSES					
3400 Other Funds Ltd	1,789,045	11,563	1,800,608	143,533	1,944,141
P.S. BUDGET ADJUSTMENTS					
3455 Vacancy Savings					
3400 Other Funds Ltd	(169,448)	169,448	-	-	-
TOTAL PERSONAL SERVICES					
3400 Other Funds Ltd	5,198,872	188,940	5,387,812	436,605	5,824,417
SERVICES & SUPPLIES					
4100 Instate Travel					
3400 Other Funds Ltd	102,270	3,886	106,156	8,590	114,746
4125 Out of State Travel					
3400 Other Funds Ltd	15,724	598	16,322	-	16,322
4150 Employee Training					
3400 Other Funds Ltd	52,335	(33,890)	18,445	2,955	21,400
4175 Office Expenses					
3400 Other Funds Ltd	123,883	4,708	128,591	3,723	132,314

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Pharmacy, Board of

Agency Number: 85500

**Detail Revenues & Expenditures - Requested Budget
2019-21 Biennium
Board of Pharmacy**

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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
4200 Telecommunications					
3400 Other Funds Ltd	43,879	1,667	45,546	3,284	48,830
4225 State Gov. Service Charges					
3400 Other Funds Ltd	119,969	55,187	175,156	-	175,156
4250 Data Processing					
3400 Other Funds Ltd	73,694	2,800	76,494	877	77,371
4275 Publicity and Publications					
3400 Other Funds Ltd	37,712	1,433	39,145	438	39,583
4300 Professional Services					
3400 Other Funds Ltd	402,408	(11,754)	390,654	3,740	394,394
4315 IT Professional Services					
3400 Other Funds Ltd	353,340	(268,627)	84,713	279,021	363,734
4325 Attorney General					
3400 Other Funds Ltd	326,595	65,776	392,371	174,862	567,233
4375 Employee Recruitment and Develop					
3400 Other Funds Ltd	207	8	215	438	653
4400 Dues and Subscriptions					
3400 Other Funds Ltd	4,583	174	4,757	438	5,195
4425 Facilities Rental and Taxes					
3400 Other Funds Ltd	219,519	8,342	227,861	15,117	242,978
4475 Facilities Maintenance					
3400 Other Funds Ltd	51	2	53	-	53
4525 Medical Services and Supplies					

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Agency Number: 85500

Detail Revenues & Expenditures - Requested Budget
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Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
3400 Other Funds Ltd	1,110	42	1,152	-	1,152
4575 Agency Program Related S and S					
3400 Other Funds Ltd	229,434	8,718	238,152	2,000	240,152
4650 Other Services and Supplies					
3400 Other Funds Ltd	278,652	10,589	289,241	7,337	296,578
4700 Expendable Prop 250 - 5000					
3400 Other Funds Ltd	10,499	399	10,898	2,628	13,526
4715 IT Expendable Property					
3400 Other Funds Ltd	43,976	(613)	43,363	-	43,363
TOTAL SERVICES & SUPPLIES					
3400 Other Funds Ltd	2,439,840	(150,555)	2,289,285	505,448	2,794,733
CAPITAL OUTLAY					
5600 Data Processing Hardware					
3400 Other Funds Ltd	8,296	315	8,611	-	8,611
SPECIAL PAYMENTS					
6085 Other Special Payments					
3400 Other Funds Ltd	11,991	456	12,447	-	12,447
TOTAL EXPENDITURES					
3400 Other Funds Ltd	7,658,999	39,156	7,698,155	942,053	8,640,208
ENDING BALANCE					
3400 Other Funds Ltd	153,920	(39,156)	114,764	1,469,747	1,584,511
AUTHORIZED POSITIONS					
8150 Class/Unclass Positions	20	-	20	2	22

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Pharmacy, Board of

Agency Number: 85500

Detail Revenues & Expenditures - Requested Budget
 2019-21 Biennium
 Board of Pharmacy

Version: V - 01 - Agency Request Budget
 Cross Reference Number: 85500-001-00-00-00000

Description	2019-21 Base Budget	Essential Packages	2019-21 Current Service Level	Policy Packages	2019-21 Agency Request Audit
AUTHORIZED FTE 8250 Class/Unclass FTE Positions	20.00	-	20.00	2.00	22.00

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Description	Total Essential Packages	Pkg: 010	Pkg: 022	Pkg: 031		
		Non-PICS Psnl Svc / Vacancy Factor	Phase-out Pgm & One-time Costs	Standard Inflation		
		Priority: 00	Priority: 00	Priority: 00		

EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3160 Temporary Appointments

3400 Other Funds Ltd 958 958 - -

3190 All Other Differential

3400 Other Funds Ltd 6,971 6,971 - -

SALARIES & WAGES

3400 Other Funds Ltd 7,929 7,929 - -

TOTAL SALARIES & WAGES

\$7,929 \$7,929 - -

OTHER PAYROLL EXPENSES

3220 Public Employees Retire Cont

3400 Other Funds Ltd 1,183 1,183 - -

3221 Pension Obligation Bond

3400 Other Funds Ltd 8,584 8,584 - -

3230 Social Security Taxes

3400 Other Funds Ltd 607 607 - -

3260 Mass Transit Tax

3400 Other Funds Ltd 1,189 1,189 - -

OTHER PAYROLL EXPENSES

3400 Other Funds Ltd 11,563 11,563 - -

TOTAL OTHER PAYROLL EXPENSES

\$11,563 \$11,563 - -

Description	Total Essential Packages	Pkg: 010 Non-PICS Psnl Svc / Vacancy Factor	Pkg: 022 Phase-out Pgm & One-time Costs	Pkg: 031 Standard Inflation		
		Priority: 00	Priority: 00	Priority: 00		
P.S. BUDGET ADJUSTMENTS						
3455 Vacancy Savings						
3400 Other Funds Ltd	169,448	169,448	-	-		
PERSONAL SERVICES						
3400 Other Funds Ltd	188,940	188,940	-	-		
TOTAL PERSONAL SERVICES	\$188,940	\$188,940	-	-		
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	3,886	-	-	3,886		
4125 Out of State Travel						
3400 Other Funds Ltd	598	-	-	598		
4150 Employee Training						
3400 Other Funds Ltd	(33,890)	-	(34,565)	675		
4175 Office Expenses						
3400 Other Funds Ltd	4,708	-	-	4,708		
4200 Telecommunications						
3400 Other Funds Ltd	1,667	-	-	1,667		
4225 State Gov. Service Charges						
3400 Other Funds Ltd	55,187	-	-	55,187		
4250 Data Processing						
3400 Other Funds Ltd	2,800	-	-	2,800		
4275 Publicity and Publications						
3400 Other Funds Ltd	1,433	-	-	1,433		

Description	Total Essential Packages	Pkg: 010 Non-PICS Psnl Svc / Vacancy Factor Priority: 00	Pkg: 022 Phase-out Pgm & One-time Costs Priority: 00	Pkg: 031 Standard Inflation Priority: 00		
4300 Professional Services						
3400 Other Funds Ltd	(11,754)	-	(27,500)	15,746		
4315 IT Professional Services						
3400 Other Funds Ltd	(268,627)	-	(272,042)	3,415		
4325 Attorney General						
3400 Other Funds Ltd	65,776	-	-	65,776		
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	8	-	-	8		
4400 Dues and Subscriptions						
3400 Other Funds Ltd	174	-	-	174		
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	8,342	-	-	8,342		
4475 Facilities Maintenance						
3400 Other Funds Ltd	2	-	-	2		
4525 Medical Services and Supplies						
3400 Other Funds Ltd	42	-	-	42		
4575 Agency Program Related S and S						
3400 Other Funds Ltd	8,718	-	-	8,718		
4650 Other Services and Supplies						
3400 Other Funds Ltd	10,589	-	-	10,589		
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	399	-	-	399		
4715 IT Expendable Property						

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Description	Total Essential Packages	Pkg: 010 Non-PICS Psnl Svc / Vacancy Factor Priority: 00	Pkg: 022 Phase-out Pgm & One-time Costs Priority: 00	Pkg: 031 Standard Inflation Priority: 00		
3400 Other Funds Ltd	(613)	-	(2,200)	1,587		
SERVICES & SUPPLIES						
3400 Other Funds Ltd	(150,555)	-	(336,307)	185,752		
TOTAL SERVICES & SUPPLIES	(\$150,555)	-	(\$336,307)	\$185,752		
CAPITAL OUTLAY						
5600 Data Processing Hardware						
3400 Other Funds Ltd	315	-	-	315		
SPECIAL PAYMENTS						
6085 Other Special Payments						
3400 Other Funds Ltd	456	-	-	456		
EXPENDITURES						
3400 Other Funds Ltd	39,156	188,940	(336,307)	186,523		
TOTAL EXPENDITURES	\$39,156	\$188,940	(\$336,307)	\$186,523		
ENDING BALANCE						
3400 Other Funds Ltd	(39,156)	(188,940)	336,307	(186,523)		
TOTAL ENDING BALANCE	(\$39,156)	(\$188,940)	\$336,307	(\$186,523)		

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Description	Total Essential Packages	Pkg: 010	Pkg: 022	Pkg: 031		
		Non-PICS Psnl Svc / Vacancy Factor	Phase-out Pgm & One-time Costs	Standard Inflation		
		Priority: 00	Priority: 00	Priority: 00		

EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3160 Temporary Appointments

3400 Other Funds Ltd 958 958 - -

3190 All Other Differential

3400 Other Funds Ltd 6,971 6,971 - -

SALARIES & WAGES

3400 Other Funds Ltd 7,929 7,929 - -

TOTAL SALARIES & WAGES

\$7,929 \$7,929 - -

OTHER PAYROLL EXPENSES

3220 Public Employees Retire Cont

3400 Other Funds Ltd 1,183 1,183 - -

3221 Pension Obligation Bond

3400 Other Funds Ltd 8,584 8,584 - -

3230 Social Security Taxes

3400 Other Funds Ltd 607 607 - -

3260 Mass Transit Tax

3400 Other Funds Ltd 1,189 1,189 - -

OTHER PAYROLL EXPENSES

3400 Other Funds Ltd 11,563 11,563 - -

TOTAL OTHER PAYROLL EXPENSES

\$11,563 \$11,563 - -

Description	Total Essential Packages	Pkg: 010 Non-PICS Psnl Svc / Vacancy Factor Priority: 00	Pkg: 022 Phase-out Pgm & One-time Costs Priority: 00	Pkg: 031 Standard Inflation Priority: 00		
P.S. BUDGET ADJUSTMENTS						
3455 Vacancy Savings						
3400 Other Funds Ltd	169,448	169,448	-	-		
PERSONAL SERVICES						
3400 Other Funds Ltd	188,940	188,940	-	-		
TOTAL PERSONAL SERVICES	\$188,940	\$188,940	-	-		
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	3,886	-	-	3,886		
4125 Out of State Travel						
3400 Other Funds Ltd	598	-	-	598		
4150 Employee Training						
3400 Other Funds Ltd	(33,890)	-	(34,565)	675		
4175 Office Expenses						
3400 Other Funds Ltd	4,708	-	-	4,708		
4200 Telecommunications						
3400 Other Funds Ltd	1,667	-	-	1,667		
4225 State Gov. Service Charges						
3400 Other Funds Ltd	55,187	-	-	55,187		
4250 Data Processing						
3400 Other Funds Ltd	2,800	-	-	2,800		
4275 Publicity and Publications						
3400 Other Funds Ltd	1,433	-	-	1,433		

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Description	Total Essential Packages	Pkg: 010 Non-PICS Psnl Svc / Vacancy Factor Priority: 00	Pkg: 022 Phase-out Pgm & One-time Costs Priority: 00	Pkg: 031 Standard Inflation Priority: 00		
4300 Professional Services						
3400 Other Funds Ltd	(11,754)	-	(27,500)	15,746		
4315 IT Professional Services						
3400 Other Funds Ltd	(268,627)	-	(272,042)	3,415		
4325 Attorney General						
3400 Other Funds Ltd	65,776	-	-	65,776		
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	8	-	-	8		
4400 Dues and Subscriptions						
3400 Other Funds Ltd	174	-	-	174		
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	8,342	-	-	8,342		
4475 Facilities Maintenance						
3400 Other Funds Ltd	2	-	-	2		
4525 Medical Services and Supplies						
3400 Other Funds Ltd	42	-	-	42		
4575 Agency Program Related S and S						
3400 Other Funds Ltd	8,718	-	-	8,718		
4650 Other Services and Supplies						
3400 Other Funds Ltd	10,589	-	-	10,589		
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	399	-	-	399		
4715 IT Expendable Property						

Pharmacy, Board of

Agency Number 85500

BDV004B
2019-21 Biennium
Board of Pharmacy

Version: V - 01 - Agency Request Budget
Cross Reference Number: 85500-001-00-00-00000

Description	Total Essential Packages	Pkg: 010 Non-PICS Psnl Svc / Vacancy Factor Priority: 00	Pkg: 022 Phase-out Pgm & One-time Costs Priority: 00	Pkg: 031 Standard Inflation Priority: 00		
3400 Other Funds Ltd	(613)	-	(2,200)	1,587		
SERVICES & SUPPLIES						
3400 Other Funds Ltd	(150,555)	-	(336,307)	185,752		
TOTAL SERVICES & SUPPLIES	(\$150,555)	-	(\$336,307)	\$185,752		
CAPITAL OUTLAY						
5600 Data Processing Hardware						
3400 Other Funds Ltd	315	-	-	315		
SPECIAL PAYMENTS						
6085 Other Special Payments						
3400 Other Funds Ltd	456	-	-	456		
EXPENDITURES						
3400 Other Funds Ltd	39,156	188,940	(336,307)	186,523		
TOTAL EXPENDITURES	\$39,156	\$188,940	(\$336,307)	\$186,523		
ENDING BALANCE						
3400 Other Funds Ltd	(39,156)	(188,940)	336,307	(186,523)		
TOTAL ENDING BALANCE	(\$39,156)	(\$188,940)	\$336,307	(\$186,523)		

Description	Total Policy Packages	Pkg: 101 License Fee Increases Priority: 00	Pkg: 102 DOJ Expenditure Increase Priority: 00	Pkg: 103 Database Cloud Hosting Priority: 00	Pkg: 104 Compliance & Licensing Staffing Priority: 00	Pkg: 105 Formulary Per Diem & Expense Funding Priority: 00
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REVENUE CATEGORIES

LICENSES AND FEES

0205 Business Lic and Fees

3400 Other Funds Ltd	2,411,800	2,411,800	-	-	-	-
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AVAILABLE REVENUES

3400 Other Funds Ltd	2,411,800	2,411,800	-	-	-	-
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TOTAL AVAILABLE REVENUES	\$2,411,800	\$2,411,800	-	-	-	-
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EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3110 Class/Unclass Sal. and Per Diem

3400 Other Funds Ltd	293,072	-	-	-	287,472	5,600
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OTHER PAYROLL EXPENSES

3210 Empl. Rel. Bd. Assessments

3400 Other Funds Ltd	122	-	-	-	122	-
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3220 Public Employees Retire Cont

3400 Other Funds Ltd	48,784	-	-	-	48,784	-
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3230 Social Security Taxes

3400 Other Funds Ltd	22,418	-	-	-	21,991	427
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3250 Workers Comp. Assess. (WCD)

3400 Other Funds Ltd	116	-	-	-	116	-
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3260 Mass Transit Tax

3400 Other Funds Ltd	1,725	-	-	-	1,725	-
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Description	Total Policy Packages	Pkg: 101 License Fee Increases Priority: 00	Pkg: 102 DOJ Expenditure Increase Priority: 00	Pkg: 103 Database Cloud Hosting Priority: 00	Pkg: 104 Compliance & Licensing Staffing Priority: 00	Pkg: 105 Formulary Per Diem & Expense Funding Priority: 00
3270 Flexible Benefits						
3400 Other Funds Ltd	70,368	-	-	-	70,368	-
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	143,533	-	-	-	143,106	427
TOTAL OTHER PAYROLL EXPENSES	\$143,533	-	-	-	\$143,106	\$427
PERSONAL SERVICES						
3400 Other Funds Ltd	436,605	-	-	-	430,578	6,027
TOTAL PERSONAL SERVICES	\$436,605	-	-	-	\$430,578	\$6,027
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	8,590	-	-	-	590	8,000
4150 Employee Training						
3400 Other Funds Ltd	2,955	-	-	-	2,955	-
4175 Office Expenses						
3400 Other Funds Ltd	3,723	-	-	-	3,723	-
4200 Telecommunications						
3400 Other Funds Ltd	3,284	-	-	-	3,284	-
4250 Data Processing						
3400 Other Funds Ltd	877	-	-	-	877	-
4275 Publicity and Publications						
3400 Other Funds Ltd	438	-	-	-	438	-
4300 Professional Services						

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Description	Total Policy Packages	Pkg: 101 License Fee Increases	Pkg: 102 DOJ Expenditure Increase	Pkg: 103 Database Cloud Hosting	Pkg: 104 Compliance & Licensing Staffing	Pkg: 105 Formulary Per Diem & Expense Funding
		Priority: 00	Priority: 00	Priority: 00	Priority: 00	Priority: 00
3400 Other Funds Ltd	3,740	-	-	-	-	-
4315 IT Professional Services						
3400 Other Funds Ltd	279,021	-	-	279,021	-	-
4325 Attorney General						
3400 Other Funds Ltd	174,862	-	174,862	-	-	-
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	438	-	-	-	438	-
4400 Dues and Subscriptions						
3400 Other Funds Ltd	438	-	-	-	438	-
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	15,117	-	-	-	15,117	-
4575 Agency Program Related S and S						
3400 Other Funds Ltd	2,000	-	-	-	-	2,000
4650 Other Services and Supplies						
3400 Other Funds Ltd	7,337	-	-	-	7,337	-
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	2,628	-	-	-	2,628	-
SERVICES & SUPPLIES						
3400 Other Funds Ltd	505,448	-	174,862	279,021	37,825	10,000
TOTAL SERVICES & SUPPLIES	\$505,448	-	\$174,862	\$279,021	\$37,825	\$10,000
EXPENDITURES						
3400 Other Funds Ltd	942,053	-	174,862	279,021	468,403	16,027

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BDV004B
 2019-21 Biennium
 Pharmacy, Board Of

Version: V - 01 - Agency Request Budget
 Cross Reference Number: 85500-000-00-00-00000

Description	Total Policy Packages	Pkg: 101 License Fee Increases Priority: 00	Pkg: 102 DOJ Expenditure Increase Priority: 00	Pkg: 103 Database Cloud Hosting Priority: 00	Pkg: 104 Compliance & Licensing Staffing Priority: 00	Pkg: 105 Formulary Per Diem & Expense Funding Priority: 00
TOTAL EXPENDITURES	\$942,053	-	\$174,862	\$279,021	\$468,403	\$16,027
ENDING BALANCE						
3400 Other Funds Ltd	1,469,747	2,411,800	(174,862)	(279,021)	(468,403)	(16,027)
TOTAL ENDING BALANCE	\$1,469,747	\$2,411,800	(\$174,862)	(\$279,021)	(\$468,403)	(\$16,027)
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	2	-	-	-	2	-
AUTHORIZED FTE						
8250 Class/Unclass FTE Positions	2.00	-	-	-	2.00	-

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BDV004B
 2019-21 Biennium
 Pharmacy, Board Of

Version: V - 01 - Agency Request Budget
 Cross Reference Number: 85500-000-00-00-00000

Description	Pkg: 106 OBOP/Pacific Fellowship Continuation				
	Priority: 00				

EXPENDITURES

SERVICES & SUPPLIES

4300 Professional Services

3400 Other Funds Ltd 3,740

ENDING BALANCE

3400 Other Funds Ltd (3,740)

TOTAL ENDING BALANCE (\$3,740)

Description	Total Policy Packages	Pkg: 101 License Fee Increases Priority: 00	Pkg: 102 DOJ Expenditure Increase Priority: 00	Pkg: 103 Database Cloud Hosting Priority: 00	Pkg: 104 Compliance & Licensing Staffing Priority: 00	Pkg: 105 Formulary Per Diem & Expense Funding Priority: 00
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REVENUE CATEGORIES

LICENSES AND FEES

0205 Business Lic and Fees

3400 Other Funds Ltd	2,411,800	2,411,800	-	-	-	-
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AVAILABLE REVENUES

3400 Other Funds Ltd	2,411,800	2,411,800	-	-	-	-
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TOTAL AVAILABLE REVENUES	\$2,411,800	\$2,411,800	-	-	-	-
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EXPENDITURES

PERSONAL SERVICES

SALARIES & WAGES

3110 Class/Unclass Sal. and Per Diem

3400 Other Funds Ltd	293,072	-	-	-	287,472	5,600
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OTHER PAYROLL EXPENSES

3210 Empl. Rel. Bd. Assessments

3400 Other Funds Ltd	122	-	-	-	122	-
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3220 Public Employees Retire Cont

3400 Other Funds Ltd	48,784	-	-	-	48,784	-
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3230 Social Security Taxes

3400 Other Funds Ltd	22,418	-	-	-	21,991	427
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3250 Workers Comp. Assess. (WCD)

3400 Other Funds Ltd	116	-	-	-	116	-
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3260 Mass Transit Tax

3400 Other Funds Ltd	1,725	-	-	-	1,725	-
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Description	Total Policy Packages	Pkg: 101 License Fee Increases Priority: 00	Pkg: 102 DOJ Expenditure Increase Priority: 00	Pkg: 103 Database Cloud Hosting Priority: 00	Pkg: 104 Compliance & Licensing Staffing Priority: 00	Pkg: 105 Formulary Per Diem & Expense Funding Priority: 00
3270 Flexible Benefits						
3400 Other Funds Ltd	70,368	-	-	-	70,368	-
OTHER PAYROLL EXPENSES						
3400 Other Funds Ltd	143,533	-	-	-	143,106	427
TOTAL OTHER PAYROLL EXPENSES	\$143,533	-	-	-	\$143,106	\$427
PERSONAL SERVICES						
3400 Other Funds Ltd	436,605	-	-	-	430,578	6,027
TOTAL PERSONAL SERVICES	\$436,605	-	-	-	\$430,578	\$6,027
SERVICES & SUPPLIES						
4100 Instate Travel						
3400 Other Funds Ltd	8,590	-	-	-	590	8,000
4150 Employee Training						
3400 Other Funds Ltd	2,955	-	-	-	2,955	-
4175 Office Expenses						
3400 Other Funds Ltd	3,723	-	-	-	3,723	-
4200 Telecommunications						
3400 Other Funds Ltd	3,284	-	-	-	3,284	-
4250 Data Processing						
3400 Other Funds Ltd	877	-	-	-	877	-
4275 Publicity and Publications						
3400 Other Funds Ltd	438	-	-	-	438	-
4300 Professional Services						

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Description	Total Policy Packages	Pkg: 101 License Fee Increases Priority: 00	Pkg: 102 DOJ Expenditure Increase Priority: 00	Pkg: 103 Database Cloud Hosting Priority: 00	Pkg: 104 Compliance & Licensing Staffing Priority: 00	Pkg: 105 Formulary Per Diem & Expense Funding Priority: 00
3400 Other Funds Ltd	3,740	-	-	-	-	-
4315 IT Professional Services						
3400 Other Funds Ltd	279,021	-	-	279,021	-	-
4325 Attorney General						
3400 Other Funds Ltd	174,862	-	174,862	-	-	-
4375 Employee Recruitment and Develop						
3400 Other Funds Ltd	438	-	-	-	438	-
4400 Dues and Subscriptions						
3400 Other Funds Ltd	438	-	-	-	438	-
4425 Facilities Rental and Taxes						
3400 Other Funds Ltd	15,117	-	-	-	15,117	-
4575 Agency Program Related S and S						
3400 Other Funds Ltd	2,000	-	-	-	-	2,000
4650 Other Services and Supplies						
3400 Other Funds Ltd	7,337	-	-	-	7,337	-
4700 Expendable Prop 250 - 5000						
3400 Other Funds Ltd	2,628	-	-	-	2,628	-
SERVICES & SUPPLIES						
3400 Other Funds Ltd	505,448	-	174,862	279,021	37,825	10,000
TOTAL SERVICES & SUPPLIES	\$505,448	-	\$174,862	\$279,021	\$37,825	\$10,000
EXPENDITURES						
3400 Other Funds Ltd	942,053	-	174,862	279,021	468,403	16,027

Description	Total Policy Packages	Pkg: 101 License Fee Increases Priority: 00	Pkg: 102 DOJ Expenditure Increase Priority: 00	Pkg: 103 Database Cloud Hosting Priority: 00	Pkg: 104 Compliance & Licensing Staffing Priority: 00	Pkg: 105 Formulary Per Diem & Expense Funding Priority: 00
TOTAL EXPENDITURES	\$942,053	-	\$174,862	\$279,021	\$468,403	\$16,027
ENDING BALANCE						
3400 Other Funds Ltd	1,469,747	2,411,800	(174,862)	(279,021)	(468,403)	(16,027)
TOTAL ENDING BALANCE	\$1,469,747	\$2,411,800	(\$174,862)	(\$279,021)	(\$468,403)	(\$16,027)
AUTHORIZED POSITIONS						
8150 Class/Unclass Positions	2	-	-	-	2	-
AUTHORIZED FTE						
8250 Class/Unclass FTE Positions	2.00	-	-	-	2.00	-

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Description	Pkg: 106 OBOP/Pacific Fellowship Continuation Priority: 00					
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EXPENDITURES

SERVICES & SUPPLIES

4300 Professional Services

3400 Other Funds Ltd 3,740

ENDING BALANCE

3400 Other Funds Ltd (3,740)

TOTAL ENDING BALANCE (\$3,740)

07/09/18 REPORT NO.: PPDPBUDCL
 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		33,300			33,300
000	MEAHZ7008	HP	PRINCIPAL EXECUTIVE/MANAGER E	1	1.00	24.00	9,782.00		234,768			234,768
000	MMN X0871	AP	OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	6,862.00		164,688			164,688
000	MMS X0806	AP	OFFICE MANAGER 2	1	1.00	24.00	4,885.00		117,240			117,240
000	MMS X0860	AP	PROGRAM ANALYST 1	1	1.00	24.00	5,650.00		135,600			135,600
000	MMS X7006	AP	PRINCIPAL EXECUTIVE/MANAGER D	2	2.00	48.00	8,332.00		399,936			399,936
000	OAS C0104	AP	OFFICE SPECIALIST 2	4	4.00	96.00	3,523.50		338,256			338,256
000	OAS C0107	AP	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	4,096.00		98,304			98,304
000	OAS C0323	AP	PUBLIC SERVICE REP 3	3	3.00	72.00	3,489.33		251,232			251,232
000	OAS C5911	EP	HEALTH CARE INVESTIGTR/ADVISR	6	6.00	144.00	11,092.16		1,597,272			1,597,272
000				20	20.00	480.00	3,862.61		3,370,596			3,370,596

07/09/18 REPORT NO.: PPDPLBUDCL
REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
AGENCY:85500 PHARMACY, OREGON BOARD OF
SUMMARY XREF:001-00-00 104 Board of Pharmacy

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

2019-21
PICS SYSTEM: BUDGET PREPARATION

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PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
104	OAS	C0323	AP PUBLIC SERVICE REP 3	1	1.00	24.00	2,766.00		66,384			66,384
104	OAS	C5911	EP HEALTH CARE INVESTIGTR/ADVISR	1	1.00	24.00	9,212.00		221,088			221,088
104				2	2.00	48.00	5,989.00		287,472			287,472

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07/09/18 REPORT NO.: PPDPLEUDCL
 REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
 AGENCY:85500 PHARMACY, OREGON BOARD OF
 SUMMARY XREF:001-00-00 105 Board of Pharmacy

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PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
105	B	Y7500	AE BOARD AND COMMISSION MEMBER		.00	.00	0.00		5,600			5,600
105					.00	.00	0.00		5,600			5,600
				22	22.00	528.00	2,904.46		3,663,668			3,663,668
				22	22.00	528.00	2,904.46		3,663,668			3,663,668

07/09/18 REPORT NO.: PPDPLBUDCL
REPORT: SUMMARY LIST BY PKG BY SUMMARY XREF
AGENCY:85500 PHARMACY, OREGON BOARD OF
SUMMARY XREF:001-00-00 105 Board of Pharmacy

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PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
				22	22.00	528.00	2,904.46		3,663,668			3,663,668

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07/09/18 REPORT NO.: PPDPLAGYCL
 REPORT: SUMMARY LIST BY PKG BY AGENCY
 AGENCY:85500 PHARMACY, OREGON BOARD OF

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 PICS SYSTEM: BUDGET PREPARATION
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PKG	CLASS	COMP	DESCRIPTION	POS CNT	FTE	MOS	AVERAGE RATE	GF SAL	OF SAL	FF SAL	LF SAL	AF SAL
105	B	Y7500	AE BOARD AND COMMISSION MEMBER		.00	.00	0.00		38,900			38,900
000	MEAHZ7008	HP	PRINCIPAL EXECUTIVE/MANAGER E	1	1.00	24.00	9,782.00		234,768			234,768
000	MMN X0871	AP	OPERATIONS & POLICY ANALYST 2	1	1.00	24.00	6,862.00		164,688			164,688
000	MMS X0806	AP	OFFICE MANAGER 2	1	1.00	24.00	4,885.00		117,240			117,240
000	MMS X0860	AP	PROGRAM ANALYST 1	1	1.00	24.00	5,650.00		135,600			135,600
000	MMS X7006	AP	PRINCIPAL EXECUTIVE/MANAGER D	2	2.00	48.00	8,332.00		399,936			399,936
000	OAS C0104	AP	OFFICE SPECIALIST 2	4	4.00	96.00	3,523.50		338,256			338,256
000	OAS C0107	AP	ADMINISTRATIVE SPECIALIST 1	1	1.00	24.00	4,096.00		98,304			98,304
104	OAS C0323	AP	PUBLIC SERVICE REP 3	4	4.00	96.00	3,308.50		317,616			317,616
104	OAS C5911	EP	HEALTH CARE INVESTIGTR/ADVISR	7	7.00	168.00	10,823.57		1,818,360			1,818,360
				22	22.00	528.00	2,904.46		3,663,668			3,663,668

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07/09/18 REPORT NO.: PPDPLAGYCL
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AGENCY:85500 PHARMACY, OREGON BOARD OF

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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
				22	22.00	528.00	2,904.46		3,663,668			3,663,668

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07/09/18 REPORT NO.: PPDPLWSBUD
 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 85500 PHARMACY, OREGON BOARD OF
 SUMMARY XREF: 001-00-00 104 Board of Pharmacy

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 PICS SYSTEM: BUDGET PREPARATION

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
0000655	001331070	001-01-00-00000	104 0 PF	OAS C5911 EP	26 04	1	1.00	9,212.00	24.00		221,088			
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0000656	001329800	001-01-00-00000	104 0 PF	OAS C0323 AP	15 02	1	1.00	2,766.00	24.00		66,384			
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
			104			2	2.00		48.00		287,472			

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07/09/18 REPORT NO.: PPDPLWSBUD
 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 85500 PHARMACY, OREGON BOARD OF
 SUMMARY XREF: 001-00-00 105 Board of Pharmacy

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 PICS SYSTEM: BUDGET PREPARATION

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
0004421	001308780	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00					B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004421	001308780	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00		800			B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004422	001308790	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00					B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004422	001308790	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00		800			B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004423	001308800	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00					B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004423	001308800	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00		800			B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004424	001308810	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00					B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004424	001308810	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00		800			B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004425	001308820	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00					B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004425	001308820	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00		800			B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004426	001308830	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00					B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004426	001308830	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00		800			B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004427	001308840	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00					B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
0004427	001308840	001-01-00-00000	105 0 PP B	Y7500 AE	00 00		.00	0.00	.00		800			B
EST DATE: 2019/07/01 EXP DATE: 9999/01/01														
105							.00		.00		5,600			

2 2.00 48.00 293,072

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07/09/18 REPORT NO.: PPDPLWSBUD
 REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
 AGENCY: 85500 PHARMACY, OREGON BOARD OF
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 PICS SYSTEM: BUDGET PREPARATION

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
						2	2.00		48.00		293,072			

07/09/18 REPORT NO.: PPDPLWSBUD
REPORT: DETAIL LISTING BY SUMMARY XREF AGENCY
AGENCY: 85500 PHARMACY, OREGON BOARD OF
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PICS SYSTEM: BUDGET PREPARATION

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
						2	2.00		48.00		293,072			

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