

## CHUCK WICHGERS

State Representative • 83rd Assembly District

Chairwoman Vukmir, and fellow committee members, thank you for holding a public hearing on Senate Bill 126 and for allowing me the opportunity to testify on this legislation.

In 2011, the Assembly began reviewing the nearly 2,000 chapters of the Wisconsin Administrative Code. The goal of this endeavor is to cut government red tape, update obsolete rules, eliminate overly burdensome rules, and simplify the state's administrative code.

This legislation is a result of that process, and seeks to update Wisconsin's pharmacy-related statutes and administrative rules based on testimony received last session. The proposed changes include:

- Matching the Pharmacy Examining Board's definition of "long term care facility" to the Drug Enforcement Agency definition of the same to ensure consistency and prevent logistical barriers for providers to communicate with one another.
- Eliminating the requirement that pharmacists and pharmacies display their original license. DSPS no longer provides this information upon license renewal; it must be accessed from their website, which is easily searchable. Also, it is logistically a challenge for practices where pharmacists practice at different locations, or practice outside of a brick and mortar pharmacy (e.g. in a clinic).
- Creates a new definition for a "chart order," meaning a prescription order entered on the chart of an inpatient. With the use of electronic prescribing from electronic medical records, this new definition is needed to clarify the different requirements between a prescription order entered on an inpatient's chart and other prescription orders.
- Repeals outdated mandatory minimum equipment requirements. Current administrative
  code requires pharmacies to have significant equipment that is not typically used in
  modern pharmacy practice, including mortars, pestles, spatulas, and torsion balances. It is
  burdensome for pharmacies to purchase and maintain these supplies if they are not being
  used.

Put simply, this proposal cleans up the pharmacy-related provisions of the Wisconsin Statutes and Administrative Codes. Many of the statutes and rules that are affected by this legislation have not been updated in decades and pharmacy practice, like many industries, has changed significantly during that time. It is important that we ensure that these regulations are simplified and match contemporary pharmacy practice, in order to ensure that pharmacy professionals may provide services without having to conform to confusing, outdated, or obsolete state regulations.

Thank you for your consideration of this legislation.



Senate Committee on Health and Human Services Public Hearing, April 20, 2017 Senate Bill 126 Senator David Craig, 28<sup>th</sup> Senate District

Dear Chairwoman Vukmir and Committee Members,

Thank you for taking testimony on Senate Bill 126 regarding changes to the pharmacy practice law and modifying rules promulgated by the Pharmacy Examining Board.

We have introduced this legislation because we believe the Pharmacy Society of Wisconsin is asking for sensible changes to update their practice law and board rules to reflect current practice in 2017. This bill is a good example of why the administrative rule review process has value and I thank the chairman for holding a hearing on this bill to update another section of our often Byzantine code.

SB 126 accomplishes four reforms: repeals the display of pharmacy and pharmacist license requirements, redefines long term care facility, repeals the requirement for an inpatient prescription order to include the address of the prescriber and repeals mandatory minimum equipment requirements. Thank you for allowing me to testify on this commonsense update of our statutes. I am happy to take any questions from committee members.



One Voice. One Vision.

DATE:

April 20, 2017

TO:

Senator Leah Vukmir, Chairman

Members, Senate Committee on Health & Human Services

FROM:

Danielle M. Laurent, MPH

Director, Public Affairs

Pharmacy Society of Wisconsin

SUBJECT:

Senate Bill 126 relating to: various changes to the pharmacy practice law and modifying rules

promulgated by the Pharmacy Examining Board

Thank you Chairman Vukmir and committee members for holding a hearing on Senate Bill 126 and for the opportunity to testify on this legislation. We greatly appreciate the work of Representatives Wichgers and Sanfelippo and Senators Craig and Lasee on this legislation which cleans up the state's pharmacy-related Administrative Code.

Since 2011, the Assembly has been reviewing the entire Wisconsin Administrative Code in order to eliminate outdated, confusing, or burdensome regulations. Last session, a public hearing was held during which time the chapters related to pharmacy practice were reviewing. Senate Bill 126 was written based on testimony heard during that hearing that highlighted areas in which government red tape could be cut to ensure that the state's pharmacy de match contemporary pharmacy practice. The following items were identified as being "clean-up" and will ensure patient safety, promote public health, and modernize the state's pharmacy regulations.

- 1. Update the definition of "long term care facility." Current administrative code defines a long term care facility (LTCF) more narrowly than the Drug Enforcement Administration (DEA). Phar 1.02(4m) defines a LTCF as a facility for the developmentally disabled or other nursing home; however the DEA defines a LTCF as (1300.01) a nursing home, retirement care, mental care or other facility or institution which provides extended health care to resident patients. The narrowed definition of a LTCF in Phar 1 excludes assisted living facilities such as Community Based Residential Facilities and creates logistical barriers for providers to communicate with one another.
- 2. Repeal the display of pharmacy and pharmacist license requirements. With license information readily available and searchable online, a physical license doesn't need to be displayed. In addition, DSPS no longer provides this information upon license renewal; it must be accessed from the website. Lastly, it is logistically a challenge for practices where pharmacists practice at many different locations, or practice outside of a brick and mortar pharmacy (e.g. in a clinic).
- 3. Repeal the requirement for an inpatient prescription order to include the address of the prescriber. With the use of electronic prescribing from electronic medical records, there is no need for a prescriber's address to be included on an inpatient's prescription order.
- **4. Repeal outdated mandatory minimum equipment requirements.** Current administrative code requires pharmacies to have significant equipment that is not typically used in modern pharmacy practice, including mortars, pestles, spatulas, and torsion balances. It is burdensome for pharmacies to purchase and maintain these supplies if they are not being used.

It is important that regulations related to pharmacy practice are updated to ensure that pharmacy professionals are able to provide the best patient care possible. Thank you again for the opportunity to testify on this legislation and for your consideration.

DATE:

April 20, 2017

TO:

Senator Leah Vukmir, Chairman

Members, Senate Committee on Health & Human Services

FROM:

Heather Stoner, DPH-3

President, Wisconsin Society of Pharmacy Students

SUBJECT:

Testimony in Favor of Senate Bill 126

Senator Vukmir and committee members, thank you for holding a public hearing on Senate Bill 126. I appreciate the opportunity to testify before you today.

My name is Heather Stoner and I am a third-year pharmacy student at UW-Madison School of Pharmacy and the President of the Wisconsin Society of Pharmacy Students. I am here today testifying in favor of Senate Bill 126, which clarifies some outdated pharmacy regulations that do not match contemporary pharmacy practice.

As pharmacy professionals, patient safety and well-being is our number one goal. That being said, as a pharmacy intern at CVS within Target Pharmacy, I have had the opportunity to see how these regulations put undue burdens on pharmacy practice with no public safety benefit. For example, the required minimum equipment, including mortars, pestles, and torsion balances, simply sit untouched in a cabinet at our pharmacy. This equipment must be purchased and maintained at a cost to the pharmacy just in the event of an inspection. In fact, as pharmacy students, we are no longer trained in how to use some of this equipment – including torsion scales. So, administrative code mandates that we purchase and maintain equipment that we don't use and don't know how to use.

In addition, through working at multiple locations within CVS at Target Pharmacies, I have had the opportunity to work with many float pharmacists. Having to carry their license to each location is burdensome because they have to remember that they need to take it with them and it is possible that they are at five different locations within a week.

As a pharmacy student who has been actively studying pharmacy regulations in Wisconsin, I have noticed that there are certain regulations that simply do not match how pharmacy practice actually operates. Many of the regulations simply haven't been updated in decades – technology has changed pharmacy practice since these rules were last updated, and it's important that the rules are modernized so that we, as pharmacy professionals, can provide the best patient care possible, rather than focusing our attention on complying with complex, obsolete, or unnecessary requirements.

Thank you again for the opportunity to testify and for your consideration of this legislation.