

**OPEN MINUTES  
MISSOURI BOARD OF PHARMACY  
PHARMACY TECHNICIAN WORKING GROUP**

Missouri Council of School Administrators  
3550 Amazonas Drive  
Jefferson City, MO 65109

**August 5, 2016**

The Missouri Pharmacy Technician Working Group met in open session during the times and dates stated in the following minutes. Each item in the minutes is listed in the order it was discussed.

**Board Members Present**

Christina Lindsay, President

**Working Group Members Present**

Edward Alviso  
Steve Edwards  
Ron Fitzwater, Missouri Pharmacy  
Association  
Fred Gattas  
Erica Hopkins  
Timothy Koch  
Susan Lanctot  
Susan Pappas  
Koby Prater

Diane McClaskey  
Melody Savley  
Tim Michaelree  
Miriam Mobley-Smith  
Mike Stuart  
Greg Teale (on behalf of the Hospital  
Advisory Committee)  
Lindsay Wendorff  
David Wolfrath

**Staff Present**

Kimberly Grinston, Executive Director  
Tom Glenski, Chief Inspector  
Alicia Edmonson, Compliance Coordinator

**Others Present**

Valerie Greene, Pharmacist

Board President Christina Lindsay called the meeting to order at 9:03 a.m.

**Agenda Item # 1:** Working Group and Advisory members introduced themselves and their respective organizations. President Lindsay commented that Working Group members were selected to represent a variety of pharmacy practice settings and thanked participants for their willingness to serve. Ms. Grinston indicated the schools and PTCB were appointed as non-voting advisory members to prevent a conflict of interest.

**Agenda Item # 2:** President Lindsay asked Executive Director Grinston to provide a historical background on the previous pharmacy technician working group. Ms. Grinston indicated the previous working group was formed in 2011 with the specific task of drafting legislation to address pharmacy technician training and qualifications. Ms. Grinston reported draft legislation was adopted by majority vote but the proposal was not passed by the General Assembly and was never scheduled for hearing. Ms. Grinston further reported the current Working Group has been asked to advise the Board on a variety of pharmacy technician issues in addition to technician training.

**Agenda Item # 3:** President Lindsay reported the Board has asked the Working Group to advise on three topic areas during its initial meeting: (1) the current state of technician practice (what activities are technicians currently performing in the various practice settings?), (2) Missouri's technician definition (is the definition adequate/comprehensive?) and (3) current Board regulation (is the area being adequately/appropriately regulated?)

- **Scope of current technician practice:** President Lindsay divided attendees into four groups to represent the major practice areas: (1) retail pharmacy, (2) chain retail pharmacy, (3) mail order and (4) hospital/specialty pharmacy. Attendees were asked to identify technician activities in their respective practice settings. Tim Koch suggested it may be beneficial to also focus on what technicians are not currently allowed to do that pharmacies may want or need them to do; Fred Gattas agreed that the scope of currently allowed activities may not reflect what appropriately trained technicians are actually able to do. (See Attachment A for a list of current/potential technician activities discussed).

Additional discussion was held regarding "tech-check-tech" programs where properly qualified technicians are allowed to verify other technician work and/or the final product. Tim Koch indicated that opponents in other states have argued that tech-check-tech programs should not be allowed in retail pharmacy and that the practice may make a pharmacist obsolete. Mr. Koch commented that patient safety is the main concern and suggested that additional review and research should be done before blanketly allowing or prohibiting the practice. Susan Lanctot commented that literature has been published indicating that "tech-check-tech" programs have a higher rate of accuracy and recommended that the Advisory Group/Board research the statistics. Ms. Lanctot indicated that "tech-check-tech" would not excuse pharmacists from exercising good clinical judgment. President Lindsay asked Board staff to research statistics and available data for future meetings.

Additional discussion was held regarding remote supervision of technicians. Retail pharmacy representatives indicated remote supervision could significantly change traditional pharmacy dispensing. Greg Teale commented that hospitals have expanded clinical practice settings over the last several years and remarked that technology is available that would allow a single pharmacist to reliably view and verify multiple pharmacy locations.

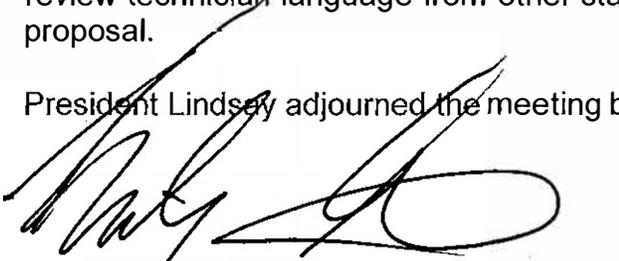
- **Pharmacy Technician Definition:** Attendees discussed Missouri's technician definition in light of the duties/roles previously identified. By majority vote, Working Group members suggested the following regulatory approach:
  1. Missouri law should establish the following technician classification types: (1) advanced practice technicians, (2) registered technicians and (3) registered support staff. All groups should be registered with the Board and required to undergo a criminal background check, however, the training requirements should differ based on classification. The Working Group unanimously recommended that technician certification should not be mandatory for any technician classification.
  2. **Registered Support Staff:** Would include staff who may have access to the pharmacy/prescription information but do not assist in dispensing or the actual practice of pharmacy. Examples would include: administrative support staff, technical support, clerks/cashiers, housekeepers/maintenance, inventory management and staff delivery drivers. These individuals should be registered but not required to complete a training program. A suggestion was made to review other state laws to determine the appropriate title for this group.
  3. **Registered Technicians:** Would include technicians assisting in the practice of pharmacy that are not performing advanced practice technician duties. Registered technicians should be required to complete an in-house training program that includes minimum standards identified by law or by the Board. Discussion was held regarding when training would need to be completed. Concerns were raised that pre-employment training might impact smaller pharmacies where the candidate pool may already be limited. A suggestion was made that the new law require completion of training within a designated timeframe (e.g., a certain number of months).
  4. **Advanced Practice Technicians:** This category would include technicians who are authorized to perform advanced functions such as sterile compounding or "tech-check-tech." Advanced practice technicians would be required to complete some form of advanced training which could include certification, an enhanced in-house training program, an accredited school/college program or a nationally accredited program (e.g., ASHP). Attendees suggested reviewing other state laws and discussing advanced practice training requirements at a later meeting.
  5. The Working Group further suggested that the minimum age for advanced practice and registered technicians should be sixteen (16).
  
- **Current Board Regulation:** As part of the discussion, Miriam Mobley-Smith with the Pharmacy Technician Certification Board (PTCB) provided information regarding pending 2020 PTCB certification changes. Ms. Smith indicated that certification applicants after 2020 will be required to complete an ASHP/ACPE accredited training program which would currently involve 600 hours of training over approximately fifteen (15) weeks. Tim Koch commented that accreditation has cost

his pharmacies approximately \$ 8,000 per student and suggested that independent accreditation may not be feasible for smaller pharmacies. Greg Teale indicated hospitals/pharmacies may look to partner with a college.

Fred Gattas expressed difficulty in hiring certified technicians for nuclear pharmacy. Mr. Gattas commented that some technicians can't pass the nuclear training exam but are able to pass the PTCB exam while others are able to pass a nuclear test but not PTCB. Representatives from retail pharmacy indicated a major problem is affording certification and the corresponding technician salary. It was suggested certified technicians would likely expect higher compensation which some smaller pharmacies may not be able to afford. Mike Stuart suggested that employers should be allowed to establish training requirements for their individual practice settings and commented that smaller pharmacies cannot stay in business or take care of patients if they can't make a profit. Ron Fitzwater commented that mandatory certification may also impact reimbursement as third-party payers may penalize or require pharmacies to use certified technicians at the risk of lower/no compensation.

The Working Group asked to review meeting notes and the suggestions prior to finalizing a formal recommendation. Attendees also indicated it would be helpful to review technician language from other states as well as the 2011 technician legislative proposal.

President Lindsey adjourned the meeting by consensus at approximately 3:01 p.m.



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KIMBERLY A. GRINSTON  
EXECUTIVE DIRECTOR

Date Approved: 01/17/2017

MISSOURI BOARD OF PHARMACY  
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**CURRENTLY PROHIBITED TECHNICIAN TASKS**

1. Final verification
2. Order/product verification
3. Counseling
4. Things requiring clinical/professional judgment
5. Taking an original therapy description for therapy dose/blood labeling (nuclear)

**POTENTIAL TECHNICIAN DUTIES/ALLOWANCES**

1. Immunizations (everything but administration)
2. MTM (Should remain in definition)
3. Adherence/Med Synch (calling patient, gathering data for pharmacist)
4. Specialty (MTM for high cost drugs, Administrative functions, data reporting)
5. Product verification on refills (tech-check-tech)
  - o Reconstitution verification
  - o Scan-check-tech/Technology-check-tech (hospitals)
6. Call centers (definition of what techs can do)
7. Remote supervision
8. Performing radiochemical quality control testing
9. Drawing/selecting doses w/ appropriate technology (can currently be performed by people other than techs)
10. Labelling the immediate container should be a tech but allowing other ancillary people to label the outer containers (hospital)

**ROLES OF OTHER SUPPORTIVE STAFF\*\***

1. Drivers/Delivery Staff
2. Clerks/Cashiers
3. Other healthcare providers (Resp. Therapist, RN)
4. DME
5. Management/HR
6. Support staff
7. Accountant
8. 340B coordinators

9. IT staff
10. Shipping area personnel
11. Waste removal
12. Security
13. Quality Assurance Inspectors
14. Inventory warehouse
15. Control engineers
16. Mailrooms (file prescriptions)

*\*\*\* The Working Group suggested some of these roles should not require full pharmacy technician registration/training\*\*\**